

**Northeast Michigan Community Mental Health Authority (NeMCMHA) Board  
Board Meeting  
October 13, 2022**

**I. Call to Order**

Chair Eric Lawson called the meeting to order in the Board Room at 3:00 p.m.

**II. Seating of Board Members**

Eric began by seating two new Board members from Montmorency County. Charlotte Helman introduced herself and stated she lives in Hillman with her husband and is employed as an RN wound specialist. Lloyd Peltier told the Board he moved to Hillman four years ago from Pontiac area. He took over the Montmorency County Commissioner seat vacated by Geyer Balog, as well as eleven board positions Geyer held. Lloyd is currently running unopposed for the Montmorency County Commissioner seat.

**III. Roll Call and Determination of a Quorum**

Present: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small

Absent: Pat Przeslowski (Excused)

Staff & Guests: Lisa Anderson, Carolyn Bruning, Connie Cadarette, Erin Fletcher, Lynne Fredlund, Lexxis Klee, Brooke Paczkowski, Larry Patterson, Nena Sork

**IV. Pledge of Allegiance**

Attendees recited the Pledge of Allegiance as a group.

**V. Appointment of Evaluator**

Robert Adrian was appointed as evaluator for this meeting.

**VI. Acknowledgement of Conflict of Interest**

Robert Adrian has a conflict of interest related to the NEMROC consent agenda, which has already been pulled as a separate item for this purpose.

**VII. Information and/or Comments from the Public**

No information or comments were presented.

**VIII. Approval of Minutes**

***Moved by Gary Nowak, supported by Lynnette Grzeskowiak, to approve the minutes of the September 8, 2022 meeting as presented.*** Motion carried.

**IX. Educational Session – Behavioral Health Home (BHH)**

Lexxis Klee, RN, provided an educational session on Behavioral Health Home (BHH). The Vision of BHH is to be the safety net for those who may slip through the cracks between mental and physical health. Lexxis feels she finds many things that otherwise may have been missed. Lexxis stresses advocating for individuals and giving them the confidence to advocate for themselves. She stated individuals can be afraid to speak up, and she strives to help them improve their communication/coordination with primary care. She wants to make sure individuals are taking care of both their mental and physical health. The goals of BHH include improving management of care, improving care coordination, improving transitions, and helping to advocate for support. BHH is a holistic approach to healthcare which works to coordinate health, social, and recovery needs to improve overall health and wellness. The core services of BHH are providing comprehensive care management, coordinated care tailored to the individual's specific needs, health promotion and education, transitional care assistance, individual and family support (children can be enrolled in BHH), referrals to appropriate community and support services, access to a team of healthcare professionals, and assistance in healthcare decision making.

Criteria for enrollment in BHH includes an SMI/SED diagnosis, residing within the NeMCMHA catchment area, having Medicaid/Healthy MI/Healthy Child for insurance, and not being enrolled in Opioid Health Home. The referral process is done through the EHR system, Majestic. Lexxis ensures appropriate diagnoses and insurance prior to meeting with the referred individual. Official enrollment happens through the NMRE. The BHH team meets every Tuesday and to go over updates on each enrolled individual. Lexxis gave

examples of how BHH has benefited individuals. Lexxis reported that individuals state they appreciate the outreach attempts (which are at least monthly), and they like being able to have an advocate in their appointments with them. Though some individuals who approach the Agency don't meet criteria for receiving NeMCMHA services, they may meet BHH criteria and can be enrolled without receiving services from a CMH. This can be a pathway for those in the mild/moderate category to get mental health assistance.

**X. Consent Agenda**

**A. Hospitals**

Cedar Creek	Healthsource of Saginaw
Forest View	McLaren
Harbor Oaks	MyMichigan Health
Havenwyck	Pine Rest

**B. Crisis Residential**

Beacon – Sandhurst & Coster	North Shores
Hope Network – Saginaw Meadows	Safehaus

**C. ABA Services**

Autism of America	ABA Pathways
ACORN Health of Michigan	

**D. Thunder Bay Transportation Authority**

**E. Catholic Human Services**

**F. Bay View Center**

**G. Protocall**

**H. Case Management of Michigan**

**I. Saginaw Psychological Services Inc.**

**J. Touchstone Services Inc., dba Light of Hope Clubhouse**

Board members received a handout with information on the MyMichigan Health contract for FY23.

*Moved by Gary Nowak, supported by Terry Small, to approve the October Consent Agenda as presented.* Roll call: Ayes: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small; Nays: None; Absent: Pat Przeslawski. Motion carried.

**XI. NEMROC**

The NEMROC contract is for Supported Employment Services and Community Living Supports.

*Moved by Les Buza, supported by Gary Nowak, to approve the NEMROC contract as presented.* Roll call: Abstain: Robert Adrian, Ayes: Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small; Nays: None; Absent: Pat Przeslawski. Motion carried.

**XII. MDHHS FY23 Contract – EGrAMS**

Nena Sork explained that NeMCMHA receives its capitated funds from MDHHS. The General Funds amount has increased slightly. MDHHS contracts that come through EGrAMS have tight turnaround times, and in many cases have signing deadlines prior to the next Board meeting. The Agency has a policy in place which allows the Executive Director to sign contracts in EGrAMS prior to Board approval, with notification to the Board Chair. These contracts are always regarding revenue, not expenses.

*Moved by Lynnette Grzeskowiak, supported by Bonnie Cornelius, to approve the Executive Director's signing of the MDHHS FY23 Contract on EGrAMS.* Motion carried.

**XIII. FY23 Budget**

Connie Cadarette reviewed the proposed FY23 Budget. The accounting and finance departments worked hard to have numbers finished by October 6, which allowed Board members to be sent the proposed FY23 Budget for review prior to the Board meeting. Connie discussed revenues with the Board, though numbers received

at this point in the year are not final. The State has to give 90 days' notice for Medicaid redeterminations. Connie stated they were conservative when budgeting revenues, as they won't know the actual amount until January, which Nena explained is when the State finalizes their budget. Budgeted revenues decreased by \$323,300 dollars, with a total budget of \$37,591,671.

Larry Patterson stated they were also conservative with the FY23 Expense Budget. The large decrease in the budget for salaries is due to putting some positions on hold. Health Insurance increased by \$232,058. Larry said the \$189,479 decrease in Computer Equipment and Supplies is due to using additional funds in FY22 to set the Agency up for the future. A decrease of \$32,828 in Medical Supplies is due to purchasing less PPE than during the height of the COVID-19 pandemic. The Contracted Transportation line item was decreased by \$39,551 due to decreased usage. Line items for Contracted Inpatient, Residential, and Employees/Services look like they have a \$6,360,677 decrease, but it's not a true decrease as the line items were just broken out. The line item for Stability Payments (\$101,825) was removed, Staff Travel Mileage was decreased by \$17,204, and Vehicle Gasoline was increased by \$22,486. Capital Equipment Over \$200 was decreased by \$130,502, as most items were purchased during FY22.

Connie reported the Governmental Accounting Standards Board (GASB) instated new laws. In FY22 this included adding Fiduciary Funds to the financial statements. These funds are not part of the Agency's budget, but GASB wants to see the numbers reported. This year, GASB has changed the way rents are reported. If rent is paid to a landlord on a three-year lease, the amount must be reported as an asset, which means the Agency's leases will be capitalized. The previous line item for Rent – Homes and Office Buildings is now called Amortization Expense – Leases (Rent). A line item for Interest Expense – Leases was also created. Rent will now be called an Amortized Lease.

Larry reiterated that though the staffing budget for Full Time Equivalents (FTEs) looks like it has decreased, the positions are just on hold. The number of FTEs is not a whole number due to staff working in multiple cost centers, and their salaries being allocated by department, which leads to the total number of FTEs being 344.25. In the past, every open position would be budgeted for, but Nena stated they are now doing an operational budget, which typically budgets for 80% staffing. To be conservative, the Agency budgeted for 90% staffing for the year.

***Moved by Terry Larson, supported by Judy Jones, to approve the FY23 Budget as presented.*** Roll call: Ayes: Robert Adrian, Les Buza, Bonnie Cornelius, Lynnette Grzeskowiak, Charlotte Helman, Judy Jones, Terry Larson, Eric Lawson, Gary Nowak, Lloyd Peltier, Terry Small; Nays: None; Absent: Pat Przeslawski. Motion carried.

Connie asked the Board to approve the utilization of the FY23 Budget for reporting moving forward. This would allow the accounting and reimbursement departments to start reporting on October 1 with the new system in place, rather than using the previously approved FY23 Continuation Budget.

***Moved by Terry Larson, supported by Les Buza, to approve using the new FY23 Budget for financial reporting.*** Motion carried.

#### **XIV. October Monitoring Reports**

##### **1. Budget 01-004**

Connie reported on revenues on the Statement of Revenue, Expenses and Change in Net Position through August 31, 2022. A lot of larger project spending went through, but as the NMRE is fully funded, any funds paid back would be leaving the area. The current amount due back to the NMRE is \$34,457.

Larry reported on expenses through August 31, 2022. Most line items with negative variances are due to timing issues, and should smooth out in the next month. Contract Employees and Services has a negative variance of \$595, 515.65, but is still under budget for the year. Contract Inpatient Services also shows a negative variance of \$125,947.39, while also still being below the budgeted amount for the year. Contract

Residential Services is over budget by \$426,910.58, which will require an adjustment. With 91.67% of the year elapsed, expenses are at 90.06% of the budgeted amount.

## **2. Compensation and Benefits 01-008**

Eric reviewed the purpose of monitoring reports with the new Board members, stating the Board uses these reports to monitor the performance of the Executive Director, which is a direct indicator of how the Agency is operating as a whole. Nena drew the Board's attention to the graph showing the change in staff salaries and wages. The target numbers come from the CMHA salary survey. The Management Team's goal was to raise all salaries to at least the average, which has now been accomplished.

*Moved by Bonnie Cornelius, supported by Robert Adrian, to approve the October Monitoring Reports as presented.* Motion carried.

## **XV. Board Policies Review and Self-Evaluation**

### **1. Annual Board Planning Cycle 02-007**

Eric stated the Board reviews their policies to ensure they are accurate and that the Board is abiding by them. No revisions to this policy were suggested.

### **2. Executive Director Job Description 03-003**

No revisions to this policy were suggested.

### **3. Monitoring Executive Director Performance 03-004**

No revisions to this policy were suggested.

## **XVI. Linkage Reports**

### **1. NMRE – September 28 Board Meeting**

Eric and Gary Nowak stated the NMRE Board received a great presentation on BHH. Bob Sheehan provided them with a letter describing organizational issues within MDHHS. Nena stated the Whiteford and Shirkey bills to privatize the mental health system have lost momentum. There were only six counties in the state that did not pass a resolution against the privatization bills. The mental health crisis in the state is mostly in the mild/moderate population, who typically have private insurance and cannot be seen by the CMH system. A rural exemption is being sought.

### **2. CMHA**

The Annual CMHA Fall Conference will be held on October 24 and 25. Bonnie Cornelius and Judy Jones will be attending and will be the Board's voting delegates on Sunday. Terry Small is no longer able to attend, but Lloyd or Gary may be able to attend in his place.

### **3. Advisory Council – October 10 Meeting**

Les Buza stated Peggy Yachasz gave an educational session on Gentle Teaching, which he really enjoyed, and they also received a tour of building updates, including the exercise room and shower.

## **XVII. Operations Reports**

Erin Fletcher provided the Board with a review of the August and September Operations Reports. In August, Doctors' Services served 521 individuals, which is higher than the monthly average of 423, due to having a new nurse practitioner and psychiatrist. Outpatient Counseling served 111 individuals, there were 55 hospital prescreens, and the total number of individuals served for the month of August was 1,108. For the month of September, Doctors' services served 452 individuals, Access provided 50 routine screens, and CMH operated group homes served 59 individuals. NeMCMHA served 1,025 individuals in the month of September.

## **XVIII. Chair's Report**

### **1. Annual Calendar Adoption**

There were no additional revisions suggested for the NeMCMHA Board Annual Calendar.

*Moved by Terry Small, supported by Gary Nowak, to approve adopting the NeMCMHA Board Annual Calendar as presented.* Motion carried.

## **2. Strategic Plan**

This Strategic Plan was revised according to the work the Board has done over the last few months. The provided Strategic Plan includes all revisions and additions discussed to this point.

*Moved by Gary Nowak, supported by Terry Small, to approve the Strategic Plan.* Motion carried.

## **3. Ends Policy**

The Ends policy shows the revisions that were made to Strategic Plan in strike and underline format. Nena stated that one study from MDHHS showed a savings of approximately \$363 of Medicaid expenses for each individual enrolled in BHH. The region's 21 counties just hit the \$1 million funding mark for BHH. BHH funding goes to local match and the Agency can use those funds for any needs in the community.

*Moved by Les Buza, supported by Lynnette Grzeskowiak, to approve the revised Ends Policy.* Motion carried.

## **4. Appoint Nominating Committee**

Bonnie, Lynnette, and Gary's terms expire March 31, 2023. The Board typically has one member from each county on the Nominating Committee. Terry Small from Alcona, Charlotte Helman from Montmorency, Terry Larson from Presque Isle, and Lynnette Grzeskowiak from Alpena will make up the committee, and will meet at 2:30 p.m. prior to the Board meeting on November 10.

## **5. CMH PAC**

Information on how to contribute to the CMH PAC was provided for Board members in their packets.

## **XIX. Executive Director's Report**

### **1. Executive Director's Update**

Nena gave the Board an overview of her activities from the last month. During the week of September 12, she was involved in contract discussions and attended the NMRE finance meeting. The following week, Management Team held a panel for staff to discuss the staff survey, and Nena also attended the Operations Committee and the MDHHS Workforce Flexibilities Meeting. The same week, Nena attended the Annual Pension Trustee Meeting and the BHH Summit at Treetops. For the week of September 19, she attended the AFC provider meeting, the Directors' Forum in Lansing, the Presque Isle County Suicide Prevention Walk, and the group home Fall Festival. The Fall Festival was one of the first opportunities for individuals to get together since the pandemic. There was a soup contest, judged by the maintenance department, live music, line dancing, and a campfire. On October 3, Nena met with APS Superintendent, David Rabbideau, and she plans to meet with each county's school superintendent. Nena also worked to finalize the FY23 Budget, and attended a meeting with the NMRE and Farrah Hanley from MDHHS.

Nena reported that staff received a 1% retention payment in their October 6 paycheck. The parking lot will be redone in October, landscaping is mostly completed, the new sign will be put in soon, and the computer lab renovation is finished.

Nena has a goal to get a permanent office in Alcona County and have prescribers and clinical staff available there. She met with Terry Small, who is a realtor, and they looked at all available properties in Harrisville and Lincoln and also looked at an opportunity to build space as part of a human services office complex. Having an additional office space available will be especially important if the rural exemption is granted, as it would allow for outpatient therapy and psychiatry. Necessary square footage and the projected cost will be provided to the Board. Gary stated he would like Nena to move forward with the Alcona County project.

## **XX. Information and/or Comments from the Public**

There were no additional comments.

**XXI. Information and/or Comments for the Good of the Organization**

Eric and Board members wished Les a happy birthday.

**XXII. Next Meeting**

The next regularly scheduled meeting of the Northeast Michigan Community Mental Health Authority Board will be held Thursday, November 10, 2022 at 3:00 p.m. Board meetings are always held in the Board Room at the 400 Johnson Street office in Alpena, unless otherwise noted.

**1. Set November Agenda**

The proposed November agenda items were reviewed.

**2. Meeting Evaluation**

Bob stated the meeting started on time, there was a good educational session, and great budget preparation and explanation from Connie and Larry. Board participation was good and there was a nice flow to the meeting, which was well-run and organized.

**XXIII. Adjournment**

*Moved by Les Buza, supported by Lynnette Grzeskowiak, to adjourn the meeting.* Motion carried.  
This meeting adjourned at 4:43 p.m.

[Signed by Bonnie Cornelius on 11-10-22]

Bonnie Cornelius, Secretary

[Signed by Eric Lawson on 11-10-22]

Eric Lawson, Chair

Rebekah Duhaime  
Recorder