



President and CEO Report to the Board

July 2025

James E. White

GOVERNMENT AFFAIRS/LEGISLATIVE EFFORTS

DWIHN receives ongoing support from PAA as we look at the changes taking place in Lansing with lawmakers working to educate key governmental stakeholders on DWIHN's policy priorities and ensuring access to care, meetings with top elected officials, corporate executives, and civic leaders to discuss healthcare, talent development, infrastructure, innovation, and economic development.

DWIHN is speaking with legislators seeking support to ensure there is no interruption of behavioral health supports in our schools, youth programs, crisis care, mental health outreach initiatives, and community law enforcement mental health support initiatives, which are critical now more than ever. Conversations are to address our immediate needs, knowing that future discussions would likely be necessary as the landscape changes throughout our region, state, and country.

House Speaker Matt Hall voiced support for tightening SNAP eligibility, aligning with proposed federal cuts that could reduce Michigan's funding by \$800 million by 2028. Speaker Hall criticized the State for using waivers to extend benefits to people he says aren't eligible, arguing the program should serve only those truly in need:

- Medicaid & SNAP Work Requirements – The House version keeps strict work requirements for Medicaid and food assistance, estimated to impact up to 12 million Americans.
- Low-Income Communities: Cuts and delays in SNAP, literacy, and education programs will widen equity gaps, especially in urban districts like Detroit, Flint, and Benton Harbor.

DWIHN is advocated to protect Medicaid for vulnerable individuals statewide with communication to our stakeholders, providers, and persons served about the bill, known as the Big Beautiful Bill, as well as continuing our efforts to educate about proposed policy changes impacting Medicaid recipients in Michigan who are on Spenddown.

Governor Gretchen Whitmer recently amplified concerns raised in independent reports warning that proposed Republican budget cuts to Medicaid and SNAP would have severe consequences for Michigan's economy, workforce, and public health. The cuts, totaling \$1.2 Trillion nationally over ten years, are projected to result in a \$4.53 billion drop in Michigan's gross domestic product and the loss of over 41,000 jobs statewide. The impact on Michigan's healthcare sector would be particularly devastating. As the state's largest private-sector employer, the healthcare industry supports more than one million jobs and contributes over \$100 Billion to the economy. Cuts to Medicaid alone could eliminate 17,300 healthcare jobs and another 16,100 in related industries. Providers could be forced to reduce services, harming access to care for residents across the state and weakening community wellness overall.

ADVOCACY AND ENGAGEMENT

On July 21, 2025, Youth United is hosting a Leadership Academy at WCCCD Downriver Campus. This is a two-week program that equips young leaders (ages 14-25) with the skills they need to enhance their leadership skills. There are only 15 spots available. All participants will receive a stipend as well as a laptop.

INTEGRATED HEALTH PILOT UPDATE

The Detroit Wayne Integrated Health Network (DWIHN) continues its partnership with Medicaid Health Plans to provide integrated care. Below is a list of updates for our collaborations with Medicaid Health Plan Partners One, Two, and Three.

Care Coordination is completed monthly with Health Plan One and Two. DWIHN and the Health Plans work together to actively search out and consult on members with physical and behavioral health gaps in care. Care coordination aims to close identified gaps in care within 90 days. Examples of gaps in care include not engaging with a primary care provider, untreated diabetes and on antipsychotics, high hospitalization rates (medical and psychiatric), not taking medications as prescribed, or not engaged with the Clinically Responsible Service Provider agency.

DWIHN continues to exceed the Michigan Department of Health and Human Services standard of having at least 25% of care plans open or completed in CC360 when the risk stratification tab is used. DWIHN has established its goal to open 40% of its members in the easy risk stratification tab, as these members have a higher need for care and could benefit from care coordination. In reviewing the CC360 risk stratification over the last 7 months, 750 members could benefit from care coordination, and 595 (79%) have an open or completed case with DWIHN care coordination.

In FY 2025, 351 members have been served in the care coordination program with Health Plans One and Two.

Health Plan Partner One

Health Plan Partner One and Integrated Health Care Services (IHC) met in June to coordinate care and opened fifteen members for care coordination. Ten of those were opened jointly with Health Plan One. Four were opened only by DWIHN based on a psychiatric hospitalization or emergency room visit. Ten gaps in care were resolved in June. Four members did not have an assigned provider and were connected to services. Three were connected to a primary care provider.

Health Plan Partner Two

Health Plan Two reviewed eighteen members in the June Care Coordination meeting. Twenty-one were opened with Health Plan Two. Two members did not have an assigned provider and were able to be connected to services. Three needed housing and transportation resources, and one was connected to a primary care provider.

Health Plan Partner Three

Our Deputy Director (Manny Singla), VP of Clinical Operations (Melissa Moody), Medical Director (Dr. Shama Faheem) and Integrated Health Care Director (Vicky Politowski) met with a new Health Provider to discuss a collaboration.

Shared Platform and HEDIS Scorecard

Healthcare Effectiveness Data and Information Set (HEDIS) is a tool that health plans use to measure performance in essential care areas. DWIHN is following the guidelines set by the National Committee for Quality Assurance (NCQA) for behavioral health HEDIS measures to monitor and report on.

The HEIDS Scorecard also tracks HEDIS Measures needed for Certified Behavioral Health Clinics (CCBHC) and Behavioral Health Homes (BHH). DWIHN and Vital Data are working on adding substance abuse data to the Scorecard in the next few months for Substance Use Disorder Health Home (SUDHH). In May, validation was started for the new Substance Use Disorder data to be added to the HEDIS Scorecard and will continue through July. In June, the HEDIS scorecard was reviewed at fourteen Clinically Responsible Service Provider meetings monthly.

CCBHC UPDATE

DWIHN received notification from the MDHHS-CCBHC team on May 30, 2025, that they submitted all required documents to CMS and SAMHSA for approval of our CCBHC application. We have not yet received any additional communication and are awaiting a response from MDHHS on if we will receive full certification. The Outpatient Clinic will continue to move forward with direct service provision to its members.

LONG TERM RESIDENTIAL CARE UPDATE

DWIHN has received a significant progress update from Trillium as part of the public private partnership. Trillium has received all the approvals and finally has received the permit which was one of the key milestones . They are now moving full speed ahead with the renovation and meeting their general contractor to set the timeline for completion of the project deliverables.

AUTISM SERVICES

DWIHN Autism Service Department oversees the Autism state plan for youth and young adults up to 21 years of age. Applied Behavior Analysis (ABA) is an intensive, behaviorally based treatment that uses empirically supported techniques to bring about meaningful and positive changes in communication, social interaction, and repetitive/restrictive behaviors that are typical of ASD.

There has been a 31% increase in members receiving treatment and a 74% surge in individuals being evaluated for Autism since 2022. In response to this rising demand, DWIHN launched a 2023 RFQ to expand Autism services over five years. As a result, the ABA provider network has grown from 13 to 26 providers. Lincoln Park, Inkster, and Hamtramck represent the highest need areas for autism services as there are no sites or locations in those specific cities. DWIHN will continue to target those geographic areas for adding autism service providers.

Utilization Management (UM): The Habilitation Supports Waiver (HSW) program provides home and community-based services to Medicaid beneficiaries with intellectual or developmental disabilities. HSW's goal is to assist people with developing skills to live independently in community settings (vs. institutions or more restrictive settings).

The HSW program continues to exceed the state program requirement of 95% slot utilization. DWIHN's HSW has an average of 97.13% utilization per month with 1,093 slots filled fiscal year to date. This quarter, in conjunction with overall monitoring efforts, the HSW team began capturing certification renewal data. In May, there were 109 renewals due, and 88 renewals submitted (81%).

The Michigan Department of Health and Human Services (MDHHS) has removed its limit of five new members per PIHP pending approval at any given time, imposed while they caught up on new enrollee applications. This eliminates DWIHN's waitlist and allows all referred members to be served without delay.

CHIEF MEDICAL OFFICER

Educational Initiatives:

Wayne State Psychiatry Residents started their Emergency Psychiatry rotations at our Crisis center in July 2025. There will be one resident per month. Child and Adolescent Psychiatry Fellows will be starting soon. Medical students have also outreached; however, we are taking a pause to avoid supervisor burnout.

Dr. Faheem has done annual Community Mental Health Lecture Series to 4th Year Psychiatry Residents for last two years and completed another series in June. However, she has requested them to transition it to 2nd Year Psychiatry training so they have an early opportunity to learn about CMH and get interested in taking job opportunities within CMH at graduation. Dr. Faheem is scheduled to do 4-week lectures with 2nd Year residents in July.

Initiatives and Innovations:

Care coordination expansion: Within last month, DWIHN focused on improving its relationship with hospital systems. Collaborative meetings with two major health systems (Henry Ford and Corewell Health) were held and identified two common themes:

- Lack of information about all services offered by DWIHN and their provider and processes on how to access them
- Delay in finding inpatient psychiatric beds resulting in prolonged ED wait times

Assisted Outpatient Treatment (AOT):

AOT is court ordered treatment that help certain members who lack insight into need for treatment to comply with it. It requires our providers to adhere to certain mental health code and court requirements such as compliance with outpatient visits, renewing court orders when needed, submission of documents to court which was a challenge in certain areas for our providers and often resulted in increased transport orders and hospitalization for AOT members.

In the last two months, DWIHN worked not only on revising its Assisted Outpatient Treatment EMR Module for better data capturing and tracking but also provided multiple trainings to its provider network. Simultaneously, MDHHS also collaborated with CMHA to provide a three series AOT training which was well received.

The number of members on AOT in June were 845 (780 as of May, 12th). Within same period, the transport orders decreased from 57 to 22 and hospitalizations for members on AOT decreased significantly from 151 to 31 in June. This has resulted in significant reduction in hospitalization

cost for members on AOT from \$2,099,963 April-Mid May to \$513,388.16. Will monitor for sustained improvement.

CHILDREN'S INITIATIVES

The Fatherhood Initiative held its' 13th annual Fatherhood Forum at Greater Grace Temple, where I rendered opening remarks. Former Assistant Secretary of State, Heaster Wheeler, provided the keynote presentation. Workshop topics included Adverse Childhood Experiences, Obtaining Custody and Parenting Time, Fathers Fighting Stigma, and Toxic Masculinity.

Youth United participated in several events this month, including:

- Youth MOVE Detroit, in collaboration with Detroit PAL, hosted a Meet & Greet Mario Kart Tournament with themed workshop stations including mental health, gaming and advocacy. Youth from the Juvenile Restorative Program and the University Yes Academy were personally invited to attend the event.
- Facilitated the monthly Youth Under Construction Training on Mental Health Disorders and Navigating the System. The goal was to understand mental health and how it impacts youth, identify different mental health disorders, and direct youth on the right path to receiving mental health services.
- Youth MOVE Detroit held a Self-Care Workshop as a part of their 6-part series of workshops. The event was held at The Children Center including "STAR" Jars, Journal Creations, affirmation jars, and each attendee had a chance to make their own self-care kit. The self-care kit included lotions, face masks, bath bombs, essential roll-on oils, and more.

Children's Initiatives participated in the initial Mi Kids Now Dashboard Workgroup hosted by Michigan Department of Health and Human Services (MDHHS) to review the progress of the new dashboard system. The workgroup discussed data across the State for the MichiCANS Screener, MichiCANS Comprehensive, and intensive crisis stabilization services (ICSS).

CLINICAL OPERATIONS

Crisis Services:

Detroit Wayne Integrated Health Network (DWIHN) established its' PAR Dispatch team on November 1, 2024. This team receives calls from hospitals requesting individuals be screened for inpatient care. DWIHN has always completed this service for children services, but prior to November 1, 2024, Hegira/COPE completed this service for the adult population.

Key Performance Indicators have continued to improve over the first three quarters even as call volume has increased. The Service level is the percentage of calls that are answered within 30 seconds. The State service level standard is 80%, but DWIHN's set its service level goal at 85%, which was met in Quarter 3.

PAR Dispatch Data	Service Level	Avg Speed of Answer	Calls Received	Requests Completed
Q1 2025	83%	26s	3,092	1,681
Q2 2025	84%	24s	4,926	2,516
Q3 2025	92%	14s	4,299	2,496

Health Home Initiatives:

Certified Community Behavioral Health Clinic (CCBHC) – 21,266 members, 7 providers

The Health Homes team continues without pause on its CCBHC projects and technical support of the CCBHC sites. We are still awaiting updates from MDHHS about the upcoming administrative transition set for October 1, 2025, as there are still many unanswered questions at this time about the transition.

All six CCBHC sites who participated in the demonstration in FY 2024 have received their **preliminary** Quality Bonus Payment award notice. CCBHC's were assessed on 6 measures and could earn a 5% bonus on their Medicaid cost volume. CCBHC Performance Measures:

- Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA-AD)
- Follow-Up After Hospitalization for Mental Illness, ages 18+ (adult) (FUH-AD) – 30-day
- Follow-Up After Hospitalization for Mental Illness, ages 6 to 17 (child/adolescent) (FUH-CH) – 30-day
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET-BH)
- Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment (SRA-BH-C)
- Major Depressive Disorder: Suicide Risk Assessment (SRA-A)

CCBHC	% of Possible Award
ACCESS	72%
CNS	95%
DEVELOPMENT CENTERS	100%
ELMHURST HOME, INC	85%
SOUTHWEST COUNSELING & DEVELOPMENT	77%
THE GUIDANCE CENTER	95%

CRISIS CARE SERVICES

The Adult Crisis Stabilization Unit has been participating in the MDHHS recertification process since March of this year. Happy to announce they successfully passed state certification in June 2025. Our Adult CSU remains as one of the only two certified units in the state!

During June 2025, 225 individuals presented to the facility seeking services. On June 3, 2025, we had our highest ever utilization on the Adult CSU, with the unit serving 21 individuals – a 175% utilization rate.

DIRECT CLINICAL SERVICES

Current Enrollment/Demographic Data:

To date, the DWIHN Outpatient Clinic has a current active enrollment of approximately 410 individuals. Detroit remains the city with the highest enrollment for the Outpatient Clinic, with 81% of enrollees residing in Detroit. 48227 is currently the zip code with the highest number of enrollees (11%), surpassing 48202 and 48235 both of which are at 9% enrollment.

Outreach/Expansion Efforts Established in the Month of June 2025:

The Outpatient Clinic submitted an application to MDHHS requesting approval for Infant and Early Childhood mental health services. The DOC is awaiting a response on approval for this service. If approved, the DOC will be able to expand its outpatient services to pregnant families and children ages 0-6 years of age. The clinic currently provides services to children ages 7-21. Approval of I/ECMH services will expand this access and allow the DOC to serve children and families ages 0-21 years of age.

The DOC intake staff participated in the Fatherhood Forum with the Children's Initiatives Department on June 26, 2025. The goal was to increase awareness of the Outpatient Clinic and to boost enrollment of males in treatment.

The DOC met with 36th District Court on July 10, 2025, to inform them of the outpatient services the clinic offers and to list itself as a choice provider for persons involved with the judicial system that need behavioral health services. If the DOC is chosen by the individual, the clinic will deliver outpatient services that are medically necessary to support community integration.

The DOC is also offering its services as a choice provider for individuals discharged from inpatient hospitalization that do not currently have a clinically responsible service provider. If the person chooses the DOC, the clinic will deliver services medically necessary to support the person in the community.

The DOC will be expanding access to individuals in nursing home settings and specialized residential. DOC will ensure that the individuals are given choice in provider and if they choose the DOC, outpatient services will be delivered in those settings.

FINANCE

Governor Whitmore has proposed a 100% increase to the Medicaid asset threshold; Senate proposed a 60% increase in the Medicaid asset threshold. The increase will directly eliminate or reduce the number of Medicaid members with deductibles and therefore reduce the amount of spenddown (i.e. General Fund).

As part of the June rate amendment, the Michigan Department of Health and Human Services (MDHHS) reduced Detroit Wayne Integrated Health Network (DWIHN) entity factor. DWIHN met with MDHHS regarding the reduction and, per MDHHS, the reduction was due to other regions' disenrollment after the public health emergency (PHE) was more significant than MDHHS assumptions and therefore funds needed to be reallocated accordingly. MDHHS could not advise whether this change in the entity-wide factor would mean less revenues for DWIHN in FY26, however there is an impact for FY25. The DWIHN Vice President of Finance (CFO) will not know the amount until actual adjusted payments are received in July. It should be noted that Oakland and Macomb received a more significant reduction in their entity factor.

A draft of the FY26 recommended CEO's budget was included in the packet presented at DWIHN's Finance Committee meeting on July 2, 2025. All board questions are due back to Finance by July 9, 2025.

HUMAN RESOURCES

DWIHN HR continues contract negotiations with GAA. The ASE Supervisor Institute Group E sessions are ongoing. HR is the process of finalizing the new agreement with Harvard Business School Online to begin the third cohort of the HBSO Training Program. The new agreement allows HBSO to provide leadership training for ten DWIHN staff members during the period of September 1, 2025-August 31, 2026.

Over the past month, DWIHN HR hired new staff to augment our already excellent work force: Positions filled included: Accounts Payable Specialist, Call Center Clinical Specialist (Part time), Clinical Specialist-Crisis Services, Customer Service Engagement Specialist, Data Analyst-Recipient Rights, Medical Records Specialist, Mobile Clinic Clinician, Peer Support Specialist-Outpatient Clinics, Psychiatrist (Part time), and Transportation Specialist.

QUALITY

The Quality Department has facilitated External Audits Reviews by HSAG for our Managed Care standards in June. Results will be available by September, however, the overall feedback from the reviewers was encouraging.

The Quality Department has also continued to audit our provider network for Medicaid claims verifications, as well as mental health, substance use, autism and home and community-based residential providers for compliance. Since it is midway through the fiscal year, the Quality Department is approximately 50% done with its verifications and audits. Key findings indicate the lack of updated treatment plans and lack of signatures, as well as some poor documentation, which typically triggers Corrective Action Plans. The most common provider types with the highest CAPs are the substance use disorder prevention and treatment providers. Respective PIHP Departments are notified and in collaboration with them, Technical assistance and trainings are being provided to assist providers comply with CAPs and correct their findings. Some findings lead to further discussions with the Compliance and Contracting Departments.

RESIDENTIAL SERVICES

During the month of June, the Residential Services Department was able to discharge four members out of long-term state facilities and into the community. In addition, the Residential Services Department was able to add two (2) new residential provider locations to the network.

Throughout the month of June, the Residential Services Department continued to monitor the number of residential authorizations processed. Additionally, we were able to examine the amount of time it takes for each authorization to be approved. It is important that we continue to monitor this data to ensure that authorizations are being approved within the 14-day timeframe.

Residential Service Authorizations			
	Apr-25	May-25	Jun-25
Authorizations Processed	1,150	947	963
Auths Approved >14 Days	57	40	2
Auths Approved within 14 days	95.0%	95.8%	99.8%

The Residential Services Department is working toward a 7-day authorization disposition timeframe. In June, 68.4% of authorizations were approved within the timeframe.

The Residential Services Department will track authorization data, specifically focusing on timeliness standards, to continue to implement efficiency standards and allocate additional resources as needed.

SUBSTANCE USE SERVICES

The Substance Use Department is currently establishing treatment plan protocols and procedures which will result in a SUD network-wide training to ensure all recovery plans meet MDHHS requirements. DWIHN has also updated its' SUD member engagement requirements to ensure members are not discharged from services prematurely. DWIHN is actively interviewing to fill the vacant Substance Use Director position.

UTILIZATION MANAGEMENT

The Habilitation Supports Waiver (HSW) program provides home and community-based services to Medicaid beneficiaries with intellectual or developmental disabilities. HSW's goal is to assist people with developing skills to live independently in community settings (vs. institutions or more restrictive settings).

HSW continues to exceed the State program requirement of 95% slot utilization. DWIHN's HSW has an average of 97.13% utilization per month with 1,093 slots filled fiscal year to date. This quarter, in conjunction with overall monitoring efforts, the HSW team began capturing certification renewal data. In May, there were 109 renewals due, and 88 submitted (81%).

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COMMUNICATIONS

In June, DWIHN celebrated a milestone in services with the One Year Anniversary of the Crisis Care Center. The accomplishment marks the new shift in services and leading the state in crisis care.

Media Outreach

For the 24/25 fiscal year, the Communications team recently acquired Critical Mention, an online media analytics, monitoring, and search tool. It is used to measure earned media impact for stories, gather clips of broadcast segments and print articles, and search for media contacts to reach more outlets.

Mobile Health Clinic

On the morning of [June 16](#), DWIHN was featured on Fox 2 live in the morning to give an exclusive interview and tour of the Mobile Health Clinic. Amy Andrews interviewed CEO James White and Andrea Smith, Assoc. Vice President of Innovation and Community Engagement.



707 Crisis Care Center:

Also on June 16, CEO James White led a press conference to celebrate the extraordinary work of the Crisis Care team – specifically the Crisis Care Center’s one-year anniversary, its Joint Commission accreditation and the 2,380 lives impacted by their work. The Mobile Crisis team was also commended for its tremendous contributions to DWIHN’s progress. Grace Wolf, VP of Crisis Services, also spoke on the Department’s accomplishments. [Fox 2](#) also covered this event.



Monthly Metrics (provided by Critical Mention):

June’s media outreach garnered **14 mentions: television with 9 and online/print with 5 mentions of DWIHN to their audiences and readers.** The chart below shows the mention’s audience numbers and publicity values with shows the advertising equivalence of the earned media.

	738k Total TV Audience 738k Local Audience	\$112k Total TV Publicity \$112k Local Publicity
	301k Total Online Audience	\$16.7k Total Online Publicity

Social Media Influencer Marketing Update:

Randi Rosario’s posts about the Mobile Health Clinic and Men’s Mental health were well received.

Social Media Influencer	# of Posts	Engagement/Impressions
The Capital Brand/Randi Rosario	3 Posts	269,560 Impressions

Social Media Performance Report Summary:

Social Media Performance (Facebook, Instagram, LinkedIn, X and YouTube)	Previous Period (May 2025)	Current Period (June 2025)
Total Audience Growth	22,642	23,003
Engagements	10,218	28,558
Post Click Links	2,092	2314
Engagement Rate	1.5%	0.4%
Impressions	680,616	6,834,983

Community Outreach:

Report on community events DWIHN is requested to attend to provide resources or presentations.

June 2025	
Community Events	6
Estimated Individuals Reached	420

Branding, Visual Design & Outreach Initiatives:

The Communications team continues to elevate the DWIHN brand through strategic outreach and cohesive design across internal, external and digital platforms.