

BOARD OF DIRECTORS REGULAR MEETING MINUTES June 26, 2024

Present:

Catherine Bernhold, Secretary; Rebecca Pasko; Pam Ray; LaMar Frederick; John Burkardt;

Rebecca Curley; Dawn Asper (arrived at 5:05pm); Naomi Stoner; Deb Staelgraeve: and

Ken Papenhagen

Excused:

Michael Humphries, Chairperson; and Susan Fortney, Vice Chairperson

Absent:

Staff:

Lisa Graham

Guests:

Drew Van de Grift, Dykema, Jerry Aben, Dykeman, and 6 guests attended

I. CALL TO ORDER

The Board Secretary, Catherine Bernhold, called the meeting to order at 5:00 p.m.

II. ROLL CALL

Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Catherine Bernhold.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

Catherine Bernhold requested to pull ahead item XIII. Items from the Chief Executive Officer to follow item VII. Citizen Comments.

Ken Papenhagen moved to adopt the draft amended agenda as presented. Pam Ray supported. Motion carried unanimously.

V. CONSIDERATION TO APPROVE THE MINUTES FROM THE MAY 22, 2024 BOARD MEETING AND WAIVE THE READING THEREOF

John Burkardt requested to amend the May 22nd minutes as his name is spelled incorrectly during Board Member Announcements.

John Burkardt moved to approve the amended minutes for the May 22, 2024 Board Meeting and waive the reading thereof. Rebecca Pasko supported. Motion carried unanimously.

VI. FEEDBACK SUMMARY

Catherine Bernhold reviewed feedback from the May 22, 2024 Board Meeting.

VII. CITIZEN COMMENTS

There were no citizen comments.

Dawn Asper arrived at 5:05pm.

VIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Finance Report: Richard Carpenter presented the April financials and highlighted:
 - i. The spike in revenue is due to the new rates the PIHP put out. We do expect eligibles to trend down through June. There is discussion happening at the association level as there may be a need for a second rate adjustment.
 - ii. In review of the finance statement on how the PIHP loos at us, through the month of April our Medicaid has a surplus of 1.5 million and Healthy Michigan has a surplus of \$200,000.
 - iii. In review of the CCBHC Medicaid side, we are overspending the revenue earned by \$270,000 and Health Michigan by \$250,000 for a total of approximately \$500,000. We are looking at productivity to break even. We are also proposing to the state for us to do a manual reconciliation to identify how many dollars are General Fund vs Medicaid in state reporting. If they accept the proposal, then we may be able to fix this issue. Part of the expense is because we are now a CCBHC but overall, it was still worth becoming a CCBHC. It is our first year as a CCBHC and we are working through these issues.
 - iv. A question was asked about how much Fund Balance we have. Liabilities are included in the amount. When you take the long-term liabilities out and review, we have a positive of approximately 2.6 million in Fund Balance.

Lisa Graham commented that the Governor's budget increased the funds for CCBHC. The state looks to be very invested in making the CCBHC programs successful. To Lisa, that says, the state wants this program to succeed and if multiple CMHs across the state are saying we cannot do it with this model that they will hear the issue and provide a fix.

v. Managing General Fund Deficit – Lisa Graham provided an update on managing the General Fund deficit. We are identifying non-Medicaid consumers and make every effort to re-enroll them into Medicaid; verifying that spend downs are met and communicated to MDHHS; and limiting discretionary General Fund spending. The Non-Medicaid General Fund Policy is almost complete and will bring to the Board upon completion for feedback.

b. Chief Executive Officer's Report:

- i. Lisa Graham commented that MCMHA's Medical Director, Dr. Kim Horn, has announced her resignation, effective January 10, 2025. Dr. Horn has expressed a desire to continue with MCMHA as a part-time prescriber and will play an active role in securing a new Medical Director. We will begin the search for a new Medical Director immediately.
- ii. Lisa Graham also commented on Crossroads Clubhouse receiving a 3-Year conditional accreditation; the new MCMHA Webpage to be completed by August; Strategic Planning; Behavioral Health Urgent Care; Group Homes; FY2023 Budget; and FY2025 Budget development.

Lisa Graham requested to refer to the Clinical Operations packet for detailed clinical and operations updates.

IX. PRESENTATIONS, RECOGNITIONS, AND CELEBRATIONS

a. FY2024 Quality Metrics Report

i. MDHHS Audit Report - Clinical Services is audited by the state of Michigan and the PIHP alternate years. FY2023, MDHHS conducted the Waiver Audit October through December. A total of 15 cases were reviewed in the areas of Habilitation and Support Waiver, Children's Waiver, Serious Emotional Disturbances Waiver, and iSPA. They review everyone in the region. The audit covers many areas: Administrative Procedures, Eligibility, Freedom of Choice, Implementation of Person-Centered Planning, Plan of Service and Documentation Requirements, Behavior Treatment Plans and review Committees, Waiver Participation Health and Welfare, Staff Qualifications, and Home Visits/Training/Interviews. There is no

overall score. Monroe had several citations, but nothing that rose to a level of concern. Examples are a record did not have evidence of consumer input, services were authorized as a range rather than with specificity, etc. There was one systemic issue with Medication Consents which has since been resolved. Monroe has submitted our Corrective Action Plan indicating that all citations will be remedied individually and systemically by June 30, 2024.

ii. 1st and 2nd Quarter CCBHC Quality Metrics Report - Lisa Graham presented the state demographics and 1st and 2nd quarter CCBHC Metrics. Lisa commented that we have met some of the indicators and are showing improvement from 1st quarter to 2nd quarter. We expected this as the metrics are for the areas that required us to become a CCBHC by October 1, 2023. We are aware of the indicators, training staff on understanding the indicators, and providing training where it is needed, and feel we will continue to improve.

Lisa Graham will present the CCBHC Quality Metrics to the Board on a quarterly basis and is happy with the progress we are making.

LaMar Frederick asked is we know how other CCBHCs in the state of Michigan are doing with quality indicators. Lisa Graham asked Sabrina Bergman, CCBHC Program Director, to respond. Sabrina commented that it is a yes and no answer. There are certain metrics we have access to for other providers. There are a handful of CCBHCs that have historically not performed well. The state has acknowledged that CCBHCs cannot meet the current quality metrics and will be revising them for the next fiscal year. Lisa Graham commented that there is a performance bonus if the quality metrics are met. This fiscal year you have to meet all the quality metrics to get a bonus. Next fiscal year they will reconsider that.

iii. 1st Quarter Michigan's Mission-Based Performance Indicator System (MMBPIS) Report - Lisa Graham presented the MDHHS indicators and commented that we are continuously working on quality improvement for all indicators.

X. BOARD COMMITTEE REPORTS

a. Committee Chair Reports

Clinical Operations – Lisa Graham commented that the FY2024 Quality Metrics Report was presented to the committee.

Community Relations – Rebecca Pasko commented that Kayla from Revel joined the committee and presented on the status of the new MCMHA Webpage and future campaign plans. MCMHA is in the planning stage of a Town Hall for October of this year. This will be an opportunity for this committee to assist helping the community to understand what CMH can and cannot do as a way to support Monroe CMH.

Executive – Catherine Bernhold commented that the committee met to review the Board Agenda for today's meeting.

b. Committee Sign Up Announcement – Catherine Bernhold announced that board members will receive an email following the Board Meeting to sign up for what committees they would like to participate on. Appointments will be made at the July 24, 24 Board Meeting.

c. Motion to Place on File All Written Reports

Ken Papenhagen moved to place all written committee reports on file. Dawn Asper supported. Motion passed unanimously.

Written reports placed on file were Business Operations; Clinical Operations; Community Relations; and Executive.

XI. ITEMS FOR BOARD ACTION

- a. Motion to Approve the Consent Agenda Less Item
 - i. Service Contracts as Presented
 - ii. Administrative Contracts as Presented

LaMar Frederick moved to approve the Service Contracts as presented. Pam Ray supported. Roll call: In favor: Pasko, Ray, Frederick, Burkardt, Bernhold, Curley, Asper, Stoner, Papenhagen, and Staelgraeve; opposed: none; motion carried unanimously.

LaMar Frederick moved to approve the Administrative Contracts as presented. Pam Ray supported. Roll call: In favor: Pasko, Ray, Frederick, Burkardt, Bernhold, Curley, Stoner, Papenhagen, and Staelgraeve; opposed: Asper; motion carried.

XII. AUTHORITY AND REGIONAL POLICY REVIEW/APPROVAL

a. Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented

i. Policy: HR4015 Exit Interview Policy

POC7004 Consumer Discharge Policy

ii. Procedure: HR4015-P1 Exit Interview Procedure

POC7082-P1 Personal Health Review Procedure

POC7027-P1 Physical and Dental Examinations Procedure EOC2002-P6 Clinic Visit Bed Bug Infestation Procedure

iii. Exhibit: HR4015-E1 Exit Interview Survey Exhibit

HR4015-E2 Supervisor Exit Checklist for Staff Departure Exhibit

POC7004-E3 Discharge Satisfaction Survey Exhibit

iv. Rescind: N/A

v. Relocate: EOC2023 Medical Emergency Response Policy is being relocated from

POC7013 Emergency Medical Response Policy

LaMar Frederick moved to approve the Authority Policy, Procedure, and Exhibits as presented. Ken Papenhagen supported. Motion carried unanimously.

b. Motion to Approve the Regional Policy, Procedure, and Exhibits as Presented

i. Policy: HR4040 Ethics and Conduct Policy

POC7075 Clinical Record Content Policy

POC7061 Critical Incident Sentinel Risk Event Policy

ii. Exhibit: N/A

Ken Papenhagen moved to approve the Regional Policy, Procedure, and Exhibits as presented. LaMar Frederick supported. Motion carried unanimously.

XIII. RELATIONSHIP WITH REGION, COUNTY, AND OTHERS

- Regional Reports
 - i. <u>Regional PIHP Board Meeting Minutes</u> Rebecca Pasko commented that the subject of the FY2023 deficit came up again and it seems there is still some concern. The PIHP has requested to provide a written report within 30 days. That report will be presented at the August PHIP Board Meeting. Minutes from the June meeting were included in the packet.
 - iii. <u>State Legislation and Policy Committee Report</u> Rebecca Pasko commented that the committee meets tomorrow and will provide an update at the July Board Meeting.

XIV. NEW BUSINESS

Pam Ray commented on the loss of a consumer and how supportive CHS was to the consumers Mother. From the CHS Director down to line staff, they all were very supportive. We have providers and organizations in our community that do a stellar job and we don't hear that enough. Pam wanted to share that information with board members.

XV. **CITIZEN COMMENTS**

There were no citizen comments.

XVI. MOTION TO GO INTO CLOSED SESSION FOR PURPOSES OF ATTORNEY WRITTEN OPINION PURSUANT TO SECTION VIII (h) OF THE OPEN MEETINGS ACT AND ATTORNEY CLIENT PRIVILEGE

LaMar Frederick moved to go into Closed Session for purposes of Attorney Written Opinion pursuant to Section VIII (h) of the Open Meetings Act and Attorney Client Privilege. Pam Ray supported. Roll call: In favor: Pasko. Ray, Frederick, Burkardt, Bernhold, Curley, Asper, Stoner, Papenhagen, and Staelgraeve; opposed: none; motion carried unanimously.

The Board went into Closed Session at 6:43pm.

The Board went into Open Session at 7:57pm.

XVII. <u>ADJOURNMENT</u>

LaMar Frederick moved to adjourn the meeting at 7:59pm. Rebecca Curley supported. Motion carried unanimously.

Submitted by,

Catherine Bernhold

Board Secretary

LG/dp 6/27/24

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