

**Northeast Michigan Community Mental Health Authority Board
Strategic Planning [Part I]/Board Meeting
May 12, 2022**

I. Call to Order

Chair Eric Lawson called the meeting to order in the White Conference Room at the Fletcher Street office at 3:00 p.m.

II. Roll Call and Determination of a Quorum

Present: Bob Adrian, Geyer Balog, Les Buza, Bonnie Cornelius, Roger Frye, Lynette Grzeskowiak, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Terry Small

Absent: Pat Przeslawski

Staff & Guests: Lisa Anderson, Carolyn Bruning, Connie Cadarette, Mary Crittenden, Rebekah Duhaime, Erin Fletcher, Diane Hayka, Eric Kurtz joined at 3:04 p.m., Larry Patterson, Jen Whyte

Eric Lawson thanked Rebekah Duhaime for joining the meeting as the note taker, and stated she will be taking over for Diane Hayka in August. Mr. Lawson introduced Mary Crittenden as filling in for Nena Sork.

III. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

IV. Acknowledgement of Conflict of Interest

No conflicts were identified.

V. Appointment of Evaluator

Eric Lawson appointed Bob Adrian as evaluator for this meeting.

VI. Information and/or Comments from the Public

There were no comments presented.

VII. Approval of Minutes

Moved by Les Buza, supported by Gary Nowak, to approve the minutes of the April 14, 2022 meeting as presented, noting the distributed minutes initially had the year as 2021.
Motion carried.

Eric Kurtz joined the meeting at 3:04 p.m.

VIII. Environmental Scan

Eric Kurtz from the NMRE thanked the Board for having him present the environmental scan. Mr. Kurtz stated the NMRE is in very good shape financially. Medicaid enrollments have continued to increase over the last two years, as they haven't been doing redeterminations. The last three years have all seen increased funding. Though rates have been reduced, Medicaid enrollments have increased, and they are at \$1.9 million over the previous year.

Behavioral Health Home (BHH) initially began in 2020 with Manistee, Benzie, and Grand Traverse counties, and after changes at the state and some lobbying has expanded to include all five regional CMHSPs. Based on the diagnostic criteria for BHH, there are 58,339 potential enrollees. Current active BHH enrollment is 283 individuals, including 23 from NeMCMHA. Opioid Health Home (OHH) began in 2019 and has 7,690 potential enrollees. That number may be expanded as opioid use disorder is now the sole criteria. Current active enrollment is 715 individuals, with a goal in the 1,000 range. Alcohol Health Home (AHH) will be starting in 2022 using block grant funding for the first year, and then hopefully becoming funded by Medicaid.

Mr. Kurtz stated MDHHS has done a reorganization of behavioral health. They have created the position of Chief Deputy of Health, who oversees the State Hospital Administration and the Behavioral and Physical Health and Aging Services Administration (BPHASA). The Behavioral Health and Developmental Disabilities Administration no longer exists and is now a smaller bureau under the BPHASA. Another major shift in the MDHHS reorganization was the creation of the Bureau of Children's Coordinated Health Policy and Supports. They pulled children's services out of the former Behavioral Health and Disabilities Administration and made it a stand-alone department that has its own contracting and policy divisions. Mr. Kurtz stated this may be part of the K.B. lawsuit settlement.

MDHHS has moved prevention and gambling programs, including some SUD prevention, under the Chronic Disease and Gambling Program. Mr. Kurtz stated they are unsure what this means for SUD prevention and block grants, as the Office of Recovery Oriented Systems of Care no longer exists. As of the morning on 5/12/22, MDHHS is thinking about putting prevention back where it was before, but it is unclear. Mr. Kurtz stated they will now be dealing with two different bureaucracies within the department – the Bureau of Children's Coordinated Health Policy and Supports and the BPHASA.

Mr. Kurtz stated the NMRE's goals for FY22 include continuing to advance regional marketing and advocacy efforts against both the House and Senate bills, Whiteford and Shirkey. Both bills would eliminate PIHPs, significantly change CMH funding, and remove local governance and control. The Shirkey bill would change funding to fee-for-service under private Medicaid health plans, and the Whiteford bill would likely also use an enhanced fee-for-service model.

MDHHS is under the impression some flexibilities given during the COVID-19 pandemic are at their discretion to continue, even if the public health emergency ends. Mr. Kurtz stated this is conflicting, because if it's not covered by the federal government, how will it be covered by the state? Mr. Kurtz stated Medicaid redeterminations will begin at some point, causing a reduction in Medicaid enrollment as individuals may no longer qualify for Healthy Michigan. There is going to be an increased focus on children's services, which is already occurring during MDHHS and PIHP meetings, as well as an emphasis on services to all populations, regardless of insurance or severity. School-based social work programs are being heavily funded, which may further negatively affect the current staffing crisis.

Bob Adrian asked about the underlying drive of the Shirkey bill. Mr. Kurtz stated they think privatization would be better, though he also thinks there isn't as much profit in it as they assume, as the money is going to long-term services and supports. The Shirkey bill would have a phased approach, taking children first, then the severely mentally ill, then SUD and I/DD. Mr. Kurtz doesn't think they would get past the first group, as they won't want anyone besides children and those with mild/moderate mental illness, leaving everyone else with the public system. Mr. Kurtz stated their reasoning changes from money to government failure to claiming CMHs are not serving people.

Another main goal of the NMRE is to expand crisis capacity on a regional basis. The state believes one-size-fits-all in terms of crisis units or stabilization centers, but it's not feasible with 11,000 square miles to cover. The NMRE is looking at privately contracting a six bed adult crisis residential unit to be used by the NMRE only (possibly the UP). Some construction is needed, but the goal is to be open by October. They are also looking to implement and pilot AHH, and expand OHH and BHH provider networks, as well as have 1,000 active enrollees in both.

The NMRE has increased its emphasis on national benchmarking in regards to Healthcare Effectiveness Data and Information Sets (HEDIS) measures related to behavioral health. For the first time, they received a full performance incentive at 100% for \$1.7 million. The funds from regions not receiving 100% are placed in a pool which gets distributed back out, so the NMRE will be receiving an additional \$1.3 million. These funds will be shared with CMHSPs as local flexible funding. The NMRE is also continuing their pursuit of Medicaid Managed Care rural exemptions.

Terry Larson began discussion of the recent news out of Northern Lakes Community Mental Health Authority (NLCMHA). Mr. Kurtz stated the Grand Traverse County Commission voted, and the county

administrator sent a letter to the state notifying them of their intent to remove themselves from NLCMHA. Mr. Kurtz has met with the county administrator, and they seem set on moving forward. They don't think there are equitable contributions of general funds from each of the counties and jail services are also an underlying issue. The way the NLCMHA agreement is written, any one of the counties can vote themselves out and go with another CMH or create their own. As soon as one county leaves, the whole CMH is dissolved and assets and debt are redistributed back to the originating counties. The ramifications could be that the counties go back to their two CMHs from 2003 – Grand Traverse and Leelanau as one CMH and the other four counties as another. This would require them to dissolve and recreate, with the NMRE having to figure out how to reintegrate them. Mr. Kurtz will be writing a letter to the NLCMHA Board to make sure the other four counties are aware of the work they will have to do if this goes through. Mr. Kurtz stated he will make sure services are continuing to be delivered, and if there are service disruptions in the area the NMRE will provide oversight. It would take about a year for NLCMHA to disband.

Eric Lawson sought further clarification on the MDHHS reorganization. Mr. Kurtz thinks it is mostly due to the children's lawsuit, which is a roughly \$90 million settlement, and it is also a way for them to deal with the legislative complaints.

Erick Kurtz departed the meeting at 3:49 p.m.

IX. May Monitoring Reports

1. Treatment of Individuals Served 01-002

The Recipient Rights Advisory Committee met in April and the Activity Report covers January – March 2022. Judy Jones reported there were 23 complaints substantiated, which is higher than normal, with many of the complaints regarding dignity/respect.

2. Budgeting 01-004

The Board reviewed the Statement of Revenue and Expense for the month ending March 31, 2022. Connie Cadarette reviewed the revenue line items with half of the year elapsed, stating revenue sits at 47.2% after paying the NMRE the underspent amount. Medicaid underspending is at \$1.2 million and Healthy Michigan underspending is at \$90,000 as of the end of March. The amount of general funds lapsing to date is \$58,000, which does include a carryover from FY21. The first incentive payment came in April for \$264,000. Ms. Cadarette drew attention to line 13, Revenue Fiduciary, which is new to the revenue statement and shows consumer funds. The Governmental Accounting Standards Board is now requiring this on financial statements, but it does not go to state reporting or the financial status report. Line 44, Expense Fiduciary, is also new and is the offset to Revenue Fiduciary. These two new line items will not factor into over or under funding, as they are only for compliance with the new laws.

Larry Patterson reviewed the expenses with Board members. Line items with negative variance were individually reviewed with explanation. Budget adjustments will be made as necessary.

3. Financial Condition 01-005

Connie Cadarette reviewed the Statement of Net Position and Change in Net Position for March 31, 2022, the end of the second quarter. She reported unrestricted cash would keep the agency running for 36 days. Ms. Cadarette stated in contrast to previous years when the unrestricted cash would keep the agency running for 40 – 45 days, the agency now holds more assets, instead of just cash. Ms. Cadarette stated revenue for the Community Foundation for Northeast Michigan fund did go down, despite contributions, due to stock market losses.

Eric Lawson questioned Ms. Cadarette on the effect staff raises had on the net position. Ms. Cadarette and Mr. Lawson discussed revenue hasn't been lost, but more money is being spent.

Moved by Roger Frye, supported by Terry Larson, to approve the May Monitoring Reports as presented. Motion carried.

X. Board Policy Review and Self Evaluation

1. Board Job Description 02-003

Board members reviewed the policy and did not recommend any revisions.

2. Board Core Values 02-014

Board members reviewed the policy and did not recommend any revisions.

XI. Linkage Reports

1. Northern Michigan Regional Entity (NMRE)

a. Regional Board Meetings

i. April 27, 2022

The April minutes were distributed to Board members at this meeting. Gary Nowak stated the Board will remain the same. Roger Frye stated officers will also stay the same.

ii. Mr. Frye stated the recent SUD Board meeting was held virtually, as there was only one application for the PA2 funds.

2. Community Mental Health Association of Michigan (CMHAM)

a. Spring Conference – June 7 & 8, 2022

Diane Hayka distributed hotel information and the schedule of events to attendees at this meeting. If any attending Board member is missing an offered BoardWorks module a green sticker is next to it. Voting will take place on June 6 at 5:30 p.m. Ms. Hayka has not registered attendees for specific sessions, so they may decide which to attend. If doing a BoardWorks 2.0 module, paperwork must be turned in to receive credit.

Judy Jones and Bonnie Cornelius volunteered to be voting delegates. Ms. Hayka will mail information on voting if received in advance.

XII. Operations Report

Erin Fletcher reviewed the services provided by staff for the month ending April 30, 2022. The Access program provided 55 routine access screens, zero emergent, and one urgent. Outpatient Counseling served 107 individuals including 23 children and 81 adults. Community Living Support Services served 97 individuals for I/DD and MI served 61. A total of 1,040 individuals were served in April.

XIII. Chair's Report

1. Strategic Planning Discussion Continued

Eric Lawson stated Ends will be discussed at the June meeting. Diane Hayka stated the semi-annual Ends report will also be presented. New Ends will be established at the July meeting.

2. Director's Contract

Eric Lawson stated Nena Sork's original three-year contract expires on June 30, 2022. Terry Larson suggested Board discussion on her contract and compensation occur prior to the Board meeting. Diane Hayka reminded the Board they have scheduled a policy workshop at 1:00 p.m. on June 9 before the Board meeting. Cheryl Kobernik, a CARF reviewer, will be participating in the policy workshop. Mr. Lawson said they will need to discuss whether Ms. Sork's raises should coincide with staff raises or if they should follow the state's EQI. Lisa Anderson will attend the meeting, and will bring salary survey data and Ms. Sork's current salary and contract. Mr. Lawson suggested the Executive Committee meet to discuss Ms. Sork's contract on a separate day. The Executive Committee will meet on Thursday, June 2 at 12:00 p.m.

Mr. Lawson called the Board's attention to the Annual Report. Board members were in agreement that it looks good. Mr. Lawson especially enjoyed the success story.

XIV. Director's Report

1. Director Report Summary

Mary Crittenden provided Board members with an update of the various activities Nena Sork has participated in during the past month. For the week of April 18, Nena attended the NMRE OPS

meeting, the CMHA Member Services Committee, and the CMHA Board of Director's meeting. Nena put together an internal work group for the HRSA-NHSC application. If approved, clinical staff could qualify for loan forgiveness after a period of two years with a commitment to work an additional two years.

During the week of April 25, Nena presented with the Management Team at the All Staff Meeting. The Annual Report was submitted for printing. Nena attended the Presque Isle DHHS/CPS meeting and the NMRE Board meeting. The April Take Back Event was hosted by the Clinical Leadership Team in partnership with the Alpena City Police and Alpena Senior Center. Eleven pounds of medication were collected at the event. Additional Carter Kits were obtained from the NMRE. Ashley Shay from the clerical department is a Green Township volunteer firefighter, and has been working on distributing additional Carter Kits to volunteer fire departments. Nena met with Gavin MacDonald, Executive Director of The Sunset Project. May is Mental Health Awareness Month, and NeMCMHA has partnered with Cabin Creek Coffee by providing them with coffee sleeves that have the Agency's crisis hotline and logo on them. Cabin Creek Coffee is also selling "Be Grounded" coffee, with 30% of proceeds going to The Sunset Project, which works with youth aged 16 – 23, with a focus on the arts and mental health awareness.

For the week of May 2, Nena worked on a contract with MORC for Implicit Bias training, which will be a continuing education requirement for social workers beginning in June. The training will be available for NeMCMHA staff and community partners. NeMCMHA participated in, and was a lunch sponsor of, Leadercast at ACC. Sponsorship provided recognition, the opportunity to provide promotional materials, and a chance to speak at the event. Nichole Keyes, new in the HR department, spoke on behalf of the agency. On May 4, NeMCMHA partnered with Versiti to host a blood drive. Over 75 patients in Northern Michigan will be helped by the 25 donations collected.

During the week of May 9, Nena attended the Management Team and NMRE Finance Committee meetings. Nena, Ms. Crittenden, and the contract manager met with The Sunset Project staff to plan for future partnership on trainings and mental health awareness.

Ms. Crittenden shared the agency will be hosting a staff picnic on August 17 and employee recognition will occur the same week. Erin Fletcher and Ms. Crittenden met with Alcona schools in to discuss a donation from an individual from Alcona County for suicide prevention. The agency will put the funds back into Alcona County by providing Safe Talk training to Alcona Public Schools staff. The agency will be getting a new sign at the main office. The brick work will be done by a mason from Atlanta. The name and website will be permanent on the sign and there will be a changeable electronic portion. The other offices will also receive smaller updated signs, which Gary Nowak stated he has been wanting for years.

Gary Nowak stated he has received a few very good comments about Dr. Hoffman, and she has helped a lot of kids in Rogers City. Les Buza agreed that he has also heard the same thing.

2. **MDHHS Contract Amendment #1 via EGrAMS**

Diane Hayka clarified that the amendment was one MDHHS pushed through that had to go through EGrAMS, which is an electronic way of signing contracts with the state. Eric Lawson stated Nena Sork typically has to process these EGrAMS before a board meeting occurs, and then the memorandums come to the Board for approval.

Moved by Gary Nowak, supported by Les Buza, to approve the Executive Director's execution of MDHHS Contract Amendment #1. Roll call: Ayes: Bob Adrian, Geyer Balog, Les Buza, Bonnie Cornelius, Roger Frye, Lynette Grzeskowiak, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Terry Small; Nays: None; Absent: Pat Przeslawski

Gary Nowak requested a roll call be done when contracts or the spending of funds are brought to the Board, which Eric Lawson supported. Mr. Lawson suggested future agendas have a note

under items needing a roll call, and he reminded Board members they can request a roll call at any time.

3. Annual Submission

Mary Crittenden stated NeMCMHA is required to submit information on the waitlist for specific programs. Ms. Crittenden said the only waitlist is for autism spectrum disorder testing, which is done by contract providers on site. When a referral is received, an intake is done and staff monitor them while waiting for testing to confirm their diagnosis. There is a lot of additional data required for the Annual Submission and it is a very detailed report.

The Priority Needs and Planned Actions shows the five priority issues that will be NeMCMHA's goals and focus for the next two years. The priority issues are community education, expanding BHH, increasing transportation assistance, strengthening relationships with local law enforcement, and expanding peer support services. Diane Hayka stated the priority goals were developed from the survey and public hearing attended by individuals served, advocates, the justice system, etc., and are based on what people feel is lacking in the community. Eric Lawson suggested Board members take a good look at these goals as they move into strategic planning.

4. QI Council Update

There were no questions on the QI Council minutes from the April meeting.

XV. Information and/or Comments from the Public

There was no information and/or comments presented.

XVI. Information and/or Comments for the Good of the Board

Gary Nowak requested discussion of increasing the Board member per diem be included as an agenda item for the Executive Committee meeting on June 2. Diane Hayka reported Alpena County's per diem is \$30, Alcona County's is \$35, and Montmorency and Presque Isle counties are both \$50. Ms. Hayka stated the per diem policy used to require following the county seat, which is Alpena, but it isn't the policy any longer. Eric Lawson agreed it could be discussed at the June 9 meeting.

XVII. Next Meeting

The Executive Committee will be meeting June 2 at 12:00 p.m. and the Board will have a policy workshop on June 9 at 1:00 p.m. The next regularly scheduled meeting of the Northeast Michigan Community Mental Health Authority Board will be held Thursday, June 9, 2022 at 3:00 p.m.

1. Set June Agenda

The June agenda items were reviewed, as well as the next year of scheduled Board meetings.

2. Evaluation of Meeting

Bob Adrian reported the meeting started and ended on time. Mr. Adrian stated Eric Kurtz gave a great presentation, staff reports were very good, and the majority of the Board participated with questions and comments. Mr. Adrian stated the venue was a little tight, but they made do.

XVIII. Adjournment

Moved by Lynette Grzeskowiak, supported by Geyer Balog to adjourn the meeting. Motion carried. This meeting adjourned at 4:43 p.m.

[signed by Bonnie Cornelius on 06/09/2022]
Bonnie Cornelius, Secretary

[signed by Eric Lawson on 06/09/2022]
Eric Lawson, Chair

Rebekah Duhaime
Recorder