



Detroit Wayne
Integrated Health Network
707 W. Milwaukee St.
Detroit, MI 48202-2943
Phone: (313) 833-2500
www.dwihn.org

FAX: (313) 833-2156
TDD: (800) 630-1044 RR/TDD: (888) 339-5588

FULL BOARD MEETING
Wednesday, May 20, 2020
707 W. Milwaukee
2nd Floor Conference Room
(Virtual)
1:00 P.M. – 3:00 P.M.
AGENDA

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF THE AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES** – Full Board Meeting – April 15, 2020
- VI. RECEIVE AND FILE** – Approved Finance Committee Minutes – April 1, 2020
Approved Program Compliance Committee Minutes – April 13, 2020
- VII. ANNOUNCEMENTS**
 - A) Authority Announcements
 - B) Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Board Member Appointments – Wayne County
 - 2) Committee Appointments
 - 3) Compliance Training – Thursday, May 28, 2020
 - 4) BA#20-06 (Revised) Michigan Department of Health and Human Services PIHP Contract Amendment – The Healthy Michigan and Substance Use Disorder Community Grant Program
 - 5) BA#20-52 (Revised) Med Supply, Inc. (PPE)
 - 6) BA#20-57 Detroit COVID-19 Virtual Therapy
 - B) Executive Committee
 - 1) Grants Update
 - C) Finance Committee
 - D) Program Compliance Committee
 - E) Recipient Rights Advisory Committee
- IX. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT**
- X. AD HOC COMMITTEE REPORTS**
 - A) Policy/Bylaw Committee

Board of Directors

Bernard Parker, Chairperson
Dorothy Burrell
William T. Riley, III

Dr. Iris Taylor, Vice-Chairperson
Lynne F. Carter, M.D.
Kenya Ruth

Timothy Killeen, Treasurer
Angelo Glenn
Dr. Cynthia Tauog

Dora Brown, Secretary
Kevin McNamara

Willie E. Brooks, Jr., President and CEO



- XI. PROCEDURES FOR OPENING DWIHN FACILITIES (Milwaukee & New Center)**
- XII. PRESENTATION OF THE FY19 FINANCIAL STATEMENT, SINGLE AUDIT, COMPLIANCE EXAM**
- XIII. PRESIDENT AND CEO MONTHLY REPORT**
 - A) Michigan Department of Health and Human Services (MDHHS) Proposed State Integrated Plan (SIP)
 - B) Plan to reduce Medicaid Expenditures
 - C) Integrated Health Plans
 - D) COVID 19 Updates
- XIV. WORK PLAN SUBSTANCE USE DISORDER (SUD) – PREVENTION** *(Program Compliance)*
- XV. WORK PLAN SUBSTANCE USE DISORDER (SUD) – TREATMENT** *(Program Compliance)*
- XVI. UNFINISHED BUSINESS**

Staff Recommendations:

 - A. BA #20-06 (Revision) Michigan Department of Health and Human Services (MDHHS) PIHP FY20 Contract Amendment – The Healthy Michigan Program and Substance Use Disorder Community Grant Program
 - B. BA#20-15 (Revision 2) – Substance Use Disorder (SUD)/Detroit Wayne Integrated Health Network (DWIHN) Prevention Delivery Systems (ENDS) Project FY2020 *(Program Compliance)*
 - C. BA#20-36 (Revised)– Floyd E. Allen & Associates, PC *(Finance)*
 - D. BA#20-52 (Revised) – Med Supply, Inc.
- XVII. NEW BUSINESS**

Staff Recommendations:

 - A. BA#20-50 – State Opioid Response (SOR) Grant FY19 Carry-over Funding *(Program Compliance)*
 - B. BA#20-54 HEDIS/NCQA Professional Consultant Services *(Finance)*
 - C. BA#20-55 –SUD Recovery Home & Mobile Unit COVID-19 *(Program Compliance)*
 - D. BA#20-56 – Summer Youth Employment Program *(Program Compliance)*
 - E. BA#20-57 – Detroit COVID -19 Virtual Therapy Collaborative
- XVIII. REVIEW OF ACTION ITEMS**
- XIX. GOOD & WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS**

Members of the public are welcome to address the Board during this time for no more than two minutes. (The Board Liaison will notify the Chair when the time limit has been met.) Individuals are encouraged to identify themselves and fill out a comment card to leave with the Board Liaison; however, those individuals that do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to the general public and may initiate an inquiry and follow-up will be responded to and may be posted to the website. Feedback will be posted within a reasonable timeframe (information that is HIPAA related or of a confidential nature will not be posted but rather responded to on an individual basis.

XX. ADJOURNMENT



DETROIT WAYNE INTEGRATED HEALTH NETWORK
FULL BOARD MEETING
Meeting Minutes
Virtual Meeting
Wednesday, April 15, 2020
1:00 p.m.

BOARD MEMBERS PRESENT

Bernard Parker, Chair
Dr. Iris Taylor, Vice Chair
Commissioner Tim Killeen, Treasurer
Ghada Abdallah, RPh, Secretary
Dora Brown
Dorothy Burrell

Lynne F. Carter, M.D.
Angelo Glenn
Kevin McNamara
William Riley, III
Kenya Ruth
Dr. Cynthia Tauieg

BOARD MEMBERS EXCUSED: None

GUESTS: None

CALL TO ORDER

The meeting was called to order at 1:01 p.m. by the Board Chair, Mr. Bernard Parker.

ROLL CALL

Roll call was taken by Ms. Dora Brown, Board Secretary and a quorum was established.

APPROVAL OF THE AGENDA

Mr. Parker Board Chair welcomed everyone to the meeting and explained the process for Good and Welfare and Public Comment.

The Chair for a motion on the agenda.

It was moved by Commissioner Killeen and supported by Ms. Brown to accept the agenda as presented. Motion carried unanimously.

MOMENT OF SILENCE

The Board Chair, Mr. Parker called for a moment of silence. Moment of Silence taken.

APPROVAL OF BOARD MINUTES

The Chair called for a motion on the Board minutes of the Full Board meeting of March 31, 2020. **A motion was offered by Ms. Brown and supported by Ms. Burrell approval of the Full Board minutes of March 31, 2020. Motion carried unanimously.**

RECEIVE AND FILE

The Chair called for a motion to Receive and File the approved Finance Committee minutes of March 5, 2020. **A motion was offered by Mr. Glenn and second by Mrs. Brown to "Receive and File" the approved minutes from the Finance Committee meeting of March 5, 2020. The motion carried unanimously.**

The Chair called for a motion to Receive and File the approved Program Compliance Committee minutes. There were no minutes from the Program Compliance Committee meeting. The Program Compliance Committee did not meet during the month of March because of the Executive Order to “Stay Safe, Stay Home” that was in place due to COVID-19.

ANNOUNCEMENTS

Authority Announcements

Mr. Brooks reported the DWHIN offices may open at the end of the month of April, however the opening of the building would have to be in line with the Governor’s orders. We are prepared, there are people in the building every day, we are controlling the number of people allowed to enter the building at any one time and there are safety precautions in place. Deliveries of Personal Protective Equipment (PPE) have been received; there are staff sorting out the materials. Discussion ensued regarding whether or not employees will have to be tested upon re-entry to the building and the precautions that have been taken for employees; i.e. issuing them PPE’s; and practicing safe distancing. There are also policies in place for employees that may be taking care of others that have or had COVID-19.

Board Announcements

Ms. Dora Brown announced that Triumph Church is having a grocery give-away Monday through Friday starting April 6th through the end of May; Monday; Wednesday; Friday are “no touch” pick-up days with groceries being loaded into your car from 10:00 a.m. to 12:00 p.m.; Tuesday and Thursday are delivery days for single moms, Seniors and those that are disabled. Pre-registration is required for both services. There is also a tablet program in place – program begins April 17th and ends May 29th; tablets will be given away every week while supplies last. Pre-registration is also required for the tablets. The Chair noted that he was happy to hear the church has this type of program in place and hoped more churches would start similar programs as the government was not going to be able to resolve all of the problems due to this crisis.

Ms. Burrell announced the National Association of Negro Women and Professional Business Clubs in Detroit typically has an annual baby shower; however, this year due to COVID-19 people can drop off new baby clothes for newborns at Henry Ford Hospital. Individuals that are interested in donating can call Mrs. Burrell or Ms. Patton.

Mr. McNamara announced there are a number of unusual sources that typically do not have money to give-away now having grants available; DTE and United Way Foundation are a few companies/organizations that have monies available.

BOARD COMMITTEE REPORTS

Board Chair Report

Mr. Parker gave a verbal report. He reported the Wayne County Commission met on April 2nd and the reappointments of himself, Ms. Dorothy Burrell and Mr. Kevin McNamara had been confirmed. There is still one remaining vacancy on the board. He reported that in certain circumstances a situation may occur that cannot wait until a committee meets; therefore, the board has a process that allows Exigent approval in which the Chairperson can act on contracts and bring the matter to the board for ratification. There were two contracts that required exigent approval, one was for the purchase of Personal Protective Equipment (PPE) of up to \$100,000 for our Providers that was approved. Mr. Doeh, Chief Operating Officer noted the order had arrived and the distribution of the supplies to Providers has begun.

The next item that required Exigent approval was Intensive Stabilization Crisis Services – Team Wellness. It was reported that Team Wellness currently has a contract with us and this action was to recognize that there would be an increase in the number of individuals served; it was initially thought

this would be a new service; however after review of the contract it was realized the service was in the scope of the contract; hence we do not have to reaffirm the action. D. Lasenby, Chief Clinical Officer thanked Mr. Parker for the approval and noted there are an additional eighteen (18) beds for Crisis Stabilization Services; there is one in Livonia - COPE which has nine beds and one in Detroit which has eighteen beds which allows individuals to go there in a Crisis situation instead of utilizing the Emergency Rooms; an overview of the services was provided; individuals can remain there for up to 24 hours. There was discussion regarding the length of stay; follow-up and how those with COVID-19 are being served. Information has been sent to the Public Health Department; the hospitals and a document noting the available services is being finalized today. It was noted that some of the services will remain in the system after COVID 19; there has been feedback from Providers that are using Tele-medicine for children services and they have noted that Tele-medicine may be a preferred way to provide services.

The Chairperson reported on the CEO Annual Performance Appraisal recommendations. It was reported the next step would be the Board Chair meeting with the CEO to come to agreement with a plan; the score was 4.3 out of 5 so most things people are very satisfied with; the Executive Committee reviewed the Appraisal and there were two recommendations; the CEO would do on-going communications with all board members by providing updates on meetings in Lansing and other Advisory groups that take place in between standing committee meetings so the board does not have to wait for a committee meeting or a Full Board meeting to receive an update and secondly, provide more information on the Finances of the Network; which would be done at the Finance Committee meetings. The CFO does a very good job, however some of the Board members would like to hear from the CEO as well. It was noted that Mr. Brook's has agreed to the recommendations.

The Chairperson reported on the Board Self-Assessment. It was reported the Board rated itself on how well they had performed over the last year; the overall score was high. The main areas that were of concern was board members not having a great understanding of activity that takes place at the Full Board meetings for lack of in-depth knowledge of the subject matter; the Chair was hopeful the emails from the CEO will assist in this area; and secondly more on-going assistance was required than just having the Board orientation. There were two recommendations, which were discussed with the Board Executive Committee to address the concerns; firstly, after orientation new board members and currently serving board members with less than two (2) years, if they desired, would be assigned a mentor; the mentor will assist with historical information and addressing concerns the board member may have or giving them direction on who can provide guidance or information; secondly, when major decisions are made, it was noted that board members that do not sit on the committee where the discussion was held found it difficult to understand the action taken at the Full Board meeting; Administration is being requested to provide more information either at the meetings; closed session meetings or Full Board so they are educating all members of the Board and not just the committee members. The first change will be incorporated by the Board and the second change will be handled by Administration.

The Chair called for a motion on the Board Chair report. **A motion was offered by Mr. Riley, III and supported by Dr. Taueg to accept the Board Chair report. The motion carried unanimously.**

Executive Committee

Mr. Parker gave a verbal report. It was reported the CEO Incentive Compensation recommendation was reviewed at the Executive Committee. This bonus compensation allows monies for the CEO for meeting certain "stretch goals" which are more challenging that the board would like to see accomplished but are more challenging and this year there have been many challenges. A written document was provided for the record which indicated the six areas; goals and compensation amount given for each area. An overview was provided of the goals, it was reported the Crisis Continuum goal

was not met; Staff Trust and Morale goal was met with very high scores; monies were awarded for the category; health plan integration- letters of understanding have been signed; however it is not fully operational – partial monies were awarded for the category; there were no monies awarded for the budget category as the Network has had to utilize its reserves -therefore there was no increase in reserves; the implementation of the schools model – which is the Trails model had to be implemented in twenty (20) schools -this goal was unmet; and the last goal was the integration of SUD services – this goal was met; the total recommendation for the CEO Bonus amount was \$17,500.00. The Chair noted the CEO Incentive Compensation could be approved as part of the report or as a separate item.

A motion was offered by Dr. Taueg and supported by Mr. Glenn to approve the CEO Incentive Compensation in the amount of \$17,500.00. The Chair noted the amount recommended is not an indication that the job was not done as the CEO had outstanding ratings; these particular areas are very difficult and challenging and he was happy the CEO did receive some of the dollars. **The motion carried unanimously.**

Substance Use Disorder Oversight Policy Board -Board Member Appointments. The Chair requested Mr. Angelo Glenn, SUD Oversight Policy Board Chair to report. Mr. Glenn noted the SUD Policy Board was requesting approval for the SUD Oversight Policy Board appointments. The following resolution was read into the record.

Fiscal Year 2019-20 Resolution Number 6 Detroit Wayne Mental Health Authority Board of Directors Reappointments to Detroit Wayne Integrated Health Network Substance Use Disorder Oversight Policy Board

WHEREAS, effective April 1, 2020, the Detroit Wayne Integrated Health Network (“DWIHN”) is hereby, granted three (3) appointments to the Substance Use Disorder (“SUD”) Oversight Policy Board, pursuant to MCL 330.1287, the DWIHN Bylaws and the Intergovernmental Agreement between DWIHN and the County of Wayne, Michigan; and

WHEREAS, the term of three (3) appointments is for three (3) years through March 31, 2023 and the term of one (1) appointment is for two (2) years through March 31, 2022; and

WHEREAS, the SUD Oversight Policy Board recommends, and the DWIHN Board concurs, that the two (2) SUD Oversight Board members whose terms are expiring March 31, 2020, Margo Lane Martin and James Perry, be re-appointed.

Now, THEREFORE, BE IT RESOLVED AS FOLLOWS: RESOLVED, by the DWIHN Board this 15th day of April 2020, that the appointments to the SUD Oversight Policy board are as follows:

Appointments: Margo Lane Martin (of Detroit) for a term of April 1, 2020 through March 31, 2022; James Perry (of Allen Park) for a term of April 1, 2020 through March 31, 2023;

Thomas Fielder (of Belleville) for a term of April 1, 2020, through March 31, 2023 and

Monique Stanton (of Detroit) for a term April 1, 2020 through March 31, 2023.

I HEREBY CERTIFY that the foregoing Resolution was adopted on this Fifteen day of April 2020, by the Board of Directors of the Detroit Wayne Integrated Health Network. Resolution to be signed by Mr. Bernard Parker Board Chairperson, Detroit Wayne Integrated Health Network.

The Chair called for a motion on the Substance Use Disorder Oversight Policy Board Resolution #6 SUD Oversight Policy Board Reappointments. **A motion was offered by Mr. Glenn and supported by Mr. McNamara to approve Fiscal Year 2019-20 Resolution Number 6 Detroit Wayne Mental Health Authority Board of Directors Reappointments to Detroit Wayne Integrated Health Network Substance Use Disorder Oversight Policy Board. The motion carried unanimously.**

The Board Chair reported the Executive Committee received a presentation on the Strategic Plan Advocacy Pillar. A written report was provided in the agenda packet and on DirectorPoint. He noted

there were twelve (12) goals under this Pillar; overall 52% of the goals have been met and Ms. B. Blackwell is lead on this Pillar; there were no concerns raised regarding the report at the Board Executive Committee Meeting.

The Chair called for a motion on the Executive Committee Report. **A motion was offered by Mr. Riley, III and supported by Ms. Ruth to accept the Board Executive Committee report. The motion carried unanimously.**

Finance Committee

Commissioner Killeen, Chair of the Finance Committee reported the Finance Committee met virtually on Wednesday, April 1st 2020; there were no board actions moved to Full Board; the finance report and statements were accepted at the meeting and the IT and Finance Strategic Plan Pillars were reviewed and accepted. An overview of the highlights of the CFO monthly Finance report was provided – it was noted the Michigan Department of Health and Human Services (MDHHS) acknowledged the Funding model from Milliman was not proper and the assumptions were not sound thus new rates will be developed as of April 1st; a letter was sent to Providers that noted a 30 day delay would be placed on the 7% rate reductions. The audit is complete and will be taken at the next Finance Committee; there were no findings. MDHHS formally approved our ACT PMPM payment methodology. In addition, MDHHS provided a formal approval of the use of General Fund to cover Medicaid costs for the fiscal year ended September 30, 2019; initial request was made in August 2019. On February 21, 2020, DWIHN submitted a formal request to Robert Gordon and Elizabeth Hertel with a copy to Governor Whitmer requesting MDHHS provide an Autism cost settlement for fiscal years September 30, 2018 and 2019 totaling \$21 million. An email was received acknowledging receipt and a response will be forthcoming. DWIHN has not received a response as of the date of the report. MDHHS continued to put the death recoupment on hold until further notice. CFO Durant provided an update and noted there was no additional information received from MDHHS regarding the Autism settlement. It appears the amount of the retro payment is shrinking from the \$120 million based on the amount that was distributed at the end of April. An overview was provided on the Milliman study.

The Chair called for a motion on the Finance Committee report. There was no further discussion. **A motion was offered by Ms. Brown and supported by Mr. McNamara to accept the Finance Committee report. The motion unanimously.**

Program Compliance Committee

Dr. Taylor, Chair of the Program Compliance Committee reported verbally the Program Compliance Committee met virtually on Wednesday, April 8th 2020 the report and minutes will be posted on the website. A report was received on the Trails program; a report was given by the Corporate Compliance Officer which indicated the contract termination process which addressed the termination of provider contracts for cause has been suspended pending the resolution of the current state of emergency; in the OIG 1st Quarterly Report Corporate Compliance inadvertently indicated that two of the matters described on the Quarterly Report were the result of fraud. Because of this error, the OIG requested a corrective action plan. The corrective action plan was submitted and accepted by the OIG. No further action is required and lastly in consultation with the Attorney General – Corporate Compliance and Quality Improvement are collaborating with a Special Investigator from the Attorney General's Office regarding the investigation of the billing practices of a DWIHN provider. The Attorney General's Office has provided information to support Quality Improvement's investigation. There were two reports being submitted for approval – The FY 2019 Annual Utilization Management Program Evaluation and the FY 2019 Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation. The Customer Pillar –

was discussed; there are fourteen (14) goals under this Pillar and they are at 28% completion. The Chief Clinical Officer, D. Lasenby gave an update on the Network's response to COVID-19; including the hotline number and Crisis Stabilization. Board Action #20-06 (Revision 3) Michigan Department of Health and Human Services (MDHHS) PIHP Contract amendment was moved to Full Board for approval.

The Chair called for a motion on the Program Compliance Committee Report. There was no further discussion. **A motion was offered by Mr. Glenn and supported by Mr. Riley, III to accept the Program Compliance Committee Report. The motion carried unanimously.**

Recipient Rights Advisory Committee

Mr. Riley, III Chair of the Recipient Rights Advisory Committee reported. A written summary report was provided for the record. The Recipient Rights Advisory Committee met on March 2, 2020. The new Director of Recipient Rights, Dr. Polly McCalister and a new investigator Matthew Schneider was introduced. The position of Clerical Support remains vacant. All new staff will attend the Basic Skills training which was scheduled to be held in April in Muskegon, however due to the Coronavirus pandemic the training will be conducted via Zoom on April 21-24, 2020.

Currently the Office of Recipient Rights have received and assigned, 528 complaints. Of the 528 complaints 238 investigations have been closed and 290 remain open. RRAC has received five (5) applications of individuals interested in serving on the RRAC. As of today, all five have been approved and will be attending our next meeting on May 5, 2020. Deputy Director, Mignon Strong provided an overview of Incident Reports. She reported the ORR reviews all the incident reports however, our office only reviews Incident Reports for Recipient Rights violations.

Mr. Riley, III, Chair noted this meeting took place prior to the Coronavirus pandemic however, the RRAC and the ORR staff are dedicated to ensuring the rights of our participants are protected through this difficult time.

The Chair called for a motion on the Recipient Rights Advisory Committee Report. **A motion was offered by Commissioner Killeen and supported by Mr. Glenn to accept the Recipient Rights Advisory Committee report.** There was no further discussion. **The motion carried unanimously.**

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Mr. A. Glenn, SUD Chair reported that the Substance Use Disorder Oversight Policy Board is scheduled to meet virtually on Monday, April 20th and a written report will be distributed following the meeting.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

Dr. Taueg, Chair reported the Policy Committee did not meet in the month of April.

PRESIDENT AND CEO MONTHLY REPORT

Mr. Brooks reported. A written report was provided for the record. The CEO reported on activities of State of Michigan given the COVID-19 situation; it was noted the government released a \$2.2 trillion dollar federal Stimulus Package that would assist large and small employers, governmental entities, and non-profit organizations. The State of Michigan is slated for \$5 billion dollars for mental health and health care; PIHP's throughout the State are seeking some type of relief to purchase personal protective equipment (PPE) and hazard pay to stabilize the Provider Network and make up for some of the extra functions that are occurring throughout this process, however, the State has only accounted for \$5 million dollars throughout the entire State to actually combat the pandemic which

is much lower than expected. The \$5 million dollars that was received will come without the requirement of the General Fund match so it is a substantial amount. He will be meeting with the State tomorrow and he has met with them yesterday. The State collects roughly \$11 million dollars in General Fund; we have roughly a \$60 million-dollar budget and much of the money comes from Federal dollars; it was his hope to have a little more added to the COVID-19 response budget. There are a number of deficits that will have to be met in the midst of the pandemic and there will be some lost revenue that will have to be addressed; both Wayne County and the City of Detroit have deficits; it was noted that Medicaid may be cut as much as 20% for next year. The State is predicting a 30-40% reduction in General Fund next year which is roughly \$3 billion dollars in response to COVID-19 loss tax revenue.

The amount of the \$120 million dollars in back payments now appears to be in the low \$90's; there are three items that he will be discussing on the call with the State –follow up on the Autism cost settlement; address eliminating liability with death audit and requesting \$50 million dollars for COVID-19 relief for Wayne County based on the severity of impact and needs - which is about 6-7% of our annual budget.

It was noted the Diversion Council met via conference call and an email was sent to the board outlining the programs and changes that have been made in the jails and around the state; jail population has been drastically reduced, at one point there were over 3,000 people in the jails with COVID-19 the number is now under 1,000 people who are being housed in the jail.

The Wayne County Diversion Council met yesterday; it was reported that discussions took place regarding the impact of COVID-19; the uniqueness of the challenges we face; and Wayne County being an epicenter of COVID -19.

It was noted the Specialty Integrated Plan (SIP) has been placed on hold and has not been eliminated. A meeting was held with the Community Health Association of Michigan and he does not think MDHHS will move away from the SIP's mainly because of the budget challenges and they (State) will be looking at ways to save money; there will be more pressure on DWIHN to combine resources with the health plans. He hopes the State will not make any rash decisions and it is important to stay on top of this subject. He also noted that it is his hope that we receive some of the makeup monies for the seven months that have already occurred within this fiscal year; a lot of the funding that is coming in will help make up for some of the deficit spending.

The General Fund issue, in which we are losing \$4.5 million dollars still exists and this will also be mentioned on the call. It was noted that Michigan has over 20,000 COVID-19 cases and we have been the leaders in the number of deaths; much has been reported regarding its impact on minorities, however there is work being done to reduce the numbers.

It was reported that communications have been sent to Providers regarding the new technology that is in use and how life will look different after COVID-19; we will be taking advantage of telehealth as well as some of the different crisis settings that are in use and we will have to familiarize ourselves with the use of personal protective equipment.

Discussion ensued regarding the request of monies for COVID-19 and the General Fund. The Chair called for a motion on the President and CEO Report.

A motion was made by Commissioner Killeen and supported by Mr. Glenn to accept the President and CEO Report. The motion carried unanimously.

FY 2019 ANNUAL UTILIZATION MANAGEMENT PROGRAM EVALUATION

The Chair noted the written FY2019 Annual Utilization Management Program Evaluation was included in the Full Board Agenda packet and had been vetted by the Program Compliance Committee. The Chair called for a motion on the FY2019 Annual Utilization Management Program Evaluation.

A motion was made by Mr. Riley, III and supported by Dr. Taylor to accept the FY 2019 Annual Utilization Management Program Evaluation. There was no further discussion. **The motion carried unanimously.**

FY 2019 QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PLAN (QAPIP) ANNUAL EVALUATION

The Chair noted the written FY2019 Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation was included in the Full Board Agenda packet and had been vetted by the Program Compliance Committee. The Chair called for a motion on the FY2019 Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation.

A motion was made by Dr. Taylor and supported by Ms. Ruth to accept the FY 2019 Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation. There was no further discussion. **The motion carried unanimously.**

UNFINISHED BUSINESS

Staff Recommendations:

BA#20-06 (Revision 3) – Michigan Department of Health and Human Services PIHP FY 2019/2020 Contract Amendment (*Program Compliance*) Detroit Wayne Integrated Health Network received amended language from MDHHS to the current PIHP contract for FY2020. The Chair called for a motion.

A motion was made by Dr. Taylor and second by Mr. Riley, III to approve BA#20-06 (Revision 3) There was no discussion. **The motion carried unanimously.**

NEW BUSINESS

Staff Recommendations:

BA #20-52 - Medsupply Corporation, Inc. (*Board Chair Exigent Approval*) This Board Action is requesting approval to purchase Personal Protection Equipment (PPE) for Providers during the COVID -19 Pandemic. Board Action received exigent approval. Items purchased were gloves, masks, hand sanitizers; gowns; wipes; KN95 masks and soaps. Chair called for a motion. **A motion was made by Dr. Taueg and second by Mr. Glenn.** It was noted a distribution process was in place today for Providers to pick up supplies. **The motion carried unanimously.**

FOLLOW UP ON ACTION ITEMS - None

GOOD AND WELFARE/PUBLIC COMMENT

Mr. Teferi Brent, Trent Coalition of Peace (1943), He thanked the Board for work that has been done and has spoken with Chief Dunlap regarding individuals within the jails. His concerns are with the testing in the jails and if there is the possibility to reallocate funding for testing in the jails.

There was no response from caller 3347.

Written comments for Good and Welfare/Public Comment

6749 – Individual would greatly appreciate Personal Protective Equipment (PPE) for individuals at Residential facilities.

4602 – Request for safety supplies for Direct Care Workers during COVID-19; clients returning from hospital post COVID-19 and contract availability within community living services.

The Chair noted these are challenging times; social distancing will become a way of life and budgets will be tighter; however, it is important that we remain vigilant and continue to serve.

Mr. Brooks thanked the Board for his review and CEO Incentive Compensation; he noted that he is looking forward to the challenges in the upcoming year and is looking forward to working with legislatures; political leaders; public and Providers as we try to meet some of the challenges in the future. He closed with thanking the Board for their continued commitment.

ADJOURNMENT

There being no further business, the Chair called for a motion to adjourn. **A motion was offered by Dr. Taylor and seconded by Mr. Riley, III to adjourn. The motion carried unanimously and the meeting was adjourned at 2:32 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

APRIL 1, 2020

1:00 P.M.

**VIRTUAL
CONFERENCE(BLUEJEANS)**

MEETING CALLED BY	I. Commissioner Tim Killeen, Chair called the meeting to order at 1:03 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Commissioner Tim Killeen, Chair – Finance Committee
NOTE TAKER	Nicole Smith, Management Assistant
ATTENDEES	<p>Finance Committee Members Present: Commissioner Tim Killeen, Chair Ms. Dora Brown-Richards Dr. Cynthia Taueg Ms. Dorothy Burrell</p> <p>Committee Members Excused: None</p> <p>Board Members Present: Bernard Parker, Chairperson, Mr. K. McNamara</p> <p>Board Members Excused: None</p> <p>Staff: Stacie Durant, CFO; Willie Brooks, CEO; Andrea Smith; E. Reynolds; E. Doeh; M. Singla; D. Brown</p> <p>Guests: None</p>

AGENDA TOPICS

II. Roll Call Ms. L. Blackshire, Board Liaison

DISCUSSION	Roll Call was taken by Ms. D. Burrell and a quorum was present.
<p>III. Committee Member Remarks There were no committee member remarks. The Chair gave an overview of how the meeting and Good and Welfare/Public Comment would be handled and the committee members who constituted quorum.</p> <p>IV. Approval of Agenda The Chair, Commissioner Killeen called for a motion on the agenda. Motion: It was moved by Dr. Taueg and supported by Ms. Brown approval of the agenda. Motion carried.</p> <p>V. Items Follow-up Item A: Update Operational Efficiency Plan (S. Durant) Pursuant to the adoption of the fiscal year ended September 30, 2020 Budget, management outlined several operational opportunities to better manage the system and reduce costs. The following details the changes and status of each area: There were no updates on Substance Use Disorder; Home Help; Utilization Guidelines; and Autism. It was reported for Shared Living Arrangements (S. Durant and M. Singla lead)</p>	

that ten (10) Payroll audits were completed. The next step is to setup individual provider meetings.

VI. Approval of the Meeting Minutes

The Chair called for motion on the minutes from Finance Committee meeting of Wednesday, March 4, 2020. **Motion:** It was moved by Ms. Brown and supported by Dr. Tauog approval of the minutes for Wednesday, March 4, 2020. **Motion carried.**

VII. Strategic Plan IT/Finance Pillar

There are two (2) Pillars that are under the governance of the Finance Committee: Finance and Workforce as well as the goals and objectives of Information Technology. A written document was provided for the record.

D. Brown, DCFO and M. Singla, CIO reporting. It was reported that overall, the departments are at 29% completion of their pillar goals on the 2019-2021 Strategic Plan. There are three (3) high-level goals, that range from 0%-45% completion.

The IT update indicates 50% completion in Developing and Implementing an Automated Provider Score Card and currently 32% completion in collaboration with Finance in developing financial forecasting model.

Workforce is under the leadership of B. Blackwell, Chief of Staff and overall is at 1% completion on this pillar as we have just begun working to address the goals within the pillar for the three-year Strategic Plan. There are two (2) goals under this pillar; “Create Happy, Healthy, and Engaged Workforce” by December 31, 2021 and “Create a Learning Health System” by December 31, 2020.

IT is assisting in revamping the training portal to cover the holistic care for the individual, and the current completion rate is 15% for this goal.

D. Brown, DCFO gave a high level overview of the Finance goals which are to “Ensure Facilities Management” by December 31, 2029 which are at 45% completion; “Ensure Fiscal Accountability Internally and of Partners by December, 2020 which are at 0% complete and “Maximize Efficiencies/Control Cost” by December, 2021 and are at 41% complete.

M. Singla, CIO gave an overview of all of the goals under the IT Pillar and noted that Information Technology is the underlying foundation of all of the Pillars. Discussion ensued regarding the employee laptop distribution and exchange of information as it pertains to the people we serve who may have been part of the jail population.

The Chair called for a motion to Receive and File the Strategic Plan Finance/IT Pillar. **Motion:** It was moved by Ms. Brown and supported by Dr. Tauog to Receive and File the Strategic Plan Finance/IT Pillar. **Motion carried.**

VIII. Presentation of the Monthly Finance Report

S. Durant, CFO presented the Monthly Finance report. A written report was provided for the record.

It was reported that most Finance staff have the ability to work from home and measures have been put in place to ensure providers are paid in accordance with the payment schedule on our website. Most of our processes and procedures are electronic which allow us to continue business as usual.

Mr. Brooks, CEO and S. Durant, CFO attended MDHHS meeting whereby the department acknowledged that the funding model did not properly distribute the funding per the Milliman actuarial methodology and that the actuarially assumptions were not sound and new rates will be developed effective April 1, 2020 for the 12-month period. DWIHN will request upfront lump sum reimbursement payment for months October 2019 – March 2020, estimated 12 million. Chair request CFO to notify the Board Chair once check from the state is received, and of the amount. (Action)

DWIHN issued the attached letter to the provider network notifying them of a 7% rate reduction with certain exclusions effective May 1, 2020. In light of the COVID-19 pandemic, a letter was issued to the network notifying the system of a 30-day delay in the rate reduction. Mr. Parker request report/information on the 7% rate reduction effect on providers within 3 -4 months of reduction going into effect. (Action)

Plante Moran has completed our financial statement and single audit for the fiscal year ended September 30, 2019 that resulted in no findings. It should be noted DWIHN did not meet its debt covenant however Flagstar waived the violation. The violation was to the Debt Covenant. No fee incurred for violation. Commissioner Killeen requested notification of quarterly reports sent to Flagstar moving forward and Mr. McNamara request Flagstar bank covenant amount to be included on the monthly financial report. (Action)

MDHHS formally approved our ACT PMPM payment methodology. In addition, MDHHS finally provided a formal approval of the use of GF to cover Medicaid costs for the fiscal year ended September 30, 2019; initial request was made in August 2019.

On February 21, 2020, DWIHN submitted a formal request to Robert Gordon and Elizabeth Hertel (copied Governor Whitmore) requesting MDHHS provide an Autism cost settlement for fiscal years September 30, 2018 and 2019 totaling \$21 million. Received an email acknowledging receipt and a response will be forthcoming. **DWIHN has not received a response as of the date of the report.**

MDHHS continued to put death recoupment on hold until further notice.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; actual claims paid through February 2020 was approximately \$253.3 million however estimated costs during the same period was approximately \$289.6 million; it was noted that Due from Other governments – represents amounts owed from the State of Michigan and Federal Government for various grants and contracts. Cash flow statements will be provided next month.

The Chair called for a recommendation from the committee on the Monthly Finance Report. Recommendation: The Committee recommended that the Monthly Finance Report be accepted. The Committee accepted the recommendation.

IX. Unfinished Business – Staff Recommendations: There was no unfinished business presented.

X. New Business – Staff Recommendations: There was no new business presented.

<p>XI. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement.</p> <p>Steven Boisvenu, Provider, addressed the Committee regarding his Adult Foster Care Home. He has consumers whom have tested positive for COVID-19. He requested information on how to quarantine within the residential home, as well as the need for Personal Protection Equipment (PPE).</p> <p>XIV. Adjournment – There being no further business; the Chair called for a motion to adjourn. Motion: Moved by Mr. Parker and supported by Dr. Taueg to adjourn the meeting. Motion carried.</p> <p>The meeting adjourned at 3:12p.m.</p>	
<p>FOLLOW-UP ITEMS</p>	<ul style="list-style-type: none"> A. Provide an update on the impact of the 7% reduction on the Network and Providers once implemented. (S. Durant) B. Update on Operational Efficiency Plan (S. Durant) C. Provide a quantitative report on the number of Providers. D. Information request by the Chair, to determine if the state rules/guidelines are the same for both the private health plans and the PIHPs. (T. Forman)

PROGRAM COMPLIANCE COMMITTEE

MINUTES

APRIL 8, 2020

1:00 P.M.

VIRTUAL MEETING

MEETING CALLED BY	I. Dr. Iris Taylor, Program Compliance Chair at 1:00 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Dr. Iris Taylor, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	Committee Members: Dr. Lynne Carter; Angelo Glenn; Chief William Riley, III; Dr. Cynthia Tauveg and Dr. Iris Taylor Board Member(s) Present: Bernard Parker, Board Chair Staff: Brooke Blackwell; Willie Brooks; Kimberly Flowers; Bernard Hooper; Dr. Margaret Hudson-Collins; Dana Lasenby; Callana Ollie; Crystal Palmer; April Siebert; and Michele Vasconcellos

AGENDA TOPICS

II. Moment of Silence

DISCUSSION	The Chair called for a moment of silence.
CONCLUSIONS	Moment of silence was taken.

III. Roll Call

DISCUSSION	The Chair called for a roll call.
CONCLUSIONS	Roll call was taken by Board Liaison, Lillian Blackshire. There was a quorum.

IV. Approval of the Agenda

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the agenda. Motion: It was moved Chief Riley and supported by Mr. Glenn to approve the agenda. Dr. Taylor asked if there were any changes/modifications to the agenda. There were no changes/modifications to the agenda. Motion carried.
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V. Follow-Up Items from Previous Meetings

DISCUSSION/ CONCLUSIONS	<p>A. Provide an update on the PIHP CEO's and Directors' meeting with the Michigan Department of Health and Human Services (Mr. Brooks) – Mr. Brooks informed the committee that the State reported to the PIHPs that there was a \$120 million shortfall in the budget. Based on some of the mechanical errors, they were initially told they would receive \$65 million but received a correction that they would only receive \$50 million. The State is waiting on the Milliman report to know the exact amount that they would receive. They are also looking at hazard funding specifically for COVID-19 for Wayne County since it is in the high risk, high hazard zone. Wayne County is the leading county in Michigan with over 9,000 confirmed cases and over 400 deaths. There are 19,000 confirmed cases in Michigan with over 900 deaths. Michigan is number three on the chart of states with COVID-10 cases. They are looking into providing more Personal Protection Equipment (PPE) not only for hospitals and workers but for people who have to go out. There are also numerous changes to the billing process that the State is allowing during this pandemic. Mr. Brooks will be presenting a detailed Directors' report next week at the Executive Committee meeting. Discussion ensued.</p> <p>B. Provide an update of the impact the new Mental Health hospitals in Oxford and Dearborn will have on DWIHN – <i>Referred from Finance Committee meeting on February 5, 2020 – (Written update provided to committee)</i> – The Chair requested that this follow-up item be deferred to next month's meeting with written update provided. (Action)</p> <p>C. TRAILS Program – Provide U of M report on Program; total number of schools the Model has been fully implemented in and information on Train the Trainer for TRAILS Model – <i>(Written update provided to committee)</i> - Crystal Palmer, Director of Children's Initiatives submitted and gave an update on the TRAILS Program. Mrs. Palmer informed the committee that she and Ebony Reynolds, Clinical Officer met with University of Michigan (U of M) on February 26th regarding the TRAILS project. There is a three-step training process for the TRAILS program (Clinical Training, Consultation and Coach Protocol). There are 15 clinicians who successfully completed consultation and final training. Per U of M, there are 12 TRAILS coaches in 12 schools (schools listed in the report). U of M also reported that they did not have the materials to train elementary school students K-3 and were working on developing those materials. Discussion ensued. The committee requested a breakdown of schools that are not eligible for the TRAILS model and provide information on whether or not the model will be implemented into all 70 schools by the school year. (Action)</p>
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VI. Approval of Meeting Minutes

DISCUSSION/ CONCLUSIONS	There were no minutes to review for approval.
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VII. Reports

DISCUSSION/ CONCLUSIONS	<p>A. Corporate Compliance Report – Bernard Hooper, Director of Corporate Compliance submitted and gave an update on the Corporate Compliance report. Mr. Hooper reported that Corporate Compliance has drafted a process for termination of provider contracts for cause but the process has been suspended pending the resolution of the current state of emergency. Corporate Compliance and Quality Improvement have been collaborating with the Attorney General’s office regarding the investigation of the billing practices of a DWIHN provider and information has been provided to support Quality Improvement’s investigation. Corporate Compliance submitted corrective action plan to the OIG’s office because they inadvertently indicated that two of the matters described in the OIG’s First Quarterly report were the result of fraud. No further action was required. Discussion ensued. The committee requested that Corporate Compliance share the drafted process for termination of provider contracts for cause with the Policy Committee to make sure it’s in alignment with Board Policy. (Action) The Chair called for a motion to accept the Corporate Compliance report. Motion: It was moved by Dr. Taueg and supported by Mr. Parker to accept the Corporate Compliance report. Dr. Taylor opened the floor for further discussion. There was no further discussion. Motion carried.</p> <p>B. Media and Community Outreach – Tiffany Devon, Director of Communications submitted a written update on the Media and Community Outreach report for review and acceptance. The Chair called for a motion to verbally accept the Media and Community Outreach report. Motion: It was moved by Mr. Parker and supported by Mr. Glenn for a verbal acceptance of the Media and Community Outreach report. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.</p>
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VIII. FY 2019 Annual Utilization Management Program Evaluation – Provide Corrective Action Plan for non-compliant areas

DISCUSSION/ CONCLUSIONS	<p>Kimberly Flowers, Provider Network Clinical Officer submitted and presented the Corrective Action Plan for non-compliant areas of the FY 2019 Annual Utilization Management Program Evaluation. Mrs. Flowers informed the committee of the opportunities for improvement for each area of the pillar that had non-compliance: Customer, Access, Finance and Quality. Mrs. Flowers also informed the committee of the planned intervention for FY 2020 to bring into compliance the non-compliant areas. The Chair called for a motion to accept the Corrective Action Plan for the FY 2019 Annual Utilization Management Program Evaluation and move to Full Board for approval. Motion: It was moved by Chief Riley and supported by Mr. Glenn to accept the Corrective Action Plan for the FY 2019 Annual Utilization Management Program Evaluation and move to Full Board for approval. Dr. Taylor opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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IX. Quality Review(s)

DISCUSSION/ CONCLUSIONS	<p>A. Quality Improvement QAPIP Work Plan Crosswalk with Strategic Plan Update – April Siebert, Director of Quality Improvement submitted and gave her report on the Quality Improvement QAPIP Work Plan Crosswalk with Strategic Plan. Ms. Siebert reported the QAPIP Work Plan is the vehicle for reporting status updates of quality activities and progress toward goals and objectives identified for FY 2020. The Work Plan is consistent with the Strategic Plan and embraces the pillars, philosophy and methodology of continuous quality improvement. The Michigan Mission Based Performance Indicators (MMBPI) from the work plan has been integrated into the tracking of the Strategic Plan. The first quarter was submitted to MDHHS on April 7, 2020. There were certain areas of DWIHN’s data reporting that currently does not meet the 95% or 15% threshold for the Performance Indicators:</p> <ol style="list-style-type: none"> 1. Indicator 4b – The percentage of discharges from a SUD Detox unit who are seen for follow-up care within 7 days (93.97%) the threshold if 95% or greater; and 2. Indicator 10 (Recidivism) – The percentage of readmissions to an inpatient psychiatric unit within 30 days of discharge from a psychiatric inpatient unit (19.46%), the threshold is 15% or less. <p>Quality Improvement continues to work with providers to implement interventions, initiatives and strategies to improve the percentage for the Performance Indicators. The Chair called for a motion to accept the Quality Improvement QAPIP Work Plan Crosswalk with Strategic Plan Update.</p> <p>Motion: It was moved by Mr. Glenn and supported by Chief Riley to accept the Quality Improvement QAPIP Work Plan Crosswalk with Strategic Plan update. Dr. Taylor opened the floor for discussion. There was no discussion.</p> <p>Motion carried.</p>
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X. Strategic Plan – Customer Pillar

DISCUSSION/ CONCLUSIONS	<p>Michele Vasconcellos, Director of Customer Service submitted a full report and gave highlights of her report on the Strategic Plan-Customer Pillar. Ms. Vasconcellos reported that Strategic Plan-Customer Pillar is to reinforce DWIHN’s commitment to providing an excellent experience in services to our customers. This pillar involves collaborative efforts of Customer Service, IT, Network Management, Credentialing, Self-Determination and Utilization Management. There are three main goals:</p> <ol style="list-style-type: none"> 1. Enhance the Provider Experience – Targeted deadline - 12/31/21 – 47% completion; 2. Ensure Inclusion and Choice for Members – Targeted deadline - 9/30/20 – 46% completion; and 3. Improve Person’s Experience of Care and Health Outcomes – Targeted deadline - 12/31/21 – 21% completion. <p>The committee requested a copy of the executive summary be provided to the committee. (Action) The Chair called for a motion to accept the Strategic Plan-Customer Pillar report. Motion: It was moved by Chief Riley and supported by Mr. Glenn to accept the Strategic Plan-Customer Pillar report. Dr. Taylor opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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XI. Chief Clinical Officer’s (CCO) Report

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Dana Lasenby, Chief Clinical Officer submitted a full report and gave highlights on the Chief Clinical Officer's report. Mrs. Lasenby reported that during the COVID-19 pandemic, the majority of DWIHN's providers have shifted to telehealth servicing instead of face-to-face services. They are only doing face-to-face services for urgent and emergent cases. In making sure our customers can still receive the services that they need during the COVID-19 pandemic, the following programs have been developed, in-process and implemented:</p> <ul style="list-style-type: none"> A. COVID-19 Recovery Housing/Recovery Support Services – Providers may provide up to 14 days housing/recovery support services for individuals that are experiencing COVID-19 symptoms and tested positive. Quality Behavioral Health and the Detroit Rescue Mission have been identified as providers providing these services and are located in the Detroit area. Discussion ensued. B. COVID-19 Urgent Behavioral Health Urgent Care Sites – The available services will include same-day access services for assessment/intake, crisis services for existing DWIHN members, psychiatric evaluations, medication reviews, crisis stabilization, Peer Support Specialists, nursing assessments, medication injections and non-ER transport. The intent is to offer accessible alternatives to meet the unique needs of the individuals we serve and decrease emergency department experiences and potential COVID-19 exposure. They must have Medicaid, Medicare, General Fund, or most commercial insurance to be eligible. The providers that have been identified for providing these services are Community Care Services, Northeast Integrated Health and The Children's Center. Discussion ensued. C. COVID-19 Pre-Placement Housing – Pursuant to the FY 19/20 Clinical Residential Provider Agreement with DWIHN this allows for the provision of COVID-19 Pre-Placement Housing. It will provide our customers with immediate and comprehensive housing and supportive services who meet DWIHN's admission criteria and eligibility. Pre-placement Housing provides funding to residential providers to provide short-term housing for a maximum stay of 14 days, meals, transportation and supportive services that promote stable housing and increase self-sufficiency. The Credentialing Unit is provisionally impaneling the residential providers. Forever Care Home in Taylor, Michigan has been identified as one of the providers providing these services. Additional providers will be identified. Discussion ensued. D. COVID-19 Intensive Crisis Stabilization Services – DWIHN requested and MDHHS granted provisional approval of Team Wellness Center's application to perform Intensive Crisis Stabilization Services. It is structured treatment and support activities provided by a multidisciplinary team and designed to provide a short-term alternative to inpatient psychiatric services. Community Outreach for Psychiatric Emergencies (COPE) is also MDHHS approved to provide services. Discussion ensued. <p>Providers that can prove that they are equipped and ready to assist (beds, PPE and staffing) will be reviewed and considered for providing services during the COVID019 pandemic. Providers have accepted their current rate through the extension of their contract but DWIHN will also be looking into providing hazard pay for providers that are assisting during the COVID-19 pandemic. The Chair called for a motion to accept the Chief Clinical Officer's report. Motion: It was moved by Chief Riley and supported by Mr. Parker to accept the Chief Clinical Officer's Report. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.</p>
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XII. Unfinished Business

DISCUSSION/ CONCLUSIONS	A. BA #20-06 (Revision 2) – Michigan Department of Health and Human Services (MDHHS) - FY 2020 PIHP Contract Amendment 3 – The Chair called for a motion on BA #20-06 (Revision 2). Motion: It was moved by Mr. Parker and supported by Chief Riley to move BA #20-06 to Full Board for approval. Detroit Wayne Integrated Health Network received amended language from Michigan Department of Health and Human Services (MDHHS) to the current Prepaid Inpatient Health Plan (PIHP) contract for FY 2020. The amendment incorporates changes to the boiler plate contract language and related contract amendments. The amount of the contract is \$747,944,461.00 and the proposed contract term and period of the amendment (October 1, 2019 – September 30, 2020) will remain the same. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.
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XIII. New Business: Staff Recommendation(s)

DISCUSSION/ CONCLUSIONS	There were no New Business: Staff Recommendation(s) for review and approval.
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XIV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	The Chair asked if there were any Good and Welfare/Public Comment. A virtual caller asked if Direct Care Workers would be considered for the COVID-19 hazard pay. Brooke Blackwell, Chief of State stated she would contact the caller and respond to the question.
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ACTION ITEMS	Responsible Person	Due Date
1. Follow-Up Items from Previous Meeting: A. Provide an update of the impact the new Mental Health hospitals in Oxford and Dearborn will have on DWIHN – <i>Referred from Finance Committee meeting on February 5, 2020</i> B. TRAILS Program – Provide a breakdown of schools that is not eligible for the TRAILS model and information on whether or not the model will be implemented into all 70 schools by the school year	Dana Lasenby Crystal Palmer	May 13, 2020
2. Corporate Compliance Report – Provide drafted process for termination of provider contracts for cause with the Policy Committee to make sure it's in alignment with Board Policy.	Bernard Hooper	TBA
3. Strategic Plan – Customer Pillar – Provide a copy of the executive summary to the committee.	Sonya Davis/Lillian Blackshire	COMPLETED

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Mr. Parker and supported by Chief Riley to adjourn the meeting. **Motion carried.**

ADJOURNED: 2:40 p.m.

NEXT MEETING: Wednesday, May 13, 2020 at 1:00 p.m. (*Virtual Meeting*)



Board of Director's Report
Willie E. Brooks, Jr.
May 2020

Jail Diversion

Jail Diversion Projects

Updates on the two (2) Jail Diversion projects that I represent.

Committee 1: Governor's Mental Health Diversion Council

I received notification of reappointed to the Governor's Mental Health Diversion Council for a second four (4) year term effective February 1, 2020.

Action Plan for Upcoming Year

- Strengthen and expand preemptive diversion by fostering community support services.
- Strengthen and expand law enforcement diversion for individuals with mental illness and co-occurring conditions upon initial encounter.
- Develop strategies to deliver treatment and divert individuals prior to first court appearance.
- Develop strategies to deliver treatment and divert individuals after first court appearance up to and including disposition.
- Improve re-entry outcomes, by enhancing pre-release planning, individualized connections and follow up supports between institutions and community services
- Promote and implement a continuum of care that enables the individual to maintain long-term community stability to reduce recidivism.
- Oversight and implementation of statewide pilot initiatives and administering best practices through data collected.
- Identify statutory, policy and fiscal barriers to achieving diversion goals.
- Identify specific best practices at each intercept point to create a statewide master model.
- Follow up statewide knowledge sharing conference to share Diversion Council findings and promote technical assistance from the Center for Behavioral Health and Justice

The Diversion Committee discussed telehealth policies with the courts and how many of the court hearings are now being performed via video conference. It is expected that the process of video conference will continue in the extended future as many judges are adjusting to the process.

The Diversion Committee addressed the impacts of COVID-19 to inmates throughout the state of Michigan. COVID-19 testing is increasing in the correction system with increases in positive test results.

Wayne County currently have 800 inmates, down from +1400 pre-COVID-19. Out of the 800 inmates in Wayne County, 766 inmates were tested, 34 refused testing, and so far 83 of those inmates tested positive with COVID-19.

Ten additional inmates were released bringing the total incarcerated to 790, with 941 inmates out on tether.

Committee 2: Wayne County Diversion Council (WCDC)

Chief Wayne County Probate Court Judge Freddie G. Burton, Jr. heads this program. The Wayne County Diversion Council (WCDC) is dedicated to diverting non-violent people with Mental Illness and Co-occurring Mental Illness and Substance Abuse (CMISA) from the criminal legal system and into the appropriate level of treatment.

Members:

Hon. Nancy Blount (Chief Judge, 36th District Court), Laura McLaughlin (Special Projects 36thDC), Hon. Freddie G Burton, Jr. (Chief Wayne County Probate Court Judge), Hon. Timothy Kenny (Chief Judge, 3rd Circuit Court), Andrea Cole (CEO Flinn Foundation), Dean Sheryl Kubiak (Center for Behavioral Health and Justice at WSU) Scott Smith (Center for Behavioral Health and Justice at WSU), Nanci Hambrick (Center for Behavioral Health and Justice at WSU), Stacey Campbell (Center for Behavioral Health and Justice at WSU), Sojourner Jones (Community/Law Enforcement, DWIHN), Julie Black (Clinical Manager, DWIHN) Andrea Smith (Director of Program Services, DWIHN), Reid Wilson (Executive Manager, Detroit Police Department), Amanda Rzotkiewicz (Analyst, Detroit Police Department), Gary Bresnehan (Wayne County Prosecutor's Office) Alisha Bell (Chair, Wayne County Commission) Dr. Debra Pinals (Medical Director, MDHHS) Willie Brooks (CEO DWIHN).

The Wayne County Diversion Council (WCDC) discussed extending video conference court hearings indefinitely.

WCDC is reviewing the impacts of prematurely releasing inmates as the threat of COVID-19 pressures correction systems to release inmates and lower the number of incarcerations.

WCDC is looking at methods of alternative settings for individuals with mental illness. More to come...

Health Plan Integration / MDHHS Behavioral Health Restructure (SIP)

DWIHN is finalized agreements with two Health Plans. Currently working with clinicians, on the program design and implementation for next fiscal year.

298 State Pilots

The Governor vetoed the 298 language that favored health plan privatization, along with numerous other items in the budget vetoed the 298 language. Although the 298 proposal is no longer active, MDHHS is pursuing an alternative to integrating Behavior Health with Physical Health.

New Proposal: Specialty Integrated Plan (SIP) Model

MDHHS announced a new proposal, Specialty Integrated Plan (SIP) to promote integration of care within Behavioral Health and Health Care. The plans details are as follows:

- **Preserving the public safety net.** MDHHS announced that their goal is to preserve and strengthen the community benefit system through the current Community Mental Health Service Providers (CMH). Changes will occur to promote consistency of service and benefits throughout the state.
- **Specialty Integrated Plan (SIP).** MDHHS will move to a one payer and one accountable organization. The newly formed SIP will eliminate Prepaid Inpatient Hospital Plans (PIHP's) and will work directly with health care providers and CMH on the delivery of integrated care. The newly formed Sip will function as a Managed Care Organization (MCO) system and will be a full risk-bearing entity, which includes the management of profits and losses.
- **Focus on the Specialty Population.** The new program will focus on individuals formerly managed by the PIHP's, but will now include both physical and behavioral care. Individuals outside of the PIHP system will continue service with the Health Plans.
- **Multiple SIP Options.** MDHHS is pursuing 3-5 statewide SIPs that will function simultaneously and provide choice to attract and retain members. MDHHS plan is to have multiple organizations as SIP's, including public behavioral systems, providers, hospitals, and other care entities. SIP's must be a licensed MCO.
- **Statewide Program.** MDHHS is seeking statewide provider networks to assure consistency of care and choice. CMH's can participate as providers within the SIP structure.
- **Launch Date.** MDHHS is planning on launching the first SIP program in October of 2022

Concerns with new SIP Program

I have several concerns with the new SIP program as follows:

- **Statewide versus Regional.** The proposal from MDHHS requires multiple statewide SIP's that will compete against each other. This will require each SIP to have a provider network and infrastructure for the entire state. There are approximately 300,000 PIHP lives in Michigan. Forming multiple SIP's to compete against a comparably small population is not cost effective. Regional settings would be more cost effective if multiple SIP's are used. The other option would be to have one Sip for the entire state.

- **Elimination of PIHP.** The new proposal of SIP's will eliminate the ten (10) PIHP's in the state and promote SIP partnerships with Community Mental Health Service Programs (CMHSP). Three of the PIHP's in the state including DWIHN are both PIHP's and CMHSP's. PIHP's are the legal entities that control Medicaid dollars and reserves; this function will pass over to the newly developed SIP's. DWIHN will have to pursue either becoming a SIP through partnership or becoming a partner in service delivery with several SIP's.
- **Reserve and Risk.** The new SIP must be a MCO and will be required to maintain a substantial reserve from 20-30% of annual spending. The current public system does not allow for high levels of reserves. Special consideration is required to allow the building up of reserves for public entities to participate as a SIP.
- **Partnerships.** The new MDHHS proposal will require partnerships between, providers, health care, behavioral care, and a MCO. MDHHS will potentially send out request for proposals and allow bidders to collaborate on the partnerships. This process increases the risk in light of the limited dollars in the system, vast coverage area statewide, and limited amount of individuals served.
- **Start-up Cost.** There is no mention of start-up cost associated with the MDHHS proposal. SIP's and providers must establish a statewide network and infrastructure at their own expense and risk.
- **Segregated System.** The MDHHS proposal will have a separate process for non-behavioral individuals. This could result in segregation of health care. This will also require a separation of dollars for health care administration for each system, behavioral and non-behavioral.
- **Outside Take Over.** This process can open the door for out of state organizations to bid and potentially profit in the system by reducing services to increase profits.

DWIHN Updates:

- MDHHS currently put a hold on the SIP implementation
- MDHHS will resume the SIP project once the current COVID-19 pandemic is under control. Small pockets of meetings are taking place.
- MDHHS may select an alternative to SIP.
- Budget shortfalls may require delays and retooling of future integration plans

2020 Funding Updates

Medicaid:

- Technical shortfalls to the budget:
 - Initial estimate of \$120 million in result to system errors and miscalculations. This estimate was modified to \$50 million in result to enrollment and eligibility change. DWIHN received a retroactive payment of \$6 million in April and expect to receive monthly payments totaling \$4 million, for a total of \$10 million for the year.

- Death Audit
 - Potential recovery of \$9 million pending. Currently on hold until MDHHS analyzes the impacts on the audit to the PIHP system. This recoupment would effectively eliminate the \$10 million increase.
- Autism
 - MDHHS is reviewing DWIHN's request to cost settle \$21 million in overspend for Autism. Autism rates and guidelines are set by MDHHS
- Rate Reduction
 - DWIHN has pushed back the proposed 7% rate reduction previously scheduled for May 1, to June 1. This reduction will be re-evaluated based on available Medicaid dollars in result to revenue and expense totals.
- Direct Care Workers (DCW) Hazard Pay
 - MDHHS is passing through a \$3 DCW wage increase during the period of April to September. This is an increase of the previously reported \$2 DCW increase. DWIHN will pass those funds to providers once the funds are received.

COVID-19 Funding

- MDHHS announced that \$5 million in additional dollars are designated for the entire PIHP system. DWIHN is receiving approximately \$500,000 of the \$5 million allocation. The one-time payment has a no carryover provision (must be spent this fiscal year or returned)
 - Disproportional Funding Percentages:
 - \$500,000 represents 10 % of the \$5 million available
 - Wayne County has 40% of the total COVID-19 cases in Michigan
 - Wayne County has 47% of COVID-19 deaths in Michigan
 - Wayne County Serves roughly 25% of the Medicaid population
- DWIHN is estimated to need approximately \$40 - \$50 million for COVID-19 cost. This need has been presented to MDHHS.
- Michigan received \$3,873 Billion in Federal dollars for COVID-19
- Of the \$3.873 billion received, \$700 million was paid out as required by law. The remaining \$3.1 billion is being held by the legislature with hopes of reallocating funds from direct COVID-19 usage to filling budget gaps. This is the constant conflict between saving human lives and saving economic capabilities.

General Fund:

Michigan Department of Health and Human Services (MDHHS) put together a task force made up of Community Mental Health agencies to determine a method of rebasing General Fund dollars to the PIHPs. The group's decision was to lower DWIHN General Fund dollars by \$4.5 million each year to a cumulative total reduction of \$22.5 million by year five. DWIHN is in the second year of this reduction with a slated \$9 million in reductions to occur this fiscal year.

The first year of the reduction, DWIHN lobbied to have a supplemental payment in place to hold DWIHN harmless. That supplemental should carry over to FY20, which will still create a **\$4.5 million General Fund deficit**.

DWIHN is currently pursuing a long-term solution for the overall \$22.5 million slated reduction. A meeting with MDHHS will occur in February/March to address the General Fund long-term reduction issue.

Crisis Continuum/Building

DWIHN will review the Crisis Continuum project and the building requirements to assure it meets the needs of the new MDHHS proposal. COVID-19 is changing the way DWIHN and the provider network does business.

DWIHN is implementing return to work procedures in result to COVID-19. This process will include:

- Personal Protection Equipment (PPE) usage guidelines for staff as outlined by the Governor's office.
- Assuring social spacing practices are maintained in the work setting
- Provide on-site routine COVID-19 testing for staff
- Determining public access to the building
- The Milwaukee is being cleaned and sanitized on a regular schedule

Staffing

DWIHN is reviewing all positions to assure it meets the future needs of the MDHHS integration design along with COVID-19 changes.

This includes:

- Furloughing 10% of the DWIHN staff in result to COVID-19 limitations and changes in work structure.
- Currently establishing staff needs in result to COVID-19 changes and future DWIHN functional changes.
- Increasing technical infrastructure for remote work requirements.
- Review processes learned from offsite processing.
 - We must prepare DWIHN for the future of the organization
 - Figure what worked and what didn't work
- Re-examine building requirements
 - New Center One (NCO) needs
 - New Central Building design with spacing and hoteling
 - Online video conference meetings here to stay

- Off-site
 - Clearly define functions that can be performed off-site
 - Establish methods of measuring productivity
 - Establish meeting requirements and technology
 - Protocol for returning for providers and staff

Provider Network

Provider Contracting

For the contract period of FY 2020, current contracts will be carried over. DWIHN is in the process of evaluating the overall provider network and needs of the community to assure that the provider network meets our community goals of a holistic network. FY 2021 contracting will be based on need and long-term goals of DWMHA. Providers will be provided early opportunities to qualify for the next FY 2021. This process will start with the SUD network.

Provider Issues / Assistance

- Personal Protection Equipment (PPE)
 - DWIHN is delivering PPE to providers.
 - Items include:
 - Gloves
 - Gowns
 - Mask Surgical N95
 - Sanitizer
 - Covers
 - Cleaning services
 - Thermometers
 - Reviewing the possibility of bulk pricing for providers and DWIHN
 - Shared purchasing of cleaning equipment for self-cleaning for providers and DWIHN
 - Shared purchasing of cleaning equipment for self-cleaning for providers and DWIHN
 - Pursue companies with bulk pricing for providers and DWIHN
- No Medicaid Reserve build up during the crisis (Reviewing monthly expenses and revenues to assure all dollars are used during the crisis)
- Establishing testing sites for DWIHN and providers
- Managing New Operational Guidelines
 - Tele-Health guidelines in place
 - Decreased audit requirements
- Paying PMPM for several providers
- Reviewing authorization guidelines

- Accessing Providers Need for Telehealth Equipment
 - Phones
 - Laptops
 - Internet Connection
 - Training
 - Hotspots
 - IT support
- Referrals: Providers are experiencing difficulty with referrals
 - Shelters
 - Transitional housing
 - Hospitals
 - Hotels
- Looking for ways to better advertise during the crisis to let the public know help is still available. Alcoholism is rising, domestic violence is rising, and the public need to know treatment (SUD) is available.
 - Billboards
 - Social Media
 - Radio
 - TV
 - Focus on availability of SUD service
- Financial Provider Assistance
 - Advance Payroll for Government assistance
 - Remove the 7% reduction if possible
 - Provide PPE
 - Provide Lump Sum Assistance Payments

COVID-19 Impacts to Minorities

- Issues for increased deaths among minorities:
 - Lack of Social Spacing in cities: #1 issue.
 - Culture: Habits on congregating, slowly adapting to cultural changes.
 - Economics:
 - Low income families must work in open settings to survive,
 - High exposure to direct impact jobs (community workers).
 - Disparity in educational opportunities
 - Lack of access to optimal health insurance and care
 - Pre-existing conditions (diabetes, obesity, etc...)
 - Overcrowded treatment centers

Communications

In the Media

Crain's Detroit Business did an in-depth interview with various organizations and the struggles they're facing during this COVID-19 pandemic. Read more here:

<http://dwihh.org/files/7815/8921/6888/CRAINS - Mental health crisis in Wayne County 5.10.2020.pdf>

Mental health crisis looms as agencies, clients hit hard by COVID-19 in Wayne County

JAY GREENE

- Increases seen in suicides, substance abuse, anxiety and depression
- Some 17 agencies, regional funder ask state for more than \$50 million in emergency funding
- Providers down in case visits, revenue, while PPE costs rise



Community Newspapers - DWIHN partnerships continue with The Michigan Chronicle, The Latino Press, the Arab American News and the Hamtramck Review. The Latino Press ran a story about coping during COVID-19. The Michigan Chronicle featured SUD Board member Dr. Cynthia Arfken.

Living Through a Pandemic from a Scientist's Point of View

"I love my job, there are always new problems and lots of research that has to be done," said Dr. Cynthia L. Arfken, PhD. "Did I ever think I would live through a pandemic? No, but we are learning new information every day about the disease, how it affects people and communities and that I find fascinating."

Dr. Arfken is an Epidemiologist and a Professor of Psychiatry and Behavioral Neurosciences at Wayne State University. She received her PhD in chronic disease epidemiology from Yale University and completed a postdoctoral fellowship in alcohol research from the University of California in Berkeley. She is also a member of the Detroit Wayne Integrated Health Network's (DWIHN) Substance Use Disorder Oversight Policy Board.

Dr. Cynthia L. Arfken

"I try and improve the health of the public, much of my research has been aimed at reducing the burden of substance use in our communities and increasing the availability of mental health services."

She has worked on various projects and partnerships to bring attention to the number of deaths associated with

new information. What was said a month ago about the virus, may not be the same today or tomorrow or a month from now. We are learning as we go."

We are also learning just how devastating this virus is, especially among the black community where 40% of the deaths in Michigan have been African Americans. Just recently Governor Whitmer appointed Lt. Governor Garlin Gilchrist to chair a task force to address the racial disparities from the coronavirus.

"I am interested in these findings as there is a much heavier burden in communities of color and higher death rates of men compared to women. There are a lot of theories out there, we cannot ignore the history of healthcare access and health status of people living in those communities. We must also remember that many of our essential workers may have lower incomes and need to work so they are traveling on public transit and to get to their jobs. I believe there isn't one underlying reason for this racial disparity but there are multiple factors."

As we continue to learn more each day about COVID-10, Arfken continues to support the Governor's Stay Home, stay safe order and offers this advice for people who are struggling.

"Right now we have all become very aware of the food

Outfront Media – A new COVID-19 billboard was created which can be seen in five different locations in Wayne County including: S-I-75 near Rouge River, Telegraph near McNichols, Gratiot Ave. near Glenwood, Northline near Helen and Inkster near Ann Arbor Trail. A recent Access Center report indicates the billboards are still our second largest referral source with almost **500 people** in April stating they've seen the billboards.

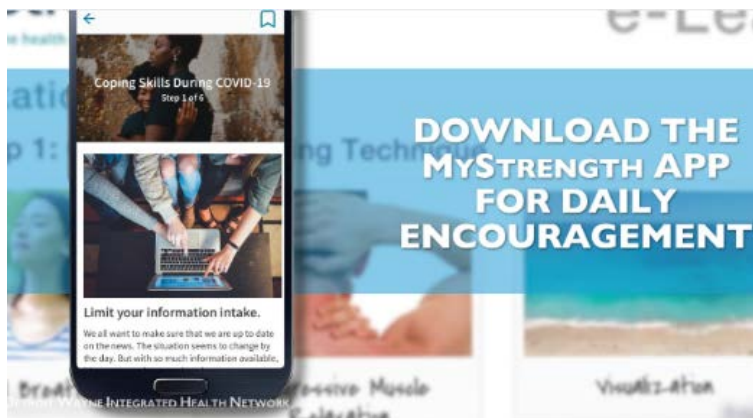
COPING WITH COVID-19?

Here to Talk. Here to Help.

800-241-4949

Television - Channel 4, Channel 7 & Comcast -The April COVID-19 PSA has been airing since March on Channel 4. In that time, there have been **3,521,457** impressions among television, mobile and digital devices. Two weeks ago, Channel 7 began airing the messages and Comcast agreed to air the messages, free of charge. Over the last two weeks, the Comcast

message has aired **1,347** times in these cities: Detroit, Taylor, Canton, Westland and Dearborn. So far, we have seen an increase of 150 downloads of the My Strength app.



PBS - DWIHN President and CEO Willie Brooks was interviewed by reporter Stephen Henderson on American Black Journal. The topic was Mental Health: Racial Disparities and COVID-19. Here is a link to the full interview: <https://www.pbs.org/video/mental-health-racial-disparities-and-covid-19-nj5mb2/>

Radio

During the COVID-19 pandemic, DWIHN partnered with WDVD Radio 96.3 in which 60-second messages aired related to Telehealth and the My Strength app. It reached over **1.8 million adults delivering over 15 million impressions**. It was a very successful branding campaign. The commercials increased awareness of the My Strength app and web portal. We also had :15 promos running on Radio One.

My Strength/CoronaVirus weekly schedule* 3/30/20-4/21/20 (3-week campaign)

DAY/TIME	LENGTH	WEEKLY SPOT
M-F 6am-7pm	:60	16x
M-F 5am-12Mid	:60	6x - No Charge
M-Sun Mid-6am	:60	10x - No Charge
Sat-Sun 8am-8pm	:60	10x
Weekly Total per station		42x

GROUP SUMMARY

STATION	TOTAL SPOTS	INVESTMENT	Endorsement
MIX 92.3	126	\$7,110	Frankie Darcell
CHANNEL 955	126	\$10,220	Shannon
97.9 WJLB	126	\$6,210	Bushman
106.7 WLLZ	126	\$4,460	Trudi
TOTALS	504/ 208 paid/296 FREE	\$28,000	

*Schedule consist of 2 week paid and 1 week free. Weekly endorsement by personalities (4/1-4/21)

**Includes 1-week FREE sponsorship of CoronaVirus update on WKQI and WLLZ. 336x mentions. (3/30-4/5)

***Includes 3-week FREE sponsorship of CoronaVirus update on WJLB and WMXD. 1008 mentions. (3/30-4/19)

MIX 92.3 – Mr. Brooks was interviewed on April 6 by 92.3 Radio Personality Frankie Darcell on to discuss mental health in the midst of a pandemic.

<https://mix923fm.iheart.com/content/2020-04-03-maintaining-mental-health-in-the-covid-19-pandemic/>

Social Media – The top performing posts for April were related to COVID-19. These posts reached thousands with over **3,600 people** reached on the WSU First Responder Hotline and over **4,100 people** reached on the Peer Support Specialist Warmline number. Engagement on Twitter increased with **111 engagements**.

Hashtag RoundUp – DWIHN partnered with Hashtag RoundUp in early May to bring awareness to Children’s Mental Health Awareness week and Mental Health month. By using the hashtag #WhatEveryChildNeedsIn5Words on Twitter, we were able to increase our followers by 0.5% from 990 to 995. Our overall engagement (likes, re-tweets, link clicks, @replies) increased over 1,900% over the duration of **two** hours. Compared to the month of April, we’ve had 824 more engagements.

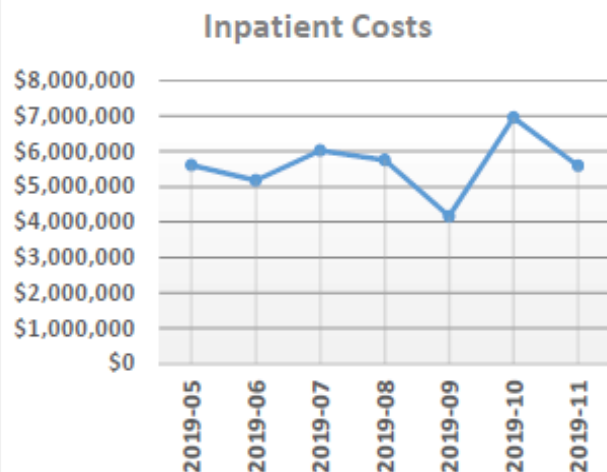


Community Outreach - DWIHN President/CEO Willie Brooks, Chief Clinical Officer Dana Lasenby and Chief Medical Director Dr. Margaret Hudson-Collins were invited by Commissioner Alisha Bell to a Virtual Town Hall Meeting on April 17th to discuss Mental Health. There were over 100 participants.

Key Mental Health Indicators

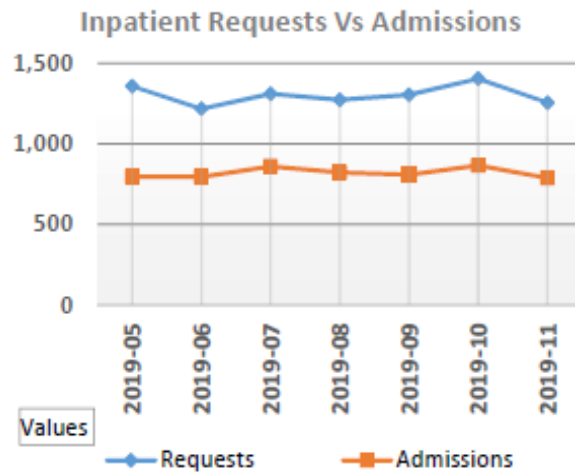


Inpatient Costs



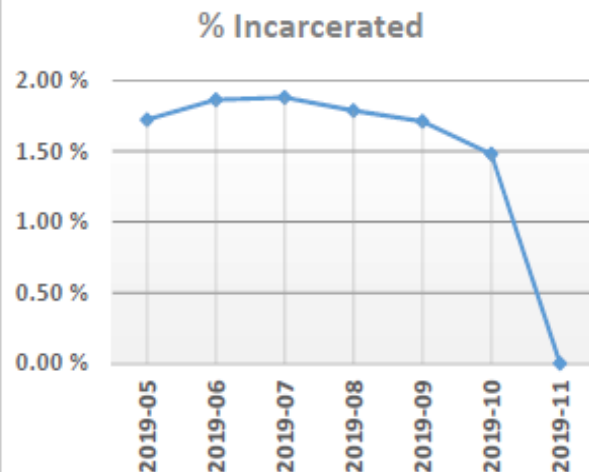
YearMonth

Requests Admissions



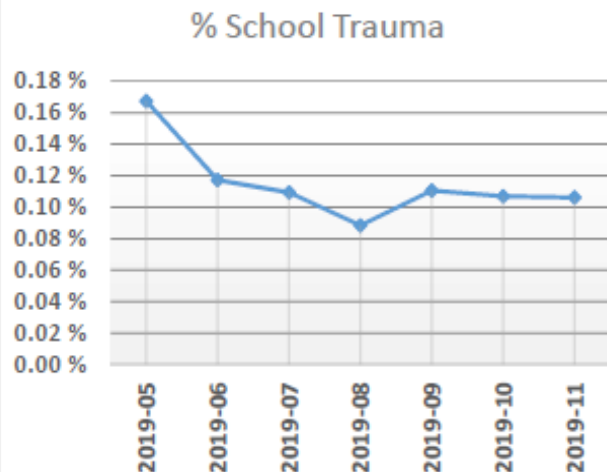
YearMonth

Percent Incarcerated



YearMonth

Percent of School Trauma Services



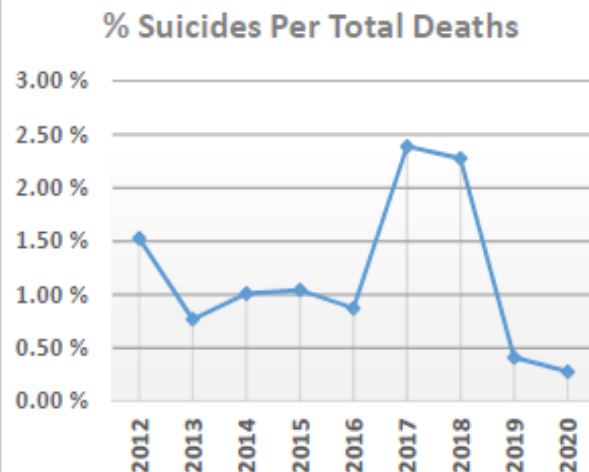
YearMonth

Percent of Homeless



YearMonth

Percent Suicides



FY

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-06 R3 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: Michigan Department of Community Health

Contract Title: Michigan Department of Community Health and Human Services PIHP - Detroit Wayne Integrated Health Network for the Medicaid Managed Speciality Supports and Services Program(s), the Health Michigan Program and Substance Use Disorder Community Grant Programs

Address where services are provided: Various

Presented to Program Compliance Committee at its meeting on: 4/15/2020

Proposed Contract Term: 10/1/2019 to 9/30/2020

Amount of Contract: \$ 747,944,461.00 Previous Fiscal Year: \$ 730,891,511.00

Program Type: Modification

Projected Number Served- Year 1: 70,000 Persons Served (previous fiscal year): 70,000

Date Contract First Initiated: 10/1/2019

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Detroit Wayne Integrated Health Network (DWIHN) received amended language from the Michigan Department of Health and Human Services (MDHHS) to the current Prepaid Inpatient Health Plan contract for FY 2020. The amendment incorporates changes to the boilerplate contract language and related contract attachments. The amount of the contract is \$747,944,461.00 and the proposed contract term and period of the amendment (October 1, 2019 through September 30, 2020) will remain the same. There were several specific changes that were identified by MDHHS per Amendment No. 4 and they are as follows:

SFY 2020 Behavioral Health Capitation Rate Certification Amendment. Section 18. Assurances subsection 18.1.15 Electronic Visit Verification. Section 6.3.1 Recipient Rights and Grievance and Appeals. Section 8.4.2.1 2020 Performance Bonus Integration of Behavioral and Physical Health Services. CMS technical corrections for Information Requirements and Standard Consent Form. Contract attachment P7.7.1.1 PIHP Reporting Requirements – technical corrections to remove Strategic Enhancement Report and change other reporting due dates

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? Y (Indicate all that apply)

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
Various	\$ 747,944,461.00	\$ 747,944,461.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 747,944,461.00	\$ 747,944,461.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)?

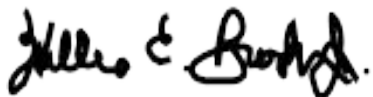
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Thursday, May 14, 2020

Signed: Thursday, May 14, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 20-15 R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: DWIHN SUD Department

Contract Title: DWIHN/SUD Prevention - Delivery System (ENDS) Project FY 2020

Address where services are provided: 707 W. Milwaukee Ave., Detroit, MI 48202

Presented to Program Compliance Committee at its meeting on: 5/13/2020

Proposed Contract Term: 5/1/2020 to 9/30/2020

Amount of Contract: \$ 5,574,906.00 Previous Fiscal Year: \$ 5,501,795.00

Program Type: Continuation

Projected Number Served- Year 1: 5,000 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 5/1/2020

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

DWIHN staff requests Board Approval to revise BA #20-15 to include the addition of MDHHS Community Block grant award of \$4,000.00 to fund the Electronic Nicotine Systems (ENDS) program. The total amount of the SUD Prevention program is amended from \$5,570,906.00 to total of \$5,574,906.00.

DWIHN was provided \$4,000.00 in Block Grant funding from Michigan Department of Health and Human Services (MDHHD) to have SUD prevention providers identify Electronic Nicotine Delivery System (ENDS) products. The SUD prevention providers will raise awareness of ENDS and research agencies to dispose of ENDS waste products.

SUD prevention providers will conduct telehealth town hall or community wide presentations on The Truth About ENDS. Create a list of e-cigs/ENDS products and purchase presentation sample kits. DWIHN will order and have on hand for providers and presentations across the region. DWIHN will use The Truth About Electronic Nicotine Devices presentation as guidance. The presentation provided by MDHHS includes a variety of ENDS that are used and misused across the county.

DWIHN providers will target youth ages 5 to 18 addressing e-cigarettes, smoking, vaping and marihuana with educational messages through provider websites, eLearning, and telehealth.

Providers will continue to conduct student and parent e-cigarette presentations available for use in middle and high schools and conduct focus group with high school students via telephonic, telehealth or virtual meetings.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? N *(Indicate all that apply)*

Scope of Service and/or Statement of Work N; Program Information Y; Outcome Data/Quality Concerns N; Procurement Information Y

Source of Funds: PFS

Fee for Service (Y/N): N

Revenue	FY 19/20	Annualized
SUD Block Grant	\$ 5,574,906.00	\$ 5,574,906.00
	\$	\$ 0.00
Total Revenue	\$ 5,574,906.00	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

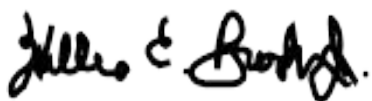
ACCOUNT NUMBER: 64932.826601.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:



Signed: Wednesday, May 6, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Tuesday, May 5, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 20-36R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: Floyd E. Allen & Associates, PC

Contract Title: Legal Services

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 5/6/2020

Proposed Contract Term: 10/1/2019 to 9/30/2020

Amount of Contract: \$ 150,000.00 Previous Fiscal Year: \$ 315,000.00

Program Type: Continuation

Projected Number Served- Year 1: 0 Persons Served (previous fiscal year): N/A

Date Contract First Initiated: 10/1/2019

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The Allen Law Group continues to provide legal advice to the Network and its Board on a number of matters, in addition to labor matters. This revised Board Action is requesting that the Board approve a contract amendment to provide that an additional \$75,000 be added to the contract, which will bring the amount available (through the September 2020 billing) to \$81,061.00, and the total contract amount to \$150,000.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? N *(Indicate all that apply)*

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 19/20	Annualized
All Sources	\$ 150,000.00	\$ 150,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

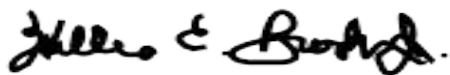
ACCOUNT NUMBER: 64910.814000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:



Signed: Friday, May 1, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Friday, May 1, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-52R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: MedSupply Corporation Inc

Contract Title: Exigent Agreement to Purchase Personal Protection Equipment

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 5/13/2020

Proposed Contract Term: 5/1/2020 to 9/30/2020

Amount of Contract: \$ 220,000.00 Previous Fiscal Year: \$ 0.00

Program Type: Modification

Projected Number Served- Year 1: 3,500 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 5/1/2020

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Due to the executive order issued by Governor Whitmer in light of the COVID-19 pandemic that mandates that employers must provide its staff with Personal Protection Equipment ("PPE"), DWIHN is requesting to increase BA #20-52 by \$120,000 to a total amount of \$220,000 to adequately supply PPE to its staff and fulfill any emergency needs to its residential provider network. The personal protection equipment is necessary for DWIHN and its provider network essential staff to continue servicing those numbers we serve.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? Y *(Indicate all that apply)*

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
General Fund -COVID 19	\$ 220,000.00	\$ 220,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 220,000.00	\$ 220,000.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.07100

In Budget (Y/N)? Y

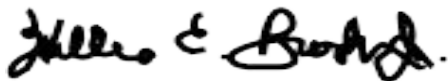
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Friday, May 15, 2020

Signed: Friday, May 15, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: BA #20-50 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: DWMHA Provider Network - see attached list

Contract Title: State Opioid Response Grant FY19 Carry-Over Funding

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 5/13/2020

Proposed Contract Term: 4/1/2020 to 9/30/2020

Amount of Contract: \$ 920,740.00 Previous Fiscal Year: \$

Program Type: Continuation

Projected Number Served- Year 1: 8,000 Persons Served (previous fiscal year): 6619

Date Contract First Initiated: 4/1/2020

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The following State Opioid Response programs have been granted carry over funding from MDHHS for fiscal year 2019 carrying over to fiscal year 2020 in the amount of \$920,740: Youth and Family Oriented Prevention Evidence Based Practices, Overdose Education and Naloxone Distribution with Harm Reduction, Peers in Federally Qualified Health Centers, Urgent Care, and other Out-Patient Settings for Screenings and Brief Referrals to Treatment, Opioid Use Disorder Treatment Costs, Jail-Based Medication Assisted Treatment Expansion, Government Performance Results Act, Recovery Housing, Opioid Use Disorder Recovery Services, Mobile Care Units, and Maintaining Independence and Sobriety through Systems Integration, Outreach and Networking Re-Entry Program and Criminal Justice Reform in Detroit Reentry Center and Women's Huron Valley. The providers that are receiving carryover funding are the original providers that applied for State Opioid Response Grant last fiscal year, as this carry over funding could not be offered to additional providers. Please review the attached detailed list of State Opioid Response providers and the State Opioid Response programs that they are implementing.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? N *(Indicate all that apply)*

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds: Block Grant

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
SUD Block Grant	\$ 920,740.00	\$ 920,740.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical):

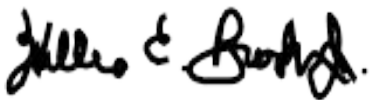
ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:



Signed: Friday, April 17, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Friday, April 17, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA 20-54 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: Barr, Joseph J.

Contract Title: HEDIS/NCQA Professional Consultant Services

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 5/6/2020

Proposed Contract Term: 5/18/2020 to 12/31/2020

Amount of Contract: \$ 105,000.00 Previous Fiscal Year: \$

Program Type: Modification

Projected Number Served- Year 1: 0 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 8/19/2019

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This Board action is to request for your approval to extend funding provided by Detroit Wayne Health Network to obtain professional IT services from Mr. Joe Barr for development work related to NEDIS measures that are must required as part of our NCQA compliance. These services are required to get us in compliance with HEDIS 2020 measures.

The initial contract began August 19, 2019 was below the \$50,000 that required board approval. This board action is requesting a contract extension to December 31, 2020 for a total amount of \$105,000, an increase of \$55,096 from the initial contract amount of \$49,904 through May 17, 2020.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? N (Indicate all that apply)

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): N

Board Action #: BA 20-54

Revenue	FY 19/20	Annualized
Multiple Sources	\$ 105,000.00	\$ 105,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64915.817000.00000

In Budget (Y/N)? Y

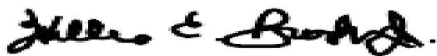
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:





Signed: Friday, April 24, 2020

Signed: Friday, April 24, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: BA 20-55 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: DWMHA Provider Network - see attached list

Contract Title: SUD Recovery Home and Mobile Unit COVID-19

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 5/13/2020

Proposed Contract Term: 5/1/2020 to 9/30/2020

Amount of Contract: \$ 393,973.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 1,500 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 5/1/2020

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The Detroit Wayne Integrated Health Network (DWIHN) is requesting approval of the SUD Block Grant totaling \$393,973 to implement COVID-19 withdrawal management (detox), residential, mobile unit and recovery homes services. DWIHN currently has two providers Detroit Rescue Mission Ministries (DRMM) and Quality Behavioral Health (QBH) servicing our COVID-19 clients with symptoms or who are positive for the virus in recovery homes specifically for the SUD population. DWIHN providers with mobile units (Abundant Community Recovery Services and Quality Behavioral Health) will be providing out-reach, dispensing personal protection equipment (PPE), hygiene kits, utilizing nurses and physician assistants in conducting rapid COVID-19 testing, dispensing food as needed in high risk areas in the Detroit Wayne County area.

The aforementioned providers were selected as they were the providers accepting COVID-19 cases and/or had existing mobile units in place. Many recovery homes would not take COVID-19 cases and the selected providers became the de facto COVID-19 providers.

DWIHNs grant was approved for **\$393,973**; DRMM would receive \$144,579; QBH would receive \$144,579; Abundant Community would receive \$75,000; PPEs for OTP providers: \$10,000; DWIHN would receive \$19,815 admin cost.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

None

See Board Portal for additional information (Y/N)? N *(Indicate all that apply)*

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
SUD Federal Block grant	\$ 393,973.00	\$ 393,973.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64932.826600.07000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, April 29, 2020

Signed: Wednesday, April 29, 2020

Board Action #: BA 20-55

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 20-56 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: City of Westland, City Connect Detroit, Downriver Community Conference, City of Belleville, Township of Redford, City of Dearborn, City of Highland Park, Charter Township of Canton, City of Hamtramck, City of Inkster, Warren Conner Development, Van Buren Charter Township, Civil Air Patrol, Alkebu-lan, See attached list, Wayne State University, Lifebuilders

Contract Title: Summer Youth Employment Program

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 5/13/2020

Proposed Contract Term: 6/1/2020 to 9/30/2020

Amount of Contract: \$ 2,100,000.00 Previous Fiscal Year: \$ 2,100,000.00

Program Type: Continuation

Projected Number Served- Year 1: 800 Persons Served (previous fiscal year): 1256

Date Contract First Initiated: 6/1/2020

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Detroit Wayne Integrated Health Network's (DWIHN's) is requesting the approval for \$2.1 million for the Summer Youth Employment Program. The program provides subsidized part-time employment for individuals between the ages of 14-24 living in Wayne County. In addition to work experience, this funding will ensure that the employed youth receive educational information on prevention, treatment and access to care. These programs are expected to be both beneficial and preventative for youth otherwise unoccupied during the summer months, who may be at a greater risk for developing behavioral health issues. These organizations thrive on community outreach to adolescents focusing heavily on youth recruitment plans and educational and mentoring goals to be accomplished over the summer months.

Due to COVID-19 pandemic, many of the providers have developed virtual employment opportunities for the youth. Providers will be required to meet the social distancing requirements as set forth by the Governor at the time of employment.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? Y (Indicate all that apply)

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information Y

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 19/20	Annualized
State General Fund	\$ 2,100,000.00	\$ 2,100,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64931.827206.06300

In Budget (Y/N)? Y

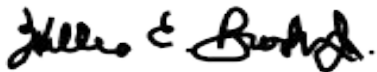
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Friday, May 8, 2020

Signed: Thursday, May 7, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 20-57 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 5/20/2020

Name of Provider: Children's Center of Wayne County Inc., Development Centers Inc., Hegira Programs Inc., Starfish Family Services (MH), Mills, Crystal, WIT, Inc, See attached list

Contract Title: Detroit COVID 19 Virtual Therapy Collaborative

Address where services are provided: 'None'

Presented to Executive Committee at its meeting on: 5/11/2020

Proposed Contract Term: 5/11/2020 to 12/31/2020

Amount of Contract: \$ 500,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 800 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 5/12/2020

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The board action is requesting approval to incur costs totaling \$500,000 for a COVID-19 related to virtual therapy via a chat line for Wayne County residents. The funding will come from various local non-profit organizations including Flinn Foundation and Skillman Foundation. The grant requires a 25% local match which DWIHN will \$100,000 in COVID-19 State General Funds.

Detroit, particularly African Americans, has been disproportionately impacted by COVID-19. African Americans are 15% of the State of Michigan population but represent 35% of people diagnosed with coronavirus. This means that African Americans in Michigan are 133% more likely to contract the novel coronavirus relative to their percentage of the state. With a death rate hovering near 4% in Michigan, African Americans are also over-represented for deaths related to COVID-19, accounting for 40% of all deaths statewide.

The COVID-19 Virtual Therapy Program will be established to provide free behavioral health supports and counseling to those who are not receiving care. This virtual platform provides access to a safe and private network of behavioral health resources and therapy supports by trained counselors. Many young people and families are struggling with isolation, grief, fear, anxiety, depression, substance use, trauma, job losses and uncertainty about the future. An array of comprehensive, culturally responsive supports and counseling services are available to individuals who live, work or worship in Detroit/Wayne County and can be accessed through DWIHN's existing 24/7 line 800-241-4949, the Michigan Covid-19 CCP line by texting the word Restore to 741741, the Michigan

Warmline at 888-733-7753, or 211. DWIHN will coordinate with Michigan's existing COVID-19 crisis lines so that individuals will be connected with COVID-19 Therapy as necessary.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

See Board Portal for additional information (Y/N)? Y (Indicate all that apply)

Scope of Service and/or Statement of Work ; Program Information ; Outcome Data/Quality Concerns ; Procurement Information

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 19/20	Annualized
Local Grants	\$ 400,000.00	\$ 400,000.00
COVID General Fund	\$ 100,000.00	\$ 100,000.00
Total Revenue	\$ 500,000.00	\$ 500,000.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

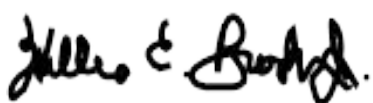
ACCOUNT NUMBER: various

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:



Signed: Wednesday, May 13, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Tuesday, May 12, 2020

Board Action Taken

The following Action was taken by the Full Board on the 20th day of May, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

Executive Director -initial here: _____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: May 20, 2020

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