



## Detroit Wayne Integrated Health Network

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**SPECIAL FULL BOARD MEETING**  
**Wednesday, December 3, 2025**  
**Detroit Wayne Integrated Health Network**  
**Administration Building**  
**8726 Woodward, 1<sup>st</sup> Floor Board Room**  
**1:00 p.m.**  
**AGENDA**

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES – October 15, 2025**
- VI. RECEIVE AND FILE – Approved Finance Committee Minutes – October 1, 2025**  
Approved Program Compliance Committee Minutes – October 8, 2025
- VII. ANNOUNCEMENTS**
  - A. Network Announcements
  - B. Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
  - A. Board Chair Report
  - B. Executive Committee
    1. December Board and Committee Meeting
- IX. UNFINISHED BUSINESS (Staff Recommendations)**
  - A. **BA#21-29 (Revision 5)** – Outfront Media, Inc. *(Finance)*
  - B. **BA #24-67 (Revision 1)** – Opioid Settlement Leg Up Scope of Service Modification *(Program Compliance)*
  - C. **BA #25-24 (Revised 6)** – Autism Services FY 25 *(Program Compliance)*

**Board of Directors**

Dr. Cynthia Taueg, Chairperson  
Karima Bentounsi  
Kevin McNamara

Jonathan C. Kinloch, Vice Chairperson  
Angela Bullock  
Bernard Parker

Dora Brown, Treasurer  
Lynne F. Carter, MD  
William Phillips

Eva Garza Dewaelsche, Secretary  
Angelo Glenn  
Kenya Ruth

**James E. White, President and CEO**



- D. **BA #26-03 (Revised)** – Children’s Initiatives Waiver Services FY 26 *(Program Compliance)*
- E. **BA#26-10 (Revision 2)** – Substance Use Disorder (SUD) Health Homes FY2026 *(Full Board)*
- F. **BA#26-12 (Revised)** – Substance Use Disorder (SUD) Treatment Provider Network FY26 Michigan Certification Board for Addiction Professionals (MCBAP) Test Preparation *(Full Board)*
- G. **BA#26-12 (Revision 1)** – FY2026 Substance Use Disorder Treatment Provider Allocations *(Full Board)*
- H. **BA #26-12 (Revision 2)**- MyStrength, SUD Health Home Contingency Management, and Prescription Drug Take Back Boxes *(Program Compliance)*
- I. **BA#26-13 (Revised)** – FY2026 Substance Use Disorder (SUD) Prevention Provider Allocations *(Full Board)*
- J. **BA#26-14 (Revised)** – Detroit Wayne Integrated Health Network Provider Network System FY2025/2026 *(Full Board)*
- K. **BA #26-14 (Revised 2)** – DWIHN Provider Network System FY 26 *(Program Compliance)*
- L. **BA #26-21 (Revised)** – Autism Services FY 26 *(Program Compliance)*

**X. New Business (Staff Recommendations)**

- A. **BA #26-07** - ARCS – Detroit, Northwestern Wayne County, and Western Wayne County *(Program Compliance)*
- B. **BA#26-23** – Employee Healthcare 2026 *(Executive)*
- C. **BA #26-31 – Southwest Counseling Solutions Housing Resource Center** and CNS Covenant House FY 26 *(Program Compliance)*
- D. **BA #26-32** – Neighborhood Service Organization (NSO) and Wayne Metro PATH FY 26 *(Program Compliance)*
- E. **BA #26-33** – Central City PSH CoC Program and Leasing Project FY 26 *(Program Compliance)*
- F. **BA #26-36** – Children Services Health Quality Initiative FY 26 *(Program Compliance)*
- G. **BA #26-38** – Highland Park Police Department Partnership FY 26 *(Program Compliance)*
- H. **BA #26-39** – Michigan Clinical Consultation and Care (MC3) *(Program Compliance)*
- I. **BA#26-40** – Neighborhood Service Organization (NS), Detroit Healthy Housing Center *(Program Compliance)*

**XI. REVIEW OF ACTION ITEMS**

**XII. GOOD AND WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS**

Members of the public are welcome to address the Board during this time up to two (2) 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 who do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to them 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 instead responded to on an individual basis).

**XIII. ADJOURNMENT**

- D. **BA #26-03 (Revised)** – Children’s Initiatives Waiver Services FY 26 *(Program Compliance)*
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**XIII. ADJOURNMENT**



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
FULL BOARD MEETING  
Meeting Minutes  
Wednesday, October 15, 2025  
1:00 p.m.**

**BOARD MEMBERS PRESENT**

Dr. Cynthia Taueg, Board Chairperson  
Jonathan C. Kinloch, Vice Chairperson  
Eva Garza Dewaelsche, Secretary  
Angela Bullock

Angelo Glenn  
Kevin McNamara  
Bernard Parker  
William Phillips

**BOARD MEMBERS ATTENDING VIRTUALLY:** Ms. Karima Bentounsi, Lynne F. Carter, M.D.

**BOARD MEMBERS EXCUSED:** Ms. Dora Brown, Treasurer and Ms. Kenya Ruth

**SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD ATTENDING VIRTUALLY:**  
Mr. Thomas Adams, Chair

**GUEST(S):** Mr. Tyrone D. Sanders Jr. Esq., Obsidian Advocacy Group and Ms. Rebecca Bechler, Public Affairs Associates; Mr. Joe Demaria, CEO and Mr. Tassell, VP DeMaria Construction

**CALL TO ORDER**

The Board Chairperson, Dr. Taueg welcomed and thanked everyone for attending the meeting both in person and virtually. The meeting was called to order at 1:03 p.m. A roll call was requested.

**ROLL CALL**

Roll call was taken by Mr. Glenn and a quorum was not present. Ms. Garza Dewaelsche and Mr. Phillips joined the meeting. A roll call was taken at 1:04 p.m. and a quorum was present.

**APPROVAL OF THE AGENDA**

The Board Chairperson Dr. Taueg called for a motion on the agenda. **It was moved by Mr. Parker and supported by Mr. Glenn approval of the agenda. Mr. Phillips requested that the agenda be amended to move item XII. Unfinished Business – Staff Recommendations; and item XIII. New Business – Staff Recommendations to item X. and be taken before the Board Committee Reports.** There was no further discussion. **Motion carried; agenda approved as amended.**

**MOMENT OF SILENCE**

The Board Chair. Taueg called for a moment of silence. A moment of Silence was taken.

**APPROVAL OF BOARD MINUTES**

The Board Chairperson, Dr. Taueg, called for a motion on the Board minutes from the Full Board meeting of September 17, 2025, and the Special Full Board minutes from the meeting held on September 24, 2025. **It was moved by Ms. Bullock and supported by Mr. Glenn approval of the Full Board**

**minutes from the meeting held on September 17, 2025 and the Special Full Board minutes from the meeting held on September 24, 2025.** There was no further discussion. **Motion carried.**

## **RECEIVE AND FILE**

The approved minutes from the Finance Committee meeting of September 3, 2025 and the Program Compliance Committee meeting of September 10, 2025 were received and filed.

## **ANNOUNCEMENTS**

### Network Announcements

Ms. D. Clark, Director of Communications, reported that there was a very special announcement today. In fact, of the many, many projects that Mr. White has us working on, the team has been working on something very meaningful. Mr. White has asked several times why there was no display of our board members, like at other buildings, such as the police department or the Wayne County Commissioners' Office? That's when he began working on the vision. She spoke for Mr. White and noted that he wanted to recognize all of you, our board members, our board of directors and our Substance Use Disorder Oversight Policy Board for your service to Detroit Wayne Integrated Health Network and the community, it is Mr. White's way of acknowledging and honoring all that has been accomplished together, it took a couple of months to complete, but it is ready to be unveiled. Mr. White requested that everyone join him at the back of the room. The pictures of the Full Board and the SUD Oversight Policy Board were unveiled. Dr. Taueg thanked all of the staff for such a wonderful tribute and for putting their faces up there on the wall. She noted that now, in every meeting that goes on in the room, they are watching. There were no further remarks.

### Board Announcements

Board Chairperson Dr. Taueg called for Board Announcements. There were no board announcements.

### DeMaria Presentation

Board Chairperson Dr. Taueg noted there would be a presentation from Mr. DeMaria. Mr. DeMaria noted that they were there to present a donation to Detroit Wayne Integrated Health Network for Behavioral Health. They host a charity golf outing every year, and this is their third consecutive year. DeMaria is really proud to be a small part of what you do; it has such a big impact. He also noted that their company has had an office in Detroit for 57 years, he was born in Detroit, and it meant a lot to them to participate. They thanked DWIHN and Mr. White for letting them participate. DeMaria presented a check to DWIHN. The Chair thanked them for their donation, gave a round of applause and took photos. Mr. White noted that he has been associated with DeMaria charitably for over 30 years, and for 30 years, he has seen them give out checks, which is awesome, and he thanked them for their partnership.

### Public Affairs Associates

Dr. Taueg, Board Chairperson, noted that there has been a lot going on around the country, and today, there would be a presentation by Public Affairs Associates. Mr. T. Sanders, Esquire, Public Affairs, presented a document for the board members. It was reported that the state budget was adopted last Thursday. At the Federal government, it was reported that on September 30<sup>th</sup>, at the conclusion of September 30<sup>th</sup> the government went into a shutdown, which is in Day 15 and how this impacts Michigan varies; of the 2 million federal employees that make up the federal government, about half of them have been furloughed for what has been deemed non-essential services. The media has reported that many of those federal employees may not be coming back to work because the administration has threatened to

fire and downsize many departments, so we do not know what those departments will look like once this government shutdown is over. This is the second shutdown since 2019, which went 35 days, which was the longest in history. This one may outlast the last one as there are very few talks going on. There was a continuing resolution to fund the government through the end of November that was passed by the U.S. House of Representatives, but unfortunately, after numerous votes and conflicting proposals by the Democrats and Republicans in the Senate, that continuing resolution has been defeated multiple times and the U.S. Senate tried to vote on it almost on a daily basis. Democrats in the Senate have used this as an opportunity of leverage to fight for some of the losses that happened with the passage of H.R. 1 which is the same as the Big Beautiful Bill. The impact of the state of Michigan is approximately over the course of a 10-year period of time it is estimated to top about \$13 billion in Medicaid losses, another \$90 million in SNAP losses and in behavioral health about \$400 million in losses. There are three senators who have voted with Republicans to reopen the government, they need 60 votes to do it, but the great majority of the Democrat Senators have held strong to see if they can get back some of the gains that were lost. People will still keep getting their Medicare and Medicaid benefits. However, when it comes to the social safety net programming that our constituents depend on the state will pick up the cost of many of those programs with the hope that they will get reimbursed. The state of Michigan got through a budget process where they had to replace about \$2 billion in lost revenue during the course of the budget debate, so it is questionable whether or not those resources are there to help pay for their services right now and then get reimbursed later. If the government shutdown goes on a little longer we may see some of the programming getting lost.

Ms. R. Belcher, Partner, Public Affairs Associates, reported that the state of Michigan actually does have a budget in place; it came in seven days late, as the deadline for having a budget in place was October, and that the state of Michigan would be headed for a shutdown as well. There were some lawmakers that actually seemed to talk about it as something that they wanted to do, they wanted to shut down the state government, however the Governor was able to convince them that that was not in the best interest of the state of Michigan and so they were able to come up with an agreement; it did take a continuation budget that lasted up to October 7<sup>th</sup>. The governor signed the budget, which is approximately \$7 billion less than last year's budget, partly due to the loss of federal funds of around \$5 billion. There were some wins and losses for the Republicans. They have a slightly smaller state budget, and there was a reduction in ghost state employees, which were unfilled positions within the Department of Health and Human Services and EGLE, our environmental department. There was more funding directed to roads, which was a priority for Governor Whitmer. The House Republicans took on that problem as well, and they were able to strike a deal to include \$1.85 billion in new funding for roads, so it was a big win for both the governor and House Republicans. Another priority was transparency in the legislative process regarding earmarks, which are line items at the end of the budget that allocate funds to specific programs. Last year, there were \$850 million in earmarks; this year, there were only \$120 million in earmarks. They were successful in reducing the number of earmarks and making the process more transparent. Now, one has to file a request for funding, which involves some detailed paperwork explaining how the funds will be used. Ultimately, the Senate agreed to it, and there is now a joint House and Senate program to make the process more transparent.

The Democrats won on the issue of free breakfast and lunch for K-12, which was important to the Governor as well as the Democrats. They also continued their investments in healthcare, low-income housing and the social safety net. This was important for Democrats, and they wanted to make sure they were protecting those programs on the state level. They were able to have a 25% increase in at-risk funding for high-poverty school districts and additional funding for English learner programs. The

budget was put together in three days; there will probably have to be a supplemental to correct some of the mistakes that were made. The Health and Human Services budget had about a 2% reduction. Director Hertel feels confident that she can find the money for the Crisis Stabilization Unit, as well as DWIHN and a West Michigan program called Network 180, which will fund those programs. They are not confident that any of the new programs being discussed throughout the state will receive funding at this time; so they are going to have to hit a pause button.

Another hot-button issue was what was going to happen with the re-bid of the PIHPs. There were many stakeholders who were trying to get boilerplate in that budget to stop that process; they were not successful. The House Republicans had put boilerplate in to encourage them to move the process forward, which was not retained either, so the budget is silent on the issue; reflective of the fact that there was a court decision pending out there and they did not want to opine or make a position when it was in the courts. We found out yesterday that the department is able to move forward, and they are planning on moving forward with the rebid process as a result of that court. They are a little concerned overall with the cost of the actual soundness, as far as cost fluctuation in the cost of services. They are going to closely watch the rate adequacy of all their programs, it is good news as the programs can continue. The Governor was pleased that the costs were minimal, and there were no cuts to behavioral health or mental health services. Mr. White noted that he would be providing information during his report. Dr. Tauzeg thanked both Mr. Sanders and Ms. Bechler for the report and noted that she was pleased to hear that the school breakfast and lunch programs would be fine.

Dr. Tauzeg, Board Chairperson, noted the agenda had been modified and Unfinished Business – Staff Recommendations was next. Legal had advised that under Unfinished Business that items B-F would need to be deferred to the November meeting. A motion was requested. **It was moved by Mr. Glenn and supported by Commissioner Kinloch to defer items B. BA#26-10 (Revised) Substance Use Disorder (SUD) Health Homes FY2026; C. BA#26-12 (Revised) Substance Use Disorder Treatment Provider Network FY26 Michigan Certification Board for Addiction Professionals (MCBAP) Test Preparation; D. BA#26-12 (Revision 1) Substance Use Disorder (SUD) Treatment Provider Network FY2026; E. BA#26-13 (Revised) Substance Use Disorder (SUD) Prevention Provider Network FY2026; F. BA#26-14 (Revised) Detroit Wayne Integrated Health Network Provider Network System FY2026.** There was no further discussion. **Motion carried.**

#### **Unfinished Business - Staff Recommendations**

**A. BA#26-02 (Revised) – Detroit Wayne Integrated Health Network FY26 Operating Budget** – Ms. S. Durant, VP of Finance reporting. Board approval is requested to amend the FY2026 Operating Budget as follows: 1. Decertify Block Grant revenue and related expenditures of \$68,055 for changes to the Infant & Early Child Mental Health Program; 2. Certify additional Medicaid/ISF reserves totaling \$821,062 to cover the following expenditures: a) Salaries and Fringes totaling \$571,062: \$14,451- Upgrade Administrative Assistant to Communications Liaison (Communications Department); \$11,605 – Upgrade two employees to Department Administrators (Grants & Community Engagement); \$545,006 – New positions (Grants & Community Engagement) – 1 Community Wellness Liaison; 2 Clinical Specialists; 1 Data Analyst; and 1 Research Associate b. \$250,000 for medical billing claims and auditing services contract approved under Board Action #25-22. The amended FY2026 Operating Budget consists of the following revenue: \$913,681,798 – Medicaid DHS Incentive, Medicaid-Autism, Children's/ SED Waiver, HAB, and HRA; \$128,145,664 – Healthy MI Plan and HRA; \$3,138,061 – MI Health Link; \$21,460,901 – State General Funds; \$23,486,447 – Wayne County Local Match Funds and PBIP; \$5,313,698 – County



PA2 Funds; \$54,560,198 – State Grants (MDHHS/MDHHS SUD, OBRA); \$24,185,448 – Federal Grants (MDHHS/MDHHS SUD, SAMHSA); \$774,875 – Local Grants; \$6,260,000 – Interest Income; \$40,000 – Miscellaneous Revenue; \$15,854,854 – Medicaid/Local Reserves. The Chair called for a motion. **It was moved by Mr. Phillips and supported by Mr. Glenn approval of BA#26-02 (Revised) FY2026 Operating Budget.** There was no further discussion. **Motion carried.**

## **New Business**

### **Staff Recommendations**

- A. BA#26-15 MMRMA Insurance Renewal** – Ms. Y Turner, VP of Legal Affairs reporting. The Detroit Wayne Integrated Health Network (“DWIHN”) is requesting approval to contract with the Michigan Municipal Risk Management Authority (“MMRMA”) to provide comprehensive liability, casualty and property insurance for all DWIHN owned real property and equipment from 10/1/2025 through 10/1/26. The total premium payment is in an amount not to exceed \$360,238.00. The Chair called for a motion. **It was moved by Mr. Parker and supported by Mr. McNamara approval of BA#26-15 MMRMA Insurance Renewal.** There was no further discussion. **Motion carried.**
- B. BA#26-27 Jail Diversion FY26** – Ms. A. Smith, Associate Vice President, Network Innovation and Community Engagement reporting. Detroit Wayne Integrated Health Network is requesting a continuing contract with the following providers for jail diversion programs: Central City Integrated Health (CCIH) – Homeless Outreach; CNS Healthcare – Co-Responder Program; Team Wellness – Co-Responder Program and City of Southgate 28<sup>th</sup> District Court Regional veterans Treatment Court. The total number is not to exceed \$1,305,000 of which \$905,000 will be allocated to providers with the remaining \$400,000 allocated to DWIHN to fund Behavioral Health Specialists. Funding breakdown is as follows: \$225,000 Central City Integrated Health: CCIH is continuing with Detroit Homeless Outreach (DHOT) program, to bridge the gaps that exist between the police, homeless, and service providers. \$300,000 CNS HealthCare and \$300,000 Team Wellness: Providers CNS Healthcare and Team Wellness will continue a Co-Response Program model in multiple precincts within the Detroit Police Department. The program is founded on the basis that by working together, behavioral health specialists and law enforcement can respond appropriately to the needs of individuals in the community who are in crisis. \$800,000 Southgate 28<sup>th</sup> District Veterans Court: The City of Southgate 28<sup>th</sup> District Court Downriver Regional Veterans Treatment Court is a jail diversion program for individuals who have served in the United States Armed Services. Participants will receive mental health treatment, peer support, judicial supervision, medication, job placement, and education. \$400,000 DWIHN Staffing (salaries and fringes): Behavioral Health Specialists will be allocated to local police departments to assist in patrolling hot spot locations frequented by homeless, with mental health or substance abuse issues. Funds can be allocated amongst providers should the need arise so long as the total does not exceed \$1,305,000 for the fiscal year ending September 30, 2026. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Mr. Phillips approval of BA#26-27 Jail Diversion FY26.** There was no future discussion. **Motion carried.**
- C. BA#26-28 Detroit Wayne Integrated Health Network FY26 PA152 Waiver** – Ms. S. Durant, VP of Finance reporting. DWIHN presents this board action to request an exemption from PA152 of 2011 (the “Act”) to permit DWIHN (i.e. employer) to subsidize the healthcare coverage for the upcoming 2026 plan year for an estimated amount of \$1,768,685 based on 532 employees, which represents an estimated 87% DWIHN employer and 13% employee contribution. The



aforementioned contemplates the employees bearing 95% of the 2026 plans 3.5% increase. The amount of the waiver will vary depending on the number of staff and the benefit selected; however, the percentages will remain consistent. The waiver allows DWIHN to remain competitive with the provider network in hiring for positions in a limited market. DWIHN's administration has worked closely with Lockton, our benefits broker, to secure quality and low-cost health care for staff. Last year, the broker requested quotes from the other two health plans; however, they refused to submit an offer due to lack of a competitive rate compared to the current carrier. Therefore, despite our best efforts, the cost of medical healthcare coverage for the staff under Blue Cross Blue Shield/BCN represents the most competitive rates available. The broker did not seek other options in 2026 given that the plan incurred a minimal 3.5% rate increase. According to the broker, they were experiencing double-digit increases with other organizations. Due to restrictions under the Act, 100% of the amount in excess of the hard cap must be borne by employees. Approval of the board action would allow a waiver of the hard cap provision and permit DWIHN to fund the aforementioned amount above the hard cap. This Board Action must come before the Board each year prior to the open enrollment period and is not automatically extended beyond the date indicated 12/31/26, with two-thirds approval by the governing body each year, Section 8 of the Act allows the employer to exempt itself from the imposition of the hard cap. The Chair called for a motion and noted that a roll-call vote was required. **It was moved by Ms. Bullock and supported by Mr. Glenn approval of BA#26-28 Detroit Wayne Integrated Health Network FY26 PA 152.** There was no further discussion. The Board Secretary, Ms. Garza Dewaelsche took a roll call vote. **Motion carried with Ms. Bullock; Ms. Garza Dewaelsche; Mr. Glenn; Commissioner Kinloch; Mr. McNamara; Mr. Parker; Mr. Phillips; and Dr. Taueg voting Yea.**

- D. BA#26-29 Department of Health and Human Services (DHHS) Donated Funds Agreement DFA 26-82009 FY26.** Ms. Rai Williams, Director Contract Management reporting. The Detroit Wayne Integrated Health Network (DWIHN) staff recommends approval of a one year contract between the DWIHN and the State of Michigan Department of Health and Human Services (DHHS) to continue the (DHHS) Outstation Services in Wayne County and the placement of (6) Medicaid Eligibility Specialists. This agreement was established through the State Donated Funds Agreement (DFA) to assist facilitate timely enrollment of Detroit Wayne Integrated Health Networks members for Medicaid eligibility. Placement of the six (6) DHHS workers has resulted in a more timely processing of Medicaid eligibility applications, determination of deductible adjustment and enrollment in the Medicaid Program. The program also helped to expedite enrollment in Medicaid for the provision of services and benefits for persons either eligible and/or receiving behavioral health services in Wayne County. This contract also helps DWIHN to realize a more effective use of State General Fund and to demonstrate the provision of improved supports and access for uninsured consumers. The state of Michigan is the sole administrator of the State Medicaid services; therefore, there has been no solicitation of other providers. The term for this contract is from October 1, 2025 through September 30, 2026. Funding for this contract is not to exceed \$453,900. Funding is subject to availability of funds as determined by DWIHN. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Ms. Bullock approval of BA#26-29 Department of Health and Human Services (DHHS) Donated Funds Agreement DFA 26-82009 FY26.** There was no further discussion. **Motion carried with Mr. Phillips abstaining.**

- E. BA#26-30 Juvenile Restorative Program** – Ms. C. Phipps, Director of Children’s Initiatives reporting. DWIHN is seeking approval for Team Wellness to receive a (1) one year renewal contract for FY26 (October 1, 2025 – September 30, 2026) to deliver the Juvenile Restorative Program as a result of the Request for Proposal, in which Team Wellness was awarded the bid. Team Wellness to receive an amount not to exceed \$1,900,000 for FY25. Approximately \$1.6 million is related to Medicaid claims based on services. The amount serves as an estimate and actual costs could differ. The remaining \$300,000 allocation relates to jail diversion costs as defined in the CMHSP and PIHP contracts, however is considered administrative costs yet excluded from MLR calculations per the 42 CFR 158. The Juvenile Restorative programming provides comprehensive, integrative behavioral health services that work in conjunction with the juvenile justice system for pre-adjudicated and adjudicated youth ages 12 to 18. The purpose of the alternative program is to help the youth to appropriately respond to the covert, as well as the overt, influencers and social determinants that impact whether they exude behavior that is deviant or normed. Defiance, truancy, violence and the abuse of alcohol and/or other drugs, mental illness, childhood trauma, family dysfunctions, or other indicators and their related criminal and/or civil judicial actions are directly treated in order to reduce recidivism and further involvement in the juvenile justice system. Requesting approval to reallocate funds as needed without board approval for FY25. Discussion ensued regarding the number of juveniles served versus monies available for the program. State started new programs and youth have been diverted into other programs, the numbers have been reduced. We can get youth from other programs. This program requires more staffing because of the youth. There will be more information provided in the end of year report that will be given in November. The Chair called for a motion. **It was moved by Mr. Phillips and supported by Ms. Bullock approval of BA#26-30 Juvenile Restorative Program.** There was no further discussion. **Motion carried with Mr. Parker abstaining.**
- F. BA#26-34 ASE – Leadership Training/Pre-employment Services** – Mr. J. Connally, VP of Human Resources reporting. The Detroit Wayne Integrated Health Network (“Network”) is requesting a new agreement with the American Society of Employers (ASE) for leadership training services and pre-employment services in an amount not to exceed \$270,000 for a period of October 1, 2025 – September 30, 2026 (former contract approved on Board Action #24-48 and BA#24-48 (Revision 1). Approval of this board action would allow a continuation of the previous agreement and services with ASE to allow ASE to continue to provide supervision training for executive leadership, directors, managers and supervisors at DWIHN, as well as provide pre-employment services such as drug screens and background checks. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Ms. Bullock approval of BA#26-34 ASE Leadership Training/Pre-Employment Services.** There was no further discussion. **Motion carried.**
- G. BA#26-35 Government Administrators Association Contract (GAA)** – Mr. J. Connally, VP of Human Resources reporting. DWIHN Administration is requesting board approval of the CEO’s recommendation to execute the Collective Bargaining Agreement between Government Administrators’ Association (GAA) and Detroit Wayne Integrated Health Network, for the contract period 10/1/24 – 9/30/27. The Chair called for a motion and noted that a roll-call vote would be required and taken by Ms. Garza Dewaelsche, Board Secretary. **It was moved by Commissioner Kinloch and supported by Mr. Glenn approval of BA#26-35 Government Administrators Association Contract (GAA).** There was no further discussion. **Motion carried**

with Ms. Bullock, Ms. Garza Dewaelsche; Mr. Glenn; Commissioner Kinloch; Mr. McNamara; Mr. Parker; Mr. Phillips and Dr. Taueg voting Yea.

## **BOARD COMMITTEE REPORTS**

### Board Chair Report

Board Chairperson, Dr. Taueg provided a verbal report. It was reported that the National Council for Mental Wellbeing Hill Day was held in Washington on October 7<sup>th</sup> & 8<sup>th</sup>, and Commissioner Kinloch was in attendance. He reported that the legislative advocacy focused on mental health and substance use disorder services. The conference covered four main areas: CCBHC legislation that expands access to comprehensive care, creating healthcare jobs through substance use disorder bills, aimed at maintaining Medicaid coverage during incarceration and reentry, and appropriations advocacy, emphasizing the adequate funding for mental health programs is cost-effective by preventing more expensive crisis care. It was very well attended, with individuals from across the country attending, and we were able to meet with members of the U.S. Congress, both House and Senate, as well as their staff.

The Community Mental Health Association of Michigan Annual Fall Conference will be held in Grand Traverse, Michigan October 27<sup>th</sup> & 28<sup>th</sup>. There are board members scheduled to attend and we ask that feedback be provided during the November meeting,

The National Council for Mental Wellbeing NatCon26 will be held April 27 – 29 2026 in Denver, Colorado. There are several board members who have requested to attend. We should be well-represented with board and staff members in attendance.

The Mackinac Policy Conference is in May 2026. This should be a vibrant conference with all of the elections that will have taken place. Several board members and DWIHN staff members are scheduled to attend.

### Executive Committee

Dr. Taueg, Board Chairperson, provided a verbal report. It was reported that the Executive Committee met on Monday, October 13, 2025. The Board Study Session has been solidified for Friday, November 21, 2025. It was noted that the Compliance Training that was scheduled for Wednesday, November 17, 2025 at 3:15 p.m. has been moved to the Board Study Session and the start time for the Board Study Session is now 10:00 a.m. instead of 9:00 a.m. and will end at 3:00 p.m. The Board Study Session will be held at the Wayne County Community College District – Northwest Campus. The Chair called for a motion to move the Board Study Session from October to November. **It was moved by Commissioner Kinloch and supported by Ms. Garza Dewaelsche to move the Board Study Session from October to November.** There was no further discussion. **Motion carried.**

The Metro Region meeting will be hosted by Detroit Wayne Integrated Health Network and is scheduled for Thursday, December 4, 2025. It will be a hybrid meeting and typically starts at 6:00 p.m. More information will be provided at a later date.

Dr. Taueg, Board Chairperson, called for the Finance Committee report.

#### Finance Committee

Mr. B. Parker, member of the Finance Committee, provided a verbal report on behalf of Mr. K. McNamara, Vice Chairperson of the Finance Committee and in the absence of the Finance Chairperson Ms. D. Brown. It was reported that the Finance Committee met on Wednesday, October 1, 2025. The committee had two follow-up items that would be provided today when the Communications Quarterly report is given. The report of the VP of Finance was provided. It was reported that the Michigan Department of Health and Human Services Audit Bureau is conducting a review of DWIHN for the period of October 1, 2022, to September 30, 2024. This a desktop review of specific grants, the department has not conducted a review of DWIHN in over 10 years since we separated from the County. Michigan Department of Health and Human Services cost-settled financial status reports through September 30, 2023. They have cost settled three fiscal years during FY 2025 for 2021, 2022, and 2023. The item that was passed PA152 was discussed and moved on and was approved by the full board earlier in the meeting. Cash flow remains stable and sound and should continue to remain so throughout the year. There was no further discussion. The report of the Finance Committee was received and filed.

Dr. Taueg, Board Chairperson called for the report of the Program Compliance Committee.

#### Program Compliance Committee

Commissioner Jonathan C. Kinloch, Chair of the Program Compliance Committee, provided a verbal report. It was reported that the Program Compliance Committee met on Wednesday, October 8, 2025. Dr. Carter, Vice Chairperson, chaired the meeting as he was in attendance at the National Council Hill Day held in Washington D.C. The committee received a follow-up item from Crisis Direct Services quarterly report on the trends and impact of suicidology for black youth aged 13. The committee has requested information on the Zero Suicide Initiative. The reports of the Chief Medical Officer and Corporate Compliance were provided. Dr. Faheem reported that DWIHN received preliminary results of its external quality review by the Health Services Advisory Group, where a total of 145 elements were reviewed. DWIHN met compliance with 140 elements with a perfect score of 100% in 6 of 8 categories; over 90% was received in the other two categories, and an overall compliance percentage of 97% was received, which is not only a high score but compared to previous years, reflects a very positive trend in several areas, indicating our focus towards continuous quality improvement.

Corporate Compliance reported that it has shown a consistent investigative activity over the past four quarters. Case openings peaked in January through March 2025 with 22 cases before stabilizing in subsequent quarters in the third quarter. In the third quarter there were 13 cases open and in the fourth quarter, there were 15 cases open. Case closures have remained steady at 16 and 17 per quarter since April. Financial recoupment fluctuated significantly, ranging from \$22,252.47 in Quarter 1, 2025 to a high of \$248,576.66 in Quarter 2 and \$239,709.95 recovered in the most recent quarter. These results demonstrate ongoing productivity and substantial financial recoveries for the Medicaid program. The total recoupment across four quarters was \$603,575.45. Quarterly reports and department overviews were received from Adult Initiatives, Crisis Direct Services, and PIHP Crisis Services. Utilization Management provided its quarterly report, as their department overview was given at an earlier meeting. Quality provided an update on the Quality Assurance Performance Improvement Plan FY2025 and reported on two main activities during Quarter 4, which were the Michigan mission-based performance indicators for Quarter 3 and the Health Services Advisory Group activity. The Associate Vice President of Clinical Operations gave a brief report on autism services where the State of Michigan is asking PIHPs to implement an autism risk metrics, which is a new tool designed to increase transparency and accountability in the state's behavioral healthcare system. It was also reported that the Children's

Initiatives Services hosted a two-day in-person Strengthening Families training at the Guidance Center in Southgate. This was an important investment in our provider network and workforce; 28 attendees representing six provider agencies came together to learn evidence-based strategies that strengthen parent-child relationships, improve communications and reduce risky behaviors among youth. The committee reviewed and moved for full board approval two board actions under unfinished business and three board actions under new business. There was no further discussion. The report of the Program Compliance Committee was received and filed.

Dr. Taueg, Board Chairperson called for the report of the Recipient Rights Advisory Committee.

#### Recipient Rights Advisory Committee

Ms. Polly McCalister, Director of Recipient Rights reported on behalf of Ms. Ruth, Committee Chair, Recipient Rights Advisory Committee (RRAC) that the Recipient Rights Advisory Committee did not meet during the month of October. The next meeting is scheduled for November 14, 2025.

Dr. Taueg, Board Chairperson called for the Policy/Bylaw Committee report.

#### Policy/Bylaw Committee

Mr. Phillips, Committee Chair reported the next Policy/Bylaw Committee meeting was scheduled for November 12, 2025 and will be held following the Program Compliance Committee meeting. A report will be provided after the meeting.

### **SUBSTANCE USE DISORDER (SUD) OVERSIGHT POLICY BOARD REPORT**

Mr. Adams, SUD Oversight Policy Board Chair, reported that the SUD Oversight Policy Board was scheduled to meet on October 20, 2025 and there was no report.

### **AD HOC COMMITTEE REPORTS**

#### Strategic Plan Committee

Dr. Taueg, Board Chairperson called for the Strategic Plan Committee report. The Strategic Plan Committee did not meet in October. There was no report.

Dr. Taueg, Board Chairperson called for the Board Building Committee report.

#### Board Building Committee

The Committee Chair, Mr Parker reported that the Board Building Committee did meet during the month of October. The board building community met on Wednesday, October 1<sup>st</sup>, 2025. All things are going well at the buildings. There are no concerns at 707 W. Milwaukee or this building, the Administrative Building. At the 7 Mile building the final beam was put on the structure, there was a program and some board members were in attendance and that is moving forward as planned and is on schedule. There were some change orders, but they are all within the contingency amount and we did not have to take any action on those. The Inkster and Catholic Services buildings both have RFP's that were issued and they are in the process of being reviewed at our November meeting. We will be looking for the recommendations of who will be providing services for those building. The Wyandotte Crisis Center has been placed on hold, they are doing a survey of the community and other areas in Wayne County to see if that is the best place for us to put the center so we are awaiting for the response to come back. The next meeting is scheduled for Wednesday, November 5, 2025 and those items will be considered at that time. There was no further discussion. The report of the Building Committee was received and filed.

Dr. Taueg, Board Chairperson called for the President and CEO Monthly Report.

## **PRESIDENT AND CEO MONTHLY REPORT**

Mr. White, President and CEO, provided a written report for the record. Mr. White noted that he would be providing an update on the Crisis Care Center, the Integration Health Pilot, the CCBHC, Long Term Residential Care and the status of the RFP. It was reported that the Crisis Care Center has had a number of developments, the Care Center opened the Behavioral Health Urgent Care Unit (BHUC) on the 3<sup>rd</sup> floor of 707 W. Milwaukee on October 1<sup>st</sup>. This expansion further diversifies our 24-7 programs and better aligns services with the broad needs of our community.

The integrated health pilot continues this partnership with Medicaid Health plans to provide integrated health care and that care coordination meeting is conducted monthly. As the board is aware, we have anonymized the health plan, we met with Health Plan 1 and Health Plan 2. DWIHN and the health plans identify areas and gaps to improve and close those gaps within 90 days. Health Plan 1 and Integrated Health Care Service (IHC) met in September for a care coordination meeting and reviewed 16 members; 3 members without an assigned provider were connected to services. Health Plan partner 2 reviewed 13 members in September, where gaps were identified and two were connected back to plans. Recent development is on September 8<sup>th</sup>. Dr. Faheem, S. Sharp, D. West, R. Morgan, and V. Politowski all met with a new health provider to discuss expanding the collaboration, which is very positive.

The CCBHC has state approval. We are awaiting final approval. We suspect that it is going to move forward a little bit more consistently now since the RFP's have been submitted.

There has been good news on our long-term residential care with Trillium; things are moving along quite well. Framing is complete for the high acuity unit and has moved to the geriatric unit side. The momentum remains strong. It was thought that we would not meet the date as promised earlier at the end of this year, but it should be early spring, late winter before it is opened. There has been a lot of construction activity.

Mr. White noted that he was proud to announce that we have completed our proposal and submitted it within the time frame. It was uploaded on Monday, and we received a notification that it has been received. There has been a development in the legal challenges facing the RFP. The court has determined that MDHHS does in fact have the authority to shift to a comprehensive procurement model for Medicaid behavioral health services and that the state can reduce the number of PIHP regions. However, the court also indicated that it could not issue a final decision in the case before the RFP as it may run afoul of Michigan law in certain aspects, such as assigning functions to PIHPs that belong to the local CMHs. In summary, the Court of Claims issued a decision that determined that MDHHS has the unilateral authority to shift to a comprehensive procurement model. There still remains an issue that has to be resolved in the courts, barring no stoppage from the judge we anticipate receiving a final decision by the end of this year. The anticipated day of the contract signature, the start of the transition period is still Tuesday, February 24, 2026 with the contract effective date and services beginning Thursday, October 1, 2026. There is a lot going on in the court system as we await the final determination of the judge. He noted that he wanted to thank once again everyone on the team, who contributed a lot of their time, effort and energies to this process, but it has been an arduous process. Lots of hard work has gone into it, and most importantly, no service delivery has suffered as a result of the work that has gone into this process. On October 9<sup>th</sup>, at the Crisis Center he, participated in an interview with Fox 2 News, discussing a very innovative program that is operating out of the Crisis Center in the Detroit Police Department where those nonviolent folks that are in crisis can get direct services or direct contact with our crisis center and not the police. Our crisis center, mobile crisis is responding to those scenes and providing the services to the folks that much needed help that they require. On October 6<sup>th</sup> we attended a Metro Detroit Business Recognition Luncheon. It was a fantastic event, congratulations were given to Board member Dewaelsche for that

presentation, it was beautiful, and a lot of awards were received, which were well earned and deserved. On October 2<sup>nd</sup> they went to the Crisis Center twice during that week in the evening, they met with VP G. Wolf at 7:00 p.m. that night and we presented them along with the Communications team pins and plaques for the 2,380 people that they have served in the first year of opening. Ms. Blackwell was there as well and supported the efforts. On September 29<sup>th</sup> we had a Take Back Box unveiling and that was very nice as well. These drug boxes are going to every precinct in the city of Detroit and the program will be expanded, once we measure the success it will have in the city of Detroit. On September 26<sup>th</sup> the topping out ceremony was a huge success and on September 25<sup>th</sup> the Constituents' Voice Dreams Come True Luncheon was held. This event was also very well attended and had a beautiful program. The work continues and everyone here has done an amazing job. We will keep the board apprised as we get information on the RFP decision. Discussion ensued regarding the decision on the impact on the CMH's. It was reported that there were two major developments in this process, it was the state's summary disposition motion where the court determined that MDHHS has the legal authority to shift to a competitive procurement system and reduce the number of regions, so that was resolved. The court also held that there is an issue of fact on whether the RFP violates Michigan law and they are looking at that now. Because there is an issue of fact, the case is not decided in full yet. The judge is going through and looking at all of the supporting documents that have been provided and will render a decision on that. He cites in his action that the RFP assigning PIHPs functions that belong to the CMHSPs under MCL330, 1206 and he cites that Medicaid funds are essential to the CMHSPs carrying out their responsibilities. These are the two key issues among others and he is committed to having a decision by the end of the year, which is before the determination of who is going to get the RFP's.

Ms. Blackwell noted that at the Fall Conference in Traverse City DWIHN will be playing a big role with several key workshops, from our VP of Crisis Services VP G. Wolf and President and CEO Mr. White talking about our crisis care system. Also, the SUD Health Homes will have a huge workshop on our Youth United program and our children's programs on shaping our future leaders. In addition to that our very own Dr. Cynthia Tauzeg will be recognized for having 20 years of service, serving this organization and being a board member with DWIHN – surprise and congratulations and thank you for your service.

Dr. Tauzeg thanked Ms. Blackwell for the recognition, and also to Mr. White and his team for all the activity around the RFP while continuing to serve those most in need in our communities. On behalf of the Board of Directors she gave kudos for all of the work that he and his team were doing to keep DWIHN in the center of providing care to those in need.

For the record, Mr. White thanked Dr. Tauzeg and noted that he publicly wanted to thank Mr. Manny Singla, Deputy CEO and Ms. Yolanda Turner, VP of Legal Affairs and that he has gotten to know them much more than he thought he would given the amount of time he has had on the job but he has spoken to them on weekends, afternoons and anytime and they have been supportive of him personally and it has been very much appreciated. He wanted the board to know of their hard work, that he has a great, phenomenal team, but he leaned heavily on both of them day in and day out and they got it done. There was no further discussion. The monthly report of the CEO was received and filed.

Dr. Tauzeg, Board Chairperson called for the Communications Quarterly Media Report.



### **Communications Quarterly Media Report**

Ms. Dayna Clark, Director of Communications, provided a written report for the record. It was noted that a couple of items, the topping out ceremony and the Take Back Boxes, had been previously reported on. It was reported that there is a WJR Wellness Wednesday. We have been partnering with them for a 13-week campaign, where each week we feature a different VP or expert from their respective departments. On September 10<sup>th</sup>, we had the Network Innovation Community Engagement Administrator, Mr. Trent Sanford, who spoke on World Suicide Prevention Day, and on September 25<sup>th</sup>, Children's Initiative Director Ms. Cassandra Phipps did a story on children's mental health for back to school.

The topping out ceremony was a great success, and was mentioned several times on Channel 4 and Fox 2, which covered the event. Community members, leaders, and residents in the neighborhood came out. We got a wonderful chance to sign the beam and it was very special. The proposed completion for the campus is Fall of 2026. In case you missed it there is a video recap. The brief video was played and in part showed both Mr. White and Dr. Taueg welcoming folks to the event and welcoming us into their community. It was noted that the behavioral health campus will be 70,000 square feet, will add an additional 52 crisis beds to the community and will be a one-stop shop for wellness and will serve the whole body. It will be a great addition to their community. It will serve the whole body. This moment marks more than just the start of a ballgame, it represents the start of greater access to mental health resources right here in our community. On behalf of the youth of Wayne County, whose voices he was honored to represent he could confidently say that our missions are aligned, supporting health, well-being and the future of our young people. The video received a lot of engagement on our social media.

On Monday, the Take Back Box unveiling occurred; last year 6 million pills were diverted to drop boxes, avoiding sewer systems or ending up in the hands of children. To help prevent drug misuse, DPD and Youth Connection unveiled the prescription drop boxes on October 29<sup>th</sup>. Several outlets attended the press conference. Channel 4 also did a story live in the studio the next day, on October 30<sup>th</sup>. The boxes are stationed at all DPD precincts for residents to safely dispose of over-the-counter drugs, vitamins, prescription medications and other medications 24 hours a day.

It was reported that the fourth quarter media metrics for radio, TV, print online had a total of 164 mentions. The audience reached 5 million people, the value is \$113,000. The quarterly comparison, total mentions this quarter almost doubled up to 164 with last quarter reported at 80; the audience dropped somewhat as well as the value and that is because in the third quarter we had larger initiatives like the coverage of the Mackinac Policy Conference and the unveiling of the mobile health clinic, which was reported in the June report. The Access Call Center related to outreach reported a total number of calls in the fourth quarter of 47,555; those who answered the question of "How did you hear about us" totaled 46,075; "Did you see a bus or billboard advertisement" that number is up from 127 to 169. Callers were also asked about our flyers, TV, radio, social media or the App and that number greatly increased from 389 to 428. Social media performance greatly increased; our number of followers increased by 1,000 in the fourth quarter as opposed to 10,000, now up 11,047. The audience grew from 371 to 551. Our engagement, our link clicks, and impressions were down slightly; we have to remember that engagement does fluctuate depending on what is going on in people's lives. In the third quarter, engagement increased due to the Zoo Partnership and the launch of our mobile health clinic.

It was reported that Westcom from 2023 to 2025 did show growth; on Facebook we are up 3.8 thousand followers, we are now at 10,000 followers. On LinkedIn, 1.5 thousand followers and that is an increase

as well and on Instagram we are up 1,000 followers. There was a comparison of other CMHs to DWIHN, it was reported that Oakland Community Health Network (OCHN) on Facebook have 3,700 followers; DWIHN has 10,000 followers. On LinkedIn OCHN has 3,000 followers, DWIHN has 5,100 followers; on Instagram OCHN has 249 followers and DWIHN has over 5,000. The numbers were also provided for Macomb County Community Mental Health. It was noted that we did a comparison with other states that were about the same size, Milwaukee Health Department which is closer to us, has 9,000 followers on Facebook, 1,000 on LinkedIn and 165 on Instagram. The Washington, D.C. Department of Behavioral Health which is closest to us has 900 followers on Facebook, and 993 on LinkedIn. On Instagram they have 6524 which is higher than our number.

It was reported that for community outreach in the fourth quarter, we had 23 events and reached an estimated number of 5,255, which is up from the 860 individuals reported during the third quarter. An update was provided on the effectiveness of the billboards. Research was done by the Out of Home Advertising Association of America, which is a national study. It does show that 88% of adults have seen ads in the past 20 days; 76% of consumers took action on their phone after seeing an outdoor ad, and outdoor ads are four times more effective than digital, video or broadcast TV. Outfront with impressions for the last fiscal year reached 50,725,212 vehicles.

The board was invited to attend the upcoming 2<sup>nd</sup> Annual Trunk or Treat event, scheduled for Thursday, October 30<sup>th</sup>. Dr. Taueg thanked Ms. Clark for the report, noted that it was quite impressive and they really appreciated the comparisons, seeing where we stand and knowing our reach. There was no further discussion. The Quarterly Media Report of the Communications Department was received and filed.

**PROVIDER PRESENTATION** – There was no Provider Presentation for the month of October.

**REVIEW OF ACTION ITEMS** – There were no action items to report.

#### **GOOD AND WELFARE/PUBLIC COMMENT**

Dr. Taueg, Board Chair called for Good and Welfare/Public Comment. The Good and Welfare/Public Comment Statement was read. There were no members of the public expressing an interest in addressing the Board.

Mr. Singla, Deputy CEO, informed the Board that Ms. Lisa Dunn, one of DWIHN's Provider Network Managers in Managed Care Operations, passed away. She was a pleasure to work with, an exceptional soul, and just a very good individual and human being, apart from being a very good worker. He requested that Lisa's family be kept in our prayers through this tough time.

#### **ADJOURNMENT**

There being no further business, Dr. Taueg, Board Chairperson, called for a motion to adjourn. **It was moved by Ms. Bullock and supported by Ms. Garza Dewaelsche to adjourn.** There was further discussion. **The motion carried unanimously.** The meeting was adjourned at 2:28 p.m.

Submitted by:  
Lillian M. Blackshire  
Board Liaison

# FINANCE COMMITTEE

## MINUTES

OCTOBER 1, 2025

1:00 P.M.

8726 WOODWARD AVE.  
DETROIT, MI 48202  
(HYBRID/ZOOM)

### MEETING CALLED BY

Ms. Dora Brown, Chair, called the meeting to order at 1:05 p.m.

### TYPE OF MEETING

Finance Committee Meeting

### FACILITATOR

Ms. Dora Brown, Chair

### NOTE TAKER

Ms. Nicole Smith, Management Assistant to VP of Finance

#### **Finance Committee Members Present:**

Ms. Dora Brown, Chair  
Mr. Kevin McNamara, Vice Chair  
Ms. Kenya Ruth  
Ms. Eva Garza Dewaelsche  
Mr. Bernard Parker

**Committee Members Attending Virtually: None**

#### **Committee Members Excused:**

Ms. Karima Bentounsi

**Board Members Present: none**

**SUD Oversight Policy Board Members Attending Virtually: none**

**Board Members Excused: none**

### ATTENDEES

**Staff:** Mr. James E. White, President and CEO; Mr. Manny Singla, Deputy Chief Executive Officer; Ms. Stacie Durant, VP of Finance; Ms. Brooke Blackwell, VP of Governmental Affairs; Ms. Yolanda Turner, VP of Legal Affairs; Ms. Monifa Gray, Associate VP of Legal Affairs; Ms. Sheree Jackson, VP of Corporate Compliance; Mr. Mike Maskey, Executive Director of Facilities; Dr. Shama Faheem, Chief Medical Officer; Ms. Grace Wolf, VP of Crisis Care; Mr. Keith Frambro, VP of Information Technology; Ms. Dayna Clark, Director of Communications; Ms. Ebony Reynolds, Executive Director of Direct Services and Ms. Nicole Smith, Management Assistant of Finance; Andrea Smith, Associate VP of Network Innovation and Community Engagement

**Staff Attending Virtually:** Mr. Jeff White, Associate Vice President of Operations; Ms. Dhannetta Brown, Associate VP of Finance; Ms. Melinda Haner, Budget Administrator; Mr. Jody Connally, VP of Human Resources; Ms. Rai Williams, Director of Contract Management

**Guests:** None

### AGENDA TOPICS

**I. Roll Call** Ms. Lillian Blackshire, Board Liaison

**II. Roll Call**

Roll Call was taken by Ms. Lillian Blackshire, Board Liaison, and a quorum was present.

**III. Committee Member Remarks**

Ms. Brown, Chair, called for the Committee members' remarks. There were no remarks given by the Committee.

**IV. Approval of Agenda**

The Chair, Ms. Brown called for a motion on the agenda. **Motion:** It was moved by Ms. Dewaelsche and supported by Mr. Parker approval of the agenda. There were no changes or modifications requested to the agenda. **Motion carried.**

**V. Follow-up Items**

The Chair called for any follow-up items. Ms. Blackshire, the board's liaison, noted two items for follow-up. The first item was to provide information on Outfront Media and the additional services they provide to DWIHN. As well as provide information on the process. The second item was to provide an update on WestComm in 6 months. Both follow items are to be presented by Dayna Clark, Director of Communications at the October 2025 Full Board meeting, during the Communications Media Report.

**VI. Approval of the Meeting Minutes**

The Chair, Ms. Brown, called for approval of the minutes from the meeting on Wednesday, September 3, 2025. **Motion:** It was moved by Mr. McNamara and supported by Ms. Dewaelsche approval of the Finance Committee minutes from the meeting on Wednesday, September 3, 2025. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

**VII. Presentation of the Monthly Finance Report**

S. Durant, VP of Finance, presented the Monthly Finance report. A written report for the eleven months ended August 31, 2025, was provided for the record. The DWIHN Finance accomplishments and noteworthy items to report were:

MDHHS Audit Bureau is conducting a review of DWIHN for the period October 1, 2022-September 30, 2024 (2 fiscal years). Other than desktop reviews of specific grants, the department has not conducted a review of DWIHN in over 10 years when we separated from the County.

MDHHS cost settled financial status reports through September 30, 2023. They have cost settled three fiscal years during FY 2025 (2021, 2022, 2023).

Cash flow is stable and should continue to remain so throughout the year as liquidity ratio = 2.65.

Cash and investments – represent amount of cash held with three (3) investment managers, First Independence Bank, Flagstar and Huntington Bank. The increase in liquidity as compared to months prior to July is due to rate amendment #3 whereby Finance can confirm \$27 million in additional funding.

Due from other governments – comprise various local, state and federal amounts due to DWIHN. Approximately \$4.3 million in SUD block grant due from MDHHS. Approximately \$15.5 million for July and August pass-through HRA revenue.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through August 31, 2025, were approximately \$863.0 million. However, actual payments were approximately \$789.5 million. The difference represents claims incurred but not reported and paid \$73.5 million.

Local grants and contracts - \$5.9 million variance due to end year entry to recognize the PBIP awarded by MDHHS in late December 2025.

Contracted services – The \$13.3 million variance in Autism expenses compared to the budget is due to increased costs. It should be noted that DWIHN received \$118.7 million in Autism revenue for the same period.

The Chair, Ms. Brown, noted that the Finance Monthly Report was received and filed.

#### **The record reflects that Ms. Ruth joined the meeting**

#### **VIII. Unfinished Business – Staff Recommendations:**

**a. Board Action #26-02 (Revised) – FY 2026 DWIHN Operating Budget.** Ms. S. Durant, VP of Finance, The Detroit Wayne Integrated Health Network (DWIHN), is requesting Board approval to amend the FY 2026 operating budget as follows: Decertify Block Grant revenue and related expenditures of \$68,055 for changes to the Infant & Early Child Mental Health program. Certify additional Medicaid/ ISF reserves totaling \$821,062 to cover the following expenditures: a.) Salaries and Fringes totaling \$571,062: \$14,451 – Upgrade Administrative Assistant to Communications Liaison (Communications Department); \$11,605 – Upgrade two employees to Department Administrators (Grants & Community Engagement); \$545,006 – New positions (Grants & Community Engagement); 1 Community Wellness Liaison; 2 Clinical Specialists; 1 Data Analyst; 1 Research Associate. b.) \$250,000 for medical billing claims and auditing services contract approved under Board Action 25-22. The amended FY 2026 Operating Budget consists of the following revenue: \$913,681,798 - Medicaid, DHS Incentive, Medicaid-Autism, Children's/ SED Waiver, HAB, and HRA; \$128,145,664 - Healthy MI Plan and HRA; \$3,138,061 - MI Health Link; \$21,460,901 - State General Funds; \$23,486,447 - Wayne County Local Match Funds and PBIP; \$5,313,698 - County PA2 Funds; \$54,560,198 - State Grants (MDHHS/ MDHHS SUD, OBRA); \$24,185,448 - Federal Grants (MDHHS/ MDHHS SUD, SAMHSA); \$774,875 - Local Grants; \$6,260,000 - Interest Income; \$40,000 - Miscellaneous Revenue; \$15,854,854 - Medicaid/ Local Reserves. **Motion:** It was moved by Mr. McNamara and supported by Mr. Parker approval of BA #26-02 (Revised) – FY 2026 DWIHN Operating Budget to the Full Board. There was no further discussion. **Motion carried.**

#### **IX. New Business – Staff Recommendations:**

**a. Board Action 26-28 – DWIHN FY26 PA152 Waiver.** Ms. S. Durant, VP of Finance, presented. DWIHN staff to request an exemption from PA 152 of 2011 (the “Act”) to permit DWIHN (i.e employer) to subsidize the healthcare coverage for the upcoming 2026 plan year for an estimated amount of \$1,768,685 based on 532 employees, which represents an estimated 87% DWIHN employer and 13% employee contribution. The aforementioned contemplates the employees bearing 95% of the 2026 plans 3.5% increase. The amount of the waiver will vary depending on the number of staff and the benefit selected; however, the percentages will remain consistent. The waiver allows DWIHN to remain competitive with the provider network in hiring for positions in a limited market. DWIHN’s administration has worked closely with Lockton, our benefits broker,

to secure quality and low-cost health care for staff. Last year, the broker requested quotes from other two health plans; however, they refused to submit an offer due to lack of a competitive rate compared to the current carrier. Therefore, despite our best efforts, the cost of medical healthcare coverage for the staff under Blue Cross Blue Shield/BCN represents the most competitive rates available. The broker did not seek other options in 2026 given the plan incurred a minimal 3.5% rate increase. According to the broker, they were experiencing double-digit increases with other organizations. Due to restrictions under the Act, 100% of amount in excess of the hard cap must be borne by employees. Approval of the board action would allow a waiver of the hard cap provision and permit DWIHN to fund the aforementioned amount above the hard cap. This Board Action must come before the Board each year prior to the open enrollment period and is not automatically extended beyond the date indicated (12/31/26). With two-thirds approval by the governing body each year, Section 8 of the Act allows the employer to exempt itself from the imposition of the hard cap. **Motion:** It was moved by Ms. Ruth and supported by Mr. McNamara for the approval of BA #26-28 – DWIHN FY26 PA152 Waiver. There was no further discussion. **Motion carried.**

#### **X. Good and Welfare/Public Comment**

The Chair read the Good and Welfare/Public Comment statement. There were no members of the public who requested to address the committee.

**XI. Adjournment** – There being no further business, the Chair, Ms. Brown, called for a motion to adjourn. **Motion:** It was moved by Ms. Ruth and supported by Mr. Parker to adjourn. **Motion carried.** The meeting was adjourned at 1:34 p.m.

#### **FOLLOW-UP ITEMS**

- a. Ms. Brown, Chair request procurement to document vendor address location in Wayne County and not the corporate remittance address, when presenting the quarterly reports.
- b. Communications to provide information on what other services Outfront does for DWIHN and provide information on the process.
- c. Provide a 6-month update on WestComm and this will determine additional commitment.

# PROGRAM COMPLIANCE COMMITTEE

**MINUTES**

**OCTOBER 8, 2025**

**1:00 P.M.**

**IN-PERSON MEETING**

<b>MEETING CALLED BY</b>	I. Dr. Lynne Carter, Program Compliance Vice-Chair at 1:15 p.m.
<b>TYPE OF MEETING</b>	Program Compliance Committee
<b>FACILITATOR</b>	Dr. Carter, Vice-Chair
<b>NOTE TAKER</b>	Sonya Davis
<b>TIMEKEEPER</b>	
<b>ATTENDEES</b>	<p><b>Committee Members:</b> Angela Bullock; Dr. Lynne Carter; Angelo Glenn; and William Phillips</p> <p><b>Committee Member(s) Excused:</b> Commissioner Jonathan Kinloch, Committee Chair</p> <p><b>Board Members:</b> Dr. Cynthia Tauveg, Board Chair</p> <p><b>Staff:</b> Brooke Blackwell; Jody Connally; Dr. Shama Faheem; Monifa Gray; Marlena Hampton; Sheree Jackson; Marianne Lyons; Cassandra Phipps; Vicky Politowski; Ebony Reynolds; Stacey Sharp; April Siebert; Manny Singla; Andrea Smith; Yolanda Turner; Daniel West; James White; Rai Williams; Grace Wolf and Matthew Yascolt</p>

## AGENDA TOPICS

### II. Moment of Silence

<b>DISCUSSION</b>	Dr. Carter called for a moment of silence.
<b>CONCLUSIONS</b>	A moment of silence was taken.

### III. Roll Call

<b>DISCUSSION</b>	Dr. Carter called for a roll call.
<b>CONCLUSIONS</b>	Roll call was taken by Lillian Blackshire, Board Liaison, and there was a quorum.

### IV. Approval of the Agenda

<b>DISCUSSION/CONCLUSIONS</b>	Dr. Carter called for a motion to approve the agenda. <b>Motion:</b> It was moved by Mr. Glenn and supported by Mr. Phillips to approve the agenda. Dr. Carter asked if there were any changes/modifications to the agenda. There were no changes/modifications to the agenda. <b>Motion carried.</b>
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## V. Follow-Up Items from Previous Meeting

<b>DISCUSSION/ CONCLUSIONS</b>	<p>A. <b>Crisis Direct Services' Quarterly Report</b> – Provide a deeper dive to find the trends for the high-risk impact on suicidology on black youths, 13 years old – Grace Wolf, VP of Crisis Direct Services, reported that our suicide report data for the children's unit shows that we had individuals ages 10 to 15 years old coming in to the Crisis Center and 15% of just that demographic is the demographic that scored high on the Columbia-Suicide Severity Rating Scale (CSSR). National trends for that age range for young women, which is our demographic, are 22% who scored high on the CSSR, and show that we are a little bit lower than the national average for that age range. In that research, there are some additional therapeutic modalities that are recommended for that age group for individuals who are scoring high on the suicide screener. The Crisis Center is working with Children's Initiatives to ensure that our provider network utilizes those specific therapeutic modalities. Dr. Carter opened the floor for discussion. Discussion ensued. The committee requested a report on the Zero Suicide Initiative that outlines its impact and how it might be affecting our youth. <b>(Action)</b></p>
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## VI. Approval of the Minutes

<b>DISCUSSION/ CONCLUSIONS</b>	<p>Dr. Carter called for a motion to approve the September 10, 2025, meeting minutes. <b>Motion:</b> It was moved by Mr. Phillips and supported by Mr. Glenn to approve the September 10, 2025, meeting minutes. Dr. Carter asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. <b>Motion carried.</b></p>
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## VII. Reports

<b>DISCUSSION/ CONCLUSIONS</b>	<p>A. <b>Chief Medical Officer</b> – Dr. Shama Faheem, Chief Medical Officer, submitted and gave highlights of the Chief Medical Officer's report. It was reported that:</p> <ol style="list-style-type: none"><li>1. <b>Behavioral Health Advocacy &amp; Education</b>—Wayne State residents started an emergency psychiatry rotation at the end of June, and they received good feedback on it. Two residents have rotated so far, and we will touch base with the Rotation Director for more formal updates. Child Psychiatry Fellows are starting in October.</li><li>2. <b>MDHHS Updates</b>—MDHHS released the PIHP procurement proposal in August. DWIHN has been diligently working on it for the last eight weeks. After receiving feedback from external reviewers/consultants, it is in the second draft review phase. We are on track with our project plan and timeline.</li><li>3. <b>HEDIS Measures</b> – While all HEDIS measures are very important, we have consistently seen that Schizophrenia Spectrum Disorder/psychosis has been a major contributor to recurrent episodes of crisis and readmission. Our Crisis Center data has consistently indicated that it is the top primary diagnosis. Therefore, monitoring HEDIS measures "<u>Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)</u>" even more closely and developing improvement plans around it is crucial. I am also involved in the Tri-county workgroup around the same time. The last 6 months of data from Jan-June 2025 (claim lag) indicate a significant improvement in our compliance rate to 60.88 % from 47.71% in December</li></ol>
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2024. Additionally, Wayne County CMH has an additional First episode psychosis program (NAVIGATE) with MiSIDE added by MDHHS (in addition to Hegira), which is an evidence-based model that provides intense treatment for psychosis early on and is linked to improved outcomes. Our Crisis Center has helped link and coordinate individuals with first episode psychosis to these programs frequently.

4. **Quality Department Updates** – DWIHN received the preliminary results of its External Quality Review by HSAQ 2<sup>nd</sup> year cycle, where our eight different PIHP functional standards/categories and a total of 145 elements were reviewed. DWIHN met compliance with 140 elements with a perfect score (100%) in six of eight categories (over 90% in the other two) and an overall compliance percentage of 97% which is not only a high score but, compared to previous years, reflects a very positive trend in several areas, indicating our focus towards continuous quality improvement.

5. **Key Takeaways** – FY 2025 compliance improved by 14 percentage points over FY 2024 (from 83% to 97%); The compliance score of 97% in FY25 reflects a consistent upward trend in DWIHN's PIHP managed care audit scores with this being the highest one so far; Overall, the average compliance score across the FY 2024–2025 audit cycle is 93%, a marked improvement from the 2021–2022 average of 80%; This reflects not only improved documentation and adherence to standards but also enhanced interdepartmental coordination and leadership accountability; and The Quality Assessment and Performance Improvement Program (QAPI) achieved a perfect score, demonstrating the maturity and effectiveness of our internal quality systems.

Dr. Carter opened the floor for discussion. Discussion ensued. The committee requested an assessment of having a first-year resident on board. **(Action)** The committee gave Dr. Faheem and her team kudos for a job well done.

B. **Corporate Compliance**— Sheree Jackson, VP of Corporate Compliance, submitted and gave highlights of the Corporate Compliance report. It was reported that:

1. **Provider Network Investigations** – The Compliance Department has shown consistent investigative activity over the past four quarters. Case openings peaked in January–March 2025 (22 cases) before stabilizing in subsequent quarters, while case closures have remained steady at 16–17 per quarter since April. Financial recoupments fluctuated significantly, ranging from \$22,252.47 in Q1 2025 to a high of \$248,576.99 in Q2, with \$239,709.95 recovered in the most recent quarter. These results demonstrate ongoing investigative productivity and substantial financial recoveries for the Medicaid program. The total recoupment across the four quarters is \$603,575.45. The team successfully completed 16 investigations this quarter, which reflects a 5.8% decrease in closures compared to the prior quarter (17 to 16). Of the 59 active cases under review (28 new and 31 carried forward), 16 were closed, yielding a closure rate of approximately 27.1%. : A total of five substantiated allegations led to financial recoveries of \$239,709.95. This amount reflects a 3.69% decrease compared to the previous quarter (April–June 2025: \$248,576.99), yet marks a significant 90% increase from the first quarter of 2025 (January–March: \$22,252.47). While the number of accepted referrals remained steady quarter over quarter, the significant rise in recoupment suggests improved targeting, case prioritization, and effectiveness in identifying recoverable violations. Compliance Academy participation increased by 55% from Quarter 3 to Quarter 4, rising from an average of 25 providers per session to 38. This growth reflects greater

	<p>provider engagement and supports the network in strengthening awareness of FWA trends, risk-mitigation strategies, and appropriate reporting channels for suspected FWA or other program integrity concerns.</p> <p>Dr. Carter opened the floor for discussion. There was no discussion.</p>
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## VIII. Quarterly Reports

<p><b>17B</b>DISCUSSION/ <b>18B</b>CONCLUSIONS</p>	<p><b>A. Adults' Initiatives</b> - Marianne Lyons, Director of Adults' Initiatives, submitted and gave highlights of the Adults' Initiatives Q3 report. It was reported that the department's goal is to ensure quality clinical care and empower our members to tap into their full potential. They work a lot with the CRSPs to help them achieve those goals with those members. The team ensures clinical care is timely, efficient, and consistent, ensuring compliance with state and federal laws; responding in a timely manner to members and the CRSPs. The programs that are monitored and members served within the department include adult members with mental illness, substance abuse, and intellectual developmental disabilities. The processes managed within the department include assisted outpatient, not guilty by reason of insanity (NGRI), adult outpatient providers, psychiatric services, evidence-based practices, Assertive Community Treatment (ACT), Evidence-Based Supported Employment, MedDrop, clubhouses, discharge planning, monitoring of network service utilization, and other care management activities. The department also conducts several monthly forums and meetings for all of the providers/CRSPs that provide adult services.</p> <p><b>1. Activity 1: Assisted Outpatient Treatment (AOT)</b> - In the fourth quarter, there were 264 deferral agreements, with 45% of members engaging in at least one outpatient service post-discharge. This is slightly higher than the 43% engagement rate for members under official AOT orders, suggesting that voluntary participation may increase adherence due to a greater sense of autonomy. However, challenges remain: some members are still inpatient, incarcerated, or not yet discharged, limiting tracking. An upgrade in MHWIN now allows real-time entry of deferral agreements into medical records, improving data accuracy and monitoring. Additionally, 125 members were referred for peer support this quarter; 41 engaged, highlighting both the potential and current gap in peer outreach follow-through. Adult Initiatives facilitated the AOT/NGRI Workgroup and provided an AOT 101 Training to DWIHN's Outpatient Clinic staff. Adult Initiatives successfully implemented a tracking system for individuals with AOTs who prefer to use non-DWIHN providers. The hospitals have been helpful in implementation by assisting the individuals to sign consent to share forms or identify community providers. The Peer Support Specialists are re-engaging members by performing follow-up calls, explaining the provider change process, and offering additional support and providing a smoother transition to outpatient care. Adult Initiatives would like to collaborate with local law enforcement to learn how to most efficiently complete a transport order. A request will be made to local law enforcement in October 2025.</p> <p><b>2. Activity 2: Clubhouse</b> - The 4<sup>th</sup> quarter average membership at ACCESS-Hope House (210); Detroit Central City; DCI-MiSide New Direction (42); Goodwill-A Place of Our Own (120); Hegira-Turning Point (128); and Lincoln Behavioral Services-The Gathering Place (125). Motor City Clubhouse opened on April 30, 2025, and is having a difficult time getting individuals enrolled. They currently have 27 members enrolled, and staff are working with some of the CRSPs to help get more members enrolled. Adult Initiatives was successful in assisting with the engagement of SED designation young adults</p>
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and approved of Lincoln Behavioral's request to do so. Adult Initiatives will begin handling grants for clubhouse spend-downs and drop-in centers. Effective next fiscal year, Adult Initiatives will be collecting quarterly data to update the grant accordingly before reapplying in the following fiscal years. This oversight will include allocating funds appropriately to Clubhouses and drop-in centers, as deemed necessary and per clubhouse need. Previously, clubhouses were receiving equal amounts from the grant, while some were not utilizing the money, and others were running out of their portion within the first quarter of the fiscal year. Adult Initiatives will ensure that money is assigned appropriately, per reported need. Adult Initiatives will re-engage Wayne State University to follow up on assisting with GAD-7 and PHQ-9 scores for active members and how clubhouse engagement reduces these scores, indicating improvement to quality of life.

3. **Activity 3: Assertive Community Treatment (ACT)** - There are currently nine active ACT service provider agencies throughout Wayne County. Those agencies are: All Wellbeing Services, Central City Integrated Health Network, CNS Health Care, Elmhurst Home Incorporated, MiSide (formerly Development Centers Incorporated), Hegira Health Care, Lincoln Behavioral Services, Team Wellness, and The Guidance Center. During this quarter, there were 562 members who received ACT services throughout Wayne County. For the previous quarter, there were 561 members receiving ACT services. One of the most significant tasks that was accomplished during this quarter was the completion of the 2025 ACT Fidelity Review. The average score for the ACT program equals 95.5%. For the past month, 83% of PARs were completed by the CRSPs. In the previous month, 46% of the PARs were completed by the CRSPs. This indicates an increase in CRSP PAR completion of 80%. ACT providers have increased their number after 5 PM by 9% in the last quarter. As a side-by-side comparison, the last quarter only experienced 166 encounters that took place after 5 PM, while the most recent quarter witnessed 181 encounters after 5 PM. Because the ACT model is a 24-hour program, it is expected that some members will experience a psychiatric emergency after 5 PM. This criterion is in line with the fidelity established by the Michigan Medicaid Manual, Substance Abuse Mental Health Services Administration (SAMHSA), as well as the Michigan Best Practices (Fidelity Tool). The number of face-to-face contacts that occur after 5 PM has been and will continue to be addressed with the CRSPs during the ACT Forums, as well as in the monthly roster reviews. The ACT program would benefit from improving the number of completed crisis plans. At present, there are 385 current crisis plans. At the same time, there are 177 crisis plans that are out of date. Adult Initiatives plans on using the monthly roster reviews and the ACT Forums as an opportunity to increase the percentage of active crisis plans to a benchmark of 90% by September 2026.

Dr. Carter opened the floor for discussion. Discussion ensued. The committee requested the capacity of the Motor City Clubhouse. **(Action)**

- B. **Crisis Direct Services** - Grace Wolf, VP of Crisis Direct Services, submitted and gave highlights of the Crisis Direct Services' Q3 report (June-August 2025). It was reported that:

1. **Activity 1: Adult Crisis Stabilization Data** - There were 402 admissions to the adult unit and 73% of our total presentations were admitted to the unit; 22% of our total presentations determined they needed a lower level of care (shelter, food bank and outpatient) and approximately 5% required medical attention beyond what the Care Center could provide. The demographics for the adult unit have been consistently over the past year African American



males ages 26 to 64. Outpatient continues to be the top disposition from the adult unit with only 19% of those 402 admissions being referred to inpatient hospitalization. Looking at a 30-day recidivism for the quarter, the Center averaged 7%; July and August were around 5%, with June being higher at 10%.

2. **Activity 2: Building Empowered and Supportive Transitions Unit (BEST)**

**Data** – There were 40 admissions to that unit over the past quarter. The average length of stay was four days. Outpatient continues to be the highest disposition with substance use, residential and housing making up the majority of the rest of the dispositions.

3. **Activity 3: Children and Family Crisis Unit (CFCU)** – The Unit serves children ages 5 to 17. There were 118 admissions over the past quarter, and for the first time, our children's unit demographics leveled out. We are still primarily serving African American individuals. There was a 50/50 split of male and female guests this quarter. Ages 10 to 14 are still our highest, but only by about 6% at 47% and 41% with ages 15 to 17. Consistent with the rest of our services, outpatient continues to be our highest disposition from the units at 46%. There is a much higher usage of partial hospitalization from the children's unit at 31% to our adult unit, but our inpatient usage continues to be low at 14%.

4. **Quarterly Update**—The department celebrated the one-year anniversary of the 707 Crisis Care Center, which served 2,380 individuals in a 32-bed facility. The department continues to partner with MDHHS on the development of youth crisis stabilization rules. However, they have not made any progress towards any youth rules, and currently, there are no CAPS or PIPs.

Dr. Carter opened the floor for discussion. There was no discussion.

- C. **PIHP Crisis Services** – Daniel West, Director of PIHP Crisis Services, submitted and gave highlights of the roles and responsibilities of the department and the Q3 report. It was reported that the department consists of a director, two managers, three clinical specialists, and 15 PAR dispatchers. The PIHP Crisis Services Department operates in line with the Detroit Wayne Integrated Health Care values of timely access to service and abides by standards set forth by the Michigan Department of Health and Human Services (MDHHS) and the Centers for Medicare and Medicaid Services (CMS). The department aims to identify and facilitate areas of opportunity to provide timely access to care for DWIHN members in crisis in the least restrictive environment in line with The Michigan Mental Health Code Chapter 330, Federal 42 CFR regulations, and the Michigan Medicaid Provider Manual. The PIHP Crisis Services Program Description defines and describes processes that will align the PIHP Crisis Services Department with DWIHN's Strategic Plan as identified by the Board of Directors. The PIHP Crisis Services Program involves activities that ensure all individuals experiencing a crisis are treated with dignity and respect, and that efforts to provide education, direction, and support are paramount in clinical decision making. The program ensures clinical decision making is provided in a cost-effective and medically necessary way, and that delegated entities are actively involved in goal setting and compliance to DWIHN standards. The processes managed by the PIHP Crisis Services department include monitoring Pre-Admission Reviews, leveraging and creating community and stakeholder relationships, and ensuring timely access to available and medically necessary supports and services to DWIHN members in crisis. The program is involved in promoting a "no wrong door" approach to crisis services, ensuring appropriate and person-centered discharge planning from inpatient facilities for members new to the DWIHN array of crisis services and/or members presenting in a crisis without an assigned clinically responsible service

provider, and ensuring supportive and active brokering takes place on behalf of DWIHN members served. The program is also involved in making accurate and thorough eligibility determinations within a dispatch department that serves as the front line of access to the DWIHN crisis services array for community partners.

1. **Activity 1: CRSP Crisis Screening Notifications**—The team has worked to increase the percentage of CRSP notifications across the quarters. Upon analyzing the claims data following the PAR, the team found members are more likely to receive at least 2 non-crisis claims with a CRSP notification. The team has recognized the need to increase engagement from assigned CRSPs in the network upon crisis notification and upon notification of inpatient placement to begin discharge training. The team participated in the facilitation of crisis plan and discharge plan training on 9/15/25 and 9/22/25 with over 200 CRSP participants. The team also reached out to all the CRSPs to ensure their contact information is correct for CRSP notifications, and the CRSPs responded with their process for efforts post-notification.
  2. **Activity 2: CSU Transfers, Recidivistic Requests for Service (RFS)** - The team has worked to increase the percentage of diversions for the targeted population and has seen a noteworthy increase in CSU referrals. The team has increased the percentage of diversions and decreased the percentage of inpatient admissions when comparing May-August in 2024 to 2025. The team has increased diversions for this targeted population in 2 of the last 4 quarters. The team will continue to create mutually agreed-upon goals with the screening agencies, review monthly, and increase communication with requesting facilities regarding the availability of CSUs as an alternative to unnecessary inpatient hospitalizations.
  3. **Activity 3: Discharge Planning, No CRSP at Admission** - Clinical Specialists connected 76% of members to their chosen provider in the 4<sup>th</sup> quarter, the highest percentage this fiscal year. The team has shown an increase in the percentage of members who attended their aftercare appointment across the quarters for members admitted without a CRSP, as compared to hospitals in which DWIHN does not provide this service. The team will work with the participating CRSPs to address barriers and successes, and work to increase the number of members seen through targeted goal setting and accountability of the CRSPs participating.
  4. **Activity 4: Quarterly Update** - The PAR Dispatch Department demonstrated strong improvement in both service delivery and operational efficiency. Over the four quarters, performance consistently trended upward, with service levels stabilizing above 90% in the latter half of the year and response times reaching record lows. The team absorbed fluctuating call volumes without compromising service standards. Goals include a sustained average speed of answering under 16 seconds to ensure high service levels. Recidivism for adults (13.27%) and children (12.56%) has decreased in the fourth quarter.
- Dr. Carter opened the floor for discussion. Discussion ensued.
- D. **Managed Care Operations** – *The Managed Care Operations' Q3 report has been deferred to the November 12, 2025, Program Compliance Committee meeting.*
- E. **Utilization Management** – Marlena Hampton, Director of Utilization Management, submitted and gave highlights of the Utilization Management's Q3 report. It was reported that:
1. **Activity 1: Timeliness of UM Decision-Making** - The Utilization Management prior authorization teams have demonstrated significant improvement in the timeliness of decision-making over the course of FY25. In October 2024, the team approved 76% of requests within 14 days, with 47%

	<p>of those requests approved within seven (7) days. In September 2025, the team approved 97% of requests within 14 days, with 85% approved within 7 days. The prior authorization review teams continue to focus on their overall decision-making timeliness. In the 4<sup>th</sup> Quarter, the Utilization Management prior authorization review teams manually approved 94% of authorization requests within fourteen (14) calendar days. Overall, 98% of authorization requests were approved within the same timeframe. We continue implementing and revising our departmental performance improvement plan to address not meeting the 95% 14-day timeframe standard for non-urgent requests, as well as developing and updating internal and provider network authorization procedures. We continue to track the percentage of authorizations manually approved within seven (7) calendar days – Q1, 5,507 authorizations were manually approved (36.7%); Q2, 8,947 authorizations were approved (47.6%); Q3, 9,680 authorizations were approved (49.5%); and Q4, 13,849 authorizations were approved (69.4%). Utilization Management will explore the use of technology, along with the intensive review of authorization procedures and service utilization guidelines, to assist with improved efficiency and further improve disposition time and service delivery.</p> <p>Dr. Carter opened the floor for discussion. Discussion ensued. The committee gave kudos to Mrs. Hampton and her team.</p> <p>Dr. Carter noted that the quarter 3 reports for Adults Initiatives, Crisis Direct Services, PIHP Crisis Services, and Utilization Management have been received and placed on file.</p>
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**IX. Strategic Plan - None**

<b>DISCUSSION/ CONCLUSIONS</b>	<i>There was no Strategic Plan to review this month.</i>
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**X. Quality Review(s) - None**

<b>DISCUSSION/ CONCLUSIONS</b>	<p><b>A. QAPIP Work Plan FY 25 Update</b> – April Siebert, Director of Quality Improvement, submitted and gave highlights of the QAPIP Work Plan FY 25 Update. It was reported that:</p> <p><b>1. Michigan Mission-Based Performance Indicators (MMBPI) Reporting Data 3<sup>rd</sup> Quarter</b>—The final reporting rates for the third quarter of FY 25, submitted to the MDHHS on September 30, 2025, show that DWIN met all state performance indicator standards, with the exception of PI2a (IBPS services within 14 days) and PI10 (adult recidivism). For Indicator #2a, we met the performance standard for all demographic groups except one. The completion rate for the DD/Child category was only 36.57%, which falls short of the required standard of 57% or higher. Overall, our completion rate was 56.14%. In response to this, the Children's Initiatives Department has launched a Performance Improvement Project (PIP) focused on Indicator #2a for children. This project will analyze data from the past six months to identify patterns and trends aimed at improving outcomes. Additionally, we will continue to implement the most effective interventions to reduce the recidivism rate among adults while actively</p>
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	<p>working to increase member participation in outpatient services, such as the ACT program, Med Drop, and Complex Case Management.</p> <p>2. <b>Health Services Advisory Group (HSAG) Activity Update</b> - DWIHN has received the results of its External Quality Compliance Review from the HSAQ for the second-year cycle. A total of 145 elements were assessed, and we successfully met 140 of them, achieving an overall score of 97%. We earned a perfect score of 100% in 6 out of 8 categories. In the remaining two categories, Grievance and Appeal Systems, and Confidentiality, we scored 91 and 92, respectively. Looking ahead, we are committed to implementing targeted strategies and initiatives to address these areas, with the goal of achieving a perfect score of 100% in our next evaluation.</p> <p>Dr. Carter opened the floor for discussion. There was no discussion.</p>
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## **XI. Associate VP of Clinical Operations Executive Summary**

<b>DISCUSSION/ CONCLUSIONS</b>	<p>Stacey Sharp, Associate VP of Clinical Operations, submitted and gave highlights of her report. It was reported that:</p> <p>A. <b>Integrated Health Care Services</b> – Complex Case Management has produced remarkable results in connecting members to the care they need. Before entering the program, only 40% of active members were engaged with a Clinically Responsible Service Provider (CRSP). After completing Complex Case Management, that number jumped to 93%, more than doubling engagement in essential outpatient services. Primary care connections improved as well. Initially, only 66% of members had a Primary Care Provider. By the end of the program, 86% were linked to primary care, ensuring better management of chronic health conditions and overall wellness.</p> <p>B. <b>Residential Services</b> – In September, the Residential Services Department facilitated the successful transition of seven (7) adult members from long-term state facilities back into community living. This is a remarkable accomplishment for one month and represents a meaningful change for these individuals, who are now able to live outside institutional walls and experience greater independence, dignity, and connection to community support. Transitions of this scale require careful coordination across providers, families/guardians, and state partners to ensure members are set up with the right housing, clinical, and social supports. Each discharge reflects not only a system-level achievement but also a life-changing opportunity for the members involved.</p> <p>Dr. Carter opened the floor for discussion. Discussion ensued. The committee requested more information on how DWIHN validates that a member followed up with a primary care provider in Complex Case Management. <b>(Action)</b></p> <p>Dr. Carter noted that the Associate VP of Clinical Operations' executive summary has been received and placed on file.</p>
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## **XII. Unfinished Business**

<b>DISCUSSION/ CONCLUSIONS</b>	<p>A. <b>BA #26-12 (Revised) – SUD Treatment Provider Network FY 26 – Michigan Certification Board for Addiction Professionals (MCBAP) Test Prep</b> – Staff requesting board approval for a reallocation of \$29,900.00 in PA2 Funds to cover the costs of all prevention and treatment staff in the DWIHN network and at DWIHN to participate in a six-month, 13 sessions course to help prepare for the International Certification and Reciprocity Consortium (IC&amp;RC) examination. It</p>
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	<p>is a required exam to receive the treatment or prevention credentials, as 78 CEUs and 160 contact hours are required for certification. In addition, DWIHN is requesting the reallocation of \$19,100.00 in PA2 funding for a new provider, Real Solutions, to perform SBIRT services. The SUD Treatment contract amount remains unchanged, totaling \$5,093,864.00 for the fiscal year ending September 30, 2026. Dr. Carter called for a motion on BA #26-12 (Revised). <b>Motion:</b> It was moved by Dr. Tauieg and supported by Mr. Phillips to move BA #26-12 (Revised) to Full Board for approval. Mr. Glenn abstained due to a conflict of interest with Mariner's Inn. Dr. Carter opened the floor for discussion. There was no discussion. <b>Motion carried.</b></p> <p>B. <b>BA #26-14 (Revised) - DWIHN Provider Network System FY 26</b> - Staff requesting board approval for the addition of three residential providers, two outpatient providers (existing), and one SUD provider to the DWIHN provider network for the fiscal year ending September 30, 2026. The total amount of the board action remains the same and not to exceed the amount of \$837,791,038.00 for FY 26. Dr. Carter called for a motion on BA #26-14 (Revised). <b>Motion:</b> It was moved by Mrs. Bullock and supported by Mr. Phillips to move BA #26-14 (Revised) to Full Board for approval. Mr. Glenn abstained due to a conflict of interest with Mariner's Inn. Dr. Carter opened the floor for discussion. Discussion ensued. <b>Motion carried.</b></p>
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### XIII. New Business (Staff Recommendations)

<b>DISCUSSION/ CONCLUSIONS</b>	<p>A. <b>BA #26-27 - Jail Diversion FY 26</b> - Staff requesting board approval for a continuing contract with the following providers for the jail diversion programs: Central City Integrated Health (CCIH) Homeless Outreach (\$225,000.00); CNS Healthcare Co-Responder Program (\$300,000.00); Team Wellness Co-Responder Program (\$300,000.00); Southgate 28<sup>th</sup> District Court Regional Veterans Treatment Court (\$80,000.00); and DWIHN Staffing's salaries and fringes (\$400,000.00). Dr. Carter called for a motion on BA #26-27. <b>Motion:</b> It was moved by Mr. Glenn and supported by Mr. Phillips to move BA #26-27 to Full Board for approval. Dr. Carter opened the floor for discussion. There was no discussion. <b>Motion carried.</b></p> <p>B. <b>BA #26-29 - DHHS Donated Funds Agreement DFA 26-82009 FY 26</b> - Staff requesting board approval for a one-year contract between DWIHN and the State of Michigan Department of Health and Human Services (DHHS) to continue the DHHS Outstation Services in Wayne County and the placement of six (6) Medicaid Eligibility Specialists. The placement of the six DHHS workers has resulted in a timelier processing of Medicaid eligibility applications, determination of deductible adjustments, and enrollment in the Medicaid program. The State of Michigan is the sole administrator of the State Medicaid services; therefore, there has been no solicitation of other providers. Dr. Carter called for a motion on BA #26-29. <b>Motion:</b> It was moved by Mr. Glenn and supported by Mrs. Bullock to move BA #26-29 to Full Board for approval. Mr. Phillips abstained due to a conflict of interest with the Michigan Department of Health and Human Services. Dr. Carter opened the floor for discussion. Discussion ensued. <b>Motion carried.</b></p> <p>C. <b>BA #26-30 - Juvenile Restorative Program FY 26</b> - Staff requesting board approval for a (1) one-year renewal contract for FY26 (October 1, 2025 - September 30, 2026) to deliver the Juvenile Restorative Program as a result of the Request for Proposal, in which Team Wellness was awarded the bid. Team Wellness to receive an amount not to exceed \$1,900,000 for FY25. Approximately \$1.6 million is related to Medicaid claims-based</p>
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	<p>services. The amount serves as an estimate, and actual costs could differ. The remaining \$300,000 allocation relates to jail diversion costs as defined in the CMHSP and PIHP contracts; however, it is considered an administrative cost and is excluded from MLR calculations per the 42 CFR 158. Dr. Carter called for a motion on BA #26-30. Motion: It was moved by Mr. Glenn and supported by Mr. Phillips to move BA #26-30 to Full Board for approval. Dr. Carter opened the floor for discussion. Discussion ensued. The committee requested more information on the number of youth in the program; what is the plan if the numbers do not meet expectations? Provide a breakdown of where the children are referred from and the success of the children in the program. <b>(Action) Motion carried.</b></p>
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#### XIV. Good and Welfare/Public Comment

<b>DISCUSSION/ CONCLUSIONS</b>	<p><i>There was no Good and Welfare/Public Comment to review this month.</i></p>
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Action Items	Responsible Person	Due Date
1. <b>Crisis Direct Services' Quarterly Report</b> – Provide a report on the Zero Suicide Initiative that outlines its impact and how it might be affecting our youth.	Andrea Smith	TBD
2. <b>Chief Medical Officer's Report</b> – Provide an assessment of having a first-year resident on board.	Dr. Shama Faheem	November 12, 2025
3. <b>Adults Initiatives' Quarterly Report</b> – Provide the capacity of the Motor City Clubhouse	Marianne Lyons	November 12, 2025
4. <b>AVP of Clinical Operations' Executive Summary</b> – Provide information on how DWIHN validates that a member followed up with a primary care provider in Complex Case Management.	Vicky Politowski	November 12, 2025
5. <b>BA #26-30 – Juvenile Restorative Program</b> – Provide more information on the number of youths in the program; what is the plan if the numbers do not meet expectations? Provide a breakdown of where the children are referred from and the success of the children in the program.	Cassandra Phipps	November 12, 2025

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Mr. Phillips and supported by Mrs. Bullock to adjourn the meeting. **Motion carried.**

**ADJOURNED:** 2:31 p.m.

**NEXT MEETING:** Wednesday, November 12, 2025, 2025, at 1:00 p.m.

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 21-29R5 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Outfront Media Inc.

Contract Title: Outfront Inc - Social Media Outreach

Address where services are provided: None

Presented to Finance Committee at its meeting on: 11/5/2025

Proposed Contract Term: 10/1/2025 to 9/30/2027

Amount of Contract: \$ 1,288,509.50 Previous Fiscal Year: \$ 1,022,601.00

Program Type: Continuation

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

Date Contract First Initiated: 10/15/2020

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).

DWIHN Administration is requesting approval to exercise the second two-year renewal option with Outfront Media for Community Outreach, which was originally approved under Board Action #21-29.

This agreement allows DWIHN and Outfront Media to continue high quality and impactful messaging regarding our services in and around Metro Detroit and Wayne County, including educational information, services, SUD services, etc.

The **not-to-exceed cost for two years totals \$245,208.50**, with Year 1 at a cost of \$108,262.50 and Year 2 at \$136,946.00. **Contract terms are October 1, 2025 to September 30, 2027.**

**This brings the total contract not to exceed amount to \$1,288,509.50.**

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

Source of Funds: Multiple

Board Action #: 21-29R5

Fee for Service (Y/N):

Revenue	FY 25/26	Annualized
Multiple	\$ 1,288,509.50	\$ 1,288,509.50
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.902000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Tuesday, November 4, 2025

Signed: Friday, October 31, 2025

Board Action #: 21-29R5

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date

12/3/2025

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 24-67R1 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Chance for Life Organization

Contract Title: SUD Opioid Settlement

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 7/1/2024 to 6/30/2026

Amount of Contract: \$ 1,080,000.00 Previous Fiscal Year: \$

Program Type: Modification

Projected Number Served- Year 1: 120 Persons Served (previous fiscal year): 85

Date Contract First Initiated: 7/1/2024

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).

This board action requests approval for the modification of the scope of services for the Opioid Settlement A Leg Up program for Chance for Life; there is **no change in the amount allocated**.

The modification is (1) reducing the required period of incarceration from 5 to 2 years; (2) inclusion of the employment specialist and community outreach budget; and (3) inclusion of forty (40) scholarships for A Leg Up program recipients. The value of the scholarships will be \$3,500 per scholarship for a 4-month program (i.e. Phase 1) which includes transportation and meals during the program.

The scholarship partners will continue the program after the 4-month period of DWIHN-sponsored training (i.e. Phase 2). The scholarships will be split between two agencies: The Associated Builders and Contractors and Information Technology and Artificial Intelligence.

- Scholarships with Associated Builders and Contractors
  - Covers costs of coursework up to \$36,000
  - Offers: electrical, carpentry, HVAC, and welding
  - Average Salary \$60,000 after Phase 1
- Scholarships with Information Technology and Artificial Intelligence
  - Covers costs of coursework up to \$17,995
  - Offers: 2-year associate's degree or certification
  - Partner agencies (Global IT or DSDT)

Board Action #: 24-67R1



- o Average Salary \$55,000 after Phase 1

**The total not to exceed contract amount of \$1,080,000 and the contract terms (7/1/2024 to 6/30/2026) will remain unchanged.**

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

Source of Funds: Other

Fee for Service (Y/N): Y

Revenue	FY 24/26	Annualized
SUD Opioid Settlement	\$ 1,080,000.00	\$ 1,080,000.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64932.827102.00000

In Budget (Y/N)?

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Tuesday, November 4, 2025

Signed: Tuesday, November 4, 2025

Board Action #: 24-67R1

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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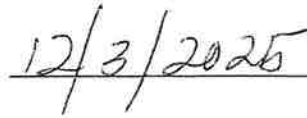
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Executive Director -initial here: \_\_\_\_\_



Board Liaison Signature

Date



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 25-24R6 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Sprout Evaluation Center, LLC

Contract Title: Autism Service Providers

Address where services are provided: 31557 Schoolcraft Livonia, MI 48150-4108

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 12/1/2025 to 1/31/2026

Amount of Contract: \$ 163,746.00 Previous Fiscal Year: \$ 555,724.00

Program Type: Continuation

Projected Number Served- Year 1: 2,600 Persons Served (previous fiscal year): 2,473

Date Contract First Initiated: 10/1/2014

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).

Requesting revision of the board action for an extension until 1/31/2026 of the Autism Evaluator Provider, Sprout Evaluation Center, for the time range of 12/1/2025 - 1/31/2026 to account for the results of the 2026-019 Autism Independent Evaluation Request for Proposal (RFP) Rebid. The FY26 extension contract is not to exceed \$163,746 for 4-month period ending January 31, 2026. Note: \$163,746 represents 4 months of the Provider's annual budget allocation of \$491,237.

**Independent Evaluation Autism Providers:** Independent Evaluators provide comprehensive diagnostic evaluations to determine eligibility for Autism Benefit services. These evaluations must be conducted independently of any agency delivering ABA or related treatment services to ensure conflict-free access and reduce the risk of bias during the diagnostic process. Evaluators are responsible for verifying Medicaid eligibility, confirming that individuals fall within the covered age range, and conducting thorough assessments that inform medical necessity decisions.

The amounts listed for each provider are estimated based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval.

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Medicaid	\$ 163,746.00	\$ 163,746.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64940.827010.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, October 31, 2025

Signed: Friday, October 31, 2025

10/31/2025 3:35:55 PM

10/31/2025 8:25:04 AM

Board Action #: 25-24R6

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date

12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-03R Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: St. Francis Camp on the Lake

Contract Title: FY26 Children's Initiatives - Waiver Services

Address where services are provided: 2995 E Grand Blvd, Detroit, MI 48202

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 4,475,852.00 Previous Fiscal Year: \$ 4,319,610.00

Program Type: Continuation

Projected Number Served- Year 1: 130 Persons Served (previous fiscal year): 120

Date Contract First Initiated: 10/1/2025

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).

Requesting DWIHN Board Approval to revise the board action to add an additional Provider for SED Waiver services. The new Provider is St. Francis on the Lake to provide overnight summer camp services for youth on the SED Waiver.

The funding amount for SED Waiver Medicaid claim services to remain the same and not to exceed \$2,086,207 for FY26.

Waiver services for children including SED Waiver and Children's Waiver for FY26 contract from 10/1/25 - 9/30/26 of the estimated **Medicaid funding in the amount not to exceed \$4,475,852.** Refer to the attached Provider Listings for estimated cost breakdown by provider.

**Children's Waiver (\$2,389,645):** The main goal of the Children Waiver Program is provision of medically necessary services to eligible children and their families which promote integration, optimum independence, and family resiliency. The Children's Home and Community Based Waiver Program (CWP) is a federal program authorized under section 1015c of the Social Security Act that provides Medicaid services for eligible children up to age 18 with developmental disabilities, who without such services would require or be at risk of being placed in an inpatient facility.

**SED Waiver (\$2,086,207):** Providers deliver Wrap Around / SED Waiver (SEDW) services to children, youth, and families ages 0 to 21st birthday. The goal is for children and youth to reside in the community without hospitalization or removal from the home and are offered an array of Community Mental Health services to support both youth and the caregiver. All Wrap Around Providers to also deliver SEDW services.

The amounts listed for each provider are estimated based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval.

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

Source of Funds: Medicaid

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Medicaid	\$ 4,475,852.00	\$ 4,475,852.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Board Action #: 26-03R

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, October 31, 2025

Signed: Wednesday, October 29, 2025

10/31/2025 3:35:17 PM

10/29/2025 3:25:26 PM

Board Action #: 26-03R



## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_



Board Liaison Signature

Date

12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-10R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: SUD Health Home FY26

Address where services are provided: Multiple

Presented to Program Compliance Committee at its meeting on: 10/8/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 1,721,216.00 Previous Fiscal Year: \$ 1,721,216.00

Program Type: Continuation

Projected Number Served- Year 1: 1,400 Persons Served (previous fiscal year): 1277

Date Contract First Initiated: 5/1/2021

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).

**This BA revision is only to approve Mariner's Inn as an SUDHH in this Board Action, at the October board meeting the Full Board requested that the Mariner's Inn BA be separated and brought back to be considered separately in November.**

The DWIHN Health Homes team is requesting approval to renew and continue the SUD Health Home Statement of Work at the following Service Providers to continue SUD Health Home (SUDHH) Services in Wayne county: Hegira Health, Inc., Metro-East Drug Treatment Corporation, Nardin Park Recovery Center, Inc., New Light Recovery Center, Inc., Mariner's Inn, Elmhurst Home, Sobriety House, Star Center, Inc., and The Guidance Center. SUD Health Home was known as "Opioid Health Home" previously but is changed name and expanded qualifying diagnoses to a more expansive "SUD Health Home" in FY 2025.

The amounts listed for each provider are estimates based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval. **The amount for FY 2026 approximates \$1,721,216.00.**

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

Source of Funds: Medicaid

Fee for Service (Y/N): N

Board Action #: 26-10R2

Revenue	FY 25/26	Annualized
Medicaid	\$ 1,721,216.00	\$ 1,721,216.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64938.827040.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Wednesday, October 22, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, October 20, 2025

Board Action #: 26-10R2

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date

12/3/2025

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-12R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY26 Substance Use Disorder Treatment: MCBAP Certification Test Prep and Treatment Provider Network System Addition

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 10/8/2025

Proposed Contract Term: 11/19/2025 to 9/30/2026

Amount of Contract: \$ 5,093,864.00 Previous Fiscal Year: \$ 6,468,023.00

Program Type: Modification

Projected Number Served- Year 1: 80 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 11/19/2025

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).

**At the October board meeting the Full Board requested that BA brought back to be considered in November.**

The SUD Department requests a reallocation of \$29,900 in PA 2 funds to cover the costs of all prevention and treatment staff in the DWIHN network and at DWIHN to participate in a 6 month, 13 session course to help prepare for the International Certification & Reciprocity Consortium (IC&RC) examination, a required exam to receive the treatment or prevention credentials. This course also provides the participants with 78 CEUs and 160 contact hours required for the certification. Key Insights will be providing evaluations and following up with participants to measure program efficacy using exam pass rates and certification rates. Investing in staff certification directly benefits our network and the community by strengthening the SUD workforce. High employee turnover is a significant challenge in the SUD field, negatively impacting both our network and the individuals we serve. Certification assistance helps to ensure our prevention and treatment workforce is stable and staff have a standardized, evidence based skillset, leading to higher quality care and improved client outcomes.

In addition, DWIHN is requesting the reallocation of \$19,100 PA2 funding for new provider, Real Solutions (credentialed 8/14/2025), to perform SBIRT services.

The Detroit Wayne Integrated Health Network has the discretion to distribute these funds amongst service providers based on utilization without further board approval, provided the total does not exceed the approved budget of \$5,093,864.

**The revised not to exceed contract for SUD Treatment remains unchanged totaling \$5,093,864 for the fiscal year ending September 30, 2026.**

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

Source of Funds: Block Grant, PA2

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
Block Grant	\$ 2,822,164.00	\$ 2,822,164.00
PA2	\$ 2,271,700.00	\$ 2,271,700.00
<b>Total Revenue</b>	<b>\$ 5,093,864.00</b>	<b>\$ 5,093,864.00</b>

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: Multiple

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Monday, October 27, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, October 27, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date

12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-12R1 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY26 Substance Use Disorder Treatment Provider Allocations

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 9/10/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 5,093,864.00 Previous Fiscal Year: \$ 6,468,023.00

Program Type: Continuation

Projected Number Served- Year 1: 15,500 Persons Served (previous fiscal year): 15,000

Date Contract First Initiated: 10/1/2025

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 SUD Department is requesting approval to contract for the delivery of Substance Use Disorder Treatment Services for the 2026 fiscal year with a total budget not to exceed \$5,093,864.**

**At the September and October board meeting the Full Board requested that SUD Treatment Provider, Mariner 's Inn, be separated and brought back to be considered separately in November.**

Treatment services will be funded with Federal Block Grant dollars (\$2,822,164) and PA2 funds (\$2,271,700), together totaling \$5,093,864.



The SUD Treatment, Women's Specialty Services (WSS) and State Disability Assistance (SDA) block grant for claims-based activity based on medical necessity and is included in the overall provider network board action therefore the below amounts do not reflect the entire SUD treatment, SDA and WSS grant allocation from MDHHS.

Treatment programs and amounts are summarized below:

### **Block Grant Funds (\$2,822,164)**

- Women's Specialty Services: \$665,000
- SOR IV Treatment: \$1,463,295
- Opioid Settlement Healing and Recovery Community Engagement & Infrastructure: \$30,435
- Opioid Settlement Recovery Incentives Infrastructure: \$85,000
- Opioid Settlement Alcohol Use Disorder Program: \$569,739

### **PA2 Funds (\$2,271,700)**

The Substance Use Disorder Department offers a range of services to support individuals on their journey to recovery. From withdrawal management to outpatient services, including FDA approved Medication Assisted Treatment. SUD programs include residential services, intensive outpatient, dual diagnosis day treatment, case management, recovery housing, early intervention services, relapse prevention, peer recovery services, intensive wraparound program, communicable disease program, and healthy outreach.

Additionally, we organize events including the Opioid Summit, Faith-Based Conference, Recovery Walk, Women and Men's Annual Conferences along with providing Narcan, Yoga and communicable disease prevention services

**The Detroit Wayne Integrated Health Network has the discretion to distribute these funds amongst service providers based on**

utilization without further board approval, provided the total does not exceed the approved budget of \$5,093,864 for the fiscal year ending September 30, 2026.

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

85% of providers audited have quality issues. 17% of those providers on a CAP scored below 80%. The current network average score is 87%

Source of Funds: Block Grant, PA2

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Block Grant	\$ 2,822,164.00	\$ 2,822,164.00
PA2	\$ 2,271,700.00	\$ 2,271,700.00
<b>Total Revenue</b>	<b>\$ 5,093,864.00</b>	<b>\$ 5,093,864.00</b>

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Monday, October 27, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, October 27, 2025

Board Action #: 26-12R1

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date

12/3/2025

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-12R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY26 Substance Use Disorder Treatment: MyStrength, SUD Health Home Contingency Management, and Prescription Drug Take Back Boxes

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 11/19/2025 to 9/30/2026

Amount of Contract: \$ 5,374,114.00 Previous Fiscal Year: \$ 6,468,023.00

Program Type: Continuation

Projected Number Served- Year 1: 18,050 Persons Served (previous fiscal year): 15,000

Date Contract First Initiated: 11/19/2025

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 SUD Department is requesting approval to utilized additional PA2 funds totaling \$280,250 for the following programs. The revised not to exceed amount for SUD Treatment totals \$5,374,114 for FYE 2026.**

**(1) The SUD Department requests to add Mariners Inn to the SUD Health Home Contingency Management program, utilizing \$5,450 in PA2 funds to support this program.** The Wellness Challenge is a contingency management program designed to encourage our members enrolled in SUD Health Home programming to meet physical health objectives outlined in the challenge. Members' incentives will not exceed \$100 per participant per quarter. Incentivized physical health objectives will address and aim to improve HEDIS measures, specifically follow-up after emergency department visit for substance use (FUA), which is a pay-for-performance metric.

Members who are enrolled in the MDHHS Recovery Incentive Pilot program are not eligible for the SUD Health Home Incentive-Based Wellness Challenge. Controls have been established to ensure that incentives are not duplicated.

**(2) The SUD Department also requests \$240,000 in PA2 funds for the implementation of the Teladoc Mental Health Complete (formerly MyStrength) program.** To ensure compliance with NCQA behavioral health requirements and significantly increase member access to behavioral health support across all ages and stages of life. This integrated virtual platform provides a full continuum of care, including:

Digital programs and tools: self-guided skill-building and resources

Coaching: live video sessions with certified health coaches

Licensed clinical care: rapid access to licensed therapists and psychiatrists

The platform focuses on predictive and proactive engagement to facilitate earlier intervention and drive positive member outcomes faster.

The program utilized a per-participant per-month cost structure, ensuring funds are exclusively spent on members who are actively engaged and enrolled. The \$240,000 represents the maximum anticipated threshold, which our agency is currently negotiating to reduce.

**(3) The SUD Department also requests \$34,800 in PA2 funds to support the purchase of additional large medication disposal drop boxes.** These custom drop boxes are stainless steel, vinyl wrapped, and have anti-pry double-locking doors. Each drop box costs \$3,480. Secure drop-off locations for prescription drugs provide a convenient and safe method for the public to dispose of unused, unwanted, or expired medications. Drug take-back boxes help to prevent prescription drug misuse and abuse, reduce accidental poisoning, mitigate addiction risk, and provide convenient, accessible, and environmentally safe disposal of prescription drugs.

The Detroit Wayne Integrated Health Network has the discretion to distribute these funds amongst service providers based on utilization without further board approval, provided the total does not exceed the approved budget of \$5,374,114.

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

85% of providers audited have quality issues. 17% of those providers on a CAP scored below 80%. The current network average score is 87%

Source of Funds: Block Grant,PA2

Fee for Service (Y/N): N

<b>Revenue</b>	<b>FY 25/26</b>	<b>Annualized</b>
Block Grant	\$ 2,822,164.00	\$ 2,822,164.00
PA2	\$ 2,551,950.00	\$ 2,551,950.00
<b>Total Revenue</b>	\$ 5,374,114.00	\$ 5,374,114.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Board Action #: 26-12R2

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Tuesday, November 4, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, November 3, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date 12/3/2025



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-13R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY26 Substance Use Disorder Prevention Provider Allocations

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 9/10/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 6,408,313.00 Previous Fiscal Year: \$ 6,491,183.00

Program Type: Continuation

Projected Number Served- Year 1: 35,000 Persons Served (previous fiscal year): 35000

Date Contract First Initiated: 10/1/2025

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).

**DWIGHN is requesting to contract for the fiscal year 2026 for an amount not to exceed \$6,408,313 for the delivery of Substance Use Disorder prevention services.**

**At the September and October board meeting the Full Board requested that SUD Prevention providers, Mariner's Inn and Chance for Life, be separated and brought back to be considered separately in November.**

The following prevention programs have been granted funding from MDHHS for fiscal year 2026:

**Block Grant - \$3,366,315**

- SUD Prevention Services: \$2,777,502
- Gambling Prevention: \$173,913
- SOR IV: \$350,000
- Tobacco Prevention: \$4,000
- Opioid Settlement: \$60,900

## **PA2 - \$3,041,998**

The prevention services are funded with \$3,366,315 of Federal Block Grant dollars and \$3,041,998 of PA2 funding totaling in \$6,408,313.

DWIHN SUD Prevention network will engage in one or more of the 6 CSAP Primary Strategies: seamless Information Dissemination throughout all strategies; offering Alternatives and Community-Based services to foster prevention-prepared communities; conducting capacity-building education and direct services; advocating for environmental change; and streamlining problem identification and referral mechanisms. Moreover, we aim to bolster school-based programming, leveraging peer-to-peer pro-social services, elevating public awareness, and mobilizing communities to counter alcohol, tobacco, and other drug-related issues. This includes advocating for environmental and legislative changes to mitigate underage and alcohol-related activities' consequences.

To address the opioid crisis, state opioid response programs will benefit from MDHHS funding, focusing on evidence-based practices, overdose education, naloxone distribution, harm reduction, and peer outreach connections.

**DWIHN has the discretion to reallocate the dollars within funding sources among the providers without board approval based upon utilization up to an amount not to exceed \$6,408,313 for the fiscal year ending September 30, 2026.**

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

Seven prevention providers were placed on a Program CAP for FY2025 with an average score of 90.64%

Source of Funds: Block Grant, PA2

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
Block Grant	\$ 3,366,315.00	\$ 3,366,315.00
PA2	\$ 3,041,998.00	\$ 3,041,998.00
<b>Total Revenue</b>	<b>\$ 6,408,313.00</b>	<b>\$ 6,408,313.00</b>

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Monday, October 27, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, October 27, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

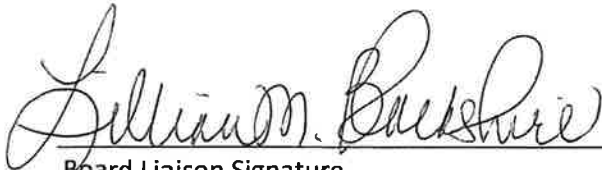
€ Modified as follows:

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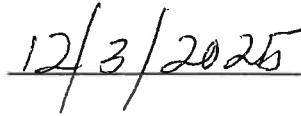
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Executive Director -initial here: \_\_\_\_\_



Board Liaison Signature

Date



## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-14R Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Provider Network System FY 25/26

Address where services are provided: Service Provider List Attached

Presented to Program Compliance Committee at its meeting on: 10/8/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 837,791,038.00 Previous Fiscal Year: \$ 934,583,332.00

Program Type: Continuation

Projected Number Served- Year 1: 77,000 Persons Served (previous fiscal year): 75,943

Date Contract First Initiated: 10/1/2025

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).

***Board Action # 26-14R was deferred to the November 19, 2025 Full Board Meeting.***

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval for the addition of the following 5 providers to the DWIHN provider network for the fiscal year ending September 30, 2026 as outlined below. Note: Total amount of Board Action remains the same not to exceed amount of \$837,791,038 for FY 2026.

### **Residential Providers:**

#### **1. Legacy Family Homes**

(Credentialed 9/25/2025 for Community Living Support)

#### **2. 3D Hearts Residential Care Homes**

(Credentialed 9/25/2025 for Personal Care in Licensed Specialized Residential Setting; Community Living Support)

#### **3. Ella's AFC Homes LLC**

(Credentialed 9/25/2025 for Personal Care in Licensed Specialized Residential Setting; Community Living Support)

Board Action #: 26-14R

**4. Lee Health Systems LLC**  
(Credentialed 9/25/2025 for Personal Care in Licensed Specialized Residential Setting; Community Living Support)

**Outpatient Providers (existing):**

- 1. Mariner's Inn** (Credentialed 7/9/2024 SUD and Non-Emergency Transportation Contract - Effective 10/1/25)
- 2. God's Speed** (Credentialed 1/30/2024 Non-Emergency Transportation Contract - Effective 10/1/25)

**SUD Provider:**

- 1. Real Solutions** (Credentialed 08/14/2025 for Relapse Prevention/Peer Recovery, Intensive Wraparound)

Board approval will allow for the continued delivery of behavioral health services for individuals with: Adults with Serious Mental Illness, Intellectual/Developmental Disability, Serious Emotional Disturbance and Co-Occurring Disorders.

The services include the full array behavioral health services per the PIHP and CMHSP contracts. **The amounts listed for each provider are estimated based on prior year activity and are subject to change.**

---

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Multiple	\$ 837,791,038.00	\$ 837,791,038.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Board Action #: 26-14R

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Wednesday, October 22, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Tuesday, October 21, 2025



## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date

  
\_\_\_\_\_

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-14R2 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Provider Network System FY 25/26

Address where services are provided: Service Provider List Attached

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 11/1/2025 to 9/30/2026

Amount of Contract: \$ 837,791,038.00 Previous Fiscal Year: \$ 934,583,332.00

Program Type: Continuation

Projected Number Served- Year 1: 77,000 Persons Served (previous fiscal year): 75,943

Date Contract First Initiated: 10/1/2025

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) is requesting approval for the addition of the following 2 providers to the DWIHN provider network for the fiscal year ending September 30, 2026 as outlined below. Note: Total amount of Board Action remains the same not to exceed amount of \$837,791,038 for FY 2026.

### **Residential Providers:**

**1. Erideja Matthews aka DOMUS SECRETA LLC**  
(Credentialed 10/16/2025 for Community Living Support)

**2. Mary Rose Corporation**  
(Credentialed 10/30/2025 for Personal Care in Licensed Residential Setting; Community Living Support)

Board approval will allow for the continued delivery of behavioral health services for individuals with: Adults with Serious Mental Illness, Intellectual/Developmental Disability, Serious Emotional Disturbance and Co-Occurring Disorders.

The services include the full array behavioral health services per the PIHP and CMHSP contracts. **The amounts listed for each provider are estimated based on prior year activity and are subject to change.**

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Multiple	\$ 837,791,038.00	\$ 837,791,038.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Tuesday, November 4, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Tuesday, November 4, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date 12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-21R Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Autism Providers

Address where services are provided: Multiple

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 104,955,784.00 Previous Fiscal Year: \$ 102,905,784.00

Program Type: Continuation

Projected Number Served- Year 1: 5,100 Persons Served (previous fiscal year): 5,000

Date Contract First Initiated: 10/1/2014

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).

Requesting board action for DWIHN Board to approve revision for the Autism Providers to receive a (1) one year contract for FY26 (October 1, 2025 - September 30, 2026) to deliver Applied Behavior Analysis (ABA) and Autism Evaluations. **The total projected budget for autism services for FY26 is estimated at \$104,955,784.**

**Autism Services:** The target group for the ABA Service includes individuals from birth through twenty (20) years of age, ending on the 21<sup>st</sup> birthday with a diagnosis of Autism Spectrum Disorder (ASD) based upon a medical diagnosis in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) of ASD, who have the developmental capacity to clinically participate in the available interventions covered by the benefit, and who have Medicaid insurance.

**ABA Providers:** Adding 2 additional providers to the network to provide autism services who passed the autism Request for Qualifications (RFQ).

Board Action #: 26-21R

-Blue Mind Therapy

-Mansach Enterprises DBA Euro Therapies

In addition, Open Door Living Association contract to end 12/31/2025 due to non-renewal and to allow for transition planning.

**Independent Evaluation Services:** Provide comprehensive diagnostic evaluations for children and youth ages 0 to 21st birthday to determine eligibility for autism services.

Independent Evaluator Providers:

Adding 2 Independent Evaluators as a result of the Autism Independent Evaluator Request for Proposal (RFP):

-Social Care Administrator DBA McCrory Center

-The Children's Center

The amounts listed for each provider are estimated based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval.

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

Source of Funds: Medicaid, General Fund

Fee for Service (Y/N): Y

<b>Revenue</b>	<b>FY 25/26</b>	<b>Annualized</b>
Medicaid	\$ 104,080,784.00	\$ 104,080,784.00
General Fund	\$ 875,000.00	\$ 875,000.00
<b>Total Revenue</b>	<b>\$ 104,955,784.00</b>	<b>\$ 104,955,784.00</b>

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

Board Action #: 26-21R

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, October 31, 2025

Signed: Friday, October 31, 2025

10/31/2025 5:17:27 PM

10/31/2025 3:58:35 PM

Board Action #: 26-21R

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date 12/3/2025



## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-07 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: ARC Detroit

Contract Title: ARC Detroit, The ARC Northwest Wayne County, and The ARC Western Wayne County

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 599,397.00 Previous Fiscal Year: \$ 599,397.00

Program Type: Continuation

Projected Number Served- Year 1: 5,500 Persons Served (previous fiscal year): 5000

Date Contract First Initiated: 10/1/2023

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 Board renewal of three (3) one year contract renewals with 1) Arc Detroit; 2) Arc of Northwest Wayne County; and 3) Arc of Western Wayne County. The contract period for each of the vendors is from October 1, 2025, to September 30, 2026; not to exceed amounts are as follows:

### **ARC of Northwest Wayne County (ARC NW) - \$296,101**

- The After I'm Gone Program - \$134,220 Assists families in planning for the future, when family members are no longer able to provide help.
- Guardianship Alternatives Information Network (GAIN) - \$56,552 Offers information about guardianship and legal alternatives to guardianship for consumers, parents, and mental health professionals.
- The Lekotek Program - \$105,329 Provides families with monthly individual play sessions with their child to explore toys and play for children with disabilities.

### **ARC of Western Wayne County (ARC WW) - \$185,927**

- The After I'm Gone Program - \$56,377 Assists families in planning for the future when family members are no longer able to provide help.
- The Take Charge Helpline - \$129,550 Developed to address concerns of parents and children, and adults with I/DD. The Helpline broadens the geographical reach to consumers and the community, to engage, inform and encourage. The website is a portal to general information on mental health and disability related topics.

### **ARC of Detroit - \$117,369**

Board Action #: 26-07

- The Advocacy and Community Awareness Program will engage and assist individuals who are I/DD and their families to develop skills and provide access to information, promoting individual growth and family well-being

**Total funding for this request is not to exceed \$599,397 for the fiscal year ending September 30, 2026.**

The proposed contracts will provide advocacy, supportive services, and educational information by addressing issues facing persons with intellectual disabilities (I/DD). The contract further targets supporting family members, and the community through advocacy and information the design and delivery of the programs will ensure active engagement and coordination in the mental health system.

The ARC NW, ARC WW and ARC Detroit is recommended based on their expertise, experience and advocacy for people with disabilities. The ARCs have over a rich sixty-year history of advocacy and accomplishments for people with disabilities. They continue to carry out the mission and vision and continue to alter perceptions and to educate consumers, parents and the community.

DWIHN has contracted with ARC Detroit since 10/1/2015, ARC NW since 7/1/2019, and ARC WW since 7/1/2019.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
Multiple	\$ 599,397.00	\$ 599,397.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Board Action #: 26-07

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

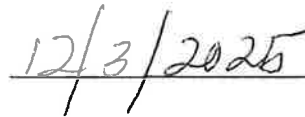
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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date

  
\_\_\_\_\_

*James White*

Signed: Friday, October 31, 2025

*Stacie Durant*

Signed: Wednesday, October 29, 2025

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-23 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Blue Cross Blue Shield of Michigan

Contract Title: Employee Health Care 2026

Address where services are provided: None

Presented to Executive Committee at its meeting on: 11/17/2025

Proposed Contract Term: 1/1/2026 to 12/31/2026

Amount of Contract: \$ 10,578,490.00 Previous Fiscal Year: \$ 10,211,024.00

Program Type: Continuation

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

Date Contract First Initiated: 1/1/2026

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).

DWIHN Administration is requesting approval of a one-year contract, effective January 1, 2026 through December 31, 2026, for an estimated amount of **\$10,578,490** for the provision of comprehensive health benefits (medical - BCBS **\$9,977,812**, dental - Delta Dental and DENCAP **\$557,268**, and vision - Delta Dental VSP **\$43,410**) for five hundred thirty two (532) enrolled employees. The amount will vary based on the number of enrolled employees and their plan selections.

This amount includes a **\$367,466** increase in medical and dental; no increase in vision. The employee/employer contribution is in accordance with the PA152 waiver approved by the board of directors and represents an 88/12 allocation of premiums.

Current labor agreements require that DWIHN provide healthcare coverage to all its qualifying, active employees. Providers were selected through a bid process conducted by Lockton. The amount is estimated based on the staff count of approximately five hundred thirty two (532) employees.

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

Source of Funds: Multiple

Board Action #: 26-23

Fee for Service (Y/N):

Revenue	FY 25/26	Annualized
Multiple	\$ 10,578,490.00	\$ 10,578,490.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: various

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, November 14, 2025

Signed: Wednesday, November 12, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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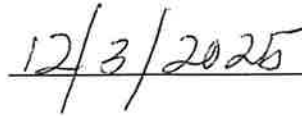
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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-31 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Southwest Counseling Solutions

Contract Title: Southwest Counseling Solutions Housing Resource Center and CNS Covenant House

Address where services are provided: Various Locations

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 3/31/2026

Amount of Contract: \$ 611,293.50 Previous Fiscal Year: \$ 2,124,637.00

Program Type: Continuation

Projected Number Served- Year 1: 550 Persons Served (previous fiscal year): 550

Date Contract First Initiated: 10/1/2006

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) requests Board approval of a six month extension with the following providers in the **total amount not to exceed \$611,293.50**.

Southwest Counseling Solutions - Housing Resource Center in the amount of \$544,857.50, to provide housing assistance, resources, intervention and collaborative community efforts to reduce homelessness of persons with mental illness and co-occurring disabilities.

CNS Covenant House Program in the amount of \$66,436.00, to address gaps in service through the provision of mental health support for young adults experiencing homelessness.

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

Source of Funds: Multiple



Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
Multiple	\$ 611,293.50	\$ 611,293.50
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: Multiple

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, November 7, 2025

Signed: Friday, November 7, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date



**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-32 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Neighborhood Service Organization

Contract Title: Neighborhood Service Organization and Wayne Metro PATH

Address where services are provided: Various locations in Wayne and Out-Wayne Counties

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 254,493.00 Previous Fiscal Year: \$ 254,493.00

Program Type: Continuation

Projected Number Served- Year 1: 500 Persons Served (previous fiscal year): 222 - 3rd Qtr.

Date Contract First Initiated: 10/1/2006

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 Detroit Wayne Integrated Health Network (DWIHN) requests Board approval to **disburse Supplemental General Fund** match dollars for the Projects for Assistance in Transition from Homelessness (PATH) for two providers, Neighborhood Services Organization (NSO) and Wayne Metropolitan Community Action Agency (WMCAA), **in the amount not to exceed \$254,493 for the fiscal year ending September 30, 2026** . Both providers receive grant funding directly from the Michigan Department of Health and Human Services (MDHHS) for this program.

The Supplemental General Fund match dollars will be disbursed as follows:

- **NSO in the amount not to exceed \$169,493**

• **WMCAA in the amount not to exceed \$85,000**

DWIHN staff have the discretion to reallocate funds among these providers without board approval based upon supported utilization data provided the total amount does not exceed approved funding for this contract.

The PATH program provides active outreach to individuals who are experiencing homelessness and who have a serious mental illness or co-occurring mental illness and substance use disorder. PATH services include outreach, assistance with accessing income supports, such as SSI/SSDI, assistance in locating affordable housing and linkage to appropriate medical and mental health services. In an effort to assist the two (2) PATH providers in maximizing outreach to 500 individuals experiencing homelessness throughout Wayne County.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

<b>Revenue</b>	<b>FY 25/26</b>	<b>Annualized</b>
General Funds	\$ 254,493.00	\$ 254,493.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.829502.00000

In Budget (Y/N)? Y

Board Action #: 26-32

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Tuesday, November 4, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Monday, November 3, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date 12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-33 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Detroit Central City C.M.H., Inc.

Contract Title: Central City PSH CoC Program & Leasing Project

Address where services are provided: Various Locations - Scattered Sites

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 165,045.00 Previous Fiscal Year: \$ 165,045.00

Program Type: Continuation

Projected Number Served- Year 1: 134 Persons Served (previous fiscal year): 134

Date Contract First Initiated: 10/1/2015

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 Detroit Wayne Integrated Health Network (DWIHN) is requesting Board approval to **disburse General Fund match in the not to exceed amount of \$165,045** to Central City Integrated Health (CCIH) for their approved Department of Housing and Urban Development (HUD) direct grants for the **fiscal year ending September 30, 2026**.

The Continuum of Care grant agreements between HUD and Central City Integrated Health (CCIH) are based on the continued need to provide supportive services and to have housing stock in Detroit for persons experiencing homelessness.

The General Fund match includes annual amounts for supportive services and administrative costs for the Supportive Housing Program and Leasing Project. The project will provide housing and

supportive services including, but not limited to, psychiatric and nursing care, substance use treatment, Intensive Dual Diagnosis Treatment, Assertive Community Treatment (ACT), motivational interviewing, therapy and case management services. The target population is chronically homeless single adults with severe and persistent mental illness, a co-occurring mental illness and substance use disorder, or physical health disabilities and a substance use disorder.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
State GF	\$ 165,045.00	\$ 165,045.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64981.829501.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Board Action #: 26-33

Signed: Friday, October 31, 2025

Signed: Friday, October 31, 2025



## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Board Liaison Signature

Executive Director -initial here: \_\_\_\_\_

Date 12/3/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-36 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY26 Children Services Healthcare Quality Initiatives Program

Address where services are provided: various provider locations

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 12/1/2025 to 9/30/2026

Amount of Contract: \$ 3,150,003.00 Previous Fiscal Year: \$ 3,780,000.00

Program Type: Continuation

Projected Number Served- Year 1: 45,500 Persons Served (previous fiscal year): 44,000

Date Contract First Initiated: 10/1/2023

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).

Requesting DWIHN Board approval for the Children Services Health Quality Initiative for the time range of 12/1/2025 - 9/30/2026.

Providers are included as a result of the 2026-020 School Based Health Quality Initiative Request for Proposal (RFP) and the 2026-022 Integrated Pediatric Program Request for Proposal (RFP).

Funding for the new Health Quality Initiative is in accordance with 45 CFR 158.150 to improve healthcare quality of services.

The total FY26 budget allocation is estimated at \$3,780,000, of which \$629,997 was previously approved on Board Action 25-18R.

**Approval is requested to allocate the remaining budget amount of \$3,150,003 for the 10 months ending September 30, 2026.**

Program descriptions and amounts are as follows:

**School Success Initiative (School Based Healthcare Quality Initiatives):** Funding of \$2,483,335 will cover the remaining 10 months for FY26 out of the total \$2,980,000 budget. Funding will be distributed to the eleven (11) CMH Providers delivering the services include Assured Family Services, America's Community Council, Centers for Family Development DBA Black Family Development Inc., Detroit Wayne Outpatient Clinic, Development Centers, Hegira Health Inc., Southwest Counseling Solutions, Starfish Family Services, Team Mental Health Services (Team Wellness), The Guidance Center, and *the new pending provider once approved by credentialing department.*

*Note: ACCESS discontinued this program effective 11/30/2025; ACCESS' total estimated funding will be allocated to a new provider once credentialing review is complete.*

Description: The overall performance expectation for the School Success Initiative is to ensure students and their families have access to behavioral and integrated health services within a school-based and community-based setting and provide evidence-based psychoeducation training and intervention to children and school professionals. This initiative will help reduce the stigma surrounding children and families that can benefit from performance expectations, continue providing school-based behavioral health services, and increase integrated health services to children and families, across all of Wayne County, throughout the school year and summer.

**School Enrichment Program (GOAL Line):** Community Education Commission to receive \$458,334 to cover 10 months FY26 out of the total estimated \$550,000 budget for the School Enrichment Program.

Description: The purpose is to increase access to behavioral health and social-emotional supports through its enrichment programming at the Northwest Activities Center (NWAC) during the school year as

well as the summer. The program objectives include having in-school and out-of-school behavioral health specialists, afterschool enrichment and social emotional learning, youth development, healthy living, and social responsibility programming.

**Integrated Pediatric Program (formerly Integrated Infant Mental Health Program):** Starfish to receive \$208,334 to cover 10 months for FY26 out of the total estimated \$250,000 budget for the Integrated Pediatric Program.

Description: The goal is to encourage and facilitate the integration of behavioral health and physical health within the service delivery system. Behavioral Health Consultants to utilize evidence-based practices to ensure the comprehensive wellness of all patients served. Additionally, working to improve standardized screening, assessment, intervention, referral, and follow-up services for patients at various OB/GYN clinics within Wayne County.

**Funds within the total budget amount may be allocated amongst providers as needed without Board approval.**

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

Source of Funds: Medicaid

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Medicaid	\$ 3,150,003.00	\$ 3,150,003.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Tuesday, November 4, 2025

Signed: Friday, October 31, 2025

11/4/2025 2:17:54 PM

10/31/2025 3:58:06 PM

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date 12/3/2025

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-38 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: City of Highland Park

Contract Title: FY26 Highland Park Police Department Behavioral Health Partnership

Address where services are provided: 12050 Woodward Avenue Highland Park, MI 48203

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 218,887.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 100 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 10/1/2025

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).

Highland Park PD was awarded funds (\$218,887 through a DOJ grant) and intend to expand the partnership with the Detroit Wayne Integrated Health Network (DWIHN) to fund one (1) Behavioral Health Specialist position along with training and resiliency-focused events. DWIHN and the Highland Park Police Department (HPPD) are establishing a collaborative partnership to improve crisis response for individuals with mental illness, developmental disabilities, or substance use disorders in Highland Park. Shared goals include enhancing officer and community safety, diverting individuals from jail and emergency rooms into treatment, reducing recidivism and hospitalization, and promoting recovery and community integration. DWIHN will implement a co-response model and deliver Crisis Intervention Team (CIT) and behavioral health trainings to HPPD. The budget breakdown is as follows:

- Behavioral Health Specialist salary and fringes - \$90,000
- Deliver CIT trainings and co-response services - \$128,887

A budget adjustment is forthcoming to certify the additional revenue and related expenses.

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

Source of Funds: Other

Fee for Service (Y/N): Y

Revenue	FY 25/26	Annualized
Local Grant	\$ 218,887.00	\$ 218,887.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64941.822402.07109

In Budget (Y/N)? N

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Friday, November 7, 2025

Signed: Wednesday, November 5, 2025



## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date

  
\_\_\_\_\_

## DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 26-39 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Starfish Family Services

Contract Title: Michigan Child Collaborative Care Program (MC3) and Behavioral Health Consultant

Address where services are provided: 30000 Hiveley, Inkster, Michigan 48141

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 105,596.00 Previous Fiscal Year: \$ 124,755.00

Program Type: Continuation

Projected Number Served- Year 1: 300 Persons Served (previous fiscal year): 365

Date Contract First Initiated: 6/1/2015

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).

This board action is requesting the approval of a one year contract for an amount not to exceed \$105,596 for FY26 contract term from 10/1/2025 - 9/30/2026. Funds are provided by University of Michigan for \$84,612 for clinical services and \$20,984 for administrative services.

The Michigan Child Collaborative Care Program and Behavioral Health Consultant Project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Starfish Family Services provides local oversight, in collaboration with MC3 program, of the Behavioral Health Consultant as they implement MC3 in Wayne County as well as work in concert with other regional Behavioral Health Consultants.

**A sum of an amount not to exceed \$95,359 will be provided to Starfish Family Services to offer behavioral health consultant services for the FY 2026 period.** Of this total amount (\$18,247 is for administrative (federally funded) and \$77,112 is for clinical services (state funded)). This provider was selected because they were already implementing integrated health care services through a Flynn Grant. When the grant ended, MDHHS asked that DWIHN continue to use this organization. **The remaining \$10,237 is allocated for DWIHN indirect costs (\$2,737 for administrative and \$7,500 for clinical).**

Starfish Family Services Behavioral Health Consultant will act as the liaison with the primary care physician staff and the University of Michigan psychiatric staff.

Services include:

- Regional Outreach to eligible providers to ensure utilization of the MC3 program;

- Linkage between Primary Care Providers and MC3 Psychiatrist;
- Coordination of care for children, adolescents, and perinatal women;
- Behavioral Health Consultant provides consultation services in designated primary care site; and
- Collection of required data and local utilization to facilitate the project evaluation.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
State grant	\$ 84,612.00	\$ 84,612.00
Federal grant	\$ 20,984.00	\$ 20,984.00
<b>Total Revenue</b>	<b>\$ 105,596.00</b>	<b>\$ 105,596.00</b>

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

*James White*

Signed: Friday, October 31, 2025

10/31/2025 3:36:13 PM

Stacie Durant, Vice President of Finance

Signature/Date:

*Stacie Durant*

Signed: Friday, October 31, 2025

10/31/2025 8:25:25 AM

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_

  
Board Liaison Signature

Date

  
\_\_\_\_\_

**DETROIT WAYNE INTEGRATED HEALTH NETWORK  
BOARD ACTION**

Board Action Number: 26-40 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 11/19/2025

Name of Provider: Neighborhood Service Organization

Contract Title: NSO Detroit Healthy Housing Center

Address where services are provided: Various Locations

Presented to Program Compliance Committee at its meeting on: 11/12/2025

Proposed Contract Term: 10/1/2025 to 9/30/2026

Amount of Contract: \$ 902,050.00 Previous Fiscal Year: \$ 902,050.00

Program Type: Continuation

Projected Number Served- Year 1: 1,050 Persons Served (previous fiscal year): 1050

Date Contract First Initiated: 10/1/2006

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) requests Board approval of a one-year contract renewal with the following provider in the **total amount not to exceed \$902,050 for the fiscal year ending September 30, 2026.**

Neighborhood Service Organization - Detroit Healthy Housing Center in the amount of \$902,050, to provide intensive services to decrease homelessness and residential instability and increase individuals in supportive living arrangements. This initiative is funded with General Fund.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 25/26	Annualized
State General Funds	\$ 902,050.00	\$ 902,050.00
	\$	\$
<b>Total Revenue</b>	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: Multiple

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

*James White*

*Stacie Durant*

Signed: Sunday, November 9, 2025

Signed: Friday, November 7, 2025

## Board Action Taken

The following Action was taken by the Full Board on the 3<sup>rd</sup> day of December 2025.

X Approved - Board action was deferred by Board and approved at the Special Full Board meeting held on Wednesday, December 3, 2025 (VP of Finance – S. Durant)

€ Rejected

€ Modified as follows:

€ Tabled as follows:

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Executive Director -initial here: \_\_\_\_\_



Board Liaison Signature

Date

12/3/2025