



Washtenaw County Board of Health

Minutes

February 23, 2024, 9:00 AM – 11:00 AM
Washtenaw County Health Department
555 Towner St, Ypsilanti, MI 48198
Room 2102B

Present: Guadalupe Cervantes, Gina Dahlem, Chris Frank, Joan Kellenberg, Carla Pretto, Katie Scott, Dan Yordanich
Absent: Shadin Atiyeh, Justin Hodge, Sade Richardson, Elisabeth Vanderpool
Staff: Jimena Loveluck, Charlyn VanDeventer, Dayna Brimley, Susan Ringler-Cerniglia, Kim Collom, Russell O'Brien
Guests: Charles Peterson, Norm Hess

1. Call to Order

Gina Dahlem called the meeting to order at 9:07 AM.

2. Public Comment

None.

3. Board Member Response to Public Comment

None.

4. Approval of Agenda (Action)

*Motion by C. Pretto, seconded by D. Yordanich, to approve the agenda.
Motion approved unanimously.*

5. Approval of January 26, 2024 Meeting Minutes (Action)

*Motion by G. Cervantes, seconded by C. Pretto, to approve the minutes of the January 26, 2024 meeting.
Motion approved unanimously.*

6. Draft Executive Committee Minutes from January 18, 2024

Board members received the Draft Executive Committee minutes.

Gina Dahlem said they discussed Covid19, mid-year budget adjustments, how Washtenaw County Health Department (WCHD) will partner with the Sheriff's Office for the Community Violence Intervention Grant, opioid settlement funding, and the Pollution Prevention Program. These minutes are a draft and will be approved at the next Executive Committee meeting.

7. Community Voices Report

Charles Peterson gave an update from the last Community Voices (CV) meeting. He gave them an update from Board of Health (BOH) meetings including the Community Violence Intervention Grant and opioid settlement funding. The group continues to talk about plans for 2024 and ways that members can support each other. One example is an effort that Jennifer Green is working on to form a walking group in the south side of Ypsilanti. CV discussed a request from Dea Lancaster, WCHD Outreach Coordinator, asking for input on health department services most needed in areas CV represents. Members had questions about how WCHD services are promoted and insurance requirements. Dea will be going to the Community Voices meeting in March to hear ideas that will help shape outreach for the Health Department's (HD) mobile RV this summer.



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8. Community Health Assessment Presentation – Dayna Brimley, Community Health Analyst

Dayna Brimley presented on the Community Health Assessment (CHA). She talked about the status of current CHA activities, prioritization results, and next steps. The data collection portion of the work is complete and has been analyzed resulting in the completion of prioritization. The final top 3 priorities are access to healthy food, health care access & navigation, and mental health. Next steps include creating Community Health Improvement Plan (CHIP) workgroups and begin developing the CHIP. The goal of the workgroups will be to draft a set of goals and action plan around each topic area. The Board of Health (BOH) can support this work by participating in an advisory group and share ideas about organizations or community members that would be a good fit for the workgroups.

Katie Scott asked what was done to engage the western parts of the county. Dayna said work was done to invite partners to the State of Our Health Event, but the smaller working groups were not done in the western parts of the county. Katie suggested talking to commissioners Beeman and Maciejewski about how to expand the priorities to include the western parts of the county. Lupe Cervantes asked about plans for engaging the workgroups. Dayna said they are in the early stages, but they have a couple key partners in mind and are working with community engagement staff.

Dayna mentioned Unified Needs Assessment and Implementation Plan Team Engagement (UNITE) which is made up of Chelsea Hospital, Michigan Medicine, and Trinity Ann Arbor. They meet on a regular basis and with the HD to discuss plans. They have their own parallel process and have different guidelines that they must follow. Hopefully the hospital systems will be part of the workgroups and there can be coordination on some goals. Jimena Loveluck said it is important to make sure that people are aware that this information exists and that it is being used.

9. Washtenaw Health Project's Evolution and Partnership with Washtenaw County Health Department – Jeremy Lapedis, Executive Director

Jeremy Lapedis presented on the Washtenaw Health Project's (WHP) evolution and partnership with WCHD. He discussed WHP services/impact, county need/alignment with WCHD, finances, and vision moving forward. Washtenaw Health Plan is now Washtenaw Health Project, and the name change recognizes the evolution from just being a health plan to being a health plan that also does a lot to promote healthcare access.

Jeremy shared a client backstory to highlight the services that WHP offers and the impact staff have on clients. Washtenaw County is the only county in Michigan with near-universal access to care. This is done through 3 coordinated programs: Health Insurance Enrollment, Washtenaw Health Plan, and Health Insurance Assistance Program. Jeremy discussed statistics for WHP including residents that received in-depth services, demographics, and types of medical care received. They estimate that WHP's insurance enrollment brings \$10.5 million to healthcare providers in Washtenaw County.

There are substantial unmet healthcare access needs in Washtenaw County. WHP helps immigrants and other marginalized populations address barriers to access healthcare. Washtenaw Health Project's Health Insurance Assistance Program covers 100% of Marketplace health insurance premiums for those who cannot afford to pay them and would otherwise remain uninsured. This program is not offered elsewhere. WHP has a close relationship with MDHHS—who administers the Medicaid program. They receive referrals from and provide consultations to many care managers.



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This is the first year that Jeremy has been with WHP that they have a positive budget. Funding sources include grants/other income, WC indigent care, health system contributions, temporary COVID related funding, and Medicaid match funding. Per an agreement with the health systems, WHP is spending down their fund reserve before they request additional funding. Chris Frank said he thinks Michigan Medicine is closed to taking new primary care patients and that could be an argument for them to increase their commitment.

With additional resources, WHP hopes to serve 9,000 residents per year. That includes 3,000 Washtenaw Health Plan members, 5,700 navigation/support/outreach clients, and Community Health Workers (CHW) focused on 300 Ypsilanti residents. Jeremy said there is both a dollars need and need for capacity from providers. Dan Yordanich asked if WHP has considered enrollment open houses. Jeremy said yes, but there's a staffing capacity issue. The most recent Open Enrollment was discussed and Jeremy said WHP enrolled more people in Marketplace than ever before.

10. Michigan Association of Local Public Health – Norm Hess, Executive Director

Norm Hess, Executive Director of Michigan Association of Local Public Health (MALPH), discussed his time working at a local public health department. He has been with MALPH for 3 years and gave a brief history of the association. Norm said MALPH is in a good place right now and has participation from all 45 local health departments in Michigan. There has been a large turnover in health officers since the beginning of the pandemic so there are a lot of people learning right now. MALPH provides emotional support, connections with other health officers, and training in leadership skills and communication.

Board members received a handout with MALPH's legislative priorities. They are pleased that essential local health services funding that was increased last year will continue at the increased amount. Prior to last year, state funding had stayed the same since 1992. Norm acknowledged Jimena Loveluck as the president of MALPH in 2023 and she continues on the executive leadership council as the past president. He thanked WCHD and said she was very effective in her leadership. Jimena thanked Norm and said she is excited for what is to come with MALPH.

11. BOC Liaison Report

Katie Scott shared that the Board of Commissioners (BOC) had a meeting this week and they approved the Plan of Organization for the HD. They also approved a resolution authorizing the signature of the County Administrator on the contract for the Michigan Marijuana Operation and Oversight project from the HD and a resolution establishing and appointing members to an Opioid Settlement Steering Committee. There was a presentation on space planning countywide and Katie said the BOC is in preliminary stages of thinking what is going to happen with it.

12. Old Business

- **Opioid Settlement Funding**

Jimena Loveluck shared a copy of the resolution the BOC recently approved including the appointees. They will continue to work with Amy Dolinky, from Michigan Association of Counties, as the HD works through phases of planning. The HD will also be working with Michigan State University around the needs assessment phase of planning. Recommendations will be developed that will go to the BOC with priorities identified. Funds will be coming to the county for 18 years so recommendations will be developed for what kind of mechanism can be put in place for ongoing monitoring and oversight. Carla said it's important to have people with lived experience for planning for the future. Jimena said the funding is going directly to the county and it is divided out over 18 years to about \$800,000 per year. Dan Yordanich asked where interest earned on the money will go and suggested it go back into the opioid funds.



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13. Adjournment

Motion by K. Scott, seconded by C. Pretto, to adjourn the meeting.

Motion approved unanimously.

Meeting adjourned at 10:50 AM.

Minutes taken by Russell O'Brien