Northeast Michigan Community Mental Health Authority
Board Meeting – September 10, 2026

I. Call to Order

Vice Chair Lloyd Peltier called the meeting to order in the Board Room at 3:00 p.m.

II. Roll Call and Determination of a Quorum

Present:	Dennis Bannon, Bonnie Cornelius, Jennifer Graham, Lynnette Grzeskowiak, Charlotte Helman, Kara Bauer LeMonds, Lloyd Peltier, Anne Ryan, Terry Small.
Absent:	Bob Adrian (Excused), Dana Labar (Excused), Eric Lawson (Excused)
Staff & Guests:	Carolyn Bruning, Connie Cadarette, Rebekah Duhaime, Erin Fletcher, Jason Lepper, Kerry Rastigue, Nena Sork

III. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

IV. Acknowledgement of Conflict of Interest

No conflicts of interest were acknowledged.

V. Information and/or Comments from the Public

None were presented.

VI. Approval of Minutes

Two corrections will be made: one to revise the header to remove Advisory Council and the second to remove the redundant "million" from the Budget Monitoring Report.

Moved by Terry Small, supported by Lynnette Grzeskowiak, to approve the minutes of the August Board meeting as amended. Motion carried.

VII. September Monitoring Report

1. Budgeting 01-004

Connie Cadarette reported on revenue and expenses for the month ending July 31, 2026, with 83.3% of the year elapsed. The 3% staff retention payment from August is not reflected on the current report. Medicaid and Healthy Michigan combined are underspent by $1,746,846. She reviewed that Local Funds consist of NMRE incentive revenue, county payments, BHH funds, and some interest. The Agency should be able to keep the full allowed carry forward amount for General Funds, which comes to a little over $60,000. A budget adjustment was not needed this year, as variances are close, but a new GASB standard will require Connie to report on variances for FY27, so a budget adjustment may be necessary next year. The Agency currently has 47 days of cash on hand.

Moved by Lynnette Grzeskowiak, supported by Bonnie Cornelius, to approve the September monitoring report. Motion carried.

VIII. Board Policies Review

1. General Executive Constraint 01-001

The Board thinks the policy is succinct and good as-is.

2. Compensation and Benefits 01-008

The Board thinks the policy is straightforward and does not require any revisions at this time.

3. Committee Structure 02-006
The policy was revised last year, and the Board agreed that it looks good this year.

4. Executive Director Search Process 03-005
Nena reviewed her succession plan for emergency situations. Duties would fall to Connie Cadarette, Chief Financial Officer; Erin Fletcher, Clinical Director; Kara Steinke, Chief Administrative Officer; and Kerry Rastigue, Deputy Director of Clinical and Support Services.

5. Chairperson's Role 02-004
The Board reviewed and approved two revisions for clarity.

Moved by Dennis Bannon, supported by Kara Bauer LeMonds, to approve the revisions to the Chairperson's Role Policy. Motion carried.

IX. Linkage Reports

1. Northern Michigan Regional Entity (NMRE) Board
Nena reported that as a region, the NMRE is doing well on performance indicators. They are wrapping up the annual survey of individuals served, of which Northeast had the second highest return rate of the five CMHs. She reviewed the status of mediation with MDHHS regarding the FY25 contract, which has been making progress. The NMRE has a fully funded internal savings fund, and Northern Lakes has significantly decreased their deficit under their new executive director.

X. Operations Report

Erin reported on operations for the month of August. She reviewed hospital prescreens, which show whether an individual meets criteria for inpatient treatment. A positive screen means the screener recommends hospitalization. The Agency completed 61 screens in August. If room at a hospital is not immediately available, the individual will continue to be screened daily while they are waiting in the emergency department. In a recent case, 15 screens were necessary until room was found at a hospital. The total of unduplicated individuals served in August was 985.

XI. Board Chair's Report

1. Setting Perpetual Calendar
Rebekah reviewed changes from the FY26 calendar, including adding a reminder for the possible economic opener for the Executive Director's contract in FY28. The Board agreed that the perpetual calendar looked good.

2. Board Self-Evaluation Report
The Board reviewed the results of their annual self-evaluation, with 8 of 12 surveys returned. The Board discussed ways they could improve, including participating in more Agency events. Questions with responses of "disagree" were discussed.

3. CMHA Fall Board Conference – October 26 & 27
Lloyd, Kara, and Bonnie would like to attend. Anyone else wishing to attend can let Rebekah know.

XII. Executive Director's Report

Nena reported on her activities over the last month. She discussed the Rural Health Transformation Program, which is part of H.R.1. The State would split some additional funding between rural and frontier counties, though the way those classifications were designated is under scrutiny. Michigan was awarded $173 million, which is below the expected $200 million.

Nena provided her annual report to the Montmorency County Commissioners. The four counties pay a combined $266,000 every year (per the authority agreement), with the distribution based on population. The

amounts are redetermined every five years, and Montmorency's share will be going down.
MIS held a tabletop exercise with the Michigan State Police to review cybersecurity. The Agency received excellent feedback on measures already in place. Nena participated in the Director's Forum and the Great Lakes Rural Mental Health Association Conference. This was the first time the NMRE was invited to attend. By working together, the NMRE combined with the UP have a population of 300,000 and take up 1/3 of Michigan's geography.

Nena discussed upcoming research to make the Agency's court order system an evidence-based practice. With the Agency's approach, they have seen a 50-60% reduction in recidivism. Most evidence-based practices are created in and for urban populations and don't work well in rural/frontier areas.

Nena shared that 2028 will be the Agency's 60th anniversary. The Board agreed that a celebration should be planned.

XIII. Information and/or Comments from the Public

None were presented.

XIV. Information and/or Comments for the Good of the Organization

Terry reported that in the most recent issue of the MAC magazine they are putting out a message of support for the CMHs against privatization.

Anne attended the open house for Lake Therapy, a new autism provider in Rogers City, and they praised the Agency for helping them get settled.

Kara is proud of how CMH operates under a difficult mental health system. She praised the community for how hard they work to take care of everyone and feels it is an example of what could be accomplished with a more unified healthcare system.

Jennifer said the State wanted private providers to complete forms regarding the referral process to CMH, and she knew they were skewed to get the answers they wanted.

XV. Next Meeting

The next meeting of the NeMCMHA Board is scheduled for Thursday, October 8, 2026, at 3:00 p.m.

1. Proposed October Agenda Items

The October agenda items were reviewed.

XVI. Adjournment

Moved by Charlotte Helman, supported by Terry Small, to adjourn the meeting. Motion carried.

This meeting adjourned at 4:20 p.m.

[Signed by Bonnie Cornelius on October 8, 2026]
Bonnie Cornelius, Secretary

Signed by Eric Lawson on October 8, 2026]
Eric Lawson, Chair