



MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD MEETING

April 24, 2024 – 5:00 p.m. / Aspen Room

Draft Agenda

BOARD VALUES:

- 1.1 Monroe Community Mental Health Authority exists so that individuals with severe and persistent mental illness and intellectual/development disabilities can live, work, and play in their communities to their fullest potential.
- 1.2 Monroe Community Mental Health Authority strives to be the provider of choice for Monroe County by offering the highest quality of treatment with positive measurable outcomes, while maintaining competitive rates with the State.
- 1.3 Monroe Community Mental Health Authority establishes and sustains a culture that values each staff member; holds staff to high standards; is fair and respectful; and values creativity and promotes collaborative thinking.
- 1.4 Monroe Community Mental Health Authority continues to establish collaborative community relationships that enable MCMHA to provide quality service to consumers.

BOARD RULES OF CONDUCT:

- a. Speak only after being acknowledged by the Chair and only to the Chair.
- b. Keep deliberation focused on the issue and don't make it personal.
- c. Divulge all pertinent information related to agenda items before action is taken.
- d. Seek to understand before becoming understood.
- e. Seek to do no harm.

CITIZEN RULES OF CONDUCT:

- a. In order for our Board to move efficiently through the meeting agenda, we ask that everyone present conduct themselves respectfully and with decorum. Anyone who chooses not to comply with this will be asked to leave the building.

MISSION STATEMENT: Enrich lives and promote wellness.

VISION STATEMENT: To be a valued/active partner in an integrated System of Care that improves the health and wellness of our community.

CORE VALUES: Compassion, Authenticity, Trust, and Accountability.

	<u>Guide</u>
I. Call to Order	01 min
II. Roll Call	02 min
III. Pledge of Allegiance	02 min
IV. Motion to Adopt the Agenda as Presented	02 min
V. Motion to Approve the Minutes from the March 27, 2024 Board Meeting and waive the Reading Thereof	02 min
VI. Feedback Summary	02 min
VII. Citizen Comments	03 min/person
<i>"The Board will listen respectfully to any comments you would like to make but will not respond directly tonight. You can expect a follow up contact from the Executive Director or her representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes".</i>	
VIII. Presentations Recognitions, and Celebrations	20 min
a. Years of Service Awards – Lisa Graham	
b. Targeted Case Management Presentation – Lisa Graham (<i>handout</i>)	
IX. Board Committee Reports	10 min
a. Committee Chair Reports	
i. Business Operations	
ii. Bylaws & Policy	
iii. Clinical Operations	

- iv. Community Relations
 - v. Executive
 - b. **Motion to Place on File All Written Committee Reports**

- X. **Items for Board Action** **10 min**
 - a. **Motion to Appoint Dawn Pratt as the Nominating Committee**
 - b. **Motion to Open Contract Negotiations**

- XI. **Authority and Regional Policy Review/Approval** **05 min**
 - a. **Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented**
 - i. **Policy:** POC7027 Physical and Dental Examinations Policy
POC7028 Physical Pain Assessment Policy
POC7073 Waiting List Policy
 - ii. **Procedure:** POC7052-P26 MCMHA Jail Diversion Process Procedure
 - iii. **Exhibit:** N/A
 - iv. **Rescind:** POC7069-P4 Annual Re-assessment, IPOS Review, and Service Auth Procedure
 - v. **Relocate:** N/A
 - b. **Motion to Approve the Regional Policies as Presented**
 - i. **Policy:** N/A

- XII. **Relationship with the Region, County, and Others** **10 min**
 - a. Regional Reports
 - i. Regional PIHP Board Meeting Minutes – Included in Packet
 - b. CMHAM Policy and Legislation Committee Report – Rebecca Pasko

- XIII. **Items from the Chief Executive Officer** **15 min**
 - a. Financial Report – Richard Carpenter
 - b. Chief Executive Officer’s Report – Lisa Graham (*handout*)

- XIV. **New Business** **00 min**

- XV. **Citizen Comments** **03 min/person**

- XVI. **Announcements by Board Members** **03 min/person**

- XVII. **Adjournment** **01 min**

The next regular scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is on Wednesday, May 22, 2024 beginning at 5:00pm in the Aspen Room.

LG/dp 7:25 p.m.



**BOARD OF DIRECTORS REGULAR MEETING MINUTES
March 27, 2024**

- Present:** Michael Humphries, Chairperson; Susan Fortney, Vice Chairperson; Catherine Bernhold, Secretary; Rebecca Pasko; LaMar Frederick; John Burkardt; Rebecca Curley; Dawn Asper (arrived at 5:06pm); and Ken Papenhagen
- Excused:** Pam Ray; Deb Staelgraeve; and Chantele Steffens
- Absent:**
- Staff:** Lisa Graham
- Guests:** Drew Van de Grift, Dykema, and 8 guests attended

I. CALL TO ORDER

The Board Chairperson, Mike Humphries, 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 Mike Humphries.

IV. CONSIDERATION TO ADOPT THE DRAFT AGENDA AS PRESENTED

Mike Humphries advised the Board of an amended agenda for their consideration.

Susan Fortney moved to adopt the draft amended agenda as presented. Ken Papenhagen supported. Discussion followed. Motion carried unanimously.

V. CONSIDERATION TO APPROVE THE MINUTES FROM THE FEBRUARY 28, 2024 BOARD MEETING AND WAIVE THE READING THEREOF

Susan Fortney moved to approve the minutes for the February 28, 2024 Board Meeting and waive the reading thereof. Rebecca Curley supported. Motion carried unanimously.

VI. FEEDBACK SUMMARY

Mike Humphries reviewed feedback from the February 28, 2024 Board Meeting.

VII. CITIZEN COMMENTS

There were no citizen comments.

VIII. PRESENTATIONS, RECOGNITIONS, AND CELEBRATIONS

- a. **FY2023 CMHPSM Annual Submission** – Lisa Graham presented the FY2023 CMHPSM Annual Submission. The Annual Submission is required by the Michigan Mental Health Code, assesses community health data – physical and behavioral, and is an opportunity for community members to provide feedback on needs and gaps. The reporting requirements consist of a waiting list, request for service and disposition of requests, community data set worksheet, stakeholder survey, and a needs assessment – priority needs and planned activities. MCMHA received 38 stakeholder surveys (plus community coalition members) both in electronic and paper form. The top priorities, based on survey results were access to MCMHA services, especially for those with limited transportation; shortage of behavioral health providers, with a focus on preventing burn-out of currently employed providers; need for individuals to see a primary care physician; elimination of stigma; and overall teen wellness. The FY2023 CMHPSM Annual Submission will be submitted to the state before or by the deadline of March 29, 2024.

IX. BOARD COMMITTEE REPORTS

- a. **Motion to Place on File All Written Reports**

Bylaws & Policy – Catherine Bernhold commented that the committee is in the process of amending the Bylaws and found that we want to consolidate information with a policy. Once completed, will resend the policy or section out for review to the Board.

Clinical Operations – Susan Fortney commented on the clinical and operations reports provided at her committee. Please be sure to read the minutes and attachments in the Board Packet that is published on the agency website.

Performance Evaluation – Mike Humphries commented that the committee is starting the new year off by examining performance tools and refining them so that next year goes even smoother.

Ken Papenhagen moved to place on file all written reports. John Burkardt supported. Motion carried unanimously.

Written reports placed on file were: Business Operations; Bylaws & Policy; Clinical Operations; Executive; and Performance Evaluation.

X. ITEMS FOR BOARD ACTION

- a. **Motion to Approve the Consent Agenda Less Item _____**

LaMar Frederick moved to approve the Service Contracts. Ken Papenhagen supported. Discussion followed. Roll call: In favor: Papenhagen, Asper, Bernhold, Fortney, Humphries, Burkardt, Frederick, Curley, and Pasko; opposed: none; motion carried unanimously.

LaMar Frederick moved to approve the Administrative Contracts. Ken Papenhagen supported. Discussion followed. Roll call: In favor: Papenhagen, Asper, Bernhold, Fortney, Humphries, Burkardt, Frederick, Curley, and Pasko; opposed: none; motion carried unanimously.

- b. **Motion to Accept the FY2023 CMHPSM Annual Submission**

Ken Papenhagen moved to accept the FY2023 CMHPSM Annual Submission. Rebecca Pasko supported. Motion carried unanimously.

XI. AUTHORITY AND REGIONAL POLICY REVIEW/APPROVAL

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

- i. Policy: HR4026 Leave Sharing Donation Policy
HR4053 Professional Development Reimbursement Policy
FCM3038 Issuance and Use of Credit Card Policy
- ii. Procedure: HR4026-P1 Leave Sharing Donation Procedure
HR4053-P1 Professional Development Reimbursement Procedure
POC7052-P26 Assisted Outpatient Therapy Process Procedure
POC7074-P4 Internal Delay of Service Procedure
POC7069-P7 SBIRT Procedure
- iii. Exhibit: HR4026-E1 Emergency Vacation PTO Donation Request Form Exhibit
HR4026-E2 Personal Tragedy Vacation Donation Form Exhibit
HR4053-E1 Professional Development Expense Reimbursement Exhibit
POC7069-E15 M-SASQ Exhibit
POC7069-E16 MAST Exhibit
POC7069-E17 ASSIST V3 English Exhibit
POC7069-E18 AUDIT Exhibit
POC7069-E19 Combined CRAFFT 2.1 Exhibit
POC7069-E20 Drug Abuse Screening Test Exhibit
POC7069-E21 SBIRT Screening Cheat Sheet Exhibit
FCM3038-E1 Credit Card Agreement Exhibit
FCM3038-E2 Receipt Exception Form Exhibit
- iv. Rescind: N/A
- i. Relocate: N/A

Catherine Bernhold moved to approve the Authority Policy, Procedure, and Exhibits as presented. Rebecca Pasko supported. Motion carried unanimously.

b. Motion to Approve the Regional Policies as Presented

- i. Policy: N/A

XII. RELATIONSHIP WITH REGION, COUNTY, AND OTHERS

a. Regional Reports

- i. State Legislation and Policy Committee Report – Rebecca Pasko provided a handout on an overview of the Outcomes from Michigan CCBHC website. Caseloads have increased and are struggling to get direct care staff. There is a Bill in committee about Guardianship. Guardianship has many different levels. If this Bill were to pass as presented, it would affect mental health. Guardians would back out and it will fall on mental health.

LaMar Frederick asked how CCBHC works with veterans. Lisa Graham commented that with CCBHC we can serve veterans and there was a specific training our staff were required to complete for the experience with veterans. We have not served many but continue to get the word out by working with local resources.

XIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Financial Report – Lisa Graham presented the highlights from the financial report.
- b. Chief Executive Officer's Report included an update on: State Recipient Rights Audit; Opioid Settlement Funding/Year 2 Implementation Plan; FY2024 Budget; FY2023 Final Financial Status Report; Community Presentations; Task Force; and National Alliance on Mental Illness (NAMI) Michigan.

Catherine Bernhold asked how do we get a NAMI? Lisa Graham commented that a CMH cannot start a NAMI but we could encourage someone in the community to take on the task to have a NAMI Chapter.

XIII. NEW BUSINESS

XIV. CITIZEN COMMENTS

There were no citizen comments.

XV. BOARD ANNOUNCEMENTS

LaMar Fredrick commented that he has been appointed for an additional 3 year term.

Susan Fortney wished everyone a Happy and Blessed Easter.

Catherine Bernhold commented that Deb Staelgraeve's apartment was part of the fire downtown Monroe and would like to offer my prayers and hope they get a place to stay and everything works out.

Dawn Asper commented that she had her own house fire and appreciated being excused from last month's meeting.

Mike Humphries commented on the Board sending prayers to Deb Staelgraeve. There were 14 other people displaced from the fire downtown Monroe. Please reach out to Deb if you would like to help, Deb is collecting gift cards for everyone that was displaced.

Mike Humphries also thanked Chantelle Steffens for her service on the Board of Directors.

XVII. ADJOURNMENT

Mike Humphries adjourned the meeting at 6:15pm.

Submitted by,

Catherine Bernhold
Board Secretary

LG/dp
4/8/24



BOARD BUSINESS OPERATIONS COMMITTEE
Wednesday, April 17, 2024
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Business Operations and Administrative Support including Finances, Contracts, Facilities, Technology Infrastructure, and Customer Service.
- Review and make recommendations to the full Board regarding changes in Services, Contracts, and Budget.
- Monitor the organization's finances and strategies for managing overages and shortfalls.

COMMITTEE MEMBERS

LaMar Frederick, Chair; Rebecca Curley; Susan Fortney (Nov-Apr); Ken Papenhagen; Pam Ray (May-Oct); Chantele Steffens; and Michael Humphries (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

LaMar Frederick called the meeting to order at 5:00pm. LaMar Frederick, Ken Papenhagen, Rebecca Curley, Susan Fortney, Lisa Graham, Ken Melvin, and Jim Brown were present. Pam Ray and Mike Humphries were excused.

II. BUSINESS OPERATIONS

a. Facilities

- i. The County has a two-year project to put in a bike path that will go along front of MCMHA. To prepare for the bike path the County has removed all trees on the front berm.
- ii. Our insurance carrier will contract with a company called Sebus. They assess the Raisinville Road building. The last assessment was done 3 years ago. The last assessed value for the Raisinville building was 9.5 million and is now worth 11.293 million. It has gone up 19%. Group homes have increased in value as well. Our insurance premiums will increase. We want to make sure that if something ever happened to the Raisinville building that we can replace it.
- iii. The Union has approached Jim Brown and requested to open contract negotiations. Jim requested to add a motion to the April Board Agenda for the Board to consider opening contract negotiations.

b. Technology – There were no updates for technology.

III. FINANCE

a. Items for Board Action (Consent Agenda)

- i. There are no contracts for April.

b. Financial Reports

- i. The Fiscal Finance Report for Trends, Comparative Charts, Fiscal Revenues and Expenses by Fund Source, and Basic Financial Statements were provided in the packet for review (recommend Board approval).

Ken Melvin added a monthly highlight page to the Financial Report which will be both positive for committee members and the community.

Ken Melvin presented the February financials highlighting:

1. Revenue and eligibility continue to decline faster than anticipated. PIHP CFOs met with MDHHS and are expecting a 4-5% increase (including DCW) retro to October 1.
2. Cash and Investments are up from prior year primarily from collection of receivables from the PIHP.
3. Liabilities are also up from prior year primarily related to estimated claims incurred but not reported.
4. Net income is projected to be down compared to prior year primarily due to GASB 68 & 75 adjustments that are currently unknown and will be available in early 2025 from the actuaries.
5. Revenue received from the PIHP exceeds expenses by \$772,672 as of February 29, 2024. Part of the Medicaid and HMP surpluses are due to allowable costs being covered by GF as individuals continue to fall off Medicaid.
6. The CCBHC program is showing a deficit of \$147,622 through February. We continue to work with the PIHP to accelerate the reporting of T1040s which will bring in more revenue. Additionally, CCBHC non-Medicaid continues to grow causing part of this deficit.
7. State General Fund is showing a deficit of \$1,023,390, primarily related to spenddowns and individuals falling off Medicaid and CCBHC non-Medicaid. This deficit is covered to the extent possible by local funds with a reported use of fund balance through January of \$509,922.

Other Information:

Lisa commented that she will present a preliminary plan of recommendations for the General Fund deficit at the May Business Operations Committee meeting. The Board will want to discuss managing those that have no Medicaid and do not qualify for a CCBHC service due to the deficit in the General Fund.

LaMar Frederick asked about a statement letter prepared by the Finance Auditors to the Board. Ken Melvin commented that we assessed our incurred but not reported to try and estimate liability. Due to some of the claim lag we thought that it would not require an adjustment this year. The auditors felt differently. We will follow the auditors recommendation going forward.

Susan Fortney asked to have more information added to the acronym page to show what items fall under the "Other" category under Salaries and Benefits.

V. **INFORMATIONAL ITEMS**

VI. **PARKING LOT**

- a. May 2024: Preliminary Plan for General Fund Deficit
- b. May 2024: Review Needs for Agency Growth (Leadership Changes, Staffing Needs, Agency Space)
- c. Union Contract Negotiations: Year End Bonus

VII. **ADJOURNMENT**

The meeting adjourned at 6:02pm. The Business Operations Committee's next meeting is scheduled for **Wednesday, May 15, 2024** at 5pm in the Aspen Room.

Respectfully submitted,

LaMar Frederick (sp)

LaMar Frederick
Business Operations Chair

4/17/24



BOARD BYLAWS & POLICY COMMITTEE
Thursday, April 18, 2024
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Monitor and maintain the Board Bylaws and Board Governance Policy Manual
2. Review Authority and Regional Policy, Procedures, and Exhibits
3. Make recommendations to the full Board

COMMITTEE MEMBERS

Catherine Bernhold, Chair; John Burkardt; Susan Fortney; Rebecca Pasko; Pam Ray; and Michael Humphries (Ex-Officio).

DRAFT MINUTES

I. CALL TO ORDER

Catherine Bernhold called the meeting to order at 5:13pm. Catherine Bernhold, Susan Fortney, John Burkardt, Rebecca Pasko, and Lisa Graham were present. Pam Ray and Mike Humphries were excused.

II. COMMITTEE BUSINESS

- a. Authority Policy, Procedures, and Exhibits (Review/Recommend Approval)

Policies:	POC7027 Physical and Dental Examinations Policy POC7028 Physical Pain Assessment Policy POC7073 General Fund Waiting List Policy
Procedures:	POC7-52-P26 MCMHA Jail Diversion Process Procedure
Exhibits:	N/A
Rescind:	POC7069-P4 Annual Re-Assessment, IPOS Review, and Service Authorizations Procedure
Relocate:	N/A

The committee has reviewed the Authority Policy, Procedures, and Exhibits and recommends that the Board approve at their April 24, 2024 meeting.

- b. Regional Policies

Policies:	N/A
------------------	-----

III. REVIEW BOARD GOVERNANCE POLICY MANUAL

- a. Review Policy 3.0 Governing Process
 - i. The committee reviewed Policy 3.0 Governing Process to consolidate language with the Board Bylaws.
 - ii. Catherine Bernhold requested for Policy 3.0 to be sent to the Board for review and feedback for a period of two weeks. Feedback will be reviewed at the May meeting.

IV. REVIEW OF BOARD BYLAWS

- a. The committee has completed their review of the Board Bylaws.
- b. Catherine Bernhold requested for the Board Bylaws to be sent to the Board for review and feedback for a period of two weeks. Feedback will be reviewed at the May meeting.

V. PARKING LOT

VI. AJOURNMENT

The meeting adjourned at 5:57pm.

VII. NEXT MEETING

The Next Meeting of the Board Bylaws & Policy Committee is scheduled for **Thursday, May 16, 2024** at 5:00pm.

Respectfully submitted,
Catherine Bernhold (dp)

Catherine Bernhold
 Committee Chair

4/18/24



BOARD CLINICAL OPERATIONS COMMITTEE
Wednesday, April 3, 2024
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

- Review and monitor the Strategic Plan of the Authority as it relates to Clinical Programs and Psychological Services.
- Review and make recommendations to the full Board regarding Clinical Programs and Psychological Services.

COMMITTEE MEMBERS

Susan Fortney, Chair; Rebecca Curley; Rebecca Pasko; Deb Staelgraeve; and Michael Humphries (Ex-Officio).

DRAFT MINUTES

I. CALL TO ORDER

Susan Fortney called the meeting to order at 5:00pm. Susan Fortney, Rebecca Pasko, Crystal Palmer, and Bridgitte Gates were present. Rebecca Curley, Deb Staelgraeve, Mike Humphries, and Lisa Graham were excused.

II. CHIEF CLINICAL OFFICER UPDATE

- a. Crystal Palmer pulled out the highlights from the Clinical Updates Report and created an Executive Summary for the committee. Crystal presented the Executive Summary highlighting information under the sections of Staff, Leadership, Community Outreach, and Services from the Strategic Plan.
 1. Staff: MCMHA continues to recruit and hire staff for current vacancies, which remains to be 14 at this time. We have had several internal transfers, which in turn leave vacancies in other areas.
 2. Leadership: MCMHA continues to provide support/supervision to those who are seeking Certified Advanced Alcohol and Drug Counselor/Certified Alcohol and Drug Counselor (CAADC/CADC) credential.
 3. Community Outreach: There were 33 referrals made in February. 61% received some type of follow-up, services authorized, etc. 27% declined any further intervention, 9% were not engaged, and 3% MCMHA didn't have enough information to follow-up.
 4. Finance: Updates on this strategy will be provided at the Business Operations Meeting.
 5. Services: The Crisis Mobile Response Team is no longer fully staffed due to a member of staff moving out of the area; however, the team is still able to fully operate the mobile unit 24/7/365. We currently have an internal candidate that will be taking the vacant place; Crisis Mobile responded to 40 contacts in February, which were all face to face and averaged 2.11 hours; the average response time for Crisis Mobile was approximately 17.85 minutes which is likely due to 85% of the calls being in 48161 and 48162 zip codes; enrollment for the CCBHC has increased from 1574 members to 1677. This is a 6.5% increase in enrollment from the previous month; and the data for incoming calls being answered is at 98%, which meets MCMHA's goal of 95%.

Susan Fortney requested to review the universal referral form at the next Clinical Operations Committee Meeting.

Rebecca Pasko requested internship information to be included in the monthly Clinical Operations Report.

III. OPERATIONS DIRECTOR UPDATE

1. Bridgitte Gates presented the Operations Report highlighting the topics: Customer Services, Kiosks, Revel Marketing, and 2nd Quarter Grievances.

IV. CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC (CCBHC)

- a. There are no updates for CCBHC.

V. INFORMATIONAL ITEMS

VI. PARKING LOT

VII. ADJOURNMENT

The meeting adjourned at 5:24pm. The Board Clinical Operations Committee's next meeting is scheduled for Wednesday, May 1, 2024 at 5pm in the Aspen Room.

Respectfully submitted,

Susan Fortney (4p)

Susan Fortney
Clinical Operations Chairperson

4/3/24

Clinical Operations – Executive Summary

April 3, 2024

STAFF

Strategic Plan Goal 1: Recruit and Retain Qualified Staff and Competent Provider Staffing that Meets the Needs of our Community

- MCMHA continues to recruit and hire staff for current vacancies, which remains to be 14 at this time. We have had several internal transfers, which in turn leave vacancies in other areas.

LEADERSHIP

Strategic Plan Goal 2: Assure Competent and Accountable Leadership

- MCMHA continues to provide support/supervision to those who are seeking Certified Advanced Alcohol and Drug Counselor/Certified Alcohol and Drug Counselor (CAADC/CADC) credential.

COMMUNITY OUTREACH

Strategic Plan Goal 3: Serve as a Responsive and Reliable Community Partner

- There were 33 referrals made in January. 61% received some type of follow-up, services authorized, etc. 27% declined any further intervention, 9% were not engaged, and 3% MCMHA didn't have enough information to follow-up.
- Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did engage in 17 programs/activities and one 1:1 meeting during the month of February.

FINANCE

Strategic Plan Goal 4: Develop and Implement a Stable yet Agile Financial Strategy that Supports MCMHA's Mission

- Updates on this strategy will be provided at the Business Operations Meeting.

SERVICES

Strategic Plan Goal 5: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

- The Crisis Mobile Response Team is no longer fully staffed due to a member of staff moving out of the area; however, the team is still able to fully operate the mobile unit 24/7/365. We currently have an internal candidate that will be taking the vacant place.
- Crisis Mobile responded to 40 contacts in February, which were all face to face and averaged 2.11 hours.
- The average response time for Crisis Mobile was approximately 17.85 minutes which is likely due to 85% of the calls being in 48161 and 48162 zip codes.
- Enrollment for the CCBHC has increased from 1574 members to 1677. This is a 6.5% increase in enrollment from the previous month.
- The data for incoming calls being answered is at 98%, which meets MCMHA's goal of 95%.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

STAFF

Strategic Plan Goal 1: Recruit and Retain Qualified Staff and Competent Provider Staffing that Meets the Needs of our Community

The Clinical Department still has vacancies and continues to recruit vacant positions. We have the following vacancies as of March 21st:

- Case Service Manager – Adult
- Case Service Manager – Intellectual/Developmental Disability
- Case Service Manager – Child and Family
- Children's Therapist/Case Manager (2 positions)
- Crisis Mobile Response Clinician – Internal candidate
- Evaluation & Admission Specialist (3 positions)
- Home Based Clinician
- Outpatient Therapist
- Peer Support Specialist (FT)
- Peer Support Specialist – SUD Jail Diversion (PT)
- Youth Peer Support Specialist- in process

The Clinical Department continues to have vacancies and is recruiting for open positions. We continue to work with the Human Resources Department to hire the appropriate positions.

LEADERSHIP

Strategic Plan Goal 2: Assure Competent and Accountable Leadership

A supervision group has started for those that are seeking Certified Advanced Alcohol and Drug Counselor/Certified Alcohol and Drug Counselor (CAADC/CADC) credential. This group is held twice monthly and assists with guidance with the steps in obtaining credentials and any educational needs based upon those requirements. This group is open to anyone at no cost to them.

Additionally, recently MCMHA has joined Community Mental Health Association of Michigan's (CMHA) CCBHC Technical Assistance group. This group is comprised of 29 Michigan-based CCBHCs. The group meets twice a month to discuss data, implementation, and share resources and information.

This meets objective #3 Leadership will provide consistent and accurate communication under "Develop and Implement a Strategic Communication Plan with Input from Staff."

COMMUNITY OUTREACH

Strategic Plan Goal 3: Serve as a Responsive and Reliable Community Partner

Universal Referral

MCMHA continues to utilize the Universal Referral Form program which allows some of our community partners the opportunity to have a quick and easy way to refer individuals they encounter that they believe to be in need.

Updated as of 3/22/24

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

We did extend the Universal Referral program to the YMCA. Therefore, we now have 9 agencies plus law enforcement utilizing the universal referral form. A list of the agencies is as followed:

- Opportunity Center at the ALCC
- Salvation Army
- Disabilities Network
- Paula's House
- Fairview
- Saleh Center
- Health Department's Maternal and Child Health Services
- Monroe Housing Commission
- YMCA

During the month of February 2024, there have been a total of 33 mental health referrals which includes both law enforcement and community referrals. The outcomes of these cases are as follows:

- 5 were sent to their treatment teams for follow up
- 9 were referred and following through with Access
- 1 were authorized for inpatient psychiatric
- 9 declined any further intervention
- 1 did not have enough information to follow up with
- 3 were no response
- 2 sent to jail team for follow up
- 2 were connected with Crisis Mobile on the phone with no further needs
- 1 had in-person contact with no further needs

Opportunity Center at the ALCC

Monroe Community Mental Health Authority (MCMHA) continues to partner with the Opportunity Center at the ALCC by placing peers' services within the center on a consistent schedule. Certified Peer Support Specialists/Parent Support Partners meet individuals at the Center on Mondays, Wednesdays, and Thursdays from 12-4pm for anyone interested. These days had the highest volume of contacts and services. Appointments will be continuously monitored, and availability will be increased if the need changes.

Peers continue to assist in linking and coordinating services which includes engaging those who need community mental health services or those involved in community mental health services. February, we provided two 1:1 meetings, and the peers did engage in 17 programs/activities within the Opportunity Center.

Outreach

During the month of February, MCMHA leadership has been meeting with the Monroe County Probate judges along with the Monroe County Prosecutor to work out a better more seamless Assisted Outpatient Treatment (AOT) process for our community.

Updated as of 3/22/24

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

Also, the Chief Executive Officer along with others from MCMHA leadership have been providing presentations to Frenchtown Fire Department about overall services, including Crisis Mobile and Critical Incident Stress Management (CISM).

Community Mental Health Association of Michigan Conference

During the month of February, Jane Morin, Supervisor in Adult Case Management presented at the Community Mental Health Association of Michigan (CMHA) Conference in Kalamazoo. The presentation was based on the MCMHA's experience/involvement in the person-centered planning (PCP) Initiative. This was a co-presentation with a lead from the initiative. MCMHA presented the worksheets and tools that have been provided to the clinical staff to begin utilizing with our consumers to help enhance the quality of goals developed during treatment planning.

These items meet objective #3 Increase/Improve Community Presence under “create and implement a strategic community presence plan for each event.”

FINANCE

Strategic Plan Goal 4: Develop and Implement a Stable yet Agile Financial Strategy that Supports MCMHA's Mission

Updates on this strategy will be provided at the Business Operations Meeting.

SERVICES

Strategic Plan Goal 5: At All Levels of the Organization, Services Provided Meet the Needs of the Customer

Crisis Mobile Response Team

As stated last month, MCMHA has only nine (9) out of ten (10) Crisis Mobile Response positions filled due to an employee resignation as she moved several hours from Monroe County. However, we do have an internal candidate who has accepted the position and will be transitioning into the role. Now our focus is providing outreach to the community to ensure they are aware of the Crisis Mobile Response Team and 24/7 availability. Please see the attached report (Attachment #1) regarding February data from the Crisis Mobile Response Team.

Developing and implementing a crisis mobile response team meets objective #1 Enhance Programs for Highly Vulnerable Populations under “mobile crisis unit.”

Benesh Expansion

The data provided below identifies the individuals zip codes who were scheduled at the Benesh building during FY24. It should be noted that the information includes all appointments whether they were held in-person or virtually.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

Zip Code	Location	23-Oct	Nov-23	Dec-23	Jan-24	Feb-24	Total
48101	Ann Arbor	0	1	0	0	0	1
48103	Ann Arbor	0	0	0	0	0	0
48105	Ann Arbor	0	0	0	0	0	0
48117	Carleton	2	3	2	0	1	8
48131	Dundee	3	2	1	0	1	7
48133	Erie	4	2	4	1	0	11
48135	Garden City	0	0	0	0	0	0
48140	Ida	0	0	0	0	0	0
48144	Lambertville	0	1	0	0	0	1
48145	LaSalle	1	1	2	0	0	4
48157	Luna Pier	3	0	0	0	0	3
48159	Maybee	0	0	0	0	0	0
48160	Milan	6	3	2	1	1	13
48161	Monroe	49	27	22	14	18	130
48162	Monroe	15	16	11	7	6	55
48164	New Boston	0	0	0	0	0	0
48166	Newport	9	2	7	3	2	23
48177	Samaria	0	0	0	0	0	0
48179	South Rockwood	0	0	0	0	0	0
48182	Temperance	3	9	2	0	3	17
48191	Willis	1	0	0	0	0	1
48336	Fowlerville	1	0	0	0	0	1
49221	Adrian	0	0	1	0	0	1
49267	Ottawa Lake	1	0	0	0	0	1
49270	Petersburg	0	2	1	1	0	4
49276	Riga	0	0	0	1	0	1
Total		98	69	55	28	32	282

Below a table is provided indicating out of the total number appointments scheduled each month for FY24, how many of those appointments were in-person at the Benesh Building; and out of all appointments scheduled, whether in-person or virtual, how many were kept.

	% Appointments in Office	% Kept Appointments (in-person/virtual)
October	76%	52%
November	75%	48%
December	70%	59%
January	79%	43%
February	81%	66%

It should be noted that there was a significant increase in kept appointments this month compared to the month of January.

Jail Misdemeanor IOP Program

Below is data provided for February 2024 for the Jail Misdemeanor IOP program:

- # in aftercare with MCMHA: 34 (some of these may still be incarcerated)
- # currently in the jail IOP portion: 8
- # currently in the aftercare portion: 34
- # wait list: 5

Updated as of 3/22/24

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

Over the past year, MCMHA was funded by County Opioid Settlement to provide substance abuse disorder (SUD) specific service in partnership with Salvation Army Harbor Light (SAHL). A program was proposed and designed originally titled "misdemeanor IOP" as a gap in services was recognized when individuals incarcerated with a misdemeanor charge, or women with any charge, were not afforded the opportunity to participate in the MDOC IOP programming in the jail. It was the Monroe County collaboratively that saw this gap and wanted to create a solution in effort to be more proactive with these individuals facing addiction rather than waiting for a felony to step in. MCMHA's role was to identify and help with intakes, SAHL would complete the IOP groups in jail, and MCMHA would continue to provide the 6-months of aftercare once released into the community.

The opioid settlement funding was important because it would allow MCMHA to serve anyone in Monroe County with an addiction that wanted services no matter diagnosis or insurance type as this was prior to becoming a CCBHC.

Now that we are certified as a CCBHC, we can provide billable services to all with a qualifying diagnosis including the mild to moderate population and all insurances. With this in mind, MCMHA proposed to Monroe County that we no longer need the funding, that MCMHA could continue to provide aftercare for the program by billing CCBHC and the County could allocate the funding to other programs to expand the reach and innovation in our effort to help those with addiction. This program, now called OUD IOP, is still running strong and MCMHA's partnership with SAHL continues.

Groups

Parenting Through Change is a group-based parenting and family functioning intervention. The group session for enrolled consumers in the Fall has now ended and the team is reviewing feedback in order to improve service delay for future sessions. The upcoming cohort will start in late January and will last 10 weeks. Sessions are planned to be in person unless feedback indicates otherwise. Preparations have been made to offer both virtual and in-person sessions. The sessions will focus on teaching parents several methods for emotional regulation during times of stress as well as child specific tools for encouraging children towards compliance and offering praise.

Certified Community Behavioral Health Clinic (CCBHC)

As of mid-March, MCMHA has enrolled 1,677 members into CCBHC, which is an increase of 103 from the previous month. This is approximately 80% of all MCMHA consumers served. The CCBHC Director, Data Analyst and Client Accounts Officer continue to ensure members are identified, have the correct insurance policy in the electronic health record, and are entered into the WSA system.

The CCBHC Program Director met with PHS staff (nurses and medical assistants) on 2/2/24 to review Q1 Quality Metric results to ensure we are capturing all the data points. Education and training on accurate data collection will continue throughout the demonstration year.

CCBHC requires the implementation of SBIRT (Screening, Brief Intervention, Referral to Treatment), an evidence-based practice for the screening of alcohol, tobacco, and drug use. A procedure was developed and approved during February's Care, Treatment, and Services committee meeting. It is in the process of being finalized. MCMHA's Corporate Trainer will provide SBIRT training to staff in April.

Updated as of 3/22/24

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

Therefore, this allows us to meet/exceed objective #3 for Improve Integration of Physical and Behavioral Health Care and Overall Wellness Services under “access benefits of certified community behavioral health clinic (CCBHC) vs. health home certification and make recommendation.”

Waiver Program Services

The Michigan Department of Health and Human Services (MDHHS) offers several waiver programs. These programs provide a pathway to Medicaid for individuals with the highest medical need for Developmental Disabilities and Serious Emotional Disturbance.

Children’s Waiver Program (13 Enrolled – **no change this month**) This waiver makes it possible for children, under the age of 18, have a documented developmental disability, meet requirement for Intermediate Care Facility (IFC) and need for habitative medical and/or behavioral care in the home, to receive Medicaid.

Serious Emotional Disturbances Waiver (9 Enrolled – **no change this month**) – Another Michigan pathway to Medicaid for children and youth with a Serious Emotional Disturbance (SED) diagnosis and intensive treatment need that meets criteria for inpatient hospitalization or without added behavioral services they would require hospitalization.

Habilitation Supports Waiver (HAB Waiver/127 Enrolled – **increased to meet capacity**) - This is a cooperative Federal and State agreement allowing for a waiver on certain requirements to allow us to provide services in a community setting rather than in an institution. Enrolled consumers on the HAB waiver must meet specific guidelines to be eligible including a documented developmental disability, living in the community, active Medicaid, need for Intermediate Care Facility, active and ongoing treatment, and assistance to support functioning, and at least one HAB waiver service per month in addition to supports coordination. ***It should be noted that MCMHA has 126 assigned slots for the HAB Waiver.

Groups

The winter session of Parenting Through Change (PTC) started on 1/17/2024. Participants are in week 8 of 10 and eight (8) families have been participating. As previously stated, this group is being held by telehealth due to accommodating consumers. PTC is an evidence-based practice designed to give parents and caregivers hope and build skills to address challenging behaviors.

BOARD CLINICAL OPERATIONS COMMITTEE MEETING / ATTACHMENT A

Clinical Updates – April 3, 2024

MISCELLANEOUS

Call Volume Data

Below is the call volume data for Fiscal Year 24.

	October-23	November-23	December-23	January-24	February-24
Incoming Calls	3929	3967	3418	4124	4390
Incoming calls minus abandon calls	3863	3905	3345	4063	4311
Calls Answered	3653	3680	3135	3815	4048
Missed/Abandoned Calls	66	62	73	61	79
Abandoned Calls	265	276	280	287	323
% incoming calls answered	93%	93%	92%	93%	92%
% incoming calls answered minus abandon calls	98%	98%	98%	99%	98%

Key: Abandoned means that no one was on the other line when the call was answered.

Missed is someone calls in and the call wasn't answered as staff could have been on their phones taking care of others. Duplication of missed and abandoned.

As stated previously, MCMHA is setting an internal goal of 95% of calls answered. MCMHA has been working with 8x8 to clean up the data. There are calls that are “zero” seconds long which are still being considered abandoned or missed due to calls even though these could be cell phone calls dropped, etc. Therefore, with some assistance, MCMHA’s IT department is able to look at the calls a little more in depth and more accurately report the numbers. As you can see, during Fiscal Year 2024 in the first five months, we are at 98.20%, which is over our goal of 95%.

Caseload Report

This report will be provided on a quarterly basis.

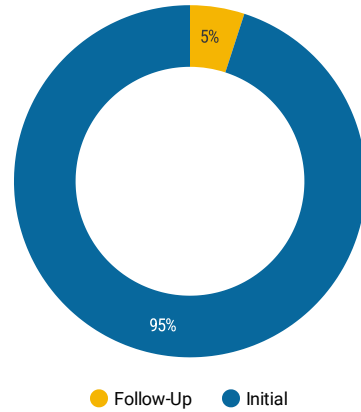
Select Month:: 2024 - 02 (1) ▾



Monroe County CMH Crisis Mobile Utilization Report

Number of encounters, Number of Follow Ups:

Month	Initial or ...	#	%
2024 - 02	Follow-Up	2	5%
2024 - 02	Initial	38	95%



< >

Month	Contact Type	Hours
2024 - 02	Indirect Contact (Phone/Email/Other)	0.25
2024 - 02	Contact Attempt	1.65
2024 - 02	Face-To-Face	65.5

< >

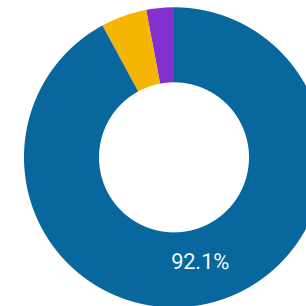
Total Crisis Mobile Deployments

40

Month	Contact Type	#	%
2024 - 02	Indirect Contact (Phone/Email/Other)	1	3%
2024 - 02	Contact Attempt	2	5%
2024 - 02	Face-To-Face	37	93%

< >

● Face-To-Face ● Contact Attempt ● Indirect Contact (Phone/Email/Other)



Average Face-to-Face Interaction Time

2.11

Month	Avg F2F Contact
2024 - 02	2.11

< >

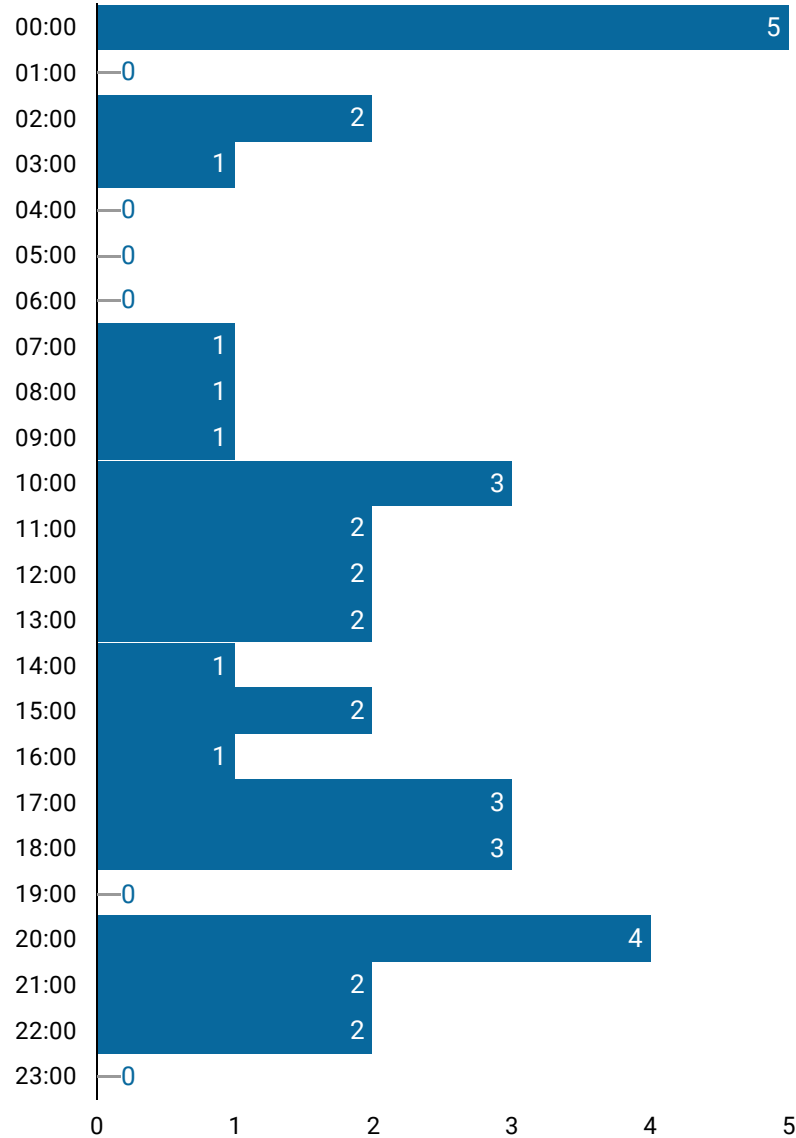
Select Month:: 2024 - 02

(1) ▾

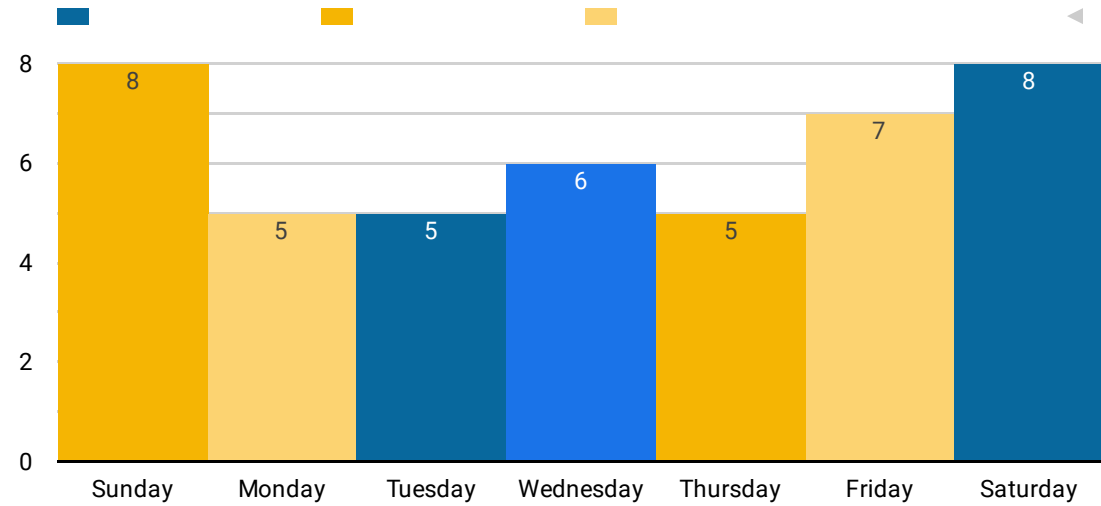
Time of Calls

Calls, by hour:

Calls



Calls, by Weekday:



Length of time to respond from time of call to arriving on scene:

Average Response Time (Minutes)

17.85

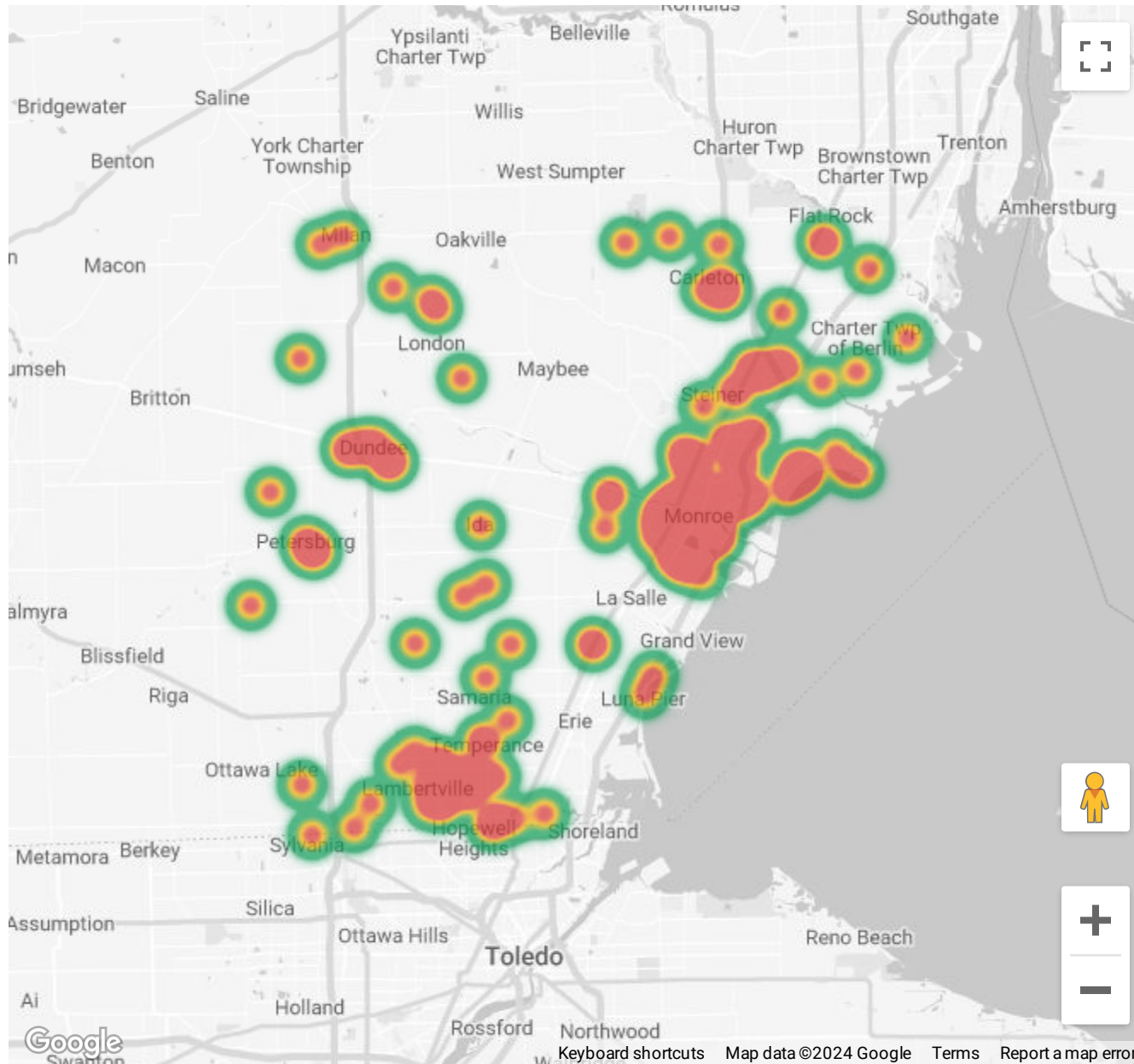
Month	Avg. Response Time ▾
2024 - 02	17.85

Select Month:: 2024 - 02

(1) ▾

Location

Mapping of locations deployed to:

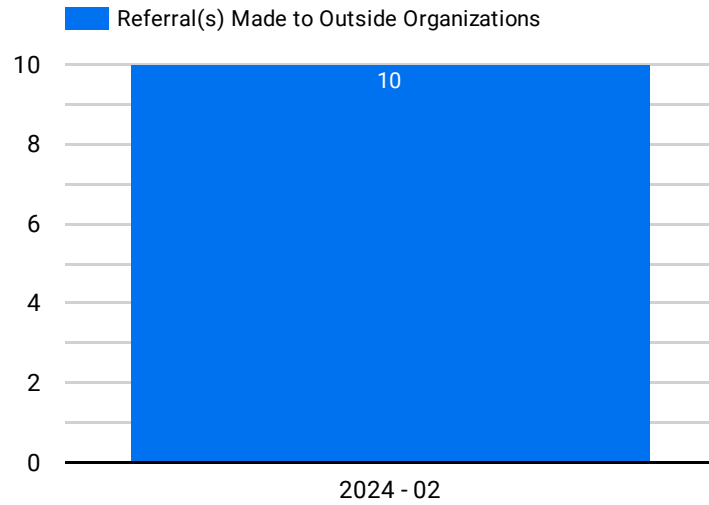


Month	Zipcode	#	%
2024 - 02	48182	1	3%
2024 - 02	48160	2	6%
2024 - 02	48173	0	0%
2024 - 02	48166	1	3%
2024 - 02	48117	1	3%
2024 - 02	48134	0	0%
2024 - 02	48161	22	63%
2024 - 02	48162	7	20%

Select Month:: 2024 - 02

(1) ▾

Number of referrals made and where they were referred to:



Month ① ...	Referred To: ② ▲	#	%
2024 - 02	Arrowhead Behavioral Health	0	0%
2024 - 02	Behavioral Health Treatment	0	0%
2024 - 02	CMH	2	20%
2024 - 02	Family Counseling and Shelter Services of Monroe	0	0%
2024 - 02	Fire Station	0	0%
2024 - 02	Gabby's Ladder	0	0%
2024 - 02	Harbor Light	1	10%
2024 - 02	Henry Ford Wyandotte	0	0%
2024 - 02	Holistic Wellness	0	0%
2024 - 02	Lemon Tree	0	0%
2024 - 02	MCOP	1	10%
2024 - 02	Michigan Works	1	10%
2024 - 02	Monroe County Animal Control	1	10%
2024 - 02	Paula's House	0	0%
2024 - 02	ProMedica ER	2	20%
2024 - 02	Pure Psych	0	0%
2024 - 02	RAW	0	0%
2024 - 02	Resource Flyer	0	0%
2024 - 02	SUD Treatment	0	0%
2024 - 02	Salvation Army Harbor Light	1	10%
2024 - 02	St. Joe's	0	0%

< >

Select Month:: 2024 - 02

(1) ▾

Where Referrals are Coming From:

		Month / # Calls
Deployed by:		2024 - 02
Monroe County Sheriff's Dept.		16
Monroe City Police		14
CMH		5
ACCESS		3
Police Mental Health Referral		0
Mobile Crisis Follow Up		0
Self		0

Primary Issue or Diagnosis:

(New question starting 12/2023)

		Month / #
Issue/Diagnosis		2024 - 02
Thought Disorder		16
Suicidal Ideation		13
Substance Abuse		3
Neurocognitive		0
Homicidal Ideation		1
Environmental		2
Domestic Violence		0

Select Month:: 2024 - 02

(1) ▾

Consumers, New and Repeats:

	Month ⓘ ▲	New or Repeat Consumer...	#
1.	2024 - 02	New	27
2.	2024 - 02	Repeat	13

< >

Select Month:: 2024 - 02

(1) ▾

Number of Narcan Kits Distributed:

Narcan Kits Distributed

0

Number of calls per population - Race

			Month / # / %
			2024 - 02
Race		#	%
White		25	76%
Unknown		2	6%
Other Race		1	3%
Black or African American		5	15%

Select Month:: 2024 - 02

(1) ▾

Number of calls per population - Age

			Month / # / %
			2024 - 02
Age		#	%
0 to 9		1	3%
10 to 17		4	12%
18 to 28		5	15%
29 to 39		12	36%
40 to 50		1	3%
51 to 61		6	18%
62 to 72		2	6%
73 to 83		0	0%
84 to 94		0	0%
95 +		0	0%
Not Collected		2	6%



Director of Operations Report
March 6, 2024

Customer Services:

- Scheduler set to start on April 23rd
- Linda is retiring at the end of April. 5 years of service. In process of interviewing.

Kiosks

- March – received a number of suggestions for improvement ranging from cleanliness of facility to staff complaints that are being addressed.

Revel

- Reviewing videos for webpage.
- Working with Revel on our Annual Report 2023

Quarter 2 Grievances FY23/24 (March)

6 grievances

3 – resolved

- 2 - Request for new case manager – resolved – both in favor of consumer
- 1 – Request for in person appointments – resolved – in favor of consumer

3 – pending

- 1 – medications
- 1 – request for new prescriber
- 1 – request to go back to previous prescriber

PULSE FOR GOOD DATA

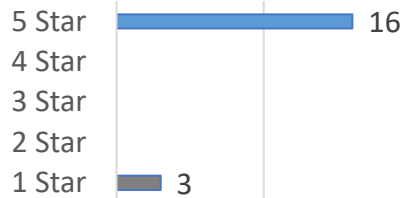


March 2024/ Location - Lobby Kiosk

Overall Rating: 4.17

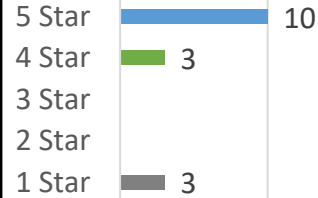
How was your visit?

19 Responses / 4.37 Rating



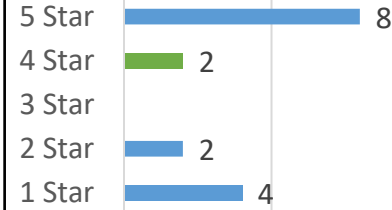
Do you think this agency is a safe place to be?

16 Responses / 4.06 Rating



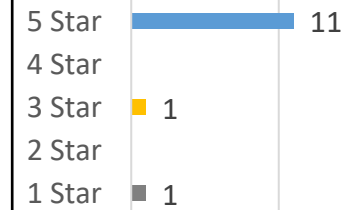
How clean was it?

16 Responses / 3.50 Rating



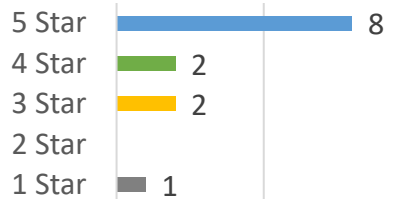
How respectful was the staff?

13 Responses / 4.54 Rating



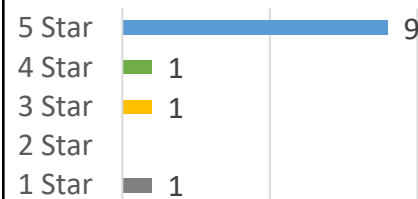
How satisfied were you with scheduling your appointment?

13 Responses / 4.23 Rating



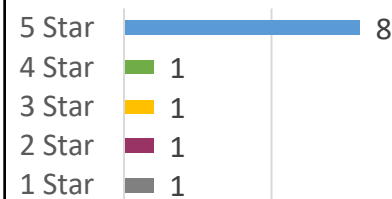
How well did the appointment time work for you?

12 Responses / 4.17 Rating



How convenient is our location?

12 Responses / 4.42 Rating



PULSE FOR GOOD DATA

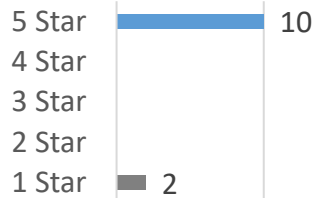
March 2024/ Location – Prescriber Kiosk



Overall Rating: 4.60

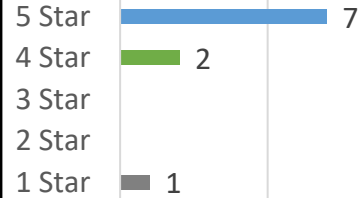
How was your visit?

12 Responses / 4.33 Rating



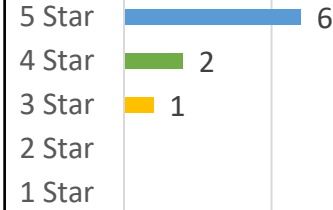
Do you think this agency is a safe place to be?

10 Responses / 4.40 Rating



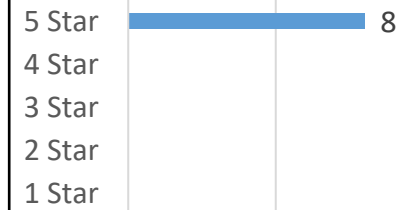
How clean was it?

9 Responses / 4.56 Rating



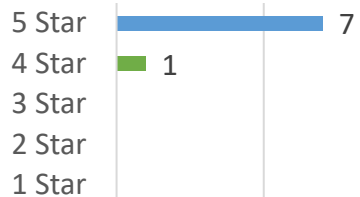
How respectful was the staff?

8 Responses / 5.00 Rating



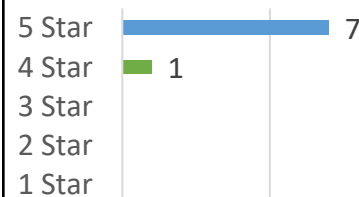
How satisfied were you with scheduling your appointment?

8 Responses / 4.88 Rating



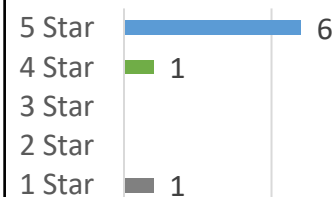
How well did the appointment time work for you?

8 Responses / 4.88 Rating

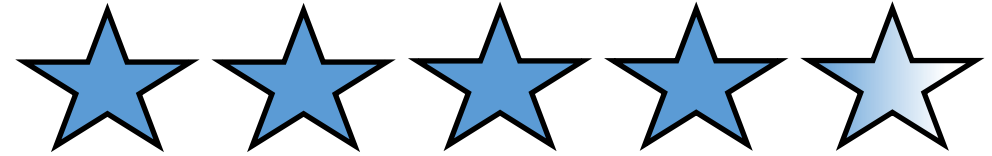


How convenient is our location?

8 Responses / 4.38 Rating



PULSE FOR GOOD DATA

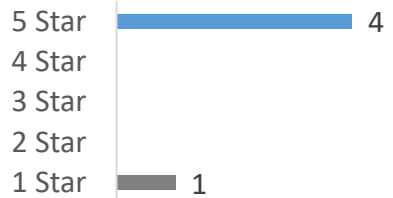


March 2024/ Location - Benesh Kiosk

Overall Rating: 4.83

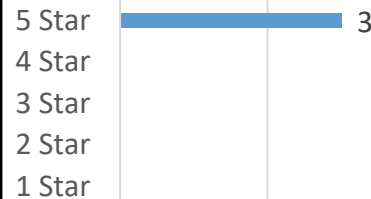
How was your visit?

5 Responses / 4.20 Rating



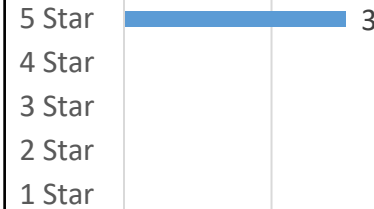
Do you think this agency is a safe place to be?

3 Responses / 5.00 Rating



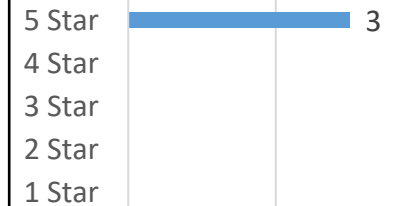
How clean was it?

3 Responses / 5.00 Rating



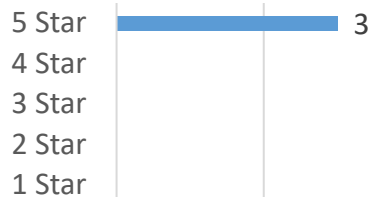
How respectful was the staff?

3 Responses / 5.00 Rating



How satisfied were you with scheduling your appointment?

3 Responses / 5.00 Rating



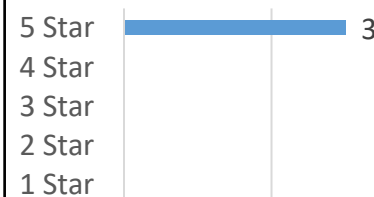
How well did the appointment time work for you?

3 Responses / 5.00 Rating



How convenient is our location?

3 Responses / 5.00 Rating





BOARD COMMUNITY RELATIONS AD-HOC COMMITTEE

Thursday, April 18, 2024

4:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. To foster a trusting relationship between MCMHA and the community it serves.

COMMITTEE MEMBERS

Rebecca Pasko, Chair; Dawn Asper; Rebecca Curley; Susan Fortney; and Michael Humphries (Ex-Officio)

DRAFT MINUTES

I. CALL TO ORDER

Rebecca Pasko called the meeting to order at 4:10pm. Susan Fortney, Rebecca Pasko, Dawn Asper, Rebecca Curley, and Lisa Graham were present. Mike Humphries was excused.

II. FOLLOW UP FROM PREVIOUS MEETING

- a. Rebecca Pasko revisited the Committee Charge and Scope with committee members.
- b. The committee would like to have representation on the Community Coalition. Lisa Graham to discuss at the next Community Coalition meeting.

III. COMMITTEE SPONSORED COMMUNITY TRAINING

- a. Rebecca Pasko commented on wanting to help the community understand what CMH can do. The Board wants to be able to say what Lisa can do, the Agency can do, and what the committee can do. Corporate counsel addressed the committee on what can be done by the committee and Rebecca wanted to revisit the conversation for any ideas by community members.
 - i. Susan Fortney recommended having an opportunity to speak at the next scheduled Town Hall to introduce and provide an overview of the Community Relations Committee.
 - ii. Rebecca Pasko requested committee members to start thinking about some ideas on what information they would like to share at the Town Hall. The committee will prepare an outline at their next meeting.
 - iii. Lisa Graham suggested sharing this recommendation with the full Board at the April Board Meeting to inform them and get their feedback.

IV. REVIEW LIST OF IDENTIFIED COMMUNITY CONCERNS

- a. When the committee first started, members talked about developing a list. This has fallen by the wayside and Rebecca wanted to revisit the conversation. Rebecca suggested developing and following a guideline to address concerns.

V. REVIEW AGENCIES FOR WHICH CEO HAS PROVIDED TRAINING

- a. Lisa Graham provided a list of community education/trainings and/or representation that has taken place in the community for the first two quarters of FY2023-2024.
 - i. May will be the Intensive, Community-Based Mental Health Care for Members of the Armed Forces/Veterans. Lisa Graham will invite the VA to the May Town Hall and Board Meeting.
- b. Dawn Asper requested for the CCBHC/Crisis Services Overview presentation to be added to the agency website for review by the community.
- c. Dawn Asper suggested to contact townships and request them to add MCMHAs website link to their webpage.

VI. REVIEW SHCHEDULE OF CEOs TRAINING DURING BOARD MEETINGS

- a. Lisa Graham provided a list of topics for education/training at a Board Meeting.

VII. REVEL MARKETING / STATUS REPORT

- a. Revel has been working on development of videos for partnerships, crisis mobile, board members, Clubhouse, and culture of Monroe CMH; the new website; FY2023 Annual Report; and rack cards.
 - i. Lisa Graham played the partnership video for committee members.
 - ii. The committee would like to make a list of where they would like the rack cards distributed in the community.
 1. Dawn Asper suggested to make the rack card downloadable.

VIII. NEXT STEPS

- a. Next Meeting Agenda
 - i. Prepare an Outline for Committee Introduction at the Town Hall
 - ii. Create a List for Rack Card Distribution in the Community
 - iii. Revel Update
 - iv. Community Coalition Update

IX. PARKING LOT

a. Town Hall

X. AJOURNMENT

The meeting adjourned at 5:07pm.

XI. NEXT MEETING

The Next Meeting of the Board Community Relations Ad-hoc Committee is scheduled for **Thursday, May 16, 2024** at 4:00pm.

Respectfully submitted,

Rebecca Pasko (dp)

Rebecca Pasko
Committee Chair

4/18/24

FY2023 – FY2024 COMMUNITY EDUCATION / TRAINING

10-03-23 1st Responder & Community Opioid Crisis Training MCCC - Adam A./Josh H.

10-06-23 Mental Health First Aid Training with MCOP staff members – Day 1

10-09-23 Mental Health First Aid Training with MCOP staff members – Day 2

10-13-23 Trunk or Treat Gabby’s Grief Center - Lisa G./Crystal P.

10-17-23 Training with Sheriff Deputy Groups for education on the 24/7 services of Crisis Mobile Response – Lisa G.

10-19-23 Training with Sheriff Deputy Groups for education on the 24/7 services of Crisis Mobile Response – Lisa G.

10-23-23 Crossroads Employment Celebration Dinner

10-26-23 CCBHC Ribbon Cutting Ceremony – Lisa G./CMH Staff

11-08-23 Project Homeless Connect – Ashley A.

11-09-23 Spring Arbor Job Fair - Sarah M.

12-06-23 Wayne State University Job Fair - Sarah M.

12-19-23 CCBHC/Mobil Crisis Presentation Bedford Township Board – Lisa G.

12-21-23 Blue Christmas at 2/42 Church - Dawn G./Lisa G.

01-05-24 RAW Employment Event – Ashley A.

02-06-24 Youth Summit – Lisa G./Crystal P.

02-07-24 CCBHC/Mobil Crisis Presentation Frenchtown Fire Dept. – Lisa G.

02-08-24 CCBHC/Mobil Crisis Presentation Frenchtown Fire Dept. – Lisa G.

02-09-24 CCBHC/Mobil Crisis Presentation Frenchtown Fire Dept. – Lisa G.

02-26-24 CCBHC/Services Overview Presentation to MCCC Board – Lisa G.

02-29-24 Job Fair at MCOP – Sarah M.

02-29-24 St. Joseph Center of Hope Tour – Lisa G./Board

02-29-24 Overview of MCMHA Services to Frenchtown Fire Dept – Lisa G.

03-09-24 Bedford Business Fair and MCOP Woman’s Conference – Deanne C./Danielle G.

03-12-24 CCBHC/Mobil Crisis Presentation Erie Township Board – Lisa G.

03-13-24 Overview of MCMHA services to Village of Maybee Board – Lisa G.

03-20-24 Overview of MCMHA services to Monroe County Chief’s meeting – Lisa G.

03-21-24 This is Us at Monroe Public Schools – Tina D.

04-18-24 Transition Night at MCISD

05-23-24 Mental Health Fun Day /Town Hall at 2/42 Church

07-28-24 Monroe County Fairground (through 08-03-24)

2024 Board Meeting Education / Training

- 02-28-24 **Substance Use Disorder (SUD), Access, and Resources**
- 03-27-24 **FY2023 CMHPSM Annual Submission**
- 04-24-24 **Targeted Case Management**

Education/Training:

- **Crisis Mental Health Services**
(Including 24/7 Crisis Teams, Emergency Crisis Intervention Services, and Crisis Stabilization)
- **Screening, Assessment, and Diagnosis**
(Including Risk Assessment)
- **Patient-Centered Treatment Planning**
(And/or Similar Processes, Including Risk Assessment and Crisis Planning)
- **Outpatient Mental Health and Substance Use Services**
- **Outpatient Clinic Primary Care Screening and Monitoring of Key Health Indicators and Health Risk**
- **Psychiatric Rehabilitation Services**
- **Peer Support, Counselor Services, and Family Supports**
- **Intensive, Community-Based Mental Health for Members of the Armed Forces/Veterans**
(Particularly those Members and Veterans Located in Rural Areas)



BOARD EXECUTIVE COMMITTEE

Wednesday, April 17, 2024
6:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Form agenda for monthly meetings.
2. Monitor long term effectiveness of the Board and Board Committees.

COMMITTEE MEMBERS

Mike Humphries, Chair
Susan Fortney, Vice Chair
Catherine Bernhold, Secretary

I. CALL TO ORDER

Susan Fortney called the meeting to order at 6:22pm. Susan Fortney, Catherine Bernhold, and Lisa Graham were present. Mike Humphries was excused.

II. REVIEW OF THIS MONTH'S BOARD MEETING

- a. Board Agenda – Reviewed
- b. Presentation – Targeted Case Management

III. ITEMS FOR DISCUSSION

- a. Added Years of Service Awards to the April Board agenda.
- b. Added a motion to open Contract Negotiations to the April Board agenda.

IV. ACTION ITEMS FOR FUTURE BOARD MEETING AGENDA

- a. Apr – Appoint Nominating Committee
- b. May – Election of Officers; Recommendation for Representative to PIHP Board
- c. Jun – Committee Sign Up

V. AJOURNMENT

The meeting adjourned at 6:39pm.

VI. NEXT MEETING

The Next Meeting of the Executive Committee is scheduled for Wednesday, May 15, 2024 at 6:00pm.

Respectfully submitted,

Susan Fortney (dp)

Susan Fortney
Board Vice Chairperson

4/17/24

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES**

April 10, 2024

Members Present for In-Person Quorum: Judy Ackley, Rebecca Curley, LaMar Frederick, Bob King, Molly Welch Marahar, Rebecca Pasko, Mary Serio, Holly Terrill

Members Not Present For In-Person Quorum: Patrick Bridge, Mary Pizzimenti, Alfreda Rooks, Annie Somerville, Ralph Tillotson

Staff Present: Kathryn Szewczuk, Stephannie Weary, James Colaianne, Matt Berg, Nicole Adelman, Connie Conklin, Stacy Pijanowski, Lisa Graham, Trish Cortes

Guests Present: Derek Miler

- I. Call to Order
Meeting called to order at 6:02 p.m. by Board Chair Bob King.
- II. Roll Call
 - Quorum confirmed.
- III. Consideration to Adopt the Agenda as Presented
**Motion by M. Welch Marahar, supported by H. Terrill, to approve the agenda
Motion carried**
- IV. Consideration to Approve the Minutes of the February 14, 2024 Meeting and Waive the Reading Thereof
**Motion by M. Welch Marahar, supported by M. Serio, to approve the minutes of the 02/14/2024 meeting and waive the reading thereof
Motion carried**
- V. Audience Participation
None
- VI. Guest Presentation
 - a. FY2023 Financial Audit Presentation – Roslund, Prestage & Co.
 - The annual audit results summary was presented by Derek Miller.
 - Per D. Miller, there were no issues or concerns found.
 - The line item for the Board Per Diem may be miscoded. M. Berg will research and correct as needed.
- VII. Old Business
 - a. Board Information: Finance Report through February 29, 2024
 - M. Berg presented.
 - b. Board Information: CEO Performance Review
 - The CEO Performance Review Committee met before the board meeting.
 - M. Serio provided an overview of the responses to each question.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

- The committee would like the board to consider a better structure for the goals in order to reflect what James is doing.
- New CEO goals will be presented at the June board meeting.

VIII. New Business

a. Board Action: FY2018-19 Deficit Resolution

Motion by M. Welch Marahar, supported by M. Serio, to approve the utilization of \$2,376,421 of FY2020 and FY2021 Performance Based Incentive Pool (PBIP) funding to utilize towards deficit repayment as originally reported prior to the MDHHS one-time exception approval

Motion carried

Roll Call Vote

Yes: Ackley, Curley, Frederick, King, Welch Marahar, Pasko, Serio, Terrill,

No:

Not present for in-person vote: Bridge, Pizzimenti, Rooks, Somerville, Tillotson

b. Board Action: Proposed FY2024 Budget Revision

Motion by M. Welch Marahar, supported by L. Frederick, to approve the included revisions to the FY2024 CMHPSM operating budget

Motion carried

Roll Call Vote

Yes: Ackley, Curley, Frederick, King, Welch Marahar, Pasko, Serio, Terrill,

No:

Not present for in-person vote: Bridge, Pizzimenti, Rooks, Somerville, Tillotson

c. Board Review: Annual Bylaws and Board Governance Review

- There were no updates to the policies that were recommended for renewal (agenda items i – vii) and no action was needed by the board.

Recommend Renewal

- Board Governance Manual
- CMHPSM Organizational Bylaws
- CMHPSM CEO Authority – Employee Position Control and Compensation
- CMHPSM CEO General Scope of Authority
- Conflict of Interest Policy
- Investing
- Procurement

Recommend Potential Updates / Further Review in June 2024

- Financial Stability & Risk Reserve Management
- (Internal Procedure to Governance Policy) Business Expense Reimbursement

IX. Reports to the CMHPSM Board

a. Board Information: FY2024-26 Strategic Plan Report

- J. Colaianne provided an update on the Strategic Plan.

b. Board Information: SUD Oversight Policy Board

- The most recent OPB meeting was in February.
- Some of meeting actions:
 - PA2 mini grant awarded
 - OPB discussed the RFP release, which happened this week.
 - 2 policies were approved.
 - The It Is Possible campaign was reviewed.

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

- c. Board Information: CEO Report to the Board
 - J. Colaianne’s written report includes updates from staff, regional and state levels. Please see the report in the board packet for details.

Monroe Update

- L. Graham provided an overview of Monroe’s \$3.6 million total deficit for FY23. Inpatient hospitalization and specialized residential were the 2 high cost services. L. Graham indicated that she had reported a \$2 million deficit in the fall of 2023, and the final FY2023 deficit amount was calculated at the end of February 2024 and reported to ROC and the PIHP. Monroe is currently showing a Medicaid surplus for FY2024, and L. Graham is confident that the surplus will continue.
- The Incurred But Not Reported (IBNR) report was not included in forecasting before but is now built into Monroe’s financial monitoring process.
- J. Ackley expressed concern with how long it took for Monroe to realize they were going into this deficit.
- L. Graham believes they have the processes in place now to identify any issues sooner.
- B. King questioned the confidence level of the PIHP CEO in the financial status of Monroe for FY2024.
- J. Colaianne provided some additional information on processes related to CMH financial status reporting and that the Regional Financial Stability & Risk Reserve policy will be under review prior to the June board of directors meeting.
- M. Serio asked for clarification on the length of the financial consultant contract in Monroe.
- L. Graham advised that she would like to eventually hire her own CFO, but it’s very difficult to find the talent. She and the board will continue to evaluate on an annual basis. Currently, there is a 5-year contract with Rehman Robson for CFO service, but there is an early exit clause if Monroe decides to hire a CFO.

X. Adjournment

Motion by M. Welch Marahar, supported by J. Ackley, to adjourn the meeting
Motion carried

- The meeting was adjourned at 7:19 p.m.

Rebecca Pasko, CMHPSM Board Secretary

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.



MONROE
COMMUNITY
MENTAL
HEALTH

February 2024

Board Report

Table of Acronyms

<u>Acronym</u>	<u>Full Description</u>
DAB	Disabled, Aged, & Blind
HMP	Healthy Michigan Plan
HSW	Habilitation Supports Waiver
TANF	Temporary Assistance for Needy Families
CWP	Child Waiver Program
SEDW	Severe Emotional Disturbance Waiver
HHBH	Health Home - Behavioral Health
CMHSP	Community Mental Health Services Program
PIHP	Prepaid Inpatient Health Plan
CCBHC	Certified Community Behavioral Health Clinic

Monthly Highlights

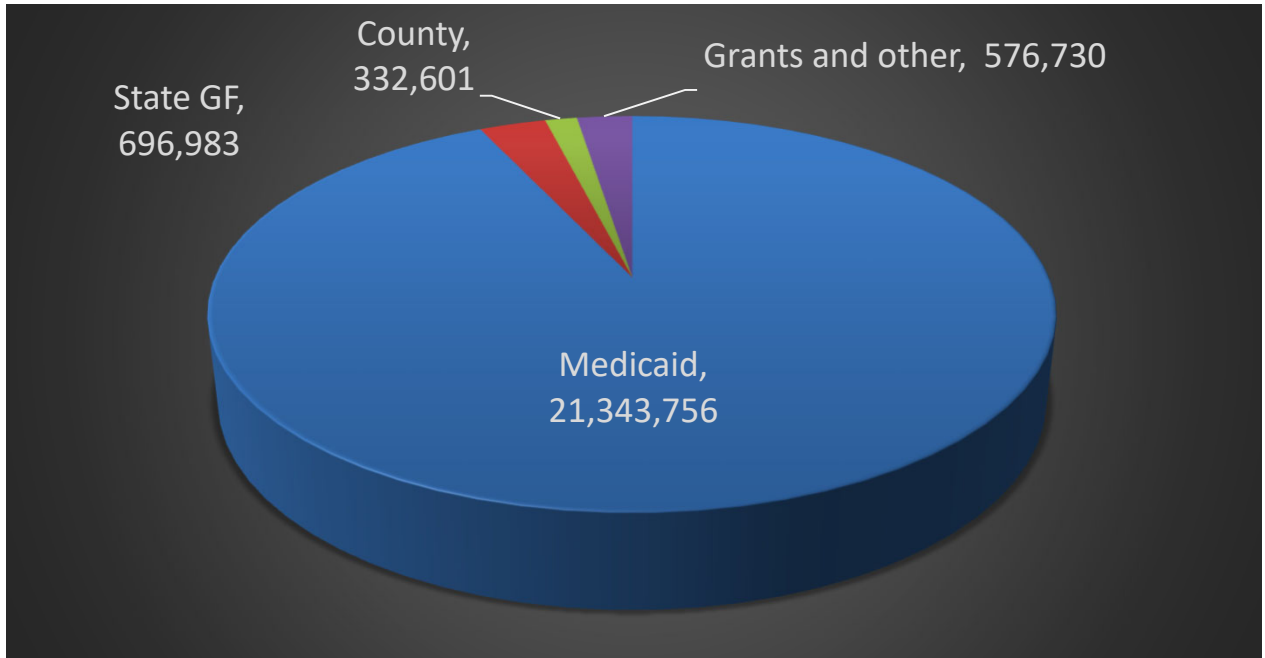
- Page 4 - Revenue and eligibility continues to decline faster than anticipated. PIHP CFOs met with MDHHS and are expecting a 4-5% increase (including DCW) retro to October 1.
- Page 5 - Cash and Investments are up from prior year primarily from collection of receivables from the PIHP.
- Page 5 - Liabilities are also up from prior year primarily related to estimated claims incurred but not reported.
- Page 6 - Net income is projected to be down compared to prior year primarily due to GASB 68 & 75 adjustments that are currently unknown and will be available in early 2025 from the actuaries.
- Page 8 - Revenue received from the PIHP exceeds expenses by \$772,672 as of February 29, 2024. Part of the Medicaid and HMP surpluses are due to allowable costs being covered by GF as individuals continue to fall off Medicaid.
- Page 9 - The CCBHC program is showing a deficit of \$147,622 through February. We continue to work with the PIHP to accelerate the reporting of T1040s which will bring in more revenue. Additionally, CCBHC non-Medicaid continues to grow causing part of this deficit.
- Page 10 - State General Fund is showing a deficit of \$1,023,390, primarily related to spenddowns, individuals falling off Medicaid and CCBHC non-Medicaid. This deficit is covered to the extent possible by local funds with a reported use of fund balance through January of \$509,922.

MONROE CMH

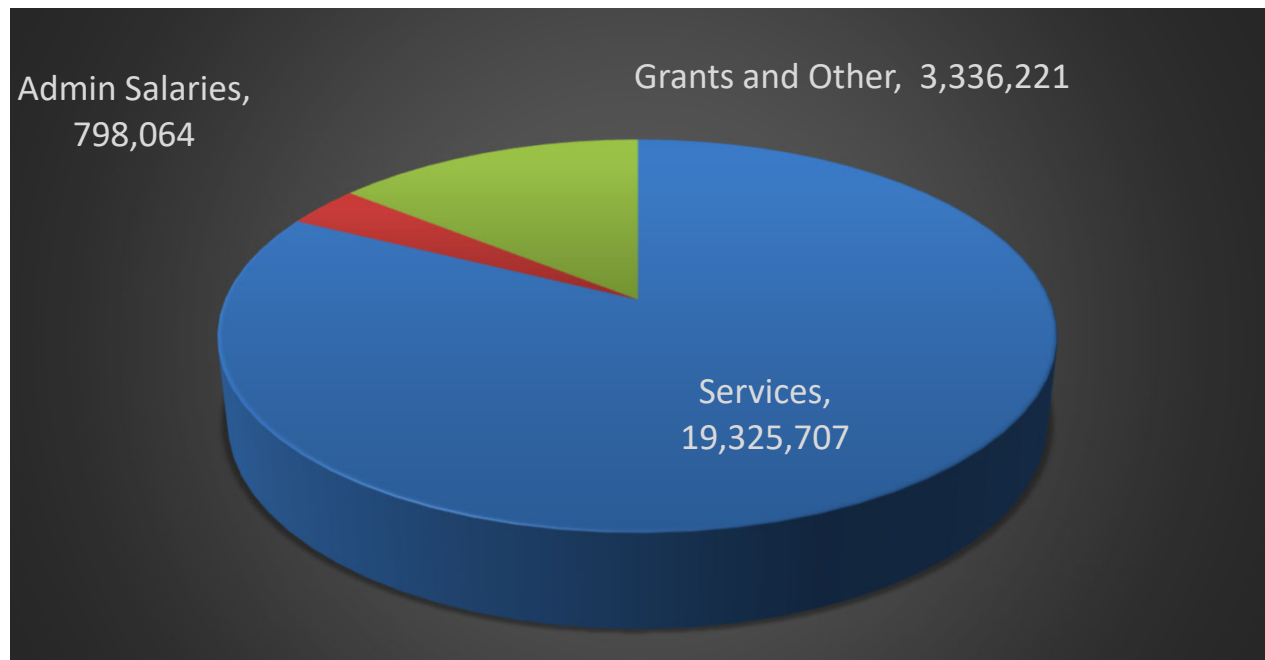
February 2024 Trends

Sources and Uses

Revenues by Source



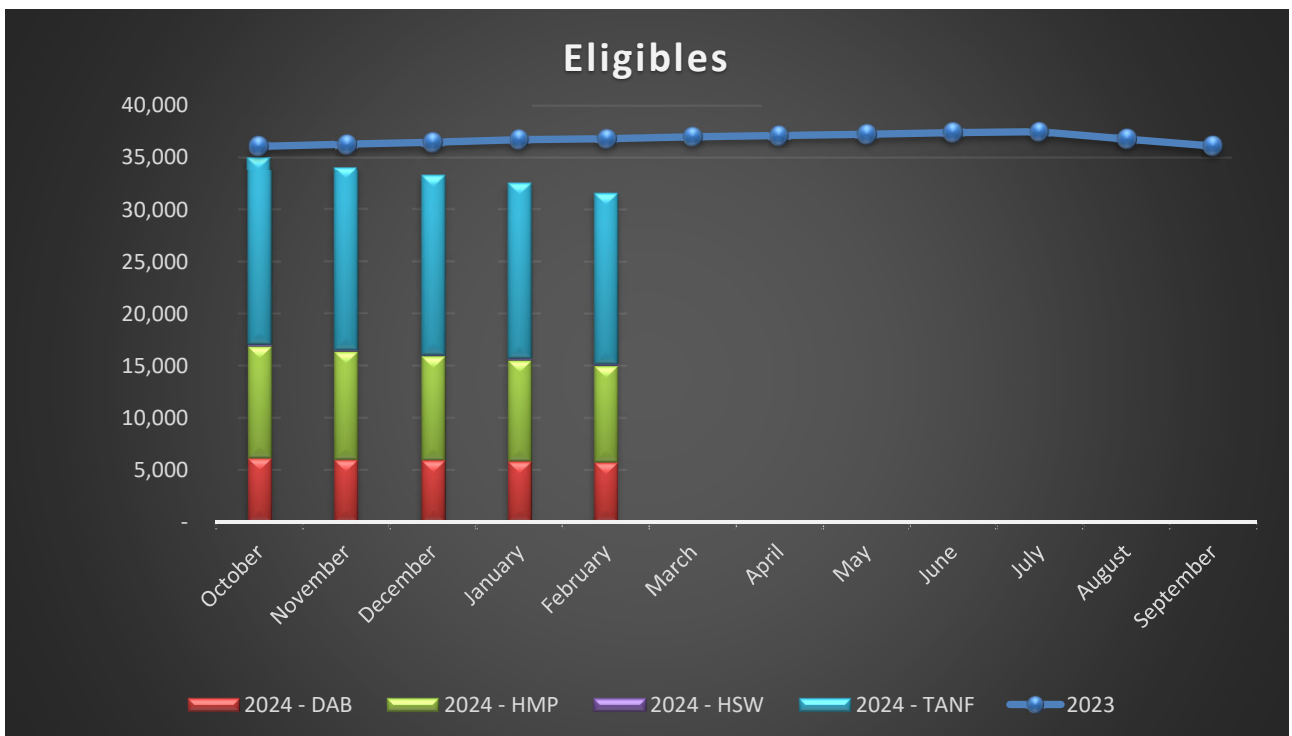
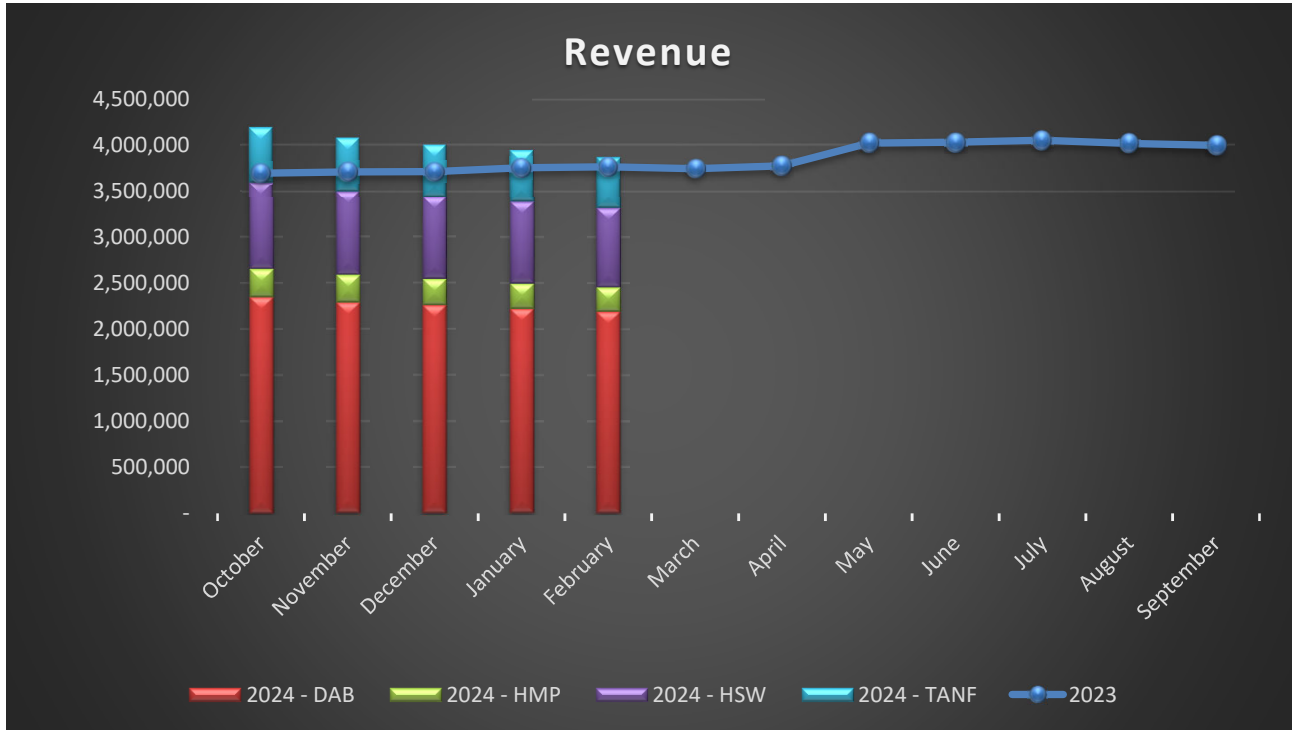
Expenditures by Category



MONROE CMH

February 2024 Trends

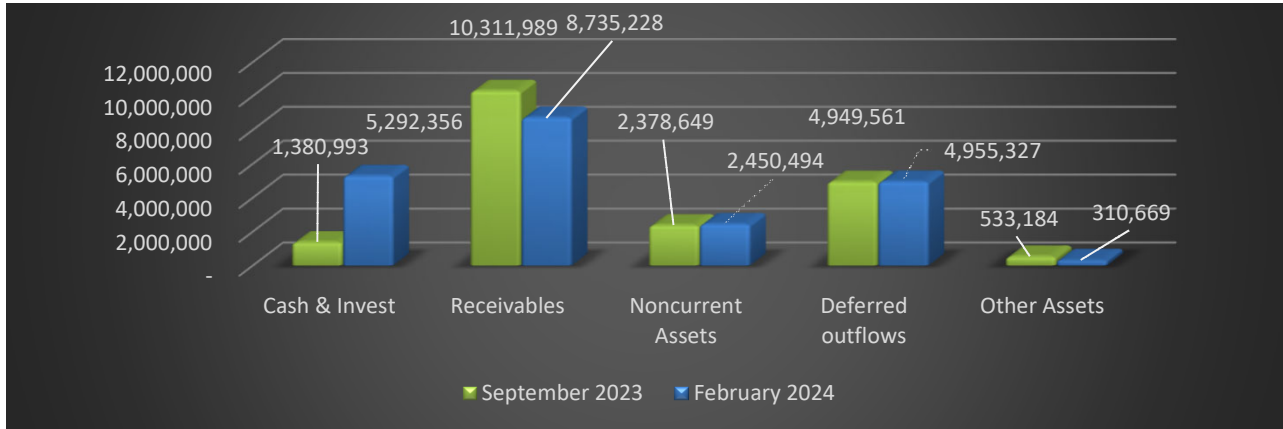
MDHHS Payments



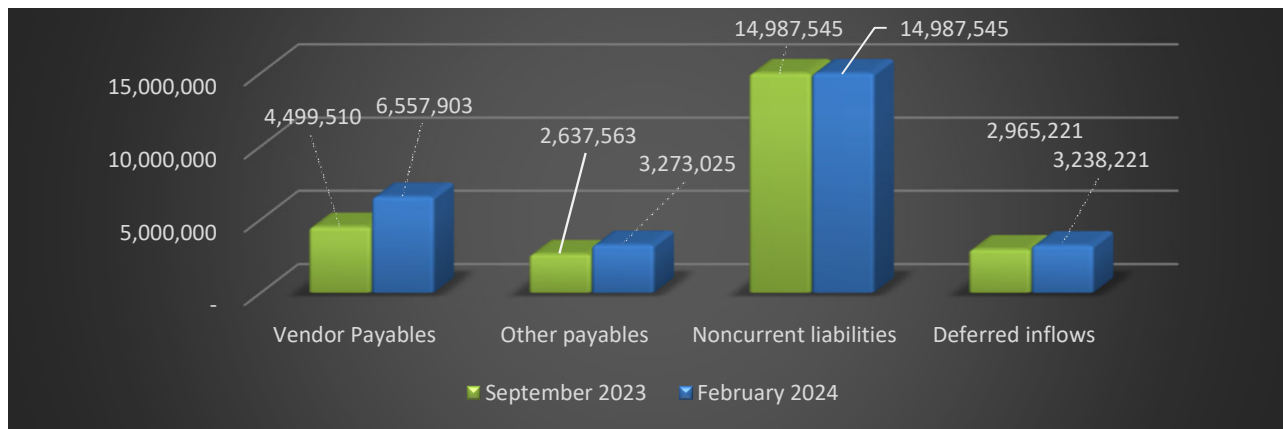
MONROE CMH

Comparative Charts September 2023 & February 2024

Assets



Liabilities



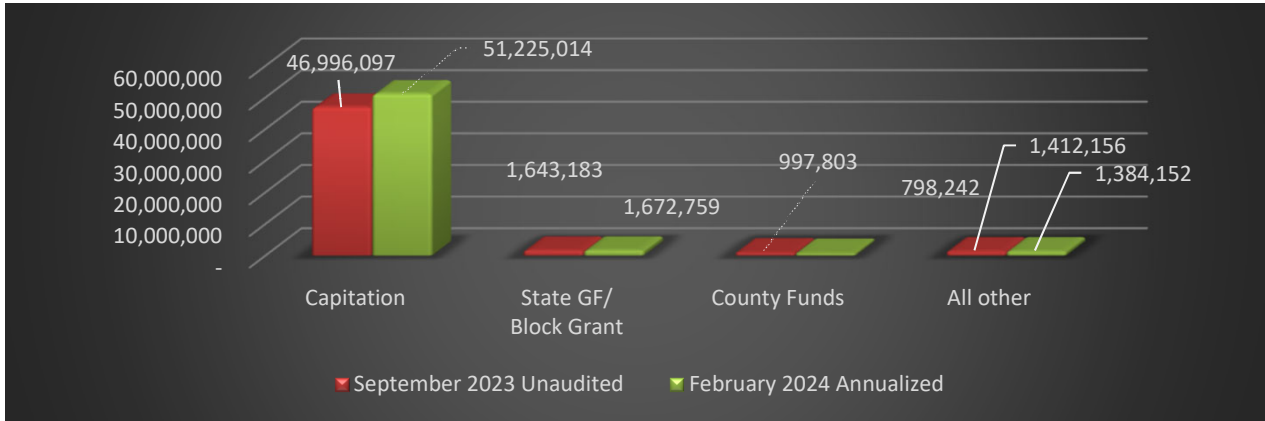
Net Position



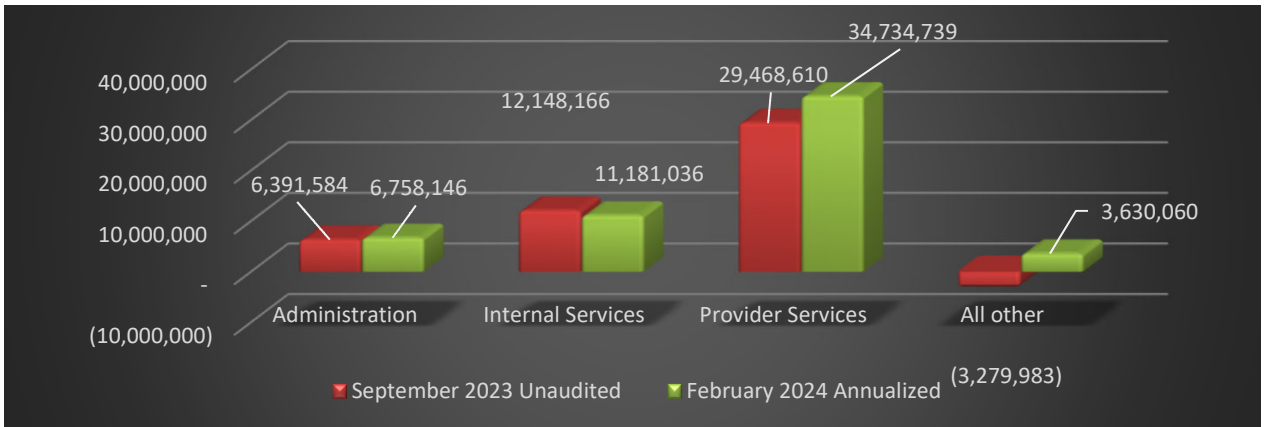
MONROE CMH

Comparative Charts September 2023 Unaudited & February 2024 Annualized

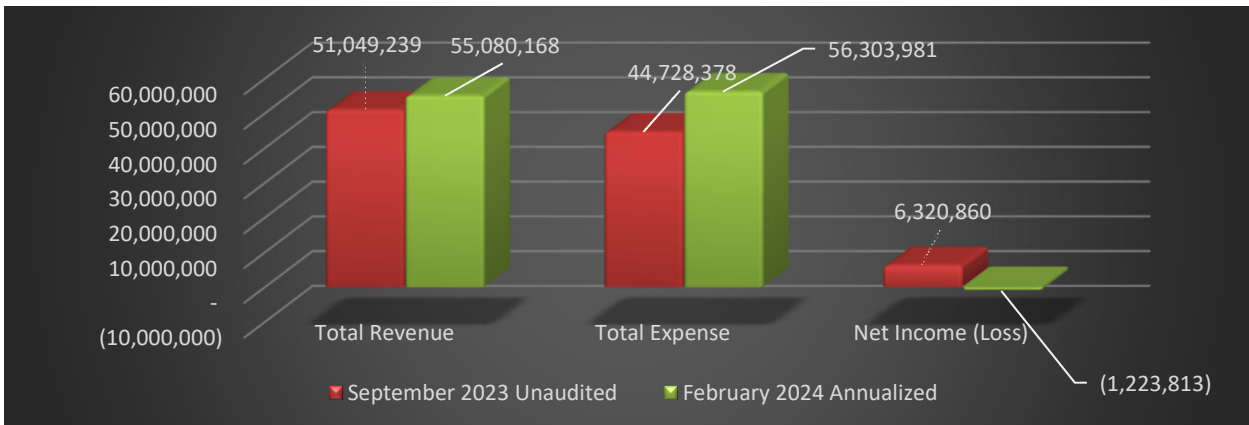
Revenues



Expenses



Net Income



INCOME STATEMENT BY FUND SOURCE

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2023 through February 2024

	2024 Budget	YTD Budget	2024 Actual	Over (Under)
Medicaid				
PIHP Revenue	\$ 35,116,485	\$ 14,631,869	\$ 17,362,614	\$ 2,730,745
PIHP Redirect to CCBHC	-	-	(1,015,472)	(1,015,472)
1st/3rd Party Revenue	-	-	-	-
Expense	34,577,285	14,407,202	15,893,757	1,486,555
Revenue over/(under) expenses	\$ 539,200	\$ 224,667	\$ 453,385	\$ 228,718
Healthy Michigan				
PIHP Revenue	\$ 2,860,301	\$ 1,191,792	\$ 1,191,792	\$ (0)
PIHP Redirect to CCBHC	-	-	(177,917)	(177,917)
1st/3rd Party Revenue	-	-	-	-
Expense	2,789,701	1,162,375	920,317	(242,058)
Revenue over/(under) expenses	\$ 70,600	\$ 29,417	\$ 93,558	\$ 64,141
CCBHC Medicaid				
PIHP Cap Revenue	\$ 6,000,000	\$ 2,500,000	\$ 1,015,472	\$ (1,484,528)
PIHP Supp Receipts (Cash Basis)	6,000,000	2,500,000	3,399,862	899,862
1st/3rd Party Revenue	-	-	12,280	12,280
Expense	12,000,000	5,000,000	3,833,136	(1,166,864)
Retain as local	-	-	(155,395)	(155,395)
Revenue over/(under) expenses	\$ -	\$ -	\$ 749,873	\$ 749,873
CCBHC Healthy Michigan				
PIHP Cap Revenue	\$ -	\$ -	\$ 177,917	\$ 177,917
PIHP Supp Receipts (Cash Basis)	-	-	-	-
1st/3rd Party Revenue	-	-	-	-
Expense	-	-	694,288	694,288
Retain as local	-	-	7,773	7,773
Revenue over/(under) expenses	\$ -	\$ -	\$ (524,144)	\$ (524,144)
Total PIHP Sources				
PIHP Revenue	\$ 49,976,786	\$ 20,823,661	\$ 21,954,268	\$ 1,130,607
1st/3rd Party Revenue	-	-	12,280	12,280
Expense	49,366,986	20,569,578	21,341,498	771,921
Retain as local in FY 23	-	-	(147,622)	(147,622)
Revenue over/(under) expenses	\$ 609,800	\$ 254,083	\$ 772,672	\$ 518,589

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2023 through February 2024

CCBHC Medicaid	2024 Budget	YTD Budget	2024 Actual	Over (Under)
PIHP Cap Revenue	\$ 6,000,000	\$ 2,500,000	\$ 1,015,472	\$ (1,484,528)
PIHP Supp Revenue (Earned)	6,000,000	2,500,000	2,649,989	149,989
1st/3rd Party Revenue	-	-	12,280	12,280
Expense	12,000,000	5,000,000	3,833,136	(1,166,864)
Revenue over/(under) expenses	\$ -	\$ -	\$ (155,395)	\$ (155,395)

CCBHC Healthy Michigan	2024 Budget	YTD Budget	2024 Actual	Over (Under)
PIHP Cap Revenue	\$ -	\$ -	\$ 177,917	\$ 177,917
PIHP Supp Revenue (Earned)	-	-	524,144	524,144
1st/3rd Party Revenue	-	-	-	-
Expense	-	-	694,288	694,288
Revenue over/(under) expenses	\$ -	\$ -	\$ 7,773	\$ 7,773

CCBHC NonMedicaid	2024 Budget	YTD Budget	2024 Actual	Over (Under)
State CCBHC Revenue	\$ -	\$ -	\$ -	\$ -
1st/3rd Party Revenue	-	-	-	-
Expense	-	-	442,405	442,405
Redirect from GF	-	-	442,405	442,405
Revenue over/(under) expenses	\$ -	\$ -	\$ -	\$ -

ALL CCBHC Combined	2024 Budget	YTD Budget	2024 Actual	Over (Under)
All CCBHC Revenue	\$ 12,000,000	\$ 5,000,000	\$ 4,367,522	\$ (632,478)
1st/3rd Party Revenue	-	-	12,280	12,280
Expense	12,000,000	5,000,000	4,969,829	(30,171)
Redirect from GF	-	-	442,405	442,405
Revenue over/(under) expenses	\$ -	\$ -	\$ (147,622)	\$ (147,622)

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2023 through February 2024

State General Fund	2024 Budget	YTD Budget	2024 Actual	Over (Under)
Revenue	\$ 1,729,980	\$ 720,825	\$ 696,983	\$ (23,842)
Expense	1,644,960	685,400	1,277,968	592,568
Redirect to Other Programs	-	-	(442,405)	(442,405)
Redirect from Other Programs	-	-	1,023,390	1,023,390
Revenue over/(under) expenses	\$ 85,020	\$ 35,425	\$ -	\$ (35,425)
All Other Grants/Local	2024 Budget	YTD Budget	2024 Actual	Over (Under)
Revenue	\$ 2,785,336	\$ 1,160,557	\$ 1,052,194	(108,363)
Expense	2,785,336	1,160,557	656,125	(504,432)
Redirects	-	-	(1,023,390)	(1,023,390)
Revenue over/(under) expenses	\$ -	\$ -	\$ (627,321)	\$ (627,321)
Total Non PIHP Sources	2024 Budget	YTD Budget	2024 Actual	Over (Under)
Revenue	\$ 4,515,316	\$ 1,881,382	\$ 1,749,177	\$ (132,205)
Expense	4,430,296	1,845,957	2,376,498	530,541
CCBHC Retain as local	-	-	(147,622)	(147,622)
Revenue over/(under) expenses	\$ 85,020	\$ 35,425	\$ (774,943)	\$ (810,368)

BASIC FINANCIAL STATEMENTS

MONROE CMH

Statement of Position

October 1, 2023 through February 29, 2024

	February 29 Balance	Balance September 30 2023	Over (Under)
ASSETS & DEFERRED OUTFLOWS			
Current:			
Cash and cash equivalents	\$ 5,292,356	\$ 1,380,993	\$ 3,911,363
Accounts receivable, net	146,879	248,633	(101,754)
Due from PIHP	8,512,562	9,954,592	(1,442,030)
Due from State of Michigan	68,012	61,136	6,876
Due from other governmental units	7,775	47,628	(39,853)
Prepaid items	310,669	533,184	(222,515)
Total current	14,338,253	12,226,165	2,112,088
Noncurrent:			
Capital assets not being depreciated	47,000	47,000	-
Capital assets being depreciated, net	2,403,494	2,331,649	71,845
Deferred outflows - Pension & OPEB	4,955,327	4,949,561	5,766
Total noncurrent	7,405,821	7,328,210	77,611
Total assets and deferred outflows	21,744,074	19,554,375	2,189,699
LIABILITIES & DEFERRED INFLOWS			
Current			
Accounts payable	6,557,903	4,499,510	2,058,393
Accrued liabilities	1,544,747	1,681,957	(137,210)
Due to State of Michigan	1,641,779	869,107	772,672
Unearned revenue	86,499	86,499	-
Long-term debt, due within one year	-	-	-
Compensated absences, due within one year	49,458	49,458	-
Total current liabilities	9,880,386	7,186,531	2,693,855
Noncurrent			
Long-term debt, due beyond one year	1,096,535	1,096,535	0
Compensated absences, due beyond one year	322,163	322,163	(0)
Lease liability	456,473	456,473	(0)
Net pension liability	6,754,198	6,754,198	-
Net OPEB liability	6,308,718	6,308,718	-
Deferred inflows - leases	7,997	7,997	0
Deferred inflows - Pension/OPEB	3,230,224	2,957,224	273,000
Total noncurrent liabilities	18,176,308	17,903,308	273,000
Total liabilities and deferred inflows	28,056,694	25,089,840	2,966,854
NET POSITION			
Net investment in capital assets	1,986,024	1,914,179	(71,845)
Unrestricted	(8,298,644)	(7,449,585)	849,059
Total net position	\$ (6,312,620)	\$ (5,535,407)	\$ (777,213)

MONROE CMH

Statement of Activities

October 1, 2023 through February 29, 2024

	Mental Health YTD	Projected Annual Activities	Prior Year Total Activities	Over (Under)
Operating revenue				
Capitation:				
Medicaid	\$ 17,362,614	\$ 41,670,274	\$ 40,219,271	\$ 1,451,003
Medicaid - Settlement	(453,385)	(1,088,124)	3,239,791	(4,327,915)
Healthy Michigan	1,191,792	2,860,301	3,008,142	(147,841)
Healthy Michigan - Settlement	(93,558)	(224,539)	375,265	(599,804)
CCBHC	3,399,862	8,159,669	-	8,159,669
CCBHC - Settlement	(225,729)	(541,750)	-	(541,750)
Behavior Health Home	162,160	389,184	153,628	235,556
State General Funds	696,983	1,672,759	1,813,773	(141,014)
State General Funds - Carryover	-	-	(170,590)	170,590
County appropriations	332,601	798,242	997,803	(199,561)
Charges for services	13,065	31,356	178,711	(147,355)
Other grants	489,129	1,173,910	1,157,291	16,618
Other revenue	74,536	178,886	76,154	102,733
Total operating revenue	22,950,070	55,080,168	51,049,239	4,030,929
Operating expenses				
Administration				
Salaries	798,064	1,915,354	2,081,999	(166,645)
Benefits	674,637	1,619,129	1,503,538	115,591
Other	1,343,193	3,223,663	2,806,047	417,616
Internal Services				
Salaries	2,278,166	5,467,598	5,614,573	(146,975)
Benefits	1,748,787	4,197,089	4,094,150	102,939
Other	631,812	1,516,349	2,439,443	(923,094)
Provider Network Services	14,472,808	34,734,739	29,468,610	5,266,129
Facility costs	544,637	1,307,129	917,802	389,326
Vehicle costs	19,332	46,397	38,488	7,909
Grant expenses	754,422	1,810,613	1,454,666	355,947
Room & Board	194,134	465,922	111,186	354,735
GASB 68 & 75 Adjustment	-	-	(5,802,125)	5,802,125
Total operating expenses	23,459,992	56,303,981	44,728,378	11,575,602
Change in net position	(509,922)	(1,223,813)	6,320,860	\$ (7,544,673)
Net position, beginning of year	(5,802,698)	(5,802,698)	(11,856,267)	
Net position, end of year	\$ (6,312,620)	\$ (7,026,511)	\$ (5,535,407)	

MONROE CMH

Statement of Activities

Mental Health - Budget to Actual

October 1, 2023 through February 29, 2024

	Annual Budget	YTD Budget	YTD Actual	Over (Under) YTD Budget
Operating revenue				
Capitation:				
Medicaid	\$ 35,116,485	\$ 14,631,869	\$ 17,362,614	\$ 2,730,745
Medicaid - Settlement	(635,700)	(264,875)	(453,385)	(188,510)
Healthy Michigan	2,860,301	1,191,792	1,191,792	(0)
Healthy Michigan - Settlement	(70,600)	(29,417)	(93,558)	(64,141)
CCBHC	12,000,000	5,000,000	3,399,862	(1,600,138)
CCBHC - Settlement	-	-	(225,729)	(225,729)
Behavior Health Home	96,500	40,208	162,160	121,952
State General Funds	1,729,980	720,825	696,983	(23,842)
State General Funds - Carryover	(85,020)	(35,425)	-	35,425
County appropriations	997,803	415,751	332,601	(83,150)
Charges for services	217,870	90,779	13,065	(77,714)
Other grants	1,484,505	618,544	489,129	(129,415)
Other revenue	85,158	35,483	74,536	39,054
Total operating revenue	53,797,282	22,415,534	22,950,070	534,536
Operating expenses				
Administration				
Salaries	2,777,641	1,157,350	798,064	(359,286)
Benefits	1,387,182	577,993	674,637	96,645
Other	2,029,359	845,566	1,343,193	497,627
Internal Services				
Salaries	7,489,941	3,120,809	2,278,166	(842,643)
Benefits	4,775,202	1,989,668	1,748,787	(240,881)
Other	2,034,208	847,587	631,812	(215,775)
Provider Network Services	30,363,290	12,651,371	14,472,808	1,821,437
Facility costs	795,455	331,440	544,637	213,197
Vehicle costs	88,775	36,990	19,332	(17,658)
Grant expenses	1,488,493	620,205	754,422	134,217
Other expenses	20,288	8,453	-	(8,453)
Room & Board	547,448	228,103	194,134	(33,969)
Total operating expenses	53,797,282	22,415,534	23,459,992	1,044,458
Change in net position	-	-	(509,922)	(509,922)
Net position, beginning of year	(5,802,698)	(5,802,698)	(5,802,698)	-
Net position, end of year	<u>\$ (5,802,698)</u>	<u>\$ (5,802,698)</u>	<u>\$ (6,312,620)</u>	<u>\$ (509,922)</u>