LENAWEE COMMUNITY MENTAL HEALTH AUTHORITY BOARD MEETING

Minutes
November 30, 2017

Present: G. Adams; D. Bills; S. Clites; M. Jackson; J. Lapham; A. Palmer D. Reed; N. Smith; R. Tillotson; J. Van Doren; D. Yearsin
Absent: J. Ackley
Staff: Andrews; Carpenter; Demers; Rawlings; Strayer; Szewczuk
Guest: Mary O’Hare; Roger Myers
Public: None

CALL TO ORDER
Board Chair Clites called the meeting to order at 3:00pm.

PREVIOUS MINUTES

MOTION BY M. JACKSON to approve minutes dated October 26, 2017.
SUPPORTED BY J. LAPHAM. MOTION CARRIED.

PUBLIC COMMENT
No report.

SPECIAL PRESENTATIONS, REPORTS AND ACKNOWLEDGEMENTS
a. Jen Carpenter was presented with a 5 year award for service with LCMHA.
b. Mary O’Hare updated the board on the Strategic Plan which is in progress. The board development portion of the plan requires some
feedback from board members. A training needs survey was distributed to board members for completion.

**COMMITTEE REPORTS**

**A. Standing Committees**

1. **Consumer Action Committee**
The Consumer Action Committee did not meet in November. The consumer Christmas party is scheduled for December 5th at the LISD Tech Center, noon – 1:30pm. Everyone is welcome to attend.

2. **Performance Improvement**
Deidre Reed reported on the meeting which was held on November 6th. There is a lot of good work happening within the organization regarding measurement of performance and quality. There is no action required at this time; however, the Annual Performance Improvement Plan will be presented to the board in January.

3. **Facilities Committee**
There was no Facilities Committee in November.

4. **Operations and Budget**
Adams reported on Operations & Budget Committee which met on November 15th.
   - **Policies**
     o Revised CMH Clinical Policies were presented for approval. Procedures were updated to reflect current practice: C-422 Injection Clinic; C-402 Psychotropic Medication Orders & Consents; C-413 Telephone/Verbal Medication Orders; C-414 Payment for Prescriptions; C-428 Pain Assessment; C-434 Nutritional Screening; C-436 Abnormal Lab Notification. MOTION BY D. BILLS to approve above clinical policies. SUPPORTED BY M. JACKSON. MOTION CARRIED.
   - **Contracts**
     o Amendment #1 to MDHHS/CMHSP Managed Mental Health Supports & Services Contract FY2018. Kathryn Szewczuk reviewed the changes which included some movement of definitions, Recipient rights training for RR advisors and requirements for CMH and provider staff; there was other clean up and technical change. MOTION BY N. SMITH to approve Contract Amendment #1 to the FY18 Contract above. SUPPORTED BY D. REED. MOTION CARRIED.
     o Fy2018 CMHPSM Prevention Contract. We have been doing the work contained in this contract. The amount of funding
this year was reduced from the previous year. **MOTION BY M. JACKSON** to approve the FY18 Prevention Contract. **SUPPORTED BY N. SMITH. MOTION CARRIED.**

- **Health Insurance Information**

  We were notified that in January health insurance premiums would increase by approx. 18%. Rick Gurdjian’s office presented a couple of options for us that would lessen the impact to employees and the employer. Changes include increasing the deductible and a tiered system for prescriptions on the Simply Blue Plan, with a change in maximum limit for the Community Blue Plan. There was a recommendation from both Operations & Budget Committee and Personnel Committee to adopt the two modified plans as presented, bringing the increase down to approximately 3% a saving in the FY18 Spending Plan of $40,000. **MOTION BY J. VAN DOREN** to approve the two modified plan options. **SUPPORTED BY M. JACKSON. MOTION CARRIED.**

**Data Report:**

**Service Inquiry** - In October there were 138 mental health inquiries, 43 of those were children. 38 were referred out, 93 intakes were scheduled. 82 assessments were completed, 15 were found ineligible, 65 are receiving services. 2 refused service. 77% of the intakes were Medicaid, 22% Healthy Michigan, 2% GF. There were 45 inquiries for substance abuse treatment, 2 of those were children (ages 15 and 16), last month the child was 13. 40 were authorized for service. 15 Medicaid, 16 Healthy Michigan, 9 block grant. Recently the numbers have been slightly down from last year. Jackson queried whether we were getting regular updates on suicides in the county? If so, are we noticing any trends? Kathryn reported that we get annual reports from the medical examiner, but she will check to see if we can get these more frequently.

**State Institution** - We still have four people at Kalamazoo, one was only there for a portion of the month.

**Inpatient Hospitalizations** - 34 were admitted to hospitals in October. 2 of those were re-admittances. 16 were Medicaid, 15 Healthy Michigan, 1 GF. 53% had co-occurring mental health and substance use disorders. 66% were previously unknown to us. 6 identified the Family Medical Center as their primary care provider, 5 did not have a PCP, 23 reported having their own primary care doctor. 11 were petitioned in, 5 were able to be diverted.

**Finance Reports** - Deb Strayer reported that October 31st is the first month of the new fiscal year using the FY18 Spending Plan approved
by the board. Expenditure - printing and publishing line is over budget due to a recent publication of the newsletter. This will come back into line during the year. Community inpatient was high in October at 11%. We were not able to increase this line in the spending plan. Overall expenditure is at 8% at 8% of the way through the year. Clinical service detail - we expect these costs to be at budget as we were not able to increase. Respite is still running over, but it is a highly needed service. Revenue - earned revenue other, we have $40,000 built in to share an integrated health care manager with the Family Medical Center; however, we have not been able to recruit anyone for this position yet. We were able to cover a $14,000 GF shortfall and still not have to take anything from the fund balance. Cash Balance - there was a negative change in market value on the investments, however, earned interest overall shows a gain in market value of $5,700 for the month of October.

It should be noted that last year we turned Medicaid dollars back to the region. The PIHP looks at the previous year’s spending when allocating funding for the following year, which is why our allocation was cut this year. We continue to look at alternatives for inpatient for some consumers.

**MOTION BY M. JACKSON** to approve Finance Reports and additional vouchers totaling $524,027.01. **SUPPORTED BY D. BILLS. MOTION CARRIED.**

5. Personnel Committee
   - Health insurance update. Information was provided to the committee, and there was a recommendation to accept both modified plans resulting in an approximate 3% increase, rather than the anticipated 18%.
   - Executive Director Contract. There was a motion to recommend a 3 year contract with continuation of the current deferred compensation package ($7500 annual with a further $2,500 to be awarded at the discretion of the board based on performance). With a 2.75% increase per year. **MOTION BY M. JACKSON** to approve. **SUPPORTED BY G. ADAMS.** J. Van Doren updated the board on the comments made in committee and history since Kathryn Szewczuk was appointed Interim Director. There was discussion regarding the survey provided to the committee of other CMH Executive Director salaries, and how Lenawee compares. Kathryn has shown great leadership and met all terms in the current contract. It was also explained that although it is a three year contract, there is an evaluation annually when changes can be made. A roll call vote resulted in: Three “no” votes (Tillotson; Lapham & Van Doren), and eight (8)
“yes” votes (Bills, Adams, Palmer, Reed, Jackson, Smith, Yearsin and Clites). **MOTION CARRIED.**

6. **Recipient Rights Advisory Committee**
   There was no Recipient Rights Advisory Committee meeting in November.

7. **Retirement Committee**
   Nate Smith reported on the Retirement Committee meeting held on November 14\textsuperscript{th}. This was a very good meeting, with the Actuary (Kevin Osinski) providing a detailed actuarial valuation. We had a good year in terms of performance. The plan is 87% funded at a discount rate of 7\% - the Actuary reported that the plan is in good condition. There was conversation about the unfunded liability portion and whether we wanted to lock in the unfunded liability over 10 years and set up new 5 year recognition. We asked them to model a lower discount rate to see what it would look like. Currently our allocation of assets is 65\% bonds/35\% stocks. Our outside fiduciary “Investnet” reviews stock performance quarterly and makes decisions about funds. Both DC and DB plans were reviewed as well as the FICA plan. **MOTION BY M. JACKSON** to accept the Plan Reviews and the 2017 Actuarial Report and place on file. **SUPPORTED BY D. YEARSIN. MOTION CARRIED.**

A. **By-Laws**
   There was no By-Laws Committee in October.

B. **Ad-Hoc Committees**
   **RFP Ad Hoc Committee**
   Mark Jackson reported on the history of the formation of this committee, what has been achieved so far and intent as we move forward. The cash management of LCMHA has never been put out to bid before. Previously it was handled by the county administrator, and then the portfolio was turned over to United Bank & Trust (now Old National) because they offered the services we needed. We have not been seeing any detail on our investments; however, we are provided monthly statements. This committee was re-convened to decide on a course of action. John Lapham had an outside third party asset management company evaluate the current portfolio of investments, and their report was satisfactory – we have a sound strategy with “A” rated investments. We have only recently had an investment policy and this may need to be revised. The responsibility of the board is to be good stewards of tax payer’s money, due diligence would therefore be to move forward in putting out a Request for Proposal on the Cash Management portion. Rick Gurdjian has volunteered to
assist us in putting together an RFP. He is not an interested bidder. **MOTION BY M. JACKSON** to proceed with issuing a Request for Proposal on the Cash Management accounts. **SUPPORTED BY A. PALMER. MOTION CARRIED.**

**EXECUTIVE DIRECTOR’S REPORT**

1. Kathryn thanked the board for her new contract. It is good to know she has their confidence and support, having a three year contract sends the right message to staff that we are working together for the long haul.

2. **298 Update.** The state issued a white paper this week. There are some challenges with the state being able to move forward giving all the money to the health plans. Kent County will be one of the model sites where physical and behavioral health will be fully integrated, with existing funding stream. They are looking at three counties to do a pilot program where all the money would be given to the health plans in the area. CMHs are asking to volunteer. An RFI should be issued in December, CMHs and interested health plans will apply. A program facilitator has been identified and secured, the Michigan Public Health Institute will be the facilitator and the Institute for Healthcare Policy and Innovation at the University of Michigan will do the evaluation. Several legal changes (Amending Social Welfare Act, the Mental Health Code and the 1115 Waiver) will need to happen. The timeline has been extended. Pilots are expected to be operational by July.

3. CMS has proposed a provider enrollment fitness policy for those who provide direct services to vulnerable adults and children - they cannot have a felony in the last 10 years - this would affect our peers and recovery coach positions. We have submitted information to the board association. CMH and the state have sent letters to CMS identifying how this will impact services in Michigan. We hope to know something more next month.

4. **In April Healthy Michigan enrollees will be moved to the market place.** Letters are going out this month and next to let participants know who is moving. Anyone who has a service through the PIHP in the last six months will be considered medically fragile and can stay with Healthy Michigan. We will be continue to monitor this closely as a partner with MI Bridges.

5. **Washtenaw recently passed a millage for mental health services ($14m) $5m will go to the CMH and the rest to the jail and services in the community which are law enforcement related.**

6. Kathryn recently met with Bronna Kahle to discuss inpatient issues. Bronna had heard that it was not financially viable. She will investigate where we are with getting a contract with Ohio. The GF issue was also discussed; Bronna was surprised to see how little GF Lenawee received compared to the rest of the state. She had
thought they were waiting until 2019 as it was a budget issue. Greg and Kathryn also recently met with MIPAD committee members, including Tom Renwick. We learned that we have a 24 bed deficit in our region, not including Herrick closing, which would increase that deficit to 34. State committee members offered to meet with ProMedica with us. Kathryn has reached out to Dr. Yarouch and Kevin Webb (Toledo) to see if they are willing to meet.

7. We were asked to do a presentation at a state leadership meeting this week. This was a meeting of all CMH and DHHS directors. Lenawee and Maine presented about Parenting Through change Reunification – working with children in foster care. The state was impressed with the work we have achieved in Lenawee.

8. Pathways Engagement Center has been open for five weekends now. Since our ribbon cutting there has only been one weekend we didn’t see anyone at Pathways. One person has returned several times.

9. We have received Goodwill’s local match check this week.

10. We have received several “thank you” letters for our donation towards Share the Warmth; ProMedica and the HOPE Center.

11. Following the Making Strides for Suicide Awareness walk, contact has been made with a parent doing a lot of work with schools in Tecumseh. She has connected with Kay Ross. April and Kay will be working towards getting a community group to work on Suicide Prevention, and developing a community plan. April will report on progress in a couple of months.

12. Kathryn purchased four trees for the Comstock River Walk – there is a lighting ceremony tomorrow at 7:30pm with a parade and Riverwalk at 6:pm. We have one remembrance tree to honor those we have lost in the last year, and several staff we lost previously. Pathways and the Drop in Center have trees, as well as an LCMHA staff member.

**REPORT FROM BOARD CHAIR**

The list of committee assignments is included in the board packet.

**REPORT FROM REGIONAL BOARD**

Nothing to report – things are going more smoothly.

**BOARD MEMBER COMMENTS**

Ralph Tillotson noted that there was good discussion today; it is good to have a consensus so that movement can be made.

**ADJOURNMENT**

Meeting adjourned at 4:50pm.