

LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes

February 24, 2011

Present: Ackley; Bills; Jackson; Keller, Martinez, Miley; Smith; Van Doren; Welch
Absent: Clites; Wilson, Zimmerman
Staff: Myers; Rawlings (Minutes); Keener; Robb and Szewczuk
Public: Ackley, Reed

CALL TO ORDER

Ackley called the meeting to order at 3:05pm.

PREVIOUS MINUTES

MOTION by Smith to approve the previous minutes dated January 27, 2011. **SUPPORTED** by Welch. **MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

None.

COMMITTEE REPORTS

A. Standing Committees

1. Consumer Advisory

There was no Consumer Advisory Committee meeting in February.

2. Quality Assurance/Compliance

There was no Quality Assurance/Compliance meeting in February.

3. Facilities Committee

There was no Facilities Committee Meeting in February.

4. Operations and Budget

Smith reported on Operations & Budget Committee which met on February 14th.

Policies:

LCMHA Do Not Use Abbreviation List: This policy has been updated to meet Joint Commission requirements. **MOTION** by Smith to approve LCMHA Do Not Use Abbreviation List Policy. **SUPPORTED** by Keller. **MOTION CARRIED.**

Contracts:

The first one year renewal for Westhaven residential lease is due. This lease contract was renegotiated last year to a 15% reduction. **MOTION** by Smith to approval renewal of Westhaven residential lease for one year. **SUPPORTED** by Jackson. **MOTION CARRIED.**

Data:

State institution utilization graph for January shows 12 days authorized costs; overall this is considerably below the budget line. Community inpatient hospitalization is seeing an upward trend since November. 122 days authorized in January this is less than the same time last year. Four of the five readmissions were previously unknown to CMH and occurred before being referred to us. We are looking into possible solutions to this. 61% of admissions were previously unknown, over half were Medicaid.

There were 131 inquires in January, with 34 eligible and receiving service (47% Medicaid, 18% GF). 24 people on the waiting list.

Finance Report:

Revenue at the end of January at 32%, 33% of the way through the year. Nothing taken from the fund balance. Earned interest – we are losing some principle with UBT Wealth Management Program, the money is in municipal bonds and these are not doing well. Van Doren suggests an investment sub-committee meeting to discuss this. Don Welch to talk to county to set this up. Earned revenue other - \$69,000 budgeted, we are at 5%. This is related to wraparound. We are finding that all of our wraparound children are Medicaid and so we are not receiving any of the wraparound pool available to us from our partners. An adjustment will need to be made in the budget. Expenditure – 31% expended. 41% consultant line is due to a Joint Commission payment. Recruitment is 148% spent. Residential home maintenance - \$65,000 budgeted and now tracked separately 26% expenditure year to date. Van Doren asked if there are more changes coming in auditing procedures? Myers believes that the Affiliation will be rebidding this out.

Cash balance:

\$459,491.87 principal balance on mortgage, 61% attributable to the Clubhouse facility.

MOTION by Jackson to accept the financial report and additional vouchers totaling \$380,453.56. **SUPPORTED** by Smith. **MOTION CARRIED.**

5. *Personnel Committee*

Smith reported on Personnel Committee which met prior to the Board Meeting. Board Member vacancy and reappointments were discussed. Terms of Ackley, Miley, Wilson and Zimmerman expire in March. Ackley, Miley and Wilson have expressed a desire to continue, however Zimmerman will be retiring from the Board. The County Commission could have as many as four commissioners on the board. Van Doren was reappointed as a member at large after his term expired as a County Commissioner. Currently Don Welch represents the County Commission. Myers has also received a letter of interest from a consumer to serve on the Board. **MOTION** by Van Doren to recommend the reappointment of members Ackley, Miley and Wilson and for the County Commission to determine whether to appoint another commissioner, or consumer Evalyn Reed to the CMH Board. **SUPPORTED** by Keller. **MOTION CARRIED.**

There was discussion regarding the change in health care premiums effective May 1st and the fact that staff is generally not taking advantage of the free annual physical/wellness check ups available. An incentive program is being researched by Sharon Robb.

6. *Recipient Rights Advisory Committee*

There was no Recipient Rights Advisory Committee meeting in February.

7. Retirement Committee

There was no Retirement Committee meeting in the month of February.

B. Ad-Hoc Committees

Deb Bills reported on the Mental Health Awareness Committee which met last week. All committees are on target. Board Members are currently working on securing financial backing for the reception and other expenses. If anyone has suggestions for funding sources please contact a member of the committee. Board Members are encouraged to help with this, and also to suggest ten people to invite to the invitation only event on May 6th. May 7th will be the grand opening and ribbon cutting where public is invited, cookies and punch will be served. Fred Freese will be speaking on the evening of May 6th, and Dr. Decker will be signing books and speaking on May 7th, along with Richard Prangley. The committee is looking to raise about \$25,000 (half of which will be covered by Hendershot funds) to cover costs of transportation, storage, speakers, reception, publicity etc.

EXECUTIVE DIRECTOR'S REPORT

1. Board Association Dues Issue. Myers submitted an official letter to Mike Vizona asking for an exception to the full payment. MACMHB will be discussing this further in April.
2. Power Outages. Residential homes affected by the recent power outages (Green Hwy; Oakwood, S. Main, Marvin Dr and College Ave) transported consumers to the Tecumseh Inn, which was the responsibility of the providers. There are many tree limbs and overhanging power lines and these will be taken care of as soon as possible.
3. Budget. The new DCH Director, Olga Dazzo, reported that the Governor has set a 3% reduction in the FY12 budget for GF. It is likely to be distributed similar as the past and should not affect us too badly. There is a 15% decrease in earmarks, which includes multicultural services. Medicaid rates are projected to increase based on a 3% increase in Medicaid caseloads with no changes in FY12 Medicaid eligibility or current benefit. This year they are not going to pursue the early adopter to expand Medicaid. Dazzo conveyed a message from the Governor's "Michigan 3.0" document which specifically targets the DCH and Mental Health system. White papers have already been generated regarding reforming the mental health system. DCH wants to improve health care, lower costs through ongoing systems of care by promoting medical health homes, integrating services, reforming infrastructures, looking at opportunities to achieve increased cost effectiveness, lessening the cost of administrative services, expanding Medicaid to a higher eligibility level, promoting FQHCs and integrating behavioral and physical health. There are 280,000 people in

the system managing limited resources through 46 CMH's, 16 Substance Abuse Coordinating Agencies, 18 PIHPs which appears heavy on administration with an opportunity to innovate. Those in the field believe that there is evidence that Medicaid \$ will eventually be restructured where the Health Plans will be the recipient and administrator. It is unsure if PIHPs will still exist. We will be negotiating for our share of the dollars with the Health Plans. Key issues between now and 2014 – Medicaid could be expanded to include Medicare and all waivers, spenddowns etc and \$ contracted via the Health Plans. Everyone would fall into benefit levels. Everyone will have a distinctive card to identify the service they are entitled to. Everyone will have a co-pay, and all will receive a subsidy. The state will decide how many Health Plans can operate. Currently Lenawee has two. The Health Plans would enrol the service providers. The Health Plan Association is similar to the CMH Board Association, and they have already developed a paper and proposal, which is on its way to the Governors office. The MACMHB is negotiating a “joint position” with the Health Plan Association which would keep us at the table. As a provider we could be part of a PIHP provider system and negotiate rates and services for our area, or we could come in as part of an integrated organization with the FQHC, or a bigger health system such as ProMedica might want to compete with us to be the service provider. Sandy Keener and Kathryn Szewczuk attended a meeting after the Winter Conference and heard the perspective of the Health Management Association about integrating Medicaid and Medicare funds for dual eligibles, expanding the population, and getting services for people with clinical illnesses and long term care needs on a waiver. CMH has a certain set of expert skills and services; however, we cannot provide them as many are ineligible.

4. Mike Head's meetings with PIHP directors, excluding CMHSPs. The Board Association was asked to step in to stop this happening, and Mike Vizena wrote a letter on our behalf requesting the Department change the practice of excluding us in discussions on policy and funding issues. Mike Head's response was read to the board members.
5. New Focus Clubhouse. An interested party toured the premises last week and may be submitting an offer shortly.
6. Myers and Keener attended the MACMHB Winter Conference. 400 people in attendance. The Legislative Breakfast was only attended by a few representatives as Governor Snyder called a meeting with the caucuses.

REPORT FROM BOARD CHAIR

1. Regional Member Education Forums are set for the year. If board members are interested in attending the closest one to us is in Ann Arbor on March 18/19th.
2. Bob Wilson has been experiencing some serious health issues lately, please keep him in your thoughts.

3. The HOPE Center has started its Wellness Group. There will be daily teachings about good nutrition and exercise etc.
4. Ackley distributed a copy of the MACMHB Mission Statement. The Affiliation Committee would like feedback from the Boards about what our expectations are from the Board Association. Smith believes that they should represent our interests with the legislators and constituents. Miley believes that recently they have not been doing anything for the people we are mandated to serve, and she would like to see change for the better. Jackson would like them to promote effective relationships between us and the Governor, between us and the legislature, between us and the advocacy groups. He is not sure what they are doing to promote and enhance public awareness, they are not supportive of mental health programs, anti stigma, public service announcements. They are not taking the lead on anything to ensure continued protection and services for our clients. Smith noted that as we do not know what all the changes will look like as we go forward, the MACMHB should be there to protect our role; ensure we are included in all negotiations; and ensure quality in mental health services to all populations. Jackson would like them to become more fiscally responsible with our money. There is a fine line between being a coordinating group and leading in the area of mental health – there is a lack of focus. Maybe there should be more visionaries and leaders on staff, not just good conference organizers and educators.

BOARD MEMBER COMMENTS

None.

ADJOURNMENT

Meeting adjourned at 4:20pm.

/klr