

LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes
March 31, 2016

Present: D. Bills; G. Adams; S. Clites; M. Jackson; J. Lapham; E. Martinez; N. Smith;
R. Tillotson; J. Van Doren
Absent: J. Ackley, R. Wilson, D. Yearsin
Staff: Andrews; Keener; Rawlings (minutes); Robb
Public: None

CALL TO ORDER

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

PREVIOUS MINUTES

MOTION BY R. TILLOTSON to approve the previous minutes as presented dated February 25, 2016. **SUPPORTED BY S. CLITES. MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

No presentations or reports.

COMMITTEE REPORTS

A. Standing Committees

1. Consumer Action Committee

There was no-one present to report. No action items.

2. **Performance Improvement**

There was no PI Committee meeting in March.

3. **Facilities Committee**

There was no Facilities Committee meeting in March.

4. **Personnel Committee**

There was no Personnel Committee Meeting in March.

5. **Operations and Budget**

The lease for Oakwood is due for renewal, which led to an update on the situation with home insurances. Old National has informed us that they are unable to honor their agreement to provide insurance coverage on the leased homes; several factors are behind this decision, including staffing changes, the complexity of the bid, inability to find an underwriter, timing of insurance renewals etc. Debi Andrews is following up with our attorney on contract language in preparation for another RFQ. **MOTION BY J. VANDOREN** to approve the Oakwood lease renewal. **SUPPORTED BY S. CLITES. MOTION CARRIED.**

There was discussion regarding the recommendation by committee to review all financial relationships, including costs; fees charged etc. Board members thought it would be good practice to periodically evaluate all relationships. Smith expressed concern regarding the pension plans, as we are still in the process of transfer to Mass Mutual. **MOTION BY J. VANDOREN** to review and prepare proposals for management of our cash, investments, management of our pension plans (Defined Benefit/Defined Contribution/Social Security Alternative) and insurances including malpractice and general liability. **SUPPORTED BY M. JACKSON. MOTION CARRIED.** N. Smith abstained.

MOTION BY N. SMITH to approve the addition of Eastern Michigan Autism Collaborative to our provider panel. This is a site-based program out of Ypsilanti. **SUPPORTED BY M. JACKSON. MOTION CARRIED.**

Service Inquiry – there were 98 inquires in February, the bulk were Healthy Michigan and Medicaid. 65 assessments were completed with 36 eligible and receiving services. Currently there are 4988 enrolled in Healthy Michigan in Lenawee County. We had 34 substance use disorder inquiries, 33 of those were eligible and are receiving services.

State Institution – two people remain in the hospital. We expect them to stay for the remainder of the year.

Inpatient Hospitalizations – 24 were admitted to the hospital in February, 3 of those were children. We saw a lower than normal number of unknowns (38%), with no GF admissions. 46% had co-occurring mental health and substance use disorders.

Finance Report – In February we are 42% of the way through the year, with 36% of the budget spent. Expenditures are on target. Client services line is lower than anticipated due to consumers not using as much transportation as expected. Consultation line is high due to insurance leases and retirement plan discussions with our attorneys. Clinical contracts are in line at 36%. We are looking at the rate of reimbursement for CLS services and direct care staff services. Our providers are having a difficult time hiring staff, and if there is any excess Medicaid in the region we would like to do another direct wage pass through. All finance officers have given their predictions for the second half of the year, and we should have an answer at the regional meeting this month. SUD providers are running under budget, as the prevention grant to fund the engagement center has taken a slow start. We continue to be under budget on pharmacy due to the injectable medications being removed from our responsibility. We show being able to contribute to the fund balance even though we continue to be overspent on GF.

Cash Balance – We saw an increase in market value on the GF investments.

MOTION BY JACKSON to accept the Finance Report, no additional vouchers.
SUPPORTED BY J. VANDOREN. MOTION CARRIED.

6. Recipient Rights Advisory Committee

G. Adams reported on the RRAC Committee which met on March 15th. There was increased report activity for the first quarter. However, the number of substantiations remained consistent with previous years. The Rights Officer is monitoring one provider to ensure all instances are being reported.

7. Retirement Committee

There was no Retirement Committee meeting in March.

8. By-Laws

There was no By-Laws Committee meeting in March.

B. Ad Hoc Committees:

M. Jackson reported that unfortunately the Nominating Committee was not able to meet. **MOTION BY N. SMITH** to ask the incumbent officers to serve one more month, to announce next month and vote at the May board meeting. **SUPPORTED BY J. VANDOREN. MOTION CARRIED.**

EXECUTIVE DIRECTOR'S REPORT

1. A request at Operations & Budget regarding the pension report discount rate was not resolved, and requires board action. The email string was provided to the board for their review. Our auditor reports that typical discount rates are between 4-8.25%. Mass Mutual explained their rationale for setting the discount rate at 6.7%,

which is a blend of the 7.5% return on asset assumption and a 3.5% municipal bond yield assumption. The auditor is seeking requirements needed from the Actuary, and they have been in communication. However, the plan sponsor (LCMHA board) should make the final decision. It should be noted that the deadline for financial statements due to the Treasury has passed; however, there are no penalties for late filing. **MOTION BY S. CLITES** to approve the 6.7% discount rate. **SUPPORTED BY N. SMITH. MOTION CARRIED.**

2. Boilerplate language for the Governors FY17 budget. The House and Senate agreed to remove the 298 language. A committee (of approx.120) headed by Lt. Gov. Calley met yesterday. The next meeting is April 11. A PowerPoint document is included in board packets for review. More supporting documents are available; including the second white paper commissioned by the Board Association last year by TBD Solutions includes what other states do for funding behavioral health services and their experiences of privatization. Trish Cortes had the opportunity to talk to Chris Priest (Medicaid Director at the state) who didn't see any benefit of having a PIHP.
3. A lockdown of the Human Services Building on Tuesday, due to a gunman across the road at the laundromat ended well. Some challenges regarding communication will be addressed at the next Directors meeting for the Human Services Building. Sandy Keener talked to the police chief, sheriff, county administrator, and Curtis Parsons regarding the lack of communication.
4. Addiction Summit. This was a very successful day, with an over-capacity crowd. Siena Heights were kind enough to allow us to use their facility free of charge and made more lunches when we asked. The community response was very positive.
5. A block grant has been submitted to the state, and if we are awarded this grant, we will be able to provide additional services to those with mental health and substance use disorders lodged at the jail. We will be able to offer assessments through tele-medicine and increase groups in the jail.
6. We had two NARCAN trainings at CMH for provider staff and agency staff who were interested.
7. We had a meeting with ProMedica and law enforcement regarding a grant funded Engagement Center in Adrian for people actively using drugs or alcohol, to get them connected after hours to SUD treatment. As part of the grant we will be training more recovery coaches to meet with people to get them to the next step of treatment. We are also looking for a location to keep them out of the emergency room until effects are worn off. The intent is to have better communication and improved connection and compliance with treatment.
8. One of our psychiatrists has advised that they will be decreasing their time by one day in May, and then going to one day of tele-psychiatry. We are therefore looking for coverage for one day, which will probably be tele-psychiatry. Dr. Yaroch at ProMedica will also be going in this direction in the future.
9. We continue to be challenged to find hospital beds for children. A group at the state is trying to address this issue. We recently had a child staying in the ER for 2/3 days waiting for a bed. Another challenge recently was with women's specialty services

for SUD. A young pregnant mother, or mother of young children experiencing SUD crisis has to have access to services – we were unable to get her connected to immediate treatment, even though this is a priority population.

REPORT FROM BOARD CHAIR

1. Bills noted that the Spring Conference is May 10th & 11th. If anyone is interested in participating, please let Karen know as soon as possible.
2. Jackson suggested postponing committee appointments until after the new Chairperson has taken office.

REPORT FROM REGIONAL BOARD

There was no Regional Board Meeting in March.

BOARD MEMBER COMMENTS

1. Adams asked about the prevention grant and whether Community Action Agency was able to meet outcomes this quarter. Keener reported that it looks as though they may miss one of their outcomes, in which case there may be a pay back.
2. Adams reported that he was very impressed with the Addiction Summit; the level of the speakers etc. the audience remained engaged at all times.
3. E-Race Stigma 5K is on May 22nd – we are looking for volunteers.

ADJOURNMENT

Meeting adjourned at 4:05pm.

Robert Wilson

Date