



Detroit Wayne Integrated Health Network

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PROGRAM COMPLIANCE COMMITTEE MEETING *Virtual Meeting* Wednesday, August 11, 2021 1:00 p.m. – 3:00 p.m.

AGENDA

- I. Call to Order
- II. Moment of Silence
- III. Roll Call
- IV. Approval of the Agenda
- V. Follow-Up Items from Previous Meeting
 - A. Chief Medical Officer's Report - Provide more information on outreach for mental health and substance use for children and adolescents.
- VI. Approval of the Minutes – July 14, 2021
- VII. Report(s)
 - A. Chief Medical Officer
 - B. Corporate Compliance
- VIII. Quarterly Reports
 - A. Managed Care Operations
 - B. Residential Services
 - C. Substance Use Disorder
- IX. Strategic Plan Pillar - Customer
- X. Quality Review(s) – *Deferred to September 8, 2021*
- XI. Chief Clinical Officer's Report
- XII. Unfinished Business
 - A. BA #21-01 (Revised) – Jail Diversion
 - B. BA #21-09 (Revised) – FY 2021 Comprehensive Services for Behavioral Health – Block Grant

Board of Directors

William T. Riley, III, Chairperson
Dorothy Burrell
Kevin McNamara

Angelo Glenn, Vice-Chairperson
Lynne F. Carter, MD
Bernard Parker

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Michelle Jawad
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Dr. Cynthia Taueg, Secretary
Jonathan C. Kinloch



- C. **BA #21-13 (Revised 2)** – Wayne County Jail
- D. **BA #21-32 (Revised 5)** – ASAM Training Reimbursement and Naloxone Purchase – Abundant Community Recovery Services
- E. **BA #21-33 (Revised 4)** – ENDS Tobacco –Leaders Advancing and Helping Communities (LAHC)
- F. **BA #21-56 (Revised)** – Mental Health First Aid/Question, Persuade and Refer

XIII. New Business

(Staff Recommendations):

- A. **BA #21-73** – 123.Net Fibers Internet Services – 123.Net
- B. **BA #22-01** – Multicultural Integration and PIHP Veteran Navigator
- C. **BA #22-02** – Michigan Vocational Rehabilitation Services
- D. **BA #22-05** – Housing Services – Southwest Counseling Solutions Housing Resource Center
- E. **BA #22-06** – Self-Direct Program (formerly Self-Determination) – Community Living Services
- F. **BA a#22-07** – FY 2022 Comprehensive Services for Behavioral Health – Block Grant

XIV. Good and Welfare/Public Comment

Members of the public are welcome to address the Board during this time up to two (2) minutes (***The Board Liaison will notify the Chair when the time limit has been met***). Individuals are encouraged to identify themselves and fill out a comment card to leave with the Board Liaison; however, those individuals 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).

XV. Adjournment

PROGRAM COMPLIANCE COMMITTEE

MINUTES

JULY 14, 2021

1:00 P.M.

VIRTUAL MEETING

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: Dorothy Burrell; Dr. Lynne Carter; Michelle Jawad; and Dr. Cynthia Taueg</p> <p>Board Members: Chief William T. Riley, III</p> <p>Staff: Brooke Blackwell; Jacquelyn Davis; Eric Doeh; Stacie Durant; Dr. Shama Faheem; Bernard Hooper; Melissa Moody; John Pascaretti; April Siebert; Andrea Smith; Yolanda Turner; and June White</p>

AGENDA TOPICS

II. Moment of Silence

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

III. Roll Call

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

IV. Approval of the Agenda

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

DISCUSSION/ CONCLUSIONS	<i>There was no Follow-Up Item(s) from Previous Meetings to review.</i>
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VI. Approval of Meeting Minutes

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the June 9, 2021 meeting minutes. Motion: It was moved by Chief Riley and supported by Ms. Jawad to approve the June 9, 2021 meeting minutes. Dr. Tauzeg asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.
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VII. Reports

DISCUSSION/ CONCLUSIONS	<p>A. Chief Medical Officer – Dr. Shama Faheem, Chief Medical Officer submitted and gave highlights of her Chief Medical Officer’s report. Dr. Faheem reported:</p> <ol style="list-style-type: none"> 1. DWIHN’s COVID-19 Response – As of June 22nd, Michigan has lifted all restrictions outside of healthcare settings. DWIHN continues its’ efforts towards COVID-19 and its’ vaccination. There is ongoing periodic screening at the office site and residential settings; periodic mandated routine COVID testing for unvaccinated staff; “Ask the Doc” Initiative where staff can submit COVID vaccination related questions to the Medical Director; and a bi-weekly COVID-19 Newsletter to improve vaccination awareness. 2. Mental Health Initiatives – The collaboration with Wayne Health on Integrated Mobile Health Services was launched on July 6, 2021; ongoing efforts toward Behavioral Health Homes implementation; ongoing collaboration with the Detroit Police Department in providing crisis intervention training and expansion of the program to other cities; and expansion of the Med Drop program to incorporate more providers and target recidivistic individuals. 3. Substance Use Disorder Initiatives – MDHHS continues to move forward with the establishment of the American Society of Addiction Medicine (ASAM) Continuum as the standardized SUD assessment instrument; DWIHN partners with MDHHS in ensuring that formal Synar compliance checks are conducted each year with the intent of lowering youth use of tobacco rates; ongoing efforts and education to encourage prescribers about medication assisted treatment; DWIHN continues the partnership with Wayne State Center for Behavioral Health and Justice on the jail collaboration/diversion program; and DWIHN is working on the expansion of the Opioid Health Homes once funding source moves to Medicaid. 4. Crisis and Access Services – Ongoing efforts to address hospital recidivism; DWIHN is involved in the State-wide Sequential Intercept Model Initiative aimed at reducing the number of people with mental illness or intellectual or developmental disabilities from entering the corrections system while maintaining public safety; DWIHN has been working with the Crisis team and Hospital Liaison group to identify potential delays in care and addressing barriers; and the Detroit COVID-19 Virtual Therapy
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	<p>Collaborative (ReachUsDetroit) provides therapeutic and soft supports to anyone in Wayne County.</p> <ol style="list-style-type: none"> 5. Children Services – Staff has been working on identifying barriers in getting connected with mental health services and ensuring timely availability of services especially during times of staffing crises. 6. Performance Improvement Projects (PIPs) – Staff working to address the decline in certain PIP measures and HEDIS indicators such as the diabetic screening for individuals on antipsychotics and updated evidenced-based interventions. <p>Dr. Tauzeg opened the floor for discussion. Discussion ensued. The committee requested more information on outreach for mental health and substance use for children and adolescents in the next report. (Action)</p> <p>B. Corporate Compliance Report - Bernard Hooper, Director of Corporate Compliance submitted and gave an update on the Corporate Compliance report. Mr. Hooper reported that the U.S. Department of Labor (DOL) notified DWIHN of a pending investigation of Help at Home, an outpatient provider selected by several members previously served by United Horizons. United Horizons is a provider that DWIHN terminated a few months ago. There are allegations that former employees of United Horizons transitioned to Help at Home, provided services to members and were not paid for hours worked. DWIHN’s position is just to ensure that members transferred received services and provide background information to the investigator. There have been no complaints from our members that services were not provided. Mr. Hooper will be speaking with DOL’s investigator this afternoon. Discussion ensued. Eric Doeh, Interim CEO stated that this matter is still in its’ infancy stage and there are details that are outstanding; DWIHN will wait until the investigating body has weighed in on this matter. Mr. Hooper will report back once the investigation is completed by the U.S. Department of Labor. (Action)</p> <p>The Chair noted that the Chief Medical Officer’s and Corporate Compliance’s reports have been received and placed on file.</p>
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VIII. Quarterly Reports -

<p>DISCUSSION/ CONCLUSIONS</p>	<ol style="list-style-type: none"> A. Crisis Services – Jacquelyn Davis, Director of Crisis Services submitted and gave highlights of the Crisis Services’ quarterly report. Ms. Davis reported: <ol style="list-style-type: none"> 1. FY 20/21 Q2 Accomplishments – The Crisis Alerts in Consumer Records for identified recidivistic cases has been effective – 103 crisis alerts for the quarter and an average of 59% were diverted from inpatient; Staff worked with DPD to develop a process for 911 to transfer calls directly to the Crisis Line (ProtoCall), went live May 17, 2021; DWIHN participated in the Wayne County Jail Mental Health Initiative (WCMJHI) that included collaborations from hospitals and CCBHCs. 2. Area of Concern – There has been a decrease in RFS for the quarter and an increase of children cases being admitted to inpatient. Staff is working with the mobile crisis teams to resume face-to-face services and completing re-evaluations to determine if dispositions can change to lower level of care for children. 3. Plans for FY 20/21 Q4 – Begin the partnership with Wayne Health for the Mobile Outreach services; Finalize case consult procedures and tracking for children approaching 72 hours in the emergency room waiting inpatient placement <p>Dr. Tauzeg opened the floor for discussion. Discussion ensued.</p>
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	<p>B. Utilization Management – John Pascaretti, Director of Utilization Management submitted and gave highlights of the Utilization Management’s quarterly report. Mr. Pascaretti reported:</p> <ol style="list-style-type: none"> 1. Habilitation Supports Waiver – 1048 out of 1,084 slots filled – 96.7% 2. Autism – 1,205 authorization requests approved during Q3. There are 1,954 cases currently open in the benefit. 3. Serious Emotional Disturbance Waiver (SEDW) – 57 youths opened in the SEDW. 4. Evidence-Based Supported Employment – Staff determined that the service utilization guidelines could be entered into MHWIHN to allow, when appropriate, EBSE requests to be auto-approved should the request fall within the service utilization guidelines. UM will no longer report out on EBSE in this report. 5. General Fund – 1,074 approvals for Q3 6. Provider Network Hospital Admissions – 2,247 inpatient admissions for Q3, a 2.39% decrease from last quarter. 7. MI Health Link – 169 MI Health Link authorizations across all ICOs for Q3, 14.9% increase. 8. SUD – 4,399 authorizations approved by SUD-UM reviewers, 33% increase from last quarter. 9. Milliman Care Guidelines (MCG) - 3,293 screened for Q3, a 16% increase from last quarter. 10. New Hire Interrater Reliability (IRR) – MCG updates their guidelines annually and the Parity workgroup recently recommended PIHPs update to the 25th edition. A meeting scheduled in July to accomplish the update. 11. Denials and Appeals – There were 18 denials that did not meet the Milliman Care Guidelines medical necessity criteria for continued inpatient hospitalization and Applied Behavior Analysis (ABA) services. There are eight (8) appeals. <p>Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Crisis Services’ and Utilization Management’s quarterly reports have been received and placed on file.</p>
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IX. Strategic Plan Pillar - Access

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Jacquelyn Davis, Director of Crisis Services submitted and gave a report on the Strategic Plan – Access Pillar. Ms. Davis reported:</p> <ol style="list-style-type: none"> 1. Four high level goals. Overall at 73% completion, 1% higher than 2nd quarter. There have been increases in each of the goals. The report submitted has an error for “Implement Justice Involved Continuum of Care”. It had previously been documented at 100%; however, a discrepancy caused it to be decreased to 96%. This goal has actually been completed at 100%. 2. The detailed report shows a total of 16 goals with a completion rate of 70%, the same as 2nd quarter. There has been some movement: <ol style="list-style-type: none"> A. Create Infrastructure to support a holistic care delivery system: 47% completion - Had been on hold initially as the state was making decisions on implementing the SIP-Specialty Integrated Plan but we regrouped. 21% behind overall, but making progress. Additional CRSP are being added to the Risk Matrix Scorecard Pilot weekly. Compliance/Risk Management Committee will review pilot data beginning this 4th quarter.
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	<p>B. Create Integrated Continuum of Care for Youth: 85% completion - Ahead in ensuring access to crisis services across Wayne county and at 100% for all CRSP being on HIE platform. 15% behind overall: Continuing to work toward components that help coordinate care for children. Working with MDHHS to consult on children cases and explain options available, along with getting information on capacity issues as reported by providers</p> <p>C. Establish an effective crisis response system: 64% completion - Ahead in upgrading technology and ensuring access to crisis services. Overall 4% behind: Ahead in most areas but behind in regard to establishing out-of-home respite services for children.</p> <p>D. Implement Justice Involved Continuum of Care: 100% completion - There has been a lot of work with our Justice System. Even in the process of working with Oakland County to give Wayne County the same opportunity to receive behavioral health services through their MHC. As reported at the Board Study Session, our CIT program has received National Recognition as well as statewide.</p> <p>The Chair opened the floor for discussion. Discussion ensued. The Chair noted that the Strategic Plan Quality Pillar report has been received and placed on file.</p>
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X. Quality Review(s) -

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. QAPIP Work Plan FY 2021 Update – April Siebert, Director of Quality Improvement submitted and gave highlights of the QAPIP Work Plan FY 2021. Ms. Siebert reported that Q2 Performance Indicator data was submitted to the Michigan Department of Health and Human Services (MDHHS) on June 30, 2021. DWIHN did not meet the required MDHHS standards for two indicators during Q2. The indicators that were not met include #1 - The percentage of persons during the quarter receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours (Adult 92.74%) an overall rate of 94.08% and #10 – The percentage of readmissions of adults during the quarter to an inpatient psychiatric unit within 30 days of discharge (Adults 17.34%) an overall rate of 16.97%. DWIHN’s Access/Crisis team is working with COPE to review and request a Corrective Action Plan as required. DWIHN’s efforts to decrease hospital admissions and readmissions have been a challenge, especially during the COVID-19 pandemic. DWIHN seeks to reduce psychiatric inpatient admission and provide safe, timely, appropriate and high-quality treatment alternatives while still ensuring members receive the appropriate require care. Staff continues its’ efforts to expand the comprehensive continuum of crisis services, supports and improve care delivery. Discussion ensued. Eric Doeh, Interim CEO stated that he will meet with Ms. Siebert, Dr. Faheem, Chief Medical Officer, the Clinical Team and Mr. Hooper so that we will have a more robust report with a plan as to how we are tackling these issues to improve some of these indicators that we are behind in and report back to the committee. (Action) Dr. Taueg opened the floor for further discussion. There was no further discussion. The Chair noted that the QAPIP Work Plan FY 2021 Update has been received and placed on file.</p>
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XI. Chief Clinical Officer’s (CCO) Report

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Melissa Moody, Chief Clinical Officer submitted a full report and gave highlights on the Chief Clinical Officer’s report. Mrs. Moody reported:</p> <ol style="list-style-type: none"> 1. COVID-19 & Inpatient Psychiatric Hospitalization – Hospitalizations data showed a 7% increase in admissions for the month of June. There were two reported cases of COVID-19 inpatient in June 2021 (May 2021 – 11 cases). 2. COVID-19 Intensive Crisis Stabilization Services – There was a 10% increase in crisis stabilization services provided in June 2021 (366) compared to May 2021 (329). 3. COVID-19 Pre-Placement Housing – There were no pre-placement housing for the month of June 2021 (May 2021 – 22). 4. COVID-19 Recovery Housing/Recovery Support Services – There was a 79% reduction in the utilization of COVID-19 recovery homes in the month of June 2021 (6) compared to May 2021 (29). 5. COVID-19 Urgent Behavioral Health Urgent Care Sites – There was a 35% increase in utilization of Urgent Behavioral Health Urgent Care Services in June 2021 (45) compared to May 2021 (33). 6. Residential Department Report of COVID-19 Impact – There was one new COVID-19 positive member in June 2021 and no reported new deaths. There was no new COVID-19 positive cases and no reported deaths (the three reported deaths were from April 2020). 7. Vaccinations – Licensed Residential Homes – A combined total of 89.4% of members in licensed settings have been fully vaccinated (89.6% received at least one dose). 8. Vaccinations – Unlicensed Homes - A combined total of 65% of members have been fully vaccinated in unlicensed settings (66% received at least one dose). 49% were fully vaccinated last month. A combined total in congregate settings – 80.7% fully vaccinated and 81.1% received at least one dose. <p>Dr. Taueg opened the floor for discussion. There was no discussion. The Chair noted that the Chief Clinical Officer’s report has been received and placed on file.</p>
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XII. Unfinished Business

<p>DISCUSSION/ CONCLUSIONS</p>	<ol style="list-style-type: none"> A. BA #19-45 (Revised) – BO Mod 21990039 – Jail Navigator – Thomas Pettus – Staff requesting board approval of a time only extension of a contract to utilize carryover funds from a two-year Mental Health Navigator Pilot Program that utilized evidenced-based programs and best-practice principles to provide post-booking diversion for persons with mental health disorders who have misdemeanor offenses. Approximately \$50,000.00 remains on the contract and staff is requesting the funds to extend through December 31, 2021. Dr. Taueg opened the floor for discussion. There was no discussion. B. BA #21-23 (Revised 3) – Provider Network System – DWIHN’s Provider Networks – Staff requesting board approval to expand the scope of services for Genoa Healthcare, LLC formerly known as Advance Care to include an indigent pharmacy program for uninsured consumers. Due to his affiliation, Chief Riley abstained from voting on Chance for Life, National Council on Alcoholism and Drug Dependence (NCADD) and Hegira in BA #21-23 (Revised 3). Dr. Taueg opened the floor for discussion. There was no discussion. C. BA #21-60 (Revised) – Michigan Peer Review Organization (MPRO) – Board approved a \$20,000.00 increase in the initial \$45,000.00 contract due to DWIHN not having the availability of a psychiatrist for appeals and denials in March
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	<p>2021. Staff is requesting an additional increase of \$30,000.00 to the contract for the remainder of the fiscal year September 30, 2021 for a total contract amount of \$100,000.00. Due to his affiliation, Chief Riley abstained from voting on Chance for Life, National Council on Alcoholism and Drug Dependence (NCADD) and Hegira in BA #21-60 (Revised). Dr. Tauег opened the floor for discussion. There was no discussion.</p> <p>The Chair bundled the board actions and called for a motion on BA #19-45 (Revised); BA #21-23 (Revised 3); and BA #21-60 (Revised). Motion: It was moved by Dr. Carter and supported by Chief Riley to move BA #19-45 (Revised), BA #21-23 (Revised 3) and BA #21-60 (Revised) to Full Board for approval. Dr. Tauег opened the floor for further discussion. There was no further discussion. Motion carried.</p>
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XIII. New Business: Staff Recommendation(s)

DISCUSSION/ CONCLUSIONS	<p>A. BA# 21-64 – COVID-19 Mental Health Block Grant Supplemental Funding – The Chair called for a motion on BA #21-64. Motion: It was moved by Ms. Jawad and supported by Chief Riley to move BA #21-64 to Full Board for approval. Staff requesting board approval of \$1,545,000.00 for a 22-months contract for COVID-19 Mental Health Block Grant Supplemental outreach. Funding for Mental Health Connections, training, technology and outreach. The grant award and contract period are from June 1, 2021 through March 14, 2023. Dr. Tauег opened the floor for discussion. There was no discussion. Motion carried.</p>
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XIV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	<p><i>There was no Good and Welfare/Public Comment to review.</i></p>
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ACTION ITEMS	Responsible Person	Due Date
1. Chief Medical Officer’s Report – Provide more information on outreach for mental health and substance use for children and adolescents in next report	Dr. Shama Faheem	August 11, 2021
2. Corporate Compliance Report – Provide an update on Help at Hand and United Horizon investigation once it’s complete.	Bernard Hooper	TBD
3. QAPIP Work Plan FY 2021 Update – Provide a more robust report with a plan as to how we’re tackling to improve some of these indicators that we’re behind in and report back to the committee.	April Siebert, Clinical Team, Bernard Hooper, and Eric Doeh	TBD

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

ADJOURNED: 2:38 p.m.

NEXT MEETING: Wednesday, August 11, 2021 at 1:00 p.m.

Program Compliance Committee Meeting
Chief Medical Officer's Report
Shama Faheem, MD
August 11th, 2021



Behavioral Health Outreach

➤ **Mobile Outreach Services**

Launch of Integrated Mobile Health Services in Collaboration with Wayne Health during week of 7/6/21. We have started the program by having our clinician join Wayne Health's scheduled events where individuals will have the opportunity to be screened for behavioral health symptoms and will be connected with services at the same time. We are now working on the next phase, where we will be facilitating our own events targeting areas with overutilized hospital services as well as underutilized community programs.

Mobile Engagement as of 8/4/21

Events attended - 8

Education and meaningful conversations- 150 individuals

Follow-up email contacts- 3

Screening in the system- 1; *Scheduled appointment with CRSP (Team Wellness) and was seen for Intake/Biopsychosocial assessment within 4 days!*

- Outreach presentation through Detroit Department of Labor, for community workers as it relates to pandemic related unemployment as well as Return to Work anxiety, was very well received.

Children Outreach and Access:

DWPHN has been focusing on Outreach for youth mental health and SUD services. In the month of July:

- Youth United Outreach events: Youth United posts events on Social Media platforms.
- Youth United Stigma Busting Workshop: Big Brother / Big Sister
 - Youth Move Game Night
 - Courageous Conversations: Youth and Substance Use
 - Youth United is offering to fund 3 grants (each up to \$500) for youth lead project focused on leadership, advocacy and/or anti-stigma to youth groups or schools.
- Children's Initiative Department (CID) attended 3 community events to share information about Children's Services in Wayne County. Information and flyers for Children Services was provided and giveaways were distributed.
- CID and Communications Department created the School Success Initiative Flyer that explains about the school prevention services and will be distributed at various events.
- Awareness and Outreach billboard for Children Services
- DWPHN is utilizing Youth United to develop a video that explains the benefit of mental health services for adolescents who complete an anonymous mental health screening at DWPHN website.
- Our Mobile Units have been doing outreach and continues to provide information on Children services available through DWPHN as well as other resources.
- Workforce Development (WFD) Events: The Suicide Prevention Coalition hosted a Skate into Hope session on July 24th that saw 259 youth and families. The participants were able to receive skating admission and food as well as information on DWPHNs services and suicide prevention and risk/protective factors.

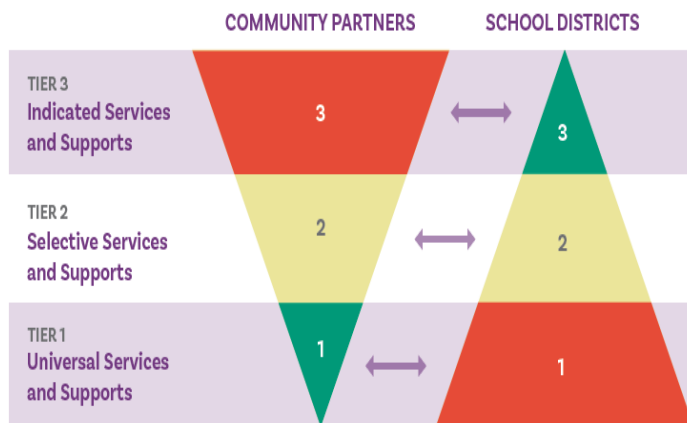
- Continued participation in Cody High School advisory board and Bridge program to support youth in understanding mental health. The students are supporting DWIHN staff in planning a community day for August.
- Back to School events with information on behavioral health and services.
- WFD participated in Trauma Awareness Subcommittee for county initiative for Black Boy Imperative through The Children Center which focuses on trauma and suicide.
- Summer Youth Employment Program: Workforce Development staff facilitated a training session to the high school students through WSU Biomedical Career Advancement Program (BCAP) on suicide prevention, human trafficking, and strategies to help maintain mental wellness. The Workforce Development also continued to assist with mentor session facilitation for them. Workforce Training and Program Development department mentored 9 students that were taught a curriculum about subjects surrounding mental health, social skills, and personal development.
- Our Substance Use Department has continued their Outreach and Prevention in terms of Provides awareness and knowledge of the nature and extent of alcohol, tobacco, and substance use and misuse use, and addiction, and the effects on individuals, families, and communities, creating and attending community events, Utilizing Social Media, Distributing Brochures or Pamphlets.
- DWIHN continues to partners with MDHHS in ensuring that formal Synar compliance checks are conducted each year with the intent of lowering youth use of tobacco rates.

In addition to awareness, DWIHN is focusing on ensuring timely availability of children services, especially during times of staffing shortages. DWIHN has initiated a Capacity Reporting form (collaboration among Children’s Initiative Department, Managed Care Operation, IT, and Crisis departments) for Children providers to identify and resolve delays and capacity challenges.

Children’s Department is working with the IT Department to identify Individuals in services to provide iPad/laptops for needs such as: 1). Receiving telehealth services, 2). Able to use for school support for summer school, 3). Young Adults using for transition into work and or college, 4). Independent Learning, 5). Kids in foster care in between homes. Also considering awarding technology to winners of the Youth Summit and Spotlight Awards this summer.

School Success Initiative (SSI):

Medical Director Reviewed the elements and flow of DWIHN’s School Success Initiative and compared it with the National models and evidenced based practices in this area. Comprehensive school mental health system (CSMHS) as defined by the National Center for School Mental Health (NCSMH) and partners provides a full array of supports and services that promote positive school climate, social and emotional learning, and mental health and well-being, while reducing the prevalence and severity of mental illness. Core features of CSMHS infrastructure include: 1) well-trained educators and specialized instructional support personnel, 2) family-school-community collaboration and teaming, 3) needs assessment and resource mapping, 4) multi-tiered systems of support, 5) mental health screening, 6) evidence-based and emerging practices, 7) data, and 8) funding.



Tier 1 focusing on promoting mental health and preventing occurrences of problems
 Tier 2 focusing on preventing risk factors or early-onset problems from progressing to next Tier; Prevention programming based on child's need
 Tier 3 focusing on individual student interventions that address more serious concerns and prevent the worsening of symptoms that can impact daily functioning-referred to DWIHN
 Professional development and support for a healthy school workforce as well as family-school-community partnerships are foundational elements that support these three tiers.

Strengths:

- DWIHN and its providers are using Evidence based model. They are using Michigan Model for Health Curriculum (used by Wayne RESA) which incorporates the 8 elements mentioned above as well as the 3-tiered approach and are in line with the National Center for School Mental Health (NCSMH) and American Academy of Pediatrics recommendations for school-based behavioral health services.
- Approximately 11 children providers and 73 schools have engaged with increasing interest.
- Measurable outcomes monitored on quarterly basis such as the trainings and education provided to school professionals and students, number of students engaged, screenings completed, pre and post intervention scores, as well as changes in grades, tardiness, attendance.
- CID met with IT Department to add SSI features to MHWIN (referrals, outreach, engagement, open cases, etc) which can potentially improve data monitoring.

Opportunities for Improvements:

- More direct involvement of DWIHN in the initiative: We discussed developing and providing some components of the model on our own.
 - We plan to work on developing trainings that can be provided to school professionals. This can be helpful not only to assure that they are updated and evidence-based but will be more consistent and uniform and will be subject to closer DWIHN oversight.
 - We will increase collaboration within other departments in our organization such as Workforce Development, to identify resources where we will be able provide some of the Tier-1 education and outreach events ourselves such as Smoking, Bullying, Suicide prevention.
 - DWIHN plans to participate more directly in the outreach, identification and school recruitment. Children’s team will work on building relationships with other School District Superintendents to support the School Success Initiative in various school districts within Wayne County.
- Understand, address and improve the decrease in School based services during pandemic year.
- Increase collaboration with other health systems who are providing similar initiatives to schools.

Quality Improvement

- Working closely with Quality department to improve DWIHN scores on State measured Performance Indicators
- Working closely with Quality Department to analyze DWIHN’s performance on HSAG Review, working on areas/department with identified weakness and being proactive for next Review cycle.

- Performance Improvement Projects (PIPs): DWIHN's continues to work collaboratively and aggressively to address PIP measures and HEDIS scores. We continue to send quarterly Memos to the Medical Directors about the best practices on use of antipsychotics, avoiding multiple antipsychotics and close monitoring of the associated side effects. Other PIPS are being closely evaluated and interventions being modified or updated as necessary. Goals is to aggressively work on interventions in real time and improve measures and outcomes. We have been working on incorporating new PIPs that involve National and State-wide initiative such as developing PIP for Hepatitis C screening and treatment which is in line with MDHHS "We Treat Hep C" Initiative.



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**CORPORATE COMPLIANCE
MEMORANDUM**

TO: Dr. Cynthia Tauег, Chairperson
Program Compliance Committee

FROM: Bernard K. Hooper
Corporate Compliance Officer

DATE: August 11, 2021

RE: **REPORT TO PROGRAM COMPLIANCE COMMITTEE**

1. **OIG Quarterly Reports** – Corporate Compliance has submitted quarterly reports for the three (3) prior quarters. OIG MDHHS has requested inquiries regarding the four (4) categories of investigations reported. However, DWIHN has successfully responded to the request with an explanation of the irregularity of category reporting. All quarterly reports have been accepted.

Board of Directors

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Detroit Wayne Integrated Health Network (DWIHN)
 3rd Quarter Report
 April 21 to June 2021
 Contract Management --Manage Care Operations (MCO)

Managed Care Operations

Contract Managers and Providers:

It is that time again, DWIHN is expected to process over 300+ contracts with for Fiscal year 2022. The network is comprised of an efficient and effective number of providers that improve the quality of life for all of our consumers.

Effects of COVID-19 on the Providers:

Closure recap for the 3rd Quarter there were 6 closure for this quarter. The closures below year to date also contain unlicensed settings called Semi-Independent Living also known as SIL's.

Summary of Closures:

Closure Type	Count of Providers	Service Type	Count of Providers
Closed Business	3	Advocacy Provider	2
Closed Business	1	Autism Center Services	3
Closed home/Provider Consolidation to another home	5	Licensed home/provider Personal Care and CLS services	11
Closed site	14	MI Health Link ONLY -Psychiatry, med mgt, psychotherapy, ps	1
Contract Non- renewal	4	outpatient provieder	1
Merger with another provider	3	Proivder-- Merger	1
outpatient provider advocacy program	1	Skill Building Services/supported employment	4
Temporary closure of service/Intake	1	Staffing agent- cls/respice	2
(blank)		Temporary close -IDD intake services	1
Grand Total	32	Unlicensed Homes	6
		(blank)	
		Grand Total	32

Year 2021	Count of Provider
1st Qtr	16
2nd Qtr	1
3rd Qtr	6
4th Qtr	9
(blank)	
Grand Total	32

Breakdown:

- 3 Licensed homes or location closures, provider retiring, home consolidation and staffing shortages.
- 1 provider contract termination
- 1 unlicensed setting closed, landlord sold home.
- 1 provider temporarily closed due to staff -COVID-19 concerns



SERVICE AVAILABILITY – PROVIDERS:

Although COVID-19 affects our network at every level, we continue to receive new residential and outpatient providers requesting to become part of our network.

NEW PROVIDER /NEW PROGRAMS:

Although we do not have any new providers that have been added to the network. We continue to have providers that have been approved to add services to their current array of services. Community Living Services is now providing registered nursing services, and wraparound services. Detroit Recovery is providing a wide range of Mental Health services.

Provider and Practitioner Survey for September 2021

We are expected to launch our annual Provider/Practitioner Survey in September. We have reviewed last year FY 2020 survey results and have a solid plan this year to distribute the survey again this year with the added improvements that were made. This survey allows us to gain a better understanding of how we can support and maintain a strong provider network that will provide high quality supports and services to our members.

Goals for Future Improvements:

- Improve relationships with providers through training and communication.
- Standardize our contract process within our system.
- Train providers on cost efficiency, home help monitoring and the IPOS.
- Monitor compliance and non-compliance providers in regards to timely billing and proper utilization of service codes.
- Ensure our compliance and network adequacy with state regulations based on members served to the number of practitioners.

Provider /Training Meetings Held:

We have scheduled out for the rest of the calendar year and beyond the Outpatient and Residential Provider Meetings: April 30th, June 11th, July 23rd, September 3rd and October 15th (10am-12:30pm) Virtual meeting.

Meetings are held every six weeks for Outpatient and Residential providers going forward. All meetings going forward until further notice will be Virtual with the providers and practitioners.

Submitted by June White 6/30/21



FY 2020-21 Department Summary: Quarter #3
Residential Director, Shirley Hirsch, LMSW
Report Date Range: 10/1/20 – 7/31/21

Residential Assessment Productivity

		Q1	Q2	Q3	TOTALs
2020	Requests Received	613	643	442	1,698
2020	Completed Assessments (SALs)				
2021	Requests Received	944	772	630	2,346
	Completed assessments (SALs)	343	260	236	839
	Assigned In-Home Assessments	358	115	---	473
	Returned/Cancelled requests	128	251	225	604
	Cases for Brokering only	115	146	153	414
	Requests awaiting completion	0	0	16	16
	AMI Requests	656	606	475	1,737
	IDD Requests	288	166	155	609
	In-home Assessments	358	115	---	473
	Out of County	1	1	---	2
	Inpatient Hospitals	249	287	299	835
	Emergency Departments	39	25	38	102
	CRSP	223	247	236	706
	Youth Aging Out (DHHS)	5	8	3	16
	COPE (pre-placement facilities)	28	39	16	83
	Crisis Residential	21	33	26	80
	Nursing Homes	20	17	12	49

Referral Outliers

- Significant increase of IDD consumers ages 18-25 entering the community from family homes
- IDD consumers initially under self-directed services returning to specialized facilities: **30 requests received for current fiscal year**
 - 5 of these cases confirmed to no longer choose self-directive services, continuing under specialized residential settings.
 - The department continued to coordinate development of a process flow for typed referrals and will continue to monitor and track for monthly/quarterly reporting.
- 9 residential facility closures
- **DWIHN Contract termination of United Horizons, Inc.:** 221 IDD consumers relocated from SIL/SIP facilities other residential placements; and re-assignment of staffing agencies for clients receiving outpatient CLS services.

Service Authorizations

	Q1	Q2	Q3	TOTALs
2020	612	905	458	1,975
2021	1,984	2,863	4,172	9,019
Auth requests COMPLETED	1,526	2,235	3,348	7,109
Internal Requests (residential staff)	86	115	103	304
Requests returned to CRSP	372	513	721	1,606
Interim IPOS (Entered by team)	502	561	490	1,553
MHWIN Queues requests	1,317	2,102	3,394	6,813
AMI Requests	1,051	1,206	1,085	3,342
IDD Requests	870	1,611	2,984	5,465

Authorization Team Projects

- **H2X15/T2X27 Authorization Process** (4/29/21)
- **IDD Residential Unlicensed Home Provider Meeting** (4/1/21)
- **HAB Waiver Authorizations (T2X27):** 256 of 983 H2X15/T2X27 authorizations approved.
- **CRSP Authorization Process Training;** Authorization training requested by CNS Healthcare/Northeast Integrated Health (4/15/21)
- **Claims Cube Training** (4/9/21 and 6/22/21)
- **General Authorizations:** Continuation of H2X15/T2X27 authorization transition, effective 4/1/21
- **24-Hour Staffing CLS Unlicensed Homes Project:** Authorizations review CLS Clinical Director (5/10/21, 5/11/21, 5/17/21, and 5/21/21); **175 authorizations** were reviewed
- **24 Hour Staffing CLS Unlicensed Homes Project:** (6/10/21) 107 authorizations
- **CRSP Authorization Process Training:** Authorization training requested by All-well Being Services (5/24/21)

COVID-19

Reported Cases/Deaths

		Q1	Q2	Q3	TOTALs
2021	COVID-19 Positive Cases	---	---	161	160
	COVID-19 Deaths	---	---	31	31
2021	COVID-19 Positive Cases	56	62	53	171
	COVID-19 Deaths	1	0	6	7

- 53 COVID-19 positive cases reported in this year's 3rd quarter
 - (41) DCW Staff positive cases; no related deaths
- 1 (consumer) death reported since May 2021

Quarantine Facility Utilization

- Downsized quarantine facilities to 5 (12 beds) due significant decline in case referrals
- **55 consumers serviced** in quarantine facilities for 3rd quarter
- Average length-of-stay: **16.2 days**

Vaccination Reporting

	<u>LICENSED</u>				<u>UNLICENSED</u>			
	City of DETROIT		Western Wayne		City of DETROIT		Western Wayne	
# of CONSUMERS REPORTED	729		1,364		152		993	
FULLY VACCINATED	646	88.61%	1,231	90.25%	90	59.21%	669	67.37%
Consumer/Guardian REFUSALS	71	9.74%	115	8.36%	59	38.82%	298	30.01%
ADDITIONAL INFORMATION needed from Provider	4	0.55%	3	0.88%	0	0.00%	4	0.40%
REMAINING to be SCHEDULED / Scheduling BARRIERS	1	0.14%	11	0.44%	3	1.97%	22	2.22%
<i>Percentage Remaining to Verify Vaccination Status</i>	0.69%		0.44%		1.97%		2.62%	

- **Vaccination Barriers:** Most updates were leisurely returned from providers, resulting in multiple reminders to return the status updates due: clients not having personal IDs, adamant refusals, residents failure to be present for the vaccine (i.e. hospital admission, transient), declining to keep scheduled appointment, psychiatric diagnosis (paranoia, delusions, etc.), vaccines not recommended by PCP, or COVID-19 positive test result (requited to 90 days), or guardian refusals.
- **Solutions:** Assigned staff working with Detroit Health Department (Heather Rinkevich, Communicable Disease Investigator), to inquire on assistance that could be provided by the DHD discussing how a collaboration between our departments could benefit the residents of residential settings and we collectively reached out to our administration.
- **Idea:** DHD would educate the residents and DCW staff about the COVID-19 vaccines via their designated team. If the residents elected to obtain the vaccines the DHD would vaccinate interested individuals via their vaccination team after consents were signed and collected (DHD has consents).
- **Update:** Assigned continues to work with Elise Gronstad (DHHS Outreach unit leader) to schedule residential facilities for COVID-19 education from list of providers submitted on 6/28/21. Scheduling will begin this week and in-home education to beginning the week of 7/5/21.

3rd Quarter Completed Process Implementations

Residential Assessment Development

- Completion of process flow for with feedback from residential staff prior to implementation
- Training completed for Oakland County on the completion of the Residential Assessment to help them understand our assessment and to see if it would be a useful tool for them with their residential entity.
- Direct CRSP refresher trainings (held monthly) and one-on-one support with supports coordinators of CLS, MORC, NSO, and Wayne Center to assure proper completion of the assessment for assigned IDD clients.

Residential Review Committee

- Process work flow and training completed on April 29th
- Residential Review Committee's inaugural meeting met on May 14th to discuss the process and procedure for reviewing cases
- First case review completed June 15th.

Department Meetings/Trainings

- **CRSP/Residential Services Monthly Meetings:** A total of **48 CRSP meetings** completed for 3rd Quarter (only 4 CRSP meet every 2 months). (8) cancellations due to schedule barriers:
 - *Residential Committee Review process and presentation training (April 29th)*
 - *Newly implemented federal holiday: Juneteenth (6/18)*
 - *Lack of CRSP availability for attending*
- **DWIHN Residential Review Committee Process:** 2 sessions on Thursday, April 29th on the new process of DWIHN requests to change level of care of clients residing in a specialized licensed or unlicensed setting. Trainings held virtually on Bluejeans.com; confirming a total of **230 Attendees:**
 - *IDD - 10 AM (139) and*
 - *AMI - 2PM (91)*

Department Goals

Staffing

- Residential Care Specialist Harriett Siddiqui (April 5th)
- Residential Care Specialist Ashley Tomaszewski (April 19th)
- Residential Care Coordinator Samreen Bukhari (June 14th)
- HR to repost (1) Residential Care Coordinator and (1) Residential Care Specialist positions.

Automated Productivity Reporting

- Residential department obtained licensing for adobe publishing for development of department reporting forms and documentation for external providers, implementing the following;
 - *Residential Care Specialists reporting*
 - *Specialized facility closures*
 - *In-home Assessment with CPT rate comparison*
 - *Residential Care Coordination spreadsheet for brokering placements*
 - *Residential Vacancy reporting*
- **Residential Hospitalization Penetration reporting:** to capturing clients inpatient that have receive specialized residential services within 30 days of hospital stay. Report confirms residential clients inpatient throughout current fiscal year is less than 2% of overall hospitalizations to date.
- **Claims Cube:** the department staff received training for the new Claims Cube and will continue to review with IT as to how it can assist with real-time reporting accuracy.
- Continued reformatting of productivity report to monitor timeliness and response to service request
- Establish residential guidelines to evaluate specialized utilization functions



Detroit Wayne Integrated Health Network (DWIHN)
3rd Quarterly Report FY 21
April to June 2021

WHAT WE DO IN THE SUBSTANCE USE DISORDER DEPARTMENT (SUD)

DWIHN coordinates prevention, treatment and recovery efforts for Wayne County residents. Our data collection shows that heroin and alcohol use are higher in our region, and while some areas experience greater consequences, use and associated problems are spread throughout the region. DWIHN believes that there is a continued need for SUD education and having a recovery -oriented system of care.

The drug problem escalated and it was a need to create new innovative initiatives that addressed Heroin/Opioid addiction in the Detroit Wayne County area. DWIHN is dedicated to reducing the number of accidental overdose deaths due to opioids. DWIHN continues to train the community on how to reverse an opioid overdose. To that end, providers, law enforcement, community organizations may now request naloxone trainings via DWIHN website by completing the form on the following link: <https://app.smartsheet.com/b/form/172e55fa4bde4bfd88d99b088bdaebb4>

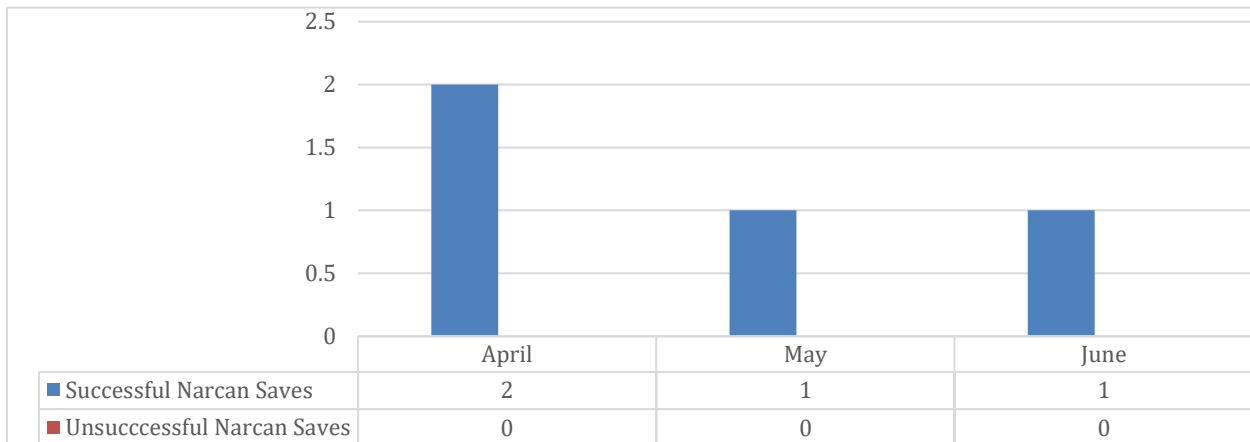
Naloxone Initiative Update

DWIHN’s Naloxone Initiative program has saved **768** lives since its inception and up to July, 2021.

During January to March 2021 DWIHN provided **5** Naloxone trainings

Naloxone Saves in Region 7 from 3rd Quarter of FY21

Month	Successful Narcan Saves	Unsuccessful Narcan Saves
April	2	0
May	1	0
June	1	0
Total	4	0

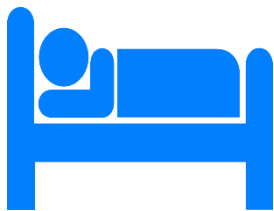


Narcan Trainings for April- June

Month	Number of trainings
April	63
May	73
June	188

The medical examiner's data suggest that drug-related deaths continued to decline, even with a spike during the first wave of the COVID pandemic. The decline in several deaths was evident among Whites; among African Americans, the number of deaths increased. Detroit location accounts for over half of the deaths in Wayne County. Males account for 70% of the deaths. Few adolescents died. However, there continued to be a different age distribution by race among the decedent. Fentanyl continues to be the predominant cause of death, overall, and Cocaine is second, followed by heroin as the third cause of death.

In the Third Quarter the SUD Providers Served:



17,890
DAYS OF RESIDENTIAL TREATMENT



1,128
OUTPATIENT VISITS



15,671
RECOVERY HOUSING



143,708
NUMBER OF PREVENTION SERVICES

We offer a range of evidence-based treatment services that provide hope and educate individuals on the harmful effects of drugs. Addiction is a disease that can strike people from all walks of life,

and it exposes people to danger and destroys families. It can be swift and cruel slide into a life of despair and increasingly premature death. Without treatment, people face small odds that they will recover

Mobile Units



DWIHN has two providers that provide mobile unit services: SUD screenings for services, referrals to treatment, peer services, drug screenings, therapy and relapse recovery services, Naloxone trainings and distribution, Rapid HIV testing, Medicaid Eligibility assistance, SUD Counseling, Temperature Checks, Nicotine patches, Hygiene Packages, Nutritional Information (Healthier Choices), Clothing, Sleeping Coat Bags, Needle Exchange and PPEs.

- 314 consumers served by mobile units
- 34 referrals made to SUD treatment by mobile units
- 3 drug screens by mobile units
- 64 individual therapy sessions by mobile units
- 149 peer support activities by mobile units
- 77 naloxone kits distributed with SOR funding by mobile units
- 3 naloxone saves reported from naloxone distributed by mobile units
- 16 Rapid HIV Testing
- 19 Enrollment for Medicaid Benefits
- 8 Screening and Referral to SUD services
- 16 Temperature Checks
- 9 Nicotine Patches
- 84 Needle Exchanges
- 76 Personal Protection Equipment (PPEs)

Opioid Health Home

The purpose of the Opioid Health Homes initiative is to coordinate care for Medicaid beneficiaries with serious and complex chronic conditions while serving the whole person by integrating and coordinating physical, behavioral and social services. Our goals are to integrate care, generate cost-efficiencies and increase health status for our consumers.

DWIHN has three overarching goal for OHH programs:

- 1) Improve care management beneficiaries with opioid use disorders, including Medication Assisted Treatment.
- 2) Improve care coordination between physical and behavioral health care services and
- 3) Improve care transitions between primary, specialty, and inpatient settings of care.

A Potential Beneficiary is identified.

DWIHN and the OHH providers ensures the Potential Beneficiary qualifies for the OHH service.

- ✓ Has an Opioid Use Disorder Diagnosis.
- ✓ Lives within the OHH Geographic Area.
- ✓ Has full Medicaid and is not already in an excluded Health Plan.

Providers have enrolled **124** individuals.

The following core health home services have been rendered to the beneficiaries.

April-June 2021

Care Management 67

Care Coordination 17

Health Promotion 21

Comprehensive Transitional Care 2

Individual and Family Support 0

Referral to community and support services 44

ASAM CONTINUUM

The 1115 Medicaid Waiver requires that ASAM CONTINUUM is the sole SUD Assessment tool needed by all SUD providers who serve Medicaid eligible clients to implement. Therefore, it is expected that each PIHP will ensure the assessment tool is fully operational by October 1, 2021. To ensure all providers are ready to launch on October 1, the SUD Department will work simultaneously with our IT Department to oversee and develop a strategy that will support our provider network, the call center, and our utilization management departmental needs at the highest level possible. There were a total of 299 clinicians who registered for the ASAM CONTINUUM training.

DWIHN provides the following harm reduction strategies in the community as appropriate to the audience: access to Naloxone, peer support, latex condoms, fentanyl strips and deterra bag distribution.

Deterra bags provide a convenient, discreet, environmentally and socially responsible method for getting rid of unused, unwanted, or expired prescription pills, liquids, and patches. Medications are deactivated, rendering them ineffective for misuse or abuse. The biodegradable bags contain an activated carbon that breaks down chemical compounds in the drugs, making them safe for landfill disposal.

Fentanyl testing strips detect the presence of fentanyl and many of its known analogs in a drug sample. Fentanyl and its analogs are highly potent synthetic opioids largely responsible for the increase in heroin-related fatalities. Fentanyl has been found in counterfeit pharmaceutical pills as well as cocaine and other drugs. Fentanyl and various fentanyl analogs are highly potent synthetic opioids between fifty and many hundreds of times stronger than heroin.

Latex Condoms aid in addressing the increasing number of substance abusers contracting communicable diseases due to unprotected sex and having unwanted pregnancies as a result of making poor choices.

Sleeping Bag Coats Initiative distribution has been increased to include more providers that are connected with the homeless populations.

A total of 14 coats have been distributed and/or received April – June 2021

Distribution for Sleeping Coats

Number of Coats	Month
4	April
5	May
5	June

Prevention services include a series of innovative activities. The Men’s Rap Barbershop Talk Tour initiative is ongoing. Topics include Health Disparities, Uniting to Make Our Community Better, Men’s Health Issues, Male Responsibilities, Substance Use and Abuse, Police Brutality and Minority Mental Health. In addition, individuals received resources to services including DWIHN’s My Strength App. In the month of March Barbershop presentations were conducted at 4 locations in Wayne County serving

Barbershop Name	Location
Liberian Hair Cut	21411 Fenkell, Detroit, 48238
Phat Head Barbershop	22246 Fenkell, Detroit, 48238
Familiar Faces	16024 Woodward, Detroit, 48203
The Barber Station	2635 Gratiot, Detroit, 48207

COVID Report (April – June 2021)

	Prevention	Treatment
<i>Number of Staff Positive</i>	4	1
<i>Number of Clients Positive</i>	7	5
<i>Number of Deaths</i>	1	0

STRATEGIC PLAN: CUSTOMER PILLAR REPORT - PCP MEETING – August, 2021
M. Vasconcellos, Director Customer Service

This pillar involves the collaborative efforts of Customer Service, IT, Network Management, Credentialing, Self Determination and Utilization Management. **Overall, this pillar is currently at 92% completion. Previous reporting on this pillar last May, was 87%.**

Goal 1. Enhance the Provider Experience. (12/31/2021) - Previous 78% - Current Completion 82%. We are on Target with this goal. Under this goal the focus is on:

- **Ensure Provider Satisfaction: Conduct survey, analyze results of our annual Provider Satisfaction survey and make applicable recommendations.**
The provider/practitioner survey was distributed late September 2020. It was analyzed in January 2021. A full report was presented to PCC and QISC, there is room for improvement of the survey in which an Adhoc meeting was held in January to discuss next steps and ways to improve. New survey to be distributed in Sept. 2021,
- **Improve level of support by conducting regularly scheduled system training across provider networks:**
A new care coordination platform is going to be piloted with providers along with HEDIS quality measures to ensure we are providing care in a holistic fashion and using a outcomes and data driven approach.
- **Provide tools and support to ensure providers have more meaningful experience:** Additional tools are being evaluated to improve user experience by leveraging technology including availability of desk phone on the mobile as well as laptops to be able to support the network. Providing network providers ability to access and manage staff trainings through self-service portal. Created online service requests for new staff along with provider enrollment. MHWIN Disenrollment module created and piloted with 3 CRSP providers. Full implementation AUGUST 2021.

Goal 2. Ensure Inclusion and Choice for Members. (9/30/2020)- Previous 92%- Current Completion 97%. We are still behind on this goal. Under this goal the focus is on:

Building an infrastructure to support implementation of Self-determined/ PCP/Shared decision making: *All components for all members to self- direct their services are in place at DWIHN. DWIHN has completed their infrastructure to support anyone who receives services to Self-Direct services.*

- **Develop components to support the Self- Determination by enabling individualized budget agreements in MHWIN system along with the standardized IPOS:** *The individual budget is now available in production mode within MHWIN.onference*
- **Trained CRSP Provider who have individuals transitioning to Self-Determinations.** Still addressing other opportunities to build competencies and skills of network regarding Self- determination. Since June 2021 conducting Self- determination team meetings. Promoting August, MDHHS Self Determination conference with provider network.

Goal 3. Improve Person's Experience of Care and Health Outcomes. (12/31/2021) - Previous 73% Current Completion-87%. We still are on target with this goal. Under this goal the focus is on:

- **Delivering information about providers and practitioners in appropriate formats.** Printable and online versions of Provider directory have been completed. The online directory was successfully launched with options to search information across providers as well as practitioners within our system. Provider and practitioner information is now shared over the online electronic directory that addresses weekly updates from several data sources.
- **Updating and distribution of Provider Directories and Member Handbooks.** Has been completed.

Identifying opportunities to improve member satisfaction via Adult and Children Member surveys. Both ECHO Surveys have been completed, analysis has been finalized and presented to Quality committee for recommendations for process improvements.

Ensuring access to Recipient Rights and ensuring individuals are placed in a least restrictive environment. Previously reported: The addition of the Psychiatric inpatient care facilities i.e. Community Care Services, Northeast Integrated Health and Trauma Violence Crisis Stabilization units have been implemented and

are offering additional options for hospital inpatient diversions. Re-assessing capacity needs based on current data and community stakeholder feedback. DWIHN's Crisis unit has been meeting with Residential and MCO units to identify home respite bed and homes that will accept high acuity behaviors. DWIHN has added 12 Diversion beds to the network and there are 2 pending. The Residential Unit has secured 18 out of home respite beds for adults.



August 11, 2021

Strategic Plan – CUSTOMER PILLAR

Program Compliance Committee Status Report

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To our board members:

Our commitment to social responsibility includes a dedication to transparency, collaboration and stakeholder engagement as a core component of our business and sustainability strategy, our monthly reporting process, and our activities within the county.

Our Strategic Planning Status Report is our report to our board members. It tells how we are performing against key indicators that measure our performance against the Access, Customer and Quality Pillars and impact in the areas that matter most to our stakeholders.

Pillar Dashboard Summary



There are three (3) pillars that are under the governance of the Program Compliance Committee: Access, Customer and Quality.

Summary of Pillar Status

Access Pillar is presented under the leadership of Jacquelyn Davis, Director of Access and Crisis Services. Overall, we are at 77% completion on this pillar. There are four (4) goals under this pillar. They currently range from 47% - 96% completion.

Title	Completion
Create infrastructure to support a holistic care delivery system (full array) by 30th Sep 2022	47%
Create Integrated Continuum of Care for Youth by 30th Sep 2022	85%
Establish an effective crisis response system by 30th Sep 2022	79%
Implement Justice Involved Continuum of Care by 30th Sep 2020	96%

Quality Pillar is presented under the leadership of April Siebert, Director of Quality. Overall, we are at 70% completion on this pillar. There are four (4) organizational goals. They range from 54% to 95% completion for the high-level goals.

Title	Completion
Ensure consistent Quality by 30th Sep 2022	54%
Ensure the ability to share/access health information across systems to coordinate care by 31st Dec 2021	95%
Implement Holistic Care Model: 1 unit by 31st Dec 2021	55%
Improve population health outcomes by 30th Sep 2022	74%

Customer Pillar is presented under the leadership of Michele Vasconcellos, Director of Customer Service. Overall, we are at 92% completion on this pillar. There are three (3) goals under this pillar. They range from 82% - 97% completion.

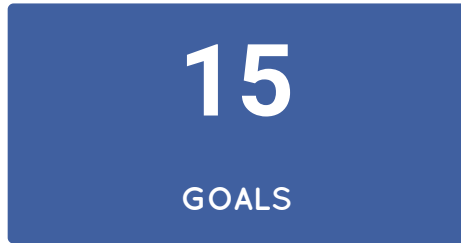
Pillar
92%
Customers

Title	Completion
Enhance the Provider experience by 30th Sep 2022	82%
Ensure Inclusion and Choice for members by 30th Sep 2021	97%
Improve person's experience of care and health outcomes by 30th Sep 2022	87%

A detail report of this pillar will follow.

Customer Pillar
Detailed Dashboard
Program Compliance Committee Meeting

August 11, 2021



● Draft ● Not started ● Behind ● On Track ● Nearly There ● Overdue ● Complete → Direct Alignment --- Indirect Alignment

DWIIHN FY 2020 - 2022 STRATEGIC PLAN PLAN CUSTOMERS

Goal	Owner	Task	Update	Current Completi...
Enhance the Provider experience	- -		<p>June White: The provider/practitioner survey was distributed late September 2020. It was analyzed in January 2021. A full report was presented to PCC and QISC, there is room for improvement of the survey in which an Adhoc meeting was held in January 22 to discuss next step and ways to improve. <i>01/25/2021</i></p>	<p>82% 13% ahead</p>
→ Ensure 80% Provider satisfaction: 100%	June White Director of Network Management	Analyzed Survey	<p>✓ NEW Allison Smith: FY 2021 Provider Satisfaction Survey will be going out in September (Practitioner and Provider Organizations). <i>08/06/2021</i></p>	<p>73% 72.77 / 100% 19% behind</p>
→ Improve level of support by conducting regularly scheduled system training across network: 100%	Manny Singla CIO		<p>Manny Singla: A new care coordination platform is going to be piloted with providers along with HEDIS quality measures to ensure we are providing care in a holistic fashion and using a outcomes and data driven approach <i>01/28/2021</i></p>	<p>85% 85 / 100% 3% ahead</p>

<p>↳ Provide tools and support to ensure providers have more meaningful experience: 100%</p>	<p>Manny Singla CIO</p>	<p>NEW Nasr Doss: A lot of enhancements have been implemented to MHWIN to ensure providers have more meaningful experience, the disenrollment module is one of them that assist providers in following the re-engagement policy on a timely manner. 3 Pilot providers concluded a testing of the module and full implementation is scheduled for the month of Aug 2021. <i>08/04/2021</i></p>	<p>88% 88 / 100% 6% ahead</p>
<p>Ensure Inclusion and Choice for members</p>	<p>Lucinda Brown Self Determination Network Provider Program Administrator</p>	<p>Lucinda Brown: All components for all members to Self-Direct their services are in place at DWIHN. <i>01/25/2021</i></p>	<p>97% -</p>
<p>↳ Build infrastructure to support the implementation of Self Determined/PCP/Shared Decision Making: 100%</p>	<p>Lucinda Brown Self Determination Network Provider Program Administrator</p>	<p>Lucinda Brown: DWIHN has completed the infrastructure to support anyone who receives services to Self-Direct their services. <i>01/25/2021</i></p>	<p>100% 100 / 100% -</p>
<p>↳ Develop components to support the Self Determination by enabling individualized budget, agreements in the MHWIN system along with standardized IPOS: 100%</p>	<p>Lucinda Brown Self Determination Network Provider Program Administrator</p>	<p>Lucinda Brown: The individual budget is now available in production mode within MHWIN. <i>01/25/2021</i></p>	<p>100% 100 / 100% -</p>
<p>↳ Increase the competencies around Self Determination, Shared Decision Making and Person Centered Planning: 100%</p>	<p>Andrea Smith Director of Workforce Development</p>	<p>NEW Lucinda Brown: Beginning June 23, 2021, the Self-Determination Team holds weekly Welcome Sessions every Wednesday to provide education, information, and answer any questions regarding Self-Directing Services. MDHHS will be offering a Self-Determination Conference next month which will be shared with our provider network. <i>07/28/2021</i></p>	<p>86% 86 / 100% 1% behind</p>
<p>↳ Offer Self-Determination and Self-Directed Arrangements across all populations served.: 100%</p>	<p>Lucinda Brown Self Determination Network Provider Program Administrator</p>	<p>Lucinda Brown: The final component (budgets) for self-directing services was completed this past quarter in MHWIN. DWIHN now has the infrastructure to assist any member to Self-Direct their services. <i>01/25/2021</i></p>	<p>100% 100 / 100% -</p>
<p>Improve person's experience of care and health outcomes</p>	<p>- -</p>		<p>87% 49% behind</p>
<p>↳ Deliver information about Provider Sites and Practitioners in appropriate formats: 100%</p>	<p>Michele Vasconcellos Director of Customer Service</p>	<p>NEW Manny Singla: Provider and practitioners information is now shared over the online electronic directory that gets feedback in terms of weekly updates from several data sources <i>06/18/2021</i></p>	<p>100% 100 / 100% -</p>

→ Ensure 80% member satisfaction: 100%	Michele Vasconcellos Director of Customer Service			100% 100 / 100% -
→ Ensure Access to Recipient Rights	Polly McCalister Director of Recipient Rights	Determine number of children served	<input type="checkbox"/>	83% 11% ahead
→ Ensure Access to Recipient Rights	Polly McCalister Director of Recipient Rights	Determine number of children served	<input type="checkbox"/>	73% 2% ahead
→ Ensure individuals are placed in the least restrictive environment	Jacquelyn Davis Director of Access and Crisis Services			82% 18% behind

NEW Jacquelyn Davis:
 DWIHN has added 12 Diversion beds to the network and there are 2 pending. The Residential Unit has secured 18 Out of home Respite beds for Adults.
 08/05/2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-01 R Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Northeast Integrated Health

Contract Title: Jail Diversion

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 1,005,000.00 Previous Fiscal Year: \$ 903,363.00

Program Type: Continuation

Projected Number Served- Year 1: 2,090 Persons Served (previous fiscal year): 4299

Date Contract First Initiated: 6/10/2004

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 revised Board Action is requesting approval to increase funding for Team Wellness and Northeast Integrated Health for an amount not to exceed \$350,000 per provider from the original \$300,000 per provider. The request is for the expansion of the co-response team into additional precincts with increased staff.

Funding for other Providers in the Jail Diversion Program remains the same: Central City Integrated Health for Homeless Outreach \$225,000; and City of Southgate 28th District Court Regional Veterans Treatment Court \$80,000. The total allocation for all programs is for an amount not to exceed \$1,005,000.

The scope of this contract is to work with the new Detroit Homeless Outreach (DHOT) pilot project, to bridge the gaps that exist between the police, homeless, and the service providers. The collaboration between the City of Detroit, homeless outreach providers and behavioral health providers will bring DWIHN closer to the goal of getting more people off of the streets by utilizing available resources more efficiently, and reducing the negative issues associated with homelessness and behavioral health challenges (SMI/SUD).

Providers Northeast Integrated Health and Team Wellness will work through a Co-Response Program model in multiple precincts within the Detroit Police Department. The program is founded on the understanding that by working together, behavioral health specialists and law enforcement can respond most appropriately to the needs of individuals in the community who are in crisis. Behavioral health specialists can provide rapid assessment and de-escalation. This allows for a reduction in costly and unnecessary transportation to hospital

emergency departments for mental health assessment. Cross-training between the police and the behavioral health staff will result in mutual understanding and respect for each other's roles, and help respond to crises and determine appropriate outcomes.

Amounts can be reallocated between providers without board approval.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
State General Fund	\$ 1,005,000.00	\$ 1,005,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 1,005,000.00	\$ 1,005,000.00

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

Type of contract (Business/Clinical):

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Thursday, August 5, 2021

Signed: Thursday, August 5, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-09R Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/21

Name of Provider: See attached list

Contract Title: Comprehensive Services for Behavioral Health – 2021

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/21

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 861,516.00 Previous Fiscal Year: \$ 409,109.00

Program Type: New

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

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)?

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

The Detroit Wayne Integrated Health Network (“DWIHN”) is requesting approval to enter into agreement with several vendors and individuals who have been approved by the Michigan Department of Health and Human Services (MDHHS) through the Comprehensive Services for Behavioral Health - 2021 Block Grant. Notification was received from MDHHS approving \$861,516. The breakdown is as follows: \$200,000 for (IH), \$22,500 for (Drop-Ins), \$339,016 for (Clubhouse Engagement), \$200,000 for (Trauma) and \$100,000 for (Veteran Navigator). This grant covers the period of October 1, 2020 to September 30, 2021 for five projects. A list of vendors is enclosed.

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Block Grant	\$ 861,516.00	\$ 861,516.00

	\$ 0.00	\$ 0.00
Total Revenue	\$	\$ 861,516.00

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

Type of contract (Business/Clinical): Clinical

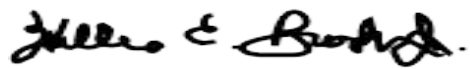
ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Signature/Date:



Signed: Wednesday, August 5, 2020

Stacie Durant, Chief Financial Officer

Signature/Date:



Signed: Wednesday, August 5, 2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-13 R2 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Wayne County

Contract Title: Wayne County Jail

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 10,250,000.00 Previous Fiscal Year: \$ 14,050,000.00

Program Type: Continuation

Projected Number Served- Year 1: 3,269 Persons Served (previous fiscal year): 6713

Date Contract First Initiated: 1/1/1998

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 revised Board Action is to increase funding for the Wayne County Jail from \$5,250,000 to \$5,800,000 to align with the number of consumers served and expend additional general fund available for the fiscal year ended September 30, 2021.

Wayne County Jail Mental Health Services (General Fund) is for the provision of mental health services for Wayne County residents that have been detained at the jail and have been screened, assessed, and determined to meet the criteria for Intellectual Developmental Disability; Substance Use Disorder; SMI; and Co-occurring Disorder or at risk for developing behavioral health issues that will negatively impact their activities of daily living. Behavioral health services are delivered on the mental health unit or general population by credentialed clinicians. Services include evaluation; diagnosis; crisis intervention; therapy; medication management; and referrals.

The amounts remain the same for the other County programs.

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

Source of Funds: General Fund

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
General Fund	\$ 6,250,000.00	\$ 6,250,000.00
Medicaid	\$ 4,000,000.00	\$ 4,000,000.00
Total Revenue	\$ 10,250,000.00	\$ 10,250,000.00

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, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Wednesday, August 4, 2021

Signed: Tuesday, August 3, 2021

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: BA 21-32R5 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Black Family Development, Community Care Services Inc., Guidance Center, The, Hegira Health Inc., Star Center Inc., Growth Works Inc, Nardin Park Recovery Center, Metro East Drug Treatment Corp, Sobriety House Inc, Rainbow Center of Michigan Inc, Abundant Community Recovery Services, Personalized Nursing Light House, Detroit Rescue Mission, Sacred Heart Rehabilitation Center, Inc., Beginning Step Recovery Center, Self Help Addiction Rehabilitation, Inc., New Light Recovery Center, Inc., Elmhurst Home Inc., Quality Behavioral Health Inc, The Salvation Army, WS University Physicians Group, Mariners Inn, Community Programs and Services

Contract Title: ASAM Training Reimbursement and Naloxone Purchase

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 7/1/2021 to 9/30/2021

Amount of Contract: \$ 6,291,109.00 Previous Fiscal Year: \$ 14,054,645.00

Program Type: Modification

Projected Number Served- Year 1: 2,800 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)? Y

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

DWIHN is requesting approval to fund \$72,000 of unspent Block Grant funding for clinicians to complete the mandatory 8- hour ASAM CONTIUUM training and meet the criteria of the SUD 1115 Medicaid Waiver. The ASAM CONTINUUM® provides counselors, clinicians and other treatment team members with a computer-guided, structured interview for assessing patients with addictive, substance-related conditions and to inform treatment planning. Each qualified clinician shall receive a reimbursement rate of \$400.00 for the cost to cover the training and participation.

Additionally, the SUD Department is requesting \$281,250 to purchase 2,500 Naloxone Kits at \$113.50 (Net 30 reduction of \$2500.00) from Mountainside Medical Equipment, using unallocated Block Grant Funds. This is due to the demand of drug overdose deaths that has increased significantly in Wayne County. Naloxone blocks or reverses the effects of opioid medication, including extreme drowsiness, slowed breathing, or loss of consciousness. An opioid is sometimes called a narcotic. Naloxone is used to treat a narcotic overdose in an emergency situation. The intent of its use is to save lives in the Detroit Wayne County area. DWIHN would purchase the Naloxone kits, train and disseminate the medication for all first responders.

The total allocation of \$6,291,109 remains the same.

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

Source of Funds: Block Grant

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
SUD Treatment Block grant	\$ 6,291,109.00	\$ 6,291,109.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 6,291,109.00	\$ 6,291,109.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Monday, July 26, 2021

Signed: Monday, July 26, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA 21-33R4 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: LAHC Leaders Advancing and Helping Communities

Contract Title: ENDS Tobacco

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 7/1/2021 to 9/30/2021

Amount of Contract: \$ 5,632,133.00 Previous Fiscal Year: \$ 5,574,906.00

Program Type: Modification

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

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)? Y

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

The SUD Dept is requesting board approval to accept and disburse Treatment Block Grant Funding from the Michigan Department of Health and Human Services (MDHHS) in the amount of \$4,000.00, to educate the retailers and the community on Electronic Nicotine Delivery System (ENDS) products. The Tobacco Section is providing funding for the period May 1, 2021- September 30, 2021. The SUD prevention provider chosen to implement this service is Leaders Advancing and Helping Communities (LAHC). The provider's goal is to raise awareness of ENDS and research agencies for disposal of ENDS waste products. The allowable activities will be as follows: ENDS education, the development of material regarding ENDS, in addition, resources will include information in Arabic language. The funds will cover the cost of \$1500.00 in salaries, \$2,000.00 in supplies and \$500.00 in other expenses. The combined total is not to exceed \$5,632,133.00

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

Source of Funds: Block Grant

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Federal Grant	\$ 3,623,133.00	\$ 2,623,133.00
PA2	\$ 2,009,000.00	\$ 2,009,000.00
Total Revenue	\$ 5,632,133.00	\$ 5,632,133.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, July 26, 2021

Signed: Monday, July 26, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-56 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/21

Name of Provider: See attached list

Contract Title: MHFA/QPR

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/21

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

Amount of Contract: \$ 500,000.00 Previous Fiscal Year: \$ 1,000,000.00

Program Type: Continuation

Projected Number Served- Year 1: 3,000 Persons Served (previous fiscal year): 4876

Date Contract First Initiated: 3/1/2021

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 of a one year contract from March 1, 2021 to September 30, 2021 for \$500,000.

Over the past six fiscal years (2013-2020), we have successfully trained over 25,000 individuals in the area of Mental Health First Aid (MHFA). Individuals have come from the provider network, faith-based communities, public schools, universities, military installations, hospitals, and law enforcement backgrounds. This current proposal expands the work we have done with First Responders in Detroit and Wayne County, as well as with the Faith Community, and adds an emphasis on schools in Detroit and Wayne County.

The services to be delivered will be training in the evidence-based practice models: **Mental Health First Aid (MHFA)** and **Question, Persuade, Refer (QPR)**.

MHFA is an evidence-based, in-person training program with the proven ability to teach individuals how to recognize and respond to the warning signs of mental and substance use disorders and link people with appropriate treatment. MHFA increases the understanding that mental illnesses are real, common, and treatable. **QPR** utilizes 3 simple steps that anyone can learn to help save a life from suicide. In QPR, people learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help.

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

Source of Funds: General Fund

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
General Fund	\$ 500,000.00	\$ 500,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 500,000.00	\$ 500,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64931.827206.05900

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, March 8, 2021

Signed: Monday, March 8, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-73 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: 123.Net

Contract Title: 123.Net Fiber Internet Services

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 8/1/2021 to 7/30/2024

Amount of Contract: \$ 77,364.00 Previous Fiscal Year: \$ 184,428.00

Program Type: New

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

Date Contract First Initiated: 6/1/2021

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).

DWIHN is requesting approval of a three year contract for fiber Internet service to increase available internet speed for business functions for employee remote access to data and on premises VoIP services along with significant cost savings.

The total amount of the contract would not exceed \$77,364 as follows:

- Yr 1 \$25,788.00
- Yr 2 \$25,788.00
- Yr 3 \$25,788.00

Total: \$77,364.00

DWIHN previously contracted through Communications Professionals Inc. (CPI), a cooperative contract; CPI subcontracted the services to 123 Net. This board action would allow DWIHN to contract directly with the vendor for a total savings of approximately \$100,000 over the three year period.

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

Source of Funds: Other

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
	\$ 77,364.00	\$ 77,364.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64915.817000.00000

In Budget (Y/N)? N

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, July 26, 2021

Signed: Monday, July 26, 2021

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 22-01 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Assoc. of Chinese Americans, Inc., Southwest Counseling Solutions, Detroit Wayne Integrated Health Network, Community Health and Social Services Center, Inc., American Indian Health and Family Serv.

Contract Title: Multicultural Integration and PIHP Veteran Navigator

Address where services are provided: Multiple

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 700,258.00 Previous Fiscal Year: \$ 718,701.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2021

Provider Impaneled (Y/N)? Y

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

The Detroit Wayne Integrated Health Network (DWIHN) is requesting approval of the memorandums of understanding between Community Mental Health Association of Michigan (CMHAM), Michigan Department of Health and Human Services (MDHHS) and Pre-paid Insurance Health Plan (PIHP) for the PIHP Veteran Navigator (PIHP VN) and Multicultural Integration Providers formerly known as the Multicultural Programs.

The Multicultural Integration vendors were selected through MDHHS to provide services for the "Priority Population" who were identified as high risk. The services that will be performed will include outpatient services, case management services, psycho-behavioral treatment, outreach, mental health services, referrals, coordination and treatment services, mental health treatment for victims of trauma, poverty and parental abandonment, Drop-In Center availability, preventive community based mental health service options and assistance with the Healthy Michigan enrollment process.

The duties for the PIHP Veteran Navigator are to identify resources and making linkages in the PIHP region appropriate for Veteran and Military Families (V/MFs), making appropriate referrals, coordinating care, providing follow up and either directly providing or assuring wraparound services are available. Those duties will be conducted through a variety of means and will involve performing basic assessment of needs and planning to address the needs of the V/MF. The PIHP VN will continually assess the quality of services provided, vet organizations for quality delivery to V/MFs and make referrals for V/MFs.

Revenue for these services are supported by E-Grants & Management Systems (EGrAMS) categorical funds for Ethnic Services. The amount of this proposed term of this Memorandums of Understanding is October 1, 2021 through September 30, 2022 and will not exceed \$700,258.00.

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

Source of Funds: General Fund,Block Grant

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
State Grant	\$ 680,633.00	\$ 680,633.00
General Fund	\$ 19,625.00	\$ 19,625.00
Total Revenue	\$ 700,258.00	\$ 700,258.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

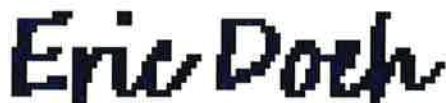
Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, July 21, 2021

Signed: Wednesday, July 21, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-02 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Michigan Vocational Rehab Serv

Contract Title: Michigan Rehabilitation Services (MRS)

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 443,565.00 Previous Fiscal Year: \$ 443,565.00

Program Type: Continuation

Projected Number Served- Year 1: 1,620 Persons Served (previous fiscal year): 2079

Date Contract First Initiated: 10/1/1994

Provider Impaneled (Y/N)? N

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

This Board Action request a one year contract for the fiscal year ended September 30, 2022 for the continued funding for an Interagency Cash Transfer Agreement (ICTA) between Detroit Wayne Integrated Health Network (DWIHN) and Michigan Rehabilitation Services (MRS) for the amount of \$443,565.00. The agreement was established in 1994 as a means to increase member access to MRS thereby enabling members to become employed and self- sufficient. DWIHN funding of \$443,565.00 combined with MRS ICTA Federal Share revenue of \$1,199,268.00 brings the program total revenue to \$1,642,833.00 for Wayne County.

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

Source of Funds: General Fund

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
General Fund	\$ 443,565.00	\$ 443,565.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 443,565.00	\$ 443,565.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.07226

In Budget (Y/N)? Y

Approved for Submittal to Board:

Eric Doeh, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, August 2, 2021

Signed: Monday, August 2, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-05 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Southwest Counseling Solutions

Contract Title: Southwest Counseling Solutions Housing Resource Center, NSO Detroit Healthy Housing Center and CNS Covenant House Program

Address where services are provided: 2959 Martin Luther King Blvd. Detroit, MI 48208

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2021 to 9/30/2022

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

Program Type: Continuation

Projected Number Served- Year 1: 2,050 Persons Served (previous fiscal year): 8,555

Date Contract First Initiated: 10/1/2004

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 recommends the approval of a one year contract with **Southwest Counseling Solutions – Housing Resource Center** for the amount of \$1,089,715.00 to provide housing assistance, resources, intervention and collaborative community efforts to reduce homelessness of persons with mental illness and co-occurring disabilities; **Neighborhood Service Organization - Detroit Healthy Housing Center (formerly Tumaini Center)** in the amount of \$902,050.00 to provide intensive services to decrease homelessness and residential instability and increase individuals in supportive living arrangements; and for the continuation of the **CNS (formerly Northeast Integrated Health) – Covenant House Program** in the amount of \$132,872 to addresses gaps in service through the provision of mental health support for young adults experiencing homelessness.

The total amount for this Board Action for the one year contract term is \$2,124,637 from October 1, 2021 - September 30, 2022.

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

Source of Funds: Medicaid, General Fund

Fee for Service (Y/N): N

Revenue	FY 21/22	Annualized
Medicaid	\$ 1,222,587.00	\$ 1,222,587.00
State General Fund	\$ 902,050.00	\$ 902,050.00
Total Revenue	\$ 2,124,637.00	\$ 2,124,637.00

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, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Signed: Thursday, August 5, 2021

Signed: Wednesday, August 4, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA#22-06 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: Community Living Services

Contract Title: Self-Directed Program (Formerly Self-Determination Program)

Address where services are provided: 35425 Michigan Ave, Wayne, MI 48184

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 59,906,443.00 Previous Fiscal Year: \$ 59,906,443.00

Program Type: Continuation

Projected Number Served- Year 1: 900 Persons Served (previous fiscal year): 9000 Consumers

Date Contract First Initiated: 10/1/2019

Provider Impaneled (Y/N)? Y

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

Detroit Wayne Integrated Health Network(DWIHN) staff recommends a one year contract between DWIHN and Community Living Services (CLS) to continue provision of the Self-Directed Services and Direct Care Worker Training Program for Fiscal Year 2021/2022. The sole purpose of this contract is to assure provision of Self-Directed Program consistent with federal Medicaid requirements and DWIHN contract with MDHHS. CLS will continue provision of resources and personnel to assist persons in living his/her desired life in the community, participate in community associations and contributions. This program supports individual to develop a life dream and reach toward that dream.

The term of this contract is from October 1, 2021 through September 30, 2022. The total funding will not exceed \$59,906,443.00.

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

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 21/22	Annualized
Multiple	\$ 59,906,443.00	\$ 59,906,443.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 59,906,443.00	\$ 59,906,443.00

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, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Signed: Thursday, August 5, 2021

Signed: Wednesday, August 4, 2021

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-07 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/18/2021

Name of Provider: See attached list

Contract Title: Comprehensive Services for Behavioral Health – 2022

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/11/2021

Proposed Contract Term: 10/1/2021 to 9/30/2022

Amount of Contract: \$ 1,408,596.00 Previous Fiscal Year: \$ 1,303,000.00

Program Type: Continuation

Projected Number Served- Year 1: 250 Persons Served (previous fiscal year): 200

Date Contract First Initiated: 10/1/2021

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).

The Detroit Wayne Integrated Health Network (“DWIHN”) is requesting approval to enter into agreement with several vendors and individuals who have been approved by the Michigan Department of Health and Human Services (MDHHS) through the Comprehensive Services for Behavioral Health - 2022 Block Grant. Notification was received from MDHHS approving \$1,408,596. The breakdown is as follows: \$190,000 for (IH), \$22,500 for (Drop-Ins), \$354,016 for (Clubhouse Engagement), \$200,000 for (Trauma), and \$642,080 for (Behavioral Health Home Startup). This grant covers the period of October 1, 2021 to September 30, 2022 for five projects. A list of vendors is enclosed.

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

Source of Funds: Block Grant

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
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Block Grant	\$ 1,408,596.00	\$ 1,408,596.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 1,408,596.00	\$ 1,408,596.00

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, Interim CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Eric Doeh

Stacie Durant

Signed: Friday, August 6, 2021

Signed: Friday, August 6, 2021