# Detroit Wayne Integrated Health Network



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FULL BOARD MEETING Wednesday, April 15, 2020 707 W. Milwaukee 2<sup>nd</sup> Floor Conference Room (Virtual) 1:00 P.M. - 3:00 P.M. REVISED AGENDA

- I. CALL TO ORDER
- II. ROLL CALL
- III. APPROVAL OF THE AGENDA
- IV. MOMENT OF SILENCE
- V. APPROVAL OF BOARD MINUTES Full Board Meeting March 31, 2020
- VI. RECEIVE AND FILE Approved Finance Committee Minutes March 5, 2020 Approved Program Compliance Committee Minutes – (No Meeting)

# VII. ANNOUNCEMENTS

- A) Authority Announcements
- B) Board Member Announcements

# VIII. BOARD COMMITTEE REPORTS

- A) Board Chair Report
  - 1) Board Member Appointments
  - 2) Exigent Approval Purchase of Personal Protective Equipment (PPE)
  - 3) Exigent Approval Intensive Stabilization Crisis Services Team Wellness
  - 4) CEO Annual Performance Appraisal Recommendations
  - 5) Board Self-Assessment Recommendations
- B) Executive Committee
  - 1) CEO Incentive Compensation Recommendation
  - 2) Substance Use Disorder Oversight Policy Board Board Member Appointments
  - 3) Strategic Plan Advocacy Pillar
- C) Finance Committee
- D) Program Compliance Committee
- E) Recipient Rights Advisory Committee

#### **Board of Directors**

Timothy Killeen, Treasurer Angelo Glenn Dr. Cynthia Taueg Dora Brown, Secretary Kevin McNamara Full Board Meeting April 15, 2020 Page 2 of 2

#### IX. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

#### X. AD HOC COMMITTEE REPORTS

A) Policy/Bylaw Committee

#### XI. PRESIDENT AND CEO MONTHLY REPORT

- A) Michigan Department of Health and Human Services (MDHHS) Proposed State Integrated Plan (SIP)
- B) Plan to reduce Medicaid Expenditures
- C) Integrated Health Plans
- D) COVID 19 Provider Support

#### XII. FY 2019 ANNUAL UTILIZATION MANAGEMENT PROGRAM EVALUATION (*Program Compliance*)

XIII. FY 2019 QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PLAN (QAPIP) ANNUAL EVALUATION (*Program Compliance*)

#### XIV. UNFINISHED BUSINESS Staff Recommendations:

A. BA#20-06 (Revision 3) – Michigan Department of Health and Human Services – PIHP FY 2019/2020 Contract Amendment (*Program Compliance*)

# XV. NEW BUSINESS

#### Staff Recommendations:

A. BA#20-52 MedSupply Corp, Inc. Purchase of Personal Protective Equipment – *(Exigent Approval Board Chair)* 

# XVI. REVIEW OF ACTION ITEMS

#### XVII. GOOD & WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS

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

# XVIII. ADJOURNMENT



DETROIT WAYNE INTEGRATED HEALTH NETWORK FULL BOARD MEETING Meeting Minutes Virtual Meeting Tuesday, March 31, 2020 1:00 p.m.

# **BOARD MEMBERS PRESENT**

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

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

# BOARD MEMBERS EXCUSED: None

**GUESTS**: None

# **CALL TO ORDER**

The meeting was called to order at 1:20 p.m. by the Board Chair, Mr. Bernard Parker.

# **ROLL CALL**

Roll call was taken by Ms. Abdallah and a quorum was established.

# **APPROVAL OF THE AGENDA**

The Chair Mr. Parker welcomed everyone to the virtual meeting and explained to those participating that this was the Board's first virtual meeting and apologized for the delay. He explained that we are having a virtual meeting because of the Governor's Executive Order 2020 and that Public Comment and Good and Welfare would take place. He also gave tips to Board members on how to participate in the call and the process that would be used for participating in Good and Welfare and Public Comment.

#### The Chair for a motion on the agenda. It was moved by Ms. Ruth and supported by Ms. Abdallah to accept the agenda as presented.

Dr. Taylor requested item XII. 2019 Utilization Management Program Evaluation and item XIII. 2019 Quality Assurance Performance Improvement Plan Annual Evaluation (QAPIP) be referred to the Program Compliance Committee for review as the Committee did not meet in March and these items will be referred to Full Board in April. Mr. Riley, III requested that the Recipient Rights Advisory Committee Report be removed from the agenda as there were several issues that needed to be addressed given the climate.

# The amendment was accepted by Ms. Ruth and supported by Ms. Abdallah to approve the agenda as amended. Motion carried unanimously.

# **MOMENT OF SILENCE**

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

#### **APPROVAL OF BOARD MINUTES**

The Chair called for a motion on the Board minutes of the Full Board meeting of February 19, 2020. A motion was offered by Commissioner Killeen and supported by Dr. Taueg to approve the Full Board minutes of February 19, 2020. Motion carried unanimously.

#### **RECEIVE AND FILE**

The Chair called for a motion to Receive and File the approved Finance Committee minutes of February 5, 2020. A motion was offered by Commissioner Killeen and second by Mrs. Abdallah to "Receive and File" the approved minutes from the Finance Committee meeting of February 5, 2020. The motion carried unanimously.

The Chair called for a motion to Receive and File the approved Program Compliance Committee minutes of February 12, 2020. A motion was offered by Dr. Taylor and second by Dr. Taueg to "Receive and File" the approved minutes from the Program Compliance Committee meeting of February 12, 2020. The motion carried unanimously.

# ANNOUNCEMENTS

#### Authority Announcements

Mr. Brooks reported that in light of COVID-19 approximately fifteen communications have been sent to the community and Providers; communications covered the following: changes in residential settings; recovery housing support services which addressed alternative measures to house those with COVID 19; information on customer services; updates regarding the functionality of DWIHN staff and building visits; and face-to-face visits with clients in light of social distancing. It was also reported that a COVID 19 informational corner had been added to the website.

#### **Board Announcements**

Ms. Abdallah noted that her appointment to the Board would expire on today, March 31, 2020 and this would be her last Board meeting. She noted her appreciation to the board for their hard work and the opportunity to provide service the people of Wayne County and she hoped that DWIHN will come out of this pandemic stronger. Mr. Parker noted that typically outgoing Board members would be recognized for their service during the celebratory portion of the Annual meeting; however, due to the Executive Order regarding meetings the celebratory portion of the meeting would be cancelled; he noted his appreciation for her service and the services she provided as the Board Secretary. He thanked her for her contributions on behalf of the Board and wished her well on future endeavors and reminded her to stay in touch.

The Board Chair noted the passing of Mr. Calvin Trent. Mr. Trent was instrumental in the Substance Use Disorder community as he spearheaded and organized a number of initiatives and literally saved lives of individuals that experienced SUD challenges.

# **BOARD COMMITTEE REPORTS**

#### **Board Chair Report**

Mr. Parker gave a verbal report. He reported the Annual meeting scheduled on May 20, 2020 would be cancelled and a number of items would have to be addressed when regular work re-convened. New board members could be sworn in by any Judge; County or City Clerk and would have to complete this process before being able to serve; it was also noted the recognition of out-going board members and the celebration of Network accomplishments would be cancelled. He reported the Finance Committee would meet virtually on Wednesday, April 1<sup>st</sup> at 1:00 p.m. and any board member was welcome to participate; however only committee members could vote and the information was posted on how the public could join the meeting.

The Program Compliance Committee would also meet virtually on Wednesday, April 8<sup>th</sup> at 1:00 P.M. a posting would be sent out with the phone numbers and any board member could participate in the meeting.

The Chair noted the Mayor of the City of Detroit and the Wayne County Executive recommends and appoints individuals to serve on the board every year as a person's term expires; the appointments are presented to the Wayne County Commission for ratification before a person is officially on the board; the State statute states that Board member terms expire on March 31, 2020 and board member do not serve until a replacement has been named; a board member whose term has expired cannot serve past March 31<sup>st</sup> he noted that the Board members whose term expired today were Ms. D. Burrell and himself which were City appointments; he noted a recommendation had been made by the Mayor and would be presented to the Commission on Thursday; until the recommendation was ratified he would not be serving as the Chair and Dr. Taylor, Vice Chair would serve as Chair and handle any issues until the appointments were ratified.

It was noted the Wayne County Executive had two appointments, Mr. K. McNamara and an open position that needed to be filled; notice had not be received regarding those appointments however as of today, Mr. McNamara would not be a member of the DWIHN Board until he is reappointed which he understands that is the intent of the County Executive but it will have to be done formally. He noted that all Committee assignments at least for the month of April would remain the same until all Board appointments have been made and the Board has a full contingency; once Board members have been identified a notice will be sent to all board members requesting committee preferences.

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

#### **Executive Committee**

Mr. Parker gave a verbal report. It was noted the Board Executive Committee did not meet in the month of March to consider the listed items. The items that are noted on the agenda were Receive and File and would not have changed if presented to the Executive Committee. The Chair gave an overview of the CEO Annual Performance Evaluation and noted there were a number of areas the CEO is evaluated in which include; Finance; Human Resources; Leadership; Service and Programs; Board Relations and Governance; and Labor and Employment Relations. Each Board member has an opportunity to participate and eleven of the twelve board members participated in the evaluation. The Chair gave the rating scale and the score received in each of the areas listed. He also noted that the CEO did a self-evaluation and the scores of the CEO and the Board were very close. There was also an area in the evaluation that noted compliments and areas for improvements. The Board Chair will be meeting with the CEO to discuss those areas and come back with a plan on how to address those items based on the Board comments. The CEO Annual Evaluation will also be placed on the Board Executive Committee Agenda for discussion.

# The Chair called for a motion to Receive and File the CEO Annual Performance Appraisal. A motion was offered by Dr. Taylor and supported by Mr. Riley, III to Receive and File the CEO Annual Performance Appraisal. The motion carried unanimously.

The Chair noted the Board also completed a Board Self-assessment. This assessment gave them an idea of how they are performing as a board and identities areas where they are performing well and areas for improvement. An overview was provided of some of the comments received. All of the comments will be taken to the Board Executive Committee for an action plan of the areas noted for improvement. The Chair called for a motion to Receive and File the Board Self-Assessment. **A motion** 

# was offed by Mr. Riley, III and supported by Ms. Abdallah to Receive and File the Board Self-Assessment. The motion carried unanimously.

#### Finance Committee

Commissioner Killeen, Chair of the Finance Committee noted the Finance Committee will meet on tomorrow, Wednesday, April 1, 2020 at 1:00 p.m. He invited the public to attend and noted they will be taking up any urgent items that may come from this meeting.

The Chair called for a motion on acceptance of the Finance Committee report. There was no further discussion.

#### A motion was offered by Mr. Riley, III and supported by Ms. Abdallah to accept the Finance Committee Report. The motion carried unanimously.

#### **Program Compliance Committee**

Dr. Taylor, Chair of the Program Compliance Committee reported that given the extenuating circumstances of COVID – 19 the Program Compliance Committee did not meet in the month of March and a full report will be provided for the month of April.

#### **Recipient Rights Advisory Committee**

Mr. Riley, III Chair of the Recipient Rights Advisory Committee reported there was no meeting held in the month of March.

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

Mr. A. Glenn, SUD Chair reported that the Substance Use Disorder Oversight Policy Board did not meet in the month of March. The SUD Oversight Policy Board will work on meeting virtually for the month of April.

#### **AD HOC COMMITTEE REPORTS**

Policy/Bylaws Committee

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

#### PRESIDENT AND CEO MONTHLY REPORT

Mr. Brooks reported. A written report was provided for the record. The CEO reported on the COVID-19 situation and the financial picture of the Network; he noted that for the past five (5) years the Michigan Department of Health and Human Services (MDHHS) has pressured PIHP's to spend their reserves; because of that the PIHP's, including DWIHN have exhausted much if not all of their internal service funds (ISF) which are the Medicaid Reserve dollars that are used to pay claims. There is also an issue with some of the underfunded mandates; such as the expansion of Autism benefits and the additional demand on Residential Services which has put us in a deficit of \$50 million dollars. The State has acknowledged there is a \$120 million-dollar shortfall in the system and since DWIHN is 25% of the system this equates to roughly a \$30 million-dollar shortage in our funding which the State is working on, but we have not yet received. Over the last two years there have been adjustments to the budget that have caused concern which are the TANF, DAB and death benefit recoupment in which the State has recouped millions of dollars that they believe they have overfunded either through lower enrollments or eligibility. He has spent a lot of time working with the Department on the budget and especially during the COVID 19 crisis. He noted the State is working on recovering the \$120 million dollars that the system is short and secondly there is process that the State is working on to add money to the System because of the pandemic; this money is not yet available. He is aware that Providers cannot maintain the same level of consistent past encounters therefore DWIHN has bypassed some of the per member per month (PMPM) requirements and paid averages and have also looked at fee for service since some of the face to face

services cannot take place during the COVID-19 crisis. Providers are now using Telehealth and there will be a shift in Provider services where some providers will have more face to face encounters because of the type of services performed and others will have less. He also noted that it is important that DWIHN remain solvent and continue to provide services to the people we serve.

The Governors Diversion Council and the State have both switched over to conference calls; the MDHHS State Integrated Plan (SIP) is continuing to be monitored during the crisis as we are looking at the long term future of the people we serve. He gave an overview of the COVID-19 numbers and noted that DWIHN is working with Providers to get supplies to them so that they can better do their jobs. It was reported that he will also be taking advantage of some of the loans that will be available because of the crisis. The website has been updated and we are also keeping the media updated as to what we are doing.

It was noted at this time the Chair, Mr. Parker had lost the meeting connection and the Vice Chair, Dr. Taylor assumed the role of Chair. Discussion ensued regarding the letters received from Macomb and how they are handling their Providers during the crisis; COVID-19 funding; the \$2 trillion dollar bill out of Washington; and DWIHN being in a position to assist Providers with receiving monies from the stimulus package. Mr. Brooks noted that he has been invited to attend Provider conference calls and it is the goal of DWIHN to push out as many dollars as possible to the community; however, first he wants to hold MDHHS responsible for making up the shortfall of \$120 million dollars so the budget can be balanced and DWIHN can provide support to the Providers; and secondly DWIHN will work to secure any additional dollars that are available because of COVID-19 from the State and the Federal government's \$2 trillion dollar package which will be the two sources of available funding. It was noted that information will be available on the website to assist Providers in securing monies as there are a number of loans available to Providers that will not need to be paid back if staff and payroll levels were maintained. Discussion ensued regarding bringing in an additional staff person or hiring a consultant to help with obtaining COVID-19 funds. Mr. Parker was able to reconnect to the call and resumed the role of Chair. Discussion ensued regarding concerns with waiting for the State to reconcile the monies that we should have received before assisting Providers; Mr. Brooks noted that funds are being pushed out to Providers and the only amounts that we are waiting on are the COVID-19 which at this time amounts have not been confirmed by the State.

Discussion ensued regarding the Provider meetings and Mr. Brooks virtual attendance at the meetings. The Chair requested an update of the information discussed at the meetings be provided at the Program Compliance meeting scheduled on Wednesday, April 8, 2020. The Chair called for a motion on the President and CEO Report.

# A motion was made by Mr. Riley, III and supported by Dr. Taylor to accept the President and CEO Report. The motion carried unanimously.

# **UNFINISHED BUSINESS**

# **Staff Recommendations:**

**BA#18-45 (Revised)** LAZ Parking *(Finance)* This Board Action is requesting an additional \$10,000 to cover unforeseen final costs for additional parking for employees at 645 W. Baltimore Parking deck. **A motion was made by Dr. Taylor and second by Mr. Riley, III to approve BA#18-45 (Revised)** There was no discussion. **The motion carried unanimously.** 

**BA#20-26 (Revised 2)** FY 19-20 Operating Budget (*Finance*) This Board Action is to revise the FY 19-20 Operating Budget to reflect the certification of additional revenue totaling \$3,147,146. A **motion was made by Mrs. Abdallah and second by Ms. Ruth to approve BA #19-24 (Revised)** There was no discussion. **The motion carried unanimously.** 

# NEW BUSINESS Staff Recommendations:

**BA#20-48** – Allen Brothers, PLLC *(Finance)* This Board Action is requesting additional funds to cover legal services that were performed May 2019 through November 2019 in relation to New Center Community Health properties obtained by DWIHN. **A motion was made by Mrs. Abdallah and second by Commissioner Killeen.** There was no discussion. **The motion carried with Mr. Riley, III abstaining because of a conflict.** 

**BA#20-49** – OBRA/PASSR Neighborhood Services Organization S. Durant reporting. This Board Action is requesting approval to enter into a contract with NSO for the provision of Omnibus Budget Reconciliation Act/Pre-Admission Screen Annual Resident Review Services. DWIHN is obligated by contract with the Michigan Department of Health and Human Services to ensure that OBRA/PASRR services are provided in Medicaid certified care facilities. A RFP was issued in February 2019 and NSO was the only respondent. A motion was made by Dr. Taylor and second by Mr. Riley, III to approve BA #20-49. There was no discussion. The motion carried unanimously.

# FOLLOW UP ON ACTION ITEMS - None

# GOOD AND WELFARE/PUBLIC COMMENT

Mr. Willett (4131) submitted his comment in writing and did not address the Board verbally.

Ms. Cathy Reeceman (9335), CEO Development Centers and Co-Chair of the Collaborative. She thanked the Board and especially Mr. Brooks for attending the meeting this Thursday and noted the letter sent from Mr. Cherrin asking for assurances to sustain essential services for the most vulnerable population. She was appreciative of the PMPM payments which provides consistent funding but also represented a very small portion of services provided and does not help SED; Children's and Youth services and the IDD services. The transition to telehealth has been challenging for them.

There was no response from caller 9661 or 3124.

# **Comments from the Chatroom**

Will any Provider be able to virtually attend the meeting (Michigan Collaborative) on Thursday at 9:30 a.m. and if so, how will they obtain the information? (JVS Human Services)

Could a relaxation occur for face to face recovery support and if that is the case would a modifier be applied for recovery support services billing?

# Written comments for Good and Welfare/Public Comment

Steve Holda (734-945-7087) – Pay providers for their fee-for-service claims including telehealth direct service delivery based on the mechanisms that are already in place Use any remaining funds that would have been spent on outpatient services and push funding to providers to get as close to historic levels of fee-for-service income as possible (using a period that does not include March 2020 which was already adversely affected by the crisis) To preserve the system, supplemental funding is required to stabilize Agencies.

Angela Agodu (313-948-0512) – I Have a consumer in my home who is always walking back and forth in the street. What should I do to protect others?

Catherine Liesman, Ph.D. (248-321-9335) – Would like to speak about the need to support all providers who are struggling in this transition of providing services via telehealth and receive FFS for services. This impacts all providers at varying levels especially child and family providers and IDD services which are all FFS as is all the psychiatric services to all populations. Thank you, Catherine Liesman, Ph.D. CEO Development Centers.

Jeanette DiFlorio (586-879-9601) – The 7 percut cut to providers has hurt agencies trying to provide Services. Does the authority plan on giving that money back anytime soon. What does the Authority plan on doing to assist agencies with the extra overhead costs with the Covid 19 epidemic. What is the Authority doing to help agencies acquire PPE for employees working in the mental health services. Is there any additional money coming to the Authority with the CARE bill just signed?

Joanne Warwick (415-724-3124) – Wayne County is not being well-served. We need Medicare for all so that patients don't struggle every time a health care provider leaves the patient's system, and leaves the patient at zero again. They have to spend hours of time finding a new provider, who is actually taking new patients. Also, today's board meeting, 3/31/2020, this meeting was not set up to allow many to participate, so I would argue it is a violation of the open meetings act.

# ADJOURNMENT

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

Submitted by: Lillian M. Blackshire Board Liaison

# FINANCE COMMITTEE

MINUTES	MARCH 4, 2020	1:00 P.M.	2 <sup>ND</sup> FLOOR BOARD ROOM
MEETING CALLED BY	I. Commissioner Tim Killeen, Chair called the meeting to order at 1:09 p.m.		
TYPE OF MEETING	Finance Committee Meeting		
FACILITATOR	Commissioner Tim Killeen, Chair – Finance Committee		
NOTE TAKER	Nicole Smith, Management Assistant		
NOTE TAKERNicole Smith, Management AssistantImage: Note of the system o			

# AGENDA TOPICS

II. Roll Call Ms. Lillian Blackshire, Board Liaison

DISCUSSION	Roll Call was taken by and a quorum was present.	
III. Committee M		
No remarks from the	ne committee members.	
IV. Approval of Agenda Commissioner Killeen called for a motion on the agenda. There was no discussion. Motion: It was moved by Mr. McNamara and supported by Ms. Brown approval of the agenda. Motion carried.		
V. Items Follow-up		
	erational Efficiency Plan (S. Durant)	
Pursuant to the adoption of the fiscal year ended September 30, 2020 Budget, management outlined several operational opportunities to better manage the system and reduce costs. The following details the changes and status of each area:		
plan whereby it re	<b>sorder (D. Owens Lead)</b> - The SUD Advisory Board approved a duced rates for two codes – H0023 and T1012 for Peer Directed very Supports, respectively.	

#### **Update: Status 2/28/2020**

Estimated 1st quarter savings on reduced rates for H0023/T1012 is approximately \$717,267; Estimated 1st quarter savings on 45 to 29 residential days is approximately \$1,130,888;

**Home Help (D. Lasenby Lead)** – Approximately 2,800 consumers that reside in an unlicensed setting, if eligible, must receive personal care services directly from DHS Adult Services; Medicaid does not reimburse personal care in an unlicensed setting. DWIHN believes that many providers are billing these services through other Medicaid eligible billable codes.

**Update: status 2/28/20** Network Administrator and Interim Director of Managed Care Operations are reviewing the previous application process and revising the process that is incorporated into the standardized IPOS and New Staff Planning Guide. The calculation for Home Help is captured and calculated on the IPOS. This will help to identify or catch errors in the system, as it relates to licensed and non-licensed homes.

**Autism (E. Lawson Lead) -** Many of the consumers enrolled in the Autism program do not meet the minimum participation required by the State of Michigan. DWIHN inquired from MDHHS whether there could be a disenrollment policy associated with the program whereby if a consumer failed to comply with the guidelines within a 60day period, the consumer would be dis-enrolled from the more intensive Autism program and moved to an equally suitable IDD program whereby the participation was not as restrictive. Per the State, a disenrollment policy is not allowable however DWIHN will continue to work with the providers to ensure fidelity is met.

**Update: Status 2/28/2020** – The RFP has been posted and responses were due back on 2/28/2020. There was one (1) .response received to the posted RFP.

**Shared Living Arrangements (S. Durant and M. Singla Lead)** – Many consumers reside in residential settings whereby they have roommates. Currently, the staffing tool used by the support's coordinators, with the exception of Community Living Services, do not take into consideration shared living arrangement. This allows providers to bill services for several consumers performed by the same DCW worker at the same time. DWIHN must make several changes including but not limited to: (1) performing a payroll audit to determine a baseline for each home and (2) create a staffing tool in MHWIN that incorporates shared living arrangements.

**Update:** Status 2/28/2020 – CFO and team met with two (2) providers and estimated recoupment is \$159,819, with an annual savings of \$420,233. Provider 1, meeting date was 2/28/20. Provider 2, scheduled meeting date is 3-6-20.

**Utilization Guidelines (D. Lasenby Lead)** – The UM department uses written criteria based on sound clinical evidence from a national coverage determination tool, MCG – Indicia to review and authorize treatment and care. Utilization management decisions are documented using specified procedures for appropriately assessing individuals, applying American Society of Addiction Medication (ASAM) criteria to validate the appropriate level of care. In addition, the guidelines will be aligned with a Standardized IPOS. The combination of UM guidelines and the IPOS in MHWIN, will require prior authorization of services and services outside of guidelines will require a clinical review.

Update: Status 2/28/20 The UM Guidelines have been rolled out.

# Establishment of Eligibility and Benefits Unit (S. Durant and M. Singla) –

The FY2020 Operating Budget included establishing a Eligibility and Benefits Unit with three staff whereby the duties would include but not be limited to: (1)

Ensuring consumers are properly enrolled in Medicaid (i.e. DAB); (2) managing
the DHS Outstation workers; and (3) working with the provider network to ensure
consumers recertify their Medicaid benefits and reduce lapse in coverage.
Update: Status 2/28/2020 – Hired supervisor on 1/20/2020; other two staff hired
on 2/24/2020.
VII. Approval of the Meeting Minutes
Commissioner Killeen called for a motion on the minutes from the Finance
Committee meeting of Wednesday, February 5, 2020.
Motion: It was moved by Mr. McNamara and supported by Ms. Brown
approval of the minutes from the meeting held on Wednesday, February 5, 2020
Motion carried.
VIII. Presentation of the Monthly Finance Report
A written copy was provided for the record. The Monthly Finance Report was presented

A written copy was provided for the record. The Monthly Finance Report was presented by S. Durant, CFO. The Network Finance accomplishments and noteworthy items were as follows:

1.Effective October 1, 2019, Milliman published actuarial rates and DWIHN projected an increase in Medicaid totaling \$4 million per month or \$48 million annually. An analysis of the 2019 4th quarter payments compared to the payments received October 2019 through January 2020, and the projections from both DWIHN and the Community Mental Health Board Association was attached to the report.

2. Effective March 1, 2020, the Authority will be implementing a PMPM payment model for the ACT providers; we currently pay FFS. Oakland CMH has a similar model that pays a \$1,150 PMPM for the bundled services; DWIHN will pay \$1,200 with an enhanced rate for meeting certain KPI, including reduced hospital costs. Currently, DWIHN pays on average \$1,900 PMPM which is the highest in the State of Michigan. Estimated annual savings is \$3.7 million; FY2020 savings of \$2.1 million with better outcomes.

3. CFO prepared analysis of FY19 over expenditures, including the variances over prior year and disposition of the deficit (see attachments).

4. On February 2,1 2020, DWIHN submitted a formal request to Robert Gordon and Elizabeth Hertel (copied Governor Whitmore) requesting MDHHS provide an Autism cost settlement for fiscal years September 30, 2018 and 2019 totaling \$21 million. Received an email acknowledging receipt and a response will be forthcoming.

5. On February 19, 2020, CFO liquidated \$7.5 million of cash with three investment managers; this was necessary to ensure timely payments to providers given the January 2020 recoupment by MDHHS.

6. MDHHS put death recoupment on hold until further notice.

The State of Michigan is holding a meeting in Lansing for all ten (10) PIHP CEO/CFO attendees only Monday, March 9, 2020. The meeting is mandatory to discuss the State payment shortfalls.

S. Durant made note that financial reports figures are subject to change after the yearly audit is completed.

Commissioner Killeen called for a motion on the Monthly Finance Report. **Motion**: It was moved by Mr. McNamara and supported by Ms. Brown to accept the Monthly Finance Report. **Motion carried**.

**IX. Presentation of 1<sup>st</sup> Quarter 2020 Procurement Report** – The report was presented by C. Brown, Procurement Manager. The report was prepared by the former Procurement Administrator S. Hill, Procurement Administrator. The report is submitted for all procurements under \$50,000 for the 1st Quarter FY 2020 (October 1, 2019 to December 31, 2019). This report also includes cooperative purchases, including those over \$50,000 (as applicable). Contracts over \$50,000 are not included, as those procurements were previously approved by the Board via "Board Action." Additionally, the report shows "PO" (Purchase Orders) and "BO" (Blanket Orders). A "PO" is a one-year contract that expires at the end of the fiscal year, whereas, a "BO" is a multi-year

contract. The report noted the contract percentage for Wayne County was 60%; Out County contracts was - 40%. The Funding Percentage w/o IT for Wayne County was 49%, Out County - 51%, and Total Funding w/o IT was \$394,565.83. Commissioner Killeen called for motion on the report. **Motion:** It was moved by Mr. McNamara and supported by Ms. Brown to approve the Presentation of the 1<sup>st</sup> Quarter 2020 Procurement Report. **Motion carried**.

**X. Strategic Plan IT/Finance Pillar** – The report will be deferred to the April 1, 2020 meeting. Commissioner Killeen called for motion. **Motion:** It was moved by Mr. McNamara and supported by Ms. Brown to defer the Strategic Plan IT/Finance Pillar to meeting of April 1, 2020. **Motion carried**.

# XI. Unfinished Business – Staff Recommendations:

**A. Board Action #18-45 (Revised): LAZ Parking** – This Board action is a modification to request an additional \$10,000 to cover unforeseen final cost for additional parking for DWIHN staff from both locations (Milwaukee & New Center One) to park at 645 W. Biltmore Parking Deck for period January 1, 2020 to January 31, 2020. The total amount for the contract will be \$169,000.00. The board action was presented by staff B. Blackwell, Chief of Staff. Commissioner Killeen called for a motion on Board Action #18-45 (Revised). **Motion**. It was moved by Ms. Brown and supported by Ms. Burrell approval of Board Action #18-45 (Revised) to Full Board. **Motion carried.** 

**B. Board Action #20-26 (Revised 2): FY 2019-2020 Operating Budget** – The board action was presented by staff A. Mosely, Budget Administrator. This is the 2<sup>nd</sup> revision of the board action to reflect the certification of revenue totaling \$3,147,146. The action is for budget adjustments #20-35-004 (\$350,000) grant award for the MI Opioid Partnership; #20-35-005 (\$162,500) certification of additional funds per FY 2020 Jail Plus Program grant award; and #20-35-006 (\$2,64,646) certification of additional funds per the FY 2020 MDHHS SUD allocation letter. Commissioner Killeen called for a motion on Board Action #20-26 (Revised 2). Motion. It was moved by Ms. Brown and supported by Ms. Burrell approval of Board Action #20-26 (Revised 2) to Full Board. Motion carried.

A. Board Actio modification of a services performe staff B. Blackwel #20-48. Motion	s – Staff Recommendations: n #20-48 Allen Bothers PLLC – This board action is a "BO" (Blanket Order) from \$45,000 to \$55,500, to cover legal ed May 2019 to Nov 2019. The board action was presented by l, Chief of Staff. The Chair called for motion on Board Action . It was moved by Ms. Brown and supported by Ms. Burrell d Action #20-48 to Full Board. Motion carried.			
<b>XII. Good and Welfare/Public Comment</b> – The Chair read the Good and Welfare/Public Comment statement. There were no comments addressed to the committee.				
motion to adjour	<b>nent</b> – There being no further business; the Chair called for a cn. <b>Motion:</b> Moved by Mr. McNamara and supported by Ms. n the meeting. <b>Motion carried</b> . Meeting adjourned at 3:10p.m.			
FOLLOW-UP ITEMS	<ul> <li>A. Update on DAB transformation (March 2020) (S. Durant)</li> <li>B. Update on Operational Efficiency Plan (S. Durant)</li> <li>C. Committee Request Talking Points on Specialty Integrated Plan(SIP) (March 2020)(Mr. Brooks)</li> <li>D. Information request by the Chair, to determine if the state rules/guidelines are the same for both the private health plans and the PIHPs. (T. Forman)</li> </ul>			



# Detroit Wayne Integrated Health Network

707 W. Milwaukee St. Detroit, MI 48202-2943 Phone: (313) 833-2500 <u>www.dwihn.org</u>

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# FISCAL YEAR 2019-20 RESOLUTION NUMBER 6

# DETROIT WAYNE MENTAL HEALTH AUTHORITY BOARD OF DIRECTORS REAPPOINTMENTS TO DETROIT WAYNE INTEGRATED HEALTH NETWORK SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD

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

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

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

# NOW, THEREFORE, BE IT RESOLVED AS FOLLOWS:

**RESOLVED**, by the DWIHN Board this 31<sup>st</sup> day of March, 2020, that the appointments to the SUD Oversight Policy board are as follows:

**Appointments** 

Margo Lane Martin (of Detroit) for a term of April 1, 202,0 through March 31, 2022.

James Perry (of Allen Park) for a term of April 1, 2020 through March 31, 2023.

# **Board of Directors**

Bernard Parker, Chairperson Dora Brown Kevin McNamara Dr. Iris Taylor, Vice-Chairperson Dorothy Burrell William T. Riley, III Timothy Killeen, Treasurer Lynne F. Carter, MD Kenya Ruth Ghada Abdallah, RPh, Secretary Angelo Glenn Dr. Cynthia Taueg Thomas Fielder (of Belleville) for a term of April 1, 2020, through March 31, 2023.

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

I HEREBY CERTIFY that the foregoing Resolution was adopted on this thirty-first day of March, 2020, by the Board of Directors of the Detroit Wayne Integrated Health Network.

Bernard Parker Board Chairperson, Detroit Wayne Integrated Health Network



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

# **Jail Diversion**

# **Jail Diversion Projects**

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

# **Committee 1: Governor's Mental Health Diversion Council**

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

Action Plan for Upcoming Year

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

Next meeting scheduled for Tuesday, April 14, via conference.

# **Committee 2: Wayne County Diversion Council (WCDC)**

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

Members:

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

Next meeting schedules for Tuesday, April 14, via conference.

# **Health Plan Integration**

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

# MDHHS Behavioral Health Restructure (SIP)

# **298 State Pilots**

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

# New Proposal: Specialty Integrated Plan (SIP) Model

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

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

multiple organizations as SIP's, including public behavioral systems, providers, hospitals, and other care entities. SIP's must be a licensed MCO.

- **Statewide Program**. MDHHS is seeking statewide provider networks to assure consistency of care and choice. CMH's can participate as providers within the SIP structure.
- Launch Date. MDHHS is planning on launching the first SIP program in October of 2022

# Concerns with new SIP Program

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

- Statewide versus Regional. The proposal from MDHHS requires multiple statewide SIP's that will compete against each other. This will require each SIP to have a provider network and infrastructure for the entire state. There are approximately 300,000 PIHP lives in Michigan. Forming multiple SIP's to compete against a comparably small population is not cost effective. Regional settings would be more cost effective if multiple SIP's are used. The other option would be to have one Sip for the entire state.
- Elimination of PIHP. The new proposal of SIP's will eliminate the ten (10) PIHP's in the state and promote SIP partnerships with Community Mental Health Service Programs (CMHSP). Three of the PIHP's in the state including DWIHN are both PIHP's and CMHSP's. PIHP's are the legal entities that control Medicaid dollars and reserves; this function will pass over to the newly developed SIP's. DWIHN will have to pursue either becoming a SIP through partnership or becoming a partner in service delivery with several SIP's.
- **Reserve and Risk**. The new SIP must be a MCO and will be required to maintain a substantial reserve from 20-30% of annual spending. The current public system does not allow for high levels of reserves. Special consideration is required to allow the building up of reserves for public entities to participate as a SIP.
- **Partnerships**. The new MDHHS proposal will require partnerships between, providers, health care, behavioral care, and a MCO. MDHHS will potentially send out request for proposals and allow bidders to collaborate on the partnerships. This process increases the risk in light of the limited dollars in the system, vast coverage area statewide, and limited amount of individuals served.
- **Start-up Cost.** There is no mention of start-up cost associated with the MDHHS proposal. SIP's and providers must establish a statewide network and infrastructure at their own expense and risk.
- **Segregated System.** The MDHHS proposal will have a separate process for nonbehavioral individuals. This could result in segregation of health care. This will also require a separation of dollars for health care administration for each system, behavioral and non-behavioral.
- **Outside Take Over.** This process can open the door for out of state organizations to bid and potentially profit in the system by reducing services to increase profits.

# **DWIHN Updates:**

- MDHHS indicated a willingness to change from a statewide system to a regional system consisting of 3 to 4 regions
- MDHHS has indicated a willingness to strengthen to success of the Public SIP
- MDHHS is reviewing methods to promote collaboration and provide guidelines for the future structure.

- MDHHS is evaluating potential increase in cost in result to a broader accessibility of care.
- MDHHS is reviewing changes in the Mental Health Code to promote a realistic benefit structure.
- MDHHS is reviewing changes in risk requirements for the future SIP system.
- MDHHS will resume the SIP project once the current COVID-19 pandemic is under control. Small pockets of meetings are taking place.

# 2020 Funding Updates

# Medicaid:

MDHHS determined that there is a \$120 million shortfall in the overall PIHP budget for fiscal year 2020. An expected payment of \$65 million was scheduled for April 2020 to retroactively make up for the \$120 million loss. This amount was changed from \$65 million to approximately \$50 this week. The overall \$120 million amount will also change per MDHHS. DHN along with other PIHP's are awaiting the Milliman Audit results to determine the exact dollars amount.

- 1. The Federal death audit indicating a \$9 million reduction dating back to 2014. This recoupment is currently on hold as MDHHS access the audit.
- 2. MDHHS is reviewing DWIHN shortages in Autism funding.
- 3. MDHHS is reviewing DWIHN General Fund reductions

# **COVID-19 Funding**

DWIHN is pursuing additional funding in result to Wayne County being an epicenter for COVID-19.

# **General Fund:**

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

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

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

# **Crisis Continuum / Building**

DWIHN will review the Crisis Continuum project and the building requirements to assure it meets the needs of the new MDHHS SIP proposal.

# Staffing

DWIHN is reviewing all positions to assure it meets the future needs of the SIP restructure.

# **Provider Network**

#### **Provider Contracting**

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

#### Coronavirus

Top Michigan Counties with confirmed Coronavirus cases and deaths.

Location	Confirmed		Dea	aths
Wayne County	9,045	-	402	
Oakland County	3,736	-	205	
Macomb County	2,414	-	121	
Genesee County	638	-	33	
Washtenaw County	559	_	11	
Ingham County	189	-	1	
Kent County	187	-	6	

Wayne County is hit heavily with the coronavirus pandemic in result to several factors:

- 1. Congested environment in city settings
- 2. Lack of preventive care and routine physical health care
- 3. Job positions in high risk areas
- 4. Family culture and gatherings
- 5. Pre-existing health conditions

These are just a few steps on this long road ahead, please feel free to reach out to us so that we can know how best to support one another. In this "new normal" we must also find new ways to help our system, our providers and everyone served impacted by this pandemic.

# 1.) URGENT PSYCHIATRIC CARE & CLINICAL SERVICES

# COVID -19 RECOVERY HOUSING/RECOVERY SUPPORT SERVICES

These individuals must be receiving outpatient services from a licensed SUD provider in DWIHNs network via telehealth or telephone communications. The providers may provide up to 14 days for this specific recovery housing services for individuals who are exhibiting the following symptoms:

o Symptomatic COVID-19

Provider	Address	Number of Beds
Quality Behavioral Health	1500 E. Grand Blvd Detroit, MI 48211	36
Detroit Rescue Mission	626 E. Grand Blvd Detroit, MI 48207	86
Lakeridge Village	15941 Fairfield St, Detroit, MI 48238	15

o Tested for COVID-19 and positive

# COVID -19 URGENT PSYCHIATRIC CARE SITES

The available services include Same-Day Access Services for assessment/intake, crisis services for existing DWIHN members, psychiatric evaluations, medication reviews, crisis stabilization, Peer Support Specialists, nursing assessments, medication injections, and non-ER transport. Our intent is to offer accessible alternatives to meet the unique needs of the individuals we serve and decrease emergency department experiences and potential COVID-19 exposure. The person must have Medicaid, Medicare, General Fund, or most commercial insurance to be eligible for services.

Provider	Population Service	Hours of Operations	
Community Care Services	Adults with SMI/SUD ages 18 and	Monday thru Friday	
26184 W. Outer Drive	older	8:30am – 6:00pm	
Lincoln Park, MI 48146	Children with SED ages 6-17		
Northeast Integrated Health	Adults with SMI/SUD ages 18 and	Monday thru Friday	
2900 Connor Ave., Building B	older	9am – 9pm Saturdays 9am- 1pm	
Detroit, MI	Children with SED ages 6-17	Suurduys Juni Tpin	

The Children's Center	Children with SED ages 6-17	Monday thru Friday
79 W Alexandrine St,		8:00am – 8:00pm
Detroit, MI 48201		

# **COVID-19 PRE-PLACEMENT HOUSING**

Pre-placement Residential Housing with DWIHN allows for immediate and comprehensive housing and supportive services to individuals who meet DWIHN admission criteria and eligibility. Pre-Placement Housing provides funding to residential providers contracted to provide short-term housing for a maximum stay of 14-days, meals, transportation and supportive services that promote stable housing and increase self-sufficiency. DWIHNs Credentialing Unit, due to the COVID-19 emergency, is provisionally impaneling the residential providers. An established referral process is available at various residential locations throughout Wayne County.

# **COVID-19 INTENSIVE CRISIS STABILIZATION SERVICES**

Intensive Crisis Stabilization Services are structured treatment and support activities provided by a multidisciplinary team and designed to provide a short-term alternative to inpatient psychiatric services. Services may be used to avert a psychiatric admission or to shorten the length of an inpatient stay when clinically indicated.

Provider	Services	Service Capacity
Community Outreach for	Intensive Crisis Stabilization Services	9
Psychiatric Emergencies	(MDHHS Approved), Crisis Intervention,	
(COPE)	Mobile Crisis Response Teams, Mobile	
33505 Schoolcraft Road #3,	Crisis Stabilization, Pre-Admission Reviews (PAR)	
Livonia, MI 48150		
Team Wellness Center	Intensive Crisis Stabilization Services	18
6309 Mack	(MDHHS Approved)	
Detroit, MI 48207		

# 2) PERSONAL PROTECTION EQUIPMENT AVAILABILITY

DWIHN recognizes the essential healthcare services community healthcare workers provide throughout this region. We have reached out to various entities to acquire to Personal Protection Equipment (PPE) for our many providers that we have who are providing those critical in person healthcare services on a daily basis.

We realize these items are scarce; not just here in Michigan, but nationwide. DWIHN values all of our essential healthcare workers; and has acquired PPE for many of the frontline workers who work for DWIHN providers serving over 75,000 people throughout Wayne County. PPE will be delivered within the coming days with a stable supply to be first distributed to our Residential Providers, followed by our Outpatient Providers. We anticipate that the need for PPEs will continue to be significant. To that end, DWIHN will monitor the network to ensure that where there is a need, we address it immediately.

Distribution information will be coordinated with each individual organization as supplies become available.

# 3) FUNDING AVAILABILITY

The Detroit Wayne Integrated Health Network (DWIHN) has received several letters and emails regarding funding concerns and potential provider concessions to address the COVID-19 pandemic that has plagued our nation.

DWIHN, the largest public safety net for community mental health services in Michigan, shares your funding concerns and have been working with MDHHS and the State to address these funding deficiencies. As the largest PIHP in the state, DWIHN is committed to serving those that we have taken a responsibility to serve and ensuring that the system is adequately funded. To that end, it is no secret that the PIHP system is underfunded by \$120 million. We are hopeful and optimistic that MDHHS will put forth funding initiatives that will allow our system to remain stable. DWIHN will certainly pass these funds along to providers in a thoughtful and meaningful way once information is made available. As recently as today, DWIHN along with our other PIHP partners received news that the April payment will be augmented by an additional \$50 million. MDHHS has not put forth any directives as to how that money will be distributed.

The Additionally, the U.S. Senate approved a \$2.2 trillion federal Stimulus Package that would assist large and small employers, governmental entities, non-profit organizations and the working people battle the harmful effects of the pandemic. DWIHN encourages all providers to visit <u>https://covid19relief.sba.gov/#/</u>

DWIHN expects that many of the initiatives proposed in the package will be of great benefit to our provider network, and we encourage our provider partners to take advantage of the opportunities. Nevertheless, DWIHN understands that this funding will likely not be available for several months and in the meantime, our providers must continue to employee essential staff to care for our vulnerable population.

To ease the burden and to make sure that the focus is on those we serve and those who provide critical services, DWIHN will continue to fund our PMPM outpatient providers at the threemonth average amount paid in January, February and March for the months of May, June, July and August. The four months (May, June, July and August) will not be cost settled at the end of the year. Normal payments will resume effective September 2020 and be subject to the contractual language. Similarly, for our Assertive Community Treatment (ACT) PMPM provider partners, DWIHN will fund the amount paid in March 2020 for the months of May, June, July and August. The four months (May, June, July, and August) will not be cost settled at the end of the year.

# Communications

# In the Media

**Community Newspapers -** The partnerships continue with The Michigan Chronicle, The Latino Press, the Arab American News and the Hamtramck Review.



**Bridge Magazine** - interviewed SUD Director Darlene Owens for a story on COVID-19 and SUD services, see below link:

https://www.bridgemi.com/michigan-health-watch/some-recovering-addicts-michigans-stayhome-order-sparks-fear-relapse

**WDIV-Channel 4-** Our contract with WDIV includes production of two free messages. The COVID-19 public service announcement has been running since March 24<sup>th</sup> which mentions Telehealth services and the MyStrength app.



**Scripps-WXYZ-TV7, TV 20 & Bounce - Scripps-WXYZ-TV7, TV 20 & Bounce-** A 30minute, mental health special on substance use disorder has been airing on Channel 7 and TV 20 since February. This educational initiative called *Hitting Home: Fighting the Opioid Addiction* features several SUD Providers and people in recovery. Below are April air dates. Channel 7 will also begin airing 30 second COVID-19 promos on the air and on posting messages on their Facebook page.

# WXYZ

Friday 4/3- 2:30 am Sunday 4/12 – 5:00 am Sunday 4/19 – 12:30 pm Mon 4/20 – 4:00 am Sunday 4/26 - 5:00 am



Emotions taking a toll? Struggling to deal with anxiety, depression and nee to talk?

Download the MyStrength app today. MyStrength is a free health and wellness app providing interactive support and offering daily mental health encouragement.

Learn More: https://bit.ly/2UO4ayP Or call us at 800-241-4949 #WXYZSponsor **TV 20** Sun 4/5 - 1130a Mon 4/6 - 4:00 am Sun 4/19 - 12:30 pm Wed 4/22 -4:00 am Wed 4/29-4:00 am

Learn More: https://bit.ly/2UO4ayP Or call us at 800-241-4949 #WXYZSponsor



# <u>Radio</u>

DWIHN has a partnership with WDVD Radio 96.3 in which 60-second messages are airing related to the services and supports DWIHN provides. Currently there is a COVID-19, Telehealth, My Strength promo airing. There are also public service announcements running on Radio One channels including 105.9 KISS, 105.1The Bounce and the Detroit Praise Network. DWIHN is also working with i Heart radio (Mix 92.3, Channel 95.5, WJLB 97.9 and 106.7), below is the 3-week schedule which includes 296 free paid spots.



MIX 92.3 – DWIHN President/CEO Willie E. Brooks, Jr. joined on-air personality Frankie Darcell on a podcast to discuss the Coronavirus pandemic and how to protect your mental health. This aired on April 3, you can hear the podcast at the link below: https://mix923fm.iheart.com/content/2020-04-03-maintaining-mental-health-in-the-covid-19-pandemic/ **On the Line with Horace Sheffield** – Mr. Brooks was featured in an interview with Rev. Sheffield on Saturday, April 11<sup>th</sup>. Sheffield is recovering from COVID-19.

**WWJ** – Darryl Dewberry, SUD Provider with Abundant Community Recovery Services was interviewed by Reporter Vickie Thomas on 4/7/2020 about how the Rolling Recovery Unit is helping the homeless population during this pandemic.



# Social Media

To continue educating the community, Communications created COVID-19 graphics that were shared on Facebook, Instagram, DWIHN website and with our Providers and the community. A free resource guide for people receiving services was also designed.





#### **Detroit Wayne Integrated Health Network**

Published by MILO Detroit Inc. dba MILO (?) · April 6 at 11:51 AM · 🚱

If you're experiencing anxiety because of the coronavirus, here are some things you can do to cope:

Remember that knowledge is power: Understanding the factors that affect a person's immune response to COVID-19 will matter as much as, or more than, understanding the virus!

s Don't accept everything you read or hear: @CDC provides information and frequent updates on the COVID-19's spread, severity, risk assessment, etc. To subscribe to the CDC's email and text message se... See More



Detroit Wayne Integrated Health Network Published by MILO Detroit Inc. dba MILO [?] - April 3 at 12:05 PM - G

During this time, many are faced with the challenge of homeschooling for the very first time.

...

Here are some tips to help your family adjust:

E Spend time reading: Maintaining and building reading skills will serve students at every level. ... See More



#### Detroit Wayne Integrated Health Network Published by MILO Detroit Inc. dba MILO [?] · April 6 at 11:45 AM · 🔇

DWIHN Provider Services To Enhance Potential decided to take action and create masks for hospitals and #HealthCareHeroes in need of supplies. It's truly amazing to see everyone coming together in this time of need to help keep one another safe!

If you're handy with a needle and thread, you can get involved too with the "STEP up and sew" initiative to help keep our health care workers healthy. If you're interested please reach out to Leah at lcooley@stepcentral.org. There are even some patterns in the post below to make masks for your community or local hospital



#### **DWIHN Website**

A special page dedicated to news and information about COVID-19 was set up so members, community and providers could obtain comprehensive and updated information.

#### **Outfront Media**

The Communications team drafted a new billboard message that will be seen in the Detroit and Wayne County areas the week of April 14th.

# DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 20-06 R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 4/15/2020

Name of Provider: Michigan Department of Community Health

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

Address where services are provided: varies

Presented to Program Compliance Committee at its meeting on: 4/8/2020

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

Amount of Contract: <u>\$</u> Previous Fiscal Year: <u>\$</u>

Program Type: Modification

Projected Number Served- Year 1: 70,000 Persons Served (previous fiscal year): 70000

Date Contract First Initiated: 10/1/2019

Provider Impaneled (Y/N)? N

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

Detroit Wayne Integrated Health Network (DWIHN) received amended language from Michigan Department of Health and Human Services (MDHHS) to the current Prepaid Inpatient Health Plan (PIHP) contract for FY 2020. The amendment incorporates changes to the boiler plate contract language and related contract attachments. The amount of the contract is \$747,944,461.00 and the proposed contract term and period of the amendment of (October 1, 2019 through September 30, 2020) will remain the same. There were several specific changes that were identified by MDHHS per Amendment No. 3 and they are as follows: Part I, Section 18. New section 18.1.15 Electronic Visit Verification, Part II. A, Section 7.7.3 Support Intensity Scale Language, Part II.A, Sections 8.4 through 8.4.15 including HSN, New Section for Part II. B PIHP Reporting Requirements, Contract attachment P.7.7.1.1 PIHP Reporting Requirements, Contract attachment P39.0.1 PIHP Compliance Examination Guidelines.

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

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

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

Source of Funds:

Fee for Service (Y/N):  $\underline{Y}$ 

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

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER:

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:

Here & Book

Signed: Tuesday, April 7, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:

Stacie Durant

Signed: Tuesday, April 7, 2020

# **Board Action Taken**

The fol	lowing	Action was taken by the Full Board on the <u>15<sup>th</sup></u> day of April, 2020.
X	Appro Rejec	
		fied as follows:
		Executive Director -initial here:
		Tabled as follows:
Signatu		illian M. கிவகிர்மை Date: <u>April 15, 2020</u> ard Liaison
_		

# DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

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

Presented to Full Board at its Meeting on: 4/15/2020

Name of Provider: MedSupply Corporation Inc

Contract Title: Exigent Agreement to Purchase Personal Protection Equipment

Address where services are provided: 'None'

Presented to Executive Committee at its meeting on: 4/13/2020

Proposed Contract Term: <u>4/1/2020</u> to <u>9/30/2020</u>

Amount of Contract: <u>\$100,000.00</u> Previous Fiscal Year: <u>\$0.00</u>

Program Type: New

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

Date Contract First Initiated: 4/1/2020

Provider Impaneled (Y/N)?

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

This board action is to request \$100,000 for the exigent purchase of personal protection equipment in response to the COVID-19 pandemic. The personal protection equipment is necessary for DWIHN and its provider network essential staff to continue servicing those numbers we serve. Due to the urgent nature of the request and the short supply of personal protection equipment (PPE), MedSupply Corporation Inc., is the only vendor Detroit Wayne Integrated Health Network (DWIHN) has identified that is capable of providing the necessary equipment at this time. The PPE will be distributed primarily to the provider network and will include gowns, masks, sanitizer, gloves and other PPE necessary to safeguard staff and consumers against the COVID-19.

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

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

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
Medicaid	\$ 100,000.00	\$ 100,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 100,000.00	\$ 100,000.00

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

Type of contract (Business/Clinical): Clinical

#### ACCOUNT NUMBER: 64931.824100.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:

Jules & Bort

Signed: Tuesday, April 14, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:

Stacie Durant

Signed: Tuesday, April 14, 2020

# **Board Action Taken**

The following Action was taken by the Full Board on the <u>15<sup>th</sup></u> day of April, 2020.		
X	Appro Rejec	
	Modified as follows:	
		Executive Director -initial here:
		Tabled as follows:
Signatu		illian M. கிவகள் ard Liaison
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