Mission: To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated services to eligible individuals.

WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH)
QUALITY-FINANCE COMMITTEE MEETING
AGENDA
***In-Person at the Learning Resource Center-Michigan Room
4135 Washtenaw Ave, Ann Arbor
OR
You may attend virtually at https://zoom.us/j/95983442519
April 11, 2022
2:00-3:30 pm

I. Roll Call (5 minutes)

II. Introductions (5 minutes)

III. Audience Participation (see guidelines below) (5 minutes)

IV. Budget-Finance Committee Meeting Minutes (5 minutes) **ACTION**
- Quality-Finance Committee Meeting Minutes and Actions from 2/14/22 (Attachment #1)

V. Financial Status Report (10 minutes)
- Financial Status Report (Attachment #2) **N. Phelps ACTION**

VI. Contracts and Leases (5 minutes)
- Contracts and Leases (Attachment #3) **M. Taylor ACTION**

VII. Executive Director Authorizations (5 minutes)
- Executive Director Authorizations (Attachment #4) **M. Taylor ACTION**

VIII. Regional Finance Update (10 minutes)

IX. Old Business
- None

X. New Business (35 minutes)
- Program Education Presentation on Crisis Negotiation Team (CNT) (Attachment #5) **K. Hoener**
- CARES Report (Attachment #6) **M. Tasker/L. Higle**
- Chicago Lab Update **L. Gentz/T. Cortes**

XI. Items for Future Discussions (5 minutes)
- Accounts Receivable
- Cost Per Case Comparisons
- Looking at call data and how it affects CARES Team
- Access Department comparison presentation from pre-CCBHC and with CCBHC
- CCBHC Performance Measures
- Single point of entry for Substance Abuse Disorder

Audience Participation Guidelines:
- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary

Mission: To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated services to eligible individuals.

XII. Adjournment of Public Meeting

*****Quality-Finance Committee members are encouraged to participate in person to count towards a quorum unless other arrangements have been made in advance.**

All others are encouraged to attend virtually.

Virtual meeting information:

Join from a PC, Mac, iPad, iPhone or Android device:
Please click this URL to join. https://zoom.us/j/95983442519

Or One tap mobile:
+13126266799, 95983442519# US (Chicago)
+16465189805, 95983442519# US (New York)

Or join by phone:
Dial(for higher quality, dial a number based on your current location):
US: +1 312 626 6799 or +1 646 518 9805 or +1 929 205 6099 or +1 267 831 0333

Webinar ID: 959 8344 2519

International numbers available: https://zoom.us/u/abJIrJsrs

Audience Participation Guidelines:

- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary

WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)

WCCMH QUALITY-FINANCE COMMITTEE MEETING MINUTES

DRAFT

February 14, 2022

Learning Resource Center-Michigan and Huron Rooms (in person)

https://zoom.us/j/94513867007 (virtual)

2:00 pm

ROLL CALL: S. Antonow attending remotely
A. Dusbiber attending remotely
N. Graebner-Sundling attending in-person
B. Higman attending in person
D. Strong attending remotely-cannot count towards quorum
B. King attending remotely-cannot count towards quorum
M. Udow-Phillips attending in person
K. Walker attending in person

MEMBERS ABSENT: R. Jefferson, K. Scott

STAFF PRESENT: T. Cortes, M. Harding, N. Phelps, L. Higle, S. Ray, H. Linky, k. Diebboll, A. Igoe, B. Hagaman, T. Florence, C. O'Brien, K. Snay, S. Amos O'Neal, M. Taylor, R. Dornbos

OTHERS PRESENT: L. Lutomski, J. Martin, G. Nelson, K. Homan, T. Gavalier, M. Creekmore

N. Graebner-Sundling called the meeting to order at 2:05 pm.

I. Introductions
- None

II. Audience Participation
- None

III. Committee Response to Audience Participation
- None

A. Dusbiber joined the meeting virtually at 2:07pm

IV. Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions from 12/13/21.
- The Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions from 12/13/21 were reviewed. (Attachment #1)

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY B. HIGMAN TO APPROVE THE MINUTES AND ACTIONS FROM THE DECEMBER 13, 2021 BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED COMMITTEE MEETING.

ROLL CALL VOTE:

ANTONOW	**Y**	**DUSBIBER**	**Y**
GRAEBNER-SUNDLING	**Y**	**HIGMAN**	**Y**

JEFFERSON	**N/A**	**KING**	**N/A**
SCOTT	**N/A**	**STRONG**	**N/A**
UDOW-PHILLIPS	**Y**	**WALKER**	**Y**

MOTION CARRIED

I. Financial Status Report
- N. Phelps presented the Financial Status Report for the period ending December 31, 2021 (Attachment #2).

MOTION BY A. DUSBIBER SUPPORTED BY M. UDOW-PHILLIPS TO APPROVE THE FINANCIAL STATUS REPORT ENDING DECEMBER 31, 2021 AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	**Y**	**DUSBIBER**	**Y**
GRAEBNER-SUNDLING	**Y**	**HIGMAN**	**Y**
JEFFERSON	**N/A**	**KING**	**N/A**
SCOTT	**N/A**	**STRONG**	**N/A**
UDOW-PHILLIPS	**Y**	**WALKER**	**Y**

MOTION CARRIED

II. Regional Finance Update
- N. Phelps presented the Regional Finance Update to the committee.
- The Regional budget amendment was not passed due to no quorum at the meeting.

III. Old Business
- CCBHC Update
  - M. Harding presented an update on the CCBHC.
  - Process is moving forward.

M. Udow Phillips joined the meeting at 2:16pm.

- General Fund Spending Update
  - T. Cortes and N. Phelps presented an update on the General Fund Spending to date.
  - Continuing to work with County Administration and Human Resources along with other external resources.

- One Pager on Workforce Crisis (Attachment #3)
  - T. Cortes provided an update on the Workforce Crisis.
  - K. Walker, M. Udow-Phillips and T. Cortes met with GCSI to look at other options.
  - Suggestion to update the document to reflect the Governor's budget.
  - This will come to the WCCMH Millage Advisory Committee and the Board meeting for final approval.

IV. New Business
- FY 2022 Budget Amendment (Attachment #4)
  - N. Phelps presented the FY 2022 Budget Amendment to the committee.

DRAFT

- This budget amendment will be brought to the Washtenaw County Board of Commissioners meeting on March 2, 2022 for approval.

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY A. DUSBIBER TO APPROVE THE FY 2022 BUDGET AMENDMENT AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	**Y**	**DUSBIBER**	**Y**
GRAEBNER-SUNDLING	**Y**	**HIGMAN**	**Y**
JEFFERSON	**N/A**	**KING**	**N/A**
SCOTT	**N/A**	**STRONG**	**N/A**
UDOW-PHILLIPS	**Y**	**WALKER**	**Y**

MOTION CARRIED

- Program Education Presentation-CMH Nursing Program
  - B. Hagaman, C. O'Brien and A. Igoe presented the CMH Nursing Program presentation to the committee (Attachment #5).

- Program Dashboard FY21 Quarter 4
  - T. Florence and L. Higle presented the Program Dashboard FY21 Quarter 4 (Attachment #6) to the committee.
  - There were no sentinel events for this period.

MOTION BY M. UDOW-PHILLIPS SUPPORTED BY K. WALKER TO ACCEPT THE FY 2021 4TH QUARTER PROGRAM DASHBOARD AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	**Y**	**DUSBIBER**	**Y**
GRAEBNER-SUNDLING	**Y**	**HIGMAN**	**Y**
JEFFERSON	**N/A**	**KING**	**N/A**
SCOTT	**N/A**	**STRONG**	**N/A**
UDOW-PHILLIPS	**Y**	**WALKER**	**Y**

MOTION CARRIED

- Annual Recipient Rights Report
  - S. Thompson presented the Annual Recipient Rights Report (Attachment # 7) to the committee.
  - The tri-annual assessment was completed virtually over a period of a month and WCCMH Recipient Rights Department received a full compliance rating.
  - Request to see further information and benchmark data on providers recipient right's complaints/substantiations.

MOTION BY K. WALKER SUPPORTED BY M. UDOW-PHILLIPS TO ACCEPT THE FY 2021 ANNUAL RECIPIENT RIGHTS REPORT.

DRAFT

ROLL CALL VOTE:

ANTONOW	**Y**	**DUSBIBER**	**Y**
GRAEBNER-SUNDLING	**Y**	**HIGMAN**	**Y**
JEFFERSON	**N/A**	**KING**	**N/A**
SCOTT	**N/A**	**STRONG**	**N/A**
UDOW-PHILLIPS	**Y**	**WALKER**	**Y**

MOTION CARRIED

V. Items for Future Discussions
- Accounts Receivable
- Cost Per Case Comparisons
- Looking at call data and how it affects CARES Team
- Access Department comparison presentation from pre-CCBHC and with CCBHC
- CCBHC Performance Measures

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY K. WALKER TO ADJOURN THE WCCMH BUDGET-FINANCE MEETING.

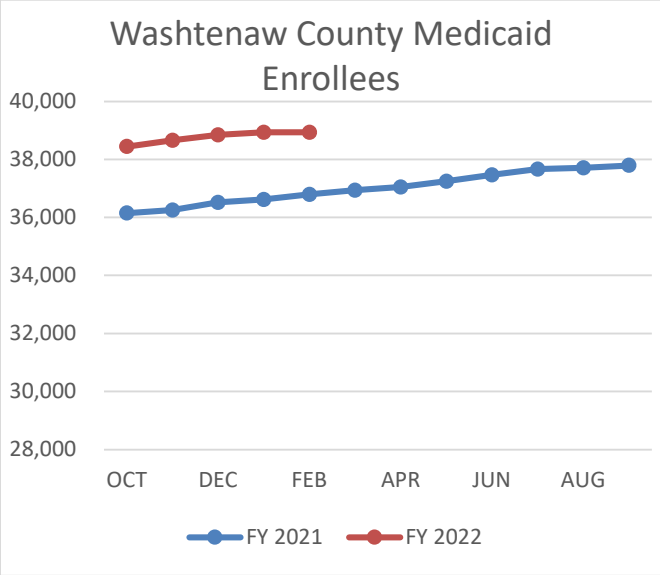
VI. Meeting adjourned at 3:28 pm.

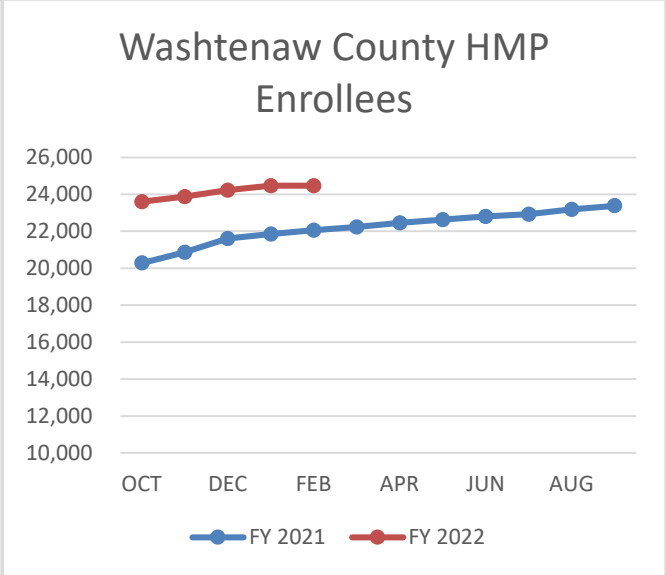
DRAFT

WASHTENAW COUNTY COMMUNITY MENTAL HEALTH
YEAR-TO-DATE FINANCIAL STATUS
FISCAL YEAR 2022: For the period ending February 28, 2022
Prepared: April 5, 2022

1. Washtenaw County Enrollees

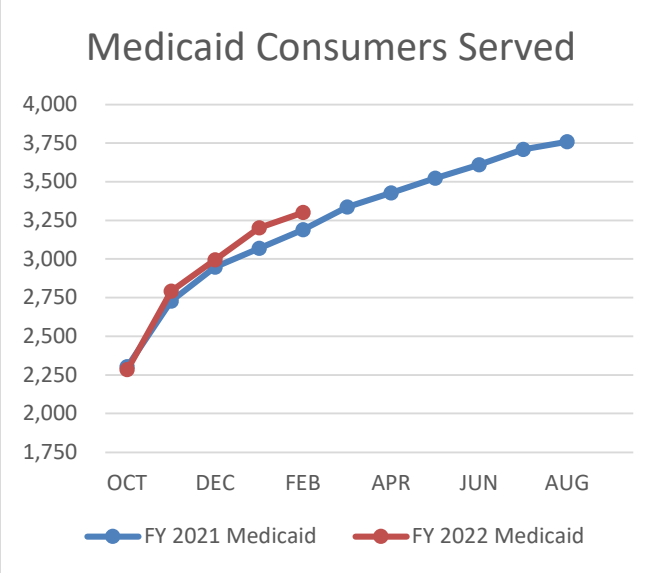
A summary of FY 2022 Washtenaw County Medicaid and Healthy Michigan Enrollees is shown below:

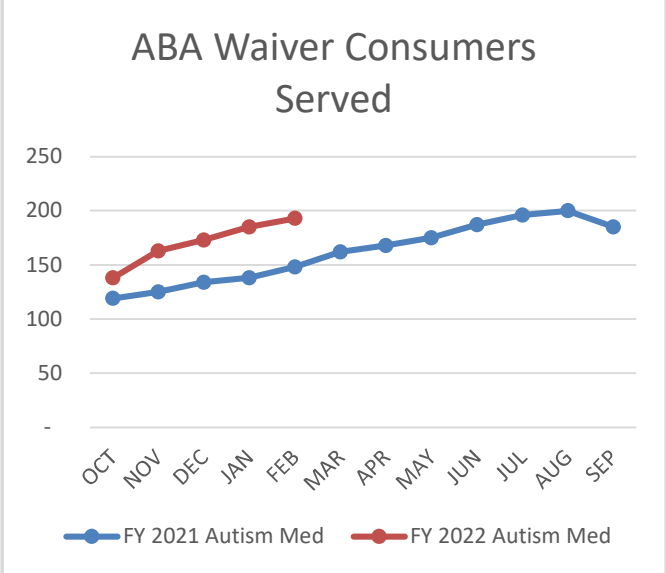




Washtenaw County Medicaid Enrollees were 38,932 in February 2022. This is a 5.81% increase from the same time last year (2,137 more enrollees than in February 2021). Healthy Michigan enrollment in February 2022 was 24,466. This is a 10.95% increase from the same time last year (2,415 more enrollees than in February 2021).

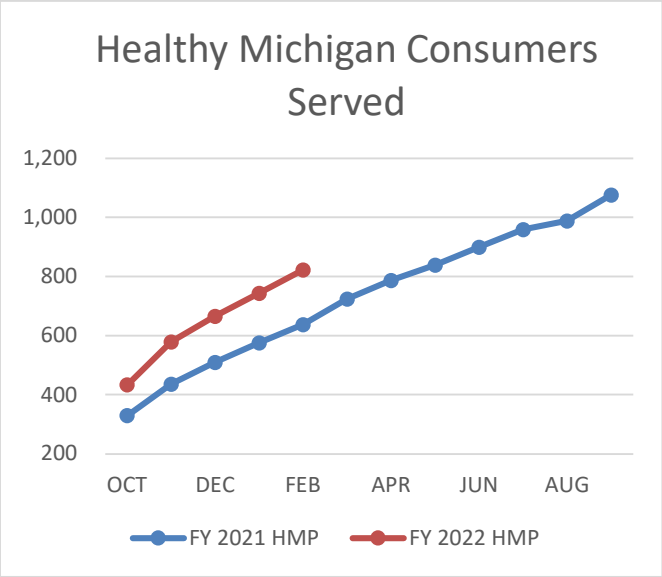
2. WCCMH Consumers Served to Date





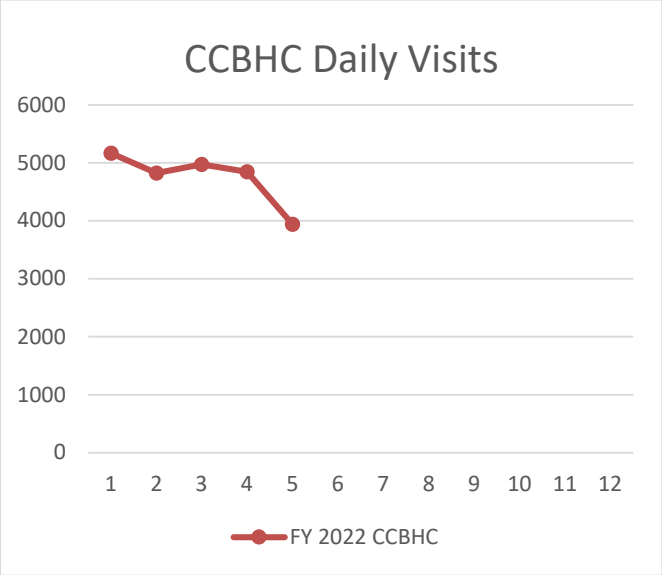
Medicaid consumers served through February 2022 are 3,302. This is 112 more consumers than the prior year (3,190 consumers were served through February 2021).

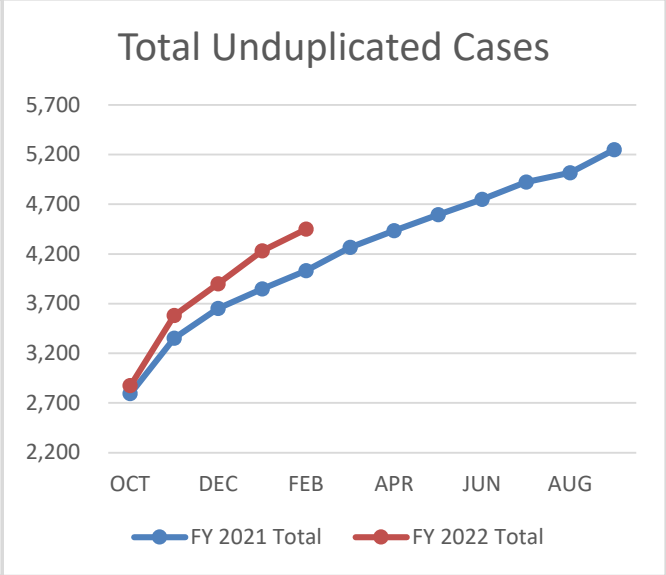
ABA Waiver consumers served through February 2022 are 193. This is 45 more consumers than prior year (148 consumers were served through February 2021).



Healthy Michigan consumers served through February 2022 were 823. This is 185 more consumers than the same period last year.

General Fund consumers served is not available this month due to reporting errors.





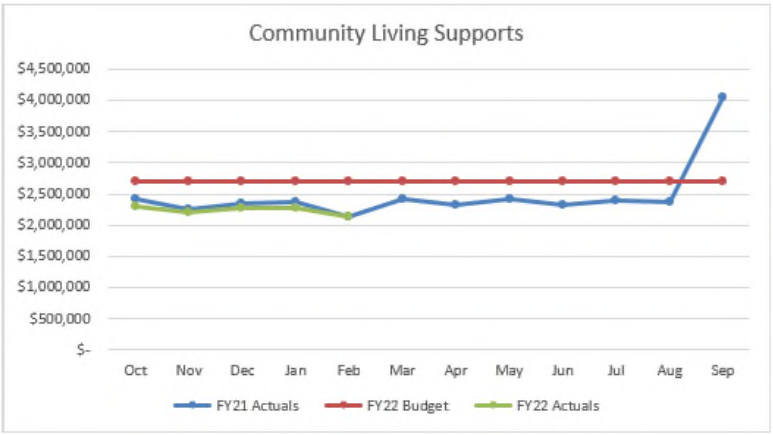
The CCBHC daily visit count for February 2022 were 3,939.

The total unduplicated consumers served through February 2022 were 4,451. This is 421 more consumers than served last year.

3. Financial Statement Highlights

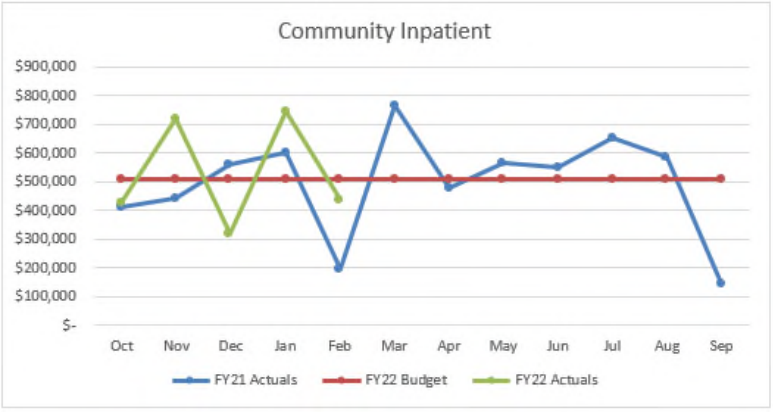
a. CLS service costs to date are estimated to be $11.3 Million and $2.4 Million under budget. The costs year to date are 2.5% less than this time last year. At the end of FY21 there were additional provider stability payments made to CLS providers and are reflected in the graph below. The temporary direct care worker pass-through funds for FY22 have been incorporated in the FY22 Budget and FY22 Actuals.

	FY21 Actuals	FY22 Budget	FY22 Actuals	YTD % Change
Oct	$ 2,425,825	2,711,968	$ 2,307,044	-4.90%
Nov	2,264,769	2,711,968	2,217,838	-3.53%
Dec	2,346,049	2,711,968	2,284,691	-3.23%
Jan	2,365,368	2,711,968	2,286,246	-3.26%
Feb	2,135,096	2,711,968	2,147,479	-2.55%
Mar	2,408,780	2,711,968		
Apr	2,328,718	2,711,968		
May	2,410,288	2,711,968		
Jun	2,316,806	2,711,968		
Jul	2,393,966	2,711,968		
Aug	2,377,568	2,711,968		
Sep	4,042,059	2,711,968		



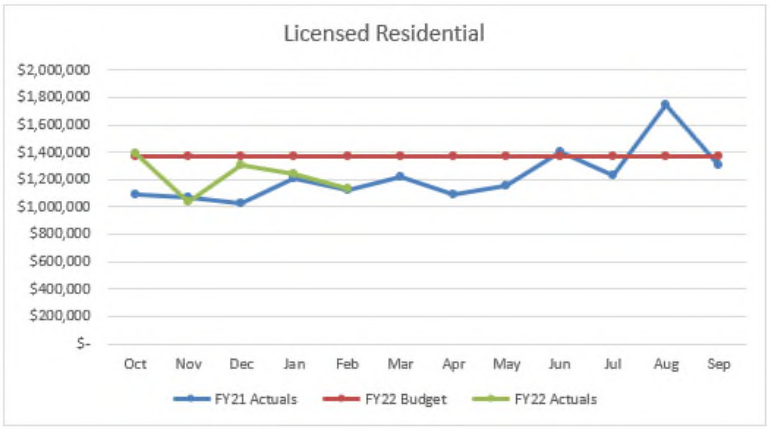
b. Community Inpatient costs to date are $2.6 Million. The costs year to date are 19.81% more than this time last year and $110,000 over budget.

	FY21 Actuals	FY22 Budget	FY22 Actuals	YTD % Change
Oct	$ 411,150	$ 508,333	$ 428,747	4.28%
Nov	444,907	508,333	719,608	34.14%
Dec	560,543	508,333	318,967	3.58%
Jan	601,931	508,333	745,851	9.64%
Feb	194,823	508,333	438,634	19.81%
Mar	767,313	508,333		
Apr	480,817	508,333		
May	567,208	508,333		
Jun	548,208	508,333		
Jul	653,771	508,333		
Aug	584,676	508,333		
Sep	146,525	508,333		



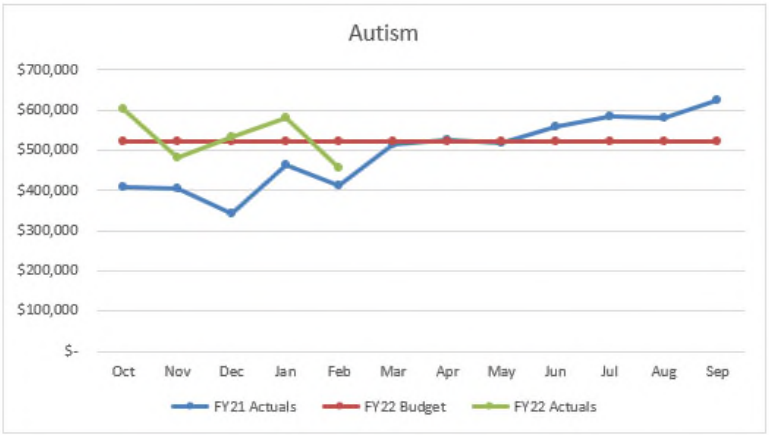
c. Licensed Residential costs to date are $6.1 Million and $774,000 under budget. The costs year to date are 10.45% more than this time last year. At the end of FY21 there were additional provider stability payments made to CLS providers and are reflected in the graph below. The temporary direct care worker pass-through funds for FY22 have been incorporated in the FY22 Budget and FY22 Actuals.

	FY21 Actuals	FY22 Budget	FY22 Actuals	YTD % Change
Oct	$ 1,093,095	$ 1,375,450	$ 1,386,550	26.85%
Nov	1,073,263	1,375,450	1,038,733	11.95%
Dec	1,028,927	1,375,450	1,304,777	16.74%
Jan	1,211,062	1,375,450	1,238,132	12.75%
Feb	1,118,469	1,375,450	1,134,181	10.45%
Mar	1,225,127	1,375,450		
Apr	1,093,521	1,375,450		
May	1,159,115	1,375,450		
Jun	1,399,305	1,375,450		
Jul	1,228,220	1,375,450		
Aug	1,742,223	1,375,450		
Sep	1,304,444	1,375,450		



d. Applied Behavior Analysis/Autism service costs to date are $2.6 Million. The costs year to date are 30.49% more than this time last year and $46,000 over budget. The temporary direct care worker pass-through funds for FY22 have been incorporated in the FY22 Budget and FY22 Actuals.

	FY21 Actuals	FY22 Budget	FY22 Actuals	YTD % Change
Oct	$ 408,109	$ 520,861	$ 602,553	47.64%
Nov	404,662	520,861	479,479	33.13%
Dec	342,956	520,861	534,172	39.84%
Jan	464,654	520,861	580,372	35.56%
Feb	410,998	520,861	453,979	30.48%
Mar	512,641	520,861		
Apr	525,526	520,861		
May	518,865	520,861		
Jun	558,191	520,861		
Jul	584,957	520,861		
Aug	578,244	520,861		
Sep	624,950	520,861		



e. Internal staffing expenses are trending under budget due to the difficulty recruiting for budgeted vacant positions.

4. PIHP Revenue Key Points

a. Medicaid and Healthy Michigan Plan revenues are collected from the PIHP.
b. By funding source, Medicaid is showing a surplus of $3.6 Million through February.
c. By funding source, HMP is showing a deficit of $258,000 through February.
d. Overall, the PIHP surplus is $5.0 Million through February.
e. At this time, funding related to temporary direct care worker wage increases will be cost settled separately and any unspent funds must be returned to the State and cannot be retained by the PIHP.

5. State General Fund Key Points

a. General Fund programs and funding redirected to other Risk-Based programs is showing a surplus of $954,000.

6. Local Key Points

a. The majority of Local Funding comes from Washtenaw County.

b. Local Funds are showing a deficit of $141,000 through February.

c. Uses of Local Funding include:

   i. The 10% GF Match of non-residential services
   ii. Local contribution – required by MDHHS
   iii. Local share for State Facilities
   iv. Shelter expenses and other Local needs

7. Fund Balance

WCCMH currently has no fund balance available for fiscal year 2022.

Washtenaw County Community Mental Health
FINANCIAL PERFORMANCE BY FUND SOURCE
FEBRUARY 2022 FYTD

		Total
Medicaid **		
Revenue		
B & B3	$	18,570,497
HSW		10,914,109
DCW		3,341,805
Child Waiver/SED Waiver		737,900
Autism		2,452,801
Prior Year Adjustments		-
Care for Caid		27,694
Total Medicaid Revenue	$	36,044,805
Total Medicaid Expense	$	32,437,216
Medicaid Surplus/(Deficit)	$	3,607,590
CCBHC **		
Revenue	$	1,709,083
Expense		-
CCBHC Surplus/(Deficit)	$	1,709,083
Healthy Michigan **		
Revenue	$	2,618,701
Expense		2,876,740
Healthy MI Surplus/(Deficit)	$	(258,039)
General Fund		
Revenue		
CMH Operations	$	1,764,601
CMH Operations Contra		-
GF Carryforward		-
Categorical		-
Redirect To Injectable Meds.		-
Funding Fr. Other Local Sources		5,745
Total General Fund Revenue	$	1,770,346
Total General Fund Expense	$	815,895
General Fund Surplus/(Deficit)	$	954,451
Injectable Meds		
Revenue	$	45,599
Expense		40,406

Washtenaw County Community Mental Health
FINANCIAL PERFORMANCE BY FUND SOURCE
FEBRUARY 2022 FYTD

		Total
Inj. Meds. Surplus/(Deficit)	$	5,193
Grants And Contracts		
Revenue	$	602,782
Expense		602,782
Grants & Cont. Surplus/(Deficit)	$	-
CMHSP To CMHSP		
Revenue	$	219,584
Redirect to GF		(5,745)
Expense		213,840
CMHSP to CMHSP Surplus/(Deficit)	$	-
Local		
Revenue	$	643,040
Expense		784,958
Local Surplus/(Deficit)	$	(141,918)
Private Grant & All NOR		
Revenue	$	70,251
Expense		70,251
Priv. Grant & NOR Surplus/(Deficit)	$	-
Grand Total		
Revenue	$	43,818,877
Expense		37,942,518
Grand Total Surplus/(Deficit)	$	5,876,360

** Denotes PIHP Medicaid Subcontracting Agreement Funds

PIHP Medicaid Surplus/(Deficit)	$	5,063,826
WCCMH Surplus/(Deficit)		812,534
	$	5,876,360

Washtenaw County Community Mental Health
Budget to Actuals
For Five Months Ending February 28, 2022

	Current Fiscal Year				
	FY 2022 Amended Budget	FY 2022 Amended Budget YTD	FY 2022 YTD Actuals	YTD Actuals Over/(Under) YTD Budget	% O(U)
Operating Revenue					
PIHP Revenue					
Medicaid Capitation:					
Medicaid (b) & 1115i	$ 46,276,405	$ 19,281,835	$ 18,570,497	$ (711,338)	-3.69%
HSW	27,372,824	11,405,343	10,914,109	(491,234)	-4.31%
Children & SED Waivers	1,044,210	435,088	737,900	302,813	69.60%
Healthy Michigan Capitation	6,284,880	2,618,700	2,618,701	1	0.00%
Autism Capitation	5,886,723	2,452,801	2,452,801	(0)	0.00%
Direct Care Worker Pass-Through	8,421,349	3,508,895	3,341,805	(167,090)	-4.76%
CCBHC Supplementary	4,059,000	1,691,250	1,709,083	17,833	1.05%
TOTAL PIHP Revenue	$ 99,345,391	$ 41,393,913	$ 40,344,896	$ (1,049,017)	-2.53%
MDHHS Revenue					
State General Funds	$ 4,235,050	$ 1,764,604	$ 1,764,601	$ (3)	0.00%
Grants & Earned Contracts	1,790,168	745,903	628,858	(117,045)	-15.69%
All Other Revenue					
County Appropriation	$ 1,751,761	$ 729,900	$ 313,636	$ (416,264)	-57.03%
Project Revenue	847,984	353,327	303,343	(49,984)	-14.15%
All Other	1,917,652	799,022	932,209	133,187	16.67%
TOTAL Operating Revenue	**$ 109,888,006**	**$ 45,786,669**	**$ 44,287,543**	**$ (1,499,126)**	-3.27%
Operating Expenses					
Administrative Expenses					
General Administration	$ 6,598,359	$ 2,749,316	$ 2,417,474	$ (331,842)	-12.07%
Program Administration	3,355,568	1,398,153	1,280,592	(117,561)	-8.41%
Residential Services					
Community Living Supports	$ 32,543,612	$ 13,559,838	$ 11,335,492	$ (2,224,346)	-16.40%
Licensed Residential	16,505,397	6,877,249	6,102,371	(774,878)	-11.27%
Outpatient Services					
Autism Services	$ 6,250,336	$ 2,604,307	$ 2,650,555	$ 46,248	1.78%
Case Management	5,000,662	2,083,609	1,703,376	(380,233)	-18.25%
Supports Coordination	2,948,825	1,228,677	863,197	(365,480)	-29.75%
Skill Building	4,688,790	1,953,663	1,332,933	(620,730)	-31.77%
Supported Employment	1,538,321	640,967	607,831	(33,136)	-5.17%
Psychiatry	3,307,258	1,378,024	1,271,673	(106,351)	-7.72%
Nursing Services	2,397,642	999,018	880,644	(118,374)	-11.85%
Therapy Services	2,194,098	914,208	739,438	(174,770)	-19.12%
All Other	9,327,130	3,886,304	3,250,899	(635,405)	-16.35%
CCBHC Services	4,059,000	1,691,250	-	(1,691,250)	-100.00%
Other Expenses					
Community Inpatient	$ 6,100,000	$ 2,541,667	$ 2,651,808	$ 110,141	4.33%
Local Matches & Shelter	1,282,838	534,516	699,787	165,271	30.92%
Grants & Earned Contracts	1,790,168	745,903	623,113	(122,790)	-16.46%
TOTAL Operating Expenses	**$ 109,888,006**	**$ 45,786,669**	**$ 38,411,183**	**$ (7,375,486)**	-16.11%
Revenue Over/(Under) Expenses	-	-	5,876,360	5,876,360	

Washtenaw County Community Mental Health
Budget to Actuals
For Five Months Ending February 28, 2022

	Prior Year Comparison			
	FY 2022 YTD Actuals	FY 2021 Prior YTD Actuals	YTD Actuals Over/(Under) Prior YTD Actuals	% O(U)
Operating Revenue				
PIHP Revenue				
Medicaid Capitation:				
Medicaid (b) & 1115i	$ 18,570,497	$ 17,768,854	$ 801,643	4.51%
HSW	10,914,109	10,801,489	112,620	1.04%
Children & SED Waivers	737,900	398,585	339,315	85.13%
Healthy Michigan Capitation	2,618,701	2,405,741	212,960	8.85%
Autism Capitation	2,452,801	1,996,658	456,143	22.85%
Direct Care Worker Pass-Through	3,341,805	1,782,296	1,559,509	0.00%
CCBHC Supplementary	1,709,083	-	1,709,083	0.00%
TOTAL PIHP Revenue	$ 40,344,896	$ 35,153,623	$ 5,191,273	14.77%
MDHHS Revenue				
State General Funds	$ 1,764,601	$ 1,789,001	$ (24,400)	-1.36%
Grants & Earned Contracts	628,858	535,153	93,705	17.51%
All Other Revenue				
County Appropriation	$ 313,636	$ 372,540	$ (58,904)	-15.81%
Project Revenue	303,343	278,941	24,402	8.75%
All Other	932,209	792,080	140,129	17.69%
TOTAL Operating Revenue	**$ 44,287,543**	**$ 38,921,338**	**$ 5,366,205**	13.79%
Operating Expenses				
Administrative Expenses				
General Administration	$ 2,417,474	$ 2,048,036	$ 369,438	18.04%
Program Administration	1,280,592	1,133,948	146,644	12.93%
Residential Services				
Community Living Supports	$ 11,335,492	$ 11,809,643	$ (474,151)	-4.01%
Licensed Residential	6,102,371	5,524,817	577,554	10.45%
Outpatient Services				
Autism Services	$ 2,650,555	$ 2,031,262	$ 619,293	30.49%
Case Management	1,703,376	1,705,598	(2,222)	-0.13%
Supports Coordination	863,197	896,368	(33,171)	-3.70%
Skill Building	1,332,933	935,869	397,064	42.43%
Supported Employment	607,831	577,212	30,619	5.30%
Psychiatry	1,271,673	1,065,162	206,511	19.39%
Nursing Services	880,644	789,739	90,905	11.51%
Therapy Services	739,438	688,253	51,185	7.44%
All Other	3,250,899	2,753,215	497,684	18.08%
CCBHC Services	-	-	-	0.00%
Other Expenses				
Community Inpatient	$ 2,651,808	$ 2,213,354	$ 438,454	19.81%
Local Matches & Shelter	699,787	603,581	96,206	15.94%
Grants & Earned Contracts	623,113	535,153	87,960	16.44%
TOTAL Operating Expenses	**$ 38,411,183**	**$ 35,311,210**	**$ 3,099,973**	8.78%
Revenue Over/(Under) Expenses	5,876,360	3,610,128	2,266,232	

Washtenaw County Community Mental Health (WCCMH)
Summarized Month End Tracking

Prior Year FY 2021	**October**	**November**	**December**	**January**	**February**	**March**	**April**	**May**	**June**	**July**	**August**	**September**
Total Revenue	$ 7,755,401	$ 15,310,244	$ 23,580,591	$ 31,333,092	$ 38,921,338	$ 47,115,196	$ 56,134,326	$ 64,236,863	$ 72,980,573	$ 81,144,669	$ 90,818,496	$ 99,945,774
Total Expense	$ 6,390,300	$ 13,468,771	$ 20,308,564	$ 28,129,172	$ 35,311,210	$ 42,743,574	$ 50,665,179	$ 58,492,671	$ 66,459,411	$ 75,089,495	$ 84,875,262	$ 90,335,121
Surplus / (Deficit)	$ 1,365,101	$ 1,841,473	$ 3,272,027	$ 3,203,920	$ 3,610,128	$ 4,371,622	$ 5,469,147	$ 5,744,192	$ 6,521,162	$ 6,055,174	$ 5,943,234	$ 9,610,653 (a)

Current Year FY 2022	**October**	**November**	**December**	**January**	**February**	**March**	**April**	**May**	**June**	**July**	**August**	**September**
Total Revenue	$ 9,108,033	$ 17,714,521	$ 26,486,887	$ 35,542,274	$ 44,287,543							
Total Expense	$ 7,658,696	$ 14,955,417	$ 22,766,179	$ 30,490,909	$ 38,411,183							
Surplus / (Deficit)	$ 1,449,337	$ 2,759,104	$ 3,720,708	$ 5,051,365	$ 5,876,360	$ -	$ -	$ -	$ -	$ -	$ -	$ -

(a) Includes PIHP Medicaid Surplus of $4,639,734 which is returned to PIHP
Includes General Fund Surplus of $2,682,639 which is returned to MDHHS
Includes Local Funds Surplus of $2,288,280 (County $2,013,517 deficit elimination plan contribution & $274,763 local surplus) which offsets Fund Deficit

REQUEST: To approve recommendations to the board for the following contract(s) and lease(s):

BACKGROUND:

1. Vintage Specialized Services, LLC DBA Creekside Residential Services- West: will provide Licensed Residential Services.
2. Elite AFC: will provide Licensed Residential Services.
3. Rose Hill- will provide Licensed Residential Services.
4. Cliff Corp- group home lease.
5. Illuminate ABA, LLC- will provide Applied Behavior Analysis Services.
6. Ivyrehab Michigan, LLC- will provide Applied Behavior Analysis Services.
7. Maxim- will provide Private Duty Nursing Services.

Service Contracts

Contractor	Funding	Estimated Budget	Contract Term	Service Description
1. Vintage Specialized Services, LLC DBA Creekside Residential Services-West	Medicaid	Per Consumer Authorizations	March 1, 2022-September 30, 2022	Licensed Residential Services
2. Elite AFC	Medicaid	Per Consumer Authorizations	January 25, 2022-September 30, 2022	Licensed Residential Services
3. Rose Hill Center, Inc.	Medicaid	Per Consumer Authorizations	March 1, 2022-September 30, 2022	Licensed Residential Services
4. Cliff Corp	Medicaid	$9,000	January 1, 2022-March 31, 2022	Group Home Lease
5. Illuminate	Medicaid	Per Consumer Authorizations	April 15, 2022-September 30, 2022	Applied Behavior Analysis Services
6. Ivyrehab Michigan, LLC	Medicaid	Per Consumer Authorizations	April 1, 2022-September 30, 2022	Applied Behavior Analysis Services
7. Maxim	Medicaid	Per Consumer Authorizations	April 1, 2022-September 30, 2022	Private Duty Nursing Services

Executive Director Contract Authorizations
April 2022 Finance Committee Meeting

REQUEST: Recommend acceptance of the Executive Director's signature on contracts with a value of less that $25,000

Contractor	Amount	Term	Purpose	Approval Date
JCJ Contracting	$3,438	9/10/21-9/30/21	Driveway Repair	11/19/2021
Michigan Theatre	$2,320	2/16/2022	WCCMH Private Screening of "Summer of Soul"	
National Council for Mental Wellbeing	$12,850	1/18/22-9/30/22	Daily Living Activities-20 Training Module	
Athena Wilson	$5,000	1/1/22-9/30/22	Community Anti-Racism Education Trainings	
U.S. Transport Service	$5,000	4/1/22-4/15/22	Coordinate and Provide Supervised Transportation from Out-of-State Residential Facility	
Shanna Kattari	$5,000	6/1/22-9/30/22	Alphabet Soup & Treating Equality: inclusivity in Healthcare Trainings	

ATTACHMENT #5
APRIL 2022

WASHTENAW COUNTY CRISIS NEGOTIATION TEAM

Board Presentation April 2022

Mental health professionals joining SWAT's crisis negotiation team

Published: Oct. 23, 2019, 5:04 p.m.

History of Team

- Police incidents in 2018-2019 involving SWAT intervention for individuals with a severe mental illness
- Recognition by WCSO and WCCMH of benefit of having mental health professionals embedded in team
- Interviews happened in August 2019
- Participation in Trainings and Team began in October 2019

TEAM MAKEUP

- WCSO, AAPD, EMU and UofM PD : 14 Law Enforcement Officers
- WCCMH 5 staff:
  - 1 Adult MI Program Administrator: Katie Hoener
  - 1 Crisis Team Supervisor: Nicole Muraca
  - 1 Jail Services Supervisor: Sarah Stewart
  - 1 Adult MI Supervisor: Jessica Halliday
  - 1 Crisis Services Professional: Christine Holston

WCCMH ONBOARDING

- Michigan Hostage Negotiation Conference – October 2019
- FBI Negotiator School – December 2019
- Trainings with team 8 times per year (prior standard)
  - Equipment
  - VA Hospital
  - MSP Bomb Squad
  - Western Wayne
  - SWAT Scenario

WCCMH ROLES

- Gather Information on Subject
- Gather Information on affiliated individuals
- Assist in developing clinical picture
- Presentation of negotiation strategies bases on clinical evidence
- Interview friends/family/associates of subject
- Scene Management (as requested)
- Observation of officer wellness, and discussions with leadership

TYPES OF CALL OUTS (RESPONSES)

- Full Callout: Can originate from any law enforcement agency in Washtenaw County, and involves the deployment of both the Crisis Negotiation Team (CNT) as well as the Specialized Weapons and Tactics (SWAT) teams.
- Partial Callout: Can originate from any law enforcement agency in Washtenaw County and involves at least 3 members of the CNT law enforcement team, and at times the CMH staff as well. CMH are not initially deployed for high-risk warrants, though may be brought in at point deemed necessary, and as outlined in policy/procedure.

Type	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Full	1	1	1	2
Partial	0	1	0	6

FY 22 DATA

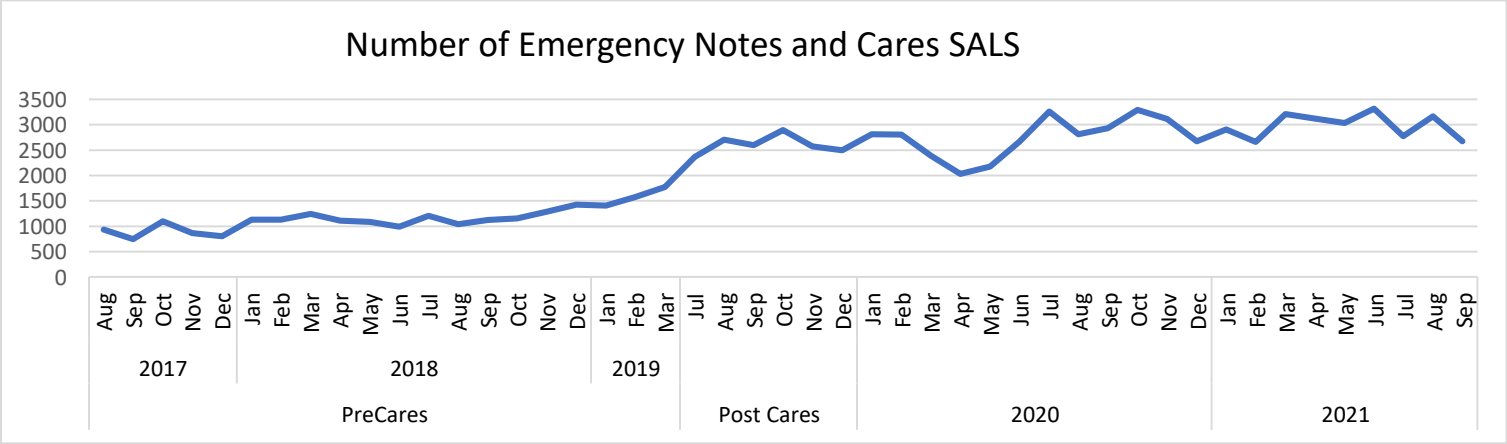
ATTACHMENT #6
APRIL 2022

Cares Services Impact in the Community

A review of datasets of individuals who are not known to CMH (Unknown) and those who are known to Cares helps to evaluate the impact of the millage funded / CCBHC Cares program. The Cares program was partially implemented in April 2019 and then fully implemented in July 2019. Data collection for a period of time prior to full Cares implementation (Aug 2017 – Mar 2019 – identified as "PreCares") and also Post Cares (July 2019 – Sept 2021) can assist with this evaluation.

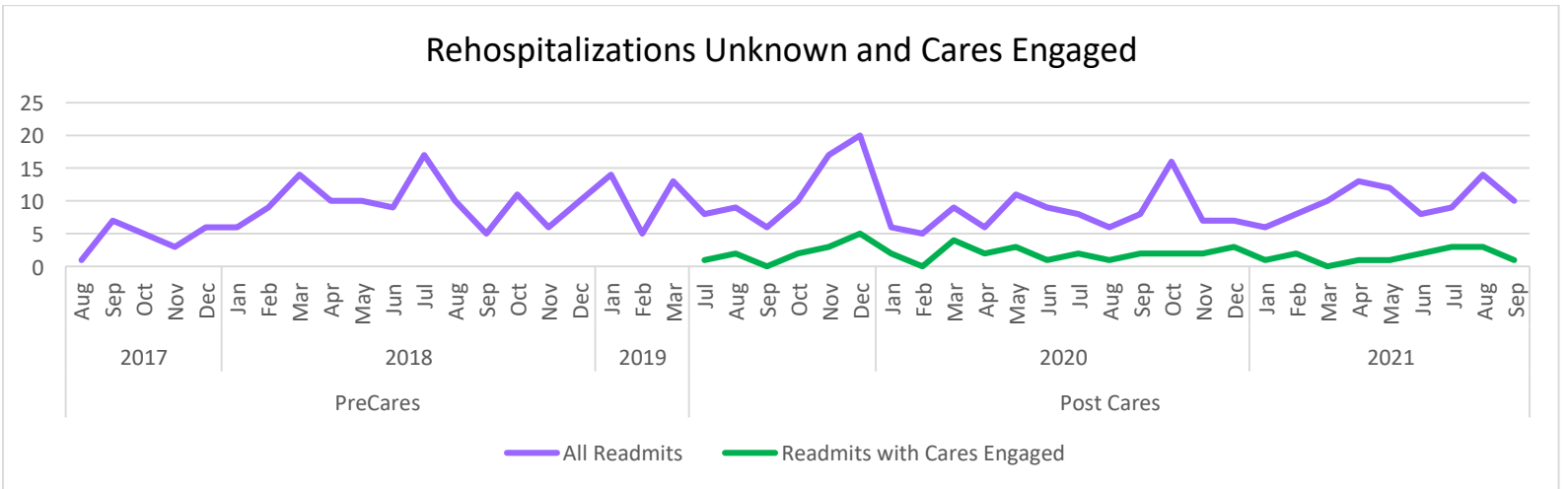
The Cares program was designed to deliver services to those who experience a psychiatric event but do not have insurance or are underfunded. This service could be in the form of crisis services (identified via the document Emergency Notes) and/or ongoing services via the Cares program (identified via the document Service Activity Logs (SALs)).

The graph below displays the number of documents the program impacted upon:



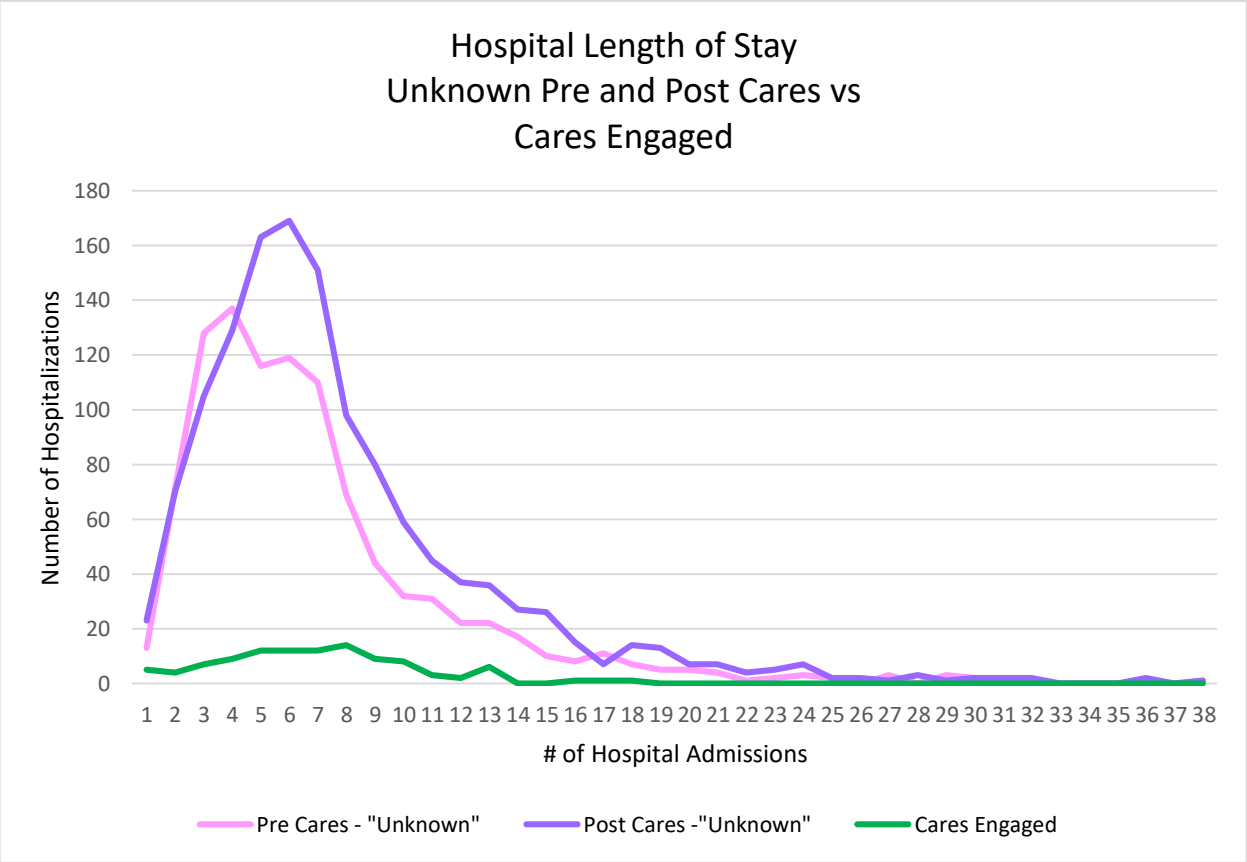
As predicted, the number of documents significantly increased reflecting a much higher number of services implemented via the Crisis Team and the Cares Program.

These services can impact the recidivism rate of individuals who have been psychiatrically hospitalized. We compared the rehospitalization frequency (defined as a psychiatric hospitalization occurring within one year of a previous psychiatric hospitalization) of individuals who are "Unknown" and compared their recidivism to individuals who are involved with Cares services (defined as three or more services via the Cares program).



The recidivism rate of those engaged with Cares service is much lower than those who are not engaged with Cares implying a significant impact on an individual's psychiatric symptoms.

Once an individual is psychiatrically hospitalized, their length of stay typically correlates with the severity of their illness and how quickly the hospital is able to help them stabilize and then discharge back to the community. Reviewing the length of stay of individuals "Unknown" vs those engaged with Cares services (as defined above) reveals the following:



The length of stay for the "Unknown" Post Cares mode is a larger number of days than the Pre Cares "Unknown" individuals. This may be a reflection of the impact of COVID – 19 shut down/ social distancing and other guidelines on an individual's psychiatric condition. However, it is very clear that individuals who are engaged with Cares, not only have fewer hospitalizations but also less significant of a curve for the length of stay.

We will continue to review Cares data on an ongoing basis.