



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) BOARD MEETING AGENDA

<https://zoom.us/j/95118579821>

August 20, 2021

9:30AM-11:30AM

- I. Roll Call (5 minutes)
- II. Audience Participation (see guidelines below) (5 minutes)
- III. Board Response to Audience Participation (5 minutes)
- IV. Consent Agenda (Attachment #1) (5 minutes) **ACTION**
 - A. WCCMH Board Meeting Minutes and Actions-7/16/21 (Attachment #1A)
 - B. WCCMH Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions-6/14/21 (Attachment #1B)
 - C. WCCMH Budget-Finance Committee Meeting Minutes and Actions-7/12/21 (Attachment #1C)
 - D. Program Education Presentation-PORT/PATH (Attachment #1D)
 - E. Program Committee Dashboard-FY2021, Qtr. 2 (Attachment #1E)
 - F. WCCMH Consumer Advisory Committee Meeting Minutes and Actions-6/9/21 (Attachment #1F)
 - G. WCCMH Consumer Advisory Committee Meeting Minutes and Actions-7/14/21 (Attachment #1G)
 - H. MILLAGE COMMITTEE:
 1. WCCMH Millage Advisory Committee Meeting Minutes and Actions-7/12/21 (Attachment #1H1)
 2. Millage Process, Investments and Progress Update (Attachment #1H2)
 3. CARES Dashboard (Attachment #1H3)
 4. Approved Millage funding proposals
 - a. WISD Funding Proposal totaling \$213,780.00 (Attachment #1H4a)
 - b. Youth Assessment Center Technical Assistance Funding Proposal totaling \$20,650.00 (Attachment #1H4b)
- V. Treasurer's Report **ACTION** (35 minutes)
 - Financial Status Report (Attachment #2) **N. Phelps ACTION**
 - Contracts and Leases (Attachment #3) **M. Taylor ACTION**
 - WCCMH FY2022 Budget (Attachment #4A) **N. Phelps ACTION**
 - WCCMH FY2022 Master Contracts List (Attachment #4B) **M. Taylor A**
 - WCCMH Millage Financial Status Report (Attachment #5) **N. Phelps ACTION**
- VI. Executive Director Report-**T. Cortes** (10 minutes)
- VII. Discussion Items (10 minutes)
 - Annual Conflict of Interest, Code of Ethics and Recipient Rights Training signatures
 - Strategic Planning Update (Attachment #6) **T. Cortes**
- VIII. CMHPSM Regional Update (5 minutes)
 - July 14, 2021 CMHPSM Meeting Minutes and Actions (Attachment #7)
 - August 11, 2021 CMHPSM Board Meeting Update
- IX. New Business (25 minutes)
 - CMHPSM Oversight Policy Board Appointment (Attachment #8) **N. Adelman ACTION**
 - Provider Presentation (Attachment #9) **H. Linky/S. Brown/L. Lutomski**
- X. Old Business (10 minutes)

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.

- CCBHC Update **T. Cortes/M. Harding**

- XI. Items for Future Discussions (5 minutes)
- Development of Reserve Capital
 - COVID-19 Related Priorities Discussion
 - Employee Engagement Survey
- XII. Adjournment of Public Meeting

Instructions to join from a PC, Mac, iPad, iPhone or Android device:
Please click this URL to join. <https://zoom.us/j/95118579821>

Or One tap mobile:
+19292056099, 95118579821# US (New York)
+12678310333, 95118579821# US (Philadelphia)

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

Webinar ID: 951 1857 9821

International numbers available: <https://zoom.us/u/adPgCdVum3>

Effective March 17, 2021 the Washtenaw County Board of Commissioners has approved the continuation of all public meetings to be held virtually until December 31, 2021, per resolution #21-050.

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 (WCCMH) BOARD

AUGUST 20, 2021

CONSENT AGENDA

- A. WCCMH Board Meeting Minutes and Actions-7/16/21
- B. WCCMH Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions-6/14/21
- C. WCCMH Budget-Finance Committee Meeting Minutes and Actions-7/12/21
- D. Program Education Presentation -PORT/PATH
- E. Program Committee Dashboard FY2021, Qtr. 2
- F. WCCMH Consumer Advisory Committee Meeting Minutes and Actions-6/9/21
- G. WCCMH Consumer Advisory Committee Meeting Minutes and Actions-7/14/21
- H. MILLAGE COMMITTEE:
 - 1. WCCMH Millage Advisory Committee Meeting Minutes and Actions-7/12/21
 - 2. Millage Process, Investments and Progress Update
 - 3. CARES Dashboard
 - 4. Approved Millage funding proposals
 - a. WISD Funding Proposal totaling \$213,780.00
 - b. Youth Assessment Center Technical Assistance Funding Proposal totaling \$20,650.00

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH BOARD MEETING MINUTES *DRAFT***

<https://zoom.us/j/96192807219>

**July 16, 2021
9:30am**

K. Walker called the meeting to order at 9:33 am.

ROLL CALL:

S. Antonow attending remotely from Ann Arbor, Washtenaw County, MI
N. Graebner attending remotely from Chelsea, Washtenaw County, MI
B. Higman attending remotely from Ann Arbor, Washtenaw County, MI
B. King attending remotely from Ann Arbor, Washtenaw County, MI
A. LaBarre attending remotely from Ann Arbor, Washtenaw County, MI
D. Strong attending remotely from Scio Township, Washtenaw County, MI
M. Udow-Phillips attending remotely from Superior Twp, Washtenaw County, MI
K. Walker attending remotely from Pittsfield Twp, Washtenaw County, MI

MEMBERS ABSENT: A. Dusbiber, R. Jefferson, C. Richardson, K. Scott

STAFF PRESENT: T. Cortes, M. Harding, R. Dornbos, N. Phelps, A. Amos O'Neal, S. Ray, B. Hagaman, H. Linky, M. Taylor, K. Hoener, S. Lefferts, T. Florence

OTHERS PRESENT: L. Lutomski, G. Nelson, J. Martin, J. Osborn, O. DeTroyer-Cooley

- I. Introductions
- None
- II. Audience Participation
- None
- III. Board response to audience participation
- None
- IV. Consent Agenda Actions (Attachment #1)
- WCCMH Board Meeting Minutes and Actions-6/18/21
 - WCCMH Board Strategic Plan Meeting Minutes and Actions-6/29/21
 - WCCMH Millage Advisory Committee Meeting Minutes and Actions-6/14/21
 - WCCMH FY20 Cost Per Case Presentation
 - WHP/WCCMH Proposal Presentation
 - WISD Mini-Grant Presentation

MOTION BY D. STRONG, SUPPORTED BY A. LABARRE TO ACCEPT AND APPROVE THE JUNE 18, 2021 WCCMH BOARD CONSENT AGENDA AS PRESENTED.

ROLL CALL VOTE:

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

MOTION CARRIED

Discussion to move financial action items from committees to a separate location on the agenda.

V. Treasurer's Report

- N. Phelps reviewed the Financial Status Report (Attachment #2) for the month ending May 31, 2021.

MOTION BY A. LABARRE , SUPPORTED BY B. HIGMAN TO ACCEPT THE WASHTENAW COUNTY COMMUNITY MENTAL HEALTH TREASURERS REPORT FOR THE PERIOD ENDING MAY 31, 2021.

ROLL CALL VOTE:

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

MOTION CARRIED

VI. Millage and CCBHC Financial Status Report

- N. Phelps presented the Millage and CCBHC Financial Status Report (Attachment #2A) to the Board for the period ending May 31, 2021.

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY S. ANTONOW TO ACCEPT THE WASHTENAW COUNTY COMMUNITY MENTAL HEALTH MILLAGE AND CCBHC FINANCIAL STATUS REPORT DATED APRIL 30, 2021.

ROLL CALL VOTE:

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

MOTION CARRIED

VII. WCCMH FY20 Compliance Examination

- N. Phelps presented the WCCMH FY2020 Compliance Examination (Attachment #3) to the Board.

MOTION BY A. LABARRE, SUPPORTED BY M. UDOW-PHILLIPS TO ACCEPT THE WASHTENAW COUNTY COMMUNITY MENTAL HEALTH FY2020 COMPLIANCE EXAMINATION.

ROLL CALL VOTE:

ANTONOW	Y	DUSBIBER	N/A
GRAEBNER	Y	HIGMAN	Y
JEFFERSON	N/A	KING	Y
LABARRE	Y	RICHARDSON	N/A
SCOTT	N/A	STRONG	Y

UDOW-PHILLIPS	Y	WALKER	Y
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MOTION CARRIED

VIII. Executive Director report

- T. Cortes presented the Executive Director report to the WCCMH Board.
- State Level Update
 - o The bill from Senator Shirkey was introduced recently. The Board Association will be more active in sending out action request in opposition to these bills.
 - o Workforce continues to be a main focus at the State and Director Hertel has named this as their #1 priority.
 - o There have been ongoing discussions regarding CCBHC. The implementation date is still expected to be October 1st.
- Local Update
 - o Internal vocational skill building program update and plans moving forward.

IX. Millage report

- T. Cortes presented the Millage Report (Attachment #4A) to the WCCMH Board.

X. CARES Program Update/Dashboard

- S. Ellis presented the CARES Program Update/Dashboard Report (Attachment #4B) to the WCCMH Board through June 2021.

XI. Discussion Items

- Annual Conflict of Interest and Code of Ethics Reminder
 - o K. Walker reminded the board to complete the Code of Ethics and Conflict of Interest documents that R. Dornbos emailed on 4/13/21.
- Strategic Planning Discussion (Attachment #5)
 - o M. Harding presented the Proposed Strategic Planning Timeline/Process document with the Board.
 - o Possible suggestions to include in the document:
 - Change to integrated behavioral health service
 - Environmental drivers: increase of demand related to COVID, increase in mental health needs for youth, staffing shortages, inconsistency of state support.
 - Access to care- importance of telemedicine and broadband issues in rural areas
 - Address gaps that are needed to be filled: such as positions, adequate staffing to meet client needs, staff retention.
 - Public Stakeholder Input/Outreach: Include Recipient Rights Advisory Council
 - o This will be a standing agenda item for the next couple of months.
 - o Expectation for this document to come back in the Fall with a draft of strategic proposals to the Board.

XII. CMHPSM Regional Update

- The CMHPSM minutes (Attachment #6) from June 9, 2021 were reviewed.
- T. Cortes provided an update from the July 14, 2021 Regional Board meeting.
- Financial outlook was very positive and encouraging.
- The PIHP added a new position for a Veteran Peer Support and an Opioid Health Home Coordinator.

XIII. New Business

- None

XIV. Old Business

- CCBHC Update
 - o M. Harding provided an update on the CCBHC.
 - o Ongoing meetings continue weekly at the State level.

- XV. Items for future discussion
- Development of Reserve Capital at the CMHSP level
 - COVID-19 Related Priorities Discussion
 - Employee Engagement Survey
 - Strategic plan-standing agenda item discussion

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY N. GRAEBNER TO ADJOURN THE WCCMH BOARD MEETING.

Meeting adjourned at 11:05 AM.

DRAFT

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED COMMITTEE MEETING
MINUTES DRAFT**

<https://zoom.us/j/99427595657>

June 14, 2021

1:00 pm

ROLL CALL: S. Antonow attending remotely from Ann Arbor, Washtenaw County, MI
A. Dusbiber attending remotely from Ann Arbor, Washtenaw County, MI
N. Graebner attending remotely from Chelsea, Washtenaw County, MI
B. Higman attending remotely from Ann Arbor, Washtenaw County, MI
R. Jefferson attending remotely from Ypsilanti Twp, Washtenaw County MI
B. King attending remotely from Ann Arbor, Washtenaw County, MI
D. Strong attending remotely from Scio Twp, Washtenaw County, MI
M Udow-Phillips attending remotely from Superior Twp, MI
K. Walker attending remotely from Pittsfield Twp, Washtenaw County, MI

MEMBERS ABSENT: K. Scott

STAFF PRESENT: T. Cortes, M. Harding, H. Linky, R. Dornbos, N. Phelps, L. Higle, L. Gentz,
M. Taylor. S. Amos O'Neal, T. Florence, S. Ray

OTHERS PRESENT: L. Lutomski, J. Martin, K. Belknap

S. Antonow called the meeting to order at 1:03 pm.

- I. Introductions
 - H. Linky introduced S. Brown from Renaissance Community Homes and L Lutomski from Synod Community Services who will be presenting later in the meeting.
- II. Audience Participation
 - None
- III. Board Response to Audience Participation
 - None
- IV. Budget- Committee Meeting Minutes and Actions from 5/10/21
 - The Budget-Finance Committee Meeting Minutes and Actions from 5/10/21 were reviewed. (Attachment #1A)

MOTION BY B. KING, SUPPORTED BY M. UDOW-PHILLIPS TO APPROVE THE MINUTES AND ACTIONS FROM THE MAY 10, 2021 BUDGET-FINANCE COMMITTEE MEETING.

ROLL CALL VOTE:

ANTONOW	NOT ON BUDGET-FINANCE COMMITTEE	DUSBIBER	NOT ON BUDGET-FINANCE COMMITTEE
GRAEBNER	Y	HIGMAN	NOT ON BUDGET-FINANCE COMMITTEE
JEFFERSON	Y	KING	Y
SCOTT	N/A	STRONG	Y

UDOW-PHILLIPS	Y	WALKER	NOT ON BUDGET-FINANCE COMMITTEE
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MOTION CARRIED

- V. Program-Quality Committee Meeting Minutes and Actions-5/10/21
- The Program-Quality Committee Meeting Minutes and Actions from 5/10/21 were reviewed. (Attachment #1B)

MOTION BY K. WALKER, SUPPORTED BY A. DUSBIBER TO APPROVE THE MINUTES AND ACTIONS FROM THE MAY 10, 2021 PROGRAM-QUALITY COMMITTEE MEETING.

ROLL CALL VOTE:

ANTONOW	Y	DUSBIBER	Y
GRAEBNER	NOT ON PROGRAM-QUALITY COMMITTEE	HIGMAN	Y
JEFFERSON	Y	KING	NOT ON PROGRAM-QUALITY COMMITTEE
SCOTT	N/A	STRONG	NOT ON PROGRAM-QUALITY COMMITTEE
UDOW-PHILLIPS	NOT ON PROGRAM-QUALITY COMMITTEE	WALKER	Y

MOTION CARRIED

- VI. Financial Status Reports (Attachment #2)
- N. Phelps reviewed the Financial Status Report for the month ending April 30, 2021.

MOTION BY D. STRONG, SUPPORTED BY M. UDOW-PHILLIPS TO APPROVE THE FINANCIAL STATUS REPORT THROUGH APRIL 30, 2021 AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	NOT ON BUDGET-FINANCE COMMITTEE	DUSBIBER	NOT ON BUDGET-FINANCE COMMITTEE
GRAEBNER	Y	HIGMAN	NOT ON BUDGET-FINANCE COMMITTEE
JEFFERSON	Y	KING	Y
SCOTT	N/A	STRONG	Y
UDOW-PHILLIPS	Y	WALKER	NOT ON BUDGET-FINANCE COMMITTEE

MOTION CARRIED

- VII. Contracts and Leases
- There were no contracts and leases for this month.
- VIII. Regional Finance Update

- N. Phelps and T. Cortes presented the Regional Finance Update to the committee.
- IX. Old Business
- CCBHC Update
 - o M. Harding presented an update on the CCBHC.
 - o Workgroups are being formed to discuss billing, clinical service delivery, etc.
 - o No rates details have been shared.
- X. New Business
- Program Committee Dashboard FY21 Qtr. (Attachment #3)
 - o T. Florence and L. Higl presented the Program Committee Dashboard for the 1st Qtr. of FY21.
 - o There were no sentinel events in the first quarter of fiscal year 2021.
 - o Staffing levels continue to be a challenge. WCCMH is working with the County Human Resources Department on recruiting and retaining entry level positions.

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY K. WALKER TO ACCEPT THE PROGRAM COMMITTEE DASHBOARD FOR THE 1ST QUARTER OF FISCAL YEAR 2021 AS PRESENTED.

ROLL CALL VOTE:

ANTONOW	Y	DUSBIBER	Y
GRAEBNER	NOT ON PROGRAM-QUALITY COMMITTEE	HIGMAN	Y
JEFFERSON	Y	KING	NOT ON PROGRAM-QUALITY COMMITTEE
SCOTT	N/A	STRONG	NOT ON PROGRAM-QUALITY COMMITTEE
UDOW-PHILLIPS	NOT ON PROGRAM-QUALITY COMMITTEE	WALKER	Y

MOTION CARRIED

- Provider Presentation (Attachment #4)
 - o S. Brown from Renaissance Community Homes and L. Lutomski from Synod Community Services presented the provider presentation to the committee.
- XI. Items for Future Discussions
- Integrated Planning (Millage/CCBHC/CMH service provider funding)-Strategic Planning category (Program-Quality Committee)
 - Important data points on CARES implementation impact on hospitals-return rates to hospitals and what the impact on caseloads is as well as other Millage Investments (Program-Quality Committee)
 - Looking at call data and how it affects the CARES Team (Program-Quality Committee)

MOTION TO ADJOURN THE BUDGET-FINANCE AND PROGRAM-QUALITY COMBINED COMMITTEE MEETING.

- XII. Meeting adjourned at 2:35 pm.

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH BUDGET-FINANCE COMMITTEE MEETING MINUTES DRAFT**

July 12, 2021

<https://zoom.us/j/94595562326>

1:00 pm

ROLL CALL: N. Graebner attending remotely from Chelsea, Washtenaw County, MI
B. King attending remotely from Ann Arbor, Washtenaw County, MI
M. Udow-Phillips attending remotely from Superior Twp, Washtenaw County MI

MEMBERS ABSENT: D. Strong, K. Scott, R. Jefferson

STAFF PRESENT: T. Cortes, N. Phelps, R. Dornbos, M. Harding, S. Ray, H. Linky, S. Lefferts,
S. Amos O'Neal, L. Hagle, T. Florence, L. Gentz, M. Taylor, E. Mix

OTHERS PRESENT: L. Lutomski, K. Belknap, K. Walker

N. Graebner called the meeting to order at 2:02 pm.

- I. Introductions
 - None
- II. Audience Participation
 - None
- III. Board Response to Audience Participation
 - None
- IV. Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions from 6/14/21
 - The Budget-Finance and Program-Quality Combined Committee Meeting Minutes and Actions from 6/14/21 were reviewed. (Attachment #1)

THERE WAS NOT A QUORUM AT THIS MEETING. THIS ITEM WILL BE BROUGHT FORWARD FOR APPROVAL AT THE NEXT WCCMH BUDGET-FINANCE COMMITTEE MEETING.

- V. Financial Status Reports (Attachment #2)
 - N. Phelps reviewed the Financial Status Report for the month ending May 31, 2021.

THERE WAS NOT A QUORUM AT THIS MEETING. THIS ITEM WILL BE BROUGHT FORWARD FOR APPROVAL AT THE WCCMH BOARD MEETING SCHEDULED FOR JULY 16, 2021.

- VI. Contracts and Leases
 - There were no contracts and leases for this month.
- VII. Regional Finance Update
 - N. Phelps presented the Regional Finance Update to the committee.
- VIII. Old Business
 - CCBHC Update
 - o M. Harding presented an update on the CCBHC.

- o No rate information has been provided yet.
- o Funding for CCBHC appears to be accounted for in the House Bill and Senate Supplemental Budgets.

- Billing Project Update
 - o N. Phelps presented an update on the Billing Project.
 - o WCCMH is no longer contracting with Kona Medical Consulting.
 - o Looking at building up internal resources to handle the billing and credentialing.
 - o Request for a data report to be brought back to the committee to review potential staffing needs.

IX. New Business

- WCCMH FY20 Cost Per Case (Attachment #3)
 - o N. Phelps presented the WCCMH FY20 Cost per case update to the committee.
 - o Request for a comparison of this data from other CMH's.
- WCCMH FY20 Compliance Examination (Attachment #4)
 - o N. Phelps presented the WCCMH FY20 Compliance Examination to the committee.

X. Items for Future Discussions

- Accounts Receivable
- Cost Per Case Comparisons

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY B. KING TO ADJOURN THE BUDGET-FINANCE COMMITTEE MEETING.

- XI. Meeting adjourned at 2:35 pm.



PATH

Projects for Assistance in Transition from Homelessness

Purpose

- ▶ Discovery Arm within the Homeless Continuum of Care for Washtenaw County
- ▶ SAMHSA grant program funded through the state.
- ▶ Outreach - going to where individuals are believed to be unhoused or living in places not meant for human habitation and attempting to engage them into services.
- ▶ Verification - homeless status requires verification, being seen in the above listed spaces, and having the PATH team write that up as a verification. PATH verifies homeless status for the vast majority of Washtenaw County.



HUD definitions

► Category One

- Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - Has a primary nighttime residence that is a public or private place not meant for human habitation
 - Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs)
 - Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

► Category Two

- Individual or family who will imminently lose their primary nighttime residence, provided that:
 - Residence will be lost within 14 days of the date of application for homeless assistance
 - No subsequent residence has been identified
 - The individual or family lacks the resources or support networks needed to obtain other permanent housing



Services

- ▶ Basic Needs: Socks, Soap
- ▶ Enrollment in Entitlements: SOAR applications, Medicaid
- ▶ Documents: Birth Certificates, IDs - Housing Requires Document Ready for Application
- ▶ Gear: Tents, Sleeping Bags: Understanding that camping in Washtenaw County is Illegal
- ▶ Jail Diversion: Coordinating



Activities

- ▶ Point in Time Count (PIT): A yearly HUD required Count of Individuals Sleeping Outdoors on one night in January.
- ▶ VI-SPDAT: The tool to score severity of need. Helps to categorize level of need
- ▶ Chronic Homeless Prioritization (CHP): Committee that triages those experiencing homelessness for available housing opportunities
- ▶ Participation in the CoC at various levels.
- ▶ Law Enforcement Engagement: Working with law enforcement to engage individuals who are unhoused.



Housing Choice Vouchers

ATTACHMENT #1D
AUGUST 2021

- ▶ Purpose to ensure access to a variety of voucher programs
 1. Rapid Rehousing
 2. Permanent Supportive Housing
- ▶ Yearly Documentation to stay eligible
- ▶ Numbers
- ▶ Success in connecting people to housing opportunities - bringing it all together, the document ready status with the housing opportunity and connecting the person to housing.



Needs for the PATH Team

- ▶ Ongoing gap in supportive housing - as the community prioritizes affordable housing, the supports to keep individuals/families in the units needs to come as well.
- ▶ Staffing - Homeless Outreach is specific and challenging work, and a hard team to staff
- ▶ Funding - Programmatic funding through PATH grant is limited.
 - ▶ Money for hotels - no longer a Medicaid service: not for some time. Need flexible dollars to move vulnerable individuals off the streets.
 - ▶ Flexible dollars for application fees, IDs, birth certificates. These add up to get one individual housed up. Worth it :)



AUGUST 2021

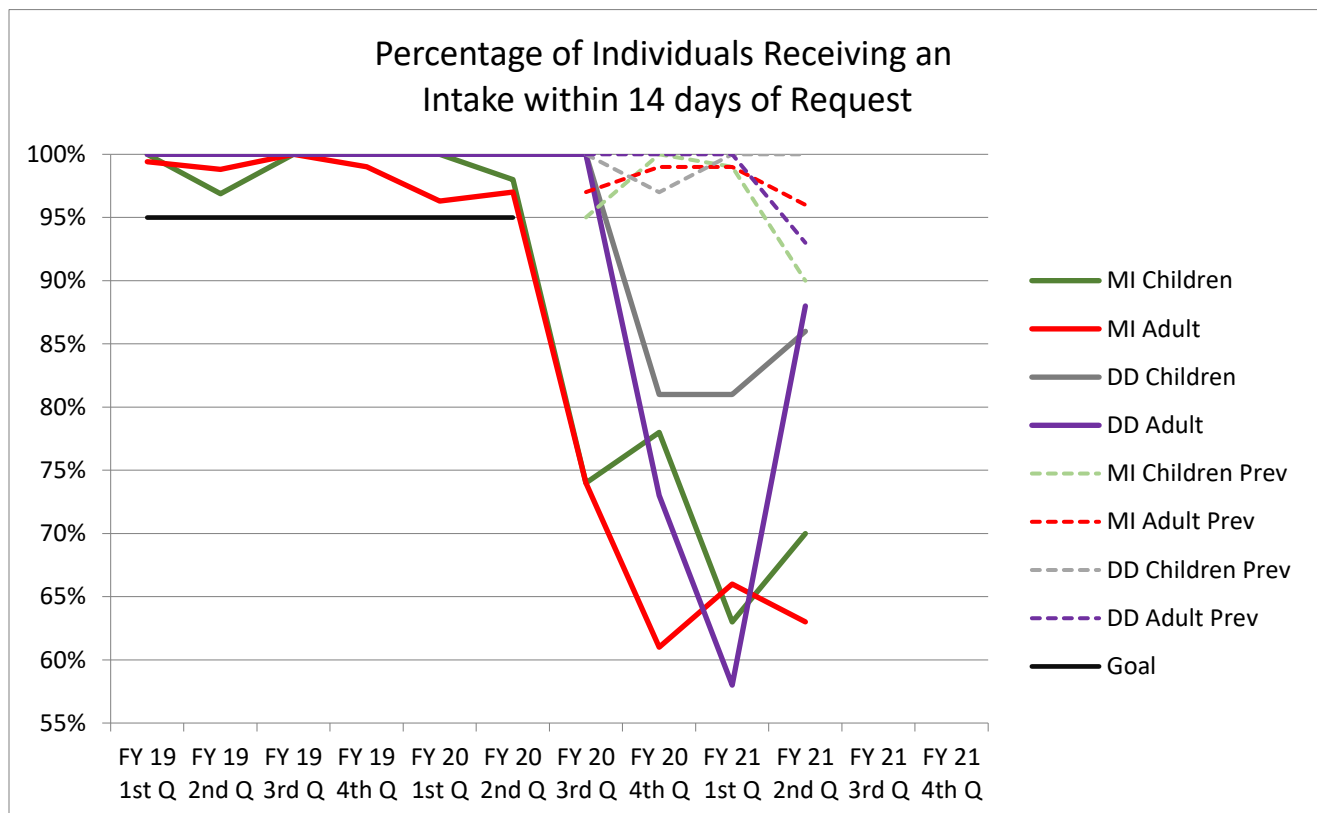
Program and Quality Board Committee
Dashboard Data FY 2021 2nd Qtr (January 2021 – March 2021)

As of April 1 2020, the Michigan Department of Health and Human Service (MDHHS) changed the operational definitions for calculating Indicators #2 (14 days to Intake) and #3 (14 days to Ongoing Service) and removed the 95% historical expected goal.

The major change in the operational definition does not allow accounting for consumer choice and for counting every request of service. Consumer choice is indicated by requesting an appointment outside of the 14 day window, rescheduling, canceling or not attending an appointment. If an individual requests a service, is found eligible but declines our services or even passes away, this is still considered “out of compliance”.

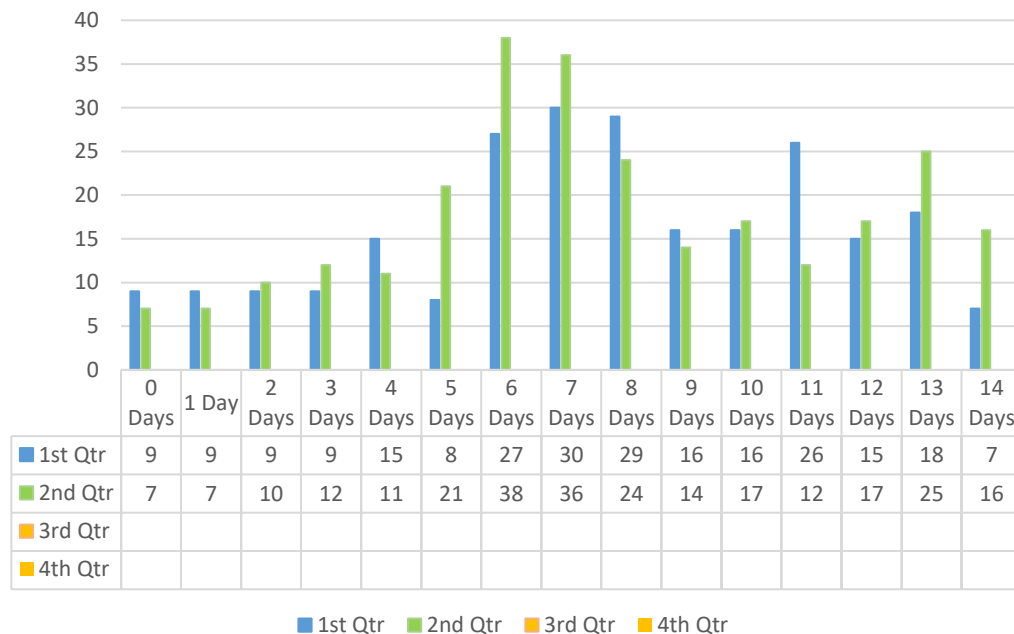
Therefore, across the State, percentage numbers are significantly different. MDHHS is treating the first year as baseline collection.

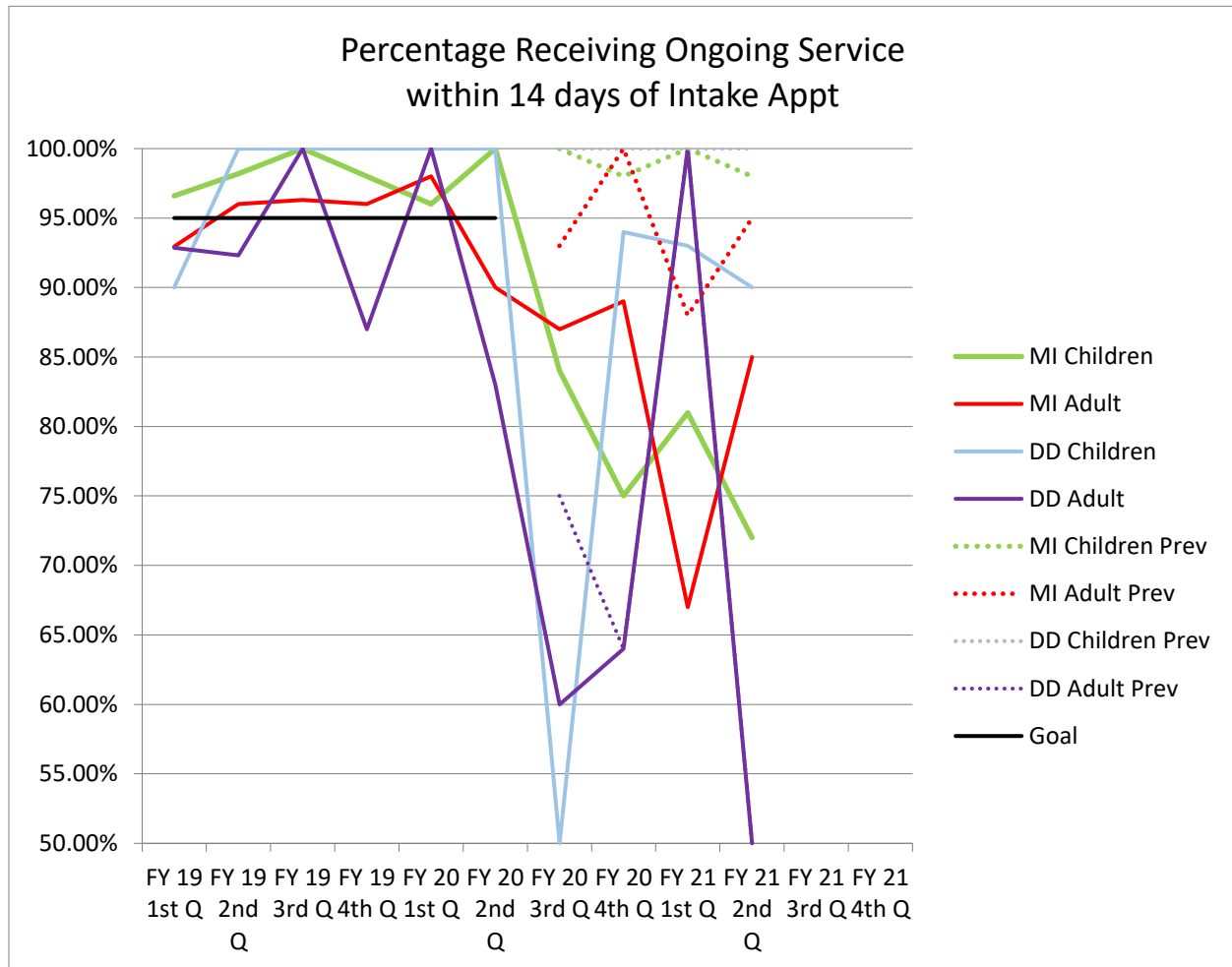
The third and fourth quarter data points are indicated on the graphs. The “dashed lines” indicate where our compliance would have been under previous definitions. The data points are detailed in the tables below the graphs.



FY 21 2nd Qtr Intake Appt within 14 days Detail						
Population	Total # of new persons requesting service	Number receiving appt. within 14 days of request	State defined as Out of Compliance	Consumer Preference (No Show, cancelled or Requested >14 days)- was formerly removed from the denominator	Percent Compliant by new State definition	Percent Compliant in previous definition
MI Child	114	80	34	32	70%	90%
MI Adult	175	110	65	60	63%	96%
DD Child	37	32	5	5	86%	100%
DD Adult	17	15	2	1	88%	93%

Number of Days to Intake
for Consumers with Intake <= 14 Days from Request
FY 21

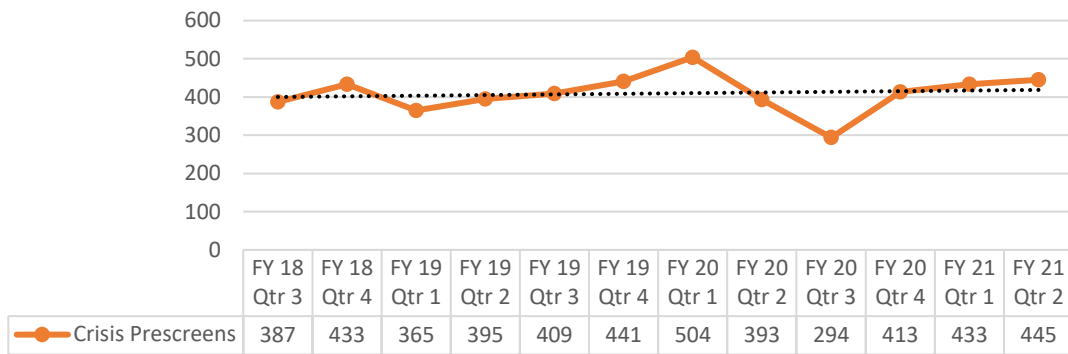




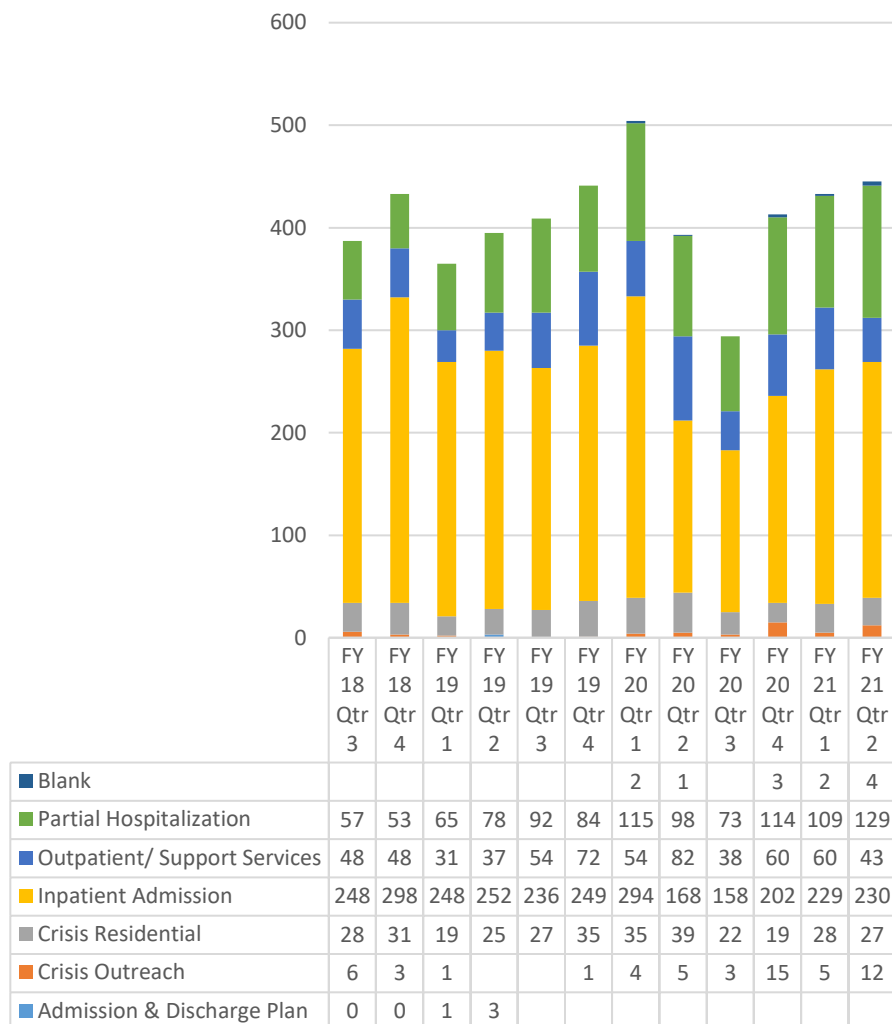
FY 21 2nd Qtr Detail Ongoing Service						
Population	# of New Persons Eligible for Service	# of New Persons who started a new service within 14 days of eligibility	State Defined as Out of Compliance	Consumer Preference (No Show, cancelled or Requested >14 days)- used to be removed from the denominator	Percent Compliant under new definition	Percent Compliant under previous definition
MI Child	79*	57	22	21	72%	98%
MI Adult	92	78	14	11	85%	95%
DD Child	30	27	3	3	90%	100%
DD Adult	12	6	6	0	50%	50%

*MI Child 1st Qtr had 57 eligible for service with 2nd Qtr 79

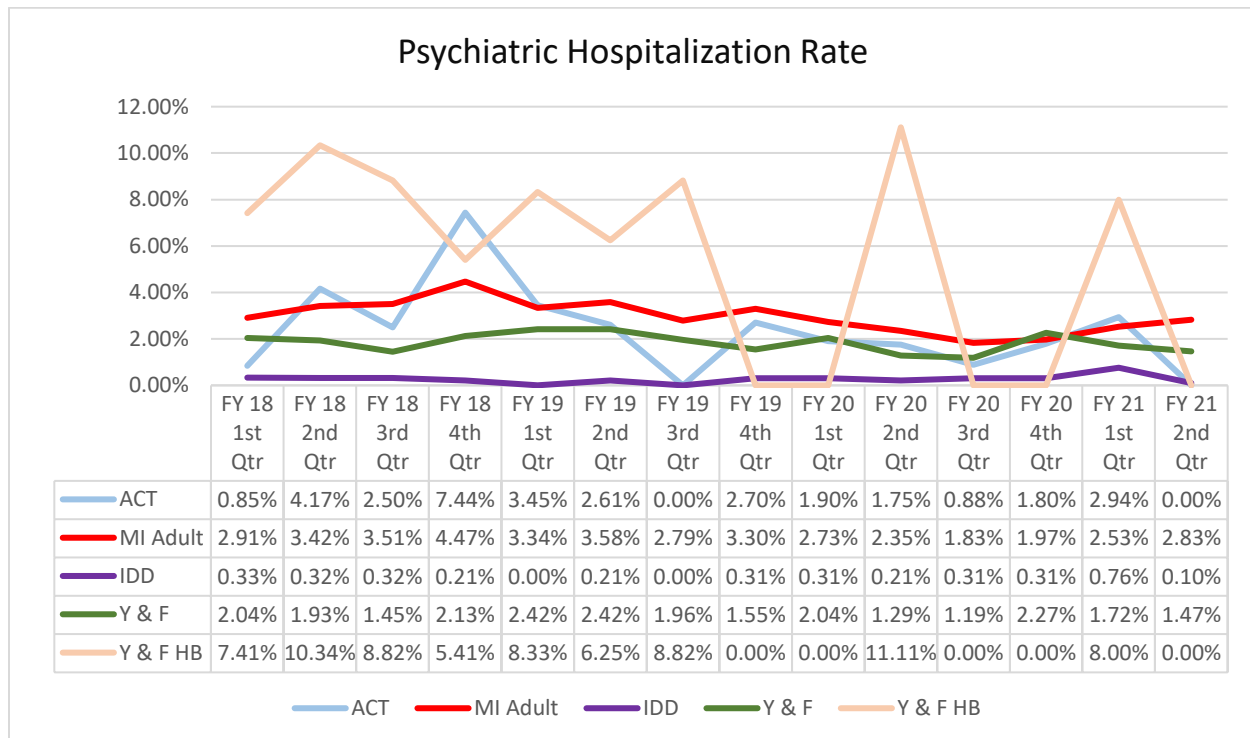
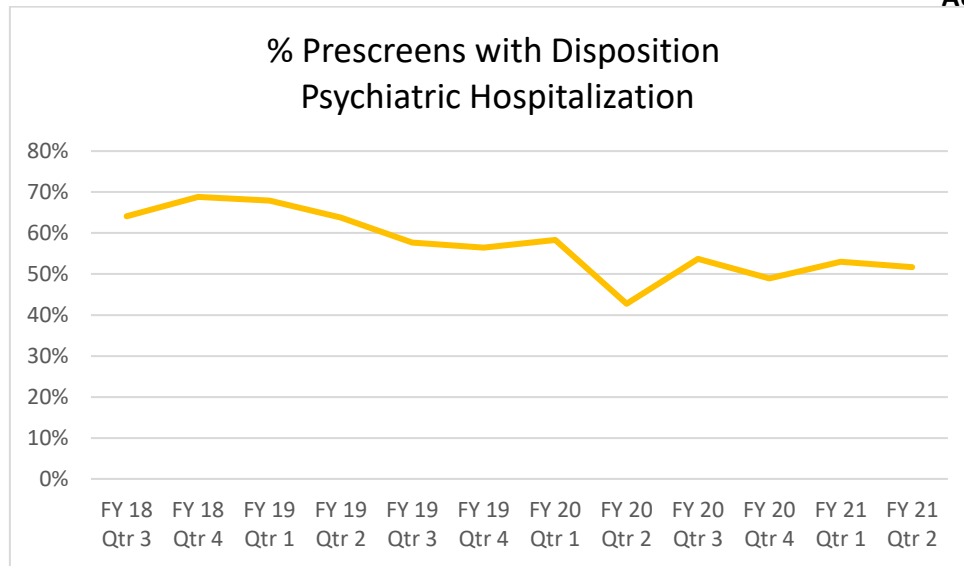
Number of Crisis Prescreens



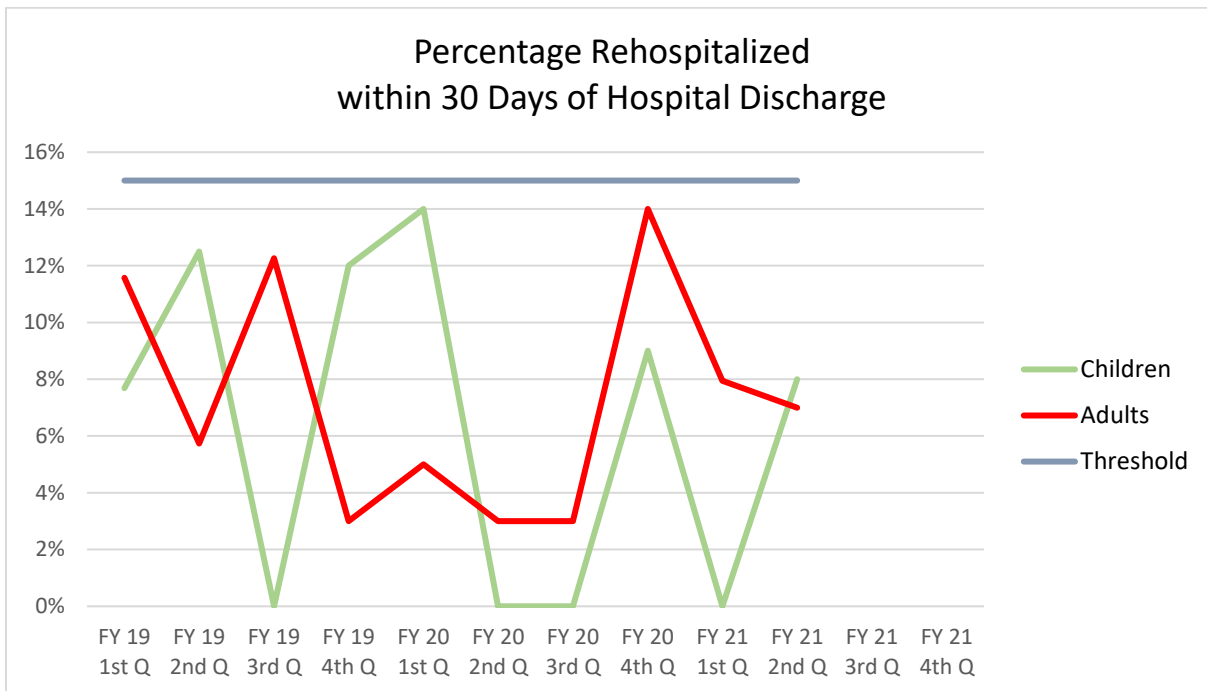
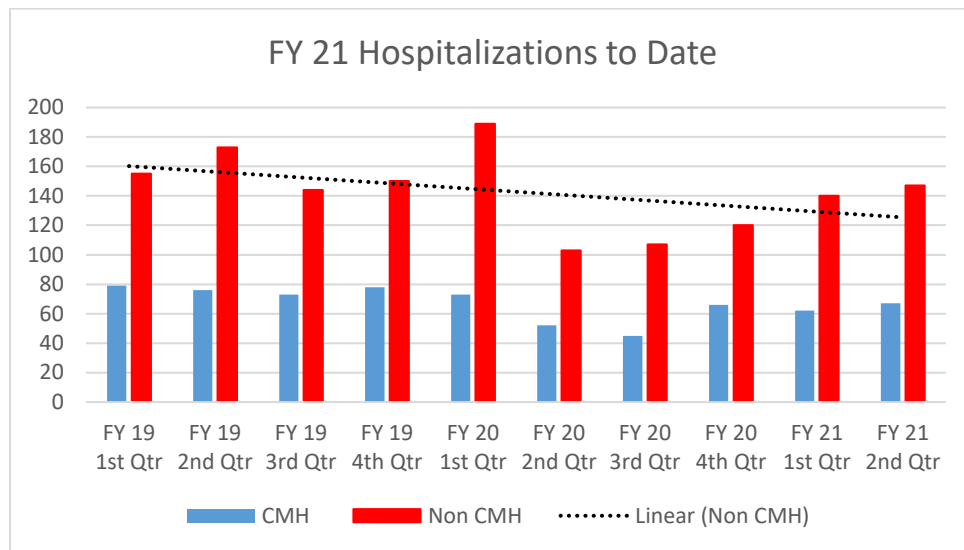
Prescreen Dispositions



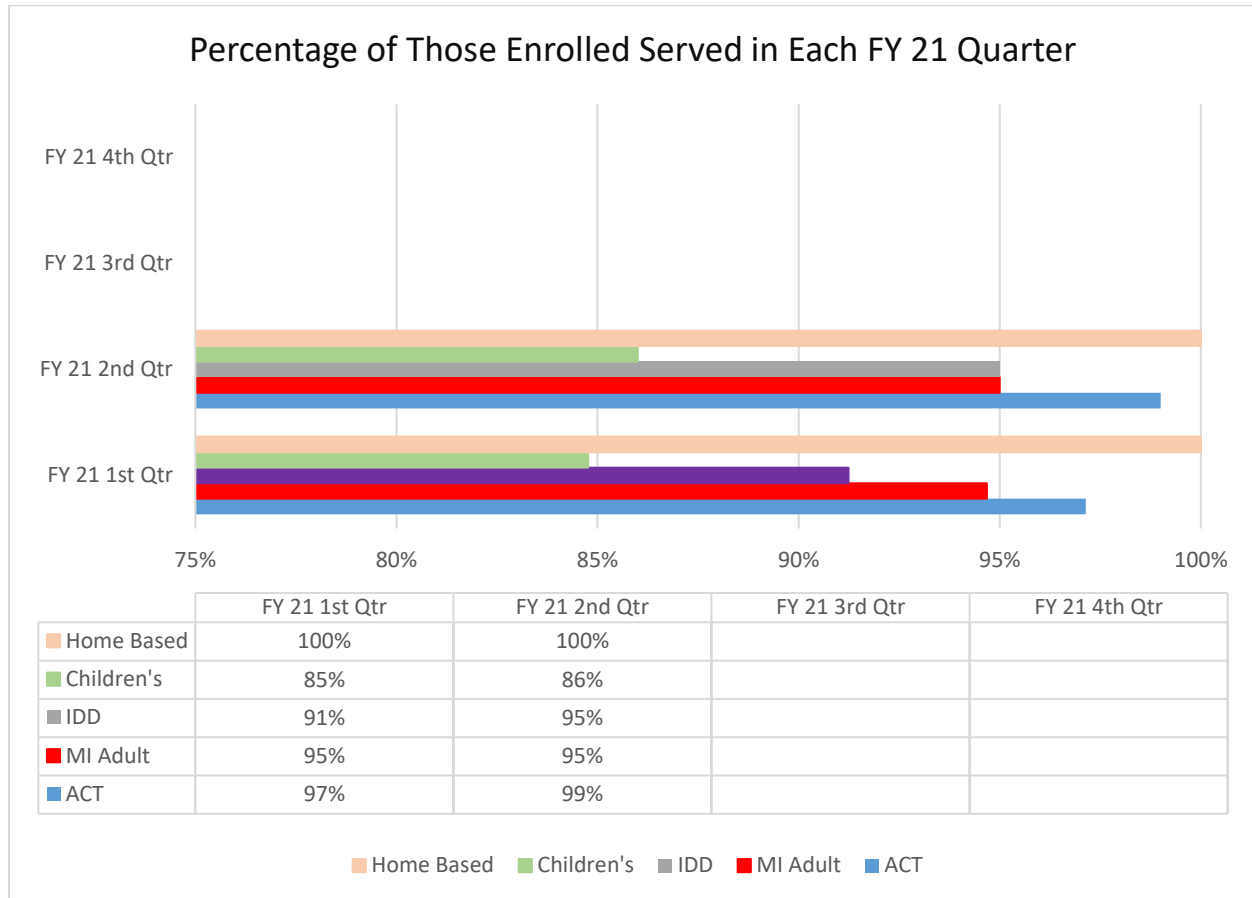
AUGUST 2021



FY 21 2nd Qtr Detail Hospitalizations			
Program	Number Served	Number Hospitalized (Multiple Admits)	% Consumers Hospitalized
ACT	103	0 (0)	0%
MI Adult	1588	55(10)	2.83%
IDD	967	1 (0)	0.10%
Y & F	679	11(1)	1.47%
Y & F Home Based	29	0 (0)	0%



FY 21 2nd Qtr Detail Readmit within 30 days of Discharge			
Population	# Discharged and Core Team Assignment	# Readmitted within 30 days of Discharge	% Readmit
Child	12	1	8.33%
Adult	100	7	7%



Critical Event Data Reported Thru Qtr 2 FY 2021

Critical Events are population and category driven with definitions mandated by MDHHS. Besides reporting deaths, events are typically reflective of ER treatment or Hospital admissions due to injury or medication error and involve Waiver or Residential clients. Arrests are only reported when the individual is either a recipient of a Waiver or is in a Specialized AFC setting.

	Team at Event	Type	Total
	IDD	Emergency Medical Treatment	3
		Non Suicide Death	4
	MI Adult	Non Suicide Death	13
		Suicide	1
	ACT	Non Suicide Death	1
Qtr 1 Total			22
	Children's	Non Suicide Death	1
	IDD	Non Suicide Death	6
	Adult MI	Non Suicide Death	9
Qtr 2 Total			16

Mortality Data Thru Qtr 2 FY 2021

Cause of Death	Number of Deaths FY 16	Number of Deaths FY 17	Number of Deaths FY 18	Number of Deaths FY 19	Number of Deaths FY 20	Number of Deaths FY 21
Aspiration Pneumonia				1	2	2
Cancer	10	10	8	9	7	7
Cardiovascular	16	8	13	14	14	3
Dehydration			1			
Drug Abuse	8	6	12	5	8	1
Endocrine System (Diabetes)						1
Environmental Hypothermia				1		
Gastrointestinal	1				3	1
Hip Fracture Complications			1			
Homicide		1	3			
Inanition					2	
Infection					4	4 (3 - COVID 19)
Kidney Disease	2	1	1		1	
Liver Disease		1	2		2	3
Metabolic				1		
Muscular Dystrophy	1					
Natural/Other		3	1			
Neurological	5	2	2	1	3	2
Other						
Respiratory	6	4	5	9	10	3
Sturge Weber Syndrome	1					
Suicide	2	3	2	2	5	1
Trauma	1		1	2		2
Unknown	5	3	9	10	8	5
Grand Total	58	47	65	55	67	35

Sentinel Events: There were no sentinel events in the second quarter.

WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH) WCCMH CONSUMER ADVISORY COUNCIL MEETING – MINUTES

June 9, 2021

Members Present on the Call: Pam Rathbun (president), Jason Zurawski (secretary), Barb Higman, Ed Howlett, Alayna Manzanares, Lisa Porzondek. Melissa Vaden
Staff Liaison: Mert Hershberger

I. Meeting called to order at: _ 12:34 pm _.

II. Consent Agenda.

MOTION BY _ Ed _ - SUPPORTED BY _Barb _: APPROVE WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH) CONSUMER ADVISORY COUNCIL (CAC) CONSENT AGENDA. MOTION CARRIED.

III. **Legislator:** Barb: Yousef cancelled yesterday for today. He is now planning to join in September. Jeff Irwin – July 14. Barb talked about Mike Shirkey's proposal to privatize mental health care. Mary Whiteford has a proposal as well. Many say that no one could do the same work that a public health care system functions and the importance of person centered, accessible care. Barb said we need to get some stories for sharing with legislators and policy makers and to prepare questions for asking legislators about these.

IV. **Newsletter:** ... End of August articles ready. Send out the newsletter by mid-September. Lisa is planning to write on Psychiatric Advance Directives. Alayna mentioned that NAMI Peer-To-Peer training includes the form in their training.

V. **Celebration of Success:** Alayna, et al, reiterated the importance of expanding the presentation by having it read audibly.

VI. **Walk-A-Mile in My Shoes online Rally.** Lisa: What to talk about? Barb mentioned the importance of keeping mental health care affordable and accessible while maintaining the priorities of the recipients.

VII. **RCAC: Next meeting will be in July.** Jason would like to join.

VIII. **We reviewed the Performance Improvement report for last year.** Topics requested for Laura Hagle to cover: MDHHS Indicator #2 – Requests for Services; Indicator #3 – Actual services performed; Case Load Levels; Disposition to Psych Hospitals; % of Individuals receiving follow up services w/in 7 days of Hospital Discharge; Adult & ACT Self-Sufficiency outcomes charts; Mortality rates all causes; Drug Abuse Deaths. ... Other related questions: How have changes to Food Stamps impacted self-sufficiency outcomes? How many deaths had COVID as a cause?

IX. **Fresh Start:** ... Nothing new.

X. **Speaker's Bureau** DEI presentation at UM went well.

XI. **NAMI Walks: August 28, 2021 on Belle Isle.** Barb said they are just getting started and that the Washtenaw Walkers now has a page that is set up. She will send out more specific information. Contact Barb Higman for questions/leave message: 734-971-2805. People can walk without making donations if they like.

XII. **New business.**

- a. WCCMH vaccination clinic that is happening next week at 2140 E. Ellsworth on Thursday, June 10th and Friday, June 11th. This clinic will have the Johnson and Johnson vaccine (1 shot).
- b. Melissa asked when more in-person functions of CMH would resume.

XIII. **Personal updates:**

XIV. **Meeting adjourned at _ 1:47 pm _ motion by _ Alayna, supported by Lisa to adjourn. _.**

Next meeting will be July 14, 2021 via Zoom at 12:30pm. (Please log in by 12:20pm to make sure we are all ready to participate by 12:30pm.)

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH CONSUMER ADVISORY COUNCIL MEETING – MINUTES
July 14, 2021**

Members Present on the Call: Pam Rathbun (president), Barb Higman, Ed Howlett, Alayna Manzanares, Lisa Porzondek, Melissa Vaden

Staff: Mert Hershberger, Sally Amos-O’Neal

Guests: Jeff Irwin

Members Absent: Jason Zurawski (secretary).

I. Meeting called to order at: _ 12:30 pm _.

II. Consent Agenda.

MOTION BY _Barb _ - SUPPORTED BY _Alayna _ : APPROVE WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH) CONSUMER ADVISORY COUNCIL (CAC) CONSENT AGENDA. MOTION CARRIED.

III. Jeff Irwin, state senator spoke to the CAC on progress of legislative activities. Senator Irwin spoke about Mental Health Integration plans that are being discussed at the State level. Irwin’s focus is to ensure mental health care stays local and avoid HMO. Irwin’s belief is that CMH is uniquely situated to provide care for the community due to a variety of reasons. Irwin discussed the Direct Care Worker (DCW) age increase that he has been championing for many years. Currently \$2.25 is in place and hopes for an increase to \$2.35 for the next fiscal year. *CCBHC – Washtenaw is a pilot project and the purpose for this new model is to ensure any gaps in service is available, i.e. mild and moderate care, regardless of insurance type, can be provided care. *Questions about food assistance, connect with MDHHS or call Senator Irwin’s office for assistance.

IV. **RCAC: Bi-Monthly report:**

- a. The RCAC is compiling a list of questions to be asked of new enrollees to CMH services throughout the region. Our suggestions were submitted to Kay Ross.
- b. Legislative activities: The need for advocacy & discussion around the plan from Lansing to move care over to private health plans continues.
- c. Other county CMH activities: Lenawee continues to plan for an E-Race Stigma event on August 19. Barb Higman was asked to connect them to NAMI-Washtenaw to help Lenawee restart a NAMI chapter. She was happy to help with that.
- d. Other things discussed included a possible training day in November and a proposal to have a statewide art show for CMH participant-produced art.

V. **Walk-A-Mile in My Shoes online Rally.** “keeping mental health care affordable and accessible while maintaining the priorities of the recipients.” Lisa as speaker. It will be September 29, 2021 the state is opening it up to in-person participation again this year.

VI. **Celebration of Success: Flowers** by Melissa? Importance of expanding presentation by having it read audibly, possibly photos. People would like to meet in person.

VII. **Fresh Start:** No news. Melissa reports that they continue to look for a location and are working on organizing as a stand-alone club. Walks and Zoom meetings are still the thing.

VIII. **Newsletter:** End of August articles ready. Send newsletter by mid-September. Lisa is planning to write on Psychiatric Advance Directives. Alayna mentioned NAMI Peer-To-Peer training includes the form in their training. (Attached in the email this came in.)

IX. **Speaker’s Bureau** Sunday, August 29, 2021 5pm Olive Garden at State & Eisenhower. (Speakers may come.): Mert & Sheila Hershberger, Darren Beland, Cristobal & Carrie Acosta, Ed Howlett, Lisa Porzondek, Barb Higman, Alex Mitrovich + Johnny.

X. **NAMI Walks: August 28, 2021 on Belle Isle.** Barb will Organize the trip. Ed will drive. Lisa and __ will go as well.

XI. **New business.**

Health Department ongoing vaccine sites	
Every Tuesday, Wednesday, Thursday, and Friday from 9-11:30am and 1-3:30pm Washtenaw County Health Department (555 Towner in Ypsilanti) Open to anyone 12+: Pfizer, Moderna, or Johnson & Johnson (one dose, 18+)	Walk in during clinic hours, no appointment needed.* <i>*The mass vaccination sites at the EMU Convocation Center in Ypsilanti and Pierce Lake Elementary in Chelsea are now closed.</i>

XII. **Personal updates:** Mert is recovering from illness, travel, and a flooded basement.

XIII. **Meeting adjourned at _1:58 _ motion by _Lisa _ supported by _ Ed on a musical note_.**

Next meeting will be August 11, 2021 via Zoom at 12:30pm. (Please log in by 12:20pm to make sure we are all ready to participate by 12:30pm.)

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH)
WCCMH MILLAGE ADVISORY COMMITTEE MEETING MINUTES DRAFT**

<https://zoom.us/j/94050572243>

July 12, 2021

4:00 pm

N. Graebner called the meeting to order at 4:03 pm.

ROLL CALL:

A. Carlisle attending remotely from Ann Arbor, Washtenaw County, MI
N. Graebner attending remotely from Chelsea, Washtenaw County, MI
H. Heaviland attending remotely from Ann Arbor, Washtenaw County, MI
B. Higman attending remotely from Ann Arbor, Washtenaw County, MI
D. Jackson attending remotely from Ypsilanti, Washtenaw County, MI
J. Martin attending remotely from Scio Township, Washtenaw County, MI
R. Rion attending remotely from Ann Arbor, Washtenaw County, MI
M. Udow-Phillips attending remotely from Superior Twp, Washtenaw County, MI
G. Waddles, Jr. attending remotely from Ypsilanti, Washtenaw County, MI
K. Walker attending remotely from Pittsfield Twp, Washtenaw County, MI

MEMBERS ABSENT: B. King, R. Jefferson, A. LaBarre

STAFF PRESENT: M. Harding, T. Cortes, R. Dornbos, L. Gentz, S. Lefferts, N. Phelps, H. Linky, L. Higle

OTHERS PRESENT: L. Lutomski, S. Novara, J. Lapedis, M. Creekmore, C. Sanders, G. Powers, N. Baum, S. Hierman, W. Hawkins

- I. Introductions
 - L. Gentz introduced J. Lapedis from Washtenaw Health Plan (WHP), S. Novara, Washtenaw Intermediate School District (WISD) and Comm. C. Sanders who will be presenting later in the meeting.
- II. Audience Participation
 - None
- III. Committee Response to Audience Participation
 - None
- IV. Millage Advisory Committee Minutes and Actions from 6/14/21 (Attachment #1)
 - Millage Advisory Committee Minutes and Actions of 6/14/21 were reviewed.

MOTION BY J. MARTIN, SUPPORTED BY G. WADDLES TO APPROVE THE MINUTES AND ACTIONS FROM THE JUNE 14, 2021 MILLAGE ADVISORY COMMITTEE MEETING AS PRESENTED.

ROLL CALL VOTE:

CARLISLE	Y	GRAEBNER	Y
HEAVILAND	Y	HIGMAN	Y
JACKSON	Y	JEFFERSON	N/A
KING	N/A	LABARRE	N/A

MARTIN	Y	RION	Y
UDOW-PHILLIPS	Y	WADDLES, JR.	Y
WALKER	Y		

MOTION CARRIED

V. Discussion Items

- Millage Process, Investments and Process Update (Attachment #2A)
 - o Due to a full agenda for today's meeting, L. Gentz referred the committee to review Attachment#2A for the Millage Process, Investments and Process Update for July 2021.
- CARES Dashboard-New Design Review (Attachment #2B)
 - o S. Ellis reviewed the CARES Dashboard document for June 2021 with the committee.

VI. Financial Budget Update (Attachment #3)

- N. Phelps presented the Financial Budget update to the committee.
- This report is for the Month ending May 31, 2021.

VII. Old Business

- Washtenaw County Sheriff's Office (WCSO) Millage and Financial Status Update
 - o D. Jackson presented the WCSO Millage and Financial Status Update to the committee.

VIII. New Business

- WHP/WCCMH Proposal (Attachment #4)
 - o J. Lapedis discussed the WHP/WCCMH Proposal.
 - o This proposal is requesting ongoing funding for their public health work
 - o Financial ask is \$165,000 per year for ongoing funding broken down as follows:
 - \$125,000 for provision, coordination, and expansion of mental health services to WHP members and immigrants whose native language is not English, including an evaluation of and expansion of existing provider capacity.
 - \$40,000 for outreach, communication, insurance navigation, and connection to services in the Latinx and youth communities.
 - o Suggestion to do this for a 2-year period with an option to renew after that.

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY A. CARLISE TO APPROVE THE WASHTENAW HEALTH PLAN/WCCMH PROPOSAL FOR A TOTAL AMOUNT OF \$165,000.00 FOR A 2-YEAR PERIOD WITH AN OPTION TO RENEW.

ROLL CALL VOTE:

CARLISLE	Y	GRAEBNER	Y
HEAVILAND	Y	HIGMAN	Y
JACKSON	Y	JEFFERSON	N/A
KING	N/A	LABARRE	N/A
MARTIN	Y	RION	Y
UDOW-PHILLIPS	Y	WADDLES, JR.	Y
WALKER	Y		

MOTION CARRIED

- WISD Mini Grant Presentation (Attachment #5)
 - o S. Novara from Washtenaw Intermediate School District (WISD) presented the WISD Mini Grant Presentation to the committee.
 - Mobile Support Services Initiative (MSSI) Presentation
 - o C. Sanders presented the MSSI Presentation update to the committee.
 - o Presenting on behalf of her role with Eastern Michigan University.
 - o R. Dornbos will send out the updated PowerPoint and updated budget for this project.
- IX. Items for Future Discussions
- Youth Assessment Center
 - Millage Investment Plan
 - Youth Needs Discussion
 - Updated Millage Commitments

MOTION BY M. UDOW-PHILLIPS, SUPPORTED BY H. HEAVILAND TO ADJOURN THE MEETING.

Meeting adjourned at 4:59 pm.

Millage Process, Investments and Process Update- August 2021

Plan and Integrate:

LEAD- CSM positions are posted but recruitment is currently an issue. WCSO has selected the Project Manager and will be making an announcement soon. **No updates**

Youth Assessment Center- Update being provided during the meeting.

Community Response to MH Crisis- Focus groups are being conducted by WCSO with key stakeholders. Ultimate outcomes are being edited and focus group feedback is being incorporated. **No updates**

Rethink Health/5 Healthy Towns- SJM Chelsea SAMSHA grant approval looks promising, still awaiting formal approval. NAMI continues their work with targeted outreach, grief and loss groups in Manchester congregations and prepping for a clergy conference in the fall. One Big Connection website is live. Flyer campaign focused on grocery stores and carryout restaurants being planned and community meetings road show is in development to share One Big Connection and highlight mental health resources in the region, including CARES. **No updates**

5 Healthy Towns Intergenerational Populations Project- CHRT will be presenting it's finding and community feedback at next core team meeting. Next steps will be determined once findings have been reviewed.

Expand Services:

CARES/Crisis/750- See M. Tasker Report

Housing RFP- SAWC and CMH meetings have commenced to begin collaborative work on the crisis housing project. **No updates**

31 N/ WISD Mini Grants- Update being provided during this meeting.

Youth Center MHP- Position in place and going well. Psychiatry supports will be reduced in the Youth Center to 4 hours per week and moved to Ozone to support community-based justice involved youth. **No updates**

Justice Involved Youth Psychiatry Access- Meetings scheduled with Ozone and CMH to implement 4 hours of Psychiatry time to support community-based justice involved youth. **No updates**

Corner Health Psychiatry Expansion- CMH increased psychiatry time at Corner Health from 1 full day to 2 full days per week has been implemented. **No updates**

Jail MAT- Implementation date January 18, 2021- **no updates**

Communicate and Evaluate:

NAMI- Continuing special community education initiative with millage funding focusing on Ypsilanti and Whitmore Lake. NAMI participating in the Boots on the Ground initiative with Ypsilanti Community Schools on July 17th. CARES/millage information provided in the goodie bags. Additional focus groups being conducted with the Trusted Advisors and SURE Moms. Since expanding outreach efforts, NAMI program attendance has doubled! **No updates**

Anti-Stigma Campaign- New proposal sent by Public Health, currently reviewing. **No updates**

MHFA Education initiatives- Trainings are underway and going well. We are taking requests from community organizations, please spread the word. **No updates**

Millage Communication Strategy- Identifying key messages for millage communications with our partners at CHRT. First 6 messages should be coming out soon and key stakeholder interviews have occurred in the justice sector to assist with tailoring communications to meet sector needs. **No updates**

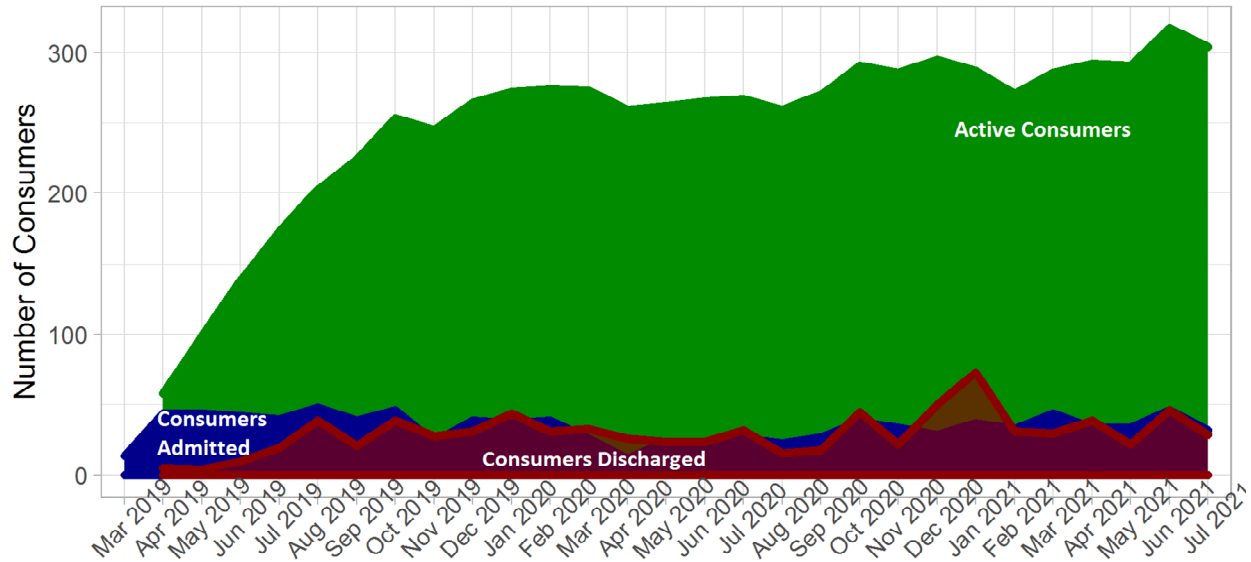
Washtenaw County Community Mental Health – CARES Report July 2021

Last Updated: 08/01/2021

CARES THROUGHPUT

Cares Throughput is about consumers entering, leaving, and remaining active in the program. June 2021 marked the first increase in active consumers beyond Pre-Covid levels and this seems to be holding in July 2021.

Apr 2019 - Jul 2021: CARES Throughput



Month	# Active Cases	CARES Adm Cases	CARES Disc Cases
Mar-19		14	
Apr-19	58	44	5
May-19	99	44	4
Jun-19	138	42	10
Jul-19	173	40	20
Aug-19	203	48	39
Sep-19	224	39	21
Oct-19	255	48	39
Nov-19	247	24	28
Dec-19	265	39	31
Jan-20	273	37	44
Feb-20	275	39	31
Mar-20	274	26	33

Apr-20	260	12	26
May-20	262	24	24
Jun-20	265	23	24
Jul-20	267	26	32
Aug-20	259	23	16
Sep-20	270	27	18
Oct-20	291	38	45
Nov-20	286	34	22
Dec-20	295	29	50
Jan-21	287	37	73
Feb-21	271	33	31
Mar-21	286	44	30
Apr-21	292	34	39
May-21	291	34	22
Jun-21	317	46	46
Jul-21	304	32	29

Referrals to CARES by Month

Also known as automatic enrollment in CARES

Note that when there are less automatic enrollment/referrals this generally leads to a decrease in the number of current (or active) CARES Admissions.

Referral Month	# New CARES Referrals
Mar-19	37
Apr-19	77
May-19	80
Jun-19	62
Jul-19	58
Aug-19	70
Sep-19	67
Oct-19	71
Nov-19	67
Dec-19	62
Jan-20	77
Feb-20	59
Mar-20	40
Apr-20	21
May-20	39
Jun-20	44

Jul-20	40
Aug-20	33
Sep-20	45
Oct-20	72
Nov-20	61
Dec-20	48
Jan-21	52
Feb-21	48
Mar-21	73
Apr-21	72
May-21	68
Jun-21	58
Jul-21	55

Emergency Contact Notes by Month

Note that there were less Emergency Contact Notes across the board for WCCMH clients and the WCCMH-CARES clients during the government shutdown. As the shutdown is over, it seems like Emergency Contact Notes are on the rise again and becoming more stable.

ER_Note_Month	Yr	Mon	Num_ER_Notes	num_CRCT_cases	num_Cares_cases
Mar-18	2018	3	1	1	0
Apr-18	2018	4	100	76	2
May-18	2018	5	97	82	1
Jun-18	2018	6	124	100	1
Jul-18	2018	7	123	90	5
Aug-18	2018	8	118	96	3
Sep-18	2018	9	147	101	3
Oct-18	2018	10	183	102	3
Nov-18	2018	11	182	83	3
Dec-18	2018	12	205	102	1
Jan-19	2019	1	173	86	5
Feb-19	2019	2	200	106	8
Mar-19	2019	3	253	125	14
Apr 2019	2019	4	229	133	9
May 2019	2019	5	237	130	9
Jun 2019	2019	6	245	130	22
Jul 2019	2019	7	229	126	22
Aug 2019	2019	8	210	128	21
Sep 2019	2019	9	245	131	5
Oct 2019	2019	10	305	157	15

Nov 2019	2019	11	242	131	9
Dec 2019	2019	12	268	138	15
Jan 2020	2020	1	230	130	15
Feb 2020	2020	2	223	134	5
Mar 2020	2020	3	121	82	5
Apr 2020	2020	4	57	51	6
May 2020	2020	5	66	55	3
Jun 2020	2020	6	168	94	7
Jul 2020	2020	7	312	110	10
Aug 2020	2020	8	206	98	7
Sep 2020	2020	9	248	95	3
Oct 2020	2020	10	227	88	5
Nov 2020	2020	11	209	87	3
Dec 2020	2020	12	104	55	5
Jan 2021	2021	01	158	79	7
Feb 2021	2021	02	107	65	5
Mar 2021	2021	03	172	100	5
Apr 2021	2021	04	258	124	11
May 2021	2021	05	221	126	7
Jun 2021	2021	06	202	115	5
Jul 2021	2021	07	262	80	0

Gender

The data here should be considered as a work in progress since this data was not collected initially due to a number of factors. Most significantly, this data covers all clients subjected to the 'automatic referral' system which means that we are lacking information for many of these cases.

Gender	# Cases Referred	# Active at least 1 Day 3/1/19 – present Cases
Female	676	520
Male	600	467
Other (Specify)	1	0
Transgender	1	0
Total	1278	987

Race

This data is collected from everyone during the initial screening and referral process.

<u>Race</u>	<u># CARES cases</u>	<u>%</u>
White	574	58.2%

Black or African American	283	28.7%
Other race	60	6.1%
-missing-	39	4.0%
Asian	19	1.9%
Refused to Provide	9	0.9%
Native Hawaiian or other Pacific	2	0.2%
American Indian (non-Alaskan)	1	0.1%
Total	987	100.0%

Typical Length of Stay for Cases that Already Closed

We expect the mean and median to continue to grow as time continues and to fully stabilize after CARES has been fully functioning for two years. We are approaching the two year mark at this time, but it is good to keep in mind that we should consider July 2021 the two year mark since enrolling all of the clients that we previously could not serve was a 3 month process; see throughput chart or graph for a better understanding.

	Days
Median	101
Mean	146.91
Min	1
Max	802

City/Zip Code for Open Cases

The cases here are open by automatic referral and not necessarily fully admitted which is why these numbers are greater than the throughput numbers which requires an initial Assessment and Plan.

<u>Zip Code</u>	<u># CARES cases</u>	<u>%</u>
48197	264	26.7%
48198	229	23.2%
48103	117	11.9%
48104	87	8.8%

48108	73	7.4%
48105	53	5.4%
48176	30	3.0%
48160	16	1.6%
	16	1.6%
48189	15	1.5%
48130	13	1.3%
48118	12	1.2%
48158	9	0.9%
48111	9	0.9%
48107	6	0.6%
48191	6	0.6%
48169	4	0.4%
48167	3	0.3%
48137	3	0.3%
48184	2	0.2%
49240	2	0.2%
98118	1	0.1%
48185	1	0.1%
48188	1	0.1%
48168	1	0.1%
48174	1	0.1%
48224	1	0.1%
48238	1	0.1%
48240	1	0.1%
48348	1	0.1%
48386	1	0.1%
48612	1	0.1%
49229	1	0.1%
49236	1	0.1%
48141	1	0.1%
48131	1	0.1%

48036	1	0.1%
48109	1	0.1%
48106	1	0.1%
Total	987	100%

<u>City</u>	<u># CARES cases</u>	<u>%</u>
YPSILANTI	494	50.1%
Ann Arbor	342	34.7%
Saline	31	3.1%
MILAN	16	1.6%
Whitmore Lake	15	1.5%
Dexter	13	1.3%
Chelsea	12	1.2%
Manchester	9	0.9%
	7	0.7%
Belleville	7	0.7%
Willis	6	0.6%
Northville	4	0.4%
Pinckney	4	0.4%
Detroit	3	0.3%
Gregory	3	0.3%
Grass Lake	2	0.2%
Van Buren Twp	2	0.2%
Wayne	2	0.2%
Westland	1	0.1%
White Lake	1	0.1%
Redford	1	0.1%
Romulus	1	0.1%
Seattle	1	0.1%
Superior Township	1	0.1%
Taylor	1	0.1%
Inkster	1	0.1%
Dundee	1	0.1%

Britton	1	0.1%
Canton	1	0.1%
Beaverton	1	0.1%
Clarkston	1	0.1%
Clinton	1	0.1%
Clinton Twp	1	0.1%
Total	987	100%

Age Groups for Consumers Active at least 1 Day in CARES

Age Category	# CARES Adm Cases
-no age listed-	1
0-16	34
17-19	49
20-24	128
25-29	138
30-34	131
35-39	110
40-44	88
45-49	72
50-54	82
55-59	68
60-64	35
65-69	31
70+	20
Total	987

Funding Sources for Consumers

Funding Sources	Medicare	# CARES cases	%
	N	423	42.9%
	Y	29	2.9%
HMP	N	316	32.0%
Medicaid	N	180	18.2%
Medicaid	Y	32	3.2%
S/D	N	2	0.2%
S/D	Y	5	0.5%
	Total	987	100%

Commercial Insurance

This provides a glimpse of other insurance types that clients have in CARES, but only captures those individuals whose insurance information was entered into the EHR. Going forward, the goal is for all insurance types to be captured at 100%.

<u>Private INS</u>	<u># CARES cases</u>	<u>%</u>
BLUE CROSS BLUE SHIELD OF MI,	22	2.2%
HUMANA CHOICE PPO MEDICARE PLAN,	6	0.6%
BLUE CARE NETWORK OF MICHIGAN,	4	0.4%
PRIORITY HEALTH MEDICARE,	3	0.3%
BLUE CARE NETWORK (PO 68710),	2	0.2%
Blue Care Network Advantage,	2	0.2%
United Healthcare Community Plan,	2	0.2%
AETNA PPO,	1	0.1%
AETNA US HEALTHCARE,	1	0.1%
BLUE CARE NETWORK OF MICHIGAN, BLUE CARE NETWORK PILOT,	1	0.1%
CIGNA MEDICAL,	1	0.1%
COFINITY,	1	0.1%
MEDICARE PLUS BLUE OF MI,	1	0.1%
MENTAL HEALTH COURT,	1	0.1%
MERIDIAN CARE EXTRA HMO SNP,	1	0.1%
MERIDIAN HEALTH PLAN INC,	1	0.1%
MOLINA MARKETPLACE MI,	1	0.1%
PRIORITY HEALTH MI,	1	0.1%
STATE FARM MEDICARE SUPPLEMENT INS,	1	0.1%
TriCare East Region Claims,	1	0.1%
United Healthcare,	1	0.1%
WELLCARE HEALTH PLANS,	1	0.1%
Total	56	6%

#7 CARES Services Detail by CPT - w 0 units		
<u>Service Category</u>	<u># SAL Documents</u>	<u># Cases</u>
Targeted Case Management	14089	1044
Med Reviews	2522	464
Peer Services	2013	241
RN Services	1175	382
Intake Assessments	998	811
Psych Evals	773	638
Injections	333	46
Wellness Note	330	184
Nursing Assessments	29	28

S0316	13	7
Therapy Group Notes	5	4
J2426	2	1
J3490	1	1
99212	1	1
S9470	1	1
99213	1	1
Total	22286	

#8 Count by Type of Service		
<u>Type of Service</u>	<u># CARES cases</u>	<u>%</u>
Mood disorders	823	83.4%
Personality Disorders	116	11.8%
Psychosis	125	12.7%
SED	95	9.6%
SUD	327	33.1%
Total duplicate count	1486	



The Washtenaw Intermediate School District (WISD) is pleased to submit a proposal for the amount of \$213,780 to the Washtenaw County Public Safety and Mental Health Preservation Millage Advisory Committee to support ongoing mental health work with youth in local schools. The following sections outline two scopes of work represented in this request, one focused on direct clinical service to youth in schools and the second focused on reducing the stigma of mental health among students across the county.

31n Clinical Services Match

WISD receives state funding (31n) to support two mental health initiatives—direct clinical support and developing training of trainers on evidence-based practices to support students in school. The direct clinical support requires that schools build provider capacity and the WISD is slated to receive, annually, \$817,800. In order to receive these funds, the state requires a 20% match. WISD is requesting a portion of the match from millage funds, 10% of the allocation total, while proposing to fulfill the remainder of the match requirement itself.

Project:

The purpose of 31n funding is to build mental health capacity in local schools. Section 6 of this funding focuses on the provision of direct clinical services to students experiencing anxiety, depression, and suicidality. The goal is to identify, stabilize, and create plans of care for those students. This is a new area of focus for schools in that it requires the addition of providers qualified to provide services using different forms of modality while meeting requirements related to school-based Medicaid billing.

After discussion with local education entities, it was decided that 31n funding would best be utilized to hire LMSWs to offset areas of the Washtenaw County community where the CARES team had not yet extended its reach. The intent was to partner the LMSWs with the CARES team, using this role as a first point of contact, assessment, and initial treatment for school-age youth in need, making referrals to the CARES team and CMH proper when needed. WISD has since hired 3.25 FTE LMSWs currently deployed to buildings in the Ypsilanti Community Schools, Whitmore Lake Public Schools, Milan Area Schools, Lincoln Consolidated Schools, and Saline Area Schools. These individuals are also taking referrals directly from Manchester Community Schools and from other school employees in position to identify a youth in need of help (e.g., truancy, school homeless coordination, etc.).

WISD is requesting matching funds to allow for the continued draw down of its 31n allocation and to expand services to include two 0.5 FTE LBSWs enrolled in MSW programs. These individuals would receive critical training while providing case management services to further support students and families. Upon earning their LMSW, the individuals would then be prepared to step into the direct clinical service role, expanding

countywide capacity for meeting mental health needs of students. This added capacity and long-term strategy will be critical as we continue to transition out of the pandemic and back into public spaces.

Timeline:

WISD will hire and train two 0.5 FTE Licensed Bachelor of Social Workers between October 1, 2021-September 30, 2022.

Request:

WISD is requesting a 10% match on the anticipated \$817,800 31n allocation, or \$81,780. Note that, while additional funds are being made available to districts through pandemic relief grants, these are one-time grant funds being used to address deficits in instruction, facilities, and technology. WISD itself has not been a recipient of CARES or GEER funds.

Youth Mental Health Mini Grant Project

In an extension of the youth mental health mini-grant project funded from 2019-21, millage funds will be allocated to the WISD to support the implementation of annual student-led projects designed to reduce mental health stigma among young people. All public middle and high schools in the county will be eligible to apply for a mini grant up to \$5,000 to fund their specific project.

Project:

WISD will facilitate the granting process with schools, encouraging as many as possible to participate. WISD will also facilitate one gathering of participating school staff and students to share ideas. Google folders will be created to store artifacts and share ideas between schools.

Schools will be asked to promote the CMH CARES phone number on all printed and digital materials and will be encouraged to engage students who normally don't participate.

Grants:

Each school will apply for the funds they expect to require in order to fulfill their project plan. The maximum grant amount for each project is \$5,000. Funds can be used for stipends, food, supplies, giveaways, furnishings, etc., but a maximum of 30% of a school's funds can be used toward administrative costs and a minimum of 70% of each school's funds must be used toward directly impacting students' mental health.

Timeline:

Schools will apply for and be awarded mini grant funding on a rolling basis as their project plans are confirmed. All grant applications must be submitted by January 15, 2022. The gathering designed to share ideas among schools will likely take place in November. All projects must be completed by the end of the school year.

Request:

WISD is requesting \$132,000 to facilitate the mental health mini grants for the 2021-22 and 2022-23 school years. This is based on an average expenditure of \$2500 per school and the expectation that we'll be able to increase the number of schools we engage each year from 20 to 24. It also includes a 10% administrative fee (\$12,000) to offset WISD's financial and project coordination over the two years of the project.

Youth Assessment Center Technical Assistance Funding Request

Millage funds are being requested to receive technical assistance from the National Assessment Center Association (NAC) to assist a multi-sector stakeholder group with launching a Youth Assessment Center in Washtenaw County. The multi-sector stakeholder group includes representatives from Juvenile Court, The Youth Center, WISD, WCSO, Washtenaw County Prosecutors Office, WCCMH, MDHHS, and youth serving organizations.

Summary/Description: The National Assessment Center Association (NAC) guides a partnership of assessment centers that advance best practice through advocacy, education, technical assistance, and community engagement. The Assessment Center Framework and standards provides a roadmap for Assessment Centers on best practice and is intended to serve as a guide and support to communities. Washtenaw County is in the planning and implementation phase of the development of an Assessment Center. This partnership allows the NAC to support the launch of the Washtenaw County Assessment Center by helping to ensure operational plans, policies, and procedures are in alignment with the standards of practice in the Assessment Center framework. The partnership will ensure the Assessment Center launch and implementation is supported and grounded in best practice.

Scope of Work: Planning & Implementation Support

The NAC Executive Director will be an active team member of the Washtenaw County team tasked with launching the Assessment Center providing resources and guidance in order to support planning, implementation, and launch. The NAC Executive Director will be available for weekly virtual consultation and support. An initial review of the standards and criteria with the local planning team will allow Washtenaw County representatives and the NAC to develop a plan for operationalizing the criteria to best fit the use of the local Assessment Center.

Utilizing the data and decisions made from the Sequential Intercept Mapping process, in conjunction with the NAC Assessment Center framework and standards of practice, the team will begin to develop an Assessment Center action plan to include:

- Resources necessary to align with Framework standards
- Referral Criteria
- Partnerships, policies, procedures, and activities needed for successful implementation
- Community resource and service mapping to inform referrals
- Establishing evaluation methods and measures of success
- Operational plans

NAC Staff will help provide information in order to effectively communicate the Assessment Center Framework and anticipated benefits to community members and stakeholders. Supporting the launch of the Washtenaw County Assessment Center utilizing the action plan and implementation science, NAC Staff and/or consultants will assist in troubleshooting any potential problems and support them in their beginning months with challenges that may arise. Included in technical assistance support is one year of NAC membership (Organization with 1-9 staff). Evaluation support can be added support provided by the NAC at an additional cost.

Output: Washtenaw County has an Action Plan for the Assessment Center that is grounded in best practice and aligns with national standards.

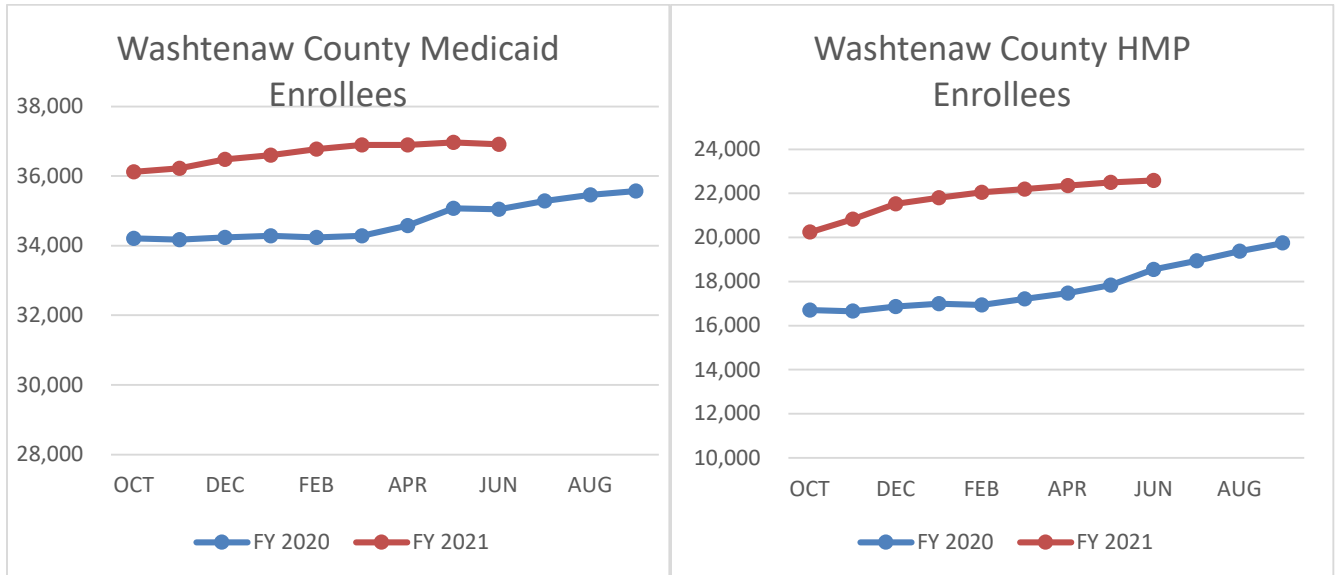
Output: The Washtenaw County Assessment Center launches and begins serving the community in alignment with national standards and best practice

Planning & Implementation Support Cost: 1 year after execution of contract \$20,650

**WASHTENAW COUNTY COMMUNITY MENTAL HEALTH
YEAR-TO-DATE FINANCIAL STATUS
FISCAL YEAR 2021: For the period ending June 30, 2021
Prepared: August 2, 2021**

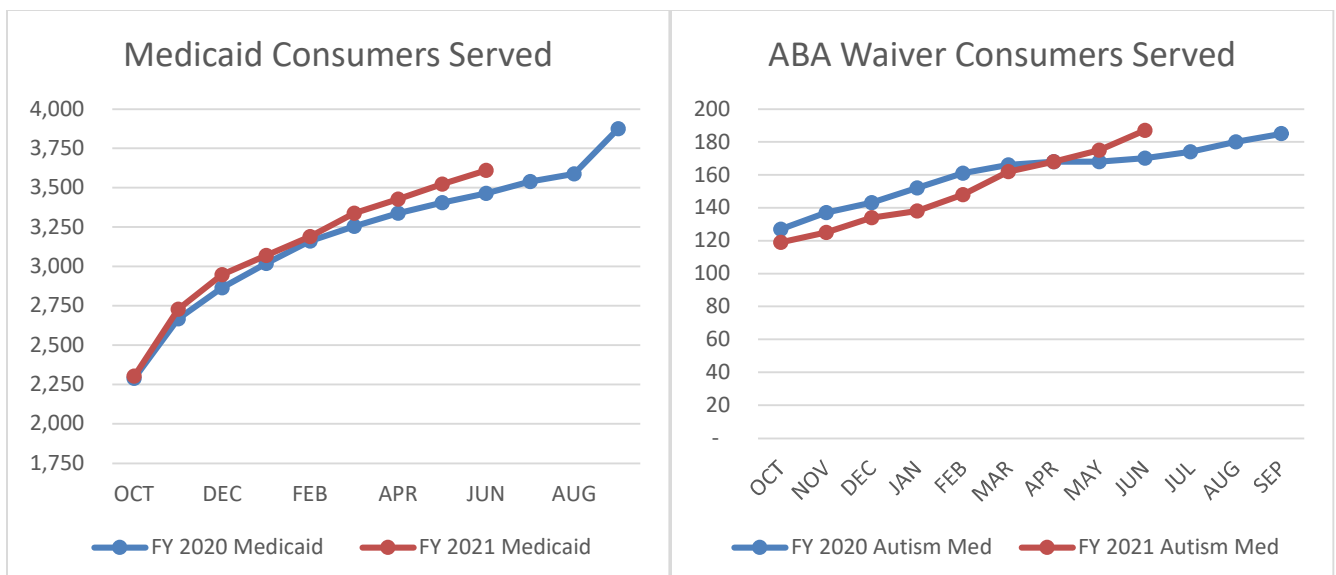
1. Washtenaw County Enrollees

A summary of FY 2021 Washtenaw County Medicaid and Healthy Michigan Enrollees is shown below:



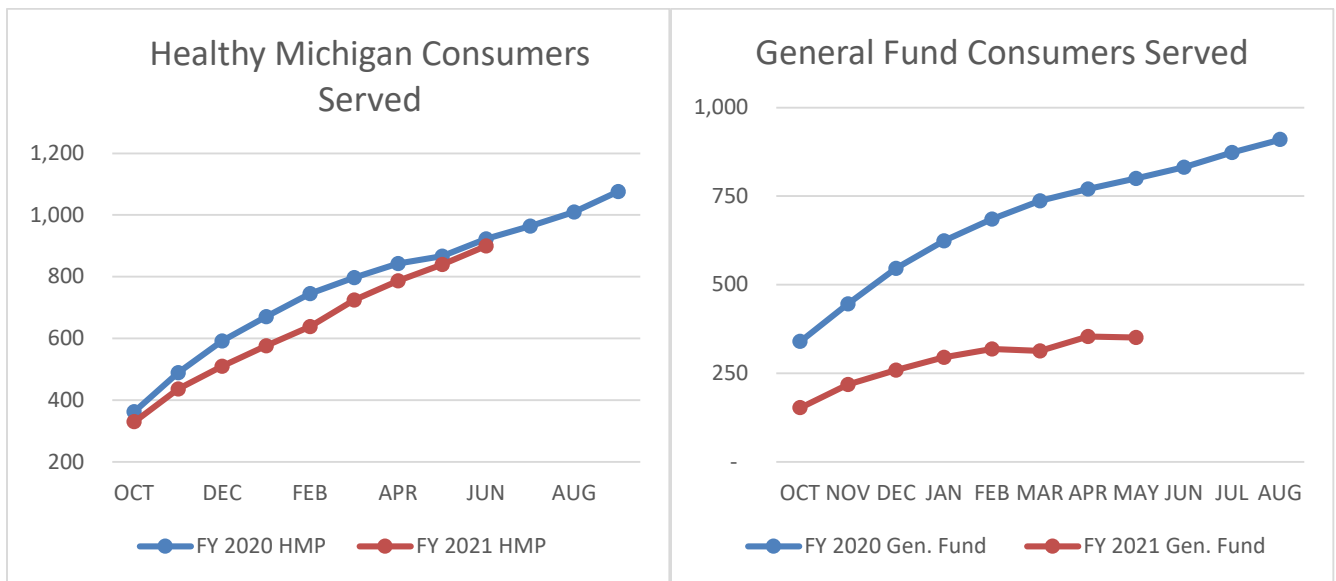
Washtenaw County Medicaid Enrollees were 36,914 in June 2021. This is a 5.32% increase from the same time last year (1,865 more enrollees than in June 2020). Healthy Michigan enrollment in June 2021 was 22,589. This is a 21.73% increase from the same time last year (4,033 more enrollees than in June 2020).

2. WCCMH Consumers Served to Date



Medicaid consumers served through June 2021 are 3,610. This is 147 more consumers than the prior year (3,463 consumers were served through June 2020).

ABA Waiver consumers served through June 2021 are 187. This is the same number of consumers as prior year (170 consumers were served through June 2020).



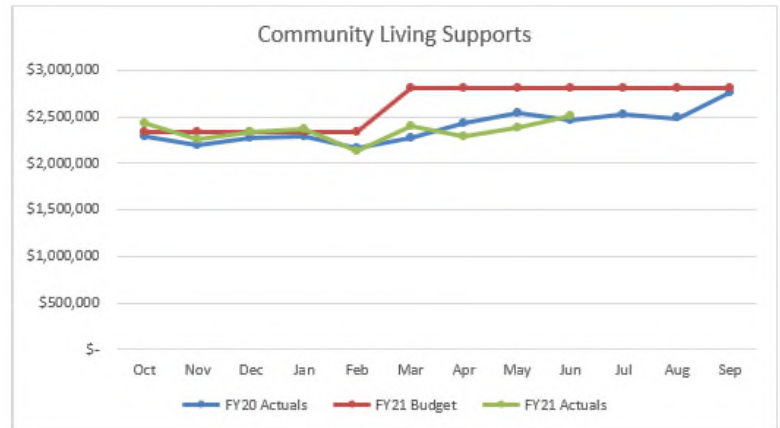
Healthy Michigan consumers served through June 2021 were 900. This is 22 less consumers than the same period last year.

General Fund consumers served through June 2021 were 410. This is 422 less consumers than the same period last year.

3. Financial Statement Highlights

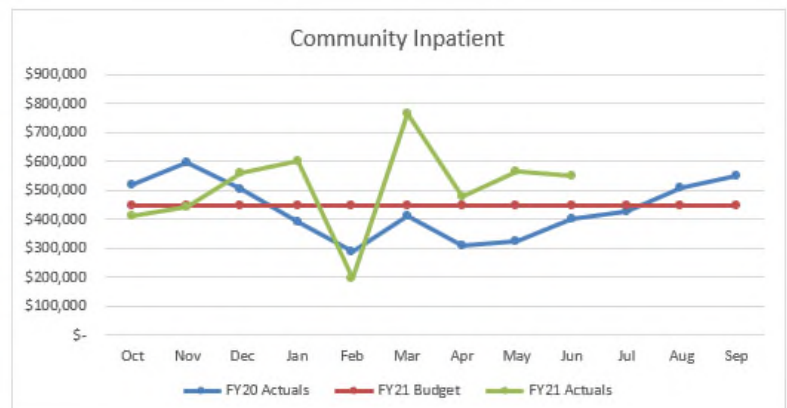
- a. CLS service costs to date are estimated to be \$21.9 Million and \$1.5 Million under budget. The costs year to date is .88% more than this time last year, primarily due to the temporary \$2.25 per hour direct care worker increase is included in the FY21 Actuals. The temporary increase has been extended through September 2021.

	FY20 Actuals	FY21 Budget	FY21 Actuals	YTD % Change
Oct	\$ 2,290,691	2,335,165	\$ 2,425,748	5.90%
Nov	2,198,453	2,335,165	2,264,774	4.49%
Dec	2,269,119	2,335,165	2,342,470	4.07%
Jan	2,287,654	2,335,165	2,364,068	3.88%
Feb	2,166,793	2,335,165	2,132,487	2.83%
Mar	2,276,977	2,804,524	2,397,224	3.24%
Apr	2,436,420	2,804,524	2,297,457	1.87%
May	2,535,453	2,804,524	2,381,083	0.78%
Jun	2,462,540	2,804,524	2,502,606	0.88%
Jul	2,518,980	2,804,524		
Aug	2,486,795	2,804,524		
Sep	2,762,607	2,804,524		



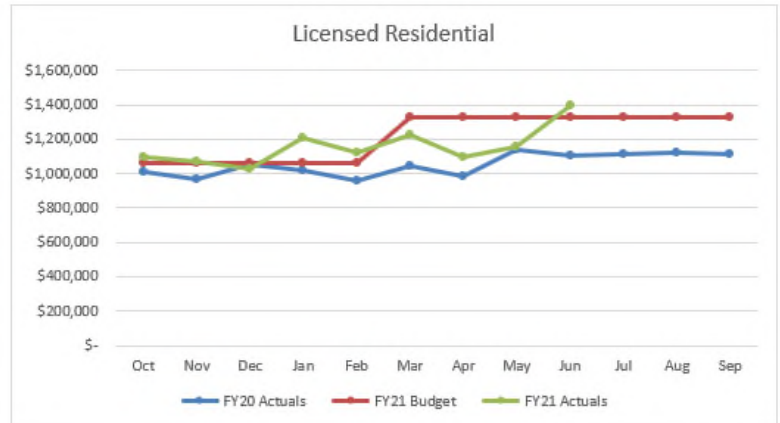
- b. Community Inpatient costs to date are \$4.5 Million. The costs year to date are 22.00% more than this time last year and \$545,000 over budget.

	FY20 Actuals	FY21 Budget	FY21 Actuals	YTD % Change
Oct	\$ 518,019	\$ 447,917	\$ 411,150	-20.63%
Nov	595,144	447,917	444,907	-23.10%
Dec	506,426	447,917	560,543	-12.53%
Jan	393,137	447,917	601,931	0.29%
Feb	290,304	447,917	194,823	-3.89%
Mar	411,873	447,917	767,313	9.79%
Apr	310,948	447,917	480,817	14.40%
May	323,671	447,917	567,208	20.28%
Jun	402,174	447,917	548,208	22.00%
Jul	426,500	447,917		
Aug	512,121	447,917		
Sep	550,126	447,917		



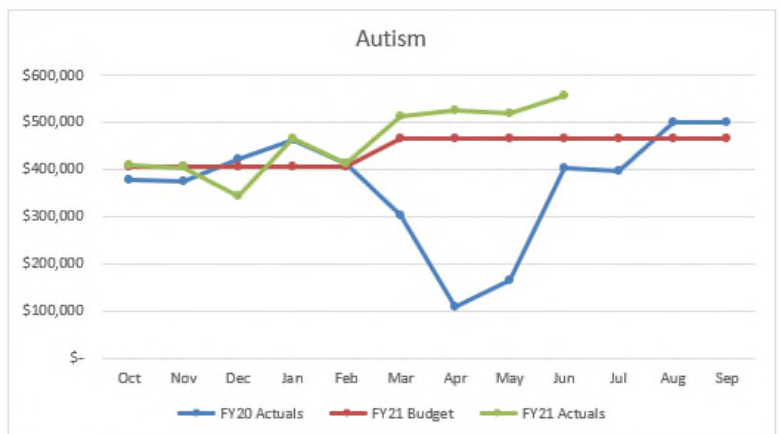
- c. Licensed Residential costs to date are \$10.4 Million and \$533,000 under budget. The costs year to date are 11.89% more than this time last year and primarily due to the temporary \$2.25 per hour direct care worker increase. The temporary increase has been extended through September 2021.

	FY20 Actuals	FY21 Budget	FY21 Actuals	YTD % Change
Oct	\$ 1,011,548	\$ 1,058,350	\$ 1,093,095	8.06%
Nov	968,709	1,058,350	1,073,263	9.40%
Dec	1,055,503	1,058,350	1,028,927	5.25%
Jan	1,022,251	1,058,350	1,211,062	8.58%
Feb	959,842	1,058,350	1,118,469	10.10%
Mar	1,047,035	1,327,021	1,225,127	11.30%
Apr	987,543	1,327,021	1,093,521	11.22%
May	1,137,635	1,327,021	1,159,115	9.92%
Jun	1,106,832	1,327,021	1,399,305	11.89%
Jul	1,114,786	1,327,021		
Aug	1,124,986	1,327,021		
Sep	1,109,577	1,327,021		



- d. Applied Behavior Analysis/Autism service costs to date are \$4.1 Million. The costs year to date are 36.98% more than this time last year due to pandemic related factors and \$185,000 over budget.

	FY20 Actuals	FY21 Budget	FY21 Actuals	YTD % Change
Oct	\$ 377,299	\$ 405,991	\$ 408,109	8.17%
Nov	376,345	405,991	404,662	7.85%
Dec	421,658	405,991	342,956	-1.67%
Jan	461,206	405,991	464,654	-0.99%
Feb	412,563	405,991	410,998	-0.86%
Mar	301,850	464,421	512,641	8.21%
Apr	107,090	464,421	525,526	24.88%
May	165,001	464,421	518,865	36.80%
Jun	404,100	464,421	558,191	36.98%
Jul	397,582	464,421		
Aug	500,967	464,421		
Sep	501,047	464,421		



- e. Internal staffing expenses are trending under budget due to medical benefit savings for the first quarter and 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 \$5.2 Million through June.
- c. By funding source, HMP is showing a deficit of \$543,000 through June.
- d. Combined, the PIHP surplus is \$4.7 Million through June.
- e. CARES Act funding related to Direct Care Worker wages 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 \$1.7 Million.

6. Local Key Points

- a. The majority of Local Funding comes from Washtenaw County.
- b. Local Funds are showing a surplus of \$43,000 through June 2021.
- 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 2021.

Washtenaw County Community Mental Health
FINANCIAL PERFORMANCE BY FUND SOURCE
 JUNE 2021 FYTD

ATTACHMENT #2
AUGUST 2021

	<u>Total</u>
Medicaid **	
Revenue	
B & B3	\$ 32,595,850
HSW	18,954,192
DCW	5,503,883
Child Waiver/SED Waiver	800,891
Autism	3,662,854
Prior Year Adjustments	-
Care for Caïd	18,809
Total Medicaid Revenue	<u>\$ 61,536,478</u>
Total Medicaid Expense	\$ 56,253,946
Medicaid Surplus/(Deficit)	<u><u>\$ 5,282,532</u></u>

Healthy Michigan **	
Revenue	\$ 4,384,407
Expense	4,928,383
Healthy MI Surplus/(Deficit)	<u><u>\$ (543,976)</u></u>

General Fund	
Revenue	
CMH Operations	\$ 2,904,322
CMH Operations Contra	-
GF Carryforward	175,491
Categorical	-
Redirect To Injectable Meds.	-
Funding Fr. Other Local Sources	50,480
Total General Fund Revenue	<u>\$ 3,130,293</u>
Total General Fund Expense	\$ 1,411,961
General Fund Surplus/(Deficit)	<u><u>\$ 1,718,332</u></u>

Injectable Meds	
Revenue	\$ 86,943
Expense	65,716
Inj. Meds. Surplus/(Deficit)	<u><u>\$ 21,227</u></u>

Grants And Contracts	
Revenue	\$ 929,751
Expense	<u>929,751</u>

Washtenaw County Community Mental Health
FINANCIAL PERFORMANCE BY FUND SOURCE
 JUNE 2021 FYTD

ATTACHMENT #2
 AUGUST 2021

	Total
Grants & Cont. Surplus/(Deficit)	\$ -

CMHSP To CMHSP

Revenue	\$ 494,526
Redirect to GF	(50,480)
Expense	444,046
CMHSP to CMHSP Surplus/(Deficit)	\$ -

Local

Revenue	\$ 1,159,689
Expense	1,116,642
Local Surplus/(Deficit)	\$ 43,047

Private Grant & All NOR

Revenue	\$ 184,559
Expense	184,559
Priv. Grant & NOR Surplus/(Deficit)	\$ -

Grand Total

Revenue	\$ 72,060,472
Expense	65,539,310
Grand Total Surplus/(Deficit)	\$ 6,521,162

** Denotes PIHP Medicaid Subcontracting Agreement Funds

PIHP Medicaid Surplus/(Deficit)	\$ 4,759,783
WCCMH Surplus/(Deficit)	1,761,379
	\$ 6,521,162

**Washtenaw County Community Mental Health
Budget to Actuals
For Eight Months Ending June 30, 2021**

Current Fiscal Year					
	FY 2021 Amended Budget	FY 2021 Amended Budget YTD	FY 2021 YTD Actuals	YTD Actuals Over/(Under) YTD Budget	% O(U)
<u>Operating Revenue</u>					
PIHP Revenue					
Medicaid Capitation:					
Medicaid (b) & 1115i	\$ 42,678,933	\$ 32,009,200	\$ 32,595,850	\$ 586,650	1.83%
HSW	24,674,716	18,506,037	18,954,192	448,155	2.42%
Children & SED Waivers	894,097	670,573	800,891	130,318	19.43%
Healthy Michigan Capitation	5,875,998	4,406,999	4,384,407	(22,591)	-0.51%
Autism Capitation	4,657,841	3,493,381	3,662,854	169,473	4.85%
CARES Act DCW	7,297,312	5,472,984	5,503,883	30,899	0.56%
TOTAL PIHP Revenue	\$ 86,078,897	\$ 64,559,173	\$ 65,902,076	\$ 1,342,903	2.08%
MDHHS Revenue					
State General Funds	\$ 4,047,922	\$ 3,035,942	\$ 3,079,813	\$ 43,872	1.45%
Grants & Earned Contracts	1,779,812	1,334,859	1,063,475	(271,384)	-20.33%
All Other Revenue					
County Appropriation	\$ 1,748,770	\$ 1,311,578	\$ 670,572	\$ (641,006)	-48.87%
Project Revenue	782,545	586,909	508,526	(78,383)	-13.36%
All Other	1,917,652	1,438,239	1,756,111	317,872	22.10%
TOTAL Operating Revenue	\$ 96,355,598	\$ 72,266,699	\$ 72,980,573	\$ 713,875	0.99%
<u>Operating Expenses</u>					
Administrative Expenses					
General Administration	\$ 5,624,552	\$ 4,218,414	\$ 3,716,243	\$ (502,171)	-11.90%
Program Administration	3,304,826	2,478,620	2,113,713	(364,906)	-14.72%
Residential Services					
Community Living Supports	\$ 31,307,490	\$ 23,480,618	\$ 21,928,916	\$ (1,551,701)	-6.61%
Licensed Residential	14,580,900	10,935,675	10,401,883	(533,792)	-4.88%
Outpatient Services					
Autism Services	\$ 5,280,900	\$ 3,960,675	\$ 4,146,602	\$ 185,927	4.69%
Case Management	5,221,985	3,916,489	3,136,078	(780,411)	-19.93%
Supports Coordination	2,535,741	1,901,806	1,725,786	(176,019)	-9.26%
Skill Building	4,256,172	3,192,129	1,804,581	(1,387,548)	-43.47%
Supported Employment	1,364,871	1,023,653	988,243	(35,410)	-3.46%
Psychiatry	2,770,122	2,077,592	2,003,978	(73,614)	-3.54%
Nursing Services	2,353,003	1,764,752	1,498,479	(266,273)	-15.09%
Therapy Services	1,875,621	1,406,716	1,273,254	(133,462)	-9.49%
All Other	7,441,765	5,581,324	5,063,998	(517,325)	-9.27%
Other Expenses					
Community Inpatient	\$ 5,375,000	\$ 4,031,250	\$ 4,576,900	\$ 545,650	13.54%
Local Matches & Shelter	1,282,838	962,129	1,067,760	105,631	10.98%
Grants & Earned Contracts	1,779,812	1,334,859	1,012,995	(321,864)	-24.11%
TOTAL Operating Expenses	\$ 96,355,598	\$ 72,266,699	\$ 66,459,411	\$ (5,807,287)	-8.04%
Revenue Over/(Under) Expenses	-	-	6,521,162	6,521,162	

Washtenaw County Community Mental Health
Budget to Actuals
For Eight Months Ending June 30, 2021

Prior Year Comparison				
	FY 2021 YTD Actuals	FY 2020 Prior YTD Actuals	YTD Actuals Over/(Under) Prior YTD Actuals	% O(U)
<u>Operating Revenue</u>				
PIHP Revenue				
Medicaid Capitation:				
Medicaid (b) & 1115i	\$ 32,595,850	\$ 31,909,198	\$ 686,651	2.15%
HSW	18,954,192	19,142,827	(188,635)	-0.99%
Children & SED Waivers	800,891	763,254	37,637	4.93%
Healthy Michigan Capitation	4,384,407	3,772,585	611,822	16.22%
Autism Capitation	3,662,854	3,653,821	9,033	0.25%
CARES Act DCW	5,503,883	-	5,503,883	
TOTAL PIHP Revenue	\$ 65,902,076	\$ 59,241,685	\$ 6,660,391	11.24%
MDHHS Revenue				
State General Funds	\$ 3,079,813	\$ 2,746,773	\$ 333,040	12.12%
Grants & Earned Contracts	1,063,475	1,107,075	(43,600)	-3.94%
All Other Revenue				
County Appropriation	\$ 670,572	\$ 628,004	\$ 42,568	6.78%
Project Revenue	508,526	345,941	162,585	47.00%
All Other	1,756,111	1,780,625	(24,513)	-1.38%
TOTAL Operating Revenue	\$ 72,980,573	\$ 65,850,102	\$ 7,130,472	10.83%
<u>Operating Expenses</u>				
Administrative Expenses				
General Administration	\$ 3,716,243	\$ 3,760,796	\$ (44,553)	-1.18%
Program Administration	2,113,713	2,327,425	(213,712)	-9.18%
Residential Services				
Community Living Supports	\$ 21,928,916	\$ 21,168,525	\$ 760,392	3.59%
Licensed Residential	10,401,883	9,296,898	1,104,985	11.89%
Outpatient Services				
Autism Services	\$ 4,146,602	\$ 3,027,113	\$ 1,119,489	36.98%
Case Management	3,136,078	3,263,142	(127,064)	-3.89%
Supports Coordination	1,725,786	1,492,334	233,453	15.64%
Skill Building	1,804,581	3,593,562	(1,788,981)	-49.78%
Supported Employment	988,243	1,207,668	(219,425)	-18.17%
Psychiatry	2,003,978	1,888,492	115,485	6.12%
Nursing Services	1,498,479	1,549,671	(51,192)	-3.30%
Therapy Services	1,273,254	1,273,966	(712)	-0.06%
All Other	5,063,998	4,574,141	489,858	10.71%
Other Expenses				
Community Inpatient	\$ 4,576,900	\$ 3,751,697	\$ 825,203	22.00%
Local Matches & Shelter	1,067,760	1,099,429	(31,669)	-2.88%
Grants & Earned Contracts	1,012,995	1,049,827	(36,833)	-3.51%
TOTAL Operating Expenses	\$ 66,459,411	\$ 64,324,687	\$ 2,134,724	3.32%
Revenue Over/(Under) Expenses	6,521,162	1,525,415	4,995,748	

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

Prior Year FY 2020	<u>October</u>	<u>November</u>	<u>December</u>	<u>January</u>	<u>February</u>	<u>March</u>	<u>April</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>August</u>	<u>September</u>
Total Revenue	\$ 6,420,879	\$ 12,762,586	\$ 19,557,248	\$ 27,034,137	\$ 33,790,813	\$ 41,347,119	\$ 48,354,984	\$ 55,979,589	\$ 64,750,232	\$ 72,489,244	\$ 80,554,716	
Total Expense	\$ 7,061,564	\$ 13,824,563	\$ 21,701,361	\$ 28,573,303	\$ 35,391,004	\$ 42,808,785	\$ 49,403,569	\$ 56,153,455	\$ 63,224,817	\$ 70,893,620	\$ 77,864,354	
Surplus / (Deficit)	\$ (640,685)	\$ (1,061,977)	\$ (2,144,113)	\$ (1,539,166)	\$ (1,600,191)	\$ (1,461,666)	\$ (1,048,585)	\$ (173,866)	\$ 1,525,415	\$ 1,595,624	\$ 2,690,362	\$ -
Current Year FY 2021	<u>October</u>	<u>November</u>	<u>December</u>	<u>January</u>	<u>February</u>	<u>March</u>	<u>April</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>August</u>	<u>September</u>
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			
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			
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	\$ -	\$ -	\$ -

ACTION REQUESTED: To approve the following contract(s):

BACKGROUND:

1. Christ Centered Homes, Inc.: will provide Licensed Residential Services (Personal Care/CLS) for applicable WCCMH I/DD clients.

Service Contracts

Contractor	Funding	Estimated Budget	Contract Term	Service Description
1. Christ Centered Homes, Inc.	Medicaid	Per Consumer Authorizations	July 6, 2021- September 30, 2021	Licensed Residential Services (Personal Care/CLS)

RECOMMENDATIONS: To approve the contract(s) listed above.

Washtenaw County Community Mental Health
WCCMH

Fiscal Year 2022
Annual Operating Budget

Pg 2	FY 2022 Budgeted Revenues and Expenditures
Pg 3	FY 2022 Administrative Budget Details
Pg 4	FY 2022 Direct Services Budget Details
Pg 5	FY 2022 Contracted Services Budget Details
Pg 6	FY 2022 Budget by Fund Source
Pg 7	FY 2022 Details

Washtenaw County Community Mental Health
Fiscal Year 2022 Budget

	FY 2022 Proposed Budget	FY 2021 Final Budget	FY 2022 Budget Over / (Under) FY 2021 Budget	FY 2021 Projected YE	FY 2022 Budget Over / (Under) FY 2021 Projections
Revenues					
Medicaid (b) & 1115i	\$ 43,503,203	\$ 42,678,933	\$ 824,270	\$ 42,542,403	\$ 960,800
HSW Medicaid	25,102,700	24,674,716	427,984	25,000,000	102,700
Healthy Michigan Plan	7,000,000	5,875,998	1,124,002	5,827,111	1,172,889
Autism Medicaid	6,000,000	4,657,841	1,342,159	4,850,000	1,150,000
Children's & SED Waivers	894,097	894,097	-	1,063,015	(168,918)
CARES Act DCW	-	7,297,312	(7,297,312)	7,297,312	(7,297,312)
State General Funds	4,235,050	4,047,922	187,128	4,047,922	187,128
Funding From Washtenaw County	1,748,770	1,748,770	-	1,748,770	-
Grants and Earned Contracts Incl. OBRA	1,779,812	1,779,812	-	1,779,812	-
CMHPSM/Affiliate & U of M Billings	847,984	782,545	65,439	674,761	173,223
All Other	1,917,652	1,917,652	-	2,309,242	(391,590)
Cost Settlements				(7,101,960)	
Total Revenues	\$ 93,029,268	\$ 96,355,598	\$ (3,326,330)	\$ 90,038,388	\$ (4,111,080)
Expenses					
Administrative Expenses					
WCCMH Administration	\$ 6,279,421	\$ 5,624,552	\$ 654,869	\$ 5,302,999	\$ 976,422
Total Administrative Expenses	\$ 6,279,421	\$ 5,624,552	\$ 654,869	\$ 5,302,999	\$ 976,422
Direct Services					
WCCMH Direct Services	\$ 26,738,177	\$ 26,715,107	\$ 23,070	\$ 23,897,307	\$ 2,840,870
Total Direct Services	\$ 26,738,177	\$ 26,715,107	\$ 23,070	\$ 23,897,307	\$ 2,840,870
Contracted Services					
WCCMH Contracted Services	\$ 56,949,020	\$ 60,953,289	\$ (4,004,269)	\$ 57,775,432	\$ (826,412)
Total Contracted Services	\$ 56,949,020	\$ 60,953,289	\$ (4,004,269)	\$ 57,775,432	\$ (826,412)
Other Non-Service Costs					
Medicaid Local Match	\$ 689,948	\$ 689,948	\$ -	\$ 689,948	\$ -
State Facilities Local Contribution	512,890	512,890	-	512,890	-
Shelter	80,000	80,000	-	80,000	-
Total Other Non-Service Costs	\$ 1,282,838	\$ 1,282,838	\$ -	\$ 1,282,838	\$ -
Grants And Contracts	\$ 1,779,812	\$ 1,779,812	\$ -	\$ 1,779,812	\$ -
Total Expenses	\$ 93,029,268	\$ 96,355,598	\$ (3,326,330)	\$ 90,038,388	\$ 2,990,880
Revenue Over/(Under) Expenses	0	0	0	0	\$ (7,101,960)

**Washtenaw County Community Mental Health
Fiscal Year 2022 Budget**

WCCMH Administrative Expenses

	FY 2022 Budget	FY 2021 Final Budget	FY 2022 Budget Over / (Under) FY 2021 Budget	FY 2021 Projected YE	FY 2022 Budget Over / (Under) FY 2021 Projections
Administration	\$ 465,936	\$ 375,936	\$ 90,000	\$ 340,649	\$ 125,287
(a)(b) Compliance	140,607	151,380	(10,773)	145,000	\$ (4,393)
(a) Finance	1,005,892	905,780	100,112	877,289	\$ 128,603
Human Resources	154,772	139,799	14,973	140,294	\$ 14,478
(a) Information Management	145,441	184,052	(38,611)	86,750	\$ 58,691
(a) Intake/Enrollment	754,548	776,913	(22,365)	433,583	\$ 320,965
(a) Member Services	220,989	166,740	54,249	166,586	\$ 54,403
(a) Network Management	652,627	477,129	175,498	430,116	\$ 222,511
(a) Quality/Performance Imp.	219,696	179,952	39,744	176,186	\$ 43,510
(b) Recipient Rights	1,357,014	1,250,905	106,109	1,234,369	\$ 122,645
(a) Utilization Review	1,161,899	1,015,966	145,933	1,272,177	\$ (110,278)
TOTAL	\$ 6,279,421	\$ 5,624,552	\$ 654,869	\$ 5,302,999	\$ 976,422

- (a) All or a portion of this administrative category is a delegated function of the PIHP.
- (b) Revenue contracts exist with Affiliate Partner CMH's for the purchase of these administrative functions.

**Washtenaw County Community Mental Health
Fiscal Year 2022 Budget**

WCCMH Direct Service Expenses

	FY 2022 Budget	FY 2021 Final Budget	FY 2022 Budget Over / (Under) FY 2021 Budget	FY 2021 Projected YE	FY 2022 Budget Over / (Under) FY 2021 Projections
Program Support	\$ 3,304,826	\$ 3,304,826	\$ -	\$ 2,885,628	\$ 419,198
ACT	1,502,980	1,404,402	98,578	1,502,971	9
Behavior Management	669,922	640,863	29,059	565,663	104,259
Crisis Stabilization	1,259,450	801,300	458,150	1,137,983	121,467
Home Based	1,280,592	1,178,520	102,072	1,220,660	59,932
Jail Services	597,112	597,112	0	527,936	69,176
Jail Diversion	63,800	43,915	19,885	60,155	3,645
Nursing	2,281,750	2,203,003	78,747	2,460,201	(178,451)
Nursing Home Services	132,748	125,991	6,757	109,000	23,748
Outpatient	2,088,044	1,868,121	219,923	1,798,621	289,423
Peer Supports	603,673	579,145	24,528	553,110	50,563
Psychiatric Services	2,861,899	2,770,122	91,777	2,417,990	443,909
Skill Building	1,172,615	2,001,113	(828,498)	872,616	299,999
Specialty Services	256,812	256,812	0	194,133	62,679
Supported Employment	928,965	1,045,011	(116,046)	758,261	170,704
Supports Coordination	2,806,291	2,535,741	270,550	2,285,700	520,591
Targeted Case Management	4,758,950	5,221,985	(463,035)	4,387,931	371,019
Wraparound	167,748	137,125	30,623	158,748	9,000
TOTAL	\$ 26,738,177	\$ 26,715,107	\$ 23,070	\$ 23,897,307	\$ 2,840,870

**Washtenaw County Community Mental Health
Fiscal Year 2022 Budget**

WCCMH Contracted Service Expenses

	FY 2022 Budget	FY 2021 Final Budget	FY 2022 Budget Over / (Under) FY 2021 Budget	FY 2021 Projected YE	FY 2022 Budget Over / (Under) FY 2021 Projections
Access/Assessments	\$ 50,000	\$ 50,000	\$ -	\$ 99,200	\$ (49,200)
Autism Services	5,520,000	5,280,900	239,100	5,826,603	(306,603)
Community Inpatient	6,100,000	5,375,000	725,000	6,043,000	57,000
Community Living Supports	26,750,000	31,307,490	(4,557,490)	28,705,000	(1,955,000)
Licensed Facilities	13,000,000	14,580,900	(1,580,900)	13,900,000	(900,000)
Nursing	150,000	150,000	-	125,000	25,000
Outpatient	7,500	7,500	-	7,500	-
Peer Supports/Drop-In	315,000	288,497	26,503	215,000	100,000
PERS	150,000	150,000	-	148,212	1,788
PSR/Clubhouse	450,000	418,083	31,917	190,000	260,000
Respite	650,000	620,000	30,000	575,000	75,000
Skill Building	3,121,520	2,255,059	866,461	1,473,917	1,647,603
Specialty Services	30,000	30,000	-	110,000	(80,000)
Supported Employment	535,000	319,860	215,140	132,000	403,000
All Other Contracted Services	120,000	120,000	-	225,000	(105,000)
TOTAL	\$ 56,949,020	\$ 60,953,289	\$ (4,004,269)	\$ 57,775,432	\$ (826,412)

Washtenaw County Community Mental Health
Fiscal Year 2022 Budget by Fund Source

	Total
Medicaid **	
Revenue	
State Plan, B3, Autism & Waivers	\$ 75,500,000
Total Medicaid Revenue	\$ 75,500,000
Expense	
Service Costs	\$ 75,500,000
Total Medicaid Expense	\$ 75,500,000
Medicaid Surplus/(Deficit)	\$ -
Healthy Michigan Plan **	
Revenue	
Healthy Michigan Plan	\$ 7,000,000
Total Healthy Michigan Revenue	\$ 7,000,000
Expense	
Service Costs	\$ 7,000,000
Total Healthy Michigan Expense	\$ 7,000,000
Total Healthy Michigan Surplus/(Deficit)	\$ -
** Denotes PIHP Medicaid Subcontracting Agreement Funds	
General Fund	
Revenue	
CMH Operations	\$ 4,235,050
Funding from Other Sources	-
Total General Fund Revenue	\$ 4,235,050
Total General Fund Expense	\$ 4,235,050
General Fund Surplus/(Deficit)	\$ -
Grants and Contracts	
Revenue	\$ 3,697,464
Expense	3,697,464
Grants & Cont. Surplus/(Deficit)	\$ -
Local	
Revenue	\$ 1,748,770
Expense	1,748,770
Local Surplus/(Deficit)	\$ -
CMHSP to CMHSP	
Revenue	\$ 847,984
Expense	847,984
All Other Surplus/(Deficit)	\$ -
Grand Total	
Revenue	\$ 93,029,268
Expense	93,029,268
Grand Total Surplus/(Deficit)	\$ -

Washtenaw County Community Mental Health
Fiscal Year 2022 Budget

REVENUES:

Medicaid:

- Medicaid (b), 1115i and Habilitation Supports Waiver (HSW) is held relatively flat from FY21 to FY22.
- Healthy Michigan Plan (HMP) revenue includes a 20% increase in anticipated need.
- Autism Medicaid revenue includes a 30% increase in anticipated need.
- Both HMP and Autism programs have been historically under-funded and other Medicaid funds must be used to offset these programs costs.
- The FY21 Budget includes \$7.3 million in CARES Act funding directed from the State to aide-level workers within the CMH system. The continuation of these funds is still unknown for the FY22 Budget. Therefore, no revenue is budgeted at this time for the continuation of the \$2.25 per hour direct care worker wages pass-through.
- At this time, the PIHP Board has not yet passed a FY22 Budget, the revenues estimated in the WCCMH FY22 Budget are the projected need and there is an understanding at this time that those needs can be met.

State General Funds:

- State General Fund (GF) revenue for FY22 includes a planned increased in the State appropriation to WCCMH.
- There will be carry-forward dollars available from the FY21 year-end that will be worked into the FY22 Budget at a later date.

All Other:

- All other revenue projections remain consist with years passed.

EXPENSES:

Internal Staffing:

- Planned staffing levels have been budgeted at full cost.
- Due to unplanned budget savings in FY21, the internal staffing costs were much less than anticipated. WCCMH continues to put much resource into recruitment and retention of staff and will look to expand these efforts with the help of County Administration and Labor Partners in FY22.

- A significant reallocation of structural resources is included in the FY22 Budget. The plan includes a permanent reduction in Vocational Services staffing currently in lay off status due to lack of work. In turn, 15.5 clinical positions will be brought back on-line to provide additional resources to the Intellectual and/or Developmental Disabilities, Adults with Serious Mental Illness, and Youth & Family Programs. While these additional clinical resources do not fully meet the staffing needs of the organization, it will offer significant improvement to caseloads and current service demands.
- As more revenue information comes available, such as certified Medicaid rates and CCBHC Demonstration funding, the need for further staffing resources will be assessed.

County Cost Allocation Plan (CAP):

- At this time, no Cost Allocation Plan information has been made available to WCCMH. The budget includes charges consistent with FY21 amounts.

Contracted Services:

- Contracted service projections have been made consistent with pre-pandemic utilization.
- The FY21 Budget includes \$7.3 million in CARES Act funding as described in the revenue section. Services provided by aide-level staff include, Community Living Supports (both un-licensed and licensed settings), a subset of Autism services, vocational programming, and respite. At this time, the continuation of the \$2.25 per hour direct care worker wages pass-through is still unknown for FY22 and has not been included in the budget as presented. Should this change in the coming months, an amendment will be presented to reflect this.

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
FY2022 Budget

ATTACHMENT #4B
AUGUST 2021

Service Contracts

Applied Behavioral Analysis Services

	<u>Start Date</u>	<u>End Date</u>
ABA Insight	10/1/2021	09/30/2022
ABA Pathways, LLC	10/1/2021	09/30/2022
Autism Spectrum Therapies, LLC dba Total Spectrum (formerly known as Novel Responses, Inc.)	10/1/2021	09/30/2022
Centria Healthcare	10/1/2021	09/30/2022
Creating Brighter Futures	10/1/2021	09/30/2022
EMU Autism Collaborative Center	10/1/2021	09/30/2022
Florida Autism Center, LLC dba Blue Sprig Pediatrics (formerly known as Momentum Autism Therapy Services dba Therapy Core)	10/1/2021	09/30/2022
Judson Center	10/1/2021	09/30/2022
Metropolitan Speech, Sensory & ABA Centers	10/1/2021	09/30/2022
Michigan Learning Community, LLC	10/1/2021	09/30/2022
Residential Options, LLC	10/1/2021	09/30/2022
Strident Healthcare	10/1/2021	09/30/2022

Clubhouse/Drop-In Center

Fresh Start	10/1/2021	09/30/2022
Full Circle Drop-In Center	10/1/2021	09/30/2022
Training & Treatment Innovations, Inc.	10/1/2021	09/30/2022

Community Inpatient Hospitals/Partial Hospitalizations

BCA of Detroit, LLC dba StoneCrest Center	10/1/2021	09/30/2022
Forest View Hospital	10/1/2021	09/30/2022
Harbor Oaks	10/1/2021	09/30/2022
Havenwyck Hospital	10/1/2021	09/30/2022
Havenwyck Hospital dba Cedar Creek Hospital	10/1/2021	09/30/2022
Hillsdale Medical Center	10/1/2021	09/30/2022
Madison Community Hospital dba Samaritan Behavioral Center	10/1/2021	09/30/2022
Mercy Memorial Hospital	10/1/2021	09/30/2022
New Oakland Family Center	10/1/2021	09/30/2022
Oakland Physician Medical Center dba Pontiac General Hospital	10/1/2021	09/30/2022
The Regents of The University of Michigan	10/1/2021	09/30/2022
Trinity Health-Michigan	10/1/2021	09/30/2022

Community Living Supports- Unlicensed

Avalon Housing	10/1/2021	09/30/2022
CABB Community Supports, LLC	10/1/2021	09/30/2022
CHS Group, LLC	10/1/2021	09/30/2022
Community Residence Corporation	10/1/2021	09/30/2022
ExpertCare	10/1/2021	09/30/2022
Friends Who Care	10/1/2021	09/30/2022
Full Life Independence	10/1/2021	09/30/2022
His Eye Is on the Sparrow	10/1/2021	09/30/2022
Home Sweet Home Care Services	10/1/2021	09/30/2022

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
FY2022 Budget

ATTACHMENT #4B
AUGUST 2021

INI Group, Inc.	10/1/2021	09/30/2022
JOAK American Homes	10/1/2021	09/30/2022
JYB Homecare, LLC	10/1/2021	09/30/2022
Michigan Agency with Choice	10/1/2021	09/30/2022
Progressive Residential Services	10/1/2021	09/30/2022
Renaissance Community Homes, Inc.	10/1/2021	09/30/2022
Saints, Inc.	10/1/2021	09/30/2022
Sharon Ragland-Keys Enterprises, Inc. dba College, Nannies, & Tutors	10/1/2021	09/30/2022
Specially Made Co. LLC	10/1/2021	09/30/2022
Spectrum Community Services	10/1/2021	09/30/2022
Synod Community Services	10/1/2021	09/30/2022
Y-PCS Group, Inc.	10/1/2021	09/30/2022

Crisis Residential

Beacon Specialized Living Services	10/1/2021	09/30/2022
Synod Community Services	10/1/2021	09/30/2022

Fiscal Intermediaries

Community Living Network	10/1/2021	09/30/2022
Guardian Trac LLC	10/1/2021	09/30/2022

Licensed Residential Services

Adult Learning Systems	10/1/2021	09/30/2022
Beacon Specialized Living Services	10/1/2021	09/30/2022
CBI Rehabilitation Services, Inc.	10/1/2021	09/30/2022
Christ Centered Homes, Inc.	10/1/2021	09/30/2022
CHS Group, LLC.	10/1/2021	09/30/2022
Courtyard Manor of Wixom, Inc.	10/1/2021	09/30/2022
Flatrock Manor	10/1/2021	09/30/2022
Henlyn Care	10/1/2021	09/30/2022
Hope Network Behavioral Health Services	10/1/2021	09/30/2022
Hope Network West Michigan	10/1/2021	09/30/2022
JOAK American Homes	10/1/2021	09/30/2022
Oconomowoc Developmental Training Center	10/1/2021	09/30/2022
Prader Willi Homes of Oconomowoc, LLC	10/1/2021	09/30/2022
Progressive Residential Services	10/1/2021	09/30/2022
Resilient Life Care (formerly known as Rainbow Rehabilitation Centers)	10/1/2021	09/30/2022
Renaissance Community Homes, Inc.	10/1/2021	09/30/2022
Renaissance House, Inc.	10/1/2021	09/30/2022
Saints, Inc.	10/1/2021	09/30/2022
Spectrum Community Services	10/1/2021	09/30/2022
St. Louis Center	10/1/2021	09/30/2022
Synod Community Services	10/1/2021	09/30/2022
Toepfer Home	10/1/2021	09/30/2022
Turning Leaf Behavioral Health Services	10/1/2021	09/30/2022
Umbrellex Behavioral Health Services	10/1/2021	09/30/2022

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
FY2022 Budget

ATTACHMENT #4B
AUGUST 2021

Pharmacy/Enhanced Pharmacy

CareLinc Medical Equipment & Supply Co., LLC	10/1/2021	09/30/2022
Genoa Healthcare, LLC	10/1/2021	09/30/2022
Nutritional Healing of Ann Arbor	10/1/2021	09/30/2022
Pharmacy Solutions	10/1/2021	09/30/2022

Private Duty Nursing

Elite Medical Staffing	10/1/2021	09/30/2022
Friends Who Care	10/1/2021	09/30/2022
HealthCall of Detroit	10/1/2021	09/30/2022

Respite/Respite Camps

CABB Community Supports, LLC	10/1/2021	09/30/2022
Chasing Summer	10/1/2021	09/30/2022
CHS Group, LLC	10/1/2021	09/30/2022
Community Living Network	10/1/2021	09/30/2022
Eagle Village	10/1/2021	09/30/2022
ExpertCare	10/1/2021	09/30/2022
Friends Who Care (Skilled Respite)	10/1/2021	09/30/2022
Guardian Trac	10/1/2021	09/30/2022
Home Sweet Home Cares Services, LLC	10/1/2021	09/30/2022
Indian Trails Camp dba IKUS Life Enrichment Services	10/1/2021	09/30/2022
Judson Center	10/1/2021	09/30/2022
Just Us Club	10/1/2021	09/30/2022
JYB Homecare	10/1/2021	09/30/2022
Methodist Children's Home Society (formerly known as Fowler Center)	10/1/2021	09/30/2022
Michigan Agency with Choice, LLC	10/1/2021	09/30/2022
St. Francis Camp on the Lake	10/1/2021	09/30/2022
St. Louis Center	10/1/2021	09/30/2022
Y-PCS Group, Inc.	10/1/2021	09/30/2022

Skill Building Services

CHS Group, LLC	10/1/2021	09/30/2022
Community Works Opportunities	10/1/2021	09/30/2022
Just Us Club	10/1/2021	09/30/2022
Life Enrichment Academy	10/1/2021	09/30/2022
Work Skills Corporation	10/1/2021	09/30/2022

Specialty Services (OT/PT, Speech, Psychology, Treatment Planning, Etc.)

ABA Insight	10/1/2021	09/30/2022
ABA Pathways, LLC	10/1/2021	09/30/2022
Advanced Therapeutic Solutions	10/1/2021	09/30/2022
Creating Brighter Futures	10/1/2021	09/30/2022
EMU Autism Collaborative Center	10/1/2021	09/30/2022
Guardian Medical Monitoring	10/1/2021	09/30/2022

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
FY2022 Budget

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HealthCall of Detroit	10/1/2021	09/30/2022
Metropolitan Speech, Sensory & ABA Centers	10/1/2021	09/30/2022
Michigan State University Community Music School	10/1/2021	09/30/2022
Psych Resolutions	10/1/2021	09/30/2022
Sharon O'Bryan	10/1/2021	09/30/2022
Therapeutic Concepts, LLC	10/1/2021	09/30/2022

Supported Employment Services

CHS Group, LLC	10/1/2021	09/30/2022
Community Works Opportunities	10/1/2021	09/30/2022
Life Enrichment Academy	10/1/2021	09/30/2022
Work Skills Corporation	10/1/2021	09/30/2022

County of Financial Responsibility (Revenue)

Macomb County CMH	10/1/2021	09/30/2022
Pathways CMH	10/1/2021	09/30/2022

*****The contracts listed above have no budget associated with them because they are contingent upon consumer utilization.**

WCCMH Vocational Contracts

<u>Expense</u>	<u>Start Date</u>	<u>End Date</u>	<u>Budget</u>
A.M. Services, INC	10/1/2021	09/30/2022	\$25,000
American Building Services	10/1/2021	09/30/2022	\$20,720
Ann Arbor Rug & Carpet	10/1/2021	09/30/2022	\$9,200
Mobility Transportation Services, Inc.	10/1/2021	09/30/2022	\$5,000
Republic Waste	10/1/2021	09/30/2022	\$3,500
Vertex System	10/1/2021	09/30/2022	\$2,600

Revenue

Ace Hardware	10/1/2021	09/30/2022	***
Alpha House	10/1/2021	09/30/2022	***
Arbor Bridge Church	10/1/2021	09/30/2022	***
Barr, Anhut & Associates	10/1/2021	09/30/2022	***
Carlisle Wortman	10/1/2021	09/30/2022	***
Chinmaya Mission	10/1/2021	09/30/2022	***
Full Circle Community Center	10/1/2021	09/30/2022	***
Shelter Association of Washtenaw County	10/1/2021	09/30/2022	***
SourceAmerica	10/1/2021	09/30/2022	***
Washtenaw County Facilities Management	10/1/2021	09/30/2022	***
Washtenaw County Parks and Rec	10/1/2021	09/30/2022	***
Ypsilanti Senior Center	10/1/2021	09/30/2022	***
Ypsilanti Thrift Shop	10/1/2021	09/30/2022	***

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
FY2022 Budget

ATTACHMENT #4B
AUGUST 2021

***** The revenue is contingent upon the frequency of services provided by consumer vocational groups.**

Administrative Contracts

<u>Revenue Contracts</u>	<u>Start Date</u>	<u>End Date</u>	<u>Budget</u>
15 th District Court (Mental Health Court & Sobriety Court)	10/1/2021	09/30/2022	Per Budget
Blue Care Network	10/1/2021	09/30/2022	Per Budget
CMHPSM Medicaid Revenue Contract	10/1/2021	09/30/2022	Per Budget
Corner Health	10/1/2021	09/30/2022	Per Actual Cost
Hope Clinic	10/1/2021	09/30/2022	Per Actual Cost
Lenawee County CMH	10/1/2021	09/30/2022	Per Actual Cost
Livingston County CMH	10/1/2021	09/30/2022	Per Actual Cost
MDHHS (GF Contract)	10/1/2021	09/30/2022	Per Budget
Michigan Rehabilitation Services	10/1/2021	09/30/2022	Per Budget
Monroe County CMH	10/1/2021	09/30/2022	Per Actual Cost
Packard Health	10/1/2021	09/30/2022	Per Actual Cost
University of Michigan (ORR)	10/1/2021	09/30/2022	Per Actual Cost
Washtenaw County Sheriff's Office	10/1/2021	09/30/2022	\$297,034
Washtenaw County Children's Services	10/1/2021	09/30/2022	\$154,230
Washtenaw County Trial Court	10/1/2021	09/30/2022	\$85,000
<u>Medicaid/General Fund Expense Contracts</u>	<u>Start Date</u>	<u>End Date</u>	<u>Budget</u>
DHHS Liaison	10/1/2021	09/30/2022	\$68,050
Drug and Laboratory Disposal	10/1/2021	09/30/2022	\$2,500
Dummies on the Run	10/1/2021	09/30/2022	\$5,000
Griffin Pest Solutions	10/1/2021	09/30/2022	\$5,000
Human Resource Opportunities, Inc.	10/1/2021	09/30/2022	\$310,000
Michigan Association for Infant Mental Health	10/1/2021	09/30/2022	\$1,200
Michigan Green Cabs Ann Arbor, LLC	10/1/2021	09/30/2022	\$22,000
Michigan Rehabilitative Services	10/1/2021	09/30/2022	\$10,000
Monroe County CMH	10/1/2021	09/30/2022	Per Actual Cost
NAMI of Washtenaw County	10/1/2021	09/30/2022	\$31,000
Offsite, LLC	10/1/2021	09/30/2022	\$3,800
Relias Learning	10/1/2021	09/30/2022	\$44,883
Roslund Prestage & Company	10/1/2021	09/30/2022	\$13,100
Shelter Association of Washtenaw County	10/1/2021	09/30/2022	\$80,000
Toby's Instrument Shop	10/1/2021	09/30/2022	\$2,000
University Translators	10/1/2021	09/30/2022	\$30,000
UptoDate	10/1/2021	09/30/2022	\$6,545
<u>Millage Expense Contracts</u>	<u>Start Date</u>	<u>End Date</u>	<u>Budget</u>
Avalon	10/1/2021	09/30/2022	\$180,000
Full Circle Community Center	10/1/2021	09/30/2022	\$25,000
NAMI	10/1/2021	09/30/2022	\$158,400

Washtenaw County Community Mental Health
Service and Administrative Contracts and Leases
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PCE Systems	10/1/2021	09/30/2022	\$117,600
Washtenaw Intermediate School District	10/1/2021	09/30/2022	\$182,430

<u>Group Home Leases</u>	<u>Start Date</u>	<u>End Date</u>	<u>Budget</u>
Bateson Court LDHA	10/1/2021	09/30/2022	\$26,880
Catholic Social Services	10/1/2021	09/30/2022	\$19,744
Catholic Social Services	10/1/2021	09/30/2022	\$20,381
Greg Grambeau	10/1/2021	09/30/2022	\$33,409
Greg Grambeau	10/1/2021	09/30/2022	\$25,425
Legacy IV LDHA	10/1/2021	09/30/2022	\$32,223
Legacy XII Limited Partnership	10/1/2021	09/30/2022	\$35,139
Legacy X Limited Partnership	10/1/2021	09/30/2022	\$34,348
Paul and Victoria Kennedy	10/1/2021	09/30/2022	\$26,820
Renaissance House, Inc.	10/1/2021	09/30/2022	\$25,704
Shafiq Kasham	10/1/2021	09/30/2022	\$26,400
Southlawn Avenue LDHA	10/1/2021	09/30/2022	\$24,480
Spectrum Community Services	10/1/2021	09/30/2022	\$10,615
Synod Community Services	10/1/2021	09/30/2022	\$29,400

<u>Vocational Leases</u>			
F. A. Kennedy Co. LLC	10/1/2021	09/30/2022	\$48,000

Contracts in FY21 that we will no longer have in FY22:

Bedside Angels
 Camp Zip
 Detroit Wayne Integrated Health Network
 Kona Consulting
 Language Line (County Contract)
 LifeSpan...A Community Service
 Lyneah Blake-Duncan
 MEND
 Quest, Inc.
 Safehaus, Inc.
 Washtenaw Association for Community Advocacy

Washtenaw County Community Mental Health
Millage and CCBHC Grants Budget to Actuals
For Six Months Ending June 30, 2021

Millage Budget

	<u>Annual Budget</u>	<u>Budget YTD</u>	<u>YTD Actual</u>	<u>YTD Actual O/(U) YTD Budget</u>
Millage Revenue				
Millage	\$ 6,565,388	\$ 3,282,694	\$ 6,646,074	\$ 3,363,380
Millage Interest Revenue	-	-	15,365	15,365
	<u>\$ 6,565,388</u>	<u>\$ 3,282,694</u>	<u>\$ 6,661,439</u>	<u>\$ 3,378,745</u>
Millage Expenses				
Salary	\$ 2,395,000	\$ 1,197,500	\$ 938,067	\$ (259,433)
Fringe	1,339,513	669,757	496,138	(173,618)
Contractors	1,500,000	750,000	405,899	(344,101)
Trainings	140,000	70,000	4,180	(65,820)
Operating Expenses	782,500	391,250	200,833	(190,417)
Fleet Charges	60,000	30,000	8,088	(21,912)
Client Care	78,500	39,250	48,164	8,914
Cost Allocation Plan	70,875	35,438	140,355	104,917
Furniture & Equipment	100,000	50,000	-	(50,000)
Depreciation Expense	10,000	5,000	-	(5,000)
Telephone	50,000	25,000	13,349	(11,651)
All Other Expenses	39,000	19,500	8,683	(10,817)
Total Millage Expenses	<u>\$ 6,565,388</u>	<u>\$ 3,282,694</u>	<u>\$ 2,263,756</u>	<u>\$ (1,018,938)</u>
Revenue Over/(Under) Expenses		-	4,397,683	4,397,683

*** Millage Fund Balance at the close of 2020 is \$5,056,178

CCBHC Grants

	<u>Annual Budget</u>	<u>Budget YTD</u>	<u>YTD Actual</u>	<u>YTD Actual O/(U) YTD Budget</u>
January 2021 - June 2021				
CCBHC #1 - Year 3 Grant Revenue	\$ 521,132	\$ 521,132	\$ 469,124	\$ (52,008)
CCBHC #1 - Year 3 Grant Expenses				
Salary	\$ 298,302	\$ 298,302	\$ 278,742	\$ (19,560)
Fringe	175,454	175,454	146,833	(28,621)
Trainings	-	-	-	-
Telephone	-	-	901	901
Operating Supplies	47,376	47,376	42,648	(4,728)
Client Care	-	-	-	-
Total Expenses	<u>\$ 521,132</u>	<u>\$ 521,132</u>	<u>\$ 469,124</u>	<u>\$ (52,008)</u>
Revenue Over/(Under) Expenses	-	-	-	-
January 2021 - December 2021				
CCBHC #2 - Year 2 Grant Revenue	\$ 1,800,430	\$ 900,215	\$ 830,520	\$ (69,695)
CCBHC #2 - Year 2 Grant Expenses				
Salary	\$ 975,771	\$ 487,886	\$ 479,336	\$ (8,549)
Fringe	595,220	297,610	266,431	(31,179)
Trainings	5,343	2,672	-	(2,672)
Telephone	11,085	5,543	6,428	886
Operating Supplies	185,511	92,756	77,371	(15,385)
Client Care	27,500	13,750	954	(12,796)
Total Expenses	<u>\$ 1,800,430</u>	<u>\$ 900,215</u>	<u>\$ 830,520</u>	<u>\$ (69,695)</u>
Revenue Over/(Under) Expenses	-	-	-	-



Strategic Planning Guiding Document 2021

Strategic Planning Guiding Document Contents

- Current Mission Statement
- Proposed Mission Statement
- Environmental Drivers
- Strategic Planning Process
- Current Strategic WCCMH Plan
- Current Strategic County/WCCMH Millage Plan



Strategic Planning Guiding Document 2021

WCCMH Mission, Vision and Values

CURRENT MISSION 2017-2022

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

PROPOSED MISSION 1

To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated **behavioral health** services. ~~to eligible individuals.~~

PROPOSED MISSION 2

To promote hope, recovery, resilience and advance health equity in Washtenaw County by providing, high quality, integrated **behavioral health** services **to adults and youths with intellectual/development disabilities, mental health and/or substance use needs.** ~~individuals.~~

VISION

All residents can secure supports to improve their quality of life and reach their full potential.

VALUES

Excellence

We provide the highest level of service to promote recovery, quality of life and self-sufficiency through proven and innovative practices. We recognize that the foundation of excellent service is our relationships.

Growth

We believe in the capacity for change at every stage of development. We grow through shared learning, lived experiences and mentoring.

Well-being

We cultivate well-being through a commitment to physical and emotional safety, active listening, and a culture of appreciation.

Inclusion

Together we build a welcoming, respectful environment for all people. Through active engagement and shared decision-making, we build a stronger community.



Strategic Planning Guiding Document 2021

Community

We develop strong, trusting partnerships with the people we serve, in our broader community, and within our own organization **while advancing health equity.**

Accountability

We are accountable to those we serve, to the larger community, and to each other for the **equitable, ethical,** effective, and efficient use of our resources.

Environmental Drivers

Access to Care

- Shortage of staff statewide with long waiting times and difficulty in accessing care or needs not getting met due to decreased staffing
- CMH system reform efforts are being driven by concerns about access and inconsistent statewide availability of services - encouraged to find ways to increase/improve access
- Access to youth behavioral health services
- A severe statewide psychiatric hospital bed shortage with long waits for care
- **A lack of a single point of access for all behavioral health services including substance use disorders**

Performance/Quality

- Uneven metrics/performance by PHIPs and pressure from MCOs to shift payment from PHIPs to MCOs with competing bills in the legislature from Shirkey and Whiteford
- Current CMH system collects a lot of data but lacks a clear dashboard of metrics for accountability and performance
- State rate setting efforts expected to put emphasis on cost efficiency and effectiveness etc.

Expansion of Services

- Federal expansion of mental health funding and designation of Michigan at a CCBHC state and recently approved funding in Michigan state budget
- Passage of millage since the last strategic plan that shifted focus from exclusively mandated services for “eligible” individuals to comprehensive services for the general community
- Greater need for focus on prevention, early intervention and community education



Strategic Planning Guiding Document 2021

Other Drivers

- Inconsistency of support for Behavioral Health services by the State of Michigan
- Importance of telemedicine and the infrastructure to support it (i.e. broadband internet, county infrastructure and internet)
- Staffing

Strategic planning proposed process for discussion purposes:

- I. Review and modify the Mission and Vision statements
- II. Proposed Timeline/Process
 - Environmental Assessment (June – July)
 - CHRT Gap Analysis (August – September)
 - Develop strategies and priorities (October – November)
- III. Public Stakeholder Input/Outreach (July -October)
 - Consumer Advisory
 - Recipient Rights Advisory Committee
 - Provider Network including local hospital systems
 - Staff (Survey)
 - Community Stakeholders
 - i. Millage Advisory Committee
 - ii. CHRT Preliminary Interviews for Gap Analysis
 - a. PES, ROSC Provider, Coordinating Agency, Avalon, MDHHS Medical Director, Chair of Psychiatry of Michigan Medicine, NAMI
- IV. Implement Strategies
- V. Report on progress towards strategies
- VI. Evaluate based on performance measures



Strategic Planning Guiding Document 2021

Millage Advisory Committee (MAC) (meets monthly)		
Nancy Graebner-Chair	3/31/2024	WCCMH Board (St. Joseph Mercy Hospital)
Barb Higman	3/31/2023	WCCMH Board (Primary Consumer)
Ricky Jefferson	3/31/2023	WCCMH Board (Board of Commissioners)
Bob King	3/31/2022	WCCMH Board (Member at Large)
Andy LaBarre	3/31/2022	WCCMH Board (Board of Commissioners)
Marianne Udow-Phillips	3/31/2024	WCCMH Board (Community Member)
Kari Walker	3/31/2024	WCCMH Board (Secondary Consumer)
Amanda Carlisle	3/31/2022	Washtenaw Housing Alliance
Holly Heaviland	3/31/2024	Washtenaw Intermediate School District
Derrick Jackson	3/31/2023	Washtenaw County Sheriff's Office
John Martin	3/31/2024	Community Member
Ray Rion	3/31/2023	Packard Health
George Waddles	3/31/2022	Community Member

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES

July 14, 2021

*Meeting held electronically via Zoom



Members Present: Judy Ackley (Palmyra, MI), Greg Adams (Adrian, MI), Susan Fortney (physical location) (Ida Township, MI), Bob King (Ann Arbor, MI), Sandra Libstorff (Monroe, MI), Molly Welch Marahar (Ann Arbor, MI), Katie Scott (Pittsfield Township, MI), Mary Serio (Howell, MI), Sharon Slaton (Brighton Township, MI), Ralph Tillotson (Adrian, MI)

Members Absent: Roxanne Garber, Caroline Richardson, Randy Richardville

Staff Present: Kathryn Szewczuk, Stephannie Weary, James Colaianne, CJ Witherow, Matt Berg, Lisa Jennings, Michelle Sucharski, Nicole Adelman, Trish Cortes, Dana Darrow

Others Present:

- I. Call to Order
Meeting called to order at 6:02 p.m. by Board Chair S. Slaton.
- II. Roll Call
 - An electronic quorum of members present was confirmed.
- III. Consideration to Adopt the Agenda as Presented
Motion by R. Tillotson, supported by S. Fortney, to approve the agenda
Motion carried
Voice vote, no nays
- IV. Consideration to Approve the Minutes of the June 9, 2021 Regular Meeting and Waive the Reading Thereof
Motion by S. Fortney, supported by M. Serio, to approve the minutes of the June 9, 2021 regular meeting and waive the reading thereof
Motion carried
- V. Audience Participation
 - Ariana Gonzalez, Occupational Therapist, Executive Director of LAITR in Washtenaw, introduced herself.
 - Amnee Barakat of LAITR introduced herself.
- VI. Old Business
 - a. July Finance Report – FY2021 as of May 31st
 - M. Berg presented.
- VII. New Business
 - a. Board Action – Veteran Peer Support Specialist Position

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Motion by M. Welch Marahar, supported by B. King, to approve the job description and funding of the grant funded Veteran Peer Support Specialist Position at the CMHPSM

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Scott, Serio, Slaton, Tillotson

No:

Absent: Garber, Richardson, Richardville

b. Opioid Health Home (OHH) Coordinator Position

Motion by M. Welch Marahar, supported by J. Ackley, to approve the job description and funding of the Opioid Health Home (OHH) Coordinator position at the CMHPSM

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Scott, Serio, Slaton, Tillotson

No:

Absent: Garber, Richardson, Richardville

c. Provider Training Stipend

Motion by G. Adams, supported by M. Welch Marahar, to approve the recommended training stipend

Motion carried

Vote

Yes: Ackley, Adams, Fortney, King, Libstorff, Welch Marahar, Scott, Serio, Slaton, Tillotson

No:

Absent: Garber, Richardson, Richardville

VIII. Reports to the CMHPSM Board

a. Report from the SUD Oversight Policy Board (OPB)

- J. Colaianne provided an overview of the most recent OPB meeting.
- Block grant funding is looking more stable, staff is projecting not as much PA2 will be needed.

b. CEO Report to the Board

- The office is now into the 50% reduced capacity phase. The office is expected to be at full capacity and open to the public in September.
- The biggest issue is the ongoing staffing issue at providers and CMHs.
- The redesign efforts happening in Lansing are on hold at least until fall.
- The draft FY22 budget will be presented to the board in August.
- MDHHS has met with CMS regarding the region's deficit elimination plan. CMS expects to have a response by the end of July.

IX. Adjournment

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Motion by M. Welch Marahar, supported by R Tillotson, to adjourn the meeting

Motion carried

Voice vote, no nays

- Meeting adjourned at 6:54 p.m.

Judy Ackley, CMHPSM Board Secretary

DRAFT

CMHPSM Mission Statement

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.



**COMMUNITY MENTAL
HEALTH PARTNERSHIP
OF SOUTHEAST
MICHIGAN (CMHPSM)
REGION SIX**

ADMINISTRATION

3005 Boardwalk
Suite 200
Ann Arbor, MI 48108
Phone (734) 344-6079
FAX (734) 222-3844
www.cmhpsm.org

James Colaianne
CEO

BOARD OF DIRECTORS

Judy Ackley
Greg Adams
Susan Fortney
Roxanne Garber
Bob King
Sandra Libstorff
Charles Londo
Molly Welch Marahar
Gary McIntosh
Caroline Richardson
Katie Scott
Sharon Slaton
Ralph Tillotson

PARTNER CMHSPs

Lenawee Community
Mental Health Authority

Livingston County
Community Mental Health
Authority

Monroe County Community
Mental Health Authority

Washtenaw County
Community Mental Health

August 13, 2021

To the Washtenaw County Community Mental Health Board,

I am writing this letter as Chair of the Oversight Policy Board (OPB) for the Community Mental Health Partnership of Southeast Michigan (CMHPSM). The term for Dave Oblak, one of our current members, expires on September 30, 2021. As a Washtenaw County representative, the OPB greatly appreciates Mr. Oblak's commitment and contribution to the OPB and would like to express interest in his continuation for another term. Mr. Oblak provides valuable input and a much needed voice for Washtenaw County residents on this Board. Mr. Oblak has also expressed interest in continuing for another term.

Please respond to this letter to confirm your approval of her continuation of another term on the OPB. If you have any specific questions about the OPB, please contact Nicole Adelman, CMHPSM Substance Use Services Director at adelmann@cmphsm.org or Stephannie Weary, CMHPSM Regional Coordinator at wearys@cmhpsm.org.

Thank you for your time and consideration.

Sincerely,

A handwritten signature in blue ink, appearing to read "Mark Cochran".

Mark Cochran
Chairman
CMHPSM Oversight Policy Board

David Oblak, MSW
1115 Glen Leven Rd
Ann Arbor, MI 48103

June 22, 2021

Dear Mr. Walker and the rest of the WCCMH Board,

I have served as a member of the Community Mental Health Partnership Substance Use Disorder Oversight Policy Board since July 2010, when it was then called the Substance abuse Advisory Council.

As of June 12, 2021, nearly half of the inmates in federal prison are confined for drug charges*. I remain employed as a Probation Agent for the 15th District Court, and though I work with individuals convicted of misdemeanor crimes vs. federal crimes, that statistic remains accurate for my clientele as at last half of my current caseload of clients are involved in the recovery process. I believe I am the only current member of the board that will provide a perspective from the criminal justice system.

I hope that my knowledge, insight, and input has been valuable to the board. I would be very grateful for the opportunity to continue to share my input in the ongoing effort to provide the residents of Washtenaw County with the means to successfully address their misuse of alcohol and other drugs. I believe a coordinated community effort is vital to address these issues and I would be honored to continue to be a part of that process.

Thank you for your consideration.

Sincerely,

David Oblak, MSW

*www.bop.gov/about/statistics/statistics_inmate_offenses.jsp

David Oblak, MSW

1115 Glen Leven Rd. • Ann Arbor, MI 48108 • Phone: (734) 323-5368 • E-Mail: dmoblak@a2gov.org

Education

Master of Social Work
Bachelor of Social Work

University of Michigan School of Social Work, 2006
Eastern Michigan University, 2004

Experience

Dedicated Domestic Violence Probation Agent, 15th District Judicial Court June, 2007 - Present

- Supervision of Domestic Violence offenders with court-ordered probation conditions.
- Conduct Pre-Sentence Investigations of defendants, including substance abuse, mental health, and lethality assessments.
- Conduct thorough interviews with victims of domestic violence.
- Make case-specific recommendations for sentencing and appropriate referrals to community resources for defendants and survivors.
- Facilitate Probation Group Reporting.
- Immediately inform Court of any violations and facilitate intervention via immediate arrest.
- Since 2011, duplicate above services at 14B District Court, Ypsilanti Twp, MI.
- Pre-Trial Monitor at Community Corrections for defendants in all the DV courts in Washtenaw County.
- Enter court-related data into Quickbase database software.

Shelter Association of Washtenaw County July, 2004 - March, 2008

- Managed a caseload of single adults with substance abuse and mental health diagnoses.
- Engaged with clients to assess their current situation and mental health status and needs.
- Outlined service plans and made referrals to local agencies to address substance abuse intervention and mental health needs.
- Provided support and advocacy to meet clients' basic needs.
- Screened potential consumers to determine eligibility for available services.
- Investigated past mental health and substance abuse history.
- Coordinated client care with mental health treatment organizations and doctors.
- Collaborated with other community agencies to meet clients' needs.
- Assisted in obtaining identification and associated required proof of identity.
- Documented and tracked clients' progress.

Accountable Choices Batterer Intervention Program July, 2004 - March, 2008

- Facilitated psycho-educational group for convicted batterers
- Prepared and submitted monthly reports on status of clients to respective probation agents.
- Assisted and observed other staff members.
- Attended training workshops and conferences and applied acquired concepts in group milieu.

Dawn Farm Residential Substance Abuse Treatment Center July, 2000 - August, 2004

- Facilitated task-oriented "Work Therapy" groups.
- Acted as liaison between clients and clinical staff.
- Responsible for documentation of clients' daily activities.
- Employed for two years as Intake/Triage Specialist at "Detox" facility.
- Interim Health & Safety Coordinator; responsible for training clients and staff in areas including emergency evacuation, biohazard and universal precautions.

Field Placement Experience, Volunteer Experience

2004 Foundation/Equinox, Brighton, England. (Study Abroad, EMU)

- Worked in Day-Shelter for homeless alcoholics and day treatment program for recovering heroin addicts.
- Quickly became proficient with England's service delivery system of alcohol and substance abuse treatment.
- Provided counseling and referral services for clients seeking recovery.
- Oversaw daily operations of common area and ensured client compliance with program policies and rules.

2004 Shelter Association of Washtenaw County. (Field Placement, EMU)

- Completed intakes and assessments of new clients.
- Assisted clients with attainment of SSI, SSD, Section 8 and additional community resource referrals.
- Participated in weekly client case reviews.

Residential Services for Individuals in the Public Mental Health System

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**WASHTENAW COUNTY COMMUNITY MENTAL
HEALTH SERVICE PROVIDERS**

MONDAY, JUNE 14, 2021

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Overview of Residential Services and the Role of Direct Support Professionals

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Job Duties

- Provide & Support all aspects of the Social Determinants of Health
 - ❖ Food assistance
 - ❖ SSI/SSB benefit applications
 - ❖ Medicaid/Medicare paperwork
 - ❖ Transportation benefits
 - ❖ Housing assistance
 - ❖ Medical appts and follow-ups
 - ❖ Mental Health Service appts. & follow-up care
 - ❖ Pharmacy benefits and needs
 - ❖ Work Rehab & supports
 - ❖ Social Supports
 - ❖ Recovery (Substance Use & Mental Health)Resources & Supports
 - ❖ Secure Legal ID and other documents
 - ❖ Navigation with the Court System
- Provide Monitoring & assistance as outlined in the IPOS
- Provide support for all aspects of life including self care, goals and activities

Overview of Residential Services and the Role of Direct Support Professionals cont...

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- Administer Medications
- Provide Transportation
- Ensure a clean, healthy living environment
- Monitor and encourage healthy food choices and good nutrition
- Encourage adherence to dietary restrictions
- Accompany individuals on all Medical appts. And manage treatment as outlined
- Follow all Policies and procedures in addressing unusual occurrences and problems as they arise
- Respond to health and environmental emergencies
- Document all services provided in an accurate manner
- Be aware of all individuals whereabouts and actions throughout shift
- Manage the Confidentiality of all written & verbal communication while adhering to the strict, limited disclosure regulations
- Manage the signing and updating of specific releases

Categories of Service

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Specialized Licensed Residential:

An operation that provides **personal care, supervision and protection** in addition to **room and board** to 3 to 20 unrelated persons who are aged, mentally ill, developmentally disabled, or physically disabled, for 24 hours a day, 5 or more days a week, for 2 or more consecutive weeks. These services are billed based on per diem rates.

Unlicensed Congregate Settings:

An unlicensed home with a capacity of 4 or less persons that only serves community mental health (CMH) served individuals that CMH monitors through contracted provider services. These services are billed in 15 minute increments with modifiers based on the service provided & who is present.

Community Living Services:

These services are outlined in the IPOS and administered in short prescribed time frames in individual homes/apartments. Staff come and go from the site and persons served tend to navigate the community independently. These services are billed in 15 minute increments with modifiers based on the service provided & who is present.

Elements that Constitute Direct Service:

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Personal care means personal assistance with dressing, personal hygiene, grooming, maintenance of a medication schedule, or the development of those personal and social skills required to live in the least restrictive environment.

Supervision means guidance of a person in the activities of daily living, including reminders of important activities and appointments and to take medication, and being aware of a person's general whereabouts even if the person may travel independently in the community.

Protection means actions taken to insure the health, safety, and well-being of a person, including protection from physical harm, humiliation, intimidation, and social, moral, financial, and personal exploitation.

Supervised personal care means guidance (cuing, prompting, reminding) or assistance with eating, toileting, bathing, grooming, dressing, transferring, mobility, medication management, reminders of important activities to be carried out, assisting with keeping appointments, supporting a person's personal and social needs, and being aware of general whereabouts even if the person is capable of independent travel about the community.

Transportation means the direct provision of or securing required transportation in the community as outlined in the IPOS.

Room and board means the provision of housing and meals. Under this definition, a "room" could be a bedroom, an apartment, a suite, etc. Board means any involvement in the purchase or preparation of meals.

Provider Examples

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Washtenaw County Overall

Total Number of consumers who received any of the following;
H0043, H2015, H2016, T1020, T2025, T2027 in a given month.

							Fiscal Quarter	Retention rate (Staff)
							FY18 Q2	70%
2017	2017	2018	2019	2020	Jan-21	2021	FY18 Q3	73%
Provider	10	10	10	10	1	Provider	FY18 Q4	80%
CHS 9%	68	58	48	47	42	CHS 6%	FY19 Q1	83%
INI 8%	62	74	77	65	60	INI 9%	FY19 Q2	85%
Renaissance 10%	81	71	70	64	61	Renaissance 9%	FY19 Q3	85%
Spectrum 5%	40	41	31	30	31	Spectrum 5%	FY19 Q4	82%
Synod 6%	45	46	41	36	36	Synod 5%	FY20 Q1	88%
Other 62%	479	510	535	453	450	Other 66%	FY20 Q2	89%
Grand Total	775	800	802	695	680	Grand Total	FY20 Q3	87%
			High		Low		FY20 Q4	81%
Notes:							FY21 Q1	79%

* 122 less consumers served in last two years

* As you see in the slides, even as employee counts drop, retention stabilizes.

* Meaning that for the most part, only the core staff remain.

Spectrum Human Services

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Agency: Spectrum Human Services

	2017	2018	2019	2020	2021 so far
Employee Count	894	895	925	821	647
Individuals Served	902	911	982	963	996
Starting Wage*	\$10.00	\$10.15	\$10.25	\$11.00*	\$11.00*
Retention	46%				
Turnover	44%				
Sites Closed	1	3	2	3	1

Notes:

- Starting wage data does not include Michigan Premium Pay
- Spectrum has a 28% drop in employee count from 2017 to present
- Spectrum has a 10% increase in consumers served from 2017 to present
- Spectrum has closed 10 sites since 2017

Synod Community Services

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Agency: Synod Community Services:

	2017	2018	2019	2020	2021 so far
Employee Count	151	146	141	121	120
Individuals Served all categories	380	373	317	319	219
Individuals Served less payee services	213	212	175	188	128
Individuals Served less payee & CRS	97	91	90	88	77
Starting Wage	\$10.00	\$10.00	\$10.50	\$12.50*	\$12.75*
after training completion	\$10.50	\$10.50	\$11.00	\$13.00*	\$13.25*
Rétention	93.79%	96.69%	96.58%	85.82%	99.17%
Turnover	27.10%	20.50%	34.75%	39.60%	9.16%
Sites Closed	0	0	0	2	0

* Includes premium pay

Synod Community Services, cont...

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Notes:

- **Synod has a 21% drop in employee count from 2017 to present**
- **Synod has a 21% drop in Residential consumers served count from 2017 to present**
- **Synod closed two sites in 2020**
- **Average pay rate DCW-Manager = \$15.36 - this is current with the \$2.25 added to DCW wages**
- **Deficit as of 3/31 (6 months) - Total (\$140,550.62); Residential includes NFC = (\$125,477.96); Co-Op & Silo = (\$15,072.67)**
- **Increased signing/referral Bonus**
- **Synod has always contributed 2% to employee 401K & matches an additional 1 % if employee contributes**
- **Overtime hours are 11% of all hours paid in Washtenaw**
- **Occupancy rate as of 3/31 for the FY21= 80%**

Renaissance Community Homes

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Renaissance Community Homes

	Employee Count	Starting Wage
2017	437	\$9.00/hr (untrained) \$9.50/hr (Trained)
2018	372	\$9.50/hr (untrained) \$10.50/hr (Trained)
2019	346	\$10.25/hr (untrained) \$10.75/hr (Trained)
2020	340	\$10.25/hr (untrained) \$10.75/hr (Trained) Plus 15% COVID Hero Pay, plus \$2/hr premium pay (all factored into hourly rate or purposes) comes to \$14.36/ hour Trained rate.
2021	327	\$11.00/ (untrained) \$11.50/hr (Trained) plus \$2.25/hr premium pay (factored into hourly rate or OT purposes) comes to \$13.75/hr Trained rate

*** Overall Renaissance payroll has increased by \$100K every two-weeks since the beginning of COVID Pandemic**

*** Renaissance now spends almost \$40,000 annually in recruitment advertising. (Indeed, Facebook, etc..)**

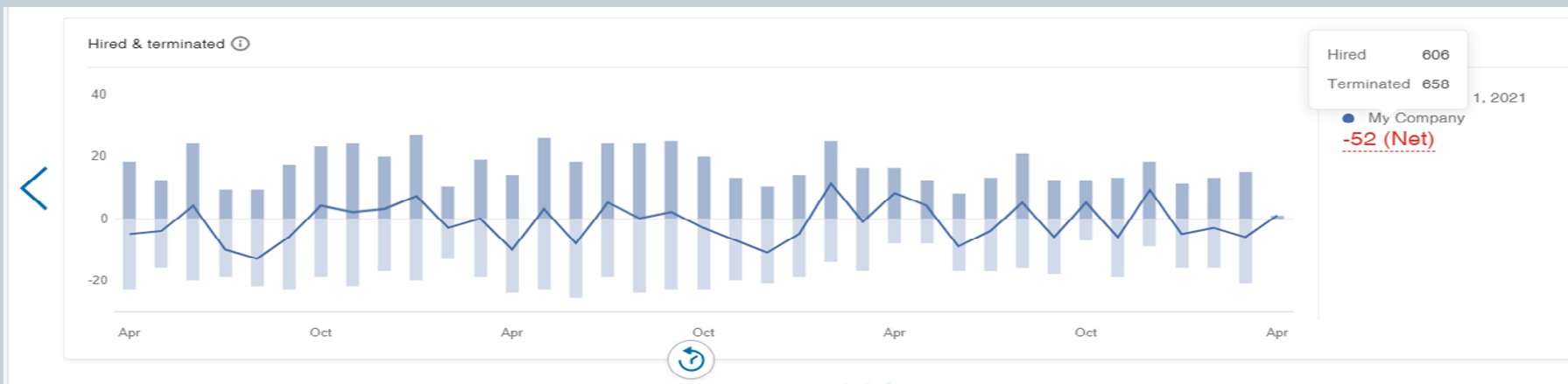
Renaissance Community Homes, cont...

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4/2018 to 4/2021



*** Only 1 out of every 10 employees that leave Renaissance are initiated by Renaissance**



Renaissance Community Homes, cont...

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Notes for Renaissance Washtenaw Programs:

- **Current average pay rate for scheduled caregivers is \$15.38/hour**
- **Overtime rate (average \$23.07/hour)**
- **Started employer match 401K on 1/1/2021**
- **Increased employee referral and sign on Bonuses to \$500**
- **Closed out three 24 hour CLS sites since 2017**
- **Closed out several low intensity CLS sites since 2017**
- **At six month point our Washtenaw programs are in a deficit of (\$264,055.00); Group Homes (\$119,371); CLS (\$144,680)**
- **12% of hours staffed in Washtenaw County are paid at the Overtime Rate.**
 - * This OT rate is consistent with Lenawee and Livingston County.
 - * ***Our Jackson/Hillsdale programs run at 7.5%***

Recruiting Challenges

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Issues/Struggles

- Reimbursement Rates
- Scheduling Challenges
- Overtime costs
- Training/Supervision Issues
- Individuals served have a higher level of acuity
- Staff burnout

What we have tried

- Flexible Scheduling
- Job Share
- Signing Bonus/referral pay
- Contributions to 401k
- Increase contribution to Health Insurance

Premium Pay Impact

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- Has allowed us to maintain a percentage of our core staff
- Does not cover overtime cost
- Has not increased recruiting/job interest
- can't advertise Premium Pay rate due to temporary nature of revenue

Administrative Burdens

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- Increase in compliance requirements
- Increase burden on provider's with other agencies working remotely (must scan in all documents for submission)
- Increase cost to cover HIPPA compliant virtual systems
- Had to cut middle mgt. positions to cover increase cost of Direct Support due to overtime – insufficient reimbursement rates
- Admin staff covering Direct Service Shifts
- Inability to offer Living Wage due to reimbursement rates

Observations?

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- Fundamental Design of System of Care is flawed
- Individuals who require complex high levels of supervision/care end up in jail
- Problem is multifaceted and complex
- Intervention/restructuring is often related to a crisis
- Impact of Covid-19
 - Further reduced the ability to hire
 - Reduced the prospective employee pool
 - ✦ Schools closed
 - ✦ Encouraged people to stay home
 - ✦ Increased unemployment eligibility
 - ✦ Reduced restrictions on FMLA leave
 - ✦ Drew attention to the profession but is not being followed up with support in line with inflation.
 - ✦ Tele Health
 - ✦ Virtual audits

What has helped?

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- ❖ More online trainings available
- ❖ Movement with Training reciprocity across the State
- ❖ \$2.25/hour premium pay
- ❖ More attention to the work we do and the populations we serve
- ❖ DSP premium pay **must be** permanent



Any
Questions