



Detroit Wayne Integrated Health Network

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FULL BOARD
Wednesday, January 18, 2023
St. Regis Hotel
3071 W. Grand Blvd. Detroit, MI. 48202
1:00 p.m.
AGENDA

- I. **CALL TO ORDER**
- II. **ROLL CALL**
- III. **APPROVAL OF THE AGENDA**
- IV. **MOMENT OF SILENCE**
- V. **APPROVAL OF BOARD MINUTES** – Full Board Meeting – November 16, 2022
- VI. **RECEIVE AND FILE** – Approved Finance Committee Minutes – November 2, 2022
Approved Program Compliance Committee Minutes – November 9, 2022
- VII. **ANNOUNCEMENTS**
 - A) Network Announcements
 - B) Board Member Announcements
- VIII. **SWEARING IN CEREMONY – Judge Freddie Burton - K. Bentounsi**
- IX. **BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) CEO Paid Time Off (PTO) Memo (*Exigent approval*)
 - 2) Update CEO Annual Incentive Compensation Objectives FY2022/2023
 - 3) Metro Region Meeting – Macomb County Hosts – **Virtual** (January 26, 2023)
 - 4) Community Mental Health Association of Michigan (CMHAM) 2023 Winter Conference, Kalamazoo, Michigan (February 7th & 8th 2023)
 - 5) National Council of Wellbeing NatCon23 – Los Angeles, CA (May 1st – 3rd 2023)
 - 6) Chamber of Commerce Policy Conference 2023 - Mackinac Island, Michigan (May 30 – June 3, 2023)
 - B) Executive Committee
 - 1) Metro Region Meeting – Detroit Wayne Integrated Health Network – Host
 - 2) Board Study Session
 - 3) BA #23-55 - Seven Mile Complex Development Project
 - C) Finance Committee
 - D) Program Compliance Committee
 - E) Recipient Rights Advisory Committee

Board of Directors

Angelo Glenn, Chairperson
Dorothy Burrell
Kevin McNamara

Kenya Ruth, Vice Chairperson
Lynne F. Carter, M.D.
Bernard Parker

Dora Brown, Treasurer
Eva Garza Dewaelsche
William Phillips

Dr. Cynthia Tauzeg, Secretary
Jonathan C. Kinloch



X. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

XI. AD HOC COMMITTEE REPORTS

- A) Policy/Bylaw Committee

XII. PRESIDENT AND CEO MONTHLY REPORT

XIII. UNFINISHED BUSINESS

Staff Recommendations:

- A. BA #21-52 (Revised) – Residential Provider Payroll Audits – Gregory Terrell & Company *(Finance)*
- B. BA #21-54 (Revision 2) – Accuform Printing & Graphics *(Finance)*
- C. BA #21-71 (Revision 3) – Leadership Training/Pre-Employment Services *(Finance)*
- D. BA #22-66 (Revised) – HPS Services NCQA – HPS Consulting, LLC *(Program Compliance)*
- E. BA #23-05 (Revision 2) – DWIHN FY2022-2023 Operating Budget *(Finance)*
- F. BA #23-07 (Revised) Provider Network System FY22/23 *(Program Compliance)*
- G. BA #23-26 (Revised) – Substance Use Disorder (SUD) Prevention Services Network FY 23 COVID-19 Grant *(Program Compliance)*
- H. BA #23-27 (Revised) - Substance Use Disorder (SUD) Treatment Services Network FY23 COVID-19 Grant - *(Program Compliance)*
- I. BA #23-53 (Revision 2) – AT&T Internet Service Subscription – NCO *(Finance)*

XIV. NEW BUSINESS

Staff Recommendations:

- A. BA#23-50 – Standard Cost Allocation Consulting Services – Rehmann Robson CPA's & Consultants *(Finance)*
- B. BA#23-51 – Mental Health First Aid (MHFA) *(Program Compliance)*
- C. BA#23-54 - Infant and Early Childhood Mental Health Consultation (IECMHC) Expansion – Hegira Health *(Program Compliance)*
- D. BA #23-55 – Seven Mile Complex Development Project *(Executive Committee)*

XV. PROVIDER PRESENTATION – None

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 Minutes
Wednesday, November 16, 2022
1:00 p.m.**

BOARD MEMBERS PRESENT

| | |
|------------------------|----------------------------------|
| Kenya Ruth, Vice Chair | Commissioner Jonathan C. Kinloch |
| Dora Brown, Treasurer | Kevin McNamara |
| Dorothy Burrell | Bernard Parker |
| Eva Garza Dewaelsche | |

BOARD MEMBERS EXCUSED: Mr. Angelo Glenn, Board Chair; Dr. Cynthia Taueg, Board Secretary; Lynne F. Carter, M.D. and Mr. William Phillips

BOARD MEMBERS ATTENDING VIRTUALLY: None

GUEST(S): Mr. Nick Griswold, CEO and Ms. Jessica Klotz, COO Growthworks; and Mr. Gary Spondike, WestComm.

CALL TO ORDER

Ms. Ruth, welcomed everyone to the meeting. The meeting was called to order at 1:05 p.m. by Ms. Ruth, Vice Chair and Acting Chairperson.

ROLL CALL

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

APPROVAL OF THE AGENDA

Ms. Ruth, Vice Chair and Acting Chair called for a motion on the agenda.

It was moved by Commissioner Kinloch and supported by Ms. Brown approval of the agenda with item XIII. Unfinished Business and item XIV. New Business moved to item VIII. and taken after Announcements. There was no further discussion. Motion carried agenda approved as amended.

MOMENT OF SILENCE

The Chairperson called for a moment of silence. Moment of Silence taken.

APPROVAL OF BOARD MINUTES

The Chair called for a motion on the Board minutes from the Full Board meeting of October 19, 2022. **It was moved by Ms. Brown and supported by Mr. Parker to accept the Full Board minutes of October 19, 2022 with any necessary corrections. Motion carried unanimously.**

RECEIVE AND FILE

The approved Finance Committee minutes from the meeting of October 5, 2022 were received and filed. The approved minutes from the Program Compliance Committee from the meeting of October 12, 2022 were received and filed.

ANNOUNCEMENTS

Network Announcements

There were no Network Announcements.

Board Announcements

Ms. Ruth commented on the number of student threats and lockdowns that have occurred in the high schools over the past several weeks. She highlighted the importance of being proactive in the advocacy of creating a safe place, starting the conversations and getting our students involved. She noted that DWIHN has been great at responding to tragedy, however we need to be proactive in getting students involved. It was also noted that school districts were going to begin to hold parents responsible for their student's actions.

Commissioner Kinloch presented a Certificate of Recognition to Mr. Trent Sanford on behalf of the Wayne County Commission for being recognized as and receiving the DWIHN Shining Star Achievement Award and for his many years of service in the healthcare industry as well as his technological support to ensure effective meeting productivity which has allowed DWIHN to operate effectively as a publicly held mental and behavioral health institution.

There were no additional Board Announcements.

UNFINISHED BUSINESS

Staff Recommendations:

- A. BA #23-05 (Revised) – Detroit Wayne Integrated Health Network FY2022/2023 Operating Budget – The Board Chair called for a motion on BA#23-05 (Revised) **It was moved by Mr. Parker and supported by Mr. McNamara approval of BA#23-05 (Revised).** S. Durant, Chief Financial Officer reporting. DWIHN is requesting approval to amend the FY23 Operating Budget as follows: certify federal grant revenue of \$4,474,160 from SAMHSA for Mobile Crisis Deployment; this includes expenses for approximately \$70,000 to hire an accountant to administer the grant through indirect costs.; 2. Certify federal grant revenue of \$153,487 per the revised FY23 SUD award from MDHHS (\$a53,487); Certify federal grant revenue of \$107,904 from MDHHS to fund the “Baby Court” Coordinator for the Infant Toddler Court Project. Additionally, Medicaid Reserve funds in the amount of \$393,164 will be used to fund the following new positions; Management Assistant (Administration), Accounts Payable Specialist (Finance) and Quality Administrator (DWIHN Call Center). There was no further discussion. **Motion carried.**

NEW BUSINESS

Staff Recommendations:

- A. BA #23-19 Treatment Foster Care Oregon (TFCO) Wayne State University (WSU) Grant. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Dewaelsche approval of BA#23-19.** This board action is requesting the allocation of \$387,273 for Treatment Foster Care Oregon (TFCO) at The Guidance Center for FY 22-23. TFCO is an evidence-based practice developed as a community-based alternative to hospital, residential, and other inpatient treatment settings for children receiving SED Waiver services with significant emotional and behavioral challenges. TFCO offers intensive, behaviorally focused and data-driven clinical treatment in a nonrestrictive setting. There was no further discussion. **Motion carried.**

- B. BA #23-31 ARC's Detroit, Northwest Wayne & Western Wayne. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Mr. Parker approval of BA#23-31.** This Board action is requesting approval of a one-year contract renewal for an amount not to exceed \$599,397 for the fiscal year ended September 30, 2023 with the following: 1. ARC Detroit; 2. ARC of Northwest Wayne County; and 3. ARC of Western Wayne County. The proposed contract will provide advocacy, supportive services, and educational information by addressing issues facing persons with intellectual/developmental disabilities. The contract further targets supportive family members, and the community through advocacy and information. The design and delivery of the programs will ensure active engagement and coordination in the mental health system. There was no further discussion. **Motion carried.**
- C. BA #23-40 Credentialing Verification Organization – Medversant Technologies, LLC. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Dewaelsche approval of BA#23-40.** This board action is requesting a contract for one (1) year effective November 1, 2022 through October 31, 2023 for an amount not to exceed \$274,740 with Medversant Technologies LLC a National Committee for Quality Assurance accredited Credentialing Verification Organization. Medversant primary source verifies Medicaid and Medicare sanctions, licensure, work history, malpractice history, education and training for practitioners and providers. There was no further discussion. **Motion carried.**
- D. BA #23-42 Boji LLC, Land Acquisition. The Chair called for a motion. **It was moved by Mr. McNamara and supported by Mr. Kinloch approval of BA#23-42.** B. Blackwell, Chief of Staff reporting. Detroit Wayne Integrated Health Network (DWIHN) received \$45,000,000 in funding from the Michigan Department of Health and Human Services (MDHHS) to design and build a new Integrated Behavioral Health Campus in Wayne County to serve the communities of Wayne, Oakland and Macomb counties. This board action is requesting authorization for DWIHN to receive approximately 4.85 acres of donated land located at 18520 W. Seven Mile Road in the City of Detroit owned by developer Boji-Group LLC through its holding company The Detroit 7 Mile Property, LLC as part of the effort to expand and integrate access to behavioral health services in the region. This request is to authorize DWIHN to pay \$1 for the donated land and reimburse the owner for an amount not to exceed \$3,718,466 for excavation and other costs necessary to make the land suitable for its intended use. Additionally, DWIHN would be authorized to pay up to .5% of the project budget in exchange for certain land concessions at closing including restrictive covenants on surrounding parcels prohibiting uses of that land that are incompatible with DWIHN's intended use as well as a right of first offer and first refusal. Discussion ensued regarding the sources of funding and the reimbursement to the owner of the land. Ms. Blackwell noted the board action notes the \$45 million dollars that the Board is aware of, however, the funding now amounts to \$60 million dollars that DWIHN received from the Michigan Department of Health and Human Service for the construction of the Seven Mile behavioral health center. Discussion ensued and included information regarding the Title Company and the closing process. There was no further discussion. **Motion carried.**
- E. BA#23-44 – Michigan Collaborative Care Program (MC3) and Behavioral Health Consultant – Starfish Family Services. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Dewaelsche approval of BA#23-44.** This board action is requesting the approval of a one year contract for an amount not to exceed \$78,399. The Michigan Child Collaborative Care Program and Behavioral Health Consultant Project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Starfish Family Services provides local oversight, in collaboration with MC3 program of the Behavioral Health Consultant as they implement MC3 in Wayne County as well as work in concert with other regional Behavioral health

Consultants. Note, the State of Michigan identified the agency to provide the Behavioral Health Consultant. There was no further discussion. **Motion carried.**

- F. BA#233-45 HEDIS/NCQA Professional Consultant Services. The Chair called for a motion. **It was moved by Ms. Brown and supported by Mr. Parker approval of BA#23-45.** This Board action is to request \$62,205 funding for contractual Professional IT services for the period from 1/1/23 – 9/30/23. DWIHN is requesting the continued services of Mr. Barr to assist on a part-time basis with generating HEDIS measures which is one of the prime requirements from a data standpoint when it comes to both state reporting and NCQA compliance. Mr. Barr has been instrumental in developing Risk Matrix and is continuing to help us extend the functionality and rollout to entire network. There was no further discussion. **Motion carried.**
- G. BA#23-46 – FY 22/23 MI Health Link Demonstration Project – The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Brown approval of BA#23-46.** This board action is requesting a one- year continuation contract with the five (5) Integrated Care Organizations (ICO) to receive and disburse Medicare dollars to reimburse the Affiliated Providers for the fiscal year ended September 30, 2023 for an estimated amount of \$9,886,123 in conjunction with the Mi Health Link Demonstration Project. There was no further discussion. **Motion carried.**
- H. BA #23- 47 Architectural & Engineering Services – Seven Mile Center. – The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Dewaelsche approval of board action #23-47.** M. Maskey, Director of Facilities reporting. The Facilities Department has solicited a Request for Qualifications (RFQ) to provide Architectural and Engineering services for DWIHN’s newly proposed Seven Mile facility. The process resulted in a recommendation for architectural and engineering services to be provided from the selected vendor. Each firm’s proposal was vetted with information that contained experience, fee schedules and references related to the project requirements. This contract would allow the selected vendor to facilitate the architectural and engineering design documents to construct DWIHN’s new proposed Crisis Care Center located in Detroit, Michigan. The facility will provide services for Adult/Children Crisis Stabilization, Crisis Residential, Sober Living, FQHC Medical, Dental, Vision Services, Administrative Office Space and Community Engagement. DWIHN is requesting approval of this contract in an amount not to exceed \$3,200,000 however, the Architectural and Engineering Services will not exceed 8% of the total construction costs of the project. Discussion ensued regarding the parameters of what will be inside of the building; Tetra Tech being vetted and selected as the vendor; Wayne County residents receiving jobs and some of the projects; the reconvening of the Building Committee and to which committee the Building Committee would report to and the new building being environmentally; it was noted that all items under this contract would be presented to the Building Committee which in the past reported to the Executive Committee as well as the building being environmentally friendly. There was no further discussion. **Motion carried with Mr. Parker voting Nay.** The Acting Chair, Ms. Ruth called for a motion on reconvening the Board Building Committee. **It was moved by Commissioner Kinloch and supported by Mr. Parker to reinstate the Building Committee through the duration of the this project.** Discussion ensued regarding a meeting schedule for the Building Committee, how items would be handled and that a new Building Committee would need to be selected. **Motion carried.**
- I. BA #23-48 Michigan Department of Health and Human Services and Detroit Wayne Integrated Health Network for Community Mental Health Services Program (CMHSP) Contract FY23 – The Chair called for a motion. **It was moved by Ms. Brown and supported by Mr. Parker approval of BA #23-48.** This board action is for the approval of the Grant Agreement between the Michigan Department of

Health and Human Services (MDHHS) and Detroit Wayne Integrated Health Network (DWIHN) for the Community Mental Health Services Program (CMHSP). The term of the contract is 10-1-2022 through 9-30-2023. The contract amount is not to exceed \$21,461,405. This contract is for the provision of a comprehensive array of mental health services and supports. This contract, although not reflected in the amount above, also includes the required Medicaid drawdown payment to MDHHS for \$2,030,000 and local portion for state facility costs payment to the state of Michigan estimated at \$7,200,000 in accordance with the Mental Health Code. There was no further discussion. **Motion carried.**

- J. BA #23-49 Michigan Department of Health and Human Services and Detroit Wayne Integrated Health Network Prepaid Inpatient Health Plan (PIHP) Contract – The Chair called for a motion. **It was moved by Ms. Brown and supported by Commissioner Kinloch approval of BA#23-49.** This Board action is requesting approval of the Detroit Wayne Integrated Health Network’s (DWIHN) Prepaid Inpatient Health Plan (PIHP) contract with the State of Michigan’s Department of Health and Human Services (MDHHS) for Fiscal year ending September 30, 2023. The purpose of this contract is for MDHHS to obtain DWIHN’s services to manage the following: Medicaid (including Habilitation Waiver Supports, Hospital Rate Adjustment and DHS Incentive), Healthy Michigan Plan (including Hospital Rate Adjustment), Autism Medicaid, SED Waiver, and Children’s Waiver. The estimated value of this contract is \$864,055,615 including hazard pay and is contingent upon and subject to enactment of legislative appropriations and availability of funds. This board action encompasses the mandated payments for Hospital Rate Adjustment to the community hospitals, Medicaid drawdown and IPA tax payment to the State of Michigan. There was no further discussion. **Motion carried.**

BOARD COMMITTEE REPORTS

Board Chair Report

Ms. Ruth, Vice Chair and Acting Chairperson gave a verbal report. It was reported that there is a Wayne County vacancy on the DWIHN Board of Directors. Ms. Blackwell, Chief of Staff reported that Ms. Karima Bentounsi has been recommended to the Wayne County Commission as the candidate for appointment. The Wayne County Commission meets on Thursday and an update will be provided accordingly.

The Community Mental Health Association of Michigan (CMHAM) – The CMHAM Treasurer election was held during the Fall Conference scheduled October 24th and 25th in Grand Traverse, Michigan. Ms. Brown was elected as the CMHAM Treasurer and ran as a write-in candidate from a campaign that was run from the floor. Three board members, Ms. Ruth; Mr. Parker and Ms. Brown and the CEO served as voting delegates. Mr. Parker noted that he was elated that we had a Board member on the CMHAM Board and this was the first time that we have had this representation. The Board congratulated Ms. Brown on a successful campaign and noted that this was the first time that DWIHN had a candidate on the CMHAM Board. Ms. Brown noted that was happy to serve and would represent DWIHN to the best of her ability. Ms. Ruth recognized Ms. Smith; Ms. Bradford; Ms. Blackshire and Ms. Blackwell for their hard work on the campaign.

The Chair noted the Community Mental Health Association of Michigan (CMHAM) 2023 Winter Conference would be held in Kalamazoo, Michigan on February 7th and 8th ; the National Council of Wellbeing NatCon23 Conference would be held in Los Angeles, California May 1st – May 3rd 2023; and the Chamber of Commerce Policy Conference 2023 would be held on Mackinac Island, Michigan May 30th through June 3rd. Any Board members who are interested in attending any of the conferences should notify the Board Liaison. There was no further discussion on the Board Chair report. The report was received and filed.

Executive Committee

Ms. Ruth, Vice Chair and Acting Chairperson gave a verbal report. It was reported that the Executive Committee met on Monday, November 14, 2022. The Board and Committee meeting schedule for 2023

was presented. It was noted the Finance Committee meetings would be moved during the month of January, February and June. The Chair noted the Finance; Program Compliance and Executive Committee meetings were cancelled for the month of December. Discussion ensued regarding the December Full Board meeting. It was moved by Commissioner Kinloch and supported by Mr. McNamara that all Board Committee meetings and the Full Board meeting for the month of December be cancelled. **Motion carried.**

An update was provided on the CEO Annual Incentive Compensation Objectives for FY2022/2023. It was reported that Ms. Ruth, Board Vice Chair; Mr. Doeh, CEO and Mr. Jody Connally, Director of Human Resources met on Monday, November 14th to develop the 2022/2023 CEO Incentive Objectives. Mr. Connally would draft the recommended objectives and a follow-up meeting will be held in the upcoming weeks. Information was to be obtained from Mr. Maskey regarding more details in the contractual obligations as to where they are going to be in the building process. The CEO Incentive Objectives once completed will be reviewed by the Executive Committee for a recommendation to Full Board. Further discussion ensued.

The Metro Region meeting will be held on Thursday, January 26, 2023 and will be hosted by Macomb County. The platform for the meeting has not been determined and additional information will be provided in January. Board members should contact the Board Liaison of their availability to attend.

There was no further discussion on the Executive Committee report. The Executive Committee report was received and filed.

Finance Committee

Ms. Brown, Chair of the Finance Committee provided a verbal report. The Finance Committee met on Wednesday, November 2, 2022. Ms. Brown reported DWIHN will have audited September 30, 2022 financial statements available in accordance with the State of Michigan reporting deadline of March 31, 2023. As such, there were no monthly 9/30/2022 financial statements available at this time. Financial stability letters were submitted to thirty-one (31) providers across the SUD, Autism, Skill Building, Children's and Adult service provider network. To date, DWIHN received a response from twenty-seven (27) providers; eight (8) of the twenty-seven either declined assistance or were not eligible due to no projected operating losses for the fiscal year. The total amount of financial assistance is approximately \$18 million. DWIHN submitted a financial stability letter to all residential providers requesting information to determine the amount of uncompensated payroll expenses related to direct care staff. The deadline is November 10, 2022. Based on both DWIHN's and HAP's legal counsel's interpretation of the MHL contract, DWIHN is not required to cost settle the contract outside of the first year of the demonstration pilot which will result in DWIHN retaining approximately \$9 million in one-time funds that is considered local funds. DWIHN cost settled the first year of the contract with HAP for approximately \$3.8 million. Due to the aforementioned, DWIHN has one-time excess cash to settle the outstanding Milwaukee loan balance of approximately \$5 million and will not refinance the loan incurring unnecessary interest. Our liquidity remains strong and cash flow is sufficient to support operations. The committee reviewed and moved to Full Board for consideration four board actions. There was no further discussion. The Finance Committee report was received and filed.

Program Compliance Committee

The Chair deferred the Program Compliance Committee report for the month of November to the January Full Board meeting.

Recipient Rights Advisory Committee

Ms. Eva Garza Dewaelsche, Committee member gave a verbal report on behalf of Ms. Kenya Ruth Chair of the Recipient Rights Advisory Committee. A written report was provided for the record. It was reported the committee met on November 7, 2022. The department is preparing for their annual report which captures

data for October 1, 2021 to September 30, 2022. The Committee is working on developing their four new recommendations and outcomes as required by the State of Michigan. Ms. L. Haywood, Director of Recipient Rights for Henry Ford Hospital for Wyandotte was recognized for her accomplishments; new investigators Sherry Underwood, Tondalalya Wilson and Mariah Simmons were introduced and Linda Taylor retired. The Office of Recipient Rights (ORR) Annual Reporting data for FY 21-22 noted that 1,634 allegations had been received, 1,288 cases investigated; and 364 investigations substantiated. The ORR received allegations from 450 recipients and 540 employees which represents the highest number of individuals that filed complaints; this is significant and supports the fact that recipients and employees are one of our greater resources in protecting the rights of the ones we serve. The Office of Recipient Rights also oversees the training department for all DWIHN and Provider employees, for the year 21-22 the Recipient Rights Trainers registered 5,360 participants, 2,807 attended and passed the virtual class and there were 2,553 no shows. The department mentions at every meeting that all providers are requested to ensure their employees are trained within 30 days of their hire to remain in compliance of the Mental Health Code Citation MHC 1755(5)(f), Standard 3.3.1 and moving forward the fee of \$50.00 will be imposed for failing to train their staff within 30 days of hire. The department also accepts SUD complaints and continue to work with the Substance Use Disorder (SUD) department. When the ORR receives a complaint involving a substance abuse center it is forwarded to SUD for processing. All allegations are sent to Ms. Judy Davis, Director of SUD for handling. There was no further discussion. The report was received and filed.

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT

Mr. Thomas Adams, Chair SUD Oversight Policy Board gave a verbal report. It was reported the SUD Oversight Policy Board met on November 14, 2022. There was one action item for COVID monies in the amount of \$3,953,000 that was unanimously approved. The SUD Department provided monthly updates on Treatment and Prevention. There was also reports provided from the SUD Director; the State Opioid Response Coordinator and the Special Grants Manager. The meeting for the month of December will be cancelled and the next meeting will be held in January. There was no further discussion. The report was received and filed.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

The Policy/Bylaw Committee did not meet during the month of November. There was no report.

PRESIDENT AND CEO MONTHLY REPORT

Mr. Doeh reported. He also provided a written report for the record. An overview of the results of the November 8th election was provided; it was reported that Democrats have control of virtually all aspects of state government; including the Governor, Attorney General and Secretary of State's offices. Democrats were able to gain control of both chambers in the Michigan Legislature after winning a number of very close battleground seats in the House and Senate. This is of significance to us because of the threat of behavioral health redesign that has been one of the hallmarks of Republican led legislature. An overview was provided on the leadership of the House and Senate and the Shirkey and Whiteford bills which do not seem to be moving at this time. DWIHN expanded the financial stability payments to other lines of services that were not previously considered. DWIHN submitted financial stability letters to thirty-one (31) providers across the SUD, Autism, Skill Building, Children's and Adult service providers; responses were received from 29 providers; eleven of the 29 either declined assistance or were not eligible due to no projected operating losses for the fiscal year; the total amount of financial assistance is approximately \$18 million. Retention payments will be disseminated once we receive information regarding the numbers from our Finance Department. We anticipate more employees this year than last year because so much has changed for our provider network in serving more people. It was reported that on the clinical side behavioral health homes and opioid health home the numbers are continuing to grow, which means we are serving more people. The Public Health Emergency is coming to an end.

This will have a huge effect on folks who we provide services for as a whole. There are going to be about seven hundred thousand people who are going to be affected by this; not all of the people impacted will be our folks however, there is going to be a percentage that will be affected. When the Public Health Emergency, was announced it loosened or relaxed some of the tight constraints so that folks can readily receive services. Now, with the Public Health Emergency being lifted certain folks are not going to qualify for continued services; some decisions will have to be made, whether we are going to use some general fund dollars, or push for some grant dollars in order to make sure that folks who desperately need those services continue to receive them.

An overview was provided on our partnerships with the health plans. The three health plans that we have been working with are going well with being able to see in real time services for folks that we both serve on the physical health and the behavioral health side. We have more than ten thousand folks in common with one partner and a little more than three thousand five hundred people in common with a second partner.

DWIHN is developing an application of its own so that folks will be able to access any and all of our services; this will be true for folks who are our members as they will be able to access their health records. This is done on the physical health side as well. This will be a tremendous feature for the people we serve.

A brief update was provided on the buildings; it was reported that both buildings are going very well and he is pushing his team to have the building completed by early spring; however, it will be closer to the summer when the buildings should be complete. Construction is going very well on the Administration building located on Woodward. The completion of the construction will show the progress that the organization has made through the support of the board; the people we serve; and the provider network; these are significant steps that an organization takes that when we look back two or three years from now we can say that in 2022 we actually did something with the money that we had and he is excited about the direction of the organization.

Discussion ensued regarding the number of legislators that are in support of DWIHN; the dollar amount that DWIHN will receive for the buildings; the total cost to our budget for the Seven Mile building and plans to have meetings with the new legislators. It was noted that PAA has been working on setting up meetings in the coming months; the dollar amount that DWIHN has received is over \$70 million; and there is no cost to our budget for the Seven Mile building. There are fifty-two new House Members who are coming in and there are fourteen new Senators so there are certainly some folks we need to connect with and share with them information on Detroit Wayne Integrated Health Network.

There was no further discussion. The report of the CEO was received and filed.

DETROIT WAYNE INTEGRATED HEALTH NETWORK – Communications Report

Ms. Tiffany Devon, Director of Communications and Ms. Janell Hearn, Community Outreach and Communications Liaison reported. A PowerPoint presentation was provided for the record. An overview of the Communications department was provided; it was noted the department is responsible for ensuring all stakeholders are informed and educated on how DWIHN and its Provider Network serve and support people. The department is also responsible for internal and external communications, advocacy efforts, community engagement and outreach; creation of marketing materials, media outreach; social media; sponsorships; website content and video assets. The department provided information on the Outdoor Media campaigns including the Media Partners for Communications and Substance Use Disorder which include WDIV-TV4; Scripts Media; Bounce; Fox 2 News; Latino Press; Arab American News; Michigan Chronicle; Metro Parent and Recovery Live Global to name a few. The new Media Partners for 22-23 include, but are not limited to Today Magazine; C & G Newspapers and Yemeni American Radio and

Magazine. It was reported DWIHN ads would be shown during the movie premiere of “Wakanda Forever” at theatres located in Livonia, Dearborn, Taylor, Southgate, and Westland and there have been conversations aired on the Anthony Adams and Mildred Gaddis Radio show. It was also reported that DWIHN staff attended 125 events during FY21-22 and the DWIHN Mobile Apps will launch this month. Community Outreach calendars are posted and updated on the DWIHN website and there were many events hosted by DWIHN. The Communications department has created video contact for the DWIHN You Tube Channel; Ask the Doc; Youth United Podcast; Let’s Talk about It, Mental Health minutes and DWIHN Now-CV Ambassador Talk Show. An overview of the Event Sponsorships was also provided which include ASE Executive of the Year; African-American Civil Rights League; Celebrate Recovery Walk; DPD Teen Wellness Summit; and Mariner’s Inn golf Outing to name a few. Discussion ensued regarding the information provided. The Board thanked the Communications department for the presentation.

WESTCOMM PRESENTATION

Mr. Gary Spondike, Vice President, WestComm reported. A written PowerPoint Presentation was provided for the record. An overview of the goals was provided which included gaining a younger audience; growing monthly engagement; destigmatizing mental health and driving the audience to events and resources. An overview was provided of the metrics including the definitions of impressions; engagements and the engagement rates. The current number of DWIHN followers on Facebook; Instagram; LinkedIn; Twitter; TikTok and Snapchat were provided. It was noted the number of followers on both Instagram and Twitter were low and needed to be developed. Mr. Spondike provided information on the WestComm objectives and strategies that would be used to increase DWIHN’s presence on Social media which included educating DWIHN team members on how to engage with our social media channels; increasing availability of social media content to community organizations; increasing our mentions of partner/community organizations; increasing community awareness of DWIHN services by 10% and creating a library of evergreen materials with four campaigns. It was reported the biggest anticipated changes would be in the rise of TikTok and short-form video content. An overview was also provided on the Youth SUD Campaign which include Streaming Audio; Instagram; Snap Chat and using a campaign that will direct users to an updated Landing page. An overview was provided on the Social Channels integration and the Youth Campaign Outreach. Discussion ensued on the action plan. The Board thanked Mr. Spondike for the presentation. An updated action plan will be provided to the Board with the recommendations discussed at the meeting.

PROVIDER PRESENTATION – Growth Works

Mr. Nick Griswold, CEO and Ms. Jessica Klotz, COO reported. A PowerPoint presentation was provided for the record. The history, Mission Statement, and Values of Growth Works was presented. An overview of their programming which includes Western Wayne Care Management Organization (adjudicated youth); Diversion; Supervised Visitation; Adult & Adolescent SUD Outpatient Treatment; Adult & Adolescent Relapse Prevention; and Western Wayne Rescue Recovery was provided. It was noted that DWIHN provides financial support for the Adult & Adolescent SUD Outpatient Treatment which includes outpatient; early intervention, Peer Coaching and Trauma-informed services, Cognitive Behavioral Therapy, Motivational Enhancement Therapy, and Dialectical Behavior Therapy as well as the Western Wayne Rescue Recovery program which provides 24/7/365 Peer Recovery Coaching and for FY22 there were nearly 1,200 referrals to the program. An overview was provided on the use of data in assessments and analytics to monitor the progress and growth of clients. Information was also provided on how clients were progressing in the different programs. It was reported that based on a population size of 121 individuals 84% of clients are making progress toward their goals; 97% had no new legal charges; 88% were abstinent; 83% were active with support groups and 93% were meeting work requirements. An overview was provided on client rescue recovery by substance for FY22 along with the rescue recovery September Discharge outcomes. Discussion ensued on their continued programming and the types of

substances being used by clients. The Board thanked Mr. Griswold and Ms. Klotz for the information and presentation.

REVIEW OF ACTION ITEMS

- a. Reconvene the Board Building Committee with new members.
- b. Send Board the updated 2023 Committee and Full Board meeting schedule.
- c. Schedule a meeting with the CEO, Board Chair and Board Vice Chair to discuss the CEO Annual Incentive Compensation Objectives for FY2022/2023. Incentives must be completed by December 2022 per CEO contract.

GOOD AND WELFARE/PUBLIC COMMENT

The Acting Chair and Vice Chair Ruth read the Good and Welfare/Public Comment statement. There were no comments for Good and Welfare.

ADJOURNMENT

There being no further business, the Acting Chair and Vice Chair Ruth called for a motion to adjourn. **It was moved by Mr. Parker and seconded by Mr. McNamara to adjourn. The motion carried unanimously and the meeting adjourned at 3:02 p.m.**

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

NOVEMBER 2, 2022

1:00 P.M.

**3071 W. GRAND BLVD.
DETROIT, MI 48202
(HYBRID/ZOOM)**

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| MEETING CALLED BY | I. Ms. Dora Brown, Chair, called the meeting to order at 1:00 p.m. |
| TYPE OF MEETING | Finance Committee Meeting |
| FACILITATOR | Ms. Dora Brown, Chair |
| NOTE TAKER | Nicole Smith, Finance Management Assistant |
| ATTENDEES | <p>Finance Committee Members Present: Ms. Dora Brown, Chair Mr. Kevin McNamara, Vice Chair Ms. Eva Garza Dewaelsche Mr. Bernard Parker</p> <p>Committee Members Excused: Ms. Kenya Ruth</p> <p>Board Members Present: None</p> <p>Board Members Excused: Mr. Angelo Glenn</p> <p>Staff: Mr. Eric Doeh, CEO; Ms. Stacie Durant, CFO; Mr. Manny Singla, Chief Network Officer; Jody Connally, Chief of Human Resources; Mr. Jamal Aljahmi, Chief Information Officer; Ms. Yolanda Turner, Deputy Legal Counsel; Ms. Brooke Blackwell, Chief of Staff; Ebony Reynolds, Clinical Officer</p> <p>Staff Attending Virtually:</p> <p>Guests: None</p> |

AGENDA TOPICS

Roll Call Ms. Lillian Blackshire, Board Liaison

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| II. Roll Call | Roll Call was taken by Ms. Lillian M. Blackshire, Board Liaison and a quorum was present. |
| III. Committee Member Remarks | Ms. Brown, Chair called for Committee member remarks. There were no committee remarks. |
| IV. Approval of Agenda | The Chair, Ms. Brown called for a motion on the agenda. A recommendation was made to move the Strategic Plan Pillar – Workforce on the agenda to item VII. It was moved by Mr. |

Parker and supported by Ms. E. Garza Dewaelsche to amend the agenda and move item VIII. Strategic Plan Pillar – Workforce to item VII and be taken after Approval of the Minutes. **Motion carried; agenda approved as amended.**

VII. Strategic Plan Pillar-Workforce Report

Presented by Ms. Ebony Reynolds, Clinical Officer on behalf of Ms. M. Moody, Chief Clinical Officer. A written report was provided for the record. The overall fiscal year 2022 goal completion is at 86%. There are 14 goals and two (2) high level goals under this Pillar. It was reported that training for the Network Staff on the impact and importance of social determinants and the impact on health outcomes is currently at 100%; the IPOS training to Clinical staff with DWIHN network is currently at 100% and the LOCUS training to the Adult Provider Network is currently at 37%. It was noted the report provides an update on each goal. There was no further discussion. The Chair, Ms. Brown noted the Strategic Plan Pillar – Workforce Report was received and filed.

V. Follow-up Items:

The Chair called for follow-up items. The following items were noted by the Board Liaison and reports were provided as follows:

A. CFO to research DWIHN’s options of investing in MMRMA. Ms. S. Durant, CFO reported that research is ongoing and updates will be provided.

B. DWIHN to investigate securing an Ambassador/Social Influencer to assist with Social Media messaging in the community. It was reported that research is ongoing. Communications will provide a more detailed report.

C. Research to be conducted to obtain a three (3) digit number for Mental Health Services and attach a slogan that identifies Mental Health services. It was reported that research is ongoing.

D. Communications to add Performance Indicators/measures to Social media contracts and evaluate annually to determine if contract should be renewed. Legal to review the termination clause and ensure DWIHN has right to terminate contract if performance indicators are not being met. Ms. Blackwell, Chief of Staff reported. It was noted the Social media contractor will present quarterly reports to the board and the Communications department will present monthly reports to the board on performance.

e. Update BA#23-25 Westcomm to reflect a one -year contract with three (3) one year options before Full Board meeting on October 19, 2022. This item was completed and BA#2-25 WestComm was presented to the Full Board in October.

VI. Approval of the Meeting Minutes

The Chair called for a motion on the Finance Committee minutes from the meeting of Wednesday, October 5, 2022. **Motion:** It was moved by Mr. McNamara and supported by Mr. Parker approval of the Finance Committee minutes from the meeting of Wednesday, October 5, 2022. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VIII. Presentation of the Monthly Finance Report

S. Durant, CFO presented the Monthly Finance report. A written report for the eleven months ended September 30, 2022 was provided for the record. Network Finance accomplishments and noteworthy items were as follows:

DWIHN will have audited September 30, 2022 financial statements available in accordance with the State of Michigan reporting deadline of March 31, 2023. As such, there are no monthly 9/30/22 financial statements available at this time.

The CFO reports that DWIHN's cash balance is \$356,876,018 as of September 30, 2022, including cash held in collateral for the two building loans (\$21 million) and the contractual required ISF account of \$60 million.

DWIHN submitted financial stability letters to thirty-one (31) providers across the SUD, Autism, Skill Building, Children's and Adult service provider network. To date, DWIHN received a response from twenty-seven (27) providers; eight (8) of the twenty-seven either declined assistance or were not eligible due to no projected operating losses for the fiscal year. The total amount of financial assistance is approximately \$18 million.

We are still awaiting responses as we wanted to give providers additional time to submit the request given the importance of the matter.

DWIHN submitted a financial stability letter to all residential providers requesting information to determine the amount of uncompensated payroll expenses related to direct care staff. The deadline is November 10, 2022.

Based on both DWIHN's and HAP's legal counsels' interpretation of the MHL contract, DWIHN is not required to cost settle the contract outside of the first year of the demonstration pilot. This will result in DWIHN retaining approximately \$9 million in one-time funds that is considered local funds. DWIHN cost settled the first year of the contract with HAP for approximately \$3.8 million.

Due to the aforementioned, DWIHN has one-time excess cash to settle the outstanding Milwaukee loan balance of approximately \$5 million and will not re-finance the loan incurring unnecessary interest.

Discussion ensued regarding the excess of \$4 million dollars in general funds monies. Mr. Parker requested staff to provide recommendations for program use of the monies. **(Action)**

Note – Consistent with prior years, DWIHN is actively working on closing the books and October financial statements will not be available for a December meeting.

The Chair, Ms. Brown asked committee members if they were opposed to canceling the December 7, 2022 meeting due to no further business or financial statements not being available. There was no opposition from committee members to cancelling the December Finance Committee meeting. Ms. Brown announced the December 7, 2022 Finance Committee meeting would be cancelled as long as there were no outstanding or past due actions that would be placed on the January 2023 Finance agenda. There was no further discussion.

The Chair, Ms. Brown received and filed the Finance Monthly Report ending September 30, 2022.

VIII. Unfinished Business – Staff Recommendations:

a. Board Action #23-05 (Revision) – DWIHN FY 2022 -2023 Operating Budget Ms. Durant, CFO reported. Staff requests board approval to amend the FY23 Operating Budget as follows: 1. Certify federal grant revenue of \$4,474,160 from SAMHSA for Mobile Crisis Deployment; this includes expenses for approximately \$70,000 to hire an accountant to administer the grant through indirect costs. 2. Certify federal grant revenue of \$153,487 per the revised FY23 SUD award from MDHHS (\$153,487). 3. Certify federal grant revenue of

\$107,904 from MDHHS to fund the "Baby Court" Coordinator for the Infant Toddler Court Project. Additionally, Medicaid Reserve funds in the amount of \$393,164 will be used to fund the following new positions: Management Assistant (Administration), Accounts Payable Specialist (Finance), and Quality Administrator (DWIHN Call Center). The Chair called for a motion. **Motion:** It was moved by Ms. Dewaelsche and supported by Mr. Parker approval of BA #23-05 (Revision) to Full Board. Discussion ensued. **Motion carried.**

IX. New Business – Staff Recommendations:

a. Board Action #23-45 – HEDIS/NCQA Professional Consultant Services Mr. J. Aljahmi, Chief Information Officer reported. This Board Action is requesting \$62,205 funding for contractual Professional IT services for the period from 1/1/23 – 9/30/23. DWIHN is requesting to keep the consultant to continue assisting on a part-time basis, with helping to generate HEDIS measures which is one of the prime requirements from a data standpoint when it comes to both state reporting and NCQA compliance. This firm has been instrumental in developing Risk Matrix and is continuing to help us extend the functionality and rollout to entire network. The Chair called for a motion. **Motion:** It was moved by Mr. McNamara and supported by Mr. Parker for BA#23-45 approval to Full Board. There was no further discussion. **Motion carried.**

b. Board Action #23-48 CMHSP Contract - Ms. Y. Turner, Deputy Legal Counsel reported. This board action is for approval of the Grant Agreement between the Michigan Department of Health and Human Services (MDHHS) and Detroit Wayne Integrated Health Network (DWIHN) for the Community Mental Health Services Program (CMHSP). The term of the contract is 10-1-2022 through 9-30-2023. The contract amount is not to exceed \$21,461,405. This contract is for the provision of a comprehensive array of mental health services and supports. This contract, although not reflected in the amount above, also includes the required Medicaid drawdown payment to MDHHS for \$2,030,000 and local portion for state facility costs payment to the state of Michigan estimated at \$7,200,000 in accordance with the Mental Health Code. The Chair called for a motion. **Motion:** It was moved by Mr. Parker and supported by Mr. McNamara approval of Board Action #23-48 to Full Board. There was no further discussion. **Motion carried.**

c. Board Action #23-49 PIHP Contract – Ms. Y. Turner, Deputy Legal Counsel reported. This board action is requesting the approval of the Detroit Wayne Integrated Health Network’s (DWIHN) Prepaid Inpatient Health Plan (PIHP) contract with the State of Michigan’s Department of Health and Human Services (MDHHS) for Fiscal Year ending September 30, 2023. The purpose of this contract is for MDHHS to obtain DWIHN’s services to manage the following: Medicaid (including Habilitation Waiver Supports, Hospital Rate Adjustment and DHS Incentive), Healthy Michigan Plan (including Hospital Rate Adjustment), Autism Medicaid, SED Waiver, and Children’s Waiver. The estimated value of this contract is \$864,055,615 including hazard pay and is contingent upon and subject to enactment of legislative appropriations and availability of funds. This board action encompasses the mandated payments for Hospital Rate Adjustment to the community hospitals, Medicaid drawdown and IPA tax payments to the State of Michigan. The Chair called for a motion. **Motion:** It was moved by Mr. McNamara and supported by Ms. Dewaelsche approval of Board action #23-49 to Full Board. There was no further discussion. **Motion carried.**

XI. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement. There were no members of the public addressing the committee.

Mr. McNamara gave acknowledgement and thanks to DWIHN for the Mental Health trainings provided to Van Buren Township for the newly hired School Resource Officer.

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| <p>Mr. Parker gave congratulatory recognition to Ms. Dora Brown, Committee Chair and Board Treasurer for a successful campaign and winning the position of Community Mental Health Association of Michigan (CMHAM) Treasurer.</p> <p>XII. Adjournment – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. Motion: It was moved by Mr. Parker and supported by Ms. Dewaelsche to adjourn the meeting. Motion carried. The meeting adjourned at 1:41 p.m.</p> | |
| <p>FOLLOW-UP ITEMS</p> | <ul style="list-style-type: none"> a. Provide a recommendation on use of the excess monies in General Fund (\$4 million dollars) can be used on programs. b. CFO to research DWIHN’s options of investing in MMRMA. c. DWIHN to investigate securing an Ambassador/Social Influencer to assist DWIHN with Social Media messaging in the community. d. Research to be conducted to obtain a three (3) digit number for Mental Health services and attach to a slogan that identifies Mental Health services. e. Communications to add Performance Indicators/measures to Social media contracts and evaluate annually to determine if contract should be renewed. Legal to review the termination clause and ensure DWIHN has right to terminate contract if performance indicators are not being met. |
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PROGRAM COMPLIANCE COMMITTEE

MINUTES

NOVEMBER 9, 2022

1:00 P.M.

IN-PERSON MEETING

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| MEETING CALLED BY | I. Dr. Cynthia Taueg, Program Compliance Chair at 1:00 p.m. |
| TYPE OF MEETING | Program Compliance Committee |
| FACILITATOR | Dr. Cynthia Taueg, Chair |
| NOTE TAKER | Sonya Davis |
| TIMEKEEPER | |
| ATTENDEES | <p>Committee Members: Dr. Lynne Carter; Commissioner Jonathan Kinloch; and Dr. Cynthia Taueg</p> <p>Committee Members Excused: Dorothy Burrell and William Phillips</p> <p>Staff: Jamal Aljahmi; Brooke Blackwell; Jacquelyn Davis; Judy Davis; Eric Doeh; Dr. Shama Faheem; Monifa Gray; Shirley Hirsch; Sheree Jackson; Cassandra Phipps; Vicky Politowski; Manny Singla; Leigh Wayna</p> <p>Staff (Virtual): Margaret Keyes (on behalf of Michele Vasconcellos); Sharon Matthews (on behalf of June White); April Siebert</p> |

AGENDA TOPICS

II. Moment of Silence

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

III. Roll Call

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

IV. Approval of the Agenda

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| DISCUSSION/ CONCLUSIONS | <p>The Chair called for a motion to approve the agenda. Motion: It was moved by Commissioner Kinloch and supported by Dr. Carter to approve the agenda. Dr. Taueg asked if there were any changes/modifications to the agenda. Commissioner Kinloch made a motion to move Agenda Item XIII, New Business (Staff Recommendations) after Agenda Item V, Follow-Up Items from Previous Meeting. Motion carried agenda approved as amended.</p> |
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V. Follow-Up Items from Previous Meetings

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| DISCUSSION/ CONCLUSIONS | <p>A. Crisis Services’ Quarterly Report – Email a copy of the work plan/timeline for the opening of the new crisis facility to the committee – A copy will be provided to Lillian Blackshire to send out to the committee. (Action)</p> <p>B. Innovation and Community Engagement Quarterly Report – Committee requested the number of DWIHN’s attendees at the Suicide Prevention Conference – On behalf of Andrea Smith, Innovation and Community Engagement Director, Jacquelyn Davis, Clinical Officer reported that we were a guest at this conference and the number of DWIHN attendees were not captured but in future conference attendance, we will request that number. DWIHN did host the Suicidology Conference and there were 108 attendees.</p> <p>C. Utilization Management’s Quarterly Report – Provide the correct number of appeals – Leigh Wayna, Utilization Management Director reported that there were 27 denials that did not meet the MCG Medical Necessity Criteria for continued inpatient hospitalization; 12 appeals requested two (2) were upheld, one (1) partially upheld and partially overturned and nine (9) completely overturned) in Quarter 3. For Quarter 4, there were 14 denials that did not meet the MCG Medical Necessity Criteria for continued inpatient hospitalization; 14 appeals requested (10 were upheld and four (4) were overturned).</p> |
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VI. New Business: Staff Recommendation(s)

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| DISCUSSION/ CONCLUSIONS | <p>The Chair called for a motion. Motion: It was moved by Commissioner Kinloch and supported by Dr. Carter to bundle Board Actions A-E under “New Business: Staff Recommendations” and move to Full Board for approval. Motion carried. Dr. Tauveg opened the floor for discussion.</p> <p>A. BA #23-19 – Treatment Foster Care Oregon (TFCO), Wayne State University (WSU) Grant – Staff requesting board approval to accept the allocation of \$387,273.00 for the Treatment Foster Care Oregon (TFCO) grant at The Guidance Center for FY 22/23. Dr. Tauveg opened the floor for further discussion. There was no further discussion.</p> <p>B. BA #23-31 – ARCs – Detroit, Northwest Wayne and Western Wayne – Staff requesting board approval for a one-year contract renewal for an amount not to exceed \$599,397.00 for fiscal year ending 2023. This contract will provide advocacy, supportive services, and educational information by addressing issues facing persons with intellectual/developmental disabilities (I/DD). Dr. Tauveg opened the floor for discussion. There was no discussion.</p> <p>C. BA #23-40 – Credentialing Verification Organization – Medversant Technologies, LLC – Staff requesting board approval for a one-year contract effective November 1, 2022 through October 31, 2023 for an amount not to exceed \$274,740.00 with Medversant Technologies, LLC, a National Committee for Quality Assurance accredited Credentialing Verification Organization. Medversant’s primary source verifies Medicaid and Medicare sanctions, licensure, work history, malpractice history, education and training for practitioners and providers. Dr. Tauveg opened the floor for discussion. There was no discussion.</p> <p>D. BA #23-44 – Michigan Collaborative Care Program (MC3) and Behavioral Health Consultant – Starfish Family Services – Staff requesting board approval for a one-year contract for an amount not to exceed \$78,399.99. The Michigan</p> |
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| | <p>Child Collaborative Care Program and Behavioral Health Consultant project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Dr. Taueg opened the floor for discussion. Discussion ensued.</p> <p>E. BA #23-46 – FY 22/23 MI Health Link Demonstration Project – Staff requesting board approval for a one-year contract with the five (5) Integrated Care Organizations (ICOs) to receive and disburse Medicare dollars to reimburse the Affiliated Providers for the fiscal year ending September 30, 2023 for an estimated amount of \$9,886,123.00 in conjunction with the MI Health Link Demonstration Project. Dr. Taueg opened the floor for discussion. Discussion ensued.</p> |
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VII. Approval of the Minutes

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| DISCUSSION/ CONCLUSIONS | <p>The Chair called for a motion to approve the October 12, 2022 meeting minutes. Motion: It was moved by Commissioner Kinloch and supported by Dr. Carter to approve the October 12, 2022 meeting minutes. Dr. Taueg asked if there were any changes/modifications to the October 12, 2022 meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.</p> |
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VIII. Reports

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| DISCUSSION/ CONCLUSIONS | <p>A. Chief Medical Officer – Dr. Shama Faheem, Chief Medical Officer submitted and gave an update on the Chief Medical Officer’s report. Dr. Faheem reported:</p> <ol style="list-style-type: none"> 1. Behavioral Health Education – DWIHN continues its’ outreach efforts for behavioral services through “Ask the Doc” Newsletter and an interview with TODAY Magazine on Holiday Stress. 2. Medical Directors’ Meeting – The Chief Medical Officer met with Medical Directors of CRSP. The Crisis Center’s update, AOT procedures, CRSP responsibilities, State Quality Indicators and HEDIS Measures were discussed. 3. Quality Department – Indicator 2a (Access of Services or Biopsychosocial within 14 days of Request) increased to 44% this quarter. DWIHN continues to meet the standards for PI#1(Children and Adult), 4b (SUD) and PI#10 (Children). There was a slight improvement for PI#10 (Recidivism or Re-admission within 30 days-Adults) this quarter. Staff will continue with the efforts to meet the standard and will continue to evaluate the effectiveness of the interventions. DWIHN’s BTAC staff provided three system-wide trainings on Technical Requirements of Behavior Treatment Plan Review Committee (BTPRC) Processes. A total of 1,215 staff throughout the Provider Network participated in these trainings. DWIHN received the draft SFY 22 Compliance Review Report with an overall compliance score of 83%, with an opportunity to provide feedback to HSAG on October 31, 2022. DWIHN is awaiting reconsideration of scores due to what was perceived as erroneous markings in some areas. 4. Improvement in Practice Leadership Team (IPLT) – The committee reviewed assisted outpatient and combined treatment procedures, and conflict-free case management policy in the month of August. 5. Integrated Health Care – The HEDIS scorecard was presented to the CRSP monthly meeting and individual meetings with nine (9) CRSP, FUH data was also shared during the month of October. Staff created an educational |
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presentation on HEDIS measures and definitions for CRSP' Medical Directors. All Medicaid Health Plans and ICOs were added to the HEDIS scorecard and DWIHN can now pull data on these individually by the CRSP Provider. Staff performs Data Sharing with each of the eight (8) Medicaid Health Plans (MHP) serving Wayne County. DWIHN and the MHPs were developed and/or updated and outreach completed to members and providers to address gaps in care.

6. **Workforce Shortages** – There is currently a critical shortage of health care workers in behavioral health and Michigan is in the top five (5) states with health care workforce shortages. The shortage is due to COVID-19 resulting in many staff resignations, shortage of Master's Level Licensed Social Workers, Psychiatrists and Nurses, staff moving into private clinical practice and staff believing that they do not have trainings/resources to help them feel supported. The shortages have caused high caseloads and staff burnout.
7. **DWVHN's Response** – DWIHN is addressing the administrative burden by establishing a modifier that allows clinicians with a bachelor's degree and proper credentials the option of completing the re-admission and annual IBPS; Removed the pre-authorization requirement for Assessments and Treatment Plans which allows staff to provide those services without any potential pre-authorization barrier; Added additional Service Utilization Guidelines so frequently used, medically necessary services could be automatically approved in the system based on members' level of care; Removed duplicative provider reporting in the Children's Initiatives department; Ongoing discussions with providers in a workgroup setting to do a crosswalk that streamlines areas of assessed need from the IBPS to populate as goals that should be addressed in the IPOS; continue to support use of Telemedicine at this time; and awaiting finalized State guidelines that are moving towards audio-visual use.
8. **Financial Incentives** – In addition to 5% rate increase for FY 22, DWIHN provided an additional 5% supplemental rate increase with expectation that the funding will be used to address the workforce shortage, increase in wages/fringe benefits required to retain and recruit quality staff, improvements to the consumers' quality of care and other costs due to the inflation experienced throughout the nation; DWIHN has been offering Stability payments to our providers for the last two years and currently working on this year's plans; and DWIHN has created Value Based Incentives that provide an opportunity for our Clinical service organizations and their workforce to be rewarded for high-quality services.
9. **Current Value Based Incentives** – DWIHN has set up incentives for the Habilitation Supports Waiver Enrollment; Timely Intake Assessments; SED Population Performance Indicator Improvement; Home Based Services Fidelity; and the ACT Program Fidelity.
10. **One-on-One Guidance and Support** – DWIHN's Contract, Access, Clinical, Quality and Integrated Health teams have been meeting with providers every 30-45 days to discuss quality of care and challenges in timely access-to-care standards; and DWIHN created an Outcome Improvement Committee to offer collective information and non-judgmental recommendations to help assist cases.
11. **Current Internship Opportunities within DWIHN and Provider Network** – DWIHN created an internship program (clinical services) that supports the process for several hundred students, many of whom were offered employment and chose to remain within the DWIHN System of Care. The University of Michigan gave DWIHN approximately \$500k to support

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| | <p>students and our collaborative partnership was highlighted at several professional conferences including one in Italy.</p> <ol style="list-style-type: none"> 12. Other Initiatives to Improve Future Workforce – DWIHN partnered with Wayne State University (WSU) on “Pathway” a professional program which is geared toward Recovery Support Specialists who are interested in furthering their career in behavioral health by way of continuing education, certifications, Bachelor/Master Level programs. DWIHN also partnered with WSU to apply for the Gilbert Family Foundation for a program that would pay a stipend for social workers to intern in CMH specific settings. 13. Pipeline Programs – DWIHN supports pipeline programs like Wayne BCAP that encourages high school students to join the medical fields. DWIHN has also been a part of a grant given to Wayne State Psychiatry residents for them to learn about the CMH system and to support it through rotations. 14. H.R. Initiatives – DWIHN staff has been offered a four-day (10 hour) work option to offer flexibility; staff with appropriate credentials have been given the option to do overtime for the Call Center and assist the Access Center with call backs and screening. DWIHN has also been able to help staff with insurance premiums with the help of DWIHN’s Board of Directors. DWIHN is also planning a virtual/hybrid job fair for our Provider Network. 15. Burnout and Wellbeing Initiatives – DWIHN offers various resources to staff and our providers to help prevent burnout and work injuries. <p>B. Corporate Compliance Report – <i>There was no Corporate Compliance Report to review this month.</i></p> <p>The Chair noted that the Chief Medical Officer’s report has been received and placed on file.</p> |
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IX. Year-End Reports

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| | <ol style="list-style-type: none"> A. Access Call Center – Jacquelyn Davis, Clinical Officer submitted and gave highlights of the Access Call Center year-end report. Ms. Davis reported that the Access Call Center total call volumes for this quarter increased by 23%. The increase in the number of abandoned calls is being addressed by continuing to work with the phone vendor to improve the system, recruiting and training new staff and rearranging schedules to address high call volumes. There have been five new hires in the Call Center this quarter. The Team has received presentations and updates from various departments and providers. The process with the Wayne County Jail to ensure access to individuals transitioning back into the community has been finalized. “Silent Monitoring” for 339 calls has been completed for this quarter. The score has improved to 93.12% and the goal is 95%. There has been a lot of concerns with the hold queue this quarter, I.T. and the phone vendor are making corrections to decrease hold times and added messaging to give more options for holding or receiving a call back. Additional staff will be hired for FY 22/23. Dr. Taueg opened the floor for discussion. There was no discussion. B. Children’s Initiatives – Cassandra Phipps, Director of Children’s Initiatives submitted and gave highlights of the Children’s Initiatives’ year-end report. Mrs. Phipps reported: <ol style="list-style-type: none"> 1. Mental Health Care: Putting Children First Accomplishments – New children billboards have been placed in Wayne County; Updated the Children’s Initiatives’ website with educational information, resources and new flyers; Increased Accessing CMH presentations within the community; DWIHN hosted School Violence Trainings; 11 Children Providers participated in the SED Value Based Incentive to receive additional funds for |
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meeting DHHS Performance Indicators and HB service hours; Sexual Orientation Gender Identity Expression (SOGIE) languages was incorporated into the Integrated Biopsychosocial Assessment Electronic Health Record; DWIHN participated in panel discussions for mental health awareness; Reduced administrative burden for Children Providers by streamlining CAFAS/PECFAS reporting; and Updated Children Services' policy to extend services up to age 20 per MDHHS guidance.

2. **School Success Initiative** – Services to 30,315 students including all three tier levels were performed during FY 20/22; Implemented quarterly Student Spotlight Awards; Continued ongoing coordination of care with three school-based health centers; Continued outreach to share school-based and CMH services; and renewed partnership with Community Education Commission to support the Get on and Learn (GOAL) Line afterschool program for FY 22/23 school year.
3. **Youth United** – Hosted the Annual Children's Mental Health Awareness with the focus on suicide prevention; Courageous Conversations focusing on gun violence, adverse childhood experiences and transforming bias; Focus Groups with discussions on substance use, bullying, depression, gun violence, sexual orientation and voting; Annual Statewide Youth Summit, Planting Seeds of Hope.
4. **Children Services** – DWIHN served 45,914 duplicative children, youth and families in Wayne County ages 0 to 20 years old during FY 21/22. Telehealth services were increased to meet the needs of youth who were unable to do face-to-face sessions as a result of the COVID-10 pandemic. DWIHN continues to provide therapeutic, ancillary, SED Waiver and Children services to youth without Medicaid insurance and/or in need of more intensive services. Providers started participating in a new cohort, Components for Effecting Clinical Experience and Reducing Trauma (CE-CERT); submitted intention letter to participate in Consultation Expansion Grant, January 2023; DWIHN was awarded a grant to hire a coordinator for the Baby Court Program to begin in November 2022.

Dr. Taueg opened the floor for discussion. Discussion ensued.

- C. **Customer Service** – Margaret Keyes, Customer Service Experience Coordinator (on behalf of Michele Vasconcellos, Director of Customer Service) submitted and gave highlights of the Customer Service year-end report. Ms. Keyes reported that the department continues to focus on improving customer experience with services; ensuring appropriate engagement in choice of service and care; ensuring customers enrollee rights; monitoring the satisfaction of customers; enhancing customer information awareness; and meeting regulatory compliance expectations. The Welcome and Call Center Operations received a combined total of 35,170 calls which is a significant from the previous year. The Family Subsidy division handled 6,783 calls and processed over 958 applications remotely without any interruption of services. Staff processed 788 grievance related communication (emails and calls) and 595 appeals related correspondence (emails and calls) this fiscal year. Numerous member educational venues and provider trainings were conducted to address grievance and appeals updates and technical assistance. State Fair Hearings conducted this fiscal year showed a modest increase by three (3). There was a decrease in monitoring of Mental Health based Adequate and Advance Adverse Benefit Determination Notices (15,845 this fiscal year compared to 17,039 the previous year). There was an increase in SUD and I/DD related notices sent out this fiscal year. Customer Service's Quality and Performance Monitoring division continue to conduct CRSPs audits to ensure compliance standards were addressed and

maintained in the areas of Customer Service, Grievances, Appeals and Enrollee Rights. The percentage of CRSP obtaining 100% compliance of their audit was 27%. The Member Engagement division continue to find safe new ways to connect with members and remediate the risk of misinformation, social isolation and non-engagement. The Member Engagement division hosted the Annual Reaching for the Stars Award Ceremony; registered new voters during various voting and advocacy events; coordinated the distribution of over 200 hygiene kits to engage underserved populations; and worked on several initiatives to connect members with digital devices and internet service. The Persons Point of View member newsletter is published quarterly and monthly video announcements on trending topics were featured on YouTube and reached 341 (86%) individuals. Dr. Taueg opened the floor for discussion. There was no discussion. Dr. Taueg requested an update on the data breach from the Member Engagement division. **(Action)**

D. **Integrated Health Care** – Vicky Politowski, Director of Integrated Health Care submitted and gave highlights of the Integrated Health Care year-end report. Mrs. Politowski reported:

1. **Accomplishments in FY 22** - DWIHN processed 3,930 MI Health Link referrals for services from the ICOs during this fiscal and behavioral health care was coordinated for 1,013 members. Staff performed monthly Care Coordination Data Sharing meetings with the eight (8) Medicaid Health Plans (MHP) serving Wayne County. Joint Care Plans were developed and outreach was completed to members and providers to address gaps in care for almost 200 members. Staff participated in integration pilot projects with two Medicaid Health Plans during this fiscal year. Monthly care coordination meetings were held to review a sample of shared members who experienced a psychiatric admission within the past month to exchange information and address any identified gaps in care. DWIHN collaborated with the State of Michigan for the Hepatitis C Initiative of testing and treatment. Staff have met with CRSP and SUD providers to educate them on the new guidelines of testing and treatment. Staff managed six Quality Improvement Plans (Follow-up visit with a Mental Health Practitioner after psychiatric hospitalization, Adherence to Antipsychotic Medication, Adherence to Anti-depressant Medication, Decreasing the Use of Multiple Antipsychotic Medications, Diabetes Screening for people with Schizophrenia or Bipolar Disorder who are receiving Atypical Antipsychotic Medication and Hepatitis C Risk Reduction) during FY 22. Outreach calls were made to 500 members to remind them of their follow-up after hospitalization appointment, revisions made to the after-hospitalization scheduling process to ensure that an appointment is made with a Mental Health Practitioner within 30 days of discharge as well as text reminders for those that have technological ability. Seventy-five Complex Case Management (CCM) cases were opened and the majority of the members met their plan of care goals and were connected to behavioral/physical health care providers during FY 22. Care Coordination services were provided to approximately 276 additional members who either did not meet eligibility criteria for CCM services or declined to participate. This department applied for and was awarded block grant funding for FY 21/22 in the area of Integrated Care. The proposal was to place Peer Health Coaches in integrated care settings to educate and advocate for members to attend to their physical and behavioral health care. Education on health and follow-up after hospitalization was provided to over 217 members at

Central City Health. The HEDIS Score Card is complete and all CRSP providers have been trained.

2. **Goals and Objectives for FY 23** – Complete the Mobile App for DWIHN members; set goals in HEDIS Score Card that are in line with state benchmarks; utilize Care Coordination platform to integrate services with Medicaid Health Plans, Priority Health Care and Blue Cross Complete; improve DWIHN’s performance on the Follow-up After Hospitalization and Follow-up After Emergency Room Visit for SUD Performance Metric; improve all behavioral health HEDIS scores by 15%; and increase the number of members serviced in Complex Case Management by 20%.

Dr. Tauег opened the floor for discussion. Discussion ensued.

- E. **Managed Care Operations** – Sharon Matthews, Sr. Provider Network Contract Manager (on behalf of June White) submitted and gave highlights of the Managed Care Operations’ year-end report. Ms. Matthews reported that 400 contracts have been processed for signature to DWIHN’s provider network for FY 23; completed the provider manual to be more user friendly; performed provider orientation meetings for new and existing providers; and created a sanction module in our MH-WIN system. Staff have credentialed over 2k practitioners in our network system and the others are going through re-credentialing with Medversant. The Provider Survey was distributed to our outpatient providers during the month of September 2022 and our residential providers will receive a separate survey later in FY 23. The Practitioner Survey also went out in late September 2022, waiting on results as they have not been completed yet. Staff received and reviewed over 1,500 quarterly reports from providers to ensure contractual compliance. For FY 23, MCO will be streamlining and implementing a Network Adequacy analysis of the Network; improving DWIHN’s online Provider/Practitioner directory on the website; improving and organizing the data/docs on our website to make it more user friendly; develop a tracking system for maintaining credentialing dates for providers/practitioners; streamline letters/reports from providers/staff for better monitoring; and completing the Risk Matrix module. Dr. Tauег opened the floor for discussion. Discussion ensued.

- F. **Residential Services** – Shirley Hirsch, Director of Residential Services submitted and gave highlights of the Residential Services’ year-end report. Ms. Hirsch reported:

1. **Departmental Highlights** – Hired one additional Residential Care Coordinator, two Residential Care Specialists and three additional openings for Residential Care Specialists; Staff worked with I/DD CRSPs and Residential Providers to complete residential assessments and ensure members’ needs were being met; Working with CRSP and hospital personnel, staff also worked hard to ensure members admitted to inpatient settings and Eds were identified and quickly moved out of these facilities in a timely basis; staff worked with MDHHS to move members out of nursing homes and into appropriate community settings; staff has been able to review the IPOS and ensure that services were being received for members; and Residential management participated in the implementation of the HCBS project.
2. **Department Goals** – Identify services for youth aging out of the foster care system; work with I.T. to develop a data-driven reporting mechanism for all primary residential functions; evaluate existing residential facilities to review whether their services meet the needs of the population served and identify RFP needs; review residential assessments for the I/DD population and develop a plan to include these members as part of the Residential

Unit's strategic plan; identify how many I/DD members are within the system with a projection of how many more to expect based on data of population growth over a defined period of time; and identify how many staff would be needed to meet the responsibility of completing assessments every six months for some members, every year for others. Dr. Taueg opened the floor for discussion. Discussion ensued. Dr. Taueg requested an update on what is being done for the homeless population during the winter months. **(Action)**

- G. **Substance Use Disorder** – Judy Davis, Director of Substance Use Disorder submitted and gave highlights of the Substance Use Disorder's year-end report. Mrs. Davis reported:
1. **SUD Recipient Rights** – The SUD department is responsible for conducting recipient rights investigations made by individuals receiving substance use disorder services when assigned by the Office of Recipient Rights. Greg Lindsey is the SUD Recipient Rights Consultant and he ensures each agency has a Recipient Rights Advisor that oversees any rights complaints about the agency, investigates based on the complaint, compliance with contract requirements and supporting documentation. All complaints are reviewed and addressed. To date, 43 cases have been closed and resolved; 39 cases were unsubstantiated, four (4) were substantiated and one (1) case is pending.
 2. **SUD and Gambling Disorder** – The DWIHN Gambling Disorder Prevention Project (GDPP) is working to prevent gambling disorders throughout the region through partnerships with local providers and regional efforts. This project is funded by MDHHS. Stacked Deck, an effective evidence-based gambling prevention that has shown significant and sustained changes among young people in their attitude toward gambling is a curriculum used by DWIHN. The participating providers meet bi-monthly virtually to address MDHHS and DWIHN's requirements and provide updates. For FY 22, 85 members received problem gambling, intervention, treatment and recovery support services; over 200 screenings were conducted on problem gambling, resulting in 31 referrals for assistance; and 21 staff members completed the required 30-hour gambling disorder training, resulting in over 600 hours of gambling training. DWIHN will continue to screen members at treatment access points and continue to provide relevant staff training on the signs, symptoms and treatment available for gambling disorder.
 3. **State Opioid Response (SOR)** – DWIHN was awarded funding in 2019 to reduce overdose deaths related to opioids in Michigan, which are of epidemic proportion. The grant is a comprehensive program constructed to combat the surge of opioid-related overdoses tailored to encompass prevention, treatment and recovery services. Mobile care units are retrofitted vans/recreational vehicles (RV) that will bring counseling, therapeutic and physical health services to Opioid Use Disorder (OUD) individuals. Also, harm reduction activities, including overdose education, food pantry, COVID testing, fentanyl test strips, sleeping coats and naloxone distribution are provided within the mobile care units. Additional mobile care units have been deployed and social distancing protocols are in place to serve all consumers while keeping patients safe.
 4. **Naloxone Initiative** – DWIHN began providing Naloxone training and kits on March 22, 2016 to all Wayne County residents at no cost. The Naloxone allows those at risk of experiencing an overdose the chance to recover and spare families the heartache of losing a loved one. DWIHN works in

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| | <p>collaboration with Wayne State University to combat this crisis. Wayne State purchased vending machines and DWIHN arranges for the machines to be filled with Narcan kits with a provider who monitors supply levels and orders additional kits as necessary at no cost to the provider. DWIHN also offers free Naloxone training to various barbershops throughout Wayne County. DWIHN continues to support access to Naloxone by training healthcare workers, providers, drug court staff, inmates/jail staff, the community and other organizations that intersect closely with people who use opioids to reverse an opioid overdose. This program has saved 886 lives since its' inception.</p> <p>Dr. Tauveg opened the floor for discussion. Discussion ensued. The Chair noted that the Access Call Center's, Children's Initiatives', Customer Service's, Integrated Health Care's, Managed Care Operations', Residential Services' and Substance Use Disorder's year-end reports have been received and placed on file.</p> |
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X. Strategic Plan Pillar - Access

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| <p>DISCUSSION/ CONCLUSIONS</p> | <p>A. Access – Jacquelyn Davis, Clinical Officer submitted and gave an update on the Strategic Plan Access Pillar. Ms. Davis reported that the Access Pillar is at 94% completion. There are four high level goals under this pillar and they range from 87% to 100% completion. All four areas have increased since the last reporting.</p> <ol style="list-style-type: none"> 1. Create infrastructure to support a holistic care delivery system (full array) by December 31, 2022 – 87% completion 2. Create integrated Continuum of Care for Youth by September 30, 2022 – 95% completion 3. Establish an effective crisis response system by September 30, 2022 – 93% completion 4. Implement Justice Involved Continuum of Care by September 30, 2022 – 100% completion <p>Ms. Davis introduced the new Chief of Crisis Services, Grace Wolf to the committee. Dr. Tauveg opened the floor for discussion. There was no discussion. The Chair noted that the Strategic Plan Quality Pillar has been received and placed on file.</p> |
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XI. Quality Review(s) -

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| <p>DISCUSSION/ CONCLUSIONS</p> | <p>A. QAPIP Work Plan FY 22 – April Siebert, Director of Quality Improvement submitted and gave an update on the QAPIP Work Plan FY 22. Ms. Siebert reported that DWIHN has successfully completed the MDHHS Review and we are no longer on a Corrective Action Plan. We are also in full compliance with the HAB Waiver and SUD services. Dr. Tauveg opened the floor for discussion. There was no discussion.</p> |
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XII. Chief Clinical Officer's (CCO) Report

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| <p>DISCUSSION/ CONCLUSIONS</p> | <p><i>The Chief Clinical Officer's report was included in the Program Compliance Committee Agenda packet for this month.</i></p> |
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XIII. Unfinished Business

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| DISCUSSION/ CONCLUSIONS | <i>There was no Unfinished Business to review this month.</i> |
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XIV. Good and Welfare/Public Comment

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| DISCUSSION/ CONCLUSIONS | <i>There was no Good and Welfare/Public Comment to review this month.</i> |
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| ACTION ITEMS | Responsible Person | Due Date |
|--|------------------------------|-------------------------|
| 1. Follow-Up Items from Previous Meeting - Crisis Services' Quarterly Report – Email a copy of the work plan/timeline for the opening of the new crisis facility to the committee – A copy will be provided to Lillian Blackshire to send out to the committee. | Eric Doeh/Lillian Blackshire | COMPLETED |
| 2. Customer Service's Quarterly Report – Provide an update on the data breach | Michele Vasconcellos | January 11, 2023 |
| 3. Residential Services' Quarterly Report – Provide an update on what is being done for the homeless population during the winter months. | Shirley Hirsch | January 11, 2023 |

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Commissioner Kinloch and supported by Dr. Carter to adjourn the meeting. **Motion carried.**

ADJOURNED: 2:50 p.m.

NEXT MEETING: Wednesday, January 11, 2023 at 1:00 p.m.



President and CEO Report to the Board

Eric Doeh

January 2023

CEO INTEGRATED HEALTH REPORT

The Detroit Wayne Integrated Health Network (DWIHN) continues to make progress with integrating with Medicaid Health Plans. Below is a list of updates of the collaborations with Medicaid Health Plan Partners One, Two, and Three.

Health Plan Partner One

Health Plan 1 agreed to use the shared platform and was trained on December 12, 2022. The platform will be used in care coordination meetings to stratify shared members based on HEDIS measures due and follow up after hospitalization. Six members were discussed in December for care coordination that had needs after hospitalization. Eight members were discussed for data sharing.

DWIHN and Health Plan 1 are working on individuals who present at the Emergency Department for substance use-related issues (FUH). DWIHN pulls data from CC360 and filters the information. DWIHN follows up with open cases and gives other names to Health Plan 1. There was 1 FUA shared member who had an ED visit in December.

Health Plan Partner Two

DWIHN IHC staff and Health Plan 2 continue with monthly care coordination meetings to review a sample of shared members who experienced psychiatric inpatient admission within the past month. Eight members were discussed and the team is waiting on verification as to how many attended the FUH appointment.

DWIHN and Health Plan 2 are working on individuals who present at the Emergency Department for substance use-related issues. DWIHN pulls data from CC360 and filters the information. DWIHN follows up with open cases and gives other names to Health Plan 2. There were 5 FUA shared members who had an ED visit in December.

DWIHN is sending Health Plan 2's data to Vital Data (VDT). DWIHN and VDT are expanding the shared platform to include gaps in care reports. The platform is developed and training happened in December. The shared platform will be used to find more members who need care coordination.

Health Plan Partner Three

DWIHN staff are working with Health Plan 3 on a new project of monitoring individuals who utilized the emergency room department or inpatient psychiatric unit and how to perform data sharing. Health Plan 3 will be able to obtain the CRSP's name for a member in the ED (for any reason) and start coordination of care with that CRSP. There are four CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral, Hegira and Guidance Center. This started on June 16, 2022. Since the program began in June, there are 1000 shared consents for treatment coordination between the four CRSP's and Health Plan 3.

DWIHN's IT Department and PCE are still working together to create a SharePoint site where all data reports. will be located.

Shared Platform and HEDIS Scorecard

DWIHN and VDT continue to conduct weekly collaboration meetings to review project timelines, tools, and trainings.

DWIHN and VDT continue to work on updating the scorecard with new data feed, adding all members into Carespace. This will allow all Medicaid health plans and CRSP to see shared members and careflow rules created. DWIHN can now filter members by CRSP and Health plan. Member demographics, encounters, conditions diagnosed and physicians can be seen for behavioral health and medical. This has been presented to CRSP's in the 45-day meeting. CRSP and Health Plans are very pleased with the data they can now see.

DWIHN and VDT met on the mobile app and gave feedback for changes. Some problems were discovered and this will push back training. Training for phase one is planned for January. First phase will allow members to access different departments within DWIHN, for example; Office of Recipient Rights, Complex Case Management, Customer Service, Marketing and DWIHN website. The second phase will allow members to see claims data, authorizations and limited clinical documents.

The HEDIS Scorecard was rolled out to all CRSP providers. In addition, DWIHN IHC staff has met with CRSP' individually to help them better understand the platform and the capabilities. IHC has been added to the 45-day meeting with CRSP's and the FUH score is added to the measures tracked. IHC has attended 11 of these meetings in December and then had two separate meetings with providers to train more in depth on the Scorecard.

Below are scores for the FUH measure as shown in the Scorecard as of August 31, 2022. This is all CRSP scores combined.

| Measure | Measure Name | Eligible | Total Com | Non Comp | HP Goal | Year To Date |
|---------|--|----------|-----------|----------|---------|--------------|
| FUH301 | Follow-Up After Hospitalization for Mental Illness Age 6 - 17 (30 days) | 424 | 284 | 140 | 70 | 66.98 |
| FUH302 | Follow-Up After Hospitalization for Mental Illness Age 18 - 64 (30 days) | 4873 | 2363 | 2510 | 58 | 48.49 |
| FUH303 | Follow-Up After Hospitalization for Mental Illness (30 days) Age 65+ | 157 | 41 | 116 | 58 | 26.11 |
| FUH71 | Follow-Up After Hospitalization for Mental Illness Age 6 - 17 (7 days) | 424 | 190 | 234 | 70 | 44.81 |
| FUH72 | Follow-Up After Hospitalization for Mental Illness Age 18 - 64 (7 days) | 4873 | 1483 | 3390 | 58 | 30.43 |
| FUH73 | Follow-Up After Hospitalization for Mental Illness (7 days) Age 65+ | 157 | 34 | 123 | 58 | 21.66 |

ADVOCACY/ LEGISLATIVE EFFORTS

Working with our lobbyists as we continue conversations with Lansing leadership surrounding our advancements towards building care centers around Wayne County to best serve our region.

We will be sitting down with 2023 lawmakers as they start this next term to tackle major issues pertinent to the behavioral healthcare services and the people we serve: workforce shortages, general fund, expanding access to care services that already exist and additional funding.

Having conversations with MDHHS leadership surrounding the Public Health Emergency that was recently announced will soon come to an end and its impact on the individuals we serve. DWIHN has proactively been providing information to our providers and community stakeholders titled *“What Does Ending the Public Health Emergency Mean for Michigan’s Medicaid Population”*. Helpful links can be found on the DWIHN website homepage www.dwihn.org

December 2022: The long fight for Senate Bill 597 and Senate Bill 598, sponsored by Sen. Shirkey (R) and Sen. John Bizon (R), was finally brought to the Senate floor and promptly rejected in a bipartisan vote. The bills were tied into a separate supplemental bill that would have given Michigan’s mental health system more than \$560 million.

ENGAGEMENT INITIATIVE

January 30 – 31: CIT for Executives

January 26: DWIHN Presentation before the City of Detroit Board of Police Commissioners

January 6 – Arab American News: Dr. Shama Faheem shares resources, treatments and other effective ways to prevent and combat mental health struggles.

<https://arabamericannews.com/2023/01/06/mental-health-specialists-share-ways-to-combat-illness-struggles/>

January 5 – Detroit News: DWIHN Board Member and Commissioner Jonathan Kinloch OpEd on today’s Medicare Advantage program as it helps connect vulnerable seniors and Michigan residents with disabilities to the vital services and support they need to live fuller, healthier and more active lives.

<https://www.detroitnews.com/story/opinion/2023/01/06/medicare-advantage-is-essential-for-seniors/69781875007/>

Andrea Smith, our Director of Innovation and Community Engagement was interviewed on how DWIHN provides crisis intervention training to public safety officers including the Detroit Police department.

https://www.wjr.com/?s=Lloyd+Jackson&fbclid=IwAR1J46eFe5iL0Sfl6yv-QB1QJtXaKAxVdz_Iv0Ndxu5g4CmQ9vZwMGeFBpM

CHIEF CLINICAL OFFICER

Behavioral Health Home (BHH):

- ❖ Current enrollment- 399 members (October - 300, 33% increase)
 - Detroit Wayne is one of 5 PIHPs in the State that participates in the Behavioral Health Home model
 - Behavioral Health Home is comprised of primary care and specialty behavioral health providers, thereby bridging two distinct delivery systems for care integration.
 - Utilizes a multi-disciplinary team-based care comprised of behavioral health professionals, primary care providers, nurse care managers, and peer support specialists/community health workers.
 - Michigan's BHH utilizes a monthly case rate per beneficiary served
 - Currently in the process of adding Psygenics as a new Behavioral Health Home provider. This will result in a total of seven (7) Health Home partners for DWIHN. DWIHN has also opened this model up to our CRSP Network in an effort to provide these integrated services to more members.

Opioid Health Home (OHH):

- ❖ Current enrollment- 344 members (October- 394) *Reduction noted due to data clean-up and closures.
 - Michigan's OHH is comprised of primary care and specialty behavioral health providers, thereby bridging the historically two distinct delivery systems for optimal care integration.
 - Michigan's OHH is predicated on multi-disciplinary team-based care comprised of behavioral health professionals, addiction specialists, primary care providers, nurse care managers, and peer recovery coaches/community health workers.

- Michigan's OHH utilizes a monthly case rate per beneficiary served
- Michigan's OHH affords a provider pay-for-performance mechanism whereby additional monies can be attained through improvements in key metrics.

Certified Community Behavioral Health Clinic- State Demonstration (CCBHC):

- ❖ Current enrollment- 3,383 members (October- 3,343)
 - A CCBHC site provides a coordinated, integrated, comprehensive services for all individuals diagnosed with a mental illness or substance use disorder. It focuses on increased access to care, 24/7/365 crisis response, and formal coordination with health care.
 - This State demonstration model launched on 10/1/2021 and The Guidance Center is the designated provider for Region 7.
 - Baseline outcome data has been established for year 1. During year 2, outcomes will be a major focus, including outcome incentives.

CRISIS SERVICES

Request for Service (RFS): For children decreased by 19% this month. There were 89 youth intensive crisis stabilization service (ICSS) cases for the month of December, a 23% decrease compared to November. There was a slight decrease in the number of requests for service (RFS) for adults in December compared to November, and the diversion rate increased slightly. The Crisis Stabilization Unit (CSU) at COPE served 225 cases in December.

Assisted Outpatient Treatment/Returning Citizens: DWIHN received 104 Assisted Outpatient Treatment (AOT) orders from Probate Court this month and respective CRSPs were notified to incorporate these orders in treatment planning. Deferral Conferences continue with CRSP engagement. One (1) Returning Citizen returned and was connected to DWIHN services upon release from MDOC. The Community Law Enforcement Liaison engaged with 50 individuals in December.

Community Hospital Liaison Activity: In December 2022, there were 135 contacts made with community hospitals related to movement of members out of the emergency departments. Out of the 135 encounters, 32 were diverted to a lower level of care, an overall diversion rate of 76%. Hospital liaisons received thirteen (13) “crisis alert” calls collectively in December and two (2) of those members were diverted to lower levels of care (15% diversion rate for crisis alert calls).

Mobile Outreach: The DWIHN Mobile Outreach Clinician was able to add new events to the calendar for December and continued the existing partnership with Wayne Metro and Black Family Development, adding events for December calendar with the following entities: The Humane Society for the City of Detroit, CAD Lakeshore, Uplite Family Service, and Health Day at Citadel of Praise.

The DWIHN Mobile Outreach Clinician added several new resource vendors including Detroit Health Department, Detroit Area Agency on Aging, Matrix Human Service, Brilliant Detroit, and The University of Michigan. Above numbers reflect a partial reporting period in the month of December, with ongoing follow up and referrals in process.

CHIEF MEDICAL OFFICER

Behavioral Health Education:

DWIHN has continued outreach efforts for behavioral health services:

- Interview with Today’s magazine on Children Services.
- Interview with Telegram newspaper on Holiday Stress (December 2022)
<https://www.telegramnews.net/story/2022/12/15/lifestyles/dont-let-holiday-stress-get-you-down/2100.html>

Crisis Care Center (Milwaukee Ave):

DWIHN continues to work on our Crisis Center projects. We recently completed our consultation with RI International and their report is getting finalized which can eventually be shared with Board and Stakeholders. State is currently drafting the Operational Guidelines for CSU and we have been part of their pilot with regular meetings to discuss areas such as Staffing, Building, Security, Pharmacy and Metrics.

Med Drop Program:

A new Med Drop referral process has been created to facilitate easier referral. For quarter four, there were 51 Current Active members. During the 4th quarter there was a 73% reduction in the number of Med Drop clients admitted to a psychiatric hospital and 25% reduction in jail admissions while participating in the Med Drop Program.

Outcomes Improvement Committee:

The Outcomes Improvement Committee strives to reduce recidivism and improve clinical Outcomes and is Chaired by CPI team and DWIHN Psychiatrist with participation from Network. Data elements currently being tracked and monitored include: referral date, initial assessment scores (CAFAS, LOCUS, PHQ-A, PHQ-9), quarterly assessment scores, crisis encounters (crisis stabilization and hospitalization), critical/sentinel events, and members with Assisted Outpatient Treatment (AOT) status. Tracking tool is updated quarterly (Oct, Jan, April, July).

Currently the OIC is monitoring and providing follow up regarding 30 high recidivistic cases. CRSP bring the members to OIC meetings for recommendation on high acuity cases. and we have received additional referrals from the Sentinel Event Review Committee (SERC), Quality and Office of Recipient Rights have also been brought to the OIC for treatment recommendations.

During Q4 there were 25 referrals made to the OIC. Bi-Monthly meetings take place with CRSP's to hear the issue that brought the members to OIC, (lack of engagement, recidivistic, high-risk). Recommendations are made to assist the CRSP with the member and updates on members are brought back to the OIC team.

ADULT INITIATIVES

Assertive Community Treatment (ACT): There were ten (10) ACT members referred to COPE: 70% went inpatient, 20% went Outpatient, 10% were admitted to Crisis Residential Unit. No pre-placement was sought during this reporting period. It should be noted 30% of ACT Pre-Admission Reviews were completed by COPE.

DWIHN reviewed ACT program admissions and discharges of Lincoln Behavioral Services, Hegira-Westland, Hegira- Downriver, All Well Being Service, Central City Integrated Health, Development Centers, Team Wellness Center, and The Guidance Center including the appropriateness of the level of care determinations and provided technical assistance to ensure program eligibility requirements are met. DWIHN facilitated the monthly ACT forum where topics discussed were DWIHN staff, updates on PAR completion rate within 2 hours' time frame, quarter 3 data on PHQ-9- letter, quarter 3 Hospital Recidivism list, face-to-face percentages per provider agency and provider discussion, feedback and questions/concerns were discussed.

Med Drop Program: During the month of December, DWIHN met with the Med Drop coordinator to discuss the updates to the pilot med drop referral process and any potential barriers. DWIHN has been working with providers to increase members enrolled in Med Drop due to the positive outcomes that has been demonstrated. There are currently 60 members enrolled; All Well Being Services = 1; CCS (Hegira-Downriver) = 13; CNS = 9; DCI = 14; Hegira- Westland = 2; Lincoln Behavioral Services = 16; The Guidance Center = 2; Team Wellness= 3. This is an increase of 22% from previous months.

Self-Management Performance Improvement:

DWIHN offers MyStrength as a self-management tool to the DWIHN Provider Network. The current goal for the Self-Management Performance Improvement Project is to enroll an additional one thousand and twenty (1,020) new MyStrength members annually. DWIHN educated the provider network on the benefits of utilizing this tool. The MyStrength flyer, with updated access codes and QR code, was uploaded to the DWIHN website on December 9th. In addition, the MyStrength flyer and access code was presented at the Outpatient/Residential Provider Meeting on December 16th and the Clinically Responsible Service Provider Meeting on December 19th.

Outcomes Improvement Committee (OIC):

The Outcomes Improvement Committee (OIC) strives to reduce recidivism and improve clinical outcomes. Data elements currently being tracked and monitored include: referral date, initial assessment scores (CAFAS, LOCUS, PHQ-A, PHQ-9), quarterly assessment scores, crisis encounters (crisis stabilization and hospitalization), critical/sentinel events, and members with Assisted Outpatient Treatment (AOT) status.

In the month of December, four (4) new members were reviewed and presented at the December 8th OIC Meeting. There are currently 31 members that are being monitored and reviewed through this Committee. DWIHN meets with the CRSP's of where those members are being served and reviewed bi-weekly to get updates and make recommendations and ensure follow up is being completed.

COMMUNICATIONS

Print:

DWIHN was mentioned as a resource and community asset in multiple stories during the month of December.

Health Network Treating Mentally Challenged Residents in Wayne County

Michigan Chronicle 11/30/22

<https://michiganchronicle.com/2022/11/30/health-network-treating-mentally-challenged-citizens-in-wayne-county/>

Shirkey's long sought-after mental health legislation defeated in a bipartisan vote

MLIVE 12/2/22

<https://www.mlive.com/politics/2022/12/shirkeys-long-sought-after-mental-health-legislation-defeated-in-bipartisan-vote.html>

Detroit Police announce new initiative to improve mental health crisis intervention

WDET.ORG 12/15/22

<https://wdet.org/2022/12/15/detroit-police-announce-new-initiative-to-improve-mental-health-crisis-intervention/>

How to survive the holidays and stay sober, or help loved ones do the same

Detroit Free Press 12/20/22

<https://www.freep.com/story/news/local/2022/12/20/helping-a-loved-one-avoid-relapse-and-survive-the-holidays-sober/69710278007/>

Radio:

WJR 12/13/22

The Detroit police department like others around the country receives hundreds of calls for people in mental health crisis and all too often we hear how they ended violently. New approaches in police training could result in better outcomes for those in a mental health crisis. Andrea Smith, our Director of Innovation and Community Engagement was interviewed on how DWIHN provides crisis intervention training to public safety officers including the Detroit Police department.

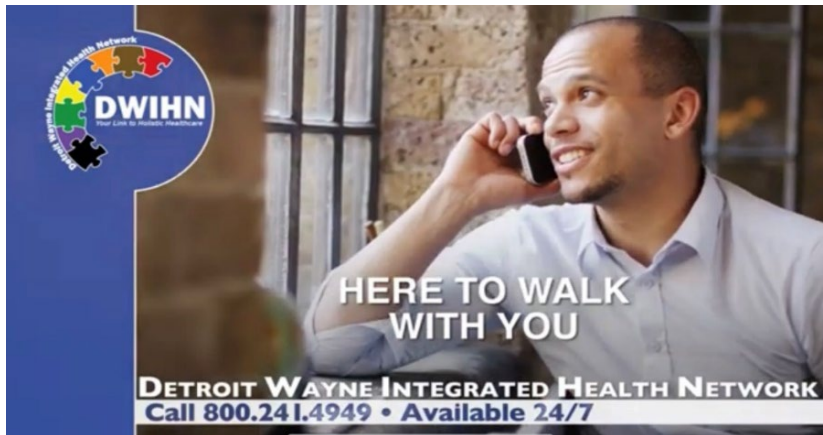
https://www.wjr.com/?s=Lloyd+Jackson&fbclid=IwAR1J46eFe5iL0Sfl6yv-QB1QJtXaKAXvdz_Iv0Ndxu5g4CmQ9vZwMGeFBpM

SUD Media Messaging Campaign:

WDIV-LOCAL 4

In December, DWIHN had a message which focused on youth turning to substances to cope and the help and resources available through DWIHN.

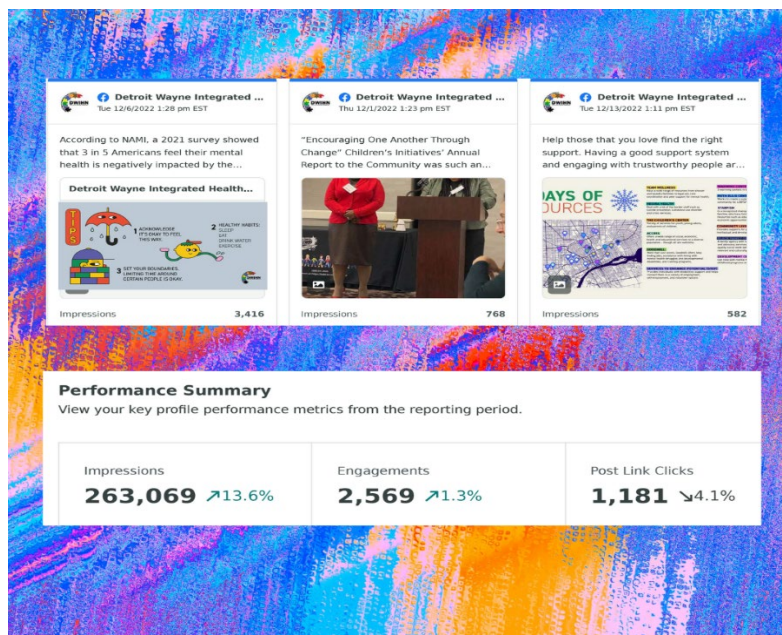
<https://youtu.be/SnH2ZeZ6EVg>



DWIHN continues its SUD messaging with various local media and on social media platforms including: Ask the Messengers, Comcast, Cumulus Radio, Fox 2 News, Global Media Television (formerly Middle Eastern TV), Mind Matters with Dr. Michele Leno, Scripps Media, WDIV-TV 4, Facebook, Instagram, Linked In, Twitter, Tik Tok, SnapChat, streaming platforms include Pandora and Spotify.

Social Media:

Top Performing Posts:



Top posts included DWIHN’s Mental Wellness Tips which garnered almost 3,500 impressions. Impressions are different than reach because **it doesn't count people who click or engage with your content, just those who**

are exposed to it. If your ad was displayed 500 times on social media, your impressions would be 500. On all social media accounts, impressions, engagements and post link clicks grew in December.

Ask the Doc - DWIHN's Chief Medical Officer Dr. Shama Faheem continues to educate the public and DWIHN stakeholders with her bi-monthly newsletter and digital content. Topics this season include influenza, seasonal affective disorder and RSV in children.

Community Outreach:

12/01 "Encouraging One Another Through Change" Children's Initiatives' Annual Report to the Community was held in Livonia.



(2022 Report to the Community)

12/03 - Santa Day in Detroit with Southwest Solutions and Family Alliance for Change

12/03 - North End Resource Fair sponsored by the City of Detroit.

12/08 - Winter Wonderland Bash at the Children's Center.



(2022 Winter Wonderland Bash)

12/18 - Youth United hosted A Courageous Conversations Workshop in Detroit.

12/21- DWIHN participated in Health Day at Citadel of Praise in Detroit.

FACILITIES



Administration Building
- Estimated Completion Date December 2023



Care Center
- Estimated Completion Date October 2023

DIVERSITY, EQUITY AND INCLUSION OFFICER

Detroit Partner Call: Continuing the Conversation Financial Stability Challenges at the Intersection of Race, Ethnicity, Poverty and Disability – Steering Committee Meeting

Earlier this year, a group of local partners, with the support of National Disability Institute (NDI) and JPMorgan Chase, held a virtual meeting convening on financial equity for people with disabilities who live at the intersection of disability, race/ethnicity and poverty. The goals for these roundtables were to: 1) highlight the importance of having this conversation on intersectionality and 2) to promote an ecosystem of collaboration between three key stakeholder groups, organizations serving individuals with a disability, organizations offering financial empowerment services and organizations serving communities of color.

At the end of the convening, a brief was developed that summarized the discussion and most importantly, noted the list of concrete actions and opportunities that participating organizations can jointly take to address some of the barriers to financial stability and financial resilience that contribute to the significant wealth gap faced by communities of color with a disability.

A steering Committee was formed to continue to build capacity, expand awareness, provide training and technical assistance, and explore raising funds to sustain the commitment to financial inclusion and continue laying the foundation for this work.

Diversity, Equity & Inclusion: The Building Blocks of Belonging – Part of the Diversity & Inclusion in the Workplace Series:

- The five crucial building blocks of a sustainable DEI strategy
- The value of training in creating a common language and shared vocabulary
- Strategies for cultivating inclusive leaders
- How to measure the effectiveness of your efforts

Black Health & Racial Equity Research Network Planning Meeting – CenR Community-Engaged Research:

- The planning committee decided to address three overarching topics at the symposium: implicit bias, structural racism, & health outcomes, food access, and the digital divide. In order to educate

the community on these overarching topics, the planning committee will invite academic speakers and community representatives to educate attendees on each of these topics from multiple perspectives.

INFORMATION TECHNOLOGY

Business Processes

- DWIHN Mobile Application
 - DWIHN has been developing a Community mobile application titled myDWIHN. Beta testing was completed in December and the app was approved by Apple & Google stores for launch in January. myDWIHN is now able to be downloaded by anyone.
 - DWIHN has been developing a Member mobile application tentatively titled myDWIHN-Health. This is a collaboration with Vital Data to configure and start TestFlight (the beta testing portion).

Applications and Data Management

- Henry Ford Joint Project
 - DWIHN team is working on expanding this collaborative to develop insights and member engagement for ADT's when members show up in the Emergency Department.
- RedCap
 - This project is complete. The RedCap system has been turned off and the providers are now using the new MHWIN module to report their SSI grant activities to DWIHN.
- Detroit Wayne Connect Backup
 - We are nearing the completion of a project to maintain a backup system for the data and system modules of the Detroit Wayne Connect training system. This backup is housed on DWIHN servers so that we are protected from any outage of the production system.
- Dashboards for Behavioral Health Homes and Opioid Health Homes
 - Currently in the process of creating new PowerBI dashboards for monitoring health home information.

Infrastructure / Security / HIPAA

- Building Construction
 - New Center One (NCO) alternate work location in place. Internet online and Call Center staff working at NCO.
 - Woodward – Ongoing continuous work in progress for A/V vendor vetting for boardroom
 - Network Assessment – Vendor selected for Wide Area Network strategy for multiple businesses being developed and procuring/securing network services. Working on statement of work.
 - Working to configure the building security and video camera systems to meet the needs of the new Crisis Center as well as support a Multi-Campus system going forward.
 - Working on the Badging system Camera, Printer, and photo configuration standards needed to support the building access system and other security systems that will dovetail on the photos etc.
- Onboarding/Offboarding Process
 - Working with HR on Onboarding and Offboarding of staff as well as integration to AD / ADP to ensure data security that accounts are modified or disabled timely.
- Security
 - Working with the vCISO on the IT security maturity assessment that will show any changes that DWIHN needs to make going forward to adhere to industry best practices, contractual, and legal requirements.
 - Working with various business departments to complete the CVS Health (Aetna) IT Security Audit.

HUMAN RESOURCES

The Department of Human Resources hired 14 new employees during the months of November and December 2022. There were also eight (8) staff promotions during this period.

In addition, the Human Resources department has completed the DWIHN compensation survey with Lockton Corporation.

CHILDREN'S INITIATIVES

School Success Initiative: DWIHN IT representative attended the December meeting to offer support for utilizing the MHWIN system, and representative from PCE finalized the requested school success initiative reports. Providers expressed challenges with schools providing demographic information of students receiving Tier 1 and Tier 2 services. A follow-up meeting has been scheduled to discuss this further. Two (2) students were nominated and selected to receive the Q4 Student Spotlight Awards in connection to Starfish.

Outreach, Access, and Prevention Activities:

- Added Accessing Community Mental Health Services video recording to the website as a resource. Finalized the Sexual Awareness Information (SAIT) Program Flyer. Next steps to complete the HEDIS Flyer for children taking ADHD medications and antipsychotic medications, Children Crisis Flyer, Intellectual Developmental Disabilities Flyer, and Integrated Health Care Flyer.
- DWIHN participated in multiple outreach and educational events including: Suicide Prevention Conference at Schoolcraft College, Child's Hope Summit, Wayne RESA Lunch and Learn on accessing community mental health services, and the K-12 Live Well Lead Well Summit.
- Youth United hosted a focus group with Detroit Public School Community District Exceptional Student Education Program that consisted of students with special needs and disabilities. Discussed social media interests what youth are interested in learning more about in the community.
- Children's Initiative Director, Cassandra Phipps, met with the Detroit Police Department 3rd Precinct to discuss plans for the "Here Me Out" Campaign. Goals include: 1) Training police, parents, and youth about sexual assault, 2). Awareness via panel discussions and social media, 3). Enforcement to issue warrants and assist police when questioning victims, 4). Response Team to share trauma resources. Next steps: Assist with developing a resource list of trauma-related services.
- Children's Initiative met with community partners to discuss youth in detainment and ways to provide therapeutic supports. Next steps: Follow up with the Dickerson location to address spacing and staffing limitations, and timeline for the new building.
- Children's Initiatives met with Wrap Around Providers to discuss SED Waiver capacity challenges and options to expand SED Waiver services to the additional Wrap around Providers. Providers expressed feedback regarding the reimbursement rate for SED Waiver services, additional coordination of care and administrative components with SED Waiver services,
- Children's Initiative met with DWIHN IT Department to start developing clinical dashboards to track Home Based, Wrap Around, and Outpatient services. Plan to have a draft version to review in January 2023.
- Children's Initiatives hosted the Annual Report to the Community on 12/1/22. The theme was Encouraging One Another Through Change. The President and CEO, Eric Doeh, conducted the opening remarks, Director Cassandra Phipps shared highlights and accomplishments, and Pastor Genetta Hatcher presented the keynote message. Various executive community partners were in attendance and the final program is available on the website (71 attendees).

AUTISM

Total open cases for the ASD Benefit for the month of December is 2,679 members, which is an increase of 102 members from November to December.

DWIHN has continued to see capacity issues within the ASD provider network. As a result, DWIHN provided a Service Delivery Expansion Survey to determine the capacity of ASD providers in the network. A total of five (5) ASD providers submitted a response to immediately accept members waiting for ASD services, and an additional twelve (12) new ASD providers are interested in joining the DWIHN provider network. In addition, meetings occurred with the interested providers.

DWIHN will be posting a Request for Qualifications (RFQ) for the purpose of creating a list of qualified vendors to provide Behavioral Health Therapy (BHT) of high-quality Applied Behavioral Analysis (ABA) services to DWIHN eligible individuals as well as re-evaluation of medical necessity per the Medicaid Provider Manual. Awards will only be issued from the list of qualified providers that result from the RFQ.

INTEGRATED HEALTHCARE

We are closely monitoring HEDIS measures and providing education to provider. During the month of December, the HEDIS scorecard was presented to the CRSP monthly meeting and in individual meetings with 10 CRSP, FUH data was also shared. IHC created an educational presentation on HEDIS measures and definitions for CRSP medical directors. This was shared at last meeting in October and will be followed up during the meeting in January.

Scores from HEDIS Scorecard as of August 2022 due to claims lag.

| Measure | Measure Name | Eligible | Total Compliant | Non Compliant | HP Goal | Year to Date |
|---------|---|----------|-----------------|---------------|---------|--------------|
| 2 | AMM Antidepressant Medication Management Acute phase | 4549 | 2110 | 2439 | 77.32 | 46.38 |
| 3 | AMM Antidepressant Medication Management Continuation Phase | 4549 | 1355 | 3194 | 63.41 | 29.79 |
| 4 | FUH Follow-Up After Hospitalization for Mental Illness Adults | 4228 | 1996 | 2232 | 58 | 47.21 |
| 5 | FUH Follow-Up After Hospitalization for Mental Illness Children | 372 | 241 | 131 | 70 | 64.78 |
| 5 | SAA Adherence to Antipsychotic Medications for Individuals With Schizophrenia | 4758 | 2778 | 1980 | 85.09 | 58.39 |
| 7 | SSD Diabetes Screening for People With Schizophrenia or Bipolar Disorder | 7400 | 4261 | 3139 | 86.36 | 57.58 |

DWIHN staff are working with Henry ford Health Plan on a new project of monitoring individuals who utilized the emergency room department or inpatient psychiatric unit and how to perform data sharing. There are 4 CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral, Hegira and Guidance Center. This started on June 16, 2022. DWIHN IT and PCE are developing a database so that the number of members can be tracked. This should be completed this month.

IHC department continue their care coordination efforts with health plans where joint case reviews are done and improvement in member's compliance is being observed. IHC continues to provide complex case management services and currently have 11 members. Besides these, IHC has been working on the State defined Pay for Performance metrics with other departments with goals to garner maximum incentives. IHC has continued to assist in the development of various apps such as the DWIHN member app and community app.

QUALITY

The State continues to monitor DWIHN on various performance indicators. DWIHN continued to meet the standards for PI#1 (Children and Adult). For indicator 2a (Access of services or Biopsychosocial within 14 days of request), the reporting percentage increased from Q3(37.8%) to (44.6%), demonstrating a 6.7 percentage increase from the previous quarter. We will continue improvement efforts with better outcomes

expected during 1st Quarter. The average score for the state is noted at 51.03% for Q3. DWIHN continues to meet Indicators 4b (SUD) and PI#10 (Children). We have shown a slight improvement in PI#10 (Recidivism or Readmission within 30 days) from Q3 17.79% (Adult) to Quarter 4 final results at (15.89%) for Adults, with an overall compliance score of 15.19%. The standard is 15% or less. This remains an opportunity for ongoing improvement. We will continue with the efforts to meet the standard and will continue to evaluate the effectiveness of the interventions.

DWIHN has received Full Compliance 100% with all the reportable areas for the HSAG PIP (Reducing the Racial Disparity of African Americans Seen for Follow-Up Care Within 7-Days of Discharge from a Psychiatric Inpatient Unit). The goal of the PIP is to achieve, through ongoing measurements and interventions, significant improvement sustained over time. The next scheduled reporting remeasurement period for DWIHN's PIP to HSAG will include data from 01/01/2023–12/31/2023.

HSAG Compliance Review: DWIHN has received the draft SFY 2022 Compliance Review Report with an overall compliance score of 83%. The Quality Team will continue to work internally with each Department to ensure implementation of the CAPs. HSAG will do the final review (Year 3) in the Summer of 2023 and a final score will be aggregated.

MDHHS Full Waiver Review of DWIHN's HSW, CPW, SEDW, and SUD services: DWIHN has received full compliance with the implementation of the plan of correction. The follow-up review involved evaluation of the current status of the Corrective Action Plans, submitted by DWIHN, in response to the Full Site Review that was conducted March 14, 2022 through April 22, 2022.

Medicaid Claims Verification Reviews: For Fiscal Year 2022, a total of 3,598 claims were randomly selected, the QI Team reviewed and validated 3,549 (98.63%). This is an increase of 2,339 (193%) claims reviewed compared to (1,210) for FY21.

HCBS Transition Tracking Process: DWIHN is working with the Michigan Department of Health and Human Services (MDHHS) to implement the required Home and Community-Based Services (HCBS) Transition Tracking for the Members of DWIHN who are residing in homes that are not HCBS compliant. The HCBS rule requires that residential and HCBS Service providers make sure that individual receiving services have the opportunity to make decisions about their lives, are supported in their desire to participate in the community, and have their rights respected. The transition planning and the process have identified 54 members as being in residential settings and not eligible for funding to provide HCBS services after March 17, 2022. All transition planning will occur through the person-centered planning process and be consistent with all Medicaid requirements.

SUBSTANCE USE SERVICES

Request for Qualification (RFQ) for SUD Services: DWIHN issued an RFQ for both Substance Use Disorder (SUD) Prevention and Treatment services. SUD requested responses to these RFQs for the purpose of creating a list of qualified vendors to provide for Prevention and Treatment services to fulfill the commitment to the delivery of substance abuse programs to Wayne County communities. The Qualified list will be valid for 5 years and only approved and qualified providers who meet the qualifications will be placed on the RFQ for services to begin October 1, 2023. All providers must submit a response to the RFQ if they want to participate in any of the SUD Programs. Current providers in good standing are still eligible to continue providing services in FY 23 from the last contract renewal period for the RFP issued in 2020.

Opioid Treatment Program Bundled Rate: The FY23 MDHHS approved budget included language regarding Methadone dosing bundles being paid at \$19.00. Discussion regarding what this means for the Outpatient Treatment Providers, what is the expectation, and when will this take effect. DWIHN is waiting for further guidance from MDHHS, including a clear definition as to what services will be provided in the bundle.

Naloxone Initiative: DWIHN’s Naloxone Initiative program has saved 1,427 lives since its inception. Again, the saved lives are underreported, especially during this time of COVID pandemic. The logs are coming in slowly from law enforcement and the community. DWIHN only reports those saves that we have documentation to support this initiative.

Consolidated Appropriations ACT, 2023 (Amended): Congress included several elements in a legislative package that will increase resources for SUD services. Highlights include:

- Eliminating the “X-waiver” to prescribe buprenorphine for opioid use disorder (and associated patient limits), as called for by the Mainstreaming Addiction Treatment (MAT) Act;
- Requiring controlled medication prescribers to receive education on treating and managing patients with substance use disorder, as called for by the Medication Access and Training Expansion (MATE) Act;
- Appropriating \$40,000,000 for Fiscal Year 2023 for the Health Resources and Services Administration (HRSA)’s Substance Use Disorder Treatment and Recovery (STAR) Loan Repayment Program;
- Appropriating \$25,000,000 for Fiscal Year 2023 for HRSA’s Addiction Medicine Fellowship Program to foster robust community-based clinical training of addiction medicine or addiction psychiatry physicians in underserved, community-based settings;
- Reauthorizing a grant program for screening, assessing, and treating maternal mental health conditions and substance use disorders, as well as continued funding of the Maternal Mental Health Hotline;
- Authorizing \$10,000,000 in grants for each of the first five fiscal years beginning after the date of enactment to support mental health and substance use disorder parity implementation;
- Codifying regulations that allow opioid treatment programs (OTPs) to operate mobile medication components without separate DEA registrations, as called for by the Opioid Treatment Access Act;
- Extending mental health and addiction parity requirements to nonfederal governmental health plans;
- Revising Medicare’s partial hospitalization benefit beginning on January 1, 2024 to provide coverage of intensive outpatient services;
- Amending the Medicaid Inmate Exclusion Policy to allow otherwise eligible juveniles to continue receiving Medicaid-funded health care while awaiting trial, at the option of the State (ASAM, December 23, 2022).

RESIDENTIAL SERVICES

DWVHN Serviced in Residential Settings: 2,914

| | |
|---------------------|-------|
| Licensed Settings | 2,076 |
| Unlicensed Settings | 838 |

There were 251 referrals to residential services in the month of December. Forty-eight percent (48%) were referred from Clinically Responsible Service Providers and thirty-six percent (36%) were referred by local hospitals. There were 645 authorization requests and 90% were reviewed and approved within 14 days of request. There were three (3) home closures that resulted in eleven (11) members being moved to other home settings in the month of December.

The Residential Department continues to see an increase in placement needs for members aging out of the Foster Care system and LGBTQI+ communities. DWIHN is working with identified Clinically Responsible Service Providers to develop to meet this increased service need. DWIHN is currently reviewing current specialized residential facilities to develop a service gap analysis of over and under-utilized facilities. There is also an identified need for ongoing quarterly meetings with guardianship corporations to address needs and concerns as they relate to DWIHN members which will be scheduled.

UTILIZATION MANAGEMENT

As of 12/31/22, the UM Team has managed a total of 693 admissions across the provider network (including MI Health Link members). This data includes inpatient, partial hospitalization, and crisis residential services. In the month of December, there were 689 (non-MI Health Link) admissions for inpatient treatment, reflecting a 3.2% decrease from inpatient admissions during November 2022. Additional UM services include:

- **Habilitation Supports Waiver (HSW):** There are 1,084 slots assigned by MDHHS to the DWIHN for the HSW benefit. As of 12/31/22 1,011 were filled and 72 were open, which is a utilization rate of 93.4%. The target is 95% or greater. DWIHN has put a large focus in this area including adding additional staff to provide oversight and application processing, working directly with providers on those members whose cases are expiring in the HSW benefit, and reviewing potential members based on MDHHS criteria.
- **County of Financial Responsibility (COFR):** In the month of December, there were two (2) adult review requests and one (1) child review request. This total does not include committee-reviewed cases deemed non-COFR that were redirected to DWIHN Residential and/or identified as single-case agreements/contract updates.
- **General Fund:** Of the General Fund Exception authorization requests reviewed during December 2022, there were 260 approvals, including 12 for the Guidance Center (CCBHC). There were nine (9) Administrative Denials.
- **Provider Network/Outpatient Services:** In December there were 1,799 authorizations manually approved by the UM department. This number is reflective of non-SUD, non-ASD, non-urgent pre-service authorizations. Of these 1,799 authorizations, 1,522 (or 85%) were approved within 14 days of request; 244 (or 13.9%) were approved within 21 days of request; 33 (or 1.8%) were approved within 28 days; and none were approved beyond 28 days.
- **State Facilities:** There were no adult state hospital admissions for the month and 70 NGRI consumers are currently managed in the community. 3 consumers remain on the wait list. There were no new children's state hospital admissions.
- **SUD:** For the month of December, there was a total of 1289 authorizations approved. There were 349 urgent authorizations approved. Out of the 349, 316 (90.5%) were authorized within 72 hours. There were 940 non-urgent authorizations and 912 (97%) were approved within 14 days.

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-52R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Gregory Terrell and Company

Contract Title: Residential Provider Payroll Audits

Address where services are provided: None

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 2/1/2023 to 1/31/2024

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

Program Type: Continuation

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

Date Contract First Initiated: 2/1/2021

Provider Impaneled (Y/N)?

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

This board action is requesting the approval to exercise the one year renewal option effective February 1, 2023 through January 31, 2024. This board action is a time extension only and does not require additional funds. This initial board action was for an amount not to exceed \$100,000. To date, the provider has spent \$20,000 with \$80,000 remaining on the purchase order.

Effective October 1, 2020, MDHHS discontinued the use of H0043 and mandated community living supports report under H2015. This mandate requires providers to bill using certain modifiers and associated rates based on the number of staff and consumers that reside in the home. In an effort to ensure residential providers are billing with the proper modifier/rate, DWIHN is required to perform payroll audits. In response to an Invitation For Bid (IFB), Gregory Terrell & Associates, a Detroit based accounting firm, was deemed the lowest bidder. The firm will assist with accumulating the staff hours and consumers in the home whereby DWIHN finance staff will evaluate whether the proper modifier/rate was used for reimbursement of services. The amount of the contract is estimated as the contract is based on hours billed; DWIHN has over 200 providers subject to audit.

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

Source of Funds: Multiple

Fee for Service (Y/N):

| Revenue | FY 23/24 | Annualized |
|----------------------|---------------|---------------|
| Multiple | \$ 100,000.00 | \$ 100,000.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 100,000.00 | \$ 100,000.00 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64923.813000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Monday, December 5, 2022

Signed: Friday, December 2, 2022

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-54R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Accuform Printing & Graphics, Inc.

Contract Title: As needed on demand printing of member materials- Accuform

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 11/1/2020 to 10/31/2023

Amount of Contract: \$ 707,348.51 Previous Fiscal Year: \$ 358,420.00

Program Type: Modification

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

Date Contract First Initiated: 11/1/2020

Provider Impaneled (Y/N)?

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

This board action is requesting the approval of an additional \$348,928.51 for an amount not to exceed \$707,348.51 through the end of the contract term of 10/31/2023. This board action is requesting additional funds however the term remains the same.

The DWIHN's Customer Service Department is responsible for the development of printed educational materials for its mental health members and community. Per the Michigan Department of Health and Human Services (MDHHS) Customer Service Standards, National Committee for Quality Assurance (NCQA) and Health Services Advisory Group (HSAG) it has mandated that DWIHN provide additional member mailings i.e. Member Privacy Guidelines (upon enrollment

and annually) and EOB's (quarterly) and should be made available to members upon request.

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

| Revenue | FY 22/23 | Annualized |
|----------------------|---------------|---------------|
| Multiple | \$ 707,348.51 | \$ 707,348.51 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 707,348.51 | \$ 707,348.51 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64914.728000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

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Board Action #: 21-54R2

Signed: Friday, January 13, 2023

Signed: Thursday, January 12, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-71R3 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: American Society of Employees, Inc.

Contract Title: ASE Leadership Training/Pre-Employment Services

Address where services are provided: None

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 3/1/2021 to 9/30/2023

Amount of Contract: \$ 334,505.00 Previous Fiscal Year: \$ 181,000.00

Program Type: Modification

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

Date Contract First Initiated: 10/1/2017

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 (“Network”) is requesting modification of the Agreement between the Network and American Society of Employers (ASE) for training services. the increase is due to the increased hiring activity that will result from bringing the Crisis Center online. DWIHN expects to hire at least 150 new staff over and above what is normally on an annual basis.

The modification is needed to increase funding by \$120,000.00 for funds to retain ASE to provide supervision training for executive leadership, directors, and managers at DWIHN.

Funding is also needed for the purpose of conducting pre-employment services (Drug Screens, Background checks).

The new grand total is not to exceed \$334,505. The contract term remains the same.

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

Source of Funds: Multiple

Fee for Service (Y/N):

| Revenue | FY 22/23 | Annualized |
|----------------------|---------------|---------------|
| Multiple | \$ 334,505.00 | \$ 334,505.00 |
| | \$ | \$ 0.00 |
| Total Revenue | \$ | \$ 334,505.00 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64925.817000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Signed: Thursday, January 12, 2023

Signed: Thursday, January 12, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

- Approved
- Rejected
- Modified as follows:

Executive Director -initial here: _____

- Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: #22-66R Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: HPS Consulting LLC

Contract Title: HPS Services for NCQA

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 2/1/2023 to 7/31/2023

Amount of Contract: \$ 146,875.00 Previous Fiscal Year: \$ 98,125.00

Program Type: Continuation

Projected Number Served- Year 1: 75,000 Persons Served (previous fiscal year): 75000

Date Contract First Initiated: 2/1/2023

Provider Impaneled (Y/N)? Y

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

Detroit Wayne Integrated Health Network is requesting a Professional Service Contractual Agreement with Diana Hallifield, RN dba HPS Consulting, LLC to provide clinical care consultative support as the DWIHN prepares for National Committee for Quality Assurance (NCQA) Reaccreditation. DWIHN is requesting approval to extend the previous purchase order term to July 31, 2023 and increase the requested amount by \$98,125 for an amount not to exceed \$146,875.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

| Revenue | FY 22/23 | Annualized |
|----------------------|---------------|---------------|
| Multiple | \$ 146,875.00 | \$ 146,875.00 |
| | \$ | \$ |
| Total Revenue | \$ | \$ |

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64910.817000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Friday, January 6, 2023

Signed: Thursday, January 5, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

- Approved
- Rejected
- Modified as follows:

Executive Director -initial here: _____

- Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-05R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2022-2023 Operating Budget

Address where services are provided: None

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 10/1/2022 to 9/30/2023

Amount of Contract: \$ 952,108,249.00 Previous Fiscal Year: \$ 927,640,119.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2022

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).

Staff requests Board approval on the following budget amendment the FY23 Operating Budget as follows:

To fund the following new positions with Medicaid reserves:

1. One (1) Clinical Specialist @ \$108,595 (salary/fringes) for Adult Services to provide oversight for the I/DD Provider Network;
2. Three (3) Clinical Specialist-Performance Monitors @ \$325,785 (salary/fringes) for Quality Improvement:
 - a. Two (2) Clinical Specialist- Performance Monitors @ \$217,190 (salary/fringes) to ensure compliance with the new State mandate to use Medicaid dollars for Home & Community Based Services (HCBS) facilities, and;
 - b. One (1) Clinical Specialist-Performance Monitor @ \$108,595 (salary/fringes) to address the increase in the volume of work/auditable activities in the Autism Program.

Lastly, one (1) Contract Assistant, \$62,720 (salary and fringes) to manage the HSW Waiver - a function previously handled by Community Living Services (CLS) through an Administrative Services Only (ASO) contract with DWIHN. The new position was funded with a portion of the funds originally set aside for the ASO contract.

The FY23 Operating Budget, in the amount of \$952,108,249, is unchanged as a result of this amendment and consists of the following revenue: \$21,630,181 (State General Funds, CCBHC State General Funds); \$723,141,397 (Medicaid, DHS Incentive, Medicaid-Autism; Children's/SED Waiver, HAB); \$9,886,123 (MI Health Link); \$140,914,218 (Healthy MI- Mental Health and Substance Abuse); \$17,686,447 (Wayne County Local Match Funds); \$4,040,539 (PA2 Funds); \$7,294,100 (State Grant portion of OBRA,SUD); \$26,734,244 (Federal Grants/Federal Block Grants); \$241,000 (Local Grant Revenue); \$500,000 (Interest Income; and \$40,000 (Misc. Revenue).

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

Source of Funds: Multiple

Fee for Service (Y/N):

| Revenue | FY 22/23 | Annualized |
|----------------------|-------------------|-------------------|
| MULTIPLE | \$ 952,108,249.00 | \$ 952,108,249.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 952,108,249.00 | \$ 952,108,249.00 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Saturday, December 10, 2022

Signed: Saturday, December 10, 2022 Board Action #: 23-05R2

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

- X Approved
- Rejected
- Modified as follows:

Executive Director -initial here: _____

- Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-07 R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Provider Network System FY 22/23

Address where services are provided: Service Provider List Attached

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 10/1/2022 to 9/30/2023

Amount of Contract: \$ 804,448,924.00 Previous Fiscal Year: \$ 677,393,988.00

Program Type: Continuation

Projected Number Served- Year 1: 75,000 Persons Served (previous fiscal year): 71,682

Date Contract First Initiated: 10/1/2022

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 is a request to add 2 newly credentialed providers. Note that these providers were credentialed subsequent to DWIHN's approval of BA 23-07. No budget increase due to reallocation of funds.

(DWIHN) DWIHN is requesting approval for continued funding for the Provider Network System for the fiscal year ended September 30, 2023. This will allow for the continued delivery of behavioral health services for individuals with: Serious Mental Illness, Intellectual/Developmental Disability, Serious Emotional Disturbance and Co-Occurring Disorders.

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

Note 1. The board action amounts include: Mental health treatment services, Autism, Children's Waiver, SED Waiver, children crisis services and SUD Medicaid, HMP and block grant treatment, Behavioral Health Home and Opioid Health Home services which are supplemental, voluntary services that Medicaid members with specific diagnoses may opt into to receive comprehensive care coordination facilitated by a health home care team and EBSE claims based activity.

In addition, it should be noted that the hospitals listed under HRA change based on consumers stay. As such, hospitals may be added and amounts reallocated without board approval to avoid delay of payment; the funds are a pass through from MDHHS.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

| Revenue | FY 22/23 | Annualized |
|----------------------|-------------------|-------------------|
| Multiple | \$ 804,448,924.00 | \$ 804,448,924.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 804,448,924.00 | \$ 804,448,924.00 |

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Tuesday, January 3, 2023

Signed: Tuesday, January 3, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

- X Approved
- Rejected
- Modified as follows:

Executive Director -initial here: _____

- Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA 23-26R1 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: COVID-19 Grant

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 10/1/2022 to 9/30/2023

Amount of Contract: \$ 7,083,210.00 Previous Fiscal Year: \$ 6,719,938.00

Program Type: Continuation

Projected Number Served- Year 1: 1,200 Persons Served (previous fiscal year): 10000

Date Contract First Initiated: 10/1/2022

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 revised board action is to request the following Prevention programs that have been granted funding from MDHHS for fiscal year 2023: \$3,500 for the annual Coverage Study to Leaders Advancing and Helping Communities (LAHC). In addition, MDHHS has granted an additional \$590,909.00 in COVID-19 Prevention Funds to provide Media, Outreach and Evidence Based Programming (EBP) services. . The funding will allow prevention providers to continue to work and improve efforts to adapt to the challenges that COVID has brought.

The providers are as follows:

Outreach - LAHC (\$50,000) and The Youth Connection (\$30,909)
DABO (\$10,000)

EBPs - Carefirst (\$36,364) LAHC (\$50,000) and NCADD (\$50,000)

Prevention COVID Media - CARE of SEM (\$71,212) Elmhurst (\$71,212) NCADD (\$100,000) Piast (\$71,212) and SOOAR (\$50,000)

The FY23 Prevention Services program budget of \$6,488,801.00 is increased by \$594,409.00 to \$7,083,210.00 and consist of Federal Block Grant \$4,974,210.00 and Public Act 2 funds of 2,109,000.00

DWIHN has the discretion to allocate the funds among the providers based upon utilization without board approval up to the approved not to exceed amount. As a result, budget may be decreased/increased among providers.

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

Source of Funds: Block Grant,PA2

Fee for Service (Y/N): N

| Revenue | FY 22/23 | Annualized |
|----------------------------------|------------------------|------------------------|
| SUD Block Grant | \$ 4,974,210.00 | \$ 4,974,210.00 |
| Local Funds - Public Act 2 (PA2) | \$ 2,109,000.00 | \$ 2,109,000.00 |
| Total Revenue | \$ 7,083,210.00 | \$ 7,083,210.00 |

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Signature/Date:

Eric Doeh

Signed: Friday, January 6, 2023

Stacie Durant, Chief Financial Officer

Signature/Date:

Stacie Durant

Signed: Friday, January 6, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA 23-27R1 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: COVID-19 Grant

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 10/1/2022 to 9/30/2023

Amount of Contract: \$ 10,553,670.00 Previous Fiscal Year: \$ 7,830,900.00

Program Type: Modification

Projected Number Served- Year 1: 1,200 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 10/1/2022

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 revised board action is a request to increase the amount of the SUD Treatment Program by \$3,000,000 for a total amount not to exceed \$10,553,670 allocated to DWIHN by the Michigan Department of Health and Human Services. The additional COVID-19 funding will provide treatment, and recovery support continuum services, including various evidence-based services and supports for individuals, families, and communities. In addition, the funding will allow providers to continue to work with the SUD population on efforts to facilitate and support services to include the following: Quick Response Teams, Parenting, Post-Partum Opioid Health Homes, Treatment and Prevention Evidence Base Programs (EBP), SUD Health Homes, Crisis Engagement and Expansion, Vaccination Support, Workforce Recruitment, Telehealth Technology and Hubs, Recovery Support Services and Housing, Accessing Behavioral Health African Community.

The Treatment Services program of \$10,553,670 consist of Federal Block Grant of \$9,561,670 and Public Act 2 funds of \$992,000.00

Funds may be reallocated between providers up to the not to exceed amount without board approval.

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

Source of Funds: Block Grant,PA2

Fee for Service (Y/N): Y

| Revenue | FY 22/23 | Annualized |
|----------------------------------|-------------------------|-------------------------|
| SUD Block Grant | \$ 9,561,670.00 | \$ 9,561,670.00 |
| Local Funds - Public Act 2 (PA2) | \$ 992,000.00 | \$ 992,000.00 |
| Total Revenue | \$ 10,553,670.00 | \$ 10,553,670.00 |

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Friday, January 6, 2023

Signed: Friday, January 6, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

- Approved
- Rejected
- Modified as follows:

Executive Director -initial here: _____

- Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-53R2 Revised: N Requisition Number: 14,013

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: AT&T

Contract Title: AT&T Internet Service Subscription @ NCO

Address where services are provided: None

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 1/18/2023 to 11/14/2025

Amount of Contract: \$ 58,320.00 Previous Fiscal Year: \$ 0.00

Program Type: Continuation

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

Date Contract First Initiated: 11/14/2022

Provider Impaneled (Y/N)?

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

This board action is requesting approval to extend an existing two month comparable source agreement for \$9,600 with AT&T for internet service subscription at NCO Site location for DWIHN Call Center Staff. The term of the board action is for an additional twenty two (22) months for a total estimated costs of \$58,320. The additional amount of \$48,720 is for an estimated monthly service of \$2,230 per month from 1/18/2023 through 11/14/2025.

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

Source of Funds: Multiple

Fee for Service (Y/N):

| Revenue | FY 22/23 | Annualized |
|----------|--------------|--------------|
| Multiple | \$ 58,320.00 | \$ 58,320.00 |
| | \$ 0.00 | \$ 0.00 |

| | | |
|----------------------|--------------|--------------|
| Total Revenue | \$ 58,320.00 | \$ 58,320.00 |
|----------------------|--------------|--------------|

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64924.815000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Thursday, December 22, 2022

Signed: Wednesday, December 21, 2022

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-50 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Rehmann Robson CPAs & Consultants

Contract Title: Standard Cost Allocation Consulting Services

Address where services are provided: None

Presented to Finance Committee at its meeting on: 1/17/2023

Proposed Contract Term: 1/19/2023 to 9/30/2024

Amount of Contract: \$ 139,300.00 Previous Fiscal Year: \$ 0.00

Program Type: New

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

Date Contract First Initiated: 1/19/2023

Provider Impaneled (Y/N)?

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

This board action is requesting the approval for the Finance Department to enter into a comparable source contract with Rehman Robson Inc. for the accounting and consulting services related to assisting DWIHN with the implementation of the Standard Cost Allocation (SCA) Model required by the Michigan Department of Health and Human Services (MDHHS) which will be included in the upcoming years compliance examination. The accounting and consulting services relate to, but not limited to the internally provided and direct services at the newly constructed care center, the anticipated 7-mile integrated care center and the PASSAR program. The contract terms are time and materials for an amount not to exceed \$139,300 for the period January 19, 2023 through September 30, 2024.

In December 2019, MDHHS formed a workgroup of various CMHSP's and PIHP's to assist in the development of a standardized costing methodology that primarily impacted direct run service programs. Historically, DWIHN has been a managed care organization and has not provided direct run services in over 25 years therefore the finance team does not have the knowledge and experience in costing direct run services.

A contract is budgeted and funded primarily with the care center budget with a smaller portion allocated to the federal PASSAR grant.

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

Source of Funds: Multiple

Fee for Service (Y/N):

| Revenue | FY 22/23 | Annualized |
|----------------------|---------------|---------------|
| Multiple | \$ 139,300.00 | \$ 139,300.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 139,300.00 | \$ 139,300.00 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64950.813000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, November 23, 2022

Signed: Friday, November 18, 2022

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-51 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Mental Health First Aid/ QPR

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 1/1/2023 to 9/30/2023

Amount of Contract: \$ 550,000.00 Previous Fiscal Year: \$ 550,000.00

Program Type: Continuation

Projected Number Served- Year 1: 1,000 Persons Served (previous fiscal year): 1320

Date Contract First Initiated: 1/1/2023

Provider Impaneled (Y/N)? N

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

The Detroit Wayne Integrated Health Network (DWIHN) is requesting approval to enter a contract with various vendors (enclosed) for the continuation of Mental Health First Aid and QPR-Question, Persuade, Refer under BA 23-51. Each of the curricula supports the efforts that DWIHN has worked toward for the past couple of years.

It is requested that the contracts utilizing General Fund begin January 1, 2023, and continue through September 30, 2023. The cost and fees for professional services to DWIHN will not exceed \$550,000.00. Each of the entities has certified trainers and has met outcomes in alignment with DWIHN expectation were selected for contract continuation. These are Providers who will offer training and participate in training efforts for the county.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

| Revenue | FY 23 | Annualized |
|----------------------|---------------|-------------------|
| General Fund | \$ 550,000.00 | \$ 550,000.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 550,000.00 | \$ 550,000.00 |

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER:

In Budget (Y/N)? Y

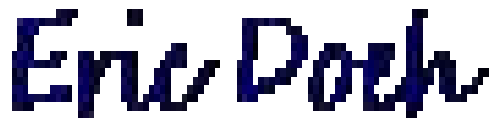
Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, January 4, 2023

Signed: Wednesday, January 4, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

—

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-54 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Guidance Center, The, Hegira Health Inc.

Contract Title: Infant and Early Childhood Mental Health Consultation (IECMHC) Expansion

Address where services are provided: 8623 N. Wayne Road, Westland, MI 48185

Presented to Program Compliance Committee at its meeting on: 1/11/2023

Proposed Contract Term: 1/1/2023 to 9/30/2023

Amount of Contract: \$ 211,655.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 20 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 1/1/2023

Provider Impaneled (Y/N)? Y

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

This board action is requesting the approval of a one year contract effective January 1, 2023 through September 30, 2023 for an amount not to exceed \$211, 655 for the Infant and Early Childhood Mental Health Consultation (IECMHC) Expansion Grant. The service will be provided by Hegira Health, Inc. and The Guidance Center. Hegira Health, Inc. will receive \$91,226 and The Guidance Center will receive \$117,929. The additional \$2,500 will be allotted for indirect costs. The program is a prevention based, indirect intervention that teams a mental health professional with child care providers to improve the social, emotional, and behavioral health of children. Through the development of partnerships among providers and families, consultation builds adult's capacity to understand the influence of their relationships and interactions on young children's development.

Please note "projected number served" reflects the number of childcare providers served, per the scope of the service.

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

Source of Funds: Block Grant

Fee for Service (Y/N): N

| Revenue | FY 22/23 | Annualized |
|----------------------|-----------------|-------------------|
| Block grant | \$ 211,655.00 | \$ 211,655.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 211,655.00 | \$ 211,655.00 |

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:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, December 14, 2022

Signed: Wednesday, December 14, 2022

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

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**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 23-55 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 1/18/2023

Name of Provider: Pending

Contract Title: Boji Development LLC - 7 Mile Complex Development Project

Address where services are provided: None

Presented to Executive Committee at its meeting on: 1/17/2023

Proposed Contract Term: 2/1/2023 to 12/31/2024

Amount of Contract: \$ 1,580,698.00 Previous Fiscal Year: \$ 0.00

Program Type: New

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

Date Contract First Initiated: 2/1/2023

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).

Detroit Wayne Integrated Health Network (“DWIHN”) received \$45,000,000 in funding from the Michigan Department of Health and Human Services (“MDHHS”) to design and build a new Integrated Behavioral Health Campus in Wayne County to serve the communities of Wayne, Oakland and Macomb Counties.

This board action is requesting authorization for Detroit Wayne Integrated Health Network (DWIHN) to enter into an agreement with Boji-Group LLC, through its holding company, The Detroit 7 Mile Property, LLC to compensate up to 4% of construction cost for the developer fee of \$1,580,698. The fee includes all associated acquisition fees, real estate costs, title work, zoning, the coordination of underground utility services including water, sanitary sewer, storm sewer, electrical, gas and other services and expenses necessary to make the land suitable for its intended use.

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

Source of Funds: Block Grant

Fee for Service (Y/N):

| Revenue | FY 22/23 | Annualized |
|----------------------|-----------------|-----------------|
| State block grant | \$ 1,580,698.00 | \$ 1,580,698.00 |
| | \$ 0.00 | \$ 0.00 |
| Total Revenue | \$ 1,580,698.00 | \$ 1,580,698.00 |

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 00000.158000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Chief Executive Officer

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, January 11, 2023

Signed: Wednesday, January 11, 2023

Board Action Taken

The following Action was taken by the Full Board on the 18th day of January, 2023.

Approved

Rejected

Modified as follows:

Executive Director -initial here: _____

Tabled as follows:

Signature: Lillian M. Blackshire
Board Liaison

Date: January 18, 2023

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