LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes April 3, 2014

Present: J. Ackley; D. Bills; S. Clites; C. Smith; R. Tillotson, Van Doren; R. Wilson

Absent: M. Jackson; H. Keller; E. Martinez; N. Smith Staff: Andrews, Keener, Rawlings (minutes), Robb

Public: None

CALL TO ORDER

Chairperson Bills called the meeting to order at 3:02p.m.

PREVIOUS MINUTES

MOTION BY VAN DOREN to approve the previous minutes dated February 27th, 2014. **SUPPORTED BY C.SMITH. MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

None

COMMITTEE REPORTS

A. Standing Committees

Mental Health Awareness

The State Walk a Mile is scheduled for May 14th. A group will be attending and will need transportation. Planning continues for the 3rd Annual Path to Wellness & Recovery Conference on May 28th. Grace Miley farewell luncheon will be held during the Conference at 11:30am.

2. Performance Improvement

There was no Performance Improvement Committee Meeting in March.

3. Facilities Committee

There was no Facilities Committee Meeting in March.

4. Operations and Budget

Bills reported on the meeting which was held on March 19th.

- a. Master Earned Revenue Agreement.
 - **MOTION BY ACKLEY** to approve the WCHO Master Earned Revenue Services Agreement. **SUPPORTED BY CLITES. MOTION CARRIED.**
- b. Oakwood Lease

The landlord of the Oakwood Home was asked for a reduction of \$400 per month in the lease of the property. He, in turn, has asked for more time to collect information. Tillotson noted that if a stalemate is reached, there should be room for negotiation. MOTION BY CLITES to extend the Oakwood lease for one month. SUPPORTED BY VAN DOREN. MOTION CARRIED.

- c. <u>Revised Regional Policy R-810 Security of Consumer Related Information</u>

 MOTION BY VAN DOREN to approve Regional Policy R-810.

 SUPPORTED BY C. SMITH. MOTION CARRIED.
- d. <u>Rescind C-427 Communication & Coordination with SUD Providers</u>

 MOTION BY CLITES to rescind Policy C-427. SUPPORTED BY C. SMITH.

 MOTION CARRIED.

Service Inquiry – there were 87 inquiries in February. 73 intakes were scheduled with 49 approved for service. Of those 29% were GF, 4% ABW and 67% Medicaid. 48 are on the waiting list. However, everyone on the waiting list has been contacted regarding enrollment in Healthy Michigan, and asked if they would like to be scheduled for an intake, or have the case closed. It is hoped that the waiting list can be eliminated by the end of April. There were 28 inquiries for SUD services, 23 of those were authorized, 11 Medicaid and 10 block grant. We will see a change in these numbers as those eligible for Healthy Michigan are enrolled. We received the last ABW payment in March, all consumers have been transferred to Healthy Michigan.

State Institution – We have gone from 4 to 2 people in the state hospital, we anticipate being able to place one of those in the community in April. The other will be in for a longer term. We continue to be under budget.

Inpatient Hospitalizations – We are above budget on community inpatient 27 admissions in February. Costs were \$91,406 (\$40,831 Medicaid, \$46,225 GF, \$4,350 ABW). We will see the most impact from the introduction of Healthy Michigan in this area, as this is a high GF cost for us, for those going into hospital that are uninsured. Of the admissions 26% had co-occurring mental health and substance abuse

disorders, 41% Medicaid, 48% GF. 41% were previously unknown to us. We saw an increase in people readmitted within 30 days. Utilization Review Committee looks at these trends to see what is causing the readmissions. Some people are not showing up at CMH for a follow up appointment within 7 days of discharge. Our Peer Support Specialists are working to make contact within the hospital, and reaches out to consumers if they miss their appointment.

Finance Report – Deb Strayer reported that 39% of the budget is expended at 42% of the way through the year. Community inpatient continues to run high and state institutions are below budget. Some of the clinical contracts are below budget due to consumers not attending programs due to the harsh winter conditions. Revenue – we have received our full GF allocation for February and March. We have received the new reduced authorization for April. We are showing that we need \$50,000 from the fund balance, which is less than last month. This is mainly due to the savings on state institutions.

Cash Balance – There will be a considerable drop in the cash management account next month due to the fact that we have to return \$1.9m excess Medicaid to the affiliation. Last July the WCHO pushed out all available Medicaid to the affiliates, which we knew we could not spend. However, we were allowed to collect any interest incurred during that time. This amount is included on the voucher list. There were small gains in market value on both the GF and Hendershot accounts. \$71,400 left on the mortgage. Tillotson questioned interest earned and fees/expenses for the two wealth management accounts and would like to see a year-long breakdown of income versus expenses.

MOTION BY CLITES to accept the March Finance Reports and additional vouchers totaling \$653,317.67. **SUPPORTED BY C. SMITH. MOTION CARRIED.**

5. Personnel Committee

There was no Personnel Committee Meeting in March.

6. Recipient Rights Advisory Committee

No Board Members present were in attendance; however, Rawlings reported that there were no action items. The first quarter report was reviewed. 12 complaints were received which included 12 allegations. 9 of the allegations were investigated, 3 were resolved through intervention and 6 were substantiated. The next affiliate RRAC meeting is on May 8^{th} at 6pm at Zeeb Rd. Incident report data included 4 deaths in the first quarter – 3 of those were expected, and one is still pending results of the autopsy. Katie Snay reviewed the classes of Abuse & Neglect with the committee.

7. Retirement Committee

Van Doren reported on Retirement Committee which met on March 20th.

During the changeover from Dorsa to Mesirow it was discovered that Dorsa documents were not consistent with operations, and that a required Restatement of

Plan Documents had not been filed with the IRS and no filing fee had been received. Mass Mutual recommends a review of the current plan documents, with a new Plan Restatement. The cost should not exceed \$12,000. Everything except the filing fee can be taken from the Plan. **MOTION BY VAN DOREN** to contract with Mass Mutual to review the current plan documents, draw up a Plan Restatement based on current operations and government regulations for an amount not to exceed \$12,000. **SUPPORTED BY CLITES. MOTION CARRIED**.

It is understood that there will be costs in 2015, including a Summary Plan Description for employees; IRS filing and Form 5300 preparation etc.

There was discussion regarding the intent of the Board Minutes dated October 31st, 2013, as they were vague and did not adequately outline the actions going forward. **MOTION BY VAN DOREN** to clarify the responsibilities and actions of both Mass Mutual and Mesirow through the transition as follows:

Mass Mutual being responsible for:

- a. providing investment funds
- b. due diligence on all investment funds
- c. Plan documents
- d. Actuarial valuations
- e. Benefit Calculations
- f. Benefit Payments

Mesirow being responsible for:

- a. 3(38) Fiduciary to Plan
- b. Selects investment funds from Mass Mutual Menu for LCMHA
- c. Provides due diligence on LCMHA funds
- d. Replaces funds based on due diligence

SUPPORTED BY CLITES, MOTION CARRIED.

8. By-Laws

There was no By-Laws Committee Meeting in March.

9. Nominating Committee

MOTION BY VAN DOREN to reappoint board members: Ackley, Wilson & C. Smith for another term (3 years). **SUPPORTED BY TILLOTSON. MOTION CARRIED.**

B. Ad Hoc Committees:

No Ad Hoc Committee Meetings in March.

EXECUTIVE DIRECTOR'S REPORT

1. Keener reported that she attended a meeting in Lansing today to discuss the roll out of Healthy Michigan and the GF cuts. Over the last few years LCMHA has made significant cuts, including instituting a waiting list. Many CMHs have not made similar cuts, and will therefore feel the cuts much more. We will see a 16% GF cut, but this includes an increase in state hospital allocation. With Healthy Michigan enrollment on April 1st we hope to see most of the amount we lose in GF

covered with revenue from Healthy Michigan, but it is a little early to tell the long range impacts. 25,000 people were enrolled in the first two days. The rate we will be paid is lower than hoped (less than ½ we get for ABW) and the entitlement is the same as all other mental health services. Following successful advocacy the governor signed a bill for a supplemental for FY14 to address the slow enrollment and review process for Healthy Michigan. Some of the money will be uploaded into the early months, with half of the allocation in April/May and additional to offset the new allocation before Healthy Michigan revenue comes in. There are three categories that will still need GF:

- a. Medicare
- b. Medicaid Spend Down
- c. Dual Eligibles (Medicare/Medicaid)

which is not being replaced by Healthy Michigan.

It should be noted that Livingston saw a \$1m GF cut; Washtenaw \$2.5m, and Monroe \$880,000.

- 2. We have just returned \$1.9m Medicaid dollars to the affiliation. Now that more people will be eligible for Medicaid who meets the priority population, we should begin to discuss plans to use the excess Medicaid to meet the needs of our consumers.
- 3. Now that GF problems are being resolved, and fund balance issues are improving we would like to look to the future. We have absorbed a lot of administrative costs in the last couple of years, following the addition of substance abuse disorder services which has led to increased demand and intensity. We have seen an increase in CMH consumers from 1100 a couple of years ago, to over 1400 currently. Administrative costs have dropped to 6.7% from 7.7%. Staff is contributing more to their retirement and health care and we are asking them to do more and more. We have not filled some positions, and delaying filling others.
- 4. We are glad to report that the court will be receiving a mental health planning grant. The courts will be taking the lead, but we will be working with them to help meet the needs of people needing treatment. We have also been helping the Family Medical Center with their grant application.
- 5. We saw two staff retire last Monday. One position has been moved to Access Dept., and the other has been filled.

REPORT FROM BOARD CHAIR

- Bills appointed Clites to Operations & Budget Committee, replacing Miley who has retired - effective immediately. It was agreed that Ackley would chair Mental Health & Awareness Committee as attendance by Clites could be sporadic.
- 2. The MACMHB Spring Conference is being held in Dearborn, May 17th & 18th. Please let Karen know if you plan on attending.
- 3. The MACMHB Annual Report is included in your board packet for information. There is also an upcoming Board Member Forum if anyone is interested.
- 4. There will be a Farewell Luncheon for Grace Miley at the Path to Wellness & Recovery Conference on May 28th at 11:30am at the First Church of the Nazarene.

Board Members are encouraged to attend. A collection for a gift is also underway (see Karen).

REPORT FROM REGIONAL BOARD

None

BOARD MEMBER COMMENTS

Van Doren acknowledged the hard work done by those involved with the Retirement Committee and staff working with Mass Mutual & Dorsa. The committee did not realize how bad things were (with Dorsa), but are feeling much more comfortable now that Mass Mutual is working diligently on our behalf. We should see things get progressively better from now on.

Robert Wilson	Date
klr	
Meeting adjourned at 4:10pm.	
<u>ADJOURNMENT</u>	