

LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes
August 25, 2016

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

CALL TO ORDER

Chairperson Clites called the meeting to order at 3:00pm.

PREVIOUS MINUTES

MOTION BY R. TILLOTSON to approve the previous minutes as presented dated July 28, 2016. **SUPPORTED BY D. BILLS. MOTION CARRIED.**

PUBLIC COMMENT

No public comment.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS

No special presentations in August.

COMMITTEE REPORTS

A. Standing Committees

1. Consumer Action Committee

There is no-one to report. Minutes from the meeting are included for review.

2. **Performance Improvement**

There was no Performance Improvement Committee meeting in August.

3. **Facilities Committee**

Deb Bills reported on the meeting which was held on August 3rd. Discussion on the Russell Road bathroom remodel was tabled until more cost information is available.

College Avenue maintenance required is significant, the committee is reluctant to pour any more money into the home. **MOTION BY D. BILLS** to accept the prioritized list of home repairs; table discussion on the Russell Road bathroom remodel; and move forward with writing specifications within 30 days for leasing a building. **SUPPORTED BY D. YEARSIN. MOTION CARRIED.**

4. **Personnel Committee**

Personnel Committee met on August 9th. Mr. Lapham reported that he would like more discussion on the Performance Results Pay Plan. Mr. Tillotson also has concerns about the motion on the table and explained budget constraints faced by the County, and would like more discussion. A special board meeting was recommended for further discussion regarding the recommendation, which is estimated to cost \$231,789, and \$32,706 for fringes, for approx. 67 employees. Any unspent Medicaid dollars will be sent back to the region. It should also be noted that the board does not contribute to employees HSA accounts. Sandy Keener noted that the pay scale was revised last year, to reflect a regional average. However, many long time employees are on the final step of the pay scale. Jackson noted that when employees retire, earnings are based on previous five years' salary which would impact an underfunded pension fund. **MOTION BY M. JACKSON** to table the performance pay plan issue and schedule a special board meeting on Monday 29th August at 4:00pm to resolve the performance pay plan motion. **SUPPORTED BY J. LAPHAM. MOTION CARRIED.** M. Jackson would like to know what would it cost to contribute \$1,000 to everyone's HSA? Management will provide more information related to the HSA issue at the special board meeting.

The Executive Director contract with goals and achievements was reviewed, as well as the succession plan, as she will be retiring in 1 – 2 years. **MOTION BY J. LAPHAM** to approve a 5% increase in Executive Director's salary for the upcoming FY2017 year, with no changes to the tax deferred account. **SUPPORTED BY D. YEARSIN. MOTION CARRIED.**

The current staffing level of 4 RNs and 2 supports staff in the medication clinic has not been maintained for some time due to a difficulty in recruiting and maintaining staff. Sandy Keener would like to restructure the clinic by transferring non-nursing tasks to existing support staff; hire a Medical Assistant to perform vital signs, AIMS and review current medications etc., and promote one experienced RN to Team Leader for the Medication Clinic. These actions will not impact the budget line. **MOTION BY J. LAPHAM** to approve the restructuring of the Medication Clinic as detailed. **SUPPORTED BY M. JACKSON. MOTION CARRIED.**

5. Operations and Budget

Clites reported on Operations & Budget Committee which met on July 20th. The CMHPSM Operating Agreement is revised. The draft agreement shows changes in red, which mainly reflect name changes, language clarifications around shared governance. Each partner should approve the changes prior to submission to the regional board in September.

MOTION BY D. YEARSIN to approve the draft revised Operating Agreement. **SUPPORTED BY D. BILLS. MOTION CARRIED.**

MDHHS/CMHSP Management Mental Health Supports & Services Contract FY2017. Keener explained the Executive Summary of changes in this contract for General Fund dollars from the state. Included are changes to Recipient Rights Training Standards, and effective October all CMHs are required to do a level of care utilization assessment for the MI population, called LOCUS. **MOTION BY D. BILLS** to approve the MDHHS/CMHSP MMHSS Contract, **SUPPORTED BY J. ACKLEY. MOTION CARRIED.**

Policy C-402 Psychotropic Medication Orders and Consents has been revised to include instances whereby an unaccompanied minor could require consent from a parent or guardian. **MOTION BY D. BILLS** to approve revised policy C-402 Psychotropic Medication Orders and Consents. **SUPPORTED BY J. ACKLEY. MOTION CARRIED.**

Service Inquiry – there were 111 inquires in July. The majority had Medicaid or Healthy Michigan. Currently 4890 Lenawee residents have Healthy Michigan benefit. 60 assessments were completed, 50 were eligible for services, 7 were found ineligible. 3 declined services. There were 48 inquiries for Substance use disorder services, which is more than double the number from when we started providing SUD service. 47 were authorized for service.

State Institution – three people were in the hospital, with one transferred from the Forensic Center. One has an active discharge plan.

Inpatient Hospitalizations – 32 admissions in July. 66% Medicaid, 34% HM. 56% co-occurring, 69% unknown.

Finance Reports – Deb Strayer reported on the first report since the revised spending plan was approved last month. Expenditure – 100% audit has taken place. Recruitment at 55% - however, this number will come up next month. SUD Engagement Center only at 6%. Overall 75% spent at 83% of the fiscal year. Clinical Services – Autism contracts got going in April, we expect numbers to come up for the final two months. SUD provider line – we have requested an increase from the region. COFR Agreements were under-estimated. Overall contract detail shows at 83% at 83% of the year.

Revenue - MI child program ended. Earned interest and dividends line showing 130% due to a very conservative estimate. We should be able to add approximately \$50,000 into fund balance following covering a GF shortfall.

Cash Balance – Medicaid cost settlement was paid, reducing cash balance from previous month. Small change in market value on investments, overall investments increased in market value for July.

MOTION BY M. JACKSON to approve Finance Reports and additional vouchers totaling \$1,180,564.11. **SUPPORTED BY J. LAPHAM. MOTION CARRIED.**

6. Recipient Rights Advisory Committee

There was no Recipient Rights Advisory Committee meeting in August.

7. Retirement Committee

There was no Retirement Committee meeting in August.

A. By-Laws

There was no By-Laws Committee meeting in August.

B. Ad-Hoc Committees

Mark Jackson reported on the Ad-Hoc Committee which met on August 9th. **MOTION BY JACKSON** to unbundle the services to be bid out in an RFP, to prioritize by property and casualty first, followed by money management; health insurance and disability; and pension plans. **SUPPORTED BY J. LAPHAM MOTION CARRIED.**

The next meeting is on September 7th to work on property and casualty RFP.

EXECUTIVE DIRECTOR'S REPORT

1. Update on Boilerplate 298. Crain's Report rift brings Calley to the table, and Behavioral Health Section 298 Workgroup Final Report, handouts were provided. This is legislative intent. Pilots in different areas are proposed. The intent is to give the money to the health plans in the future. Sandy Keener explained our concerns as we move forward, to ensure that none of our population falls through the gaps.
2. The Super-waiver was submitted to Medicaid in July. In October there will be a period of public comment. Currently 3 month extensions are being provided for each of the waivers. The plan is to have waiver take effect with full implementation in compliance with the Home and Community Based rules in March 2019.
3. No news on licensing of CLS settings lawsuit.
4. 18 sites selected for CCBHC clinics. No payment structure provided yet. We didn't have enough GF to apply.
5. Expected NGRI changes not included in current contract. Looking for additional resources for community placements to incentivize getting people out of hospitals. There will be problems with licensing, as few locked facilities are available.
6. Local CMH staff are participating on care conference calls with the region for complex care needs. We have been invited to present our health integration model at a statewide meeting in September. We are seeing excellent outcomes. We have begun working with community partners for safety net for those do not meet our criteria.

7. Follow up on SIS assessment cost increase and concern about scheduling. The region is looking at it and training additional staff. A survey of participants and families showed that there is much dissatisfaction; they are working to reduce the cost.
8. Board Association dues increase has been approved by the membership, no more news on cost distribution yet.
9. Greg Adams will be presenting at the Fall Conference on Tuesday morning October 25th.

REPORT FROM BOARD CHAIR

Clites asked board members if they plan to attend the Fall Conference on October 24th & 25th. Please let Karen know as soon as possible if you are able to attend.

REPORT FROM REGIONAL BOARD

There was no meeting in August.

BOARD MEMBER COMMENTS

No board member comments.

ADJOURNMENT

Meeting adjourned.

Robert Wilson

Date