



Detroit Wayne Integrated Health Network

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**FULL BOARD MEETING
Tuesday, March 31, 2020
707 W. Milwaukee
2nd 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 – February 19, 2020
- VI. RECEIVE AND FILE** – Approved Finance Committee Minutes – February 5, 2020
Approved Program Compliance Committee Minutes – February 12, 2020
- VII. ANNOUNCEMENTS**
 - A) Authority Announcements
 - B) Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Board Annual Meeting – May 20, 2020
 - 2) Committee Appointments
 - B) Executive Committee
 - 1) CEO Annual Performance Appraisal
 - 2) Board Self-Assessment
 - C) Finance Committee
 - D) Program Compliance Committee
 - E) Recipient Rights Advisory Committee
- IX. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT**
- X. AD HOC COMMITTEE REPORTS**
 - A) Policy/Bylaw Committee

Board of Directors

Bernard Parker, Chairperson
Dora Brown
Kevin McNamara

Dr. Iris Taylor, Vice-Chairperson
Dorothy Burrell
William T. Riley, III

Timothy Killeen, Treasurer
Lynne F. Carter, M.D.
Kenya Ruth

Ghada Abdallah, RPh Secretary
Angelo Glenn
Dr. Cynthia Taueg

Willie E. Brooks, Jr., President and CEO



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) Provider Claim Reductions

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#18-45(Revised) - LAZ Parking *(Finance)*
- B. BA#20-26 (Revised)(2) - FY 2019-2020 Operating Budget *(Finance)*

XV. NEW BUSINESS

Staff Recommendations:

- A. BA#20-48 - Allen Brothers, PLLC *(Finance)*
- B. BA#20-49 -Neighborhood Services Organization (NSO) – OBRA/PASRR

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
Wednesday, February 19, 2020
707 W. Milwaukee
Detroit, MI. 48202
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-Richards
Dorothy Burrell

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

BOARD MEMBERS EXCUSED:

GUESTS: Dr. William Hart, CEO and Ms. Theresa Crock, Clinical Officer Lincoln Behavioral Services

CALL TO ORDER

The meeting was called to order at 1:00 p.m. by the Board Chair, Mr. Bernard Parker.

ROLL CALL

Roll call was taken by Dr. Taylor and a quorum was established.

APPROVAL OF THE AGENDA

The Chair Mr. Parker called for a motion on the agenda. It was noted that an item was to be added to the agenda under New Business. Item XV. Recommendation to the Executive Committee - Appointment and would be taken before the Provider Presentation.

A motion was offered by Dr. Taylor and supported by Dr. Tauieg 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 January 15, 2020. **A motion was offered by Commissioner Killeen and supported by Ms. Brown to approve the Full Board minutes of January 15, 2020. Motion carried unanimously.**

RECEIVE AND FILE

The Chair called for a motion to Receive and File the approved Finance Committee minutes of January 9, 2020. **A motion was offered by Dr. Taylor and second by Mrs. Brown to "Receive and File" the approved minutes from the Finance Committee meeting of January 9, 2020. The motion carried unanimously.**

The Chair called for a motion to Receive and File the approved Special Finance Committee minutes of January 24, 2020. **A motion was offered by Commissioner Killeen and second by Mrs. Abdallah to "Receive and File" the approved minutes from the Special Finance Committee meeting of January 24, 2020. The motion carried unanimously.**

The Chair called for a motion to Receive and File the approved Program Compliance Committee minutes of January 8, 2020. **A motion was offered by Dr. Taueg and second by Mr. Riley to "Receive and File" the approved minutes from the Program Compliance Committee meeting of January 8, 2020. The motion carried unanimously.**

ANNOUNCEMENTS

Authority Announcements

T. Devon, Director of Communications gave an overview of upcoming events; Detroit Wayne Integrated Health Network (DWIHN) will cohost along with Hartford Memorial Baptist Church a Men's Substance Abuse Prevention, Mental Health and Wellness Summit – Faith, Family, Fitness and Finance – Hartford Memorial Baptist Church Saturday, February 29, 2020 from 8:00 a.m. -3:00 p.m. Mr. Brooks will provide the lunch keynote; Family Weekend Workshops; Saturday, February 22, 2020 Tabernacle Missionary Baptist Church located at 2080 W. Grand Blvd. Detroit, MI. 48208 from 9:30 a.m. to 3:00 p.m. and the Autism Conference on Thursday, April 9, 2020 from 9:00 a.m.- 4:00 p.m. at the DoubleTree by Hilton Detroit/Dearborn 5801 Southfield Fwy. Detroit, MI. 48228. Mr. Brooks noted that Dr. Margaret Hudson-Collins has been hired as the Medical Director and Ms. Ebony Reynolds has been promoted to Clinical Officer.

Board Announcements

There were no Board Announcements.

NOMINATING COMMITTEE – Election of Officers

Dr. Taueg, Chair of the Nominating Committee gave a verbal report. It was noted the Nominating Committee met prior to the Full Board meeting and were recommending the following slate of Officers for the upcoming year: Board Chair, Mr. Bernard Parker; Vice-Chair, Dr. Iris Taylor; Treasurer, Commissioner Tim Killeen; Board Secretary, Ms. Dora Brown. The Chair called for a motion on the recommended slate. It was moved by Dr. Taueg and supported by Commissioner Killeen that the Full Board accept the slate as presented. There was no discussion. The Chair noted the Officer terms would begin April 1st, 2020. **Motion carried unanimously.**

BOARD COMMITTEE REPORTS

Board Chair Report

Mr. Parker gave a verbal report. An update was provided on the Metro Region Meeting that took place on January 16, 2020. He noted that most of the conversation centered on the Michigan Department of Health and Human Services recommendations and the changes that are being made – specifically the Specialty Integrated Plans (SIP); the meeting took place here at the Milwaukee office and was well attended by Macomb and Oakland along with a number of our Board members and staff. The

CEO will provide a more detailed overview. The plan is in the beginning stages however there are some changes that present concerns.

It was reported the Community Mental Health Association of Michigan (CMHAM) Annual Winter Conference in Kalamazoo Michigan was held on February 4th & 5th in Kalamazoo, Michigan. The SIP was again the topic of discussion and focused on receiving better information from the State regarding the changes and how the idea of SIP's should be approached with the State. It was noted that negative feedback has been received from the statewide advocacy therefore the State was re-evaluating the plan. It was noted the two major items that came out of the meeting is the State does not want to be at risk and they did not want to put any more money into the system; however they still want to provide quality care. There were a number of useful workshops that participants were also able to attend.

It was reported the National Behavioral Health Council NatCon 20 Conference will take place in Austin, TX April 5th -7th 2020 and there are four board members that will be attending.

It was reported the Mackinac 2020 Policy Conference was being held May 26th – May 29th on Mackinac Island and there are four board members that have been identified as attending. There will be a real effort made to meet with Department heads and legislators. It was noted that we are in the top 10 of those who provide services to those with mental challenges so our system is working.

It was reported the National Behavioral Health Hill Day was being held in Washington, DC June 23rd & 24th 2020. The maximum number of four board members has not been identified as of yet, if board members are interested in attending please contact the Board Liaison. This event provides an opportunity to speak with legislators and discuss policy changes that may need to occur in Wayne County. This will be an interesting time as the Democratic Primary will also be taking place.

The Chair called for a motion on the Board Chair report. **A motion was offered by Commissioner Killeen and supported by Dr. Taylor 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 met on Monday, February 10, 2020. It was reported that this is the time that the CEO Annual Evaluation should be completed and all Board members should have received the evaluation via email. Board members that did not receive the evaluation should contact the Board Liaison as the evaluation is due on February 26, 2020. An overview of the evaluation was provided; it was noted that the format is same as the prior year; the comments and ratings will be compiled by the Human Resources department and will come to the Executive Committee in summary form and is used to assist the CEO in determining how the Board perceives how he has been operating and identifies areas that may need to be reviewed. It is important for the Board and the CEO to make sure that we are effectively providing services for our members. If there are any challenges in completing the evaluation please contact Mr. Connally, Director of Human Resources.

It was reported that the CEO has an Incentive Compensation that is a part of his contract and that will be evaluated; it is not a percentage and will be calculated based on whether or not the objective/goal was or was not accomplished. The Board Chair and the CEO will have a discussion and the review will be taken to the Executive Committee for confirmation and then to the Full Board to determine the amount of the bonus compensation.

It was also reported that there is a Board Self-Assessment that all Board members need to complete. It was determined a few year ago that the Board also needs to evaluation itself; this is not self-

evaluation but is a full board evaluation and will help determine how we as a board are performing. This will help determine if we are meeting the needs of the Board members. The process will be the same as the CEO Evaluation; the information will be compiled by the Human Resources department and come to the Board Executive Committee for review and then to the Full Board. The Board Self-Assessment is due February 28th; so please make time to complete the assessment.

The Chair reported that an update was provided on the DWIHN expansion and space; the Michigan Department of Health and Human Services (MDHHS) Future Behavioral Health concept that was being developed; and an Advocacy report was also given. It was also noted that Administration has signed off on a Memorandum of Understanding (MOU) with several health plans which shows that there is interest in them doing business with us.

Discussion ensued regarding the policy as it pertained to the CEO Annual Performance Appraisal process. Commissioner Killeen read the policy and inquired as to whether or not board members could attend the meeting with the Board Chair and the CEO when the Annual Performance Appraisal was discussed. The Chair noted it was his understanding that in the past the CEO and Board Chair met to review the board member compliments and/or concerns and review the areas and agree to those that may need improvements or continuation of it; it has not been the entire Committee (Executive) that has done the review; the results are reported to the Executive Committee and the Executive Committee could weigh in. The question was posed as to whether or not he (Killeen) could attend the meeting; the Board Chair noted that he did not have a problem with it and if the CEO wanted to have other Board members attend the meeting he could do so; the policy regarding attendance on who could attend was restated for clarification.

The Chair called for a motion on the Executive Committee report. **A motion was offered by Dr. Taylor and seconded by Mr. Riley, III to accept the Executive Committee report. The motion carried unanimously.**

Finance Committee

Commissioner Killeen, Chair of the Finance Committee gave a verbal report and noted that the Finance Committee met on Wednesday, February 5, 2020 and because of the lengthy discussion on some of the items the Strategic Plan IT/Finance Pillar and the 1st Quarter Procurement report was deferred to the next Finance Committee meeting. It was noted that a Special Finance Committee meeting took place on Friday, January 24, 2020. A document entitled DWIHN Operational Efficiency Plan and a revised General Fund List was distributed. The DWIHN Operational Efficiency Plan was discussed; it was noted that it would take some time before a savings would be recognized in the noted areas. It was noted that a savings report for items in the Operational Efficiency plan had been requested; however it may take a number of months before the savings can be reported but it is being tracked. The Chair encouraged board members to review the list. He noted that one of the noteworthy items was that effective March 1, the network will implement a PMPM rate and there will be a discussion at the next Finance Committee meeting on the item. There was discussion regarding the balance sheet and the cash flow projections. The Committee considered three Board Actions that were approved to come before the Full Board. The CFO gave an overview of the overspend for Medicaid. She gave an explanation that one of the assumptions that was used when preparing documents was that a payment that was supposed to be received from the State did not come and there is a cash flow problem; she was hopeful that a payment would be received from the State the week of February 24th as we were five months into the fiscal year and we had not had received a normal payment. It was also noted that in 2018 we had a \$20 million dollar reserve; however at this time we do not have any reserves. There was discussion regarding sending a letter to the State. Discussion ensued regarding a communication to the Board regarding what the plan will be to correct some of the items. Cash flow statements have been requested as a part of the CFO's monthly report. The Board requested an update from the CFO regarding the plan prior to the next Finance Committee

meeting. The Committee also discussed the General Fund Allocation as it pertains to spend down. Commissioner Killeen noted that a Special Finance Committee meeting was held to deal with spend down. It was noted that the original amount for spend down was \$6.3 million; it was reduced to \$1.9 million; there was feedback from a Provider collaborative and the topic was thoroughly discussed at the Special Finance Committee meeting held on the 24th. At the February Finance meeting management came to the meeting with a proposal to restore spend down to \$5.3 million which will result in a one million dollar decrease. The Finance Committee is recommending in the Finance Report to restore spend down to \$5.3 million dollars. Discussion ensued regarding future review of spend down and the possibility of Providers being able to pay spend. Discussion ensued regarding having the collaborative work with DWIHN in Lansing on the spend down issue.

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

A motion was offered by Commissioner Killeen and supported by Ms. Abdallah to accept the Finance Committee Report. The Board Chair noted that in the acceptance of the Finance Committee report the General fund recommendation of management to restore spend down to \$5.3 million was also being accepted. The motion carried unanimously.

Program Compliance Committee

Dr. Taylor, Chair of the Program Compliance Committee acknowledged the birthday of Mr. Parker who celebrated his birthday in December. She gave a verbal report. The Program Compliance Committee met on Wednesday, February 12, 2020 and the minutes from the meeting will be posted on the website. The Committee reviewed the implementation of the Trails Model in the school system and an update was provided on the training. Utilization Management gave their annual report and a tentative plan regarding hospitalization was provided to the Committee. Corporate Compliance gave a report on the active investigations and conclusions of those activities will be provided at the next meeting. The Media and SUD reports were accepted. The Quality review and the Annual Utilization Management Program Review; also reviewed the strategic objectives which had some data points that needed further review and will come back to the Committee. The following Board Actions were reviewed and moved to the Board for approval BA#19-24 (Revised) Relias Learning, LLC ProAct/Interoperability; BA#19-42 (Revised) Relias Learning, LLC ProAct Sub Portals; BA #20-19 Revision 2) Multicultural Integration; BA#20-43 (Revised) DWIHN Clubhouse Spenddown/Deductible Assistance and BA#20-45 HUD Supportive Housing. The Chair called for a motion on the Program Compliance Committee report. There was no discussion regarding the Program Compliance Committee report.

A motion was offered by Mr. Riley and supported by Ms. Burrell to accept the Program Compliance Committee report. The motion carried unanimously.

Recipient Rights Advisory Committee

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

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Ms. Darlene Owens, Director of SUD gave a verbal report. It was reported the SUD Oversight Policy Board met on February 17, 2020. There were three Board Actions presented. Families against Narcotics (FAN) that will be held in Detroit at Detroit Association of Black Organizations (DABO); there will also be Peer Recovery training; second Board Action was the Empowerment Plan where the Network purchased 400 coats that turn into sleeping bags for the homeless population along with 400 pairs of Bombas socks, gloves and hats. It was noted that there are two SUD Board members whose terms are coming up for reappointment on March 31st; Mr. James Perry and Ms.

Margo Martin; they have noted that they would like to be reappointed and they are Wayne County Commission appointments. The Chair called for a motion on the Substance Use Disorder Oversight Policy Board report.

A motion was offered by Dr. Taueg and supported by Ms. Abdallah to accept the SUD Oversight Policy Board report. The motion carried unanimously.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

Dr. Taueg, Chair reported the Policy Committee met on February 6, 2020 there was one agenda item which was addressed. It was reported that the Board Bylaws was silent on the issue of the Immediate Past Chair position vacancy on the Executive Committee. After consideration of the issue; the committee is making the following recommendation that will be presented in the form of a Resolution in essence it outlines the process whereby the Board Chair will appoint a board member to fill the vacancy of the Immediate Past Chair on the Executive Committee to be ratified by the Full Board. The Committee Chair noted that FY 2019-2020 Resolution Number 4 - Resolution to Ratify and Amend the Bylaws had been distributed and in Director Point and will be an attachment to the Full Board Agenda packet. The Chair noted the Resolution read in part "Now, therefore, be it Resolved that the terms and provisions of the DWIHN Bylaws are ratified and amended such that Article V, Section 7 shall read as follows: The Officers of the Board and the immediately preceding Chairperson of the Board shall compose the Executive Committee; except where the position of the immediately preceding Chairperson is vacant, the Board Chairperson shall recommend the appointment of a current Board member to fill such vacancy, which shall be ratified by simple majority vote by the Full Board. The Executive Committee shall meet monthly, or as the Chairperson or, in her/his absence, the Vice Chairperson, may deem necessary or appropriate. The Executive Committee shall facilitate the dissemination of data and information relevant to Board matters to the Board and other committees by gathering, considering and sorting such data and information, and distributing such data and information to the Board and other committees. The Executive Committee shall have no power or authority to deliberate toward, or render a decision on, a public policy, unless the Executive Committee is expressly authorized by the Board, in advance of an Executive Committee meeting, to render a decision as to a specific issue. It may submit reports and make recommendations to the full Board, however, except as set forth in the preceding sentence, such reports and recommendations shall have no binding effect on the Board. The Committee Chair made a recommendation that the Committee report be accepted as well as FY 2019-2020 Resolution Number 4 - Resolution to Ratify and Amend the Bylaws. The Chair called for a motion. There was discussion regarding the new language that had been added to the Bylaw.

A motion was offered by Dr. Taylor and supported by Ms. Burrell to accept the Policy/Bylaw Committee report and FY 2019-2020 Resolution Number 4 – Resolution to Ratify and Amend the Bylaws. The motion carried unanimously.

PRESIDENT AND CEO MONTHLY REPORT

Mr. Brooks reported. A written report was provided for the record. The CEO reported on the Governor's Mental Health Diversion Task Force. It was noted that he had been reappointed to the Task Force effective February 1st for a four year term. The Wayne County Jail Diversion Council has had two meetings and staff provided a presentation on the Crisis Center to the Council. A high level report was provided on Health Plan Integration and it was noted that a Memorandum of Understanding had been signed and he is in the process of working out details. He gave a high level overview of the Specialty Integrated Plan (SIP). He noted that the plan that was first presented will not be the plan that is implemented in two years; there are a number of details that are currently being worked on including partnerships and legislative changes; we are still determining how we fit in and meetings are occurring on a weekly basis. The SIP's are being monitored over closely.

An update was provided on funding and it was noted that we did have not received a consistent budget from the state. He noted there has been some pushback on the death audit from the PIHP's; he will also be addressing this issue with the Appropriations Committee at the State. It was noted that DWIHN is working on Autism and gave the shortfall as to the spending and funding that had occurred. It was noted the plan had been broadened, but the funding for Autism had not been expanded. He provided an overview of how the budget has been managed which included the use of local dollars; reserves and General fund.

He gave an overview of some of the Federal concerns that were on the horizon which included the new budget proposal from President Trump calling for cutting Medicaid and the Affordable Care Act by approximately \$1 Trillion dollars over the next decade which includes a Medicaid \$844 billion dollar cut over 10 years and an additional \$150 billion in Medicaid work requirement cuts. It was noted that in the previous years the Federal legislature had vetoed the previous Medicaid cut proposal; he also noted that President Trump is proposing a block grant system that will allow individual states to control Medicaid policy and match requirements. He also noted that the government is borrowing a record 22 cent for every dollar spend and that the U.S. budget deficit has more than doubled since 2015. An update was provided on General Fund and the \$4.5 million dollar reduction; it was noted that DWIHN is in the second year of this reduction with a slated \$9 million in reductions to occur this fiscal year. He noted that the Crisis Continuum was still needed and it is important that we position ourselves structurally and technically for the future and the SIP Program will mean there will be some adjustments with how services are handled. It was noted there have been conversations with his team to ensure that the Provider Contracts match the level of required services. A brief report was provided on the Key Mental Health Indicators that noted that Homelessness; Suicides per total deaths and School Trauma had decreased and the importance of the Key Indicators benchmarks as it helps determine if DWHIN is having an impact. Questions were posed regarding the Building Committee report; it was noted that the Committee had moved into closed session at each meeting a report should be forth coming. There were also questions presented regarding Jail Incarceration and the Governor's recommendation and if there are seasonal trends that affect the Mental Health Key Indicators. It was noted that an update should be provided at the next meeting on the Governor's recommendation on Jail Incarceration. The Chair called for a motion on the President and CEO Monthly Report.

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

UNFINISHED BUSINESS

Staff Recommendations:

BA#16-48 (Revised) Services to Enhance Potential (STEP) *(Finance)* B. Blackwell reporting. This Board Action is requesting a contract extension for STEP to continue daily janitorial services at Milwaukee location from February 1, 2020 – June 30, 2020. **A motion was offered by Ms. Abdallah and second by Dr. Taylor to approve BA#16-48 (Revised)** There was no discussion. **The motion carried unanimously.**

BA#19-24 (Revised) Relias Learning, LLC ProAct/Interoperability. *(Program Compliance)* T. Forman reporting. This Board Action is requesting approval to continue funding Relias and their ProAct Analytics tool. ProAct supports our strategic plan initiatives surrounding integrated care and NCQA accreditation. **A motion was offered by Mrs. Abdallah and second by Ms. Ruth to approve BA #19-24 (Revised)** There was no discussion. **The motion carried unanimously.**

BA#19-25 (Revised) New Center, LLC Lease Renewal *(Finance)* B. Blackwell reporting. This Board action is requesting additional monies to cover the lease and parking through September 30th 2020

and approval of a one-year renewal option for lease through September 30th 2021 for office space at New Center, LLC. **A motion was offered by Dr. Taylor and second by Mrs. Abdallah to approve BA #19-25 (Revised)** There was no discussion. **The motion carried unanimously.**

BA#19-42 (Revised) Relias Learning, LLC ProAct Sub Portals (*Program Compliance*) This Board Action is requesting funding for four (4) months for Relias Learning, LLC. **A motion was offered by Dr. Taylor and second by Mr. Riley, III to approve BA #19-42(Revised)** There was no discussion. **The motion carried unanimously.**

BA #20-19 (Revised 2) Multicultural Integration (*Program Compliance*) This Board Action is requesting approval of the Memorandum of Understanding between Community Mental Health Association (CMHAM); Michigan Department of Health and Human Services (MDHHS) and Pre-Paid Insurance Health Plan (PIHP) for the PIHP Veteran Navigator (PIHP VN) and Multicultural Integration Providers formerly known as the Multicultural Programs. **A motion was offered by Dr. Taylor and second by Mr. Riley, III to approve BA #20-19 (Revised 2)** There was no discussion. **The motion carried unanimously.**

BA#20-43 (Revised) DWIHN Clubhouse Spenddown/Deductible Assistance (*Program Compliance*) This board action is being revised to add three Drop-In Centers that were approved and included in the grant award. **A motion was offered by Dr. Taylor and second by Mrs. Abdallah to approve BA #20-43 (Revised)** There was no discussion. **The motion carried unanimously.**

NEW BUSINESS

Staff Recommendations:

BA#20-45 – HUD Supportive Housing (*Program Compliance*) This Board Action is requesting approval to accept, renew and disburse U.S. Department of Housing and Urban Development (HUD) Supportive Housing funds for existing grant program. **A motion was offered by Dr. Taylor and second by Mr. Riley, III to approve BA #20-45.** There was discussion regarding Central City and its broad spectrum of services; there were no questions regarding the management of the HUD portion of the contract. **The motion carried unanimously.**

BA#20-47 – Wayne Parking, LLC (*Finance*) B. Blackwell reporting. This board action is requesting approval of a contract with Wayne parking, LLC for parking spaces for DWIHN employees in the lot located at Milwaukee and New Center One. **A motion was offered by Mrs. Abdallah and second by Ms. Ruth Abdallah to approve BA #20-47.** There was no discussion. **The motion carried unanimously.**

EXECUTIVE COMMITTEE RECOMMENDATION – The Chair noted that this item had been added to the agenda under New Business and his recommendation for the vacancy on the Board Executive Committee was Dr. Cynthia Taueg.

A motion was offered by Dr. Taylor and supported by Commissioner Killeen that Dr. Cynthia be appointed to fill the vacancy on the Board Executive Committee in the absence of an Immediate Past Chair. There was no discussion. **The motion carried unanimously.**

Mr. Parker extended birthday greetings on behalf of the Board to Dr. Taylor.

PROVIDER PRESENTATION – Lincoln Behavioral Health Services – Powerpoint handout was distributed to the Board via Directorpoint for the record. Presentation was provided by Dr. William Hart, Executive Director and T. Crock, Clinical Director. He gave an overview of his background and experience. He provided an overview of the services offered by Lincoln Behavioral Health Services

and their accreditations along with the number of adults and children served. A high level report was provided of the services offered for adults; children and families. He noted that there is also Trauma Informed Care provided. Some of the evidenced based practices included Cognitive Enhancement Therapy; Parent Management Training Oregon; Assertive Community Treatment; Permanent Supportive Housing and Psychosocial Rehabilitation. The Board thanked Mr. Hart and Ms. Crouch for the presentation.

Mrs. Abdallah made an announcement regarding her resignation to the DWIHN Board of Directors as well as the DWIHN Substance Use Disorder Oversight Policy Board. She thanked both boards for the opportunity to serve and she tried to give her best and it was a pleasure working with staff; Providers and everyone here. The Chair extended an invitation to Ms. Abdallah to attend the Annual Meeting in May.

FOLLOW UP ON ACTION ITEMS - None

GOOD AND WELFARE/PUBLIC COMMENT

Ms. Burrell addressed the Board and informed them of the Anti-Stigma Forum that will be held on May 7th at Northeast Guidance Center.

Ms. J. Walker provided a written statement and addressed the board regarding her complaint with Detroit Central City and services that have been provided to her.

Ms. A. Downey from Community Living Services addressed the Board regarding providing assistance with a large scale advocacy effort related to the spend down and false budget projections.

ADJOURNMENT

There being no further business, the Chair called for a motion to adjourn. **A motion was offered by Commissioner Killeen and seconded by Dr. Taylor to adjourn. The motion carried unanimously and the meeting was adjourned at 2:53 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

FEBRUARY 5, 2020

1:00 P.M. 2ND FLOOR BOARD ROOM

MEETING CALLED BY	I. Commissioner Tim Killeen, Chair called the meeting to order at 1:10 p.m.
TYPE OF MEETING	Finance Committee Meeting
FACILITATOR	Commissioner Tim Killeen, Chair – Finance Committee
NOTE TAKER	Nicole Smith, Management Assistant
ATTENDEES	<p>Finance Committee Members Present: Commissioner Tim Killeen, Chair Mr. Kevin McNamara, Vice Chair (via phone) Ms. Ghada Abdallah, Secretary Ms. Dora Brown-Richards Dr. Cynthia Taueg</p> <p>Committee Members Excused: Ms. Dorothy Burrell</p> <p>Board Members Present: Bernard Parker, Chairperson, Mr. Angelo Glenn</p> <p>Board Members Excused: None Staff: Stacie Durant, CFO; Willie Brooks, CEO</p> <p>Guests: None</p>

AGENDA TOPICS

II. Roll Call Ms. Lillian Blackshire, Board Liaison

DISCUSSION	Roll Call was taken by Ghada Abdallah, Secretary and a quorum was present.
<p>III. Committee Member Remarks No remarks from the committee members.</p>	
<p>IV. Approval of Agenda Commissioner Killeen presented an amendment to the agenda, to add Board Action #16-48 (Revised) – Services to Enhance Potential. There was no discussion. Motion: It was moved by Ms. Taueg and supported by Ms. Abdallah for approval of the agenda as amended. Motion carried.</p>	
<p>V. Items Follow-up Item A: Update Operational Efficiency Plan (S. Durant) Pursuant to the adoption of the fiscal year ended September 30, 2020 Budget, Management outlined several operational opportunities to better manage the system and reduce costs. The following details the changes and status of each area:</p> <p>Substance Use Disorder (D. Owens Lead) - The SUD Advisory Board approved a plan whereby it reduced rates for two codes – H0023 and T1012 for Peer Directed Services and Recovery Supports, respectively.</p>	

Update: Status 1/18/2020 – Rates adjusted and will continue monitoring of the services.

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 1/28/2020 – A process has been developed using the Staff Planning Guide to assess community supports and any additional care needs. This assessment will incorporate criteria to support members in the least restrictive environment. Clinical staff will distinguish between physical care needs (Home Help services) versus Community Living Supports (CLS). Services used to increase or maintain personal self-sufficiency with a goal of community inclusion/participation, independence and productivity. -Data Report to identify members that have a physical health condition that would qualify for Home Help Services in an unlicensed setting. -Training on the Staff Planning Guide with Clinically Responsible Service Providers (CRSP) Case Managers and Supports Coordinators will include the following: -Benefit Verification at every visit;- Quarterly Benefit Eligibility Determination Report-Benefit coordination in the care plans and documentation submission in MH-WIN.

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 60-day 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 (1/28/2020) – The RFP has been posted and responses are due back on 2/21/2020.

Discussion ensued on the updated information regarding disenrollment. S. Durant, reported the State of Michigan confirmed consumers cannot be dis-enrolled out of DWIHN system.

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 supports 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 1/28/2020 – Accounting firm is completing payroll templates and Finance staff analyzing and comparing to authorizations. Project will likely continue through March 31, 2020, with expected retroactive recoupment from providers. CFO will meet with each provider, review audit results with the provider and obtain November 30, 2019 bank statements to determine collection period. Discussion ensued regarding the Network's savings for the payroll audit.

Committee requested S. Durant to report payroll audit goal savings amount, and current amount saved to date. In addition, report should describe any difficulties within the payroll audit process. (Action)

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 1/28/2020 - The Utilization Management (UM) or Service Utilization Guidelines (SUGs) have been reviewed and revised based on utilization reports and incorporating stakeholder feedback. The final revisions rollout date to the MHWIN system has been pushed back. The date was unknown at the time of committee meeting.

Phase 1- UM Guidelines will allow for the claims process to perform a check to determine if a clinical review and authorization is required by UM Department when the services exceed the guidelines based on the Level of Care determined by a standardized assessment.

Phase 2 – DWIHN recently introduced and trained providers on the standardized Individual Plan of Service (IPOS) in our MH-WIN system with our Health Information Exchange (HIE) project. Incorporation of the UM guidelines with the Standardized IPOS, the CRSP Providers on the MH-WIN HIE platform will use their current system to send the Standardized IPOS and authorizations via the HIE process. The UM Guidelines will determine if a clinical review and authorization is required by UM Department when the services identified in the IPOS exceed the guidelines based on the Level of Care determined by a standardized assessment.

It was noted that items in SUD; Utilization Management and Shared Living Arrangements are quantifiable.

The committee requested that items in Operational Efficiency Plan that are quantifiable be reported starting with the March report. (Action)

Item B: Certificate of Need (CON) – Staff J. Davis gave update regarding the impact the new Mental Health hospitals in Oxford and Dearborn will have on Detroit Wayne Integrated Health Network. J. Davis gave report that in response to the January 21, 2020, Letter of Support from DWIHN to the Michigan Department of Health and Human Services Certificate of Need Evaluation Section, she reported Beaumont/Havenwick Hospital in Dearborn has 24 Beds available. There was no update regarding the hospital in Oxford. There was an inquiry as to how many beds are available in the system.

Discussion was ensued regarding the need for the agenda item to remain on the Finance Committee agenda.

Commissioner Killeen requested agenda item be removed from the Finance Committee and moved to the Program Compliance Committee.

VI. Revised GF Priority List

S. Durant, CFO presented a revised General Funds Priority List to the committee and revision to the budget for Spenddown. It was noted that the categories “Required;

Priority; and Optional” have been removed and the document that will go to Full Board will have the categories removed as well. Discussion ensued regarding spend down. Discussion ensued regarding the proposal from Management which included returning the full funding of spenddown to 6.3%; and the reduction in funding for the school based programs where funds were used for mental health nursing.

Discussion ensued with Legal regarding whether or not there was a signed contract with Detroit Public Schools; the expiration date of the contract and the language in the contract pertaining to modifications.

Dr. Artisha, Health Officer from Detroit Public Schools addressed the committee on the school based program reduction. He gave an overview of when contracts were received and signed from DWIHN. He also noted that FSR’s were submitted and that over 2, 000 children have been seen.

S. Durant, CFO stated for the record that “She was unsure if nursing services are eligible for Mental Health dollars” which was in regards to the funding for nursing services to the Detroit Public Schools program.

Discussion ensued regarding a number of different options for handling spend down including “accepting the list as presented by management for spenddown with the exception of the reduction to the school based program for a total of \$5.3 million instead of \$6.3 million. Discussion also ensued regard clarification on the Summer Youth Program and how much was spent. It was noted that 46 cities and non- profits participated in the program. The Chair called for a motion. Motion: It was moved by Mr. Parker and supported by Dr. Tauieg to accept all of the categories as presented by management with the exception of the one million dollars in school based programs to restore spend down to \$5.3 million dollars instead of \$6.3 million dollars. Concerns were expressed with the Residential population and that population not being impacted. It was noted that could not be done because the State goes by the first services offered. An amendment to the motion was offered by Mr. McNamara to change the use of spenddown funding to a spenddown emergency fund for providers in financial distress that did not have spenddown monies; that it be moved to the bottom of the list and providers will have to apply for spend down funding.

The Chair called for approval of the motion on the GF Priority List with the amendment. The amendment was lost for lack of a second.

The Chair returned to the main motion. **Motion:** It was moved by Mr. Parker and supported by Dr. Tauieg that an amendment to the revised GF Priority List be made to reduce spenddown from \$6.3 million to \$5.3 million (25%), and there be no reduction in funds to Detroit Public Schools Program.

Commissioner Killeen called for a vote on the motion of the GF Priority List with the amendment. **Motion carried.** It was requested that an effective date be provided when the rate would go into effect. An overview was provided on the spend down. Dr. Tauieg requested FSR’s from Detroit Public Schools for six (6) months.

VII. Approval of the Meeting Minutes

Commissioner, Killeen called for a motion on the minutes from the Finance Committee meeting of Wednesday, January 9, 2020 and the Special Finance Committee Meeting on Friday, January 25, 2020. **Motion:** It was moved by Mr. Parker and supported by

Dr. Taueg approval of the minutes for Wednesday, January 9, 2020 & Friday, January 24, 2020. **Motion carried.**

VIII. Presentation of the Monthly Finance Report

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 were attached to the report.
2. Effective March 1, 2020, the Network 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, 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.
7. Discussion ensued regarding the \$46 million Due from other governments – It was noted the amount represents amounts owed from the State of Michigan and Federal Government for various grants and contracts.
8. It was noted that the Cash flow on report is not reflective of the monies that came in from the State.

The Chair called for a motion on the Monthly Finance Report. **Motion:** It was moved by Dr. Taueg and supported by Ms. Abdallah to accept the Monthly Finance Report. **Motion carried.**

IX. Presentation of 1st Quarter 2020 Procurement Report – The report will be deferred to March 4, 2020 meeting. Commissioner Killeen called for motion. **Motion:** It was moved by Mr. Parker and supported by Ms. Abdallah to defer the Presentation of the 1st Quarter 2020 Procurement Report to the March 4, 2020 meeting. **Motion carried.**

X. Strategic Plan IT/Finance Pillar – The report will be deferred to March 4, 2020 meeting. Commissioner Killeen called for motion. **Motion:** It was moved by Mr.

Parker and supported by Ms. Abdallah to defer the Strategic Plan IT/Finance Pillar to meeting of March 4, 2020. **Motion carried.**

XI. Unfinished Business – Staff Recommendations:

A. Board Action #16-48 (Revised): Services to Enhance Potential – This Board action is requesting contract renewal for 3 year term, in the amount of \$138,600. Vendor provides Janitorial Services at DWIHN Milwaukee office. Services began February 2016. Commissioner Killeen called for a motion on Board Action #16-48 (Revised). **Motion.** It was moved by Dr. Taeug and supported by Ms. Abdallah approval of Board Action #16-48 (Revised). **Motion carried.**

B. Board Action #19-25 (Revised): New Center, LLC Lease Renewal – This Board is requesting renewal of three year term contract for the lease of office space and parking at DWIHN New Center One location. Service breakdown is \$175,000 to cover the lease and parking through 9/30/20, and approval of a 1 year renewal option for lease through 9/30/21 for \$310,000 for the 14,772sqft office space. The Chair called for a motion on Board Action #19-25 (Revised). **Motion.** It was moved by Mr. McNamara and supported by Ms. Brown approval of Board Action #19-25 (Revised). **Motion carried.**

XI. New Business – Staff Recommendations:

A. Board Action #20-47 Wayne Parking – This board action is requesting a one year new contract for 70 parking spaces for DWIHN employees for both locations at 707 W. Milwaukee & New Center One. The Chair called for motion on Board Action #20-47. **Motion.** It was moved by Dr. Taeug and supported by Ms. Abdallah approval of Board Action #20-47. **Motion carried.**

XII. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement.

Dr. Elliott Attisha, Chief Health Office for Detroit Public Schools addressed the committee and gave a statement on the GF Priority List and the effect the proposed \$1 million reduction to the program would have for six (6)Detroit Public Schools. He also noted the importance of physical health and nursing services.

Bob Davidge, CFO for Hegira Health addressed the committee and gave a statement on the General Fund Priority List and thanked the committee for help with Spend downs.

L. Blackshire, Board Liaison, DWIHN acknowledged N. Smith, Management Assistant for preparation of meeting minutes for the Finance Committee Meetings.

XIV. Adjournment – There being no further business; the Chair called for a motion to adjourn. **Motion:** Moved by Mr. Parker and supported by Dr. Taeug to adjourn the meeting. **Motion carried.** Meeting adjourned at 3:41 p.m.

**FOLLOW-UP
ITEMS**

- A. Update on DAB transformation (March 2020) (S. Durant)
- B. Update on Operational Efficiency Plan (S. Durant)
- C. Committee Request Talking Points on Specialty Integrated Plan(SIP) (March 2020)(Mr. Brooks)

	D. Information request by the Chair, to determine if the state rules/guidelines are the same for both the private health plans and the PIHPs. (T. Forman)

PROGRAM COMPLIANCE COMMITTEE

MINUTES FEBRUARY 12, 2020 1:00 P.M. 2ND FL CONFERENCE ROOM 200A

MEETING CALLED BY	I. Dr. Iris Taylor, Program Compliance Chair at 1:00 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Dr. Iris Taylor, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	<p>Committee Members: Angelo Glenn, Chief William Riley, III; Dr. Cynthia Taueg and Dr. Iris Taylor</p> <p>Committee Member(s) excused: Dr. Lynne Carter and Board Chair, Bernard Parker</p> <p>Board Member(s) Present: Dorothy Burrell</p> <p>Staff: Willie Brooks, Donna Coulter, Jacquelyn Davis, Tiffany Devon, Eric Doeh, Kimberly Flowers, Tina Forman, Bernard Hooper, Dana Lasenby, Jennifer Miller, Callana Ollie, Darlene Owens, Crystal Palmer, April Siebert, Ortheia Ward and June White</p>

AGENDA TOPICS

II. Moment of Silence

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

III. Roll Call

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

IV. Approval of the Agenda

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

DISCUSSION/ CONCLUSIONS	<p>A. TRAILS Program – Provide U of M report on Program; total number of schools in the geographic area and when the Program will be in all schools. Crystal Palmer, Director of Children’s Initiatives submitted and gave an update on the TRAILS Program. Mrs. Palmer informed the committee that DWIHN has 11 Community Mental Health agencies providing school-based services to 72 schools. There are currently 18 clinicians that are fully-trained in the TRAILS model in 18 schools and 54 clinicians will need to be trained for the remaining 54 schools. U of M informed Mrs. Palmer this morning that seven more clinicians were trained on January 21st, but staff must insure that they have completed the entire training cohort before assigning them into the schools. Mrs. Palmer also submitted and discussed with the committee a proposed timeline from TRAILS for additional trainings. DWIHN would need to contract with U of M for additional training cohorts (\$250,000 for each cohort and up to 45 clinicians can be trained). Funding will have to be secured to move this project forward. This fiscal year does not have additional dollars in our Workforce Development budget to continue this piece due to current budget issues. Mrs. Palmer stated that they asked U of M on Friday if the Network’s current dollars can be extended to train additional staff and is awaiting a response. Discussion ensued. The committee has concerns regarding the pricing for training and requested that Mrs. Palmer look into Train the Trainer and report back to the committee. (Action)</p> <p>B. FY 2018/19 Utilization Management Annual –</p> <ol style="list-style-type: none">1. Provide a Corrective Action Plan and explanation for the hospitalization numbers and average length of stay.2. Provide the target percentage for HAB Waivers <p><i>This information will be covered under item IX. FY 2019 Annual Utilization Management Program Evaluation</i></p>
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VI. Approval of Meeting Minutes

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the meeting minutes for January 8, 2020. Motion: It was moved by Chief Riley and supported by Mr. Glenn to approve the January 8, 2020 meeting minutes. Dr. Taylor asked if there were any changes/modifications to the minutes. There were no changes/modifications to the minutes. Motion carried.
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VII. Reports

DISCUSSION/ CONCLUSIONS	<p>A. Corporate Compliance Report – Bernard Hooper, Director of Corporate Compliance submitted and gave an update on his Corporate Compliance report. Mr. Hooper reported that staff continue to monitor the operations of Central City Integrated Health (CCIH). They continue to have challenges maintaining telephone access for the member served. Dr. Farrow, Interim CEO presented a</p>
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30-day timeline during which a capital investment will be made to replace the current telecom hardware and infrastructure completely. Eric Doeh, DWIHN's COO and Dr. Farrow discussed the Request for Qualifications (RFQ) released by the Detroit Continuum of Care (CoC) regarding the transfer of two CoC Permanent Supportive Housing (PSH) grants currently administered by CCIH, in which these grants may need to be transferred to a new recipient(s). The CoC Board of Directors will make this determination based on CCIH's progress on their Corrective Action Plan and/or based on the responses received to the RFQ. Mr. Hooper and Quality Improvement's staff met with Wayne Center regarding the number of findings in the Performance Monitoring Report dated, April 29, 2019. Wayne Center is preparing a plan of correction regarding those findings and a follow-up review is pending. The review of IPOSs prepared by Wayne Center has identified a number of documents that do not satisfy the specifications of an IPOS. Corporate Compliance is contemplating review of IPOSs for recoupment. Centria's member referrals will be reinstated on February 17, 2020 due to the successful satisfaction of a consolidated corrective action plan. Staff will continue to monitor Centria closely to protect the operational gains made during the non-referral period. The Chair called for a motion to accept the Corporate Compliance report. **Motion:** It was moved by Chief Riley and supported by Mr. Glenn to accept the Corporate Compliance report. Dr. Taylor opened the floor for further discussion. There was no discussion. **Motion carried.**

- B. **Media and Community Outreach** – Tiffany Devon, Director of Communications submitted a written update on the Media and Community Outreach report for review and acceptance. Dr. Taylor stated that Mrs. Devon will present a verbal report every other month. Mrs. Devon will present a verbal report for the March Program Compliance meeting. The Chair called for a motion to verbally accept the Media and Community Outreach report. **Motion:** It was moved by Chief Riley and supported by Mr. Glenn for a verbal acceptance of the Media and Community Outreach report. Dr. Taylor opened the floor for further discussion. There was no discussion. **Motion carried.**

- C. **Strategic Plan-Access Pillar and Crisis Services Quarterly Report** – Jacquelyn Davis, Director of Access and Crisis Services submitted and gave a report on the Strategic Plan-Access Pillar and Crisis Services Quarterly report. Ms. Davis reported that this is the first report on the Access Pillar for the 2019-2021 Strategic Plan approved in November 2019. We are at 22% completion on this pillar. There are four (4) high-level goals for this pillar:

1. Create infrastructure to support a holistic care delivery system (full array) by December 31, 2021;
2. Create Integrated Continuum of Care for Youth by September 30, 2020;
3. Establish an effective crisis response system by December 31, 2021; and
4. Implement Justice Involved Continuum of Care by September 20, 2020.

Specialty and CRSP Providers have been identified. We are in the process of determining our capacity with respect to behavioral health providers and SUD providers. As part of the launch of Standardized IPOS, there are four core providers that are already on the platform that provides a singular way to record the care plan that is shared and available through Health Information Exchange (HIE) as part of interoperability. Ms. Davis informed the committee that they are working on getting new tasks uploaded in Cascade and also providing training to staff in the Cascade program. More updates will come in the next quarterly report. Discussion ensued.

Access and Crisis Services 1st Quarterly Report – Ms. Davis reported that there were 953 Request for Service (RFS) with 74% being diverted to lower

	<p>levels of care (LOC) for the Children’s Crisis Providers. There has been a slight increase in RFS for COPE and a slight increase in the diversion rate compared to the averages per quarter FY 18/19. The number of incoming calls for ProtoCall have increased each month in this quarter but there have been consistent improvements performance outcomes. Familiar Faces workgroup with DPD has engaged 65% of individuals in CMH services; 15% have received long-term housing. Additional partnerships have been developed with Plymouth and Grosse Pointe law enforcements to receive Mental Health First Aid Training and participate in the CIT program. Staff is continuing to work with the Crisis Provider team to review notes/alerts, previous RFS and hospital packets prior to making disposition decision. Staff have plans to finalize Pre-Admission Review (PAR) Screening for Stabilization cases only and implementing the process. Staff is working on developing a refresher training on PAR for all crisis providers. Staff is also working on completing analysis of Length of Stay (LOS) for inpatient to determine the impact of step-down to CRU. Discussion ensued. The Chair called for a motion to accept the Strategic Plan-Access Pillar and Crisis Services Report. Motion: It was moved by Chief Riley and supported by Mr. Glenn to accept the Strategic Plan-Access Pillar and Crisis Services Quarterly report. Dr. Taylor opened the floor for discussion. There was no further discussion. Motion carried.</p> <p>D. Substance Use Disorder (SUD) Quarterly Report – Darlene Owens, Director of Substance Use Disorder submitted and gave a quarterly report on SUD services. Ms. Owens reported on October 26, 2019, SUD Providers held a Detroit Wayne National Drug Take Back Day and collected 3,164.6 lbs. of prescriptions that people no longer used from 16 sites across Wayne County. The Gambling Disorder Prevention Providers provided Stack Decked curriculum and accomplished programs in four schools and three churches across the region. Partnership for Success grantees are in its final year of services to the three communities they serve (one in Taylor and two in the City of Detroit). Five SUD providers completed six, seven-week Strengthening Families sessions on opioid addiction for 36 families. Since its’ inception, 571 lives have been saved with the Naloxone Initiative program with nine unsuccessful saves. DWIHN provides harm reduction strategies in the community as appropriate to the audience (access to Naloxone, peer support, latex condoms, fentanyl strips and deterra bag distribution). Three SUD Grants have been acquired during this quarter (Gambling Residential (\$400,000), MAT in Wayne County Jails (\$350,000) and Jail Plus (\$388,500)). Ms. Owens also informed the committee of upcoming conferences and trainings on SUD services. Discussion ensued. The Chair called for a motion to accept the SUD Quarterly report. Motion: It was moved by Mr. Glenn and supported by Chief Riley to accept the SUD Quarterly report. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.</p>
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VIII. Quality Review(s)

DISCUSSION/ CONCLUSIONS	<p>A. FY 2019 Quality Assurance Performance Improvement Plan (QAPIP) Annual Evaluation – April Siebert, Director of Quality Improvement submitted and gave her report on the FY 2019 QAPIP Annual Evaluation. Ms. Siebert reported that the QAPIP evaluation assess the results, improvements and outcomes DWIHN has made with respect to the 2019 Annual Work Plan. This evaluation based on six pillars that are identified in DWIHN’s Strategic Plan (Customer, Access, Workforce Development, Finance, Quality and</p>
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	<p>Advocacy). It reflects ongoing activities throughout the year and addresses areas of timeliness, accessibility, quality and safety of clinical care, quality of services, performance monitoring, member satisfaction and performance improvement projects. The data collected analyzes and evaluates the year-to-year trend analysis of the overall effectiveness of the QI program, indicating the progress for decision-making to improve services and the quality of care for members served. During FY 2019, HSAG conducts three mandatory external quality reviews (EQR) as required by the Balanced Budget Act of 1997 (BBA) to ensure quality performance measures:</p> <ol style="list-style-type: none"> 1. Performance Improvement Project – Goal met at 100% 2. Performance Measurement Validation – Goal met with recommendations for Continuous Quality Improvement; and 3. Compliance Review – Goal not met – Goal is 95% - Corrective Action Plan due February 21, 2020 <p>Discussion ensued. The Chair called for a motion to move the FY 2019 QAPIP Annual Evaluation to Full Board for approval. Motion: It was moved by Mr. Glenn and supported by Chief Riley to move the FY 2019 QAPIP Annual Evaluation to Full Board for approval. Dr. Taylor opened the floor for further discussion. Discussion ensued. Motion carried.</p>
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IX. FY 2019 Annual Utilization Management Program Evaluation

DISCUSSION/ CONCLUSIONS	<p>Kimberly Flowers, Provider Network Clinical Officer submitted and presented the FY 2019 Annual Utilization Management Program Evaluation to the committee for review and approval. Mrs. Flowers reported that UM authorizes services and Levels of Care that require prior authorization for Inpatient, Partial Hospitalization, SUD services, Outpatient, Crisis Residential and Autism. Current staffing for these services is 29 FTEs. The UM Goals are aligned with and evaluated using the Strategic Plan Pillars. There were 1,659 cases opened in the Autism Spectrum disorder Benefit for FY 2019. Timeliness of authorizations improved from 56.7% to 99.8% in FY 19. Thirty-eight children are enrolled in the Children's Waiver Program. DWIHN served 84 children and youth in the Children's Serious Emotional Disturbance Waiver (SEDW) in FY 19. Habilitation Supports Waiver 1,164 slots are to be filled at 95%, per MDHHS. DWIHN met this requirement only once in a 12-month period. MDHHS reduced the slots to 1,084 and we currently have filled 1,040 slots. Per Dana Lasenby, a Corrective Action Plan has been submitted to the State for review. Staff will provide the response to this committee once it's received. (Action) Mrs. Lasenby reported that in order for DWIHN to be restored the original slots, we would have to maintain the slots we currently have and if other regions are not using their slots, then we could request an appeal to MDHHS for additional slots. Mrs. Flowers informed the committee that the plan to improve and promote participation and use of Specialty Waiver Programs FY 2020 are:</p> <ol style="list-style-type: none"> 1. Monthly and Quarterly provider meetings to identify and address barriers, review potential participants; 2. Require each provider to have 3-5 participants; and 3. Targeted training to minimize returned applications from MDHHS. <p>Discussion ensued. The committee requested to review the Corrective Action Plan for the non-compliant areas. (Action) The Chair called for a motion to move the FY 2019 Annual Utilization Management Program Evaluation to Full Board for approval. Motion: It was moved by Dr. Taueg and supported by Mr. Glenn to accept the FY 2019 Annual Utilization Management Program Evaluation</p>
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	conditionally, contingent on the Corrective Action Plan being submitted for review at the next Program Compliance Committee meeting in March. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.
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X. Chief Clinical Officer's (CCO) Report

DISCUSSION/ CONCLUSIONS	Dana Lasenby, Chief Clinical Officer submitted and gave highlights on her Chief Clinical Officer's report. Mrs. Lasenby reported that staff is in the process of finalizing the Critically Responsible Service Providers (CRSP) definition which will include roles and responsibilities of CRSP. An update will be provided next month. Mental Health and SUD CRSP have been identified. Staff is in the process of ensuring all active consumers have been assigned a CRSP. Eric Doeh, COO is in the process of developing a tool that looks at risks and activities that are required by a CRSP to make sure that they are compliant. This will also determine if we will continue to have a contract with that CRSP. The number of cases currently active for the DPD Familiar Faces project have increased from 45% in November 2019 to 60% in January 2020. Fifteen percent of those cases have received long-term housing via NSO. The project is looking to add more individuals to the list to get them engaged in services. The Habilitation Supports Waiver slots are filled at 95.9%. Staff is currently working on revising the Residential Assessment and will be in our system once it's completed; this will allow staff to look at the clinical need and level of residential services our clients require. This will also ensure that the services that are authorized are the services that are being provided. DWIHN has hired Dr. Margaret Hudson-Collins as our new Medical Director. She has law enforcement and jail background. The Chair called for a motion to accept the Chief Clinical Officer's report. Motion: It was moved by Dr. Tauog and supported by Mr. Glenn to accept the Chief Clinical Officer's Report. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.
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XI. Unfinished Business

DISCUSSION/ CONCLUSIONS	<p>A. BA #19-24 (Revised) – ProAct/Interoperability –The Chair called for a motion on BA #19-24. Motion: It was moved by Dr. Tauog and supported by Mr. Glenn to move BA #19-24 to Full Board for approval. Staff is requesting approval to continue funding Relias and their ProAct Analytics tool. ProAct supports our Strategic Plan's initiatives surrounding integrated care and NCQA accreditation. It is a web-based behavioral health analytics solution that uses evidence-based algorithms to identify clinically actionable metrics on individuals served by DWIHN. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.</p> <p>B. BA #19-42 (Revised) – ProAct Sub Portals – Relias Learning, LLC – The Chair called for a motion on BA #19-42. Motion: It was moved by Dr. Tauog and supported by Chief Riley to move BA #19-42 to Full Board for approval. Staff is requesting four months funding for Relias Learning, LLC beginning 10/1/19 through 1/31/2020 in the amount of \$50,000.00 for a total amended amount of \$205,000. The initial board action amounted to \$155,000.00 through 9/30/19. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.</p> <p>C. BA #20-19 (Revised2) – Multicultural Integration – Providers listed in Board Action – The Chair called for a motion on BA #20-19. Motion: It was moved by Dr. Tauog and supported by Mr. Glenn to move BA #20-19 to Full Board for</p>
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	<p>approval. Network staff is requesting approval of the Memorandum of Understanding between Community Mental health Association of Michigan (CMHAM), Michigan Department of Health and Human Services (MDHHS) and Pre-paid Insurance Health Plan (PIHP) for the PIHP Veteran Navigator (PIHP-VN) and Multicultural Integration Providers formerly known as the Multicultural Programs. MDHHS restored the reduction to \$618,601.00. The amount was previously reduced to \$371,809.00. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.</p> <p>D. BA #20-43 (Revised) – DWIHN Clubhouse Spenddown/Deductible Assistance – Arab Community Center for Economic and Social Services (ACCESS) – The Chair for a motion on BA #20-43. Motion: It was moved by Mr. Glenn and supported by Chief Riley to move BA #20-43 to Full Board for approval. This board action is being revised to add three Drop-In Centers that were approved and included in this grant award. This revision will also add allocated funds of \$13,700.00. This will increase the total grant award from \$140,409.00 to \$154,109.00. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.</p>
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XII. New Business: Staff Recommendation(s)

DISCUSSION/ CONCLUSIONS	<p>A. BA #20-45 – HUD Supportive Housing – <i>Providers listed in the Board Action</i> - The Chair called for a motion on BA #20-45. Motion: It was moved by Dr. Taueg and supported by Chief Riley to move BA #20-45 to Full Board for approval. Staff requesting approval to accept, renew and disburse U.S. Department of Housing and Urban Development (HUD) Supportive Housing Funds for existing grant programs (Providers listed in Board Action). Staff also requesting approval for the disbursement of the required local match to Coalition on Temporary Shelter (DCI/COTS) and Central City Integrated Health (CCIH). Dr. Taylor opened the floor for discussion. Discussion ensued. Motion carried.</p>
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XIII. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	<p>The Chair asked if there were any Good and Welfare/Public Comment. There was no Good and Welfare/Public Comment.</p>
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ACTION ITEMS	Responsible Person	Due Date
1. Follow-Up Items from Previous meeting: A. TRAILS Program – Provide information on Train the Trainer for the program	Crystal Palmer	March 16, 2020
2. FY 2019 Annual Utilization Management Program Evaluation – Provide Corrective Action Plan for non-compliant areas	Kimberly Flowers	March 16, 2020

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

ADJOURNED: 3:01 p.m.

NEXT MEETING: Monday, March 16, 2020 at 1:00 p.m. in the 2nd Floor Conference Room 200A.



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

Committee 2: Wayne County Diversion Council (WCDC)

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

Members:

Hon. Nancy Blount (Chief Judge, 36th District Court), Laura McLaughlin (Special Projects 36thDC), Hon. Freddie G Burton, Jr. (Chief Wayne County Probate Court Judge), Hon. Timothy Kenny (Chief Judge, 3rd Circuit Court), Andrea Cole (CEO Flinn Foundation), Dean Sheryl

Kubiak (Center for Behavioral Health and Justice at WSU) Scott Smith (Center for Behavioral Health and Justice at WSU), Nanci Hambrick (Center for Behavioral Health and Justice at WSU), Stacey Campbell (Center for Behavioral Health and Justice at WSU), Sojourner Jones (Community/Law Enforcement, DWIHN), Julie Black (Clinical Manager, DWIHN) Andrea Smith (Director of Program Services, DWIHN), Reid Wilson (Executive Manager, Detroit Police Department), Amanda Rzotkiewicz (Analyst, Detroit Police Department), Gary Bresnehan (Wayne County Prosecutor's Office) Alisha Bell (Chair, Wayne County Commission) Dr. Debra Pinals (Medical Director, MDHHS) Willie Brooks (CEO DWIHN).

Health Plan Integration

Requests for Information (RFI)

DWIHN is finalizing agreements with two Health Plans. Currently working with clinicians, on the program design and implementation.

DWIHN is also assessing partnerships with two hospitals.

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 non-behavioral individuals. This could result in segregation of health care. This will also require a separation of dollars for health care administration for each system, behavioral and non-behavioral.
- **Outside Take Over.** This process can open the door for out of state organizations to bid and potentially profit in the system by reducing services to increase profits.

DWIHN Updates:

- MDHHS 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.

2020 Funding Updates

Medicaid:

MDHHS is struggling to produce accurate monthly payouts as DWIHN enters the six month of the fiscal year.

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 indicated a potential overall shortage of \$120 million in revenue for the PIHP system. MDHHS also indicated that other factors might reduce this amount. So far, all MDHHS predictions of revenue have been lower than anticipated for the fiscal year.
3. MDHHS is reviewing DWIHN shortages in Autism funding.
4. MDHHS is reviewing DWIHN General Fund reductions

I expressed concerns with MDHHS with this process that presents additional risk to PIHP's.

DWIHN is still pursuing cost efficiency measures to assure optimum use of Medicaid dollars along with building adequate reserves after years of depleting reserves.

1. Executive staff is preparing a budget efficiency plan. This plan will include:
 - a. Administrative efficiencies
 - b. Provider efficiencies
 - c. Clinical guideline efficiencies
 - d. Provider monitoring efficiencies (both electronically and procedural)
 - e. Reviewing losses associated with the Autism benefit administration
 - f. Reviewing losses associated with Substance Use Disorder benefit administration
2. Initiate lobbying efforts with our political consultants and key politicians concerning the budget reduction.
3. Establish a long-term plan of a new contracting process for FY21 that will take in consideration actual provider capacity needs.

Please note that several efficiencies are in place to reduce expenses.

- Funding model updates
- Elimination of third party payers
- Elimination of mild to moderate payments
- Budget Reduction Plan
 1. DWMHA initially requested MDHHS approval for the re-allocation of FY20 General Fund earmarked for spend down (deductible) to cover Medicaid overruns. *This request is no longer required in light of recent budget changes.*

2. Development of a new procedure to Autism providers to reduce outlier cost by \$6 million.
3. Letter sent to network requiring all providers in unlicensed homes must demonstrate proof (apply and receive) home help through MDHHS (DHS office) which is paid directly to providers from the State of Michigan through community living supports (H0043).
4. Letter sent to network reminding providers that shared living arrangements and actual staffing costs are required consideration when billing for residential services. The amount of savings is unknown at this time. However, with increased training and monitoring of shared living arrangements, we believe there is potential savings.
5. The SUD advisory board met and recommended significant changes to the delivery of care in addition to a reduction in certain rates, which equates to potentially \$7.5 million in savings. The council will monitor this process to assure that the changes do not have negative impacts to people served.
6. Effective 10/1/19 - UM Guidelines will be applied to all populations served. Enter guidelines into MH-WIN for SMI, SED, I-DD and SUD to control utilization and allow the system to prevent claims that exceed the guidelines.
7. Develop a benefits management function (3 FTE's) to handle Medicaid re-certification, HAB Waiver slots, DAB/TANF insurance alignment, and managing the DHS workers. This will directly increase the loss of revenue in our system.
8. Discuss budget changes with Political Leaders and the head of MDHHS. The new rates submitted by MDHHS appear to have positive numbers.
9. Reduce DWMHA direct administrative cost by \$1.25 million and potentially reduce indirect administrative cost \$1.25 million, for a total of \$2.5 million in administrative cost reductions.

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

DWIHN sent out the following letter to the provider community concerning Coronavirus:

"On behalf of the Detroit Wayne Integrated Health Network's Board of Directors and Administration, we are sending this urgent communication to all DWIHN Providers as we continue monitoring the latest developments surrounding the Coronavirus pandemic.

As the largest community mental health organization in the state and as Providers, we all have an obligation to stay informed and share useful knowledge to calm rather than spread fear. DWIHN believes this is an opportunity for us to work together to take proactive measures as we deal with this serious matter.

For all Providers, we recommend you follow normal protocols when it comes to working with a person served or an employee who may be ill. DWIHN follows the CDC guidelines for direction during this crisis please refer to their website for additional direction and the below fact sheet. <https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf>

We encourage everyone to do their part and take maximum risk prevention including covering your mouth when coughing and frequent hand washing.

We understand this is a rapidly evolving situation and we will provide regular updates as necessary.

Thank you for your patience regarding this serious matter."

DWIHN is taking precautionary measures with staff to protect staff from the spread of Coronavirus.

More details to come.

Communications

In the Media

Community Newspapers - The partnerships continue with The Michigan Chronicle, The Latino Press, the Arab American News and the Hamtramck Review. Since we have had a change in leadership in the Chief Medical Officer position, instead of “Ask the Doctor” stories, we are focusing more on various departments within DWIHN, as well as personal stories of the people we serve. The story below focuses on a DWIHN Ambassador and her accomplishments. Also below is the message that runs twice a month in the Latino Press.



At the age of 15, Brazilian native Patty Carlson attempted suicide and suffered a drug overdose. Her family neglected to seek any help because they assumed she wanted attention. They thought it was teenage behavior that she would eventually outgrow.



As time went on, Patty became a successful engineer, met her future husband online and fell in love. She left her life behind and started a family in the USA. She received Citizenship and enrolled in college, graduating with an Associates in Psychology from Henry Ford Community College.

It wasn't until after she gave birth to her second child in 2010 when she started suffering from behavioral health issues in particular, depression. This stemmed from a series of traumatic life events leading back to her attempted suicide. But this time was different – she got help.

DWIIHN
Your Link to Holistic Healthcare

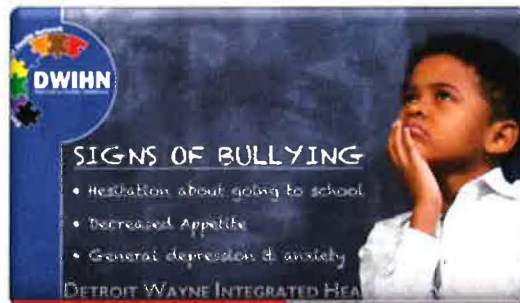
MENTAL HEALTH MATTERS

24-HOUR HELPLINE
800-241-4949

SERVING PEOPLE WITH:

- Children's Services
- Intellectual and Developmental Disabilities
- Severe Mental Illness
- Substance Use Disorders

WDIV-TV-4 - The February outreach message airing on Channel 4 focused on bullying and ways parents can identify the signs. Every month, Channel 4 provides DWIHN with “bonus” impressions. This month, we received 50,061 more impressions for a total of 2,081,552 impressions. This is a very good return on our investment. We continue working two months ahead on the creative messaging and will be scheduling a several Facebook lives this year. Also as part of our 2020 contract, WDIV-TV4 will be producing two additional messages for DWIHN at no additional cost.



Scripps-WXYZ-TV7, TV 20 & Bounce - A 30-minute, mental health special on substance use disorder has been airing on Channel 7 and TV 20 since February. This is part of a significant campaign with Scripps Broadcasting to bring awareness to the opioid epidemic. The special continues to air multiple times throughout March and April. Below are the March airdates.

WXYZ

Sunday, March 1 – 5:00 am
 Sunday, March 8 – 12:30 pm
 Sunday, March 15 – 5:00 am
 Friday, March 20 – 2:30 am
 Sunday, March 22 – 5:00 am
 Friday, March 27 – 2:30 am
 Sunday, March 29 – 5:00 am

TV 20

Sunday, March 1 - 11:30 am
 Sunday, March 8 - 6:30 am
 Sun-March 15 - 12:30 pm
 Tues, March 24 - 5:00 am

DWIHN also has a robust Narcan campaign on several Scripps platforms including social media, digital and television. From October 2019-January 2020, there were over 4 million impressions associated with our Narcan campaign on Channel 7. Facebook impressions were at their highest in December with over 52,000 people reached.

Outfront Media - The Communications team has drafted new billboard messages that will be seen in the Detroit and Wayne County areas this month. Below are two examples of the messaging. A focus group comprised of DWIHN staff and people we serve approved the billboards for this quarter.



Radio

DWIHN has a partnership with Cumulus radio, specifically WDVD in which 60-second messages are airing related to the services and supports DWIHN provides. Also, a free Winter Chill Movie event was scheduled at the Bel-Air Theater in Detroit where families could learn about suicide prevention and mental health resources and then watch a movie. The Beasley Media Group promoted it.



Community Outreach/Events

Trauma Conference – The annual DWIHN Trauma conference was held and former NFL player Braylon Edwards was a keynote speaker, discussing his trauma as a high-profile athlete. Fox 2 News interviewed him for a story on the 6pm news.



Tabernacle Spirituality Weekend – Tabernacle hosted a resource fair where a panel discussion on Alzheimer's and Dementia was held. There was also a variety of workshops for children and families, as well as a vendor stroll for community resources where DWIHN was present.

Vaping Seminar – On February 27, DWIHN held a vaping seminar at East English Village Preparatory Academy where students were informed of the myths and facts of vaping as well as the harm it causes to the human body.

Men's Wellness Summit – DWIHN President and CEO Willie E. Brooks was the keynote speaker at this conference. This summit had Narcan training, QPR Suicide Prevention training, yoga sessions, youth focus groups, free haircuts and a town hall on alcohol, marijuana, and tobacco.

Vaping Training – Youth were trained on vaping at Detroit Christian School, where they also learned about the myths and facts of vaping and took a pledge not to vape.



Upcoming Events

Event	Date	Location
Michigan Family Summit & Vendor Fair	March 17 & 18	Tabernacle Church
NSO Health is Wealth Fair	March 25	NSO Bell Building
Autism Conference	April 9	Doubletree by Hilton Detroit/Doubletree

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 18-45R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2020

Name of Provider: LAZ Karp Associates. LLC

Contract Title: Ultimate Parking Management LLC, Managing Agent for FFK Baltimore Garage LLC

Address where services are provided: 645 W. Baltimore, Detroit, MI 48202

Presented to Finance Committee at its meeting on: 3/4/2020

Proposed Contract Term: 1/1/2020 to 1/31/2020

Amount of Contract: \$ 10,000.00 Previous Fiscal Year: \$ 159,000.00

Program Type: Modification

Projected Number Served- Year 1: 50 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 1/1/2018

Provider Impaneled (Y/N)?

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

The board previously approved board action 18-45 on December 20, 2017, in the amount of \$159,000. The Facilities Department is requesting an additional \$10,000 to cover unforeseen final costs for additional parking for employees at the 645 W Baltimore Parking Deck increasing the total contract amount to 169,000.00. We are requesting to cover costs from January 1, 2020-January 31, 2020.

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

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

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
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Multiple	\$ 169,000.00	\$ 169,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 169,000.00	\$ 169,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64922.961000.00000

In Budget (Y/N)? Y

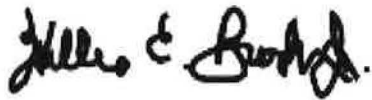
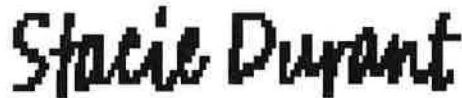
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Signed: Friday, February 28, 2020

Signed: Friday, February 28, 2020

Board Action Taken

The following Action was taken by the Full Board on the 31st day of March, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

____ Executive Director -initial here:____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: April 6, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 19-61R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2020

Name of Provider: Neighborhood Serv. Organization

Contract Title: NSO OBRA/PASARR Contract Extension

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 3/11/2020

Proposed Contract Term: 4/1/2020 to 5/31/2020

Amount of Contract: \$ 2,988,462.00 Previous Fiscal Year: \$ 1,987,256.00

Program Type: Continuation

Projected Number Served- Year 1: 579 Persons Served (previous fiscal year): 1111

Date Contract First Initiated: 10/1/2015

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 is to request an extension of the current contract with Neighborhood Services Organization (NSO) for OBRA/PASARR services that expires March 31, 2020. The extension is for 60 days for \$427,000 through May 31, 2020 for a total amount not to exceed \$2,988,462. The extension will allow DWIHN to complete the review and evaluation of the RFP issued in February 2020.

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

In June, 2018, the Michigan Department of Health and Human Services placed NSO on a Corrective Action Plan for issues regarding the quality of the assessments submitted to MDHHS.

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: Multiple

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
Federal and State grants	\$ 427,000.00	\$ 427,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 427,000.00	\$ 427,000.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: various

In Budget (Y/N)? Y

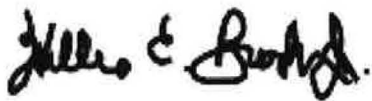
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Wednesday, February 26, 2020

Signed: Wednesday, February 26, 2020

Board Action Taken

The following Action was taken by the Full Board on the 31st day of March, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

____ Executive Director -initial here:____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: April 6, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-26 R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2020

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2019-2020 Operating Budget

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 3/4/2020

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

Amount of Contract: \$ 804,019,921.00 Previous Fiscal Year: \$ 832,308,628.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2019

Provider Impaneled (Y/N)?

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

This board action is to revise the FY2020 Budget to reflect the certification of revenue totaling \$3,147,146. The action is for budget adjustment(s) #20-35-004 (\$350,000) grant award for the MI Opioid Partnership; #20-35-005 (\$162,500) certification of additional funds per the FY 2020 Jail Plus Program grant award ; and #20-35-006 (\$2,634,646) certification of additional funds per the FY 2020 MDHHS SUD allocation letter.

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

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

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 19/20	Annualized
VARIOUS	\$ 3,147,146.00	\$ 3,147,146.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 3,147,146.00	\$ 3,147,146.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? N

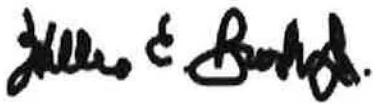
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Wednesday, February 5, 2020

Signed: Tuesday, February 4, 2020

Board Action Taken

The following Action was taken by the Full Board on the 31st day of March, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

____ Executive Director -initial here:____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: April 6, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-48 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 3/18/2020

Name of Provider: Allen Brothers PLLC

Contract Title: Allen Brothers PLLC

Address where services are provided: 400 Monroe Suite 600 Detroit, MI 48226

Presented to Finance Committee at its meeting on: 3/4/2020

Proposed Contract Term: 12/14/2018 to 12/13/2019

Amount of Contract: \$ 10,500.00 Previous Fiscal Year: \$ 45,000.00

Program Type: Modification

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

Date Contract First Initiated: 1/11/2019

Provider Impaneled (Y/N)?

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

The Detroit Wayne Integrated Health Network ("DWIHN") is requesting a modification of BO 21990012 for Allen Brothers Attorneys & Counselors, PLLC ("Allen Brothers") for \$45,000.

Additional funds are being asked for this BO in the amount of \$10,500 for a total amount of \$55,500 to cover legal services that were performed May 2019 through November 2019 in relation to New Center Community Health properties obtained by DWIHN.

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

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

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Board Action #: 20-48

Revenue	FY 19/20	Annualized
All funding sources	\$ 10,500.00	\$ 10,500.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64916.814000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

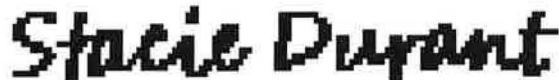
Signature/Date:



Signed: Friday, February 28, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Friday, February 28, 2020

Board Action Taken

The following Action was taken by the Full Board on the 31st day of March, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

____ Executive Director -initial here:____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: April 6, 2020

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20-49 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 4/8/2020

Name of Provider: Neighborhood Serv. Organizatio

Contract Title: OBRA/PASARR services

Address where services are provided: 'None'

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

Proposed Contract Term: 4/1/2020 to 3/31/2022

Amount of Contract: \$ 2,561,462.00 Previous Fiscal Year: \$ 2,561,462.00

Program Type: Continuation

Projected Number Served- Year 1: 579 Persons Served (previous fiscal year): 1111

Date Contract First Initiated: 10/1/2015

Provider Impaneled (Y/N)? Y

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

DWIHN is requesting to enter into a contract with Neighborhood Services Organization (NSO) for the provision of Omnibus Budget Reconciliation Act/Pre Admission Screen Annual Resident Review (OBRA/PASARR) services. DWIHN is obligated by contract with the Michigan Department of Health and Human Services to ensure that OBRA/PASARR services are provided in Medicaid certified extended care facilities.

A RFP was issued in February 2019 and NSO was the only respondent. They were deemed responsive and meet the requirements of the solicitation.

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

In June, 2018, the Michigan Department of Health and Human Services placed NSO on a Corrective Action Plan for issues regarding the quality of the assessments submitted to MDHHS.

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: Multiple

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
Federal grant	\$ 1,900,000.00	\$ 1,900,000.00
State grant	\$ 661,462.00	\$ 661,462.00
Total Revenue	\$	\$ 2,561,462.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.826155.02626

In Budget (Y/N)? Y

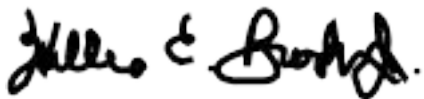
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Stacie Durant

Signed: Wednesday, March 11, 2020

Signed: Thursday, March 12, 2020

Board Action Taken

The following Action was taken by the Full Board on the 31st day of March, 2020.

☒ Approved

☐ Rejected

☐ Modified as follows:

____ Executive Director -initial here:____

☐ Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: April 6, 2020

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