

HEALTHWEST
FULL BOARD MINUTES

August 25, 2023

8:00 a.m.

**376 E. Apple Ave.
Muskegon, MI 49442**

CALL TO ORDER

The meeting of the Full Board was called to order by Chair Thomas at 8:00 a.m.

ROLL CALL

Members Present: Jeff Fortenbacher, Tamara Madison, Thomas Hardy, Janice Hilleary, Kim Cyr, Marcia Hovey-Wright, Janet Thomas, Remington Sprague, MD, Cheryl Natte

Members Absent: Cassandra Kitchen, Stephanie Umlor, Charles Nash

Others Present: Rich Francisco, Holly Brink, Shannon Morgan, Amber Berndt, Tasha Percy, Malina Barrett, Gordon Peterman Kelly Betts, Gary Ridley, Mickey Wallace, Matt Plaska, Christy LaDronka, Suzanne Beckeman, Brandon Baskin, Michael Pyne, Natalie Walther, Linda Wagner, Linda Cloz, Kristina Baas, Chelsea Kirksey, Brandy Carlson

Guests Present: Kristen Wade, Mark Eisenbarth, John Weerstra

MINUTES

HWB 145-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to approve the minutes of the July 21, 2023 Full Board meeting as written.

MOTION CARRIED.

COMMITTEE REPORTS

Program Personnel Committee

HWB 134-P - It was moved by Ms. Thomas, seconded by Mr. Hardy, to approve the minutes of the June 9, 2023 meeting as written.

MOTION CARRIED.

Recipient Rights Committee

HWB 135-R - It was moved by Ms. Natte, seconded by Ms. Hilleary, to approve the minutes of the June 9, 2023 meeting as written.

MOTION CARRIED.

HWB 136-R - It was moved by Ms. Thomas, seconded by Ms. Hilleary, to approve the Recipient Rights Reports for June 2023 / July 2023.

MOTION CARRIED.

Finance Committee

HWB 137-F - It was moved by Commissioner Nash, seconded by Mr. Hardy, to approve the minutes of the July 21, 2023, meeting as written.

MOTION CARRIED.

HWB 138-F - It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve expenditures for the month ending June 30, 2023, in the total amount of \$8,919,187.81.

MOTION CARRIED.

HWB 139-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest to approve the increase in projected expenditure as stated above for Arbor Circle Corporation, totaling \$208,487.50 effective January 1, 2023 through September 30, 2023.

MOTION CARRIED.

HWB 140-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize the HealthWest Executive Director to sign single case agreements with various out of network hospitals in the amount of \$48,501.00 for psychiatric inpatient stays for HealthWest consumers.

MOTION CARRIED.

HWB 141-F- It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest to approve the projected expenditures for Beacon Services, FA-HO-LO, Hernandez Homes, Kelly's Kare Community Living Supports, MOKA, and Positive Behavior Supports as stated above with a total not to exceed \$556,000.00, effective October 1, 2022 through September 30, 2023.

MOTION CARRIED.

HWB 142-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize the HealthWest Board of Directors to approve the increase in projected expenditure as stated above for Our Hope Association, totaling \$259,837.50 effective January 1, 2022 through September 30, 2023.

MOTION CARRIED.

HWB 143-F - It was moved by Dr. Sprague, seconded by Mr. Hardy, to authorize the HealthWest Board of Director to approve the increase in projected expenditure as stated above for Servicios De Esperanza, LLC (Services of Hope), totaling \$401,125.00 effective January 1, 2023 through September 30, 2023.

MOTION CARRIED.

HWB 144-F - It was moved by Dr. Sprague, seconded by Mr. Hardy, to authorize the HealthWest Executive Director to sign a contract with Falco Corporation to provide specialized residential services to eligible HealthWest consumers, at a cost not to exceed \$30,500.00 for FY2023.

MOTION CARRIED.

ITEMS FOR CONSIDERATION

There was no items for consideration.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

Ms. Kristina Baas presented the Staff Satisfaction Survey results to the Full Board. Mr. Matt Plaska presented the Performance Improvement and KPI Report. Ms. Tamara Madison provided an update on behalf of the Consumer Advisory Council.

DIRECTOR'S COMMENTS

MDHHS Updates:

- State of Michigan, MDHHS SFY2024 Behavioral Health (BH) Capitation Rates Draft Rate was presented to the PIHPs and CMHSP on 8/23/2024. Brandy and I are still digesting the results, as this is a massive and complicated report with a lot of entity and risk factors in the calculation from Milliman. Our initial review and take away from the presentation, it does **not** suggest major changes to our current rates, but we do need to make sure we understand the impact of PHE unwind and enrollment impact on the rates, as well as other factors used. There is a period of Q and A at this point with PIHPS and CMHSP before the final rates are published.

Lakeshore Regional Entity updates:

- LRE and HealthWest corporate counsels are finalizing the details of the agreement related to the remaining 20% of past liabilities owed to the CMHSPs.
- LRE held the second meeting on 08/21/2023 on the Wakely ISF analysis results and follow up questions to the CMH Directors and Finance CFOs. The first one was 08/09/2023. There are a lot of questions regarding the model at this point and Wakely is taking that back for answers. Most of the questions surrounding the model is that it is based on Milliman rates, but the issue is that there is still a lack of understanding regarding how some of the factors used in that rate is being calculated. Historically, Milliman has based it on experience, this does not account for current experience or experience that may be coming such as the impact of CCBHC for the other CMHSPs becoming demonstration sites in Oct. of 2023.
- LRE site review is scheduled for Sept 11th – 14th for HW. Quality staff are working with teams and busy preparing for this site audit.
- I followed up with LRE on HW appointment of LRE Board member for a community member – Holly sent the information to Marion at the LRE for Linda Dunmore, CNO. Marion stated that she would then send Linda additional form to fill out and process her appointment.

Executive Director activities:

- Compliance Committee update – We have had our first Compliance Committee meeting and have developed an agenda for what will be discussed and included, along with follow up items for issues found if needed and determining areas for improvement if needed. The group is made up of Recipient rights, Finance, Provider Network, Quality Improvement, Compliance, and Building and Environment staff.
- Quality Improvement update – At the last Full board meeting, I gave an update of the KATA lean framework training that I completed for leadership, and since that time, we have had requests to do process improvements from several staff that have attended. We now have 2 KATA projects going with the Data analytics team and Quality and requests for process improvements are coming in from other teams: Autism and Access.

- I continue to have strategic planning meetings with County directors: HR, IT and finance and continuing to identify areas for improvement. The changes occurring are in HR with aligning some county and HW policies for drug testing. In Finance, we are working on integrating the chart of accounts in the BSA system that the county uses and moving away from SAGE. With the help of IT, HW is also looking at potentially using AOD (attendance on demand) system that Public Health is using to replace our TimeOut system, but more evaluation will be done on this to understand how this is configured for HW use.
- Just wanted to let the Board know that I worked on a motion with Kristen Wade at HR to remove the 60 day holds for internal applications, and for HealthWest to go back to the 6-month evaluation. This has become problematic for staff in terms of service delivery where in services need to be delivered right away and not being able to fill position because of this hold is proving to be a barrier. We are already dealing with a shortage of applicants and by having a hold on vacancies, it further limits us to add staff in a timely manner and provide much needed services to consumers.
- HealthWest Event: The annual Health, Wellness and Recovery health fair held on August 17 was a success! The HW staff did an excellent job at coordinating, volunteering, and ensuring this event takes place as a resource for the community to get more information on health service offerings in Muskegon.

On the horizon:

- Continuing to review Organizational Chart and evaluate programmatic level need.
- Evaluate and review grants in HW. This will include monitoring, identifying teams and programs impacted, understanding the financial status of each grant. The goal is to ensure grants are doing what they are intended to do.
- Continue to meet with Providers we contract with and other community partners.
- Continue to meet with internal teams – MI Adult teams coming up next.
- Full board program level/team level presentations will be coming. Next month we will have Ann Judson present.

AUDIENCE PARTICIPATION

Mr. John Weerstra introduced himself as a new member of our community and provided his background for board representation in Allegan County.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:56 a.m.

Respectfully,



Janet Thomas
Board Chair

/hb



TO: HealthWest Board Members
FROM: Janet Thomas, Board Chair, via Rich Francisco, Executive Director
SUBJECT: Full Board Meeting
August 25, 2023
376 E. Apple Ave., Muskegon, MI 49442
<https://healthwest.zoom.us/j/97691360092?pwd=dk9CRnVxUDdkbWtGRElZVCsydGdYdz09>
One tap mobile: (309)205-3325, 97691360092#

REVISED AGENDA

- | | | |
|----|--|-------------|
| 1) | Call to Order | Action |
| 2) | Approval of Agenda | Action |
| 3) | Approval of Minutes | |
| | A) Approval of the Full Board Minutes of July 28, 2023
(Attachment #1 – pg. 1-4) | Action |
| 4) | Public Comment (on an agenda item) | |
| 5) | Committee Reports | |
| | A) Program Personnel Committee
(Attachment #2 – pg. 5-7) | Action |
| | B) Recipient Rights Committee
(Attachment #3 – pg. 8-10) | Action |
| | C) Finance Committee
(Attachment #4 – pg. 11-14) | Action |
| 6) | Items for Consideration | |
| 7) | Old Business | |
| 8) | New Business | |
| 9) | Communication | |
| | A) Staff Satisfaction Survey Results – Kristina Baas
(Attachment #5 – pg. 15-20) | Information |
| | B) Performance Improvement and KPI Report – Matt Plaska
(Attachment #6 – pg. 21-30) | Information |
| | C) Consumer Advisory Council Update – Tamara Madison | Information |

Main Office

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D) HealthWest Resources
(Attachment #7– pg. 31-32)

Information

E) CMHA Fall Conference Save the Date
(Attachment #8– pg. 33)

Information

**F) Director's Report
(Attachment #9– pg. 34-35)**

Information

10) Public Comment

11) Adjournment

Action

/hb

HEALTHWEST
FULL BOARD MINUTES

July 28, 2023

8:00 a.m.

**376 E. Apple Ave.
Muskegon, MI 49442**

CALL TO ORDER

The meeting of the Full Board was called to order by Chair Thomas at 8:01 a.m.

ROLL CALL

Members Present: Jeff Fortenbacher, Tamara Madison, Thomas Hardy, Janice Hilleary, Kim Cyr, Marcia Hovey-Wright, Janet Thomas, Remington Sprague, MD, Charles Nash,

Members Absent: Cassandra Kitchen, Stephanie Umlor, Cheryl Natte

Others Present: Rich Francisco, Holly Brink, Shannon Morgan, Amber Berndt, Tasha Percy, Malina Barrett, Gordon Peterman Kelly Betts, Gary Ridley, Mickey Wallace, Matt Plaska, Jason Bates, Lauren Thomas, Christy LaDronka, Jackie Farrar, Urbaine Ndoye

Guests Present: Kristen Wade, Matt Farrar, John Weerstra

MINUTES

HWB 131-B - It was moved by Commissioner Nash, seconded by Dr. Sprague, to approve the minutes of the June 23, 2023 Full Board meeting as written.

MOTION CARRIED

COMMITTEE REPORTS

Finance Committee

HWB 126-F - It was moved by Ms. Thomas, seconded by Dr. Sprague, to approve the minutes of the June 16, 2023, meeting as written.

MOTION CARRIED

HWB 127-F - It was moved by Ms. Thomas, seconded Dr. Sprague, to authorize HealthWest to enter contract with Redi-Rental for the rental of portable restrooms, sinks, tables, chairs, tents and fencing for the Health, Wellness, and Recovery Picnic on August 17th, 2023, at a total cost not to exceed \$8,519.23.

MOTION CARRIED

HWB 128-F - It was moved by Ms. Thomas, seconded Dr. Sprague, to authorize HealthWest Executive Director to sign single case agreements with various out of network hospitals in the amount of \$49,776.00 for psychiatric inpatient stays for HealthWest consumers.

MOTION CARRIED

HWB 129-F - It was moved by Dr. Sprague, seconded Mr. Hardy, to authorize HealthWest to approve the projected expenditures for Anikare, Positive Behavior Supports, Shel-Mar AFC, and Services of Hope as stated with a total not to exceed \$891,125.00, effective October 1, 2022 through September 30, 2023.

MOTION CARRIED

HWB 130-F - It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest Executive Director to sign a contract with You're Always at Home AFC#2 to provide specialized residential services to eligible HealthWest consumers, at a cost not to exceed \$93,600.00 for FY2023.

MOTION CARRIED

ITEMS FOR CONSIDERATION

HWB 132-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize recommendation of Linda Dunmore for the Executive Board Member for the LRE (Lakeshore Regional Entity), and authorizes the HealthWest Board Chairperson, Janet Thomas, to recommend her on behalf of the HealthWest Board of Directors.

MOTION MOVED.

HWB 133-B - It was moved by Mr. Hardy, seconded by Mr. Fortenbacher, to authorize HealthWest to pay Johnston Lewis Associate, Inc. in the amount of \$55,500.00 for Professional Liability Insurance to cover the five (5) full and part time HealthWest psychiatrists, effective August 7, 2023, through August 7, 2024.

MOTION MOVED.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

There was no communication.

DIRECTOR'S COMMENTS

Lakeshore Regional Entity- Escrow Draft Language

Rich Francisco, Executive Director, wanted to update the board that a new motion to revise the original motion 23-23 addressing the past liabilities at the LRE board was passed. The motion was to remove the word "Escrow" language which implies that CMHSPs needed to use a third party to hold the remaining 20% owed to CMHSPs for past liabilities. Escrow accounts usually entail large fees associated with holding funds. CMHSPs don't really want to pay the fees so just having them in a restricted account until a CMHSPS can pull them out would be a better way to go. The next steps for this are that the LRE will provide us with the amended agreement which we can review to whether to accept or not, or we update our version of the agreement drafted by our corporate counsel to reflect the amend motion language and then send that out to the LRE for signatures.

Executive Director activities:

- Priority has been to work on forming the Compliance Committee and changing the frequency of meetings to monthly. HW compliance areas and initiatives are siloed and there is no central venue to discuss and address issues related to compliance. Compliance can range from review incident reporting, site reviews, OIG reports, audit results as well as address agency compliance with LRE, MDHHS and Federal requirements. In addition, compliance related to our provider network should also be addressed. The Compliance Committee will be responsible for reviewing and updating the HW compliance plan and the risk management plan. Membership will include various individuals from various admin and clinical staff including Recipient Rights, provider network, QI and finance staff.
- Quality Improvement update – We have a new Quality Assurance/Quality Improvement Director – Pam Kimble. I will be working with Pam to better structure the Quality improvement team and develop the framework to be used for tracking QI/QA initiatives. As part of improving the structure of QI, I will be training CMH leadership team on a Process Improvement framework (a LEAN framework) in August which hopefully becomes one of the improvement tools used at HW to gain desired outcomes.
- I continue to work with IT, Finance, and HR to align processes and initiatives with County IT, HR, and Finance oversight with an eye on identifying areas for improvement and efficiency and ensuring that HW meets all LRE and state reporting requirements.
- I continue to meet with various teams and programs at HW
 - Last week, I met with the ACT team, and they shared the great work that they do on a day-to-day basis. The meeting ended with me showing them a possible outcome measures report to monitor the number of services provided and comparing and mapping it to Fidelity measures required for it to be Evidence Based Practice or EBP. The team liked the idea of being able to see outcome possibilities.
 - I have also met with UM staff, Carrie Crummett and I am exploring the idea of looking at various reports that could inform authorization practice at HealthWest and go beyond just the Utilization Review process and begin looking at a variety of data to gain insight into agency wide metrics that could assist with Clinical decision support. Having a retrospective look at some data points can be helpful for HW. Some of the data points that can be looked at are data integrity reports, Cost per unit reports, program level data or even population level data.
 - I have met with Heather Wiegand, correctional services to understand what services are provided in the Jail and the various grants that are currently in place in support of these initiatives.
 - Had a meeting with Suzanne Beckerman (Integrated Health team clinical services manager) to understand her role in Integrated health clinic and begin talking about outcome metrics that she would be interested in seeing and monitoring.
 - Continuing to meet with Provider Network management team to improve the contract process. I will be reviewing a Contract Management solution for the team soon to better track contracts.

On the horizon:

- Regular Compliance Committee meetings within the agency.
- Work closely with IT, clinical staff, and the data team to begin implementing outcomes and metrics on a programmatic level so staff have indicators on how well they are doing. Have Quality Improvement team be the core group leading the efforts and monitoring the data.
- I have met with a few providers we contract with and will continue to begin meeting with other providers in the coming months.

AUDIENCE PARTICIPATION

Mr. John Weerstra introduced himself as a new member of our community and provided his background for board representation in Allegan County.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:29 a.m.

Respectfully,

Janet Thomas
Board Chair

/hb

***PRELIMINARY MINUTES
To be adopted and approved at the Full Board Meeting of August 25, 2023***

HEALTHWEST

PROGRAM AND PERSONNEL COMMITTEE REPORT TO THE BOARD

via Cheryl Natte, Committee Chair

1. The Program Personnel Committee met on August 11, 2023
- * 2. It was recommended, and I move, to approve the minutes of the June 9, 2023, meeting as written.

/hb

HEALTHWEST

PROGRAM/PERSONNEL MEETING MINUTES

**August 11, 2023
8:00 a.m.**

**376 E. Apple Ave.
Muskegon, MI 49442**

CALL TO ORDER

The regular meeting of the Program/Personnel Committee was called to order by Chair Natte at 8:00 a.m.

ROLL CALL

Members Present: Cheryl Natte, Janet Thomas, Janice Hilleary, Tamara Madison, Thomas Hardy

Members Absent: Stephanie Umlor, Cassandra Kitchen

Staff Present: Holly Brink, Tasha Percy, Shannon Morgan, Cyndi Blair, Amber Berndt, Melina Barrett, Rich Francisco, Linda Wagner, Suzanne Beckeman, Gordon Peterman, Justine Belvitch, Justine Tufts, Urbain Ndoye, Kristina Baas

Guests Present: Kristen Wade, John Weerstra

MINUTES

It was moved by Ms. Thomas, seconded by Mr. Hardy, to approve the minutes of the June 9, 2023 meeting as written.

MOTION CARRIED.

PUBLIC COMMENT (ON AN AGENDA ITEM)

There was no public comment.

ITEMS FOR CONSIDERATION

There was no items for consideration.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

Kristina Baas, Quality Improvement Project Manager, provided the Staff Satisfaction Survey Results.

DIRECTOR'S COMMENTS

Executive Director, Rich Francisco, gave an update. He is working on program updates and putting a structure to the Quality Improvement team. Mr. Francisco completed a KATA training session recently. This was essentially a "Train the Trainers" session, to continue training within the agency and working towards improvement. We have a few projects ahead of us already and beginning planning sessions for those. Mr. Francisco shared that the LRE site review is scheduled for September 12th – 14th. Mr. Francisco did share that he would like to bring a group of Directors to Full Board to present their programs and where they are at with them. At this time there are no significant changes planned for the organizational structure of HealthWest.

AUDIENCE PARTICIPATION

Mr. John Weerstra from the community introduced himself and provided his background and knowledge of community mental health. Mr. Weerstra also said that we can expect to see him in attendance regularly.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:25 a.m.

Respectfully,

Cheryl Natte
Program/Personnel Committee Chair

CN/hb

***PRELIMINARY MINUTES
To be approved at the Program/Personnel Committee Meeting on
October 13, 2023***

HEALTHWEST
RECIPIENT RIGHTS ADVISORY COMMITTEE
REPORT TO THE BOARD

via Thomas Hardy, Committee Vice Chair

1. The Recipient Rights Advisory Committee met on August 11, 2023.
- * 2. It was recommended, and I move, to approve the minutes of the June 9, 2023 meeting as written.
- * 3. It was recommended, and I move, to approve the Recipient Rights Reports for June 2023 / July 2023.

/hb

HEALTHWEST

RECIPIENT RIGHTS ADVISORY COMMITTEE MEETING MINUTES

**Friday, August 11, 2023
8:00 a.m.
376 E. Apple Ave., Muskegon, MI 49442**

CALL TO ORDER

The regular meeting of the Recipient Rights Advisory Committee was called to order by Vice Chair Hardy at 8:26 a.m.

ROLL CALL

Members Present: Janice Hilleary, Janet Thomas, Tamara Madison, Cheryl Natte, Thomas Hardy

HealthWest Staff Present: Holly Brink, Tasha Percy, Shannon Morgan, Cyndi Blair, Amber Berndt, Melina Barrett, Rich Francisco, Linda Wagner, Suzanne Beckeman, Gordon Peterman, Justine Belvitch, Justine Tufts

Guest Present: Kristen Wade, John Weerstra

APPROVAL OF MINUTES

It was moved by Ms. Natte, seconded by Ms. Hilleary, to approve the minutes of the June 9, 2023 meeting as written.

MOTION CARRIED.

ITEMS FOR CONSIDERATION

A. Motion to Accept Recipient Rights Reports for June 2023 / July 2023

It was moved by Ms. Thomas, seconded by Ms. Hilleary, to approve the Recipient Rights Reports for June 2023 / July 2023.

MOTION CARRIED.

For the months of June 2023 / July 2023, there were 91 HealthWest and 24 provider employees trained:

Rights Updates HealthWest	64
Rights Updates Provider	1
New Employee Training HealthWest/Contracted	19
New Employee Training Provider	18
SUD Recipient Rights Orientation Employee	8
SUD Recipient Rights Orientation Provider	5

For the months of June 2023 / July 2023 there were 791 incident reports and 23 rights allegations.

Statistical data showing type and code was provided in the enclosed report.

There were a total of 8 deaths reported in June 2023 / July 2023.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATIONS

There was no communication.

DIRECTOR'S COMMENTS

Rich Fracisco, Executive Director, gave an update regarding the recent completion of his Recipient Rights training required by MDHHS. His completion of this training maintains our compliance with MDHHS.

AUDIENCE PARTICIPATION / PUBLIC COMMENT

Mr. John Weerstra questioned if there were any investigation open past 90 days. Our Recipient Rights Officer, Linda Wagner, confirmed that we do not have any investigations still open past 90 days.

ADJOURNMENT

There being no further business to come before the committee, the meeting adjourned at 8:38 a.m.

Respectfully,

Thomas Hardy
HealthWest Rights Advisory Committee Vice Chair

TH/hb

***PRELIMINARY MINUTES
To be approved at the Rights Advisory Committee Meeting of
October 13, 2023***

HEALTHWEST**FINANCE COMMITTEE REPORT TO THE BOARD****via Jeff Fortenbacher, Committee Chair**

1. The Finance Committee met on August 18, 2023
- * 2. It was recommended, and I move, to approve the minutes of the July 21, 2023, meeting as written.
- * 3. It was recommended, and I move to approve the expenditures for the month ending June 30, 2023, in the total amount of \$8,919,187.81.
- * 4. It was recommended, and I move to approve the increase in projected expenditure as stated above for Arbor Circle Corporation, totaling \$208,487.50 effective January 1, 2023 through September 30, 2023.
- * 5. It was recommended, and I move to approve HealthWest to approve Executive Director to sign single case agreements with various out of network hospitals in the amount of \$48,501.00 for psychiatric inpatient stays for HealthWest consumers.
- * 6. It was recommended, and I move to approve HealthWest to approve the projected expenditures for Beacon Services, FA-HO-LO, Hernandez Homes, Kelly's Kare Community Living Supports, MOKA, and Positive Behavior Supports as stated above with a total not to exceed \$556,000.00, effective October 1, 2022 through September 30, 2023.
- * 7. It was recommended, and I move to approve the HealthWest Board of Directors to approve the increase in projected expenditure as stated above for Our Hope Association, totaling \$259,837.50 effective January 1, 2022 through September 30, 2023.
- * 8. It was recommended, and I move to approve the HealthWest Board of Directors to approve the increase in projected expenditure as stated above for Servicios De Esperanza, LLC (Services of Hope), totaling \$401,125.00 effective January 1, 2023 through September 30, 2023.
- * 9. It was recommended, and I move to approve the HealthWest Executive Director to sign a contract with Falco Corporation to provide specialized residential services to eligible HealthWest consumers, at a cost not to exceed \$30,500.00 for FY2023.

/hb

HEALTHWEST

FINANCE COMMITTEE MEETING MINUTES

Friday, August 18, 2023

8:00 a.m.

CALL TO ORDER

The regular meeting of the Finance Committee was called to order by Committee Chair Fortenbacher at 8:00 a.m.

ROLL CALL

Committee Members Present: Jeff Fortenbacher, Janet Thomas, Thomas Hardy, Remington Sprague, M.D., Commissioner Charles Nash

Committee Members Absent: Stephanie Umlor, Commissioner Marcia Hovey-Wright

Also Present: Rich Francisco, Holly Brink, Shannon Morgan, Gina Post, Brandy Carlson, Justine Belvitch, Brian Speer, Jackie Farrar, Gordon Peterman, Kelly Betts, Urbain Ndoye, Gary Ridley, Jason Bates, Melina Barrett, Christy LaDronka, Mickey Wallace

Guests: Angie Gasiewski, John Weerstra

MINUTES

It was moved by Commissioner Nash, seconded by Mr. Hardy, to approve the minutes of the July 21, 2023, meeting as written.

MOTION CARRIED.

ITEMS FOR CONSIDERATION

A. Approval of Expenditures for June 2023

It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve expenditures for the month ending June 30, 2023, in the total amount of \$8,919,187.81.

MOTION CARRIED

B. Monthly Report from the Chief Financial Officer

Ms. Carlson presented the June report, noting an overall cash balance of \$3,134,649.85 as of June 30, 2023.

C. FY23 Actual and Projected Expenditures

Ms. Carlson presented the June report for the Board review.

D. Authorization to Increase Projected Contract Expenditures for Arbor Circle Corporation

It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest to approve the increase in projected expenditure as stated above for Arbor Circle Corporation, totaling \$208,487.50 effective January 1, 2023 through September 30, 2023.

E. Authorization to Approve Single Case Agreements

It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize the HealthWest Executive Director to sign single case agreements with various out of network hospitals in the amount of \$48,501.00 for psychiatric inpatient stays for HealthWest consumers.

MOTION CARRIED

F. Authorization to Approve the Increase Projected Contract Expenditures for FY23

It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize HealthWest to approve the projected expenditures for Beacon Services, FA-HO-LO, Hernandez Homes, Kelly's Kare Community Living Supports, MOKA, and Positive Behavior Supports as stated above with a total not to exceed \$556,000.00, effective October 1, 2022 through September 30, 2023.

MOTION CARRIED

G. Authorization to Approve Increase to the Contract for Our Hope Association

It was moved by Mr. Hardy, seconded Dr. Sprague, to authorize the HealthWest Board of Directors to approve the increase in projected expenditure as stated above for Our Hope Association, totaling \$259,837.50 effective January 1, 2022 through September 30, 2023.

MOTION CARRIED

H. Authorization to Approve Increase to the Contract for Servicios De Esperanza, LLC (Services of Hope)

It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the HealthWest Board of Directors to approve the increase in projected expenditure as stated above for Servicios De Esperanza, LLC (Services of Hope), totaling \$401,125.00 effective January 1, 2023 through September 30, 2023.

MOTION CARRIED

I. Authorization to Approve Contract with Falco Corporation

It was moved by Dr. Sprague, seconded by Mr. Hardy, to authorize the HealthWest Executive Director to sign a contract with Falco Corporation to provide specialized residential services to eligible HealthWest consumers, at a cost not to exceed \$30,500.00 for FY2023.

MOTION CARRIED

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATIONS

Mr. Speer provided an update on the HealthWest Health, Wellness and Recovery Picnic. Communication was also shared regarding additional community events happening.

DIRECTOR'S COMMENTS

Rich Francisco, Executive Director, provided his Director's Report:

- Mr. Francisco thanked the HealthWest staff for their time and preparation of the Health, Wellness and Recovery Picnic. This was a great opportunity to be seen and introduced to partners in the community. It was great to see all of the participants and how successful this event is.
- Mr. Francisco provided an update on the LRE gave an update regarding LRE Motion that was passed in May for the Past liability settlement. As it relates to the amendment to the contract for the remaining 20% for past liabilities. The LRE legal council and our HealthWest corporate counsel are drafting an agreement that is close to being finalized. We want to ensure that the remaining 20% liability is still owed to us and to be paid.
- Mr. Francisco also shared that Network180 is requesting funds for the coming year and also for next year FY24. The CMHs requested additional information for this request.
- Lastly, Mr. Francisco shared that the Wakely presentation study has been shared with him and Ms. Carlson and are anticipating recommendations.

AUDIENCE PARTICIPATION

Mr. John Weerstra from the community was present and shared his knowledge of being a form CMH board member.

ADJOURNMENT

There being no further business to come before the committee, the meeting adjourned at 8:32 a.m.

Respectfully,

Jeff Fortenbacher
Committee Chair

JF/hb

PRELIMINARY MINUTES
To be approved at the Finance Meeting on
September 15, 2023



Overview 2023 vs 2021

Data Source:
LaserFiche

2023

346

Completed Surveys

Most Satisfied

Relationships with
Coworkers

Least Satisfied

Collaboration Across
Departments

Most Important

Flexibility to Balance
Work and Life Issues

Least Important

Wellness Programs

2021

276

Completed Surveys

Most Satisfied

Health Care/Medical
Benefits

Least Satisfied

Trust Between Employees
and Senior Management

Most Important

Trust Between Employees
and Senior Management

Least Important

Wellness Programs



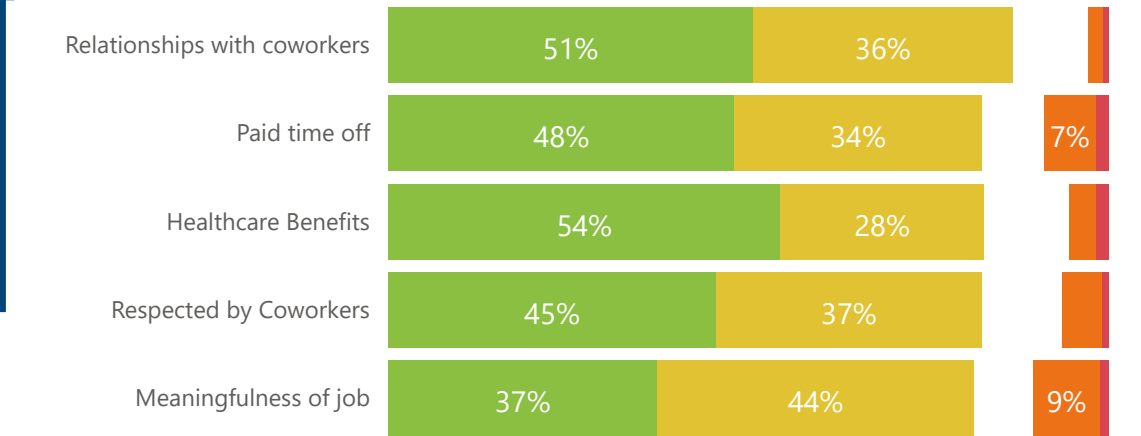
Satisfaction Top and Bottom Five: 2023 vs 2021

Data Source:
LaserFiche

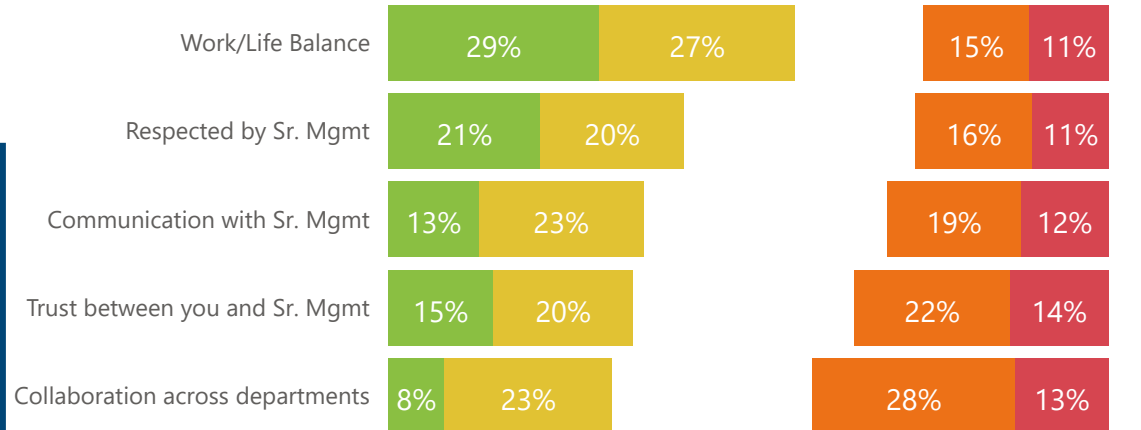
2023



Most Satisfied



Least Satisfied



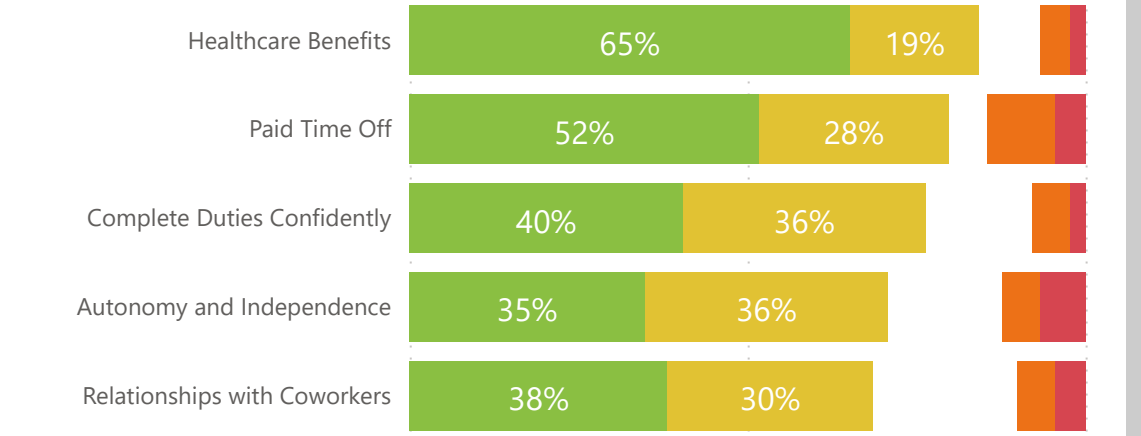
0% 50% 100%

Percentage of Responses

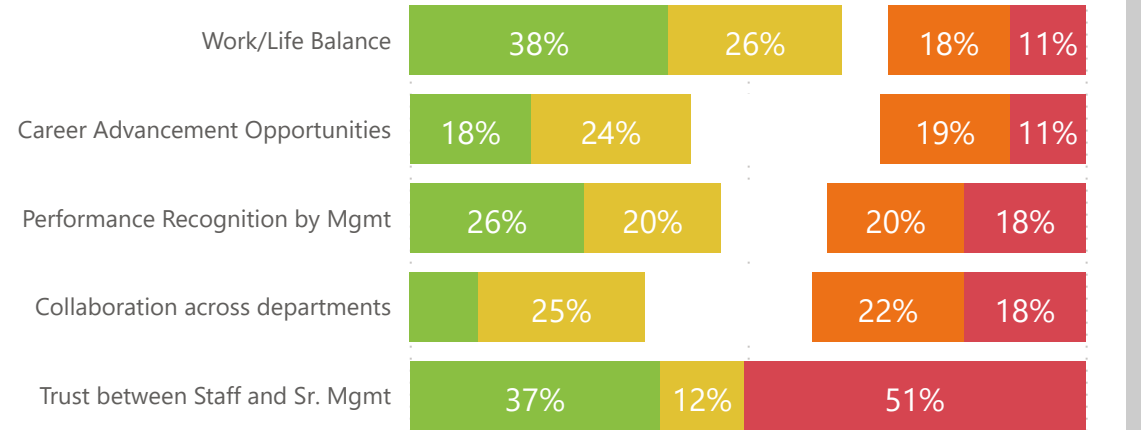
2021



Most Satisfied



Least Satisfied



0% 50% 100%

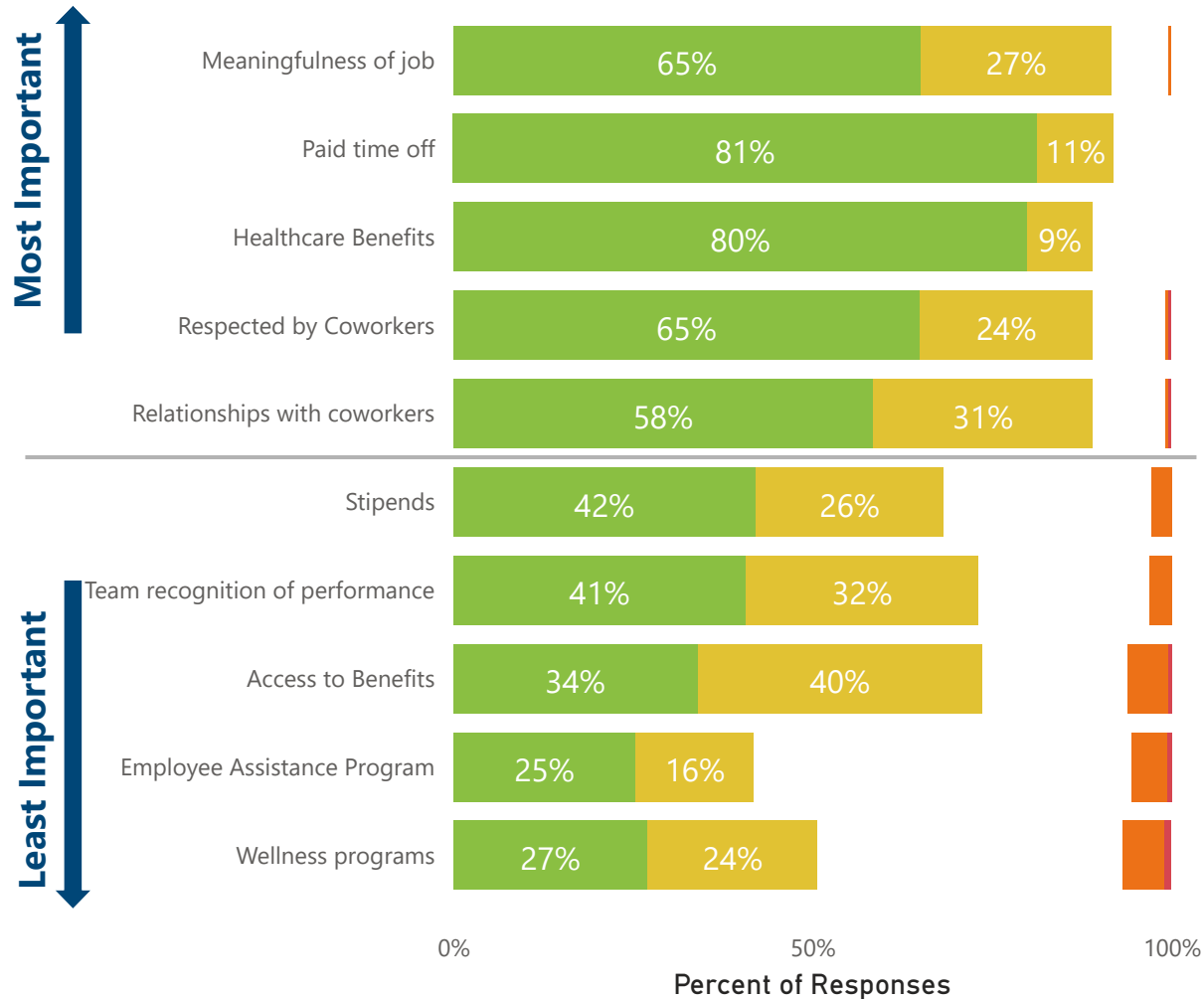
Percent of Responses



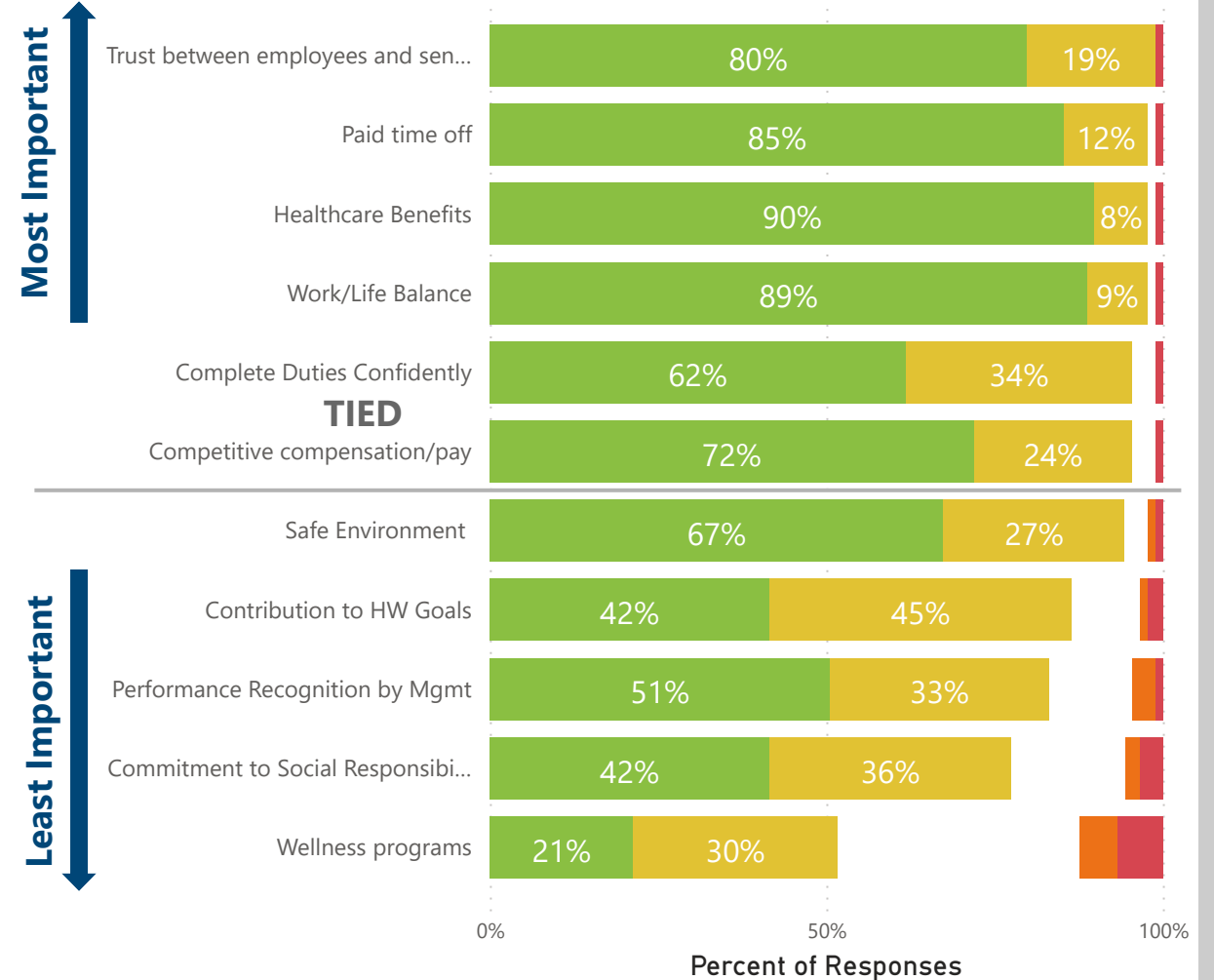
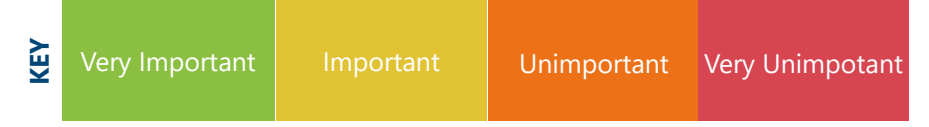
Importance Top and Bottom Five: 2023 vs 2021

Data Source:
LaserFiche

2023



2021

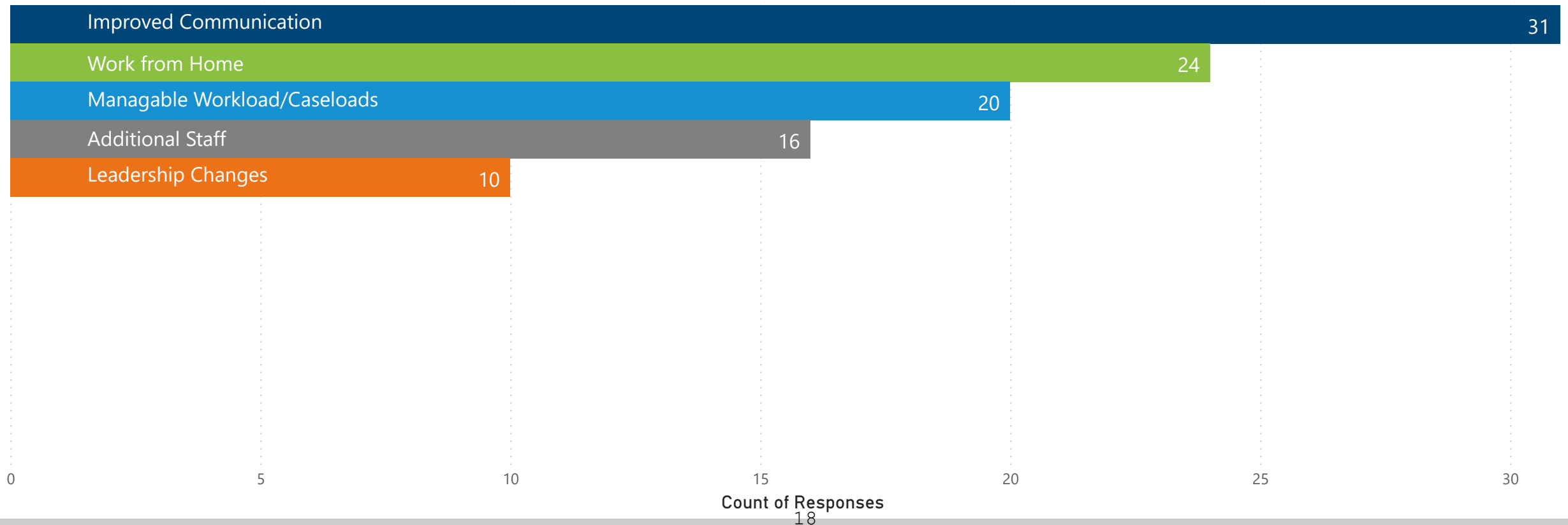




What immediate change at HealthWest would make your job less stressful?

Data Source:
LaserFiche

Methodology Long form answers were reviewed and coded for themes. If multiple themes were addressed, multiple codes were assigned. Codes were then analyzed as quantitative data and displayed as the top 5 most common themes.

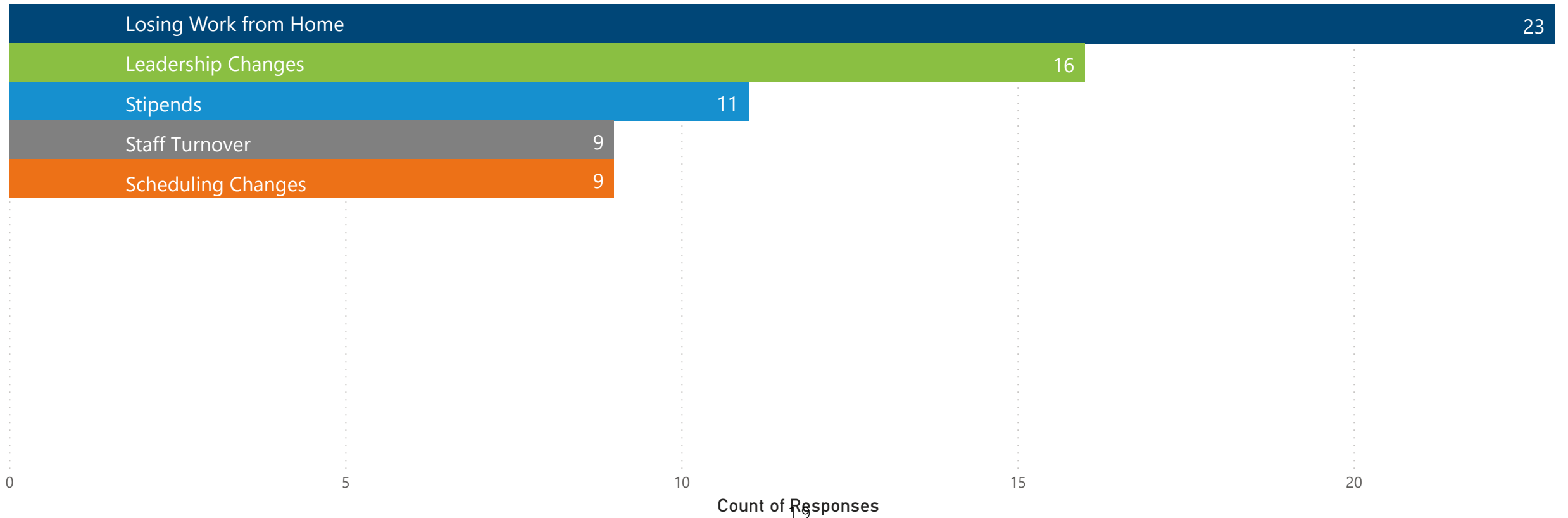




What changes at HealthWest have made the biggest impact for you this past year?

Data Source:
LaserFiche

Methodology Long form answers were reviewed and coded for themes. If multiple themes were addressed, multiple codes were assigned. Codes were then analyzed as quantitative data and displayed as the top 5 most common themes.



Dashboard Summary

Dashboard name: Staff Satisfaction Survey

Purpose: A comparison of the top themes from the 2023 and 2021 Staff Satisfaction Surveys

Description: Satisfaction and Importance tabs rank the top 5 and the bottom 5 (most and least satisfied, most and least important), the Changes that made the biggest difference and Making job less stressful tabs show the top five most frequently noted themes from the coded long answer questions. Methodology for coding and summarizing those questions is available in the relevant tabs.

Datasource: LaserFiche: vwPBI_StaffSurvey2023; Excel: 2021 Responses

Developer: [Kristina Baas](#)



Vision: Building a healthier, more informed, and inclusive community through innovation and collaboration.

Mission: To be a leader in integrated health care, inspiring hope and wellness in partnership with individuals, families, and the community.

Key Performance Indicators & Quality Report

August 2023

• Documenting Incidents Training

- During August and September, all staff being trained in identifying, documenting, and reporting incidents. Content covers accidents/injuries involving county/HW staff and property, as well as incidents involving HealthWest consumers.
- Launch of new Incident Report form and process within Lat43 also included in this training
- Will generate more complete, meaningful incident data, which will allow us to take action clinically with individuals and organizationally with safety and risk management)

• Satisfaction Survey

- LRE recently released the results of the annual regional satisfaction survey collection period
- Customer Services and QA staff met with the LRE to review data and have downloaded detailed data for further analysis.
- Highlights from the FY23 survey data:
 - 96.5% of respondents said they were satisfied with the help they received from HealthWest
 - 96% of respondents said they felt welcome at HealthWest
- Opportunities for improvement include education of consumers about grievances, appeals, and their rights; ensuring consumers and providers know about HealthWest's warmline; and increasing survey participation.
- Regionally, the satisfaction survey questions and process will need to be updated so that CCBHC demonstration sites can use the results for required reporting on Patient Experience of Care measures

• Performance Indicator Thresholds

- MDHHS has set new performance thresholds for MMBPIS Indicator 2a (timeliness of assessment following request for service) and Indicator 3 (timeliness of service following assessment), effective 10/1/23.
- Regionally, the LRE and its member affiliates have been studying the new standards and providing feedback to MDHHS, as well as analyzing how current performance compares to the FY24 thresholds.
 - If the Indicator 2a thresholds had been in effect last quarter, HealthWest would have met thresholds for 3 out of 4 defined Medicaid populations measured (DD Adults, DD Children, and MI Children).
 - If the Indicator 3 thresholds had been in effect 3 last quarter, HealthWest would have only met thresholds for 1 out of 4 defined Medicaid populations measured (DD Adults).
 - This is in line with other CMHSPs in our region, who are experiencing similar challenges (see below)

Indicator Threshold	Indicator 2a - Timeliness of Request to Assessment ≥ 62%					Indicator 3 - Timeliness of Assessment to Service ≥ 75.3%				
	DD Adult	DD Child	MI Adult	MI Child	Total	DD Adult	DD Child	MI Adult	MI Child	Total
OnPoint	11.1%	38.7%	42.1%	54.2%	43.4%	42.9%	77.8%	58.0%	52.1%	59.1%
HealthWest	85.7%	70.6%	52.2%	73.2%	61.1%	88.9%	61.5%	59.8%	61.7%	61.1%
Network180	62.8%	44.4%	26.5%	62.3%	50.0%	57.5%	38.2%	38.8%	46.0%	45.5%
Ottawa	57.9%	58.8%	63.6%	67.5%	64.8%	90.0%	66.7%	45.5%	51.0%	52.0%
West Michigan	100.0%	66.7%	72.0%	60.5%	69.3%	50.0%	91.7%	89.6%	61.4%	78.3%
Total	62.2%	52.2%	51.7%	67.7%	58.7%	63.9%	62.0%	60.0%	54.8%	57.9%

- **MDHHS Waiver Audit 90-Day Follow-Up Review**
 - The region’s CMHs are working to resolve the final outstanding items from the 90-day Follow-Up Review of our corrective action plans. HealthWest has submitted evidence for each item, and we are now awaiting confirmation from MDHHS that all citations have been resolved.

- **2023 CMHSP Site Review**
 - HealthWest’s annual CMHSP site review conducted by the LRE will take place next month, from September 12-15th.
 - Preparations are already underway for the site review, which will happen in a hybrid format and will include clinical chart reviews, credentialing and training reviews of HealthWest and provider staff, an audit of IT functions, evaluation of program-specific standards, and a review of completed corrective actions from last year’s site review.

- **Key Performance Indicators**
 - August 2023 KPI Report included following this summary.
 - Data Analytics Team has delivered dashboards for the following (all included in this month’s report):
 - Encounters and Service Delivery Trends
 - Medicaid Enrollment and Penetration Rates
 - Access Measures (timeliness of assessment and start of services)
 - Satisfaction Measures (level of consumer satisfaction)
 - Health Disparities (FUH-A and FUH-C)
 - Work continues on development of dashboards for the following:
 - Inpatient Recidivism (re-admission within 30 days of discharge)
 - Demand for Crisis Service (warmline, mobile crisis, pre-admission screening, crisis res/inpatient)
 - HR/Workforce Measures (positions in recruitment and filled, turnover)
 - In the past month, several data requests have been submitted for new dashboards and enhancements to existing dashboards.
 - The end vision is a comprehensive set of dashboards that allow for real-time monitoring and the ability to recognize issues, take proactive steps, and make improvements to improve quality.

Key Performance Indicators



Behavioral Health Encounters FY18 - FY23

Data Source:
Fastlane

claimcptcode

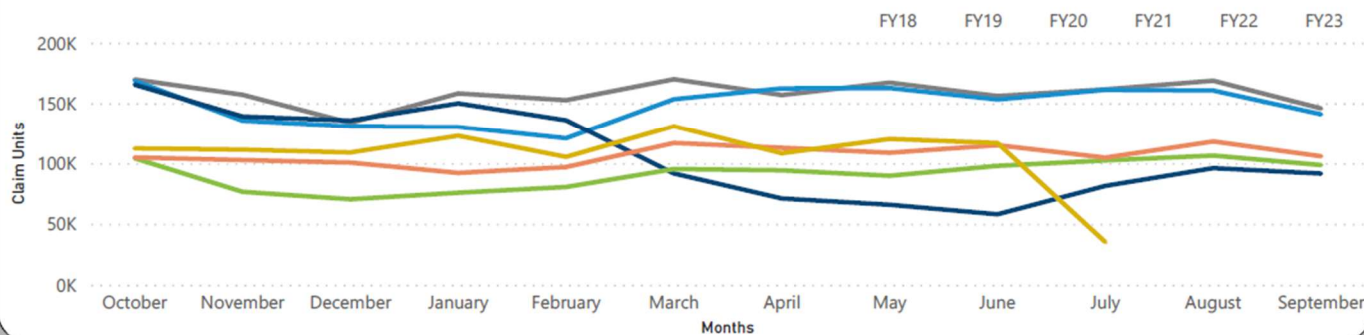
Multiple selections

RenderingProvName

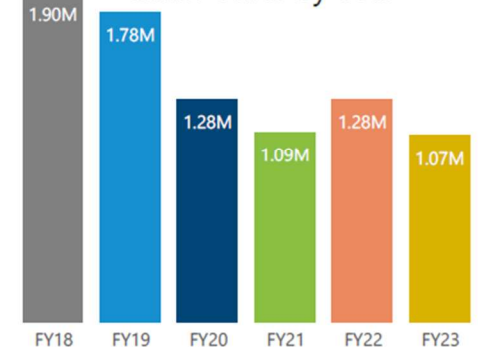
All

This data represents only encounters accepted by MDHHS.

Claim Units by Month



Claim Units by Year

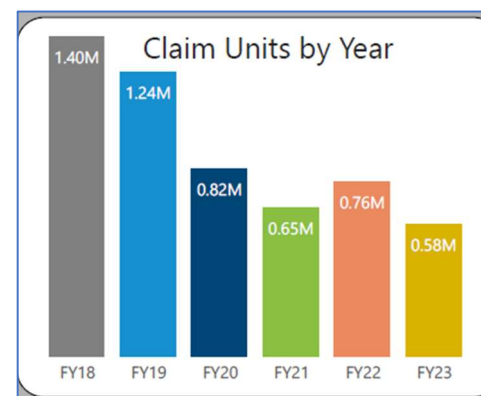


NOTES:

- Data does not yet include SUD encounters
- Data after May 2023 is preliminary and incomplete (due to lag between service delivery, claim submission, processing, and encounter reporting)

OBSERVATIONS:

- While the overall trend appears to show a decrease in the number of units per year, **the summary data hides significant differences for specific services.**
 - 99% of the decline from FY18-FY23 is associated with three services: CLS, Skill Building, and Respite (Fig. 1).
 - Removing those three services reveals an **increase in units** from FY21 to FY22, with FY23 on pace to exceed FY22 as well as all years back to FY18 (Fig. 2).
- Next steps are to dig into why this happened and identify the providers and consumers most acutely impacted.
- Additionally, as the number of consumers served and staff employed by HealthWest both grow, we need to look at trends regarding utilization (units per consumer) and productivity (units per staff)



23

Fig. 1

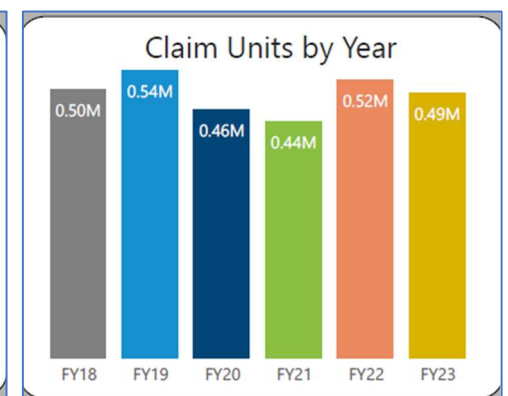
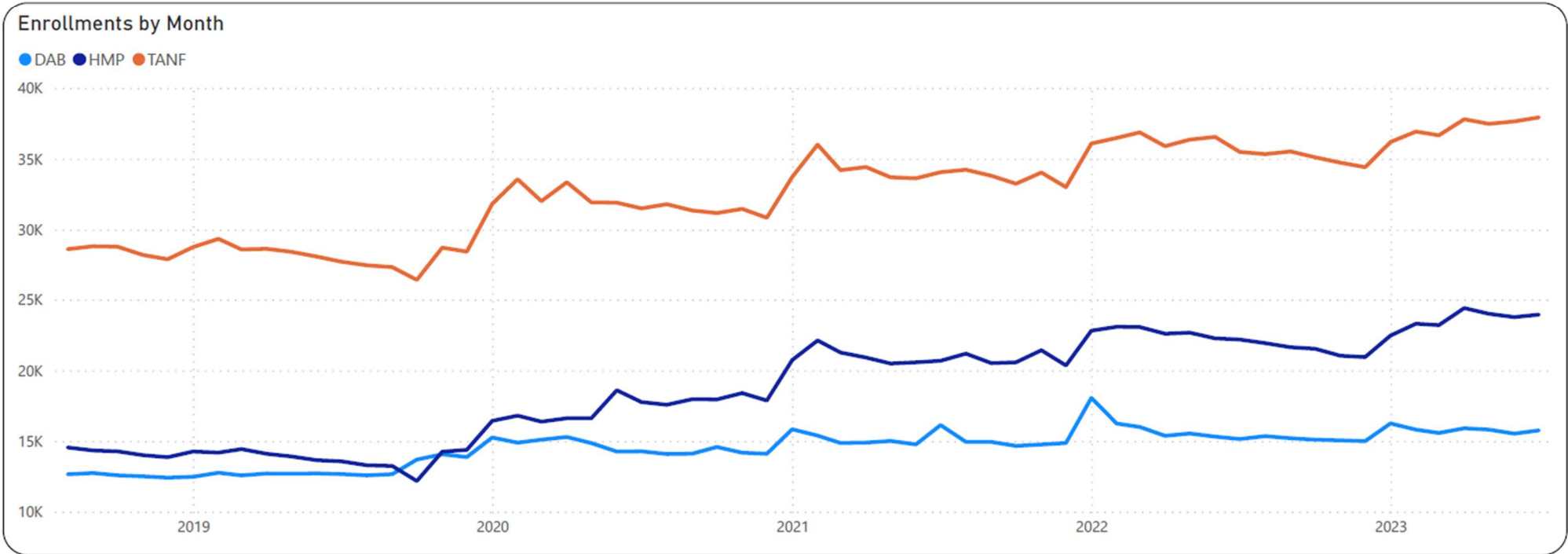



Fig. 2

Date

7/31/2018 7/31/2023



NOTES:

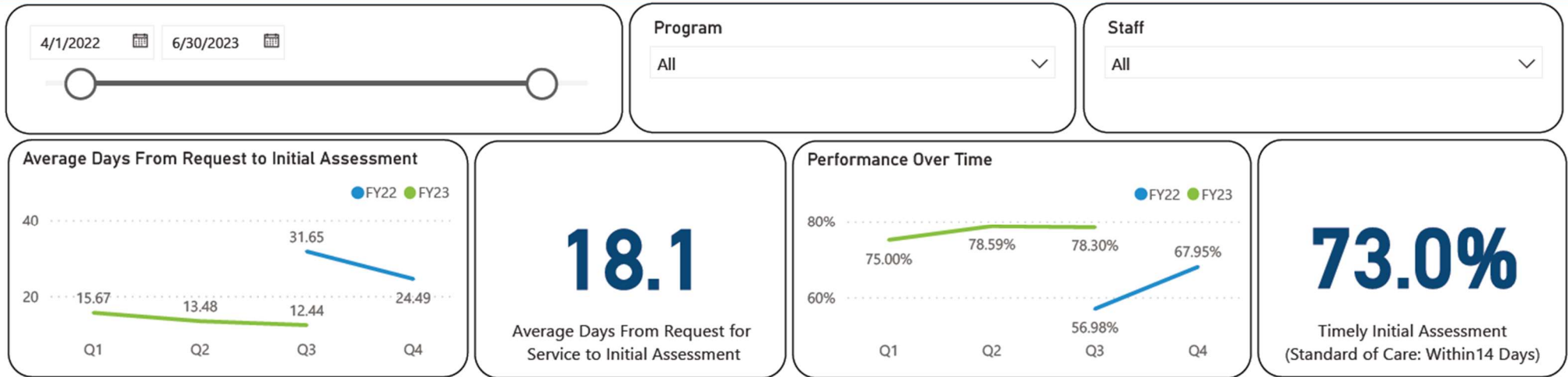
- Data reflects Muskegon County Medicaid enrollments, by type, for a rolling 5-year period that ends on July 31, 2023

OBSERVATIONS:

- No significant changes have been observed since MDHHS resumed Medicaid eligibility redeterminations following the end of the Covid-19 public health emergency. However, Finance and clinical teams continue to monitor closely and ensure that eligible consumers maintain Medicaid coverage.

Access: Request for Service to Initial Assessment

Date Last Refreshed
8/21/2023 11:35:44 AM



NOTES:

- This indicator measures the number of calendar days from a routine request for services to the completion of the initial biopsychosocial assessment, with a standard threshold of completing the assessment within 14 days of the request.
- All consumers are included within this measure, regardless of population, level of care, and funding source/insurance.
- While similar in intent and basic definition to MDHHS' Michigan Mission-Based Performance Indicator System (MMBPIS) measures, it should be noted that the above data does not utilize identical inclusion/exclusion criteria. This difference is intentional, to allow clinical teams to monitor timeliness for all consumers, regardless of their inclusion in state-reported measures. MMBPIS data (which applies MDHHS parameters and inclusion/exclusion criteria) is reported to the Board and HealthWest leadership separately on a quarterly basis, following submission of the required reporting measures.

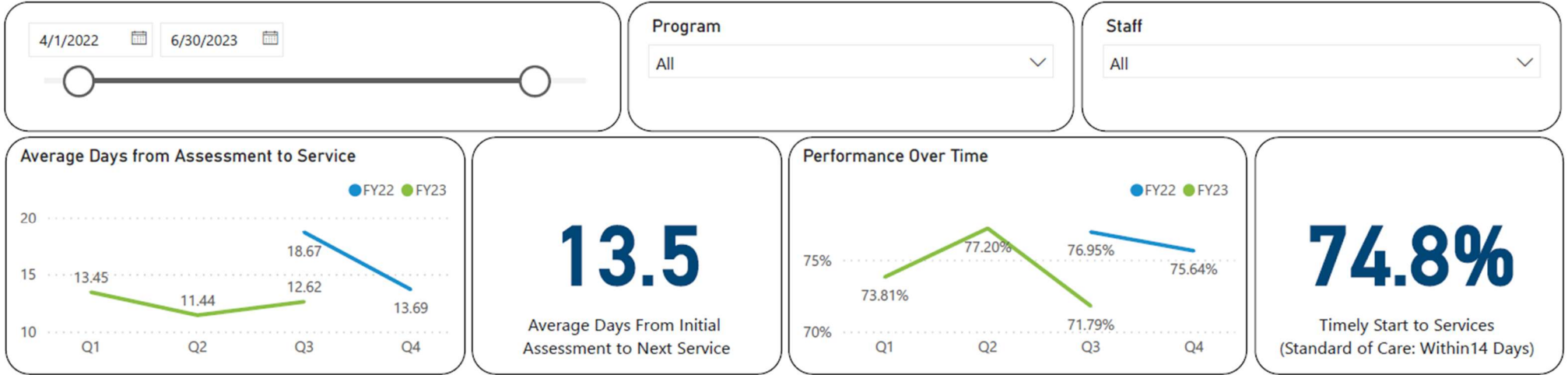
OBSERVATIONS:

- The average number of days from request for services to the initial assessment continues to improve, dropping from approximately 15.7 days to 12.4 days since the start of FY23.
- The percentage of consumers who meet MDHHS standards and are assessed within 14 days of a request for service also continues to improve, rising to 78.1% from 57% at this same time a year ago.
- High caseloads and the current clinical workflow have been identified as barriers to meeting standards and ensuring timely access to services.
- This has led to two improvement projects currently underway: the implementation of a new Assessment team to handle all initial biopsychosocial assessments for new consumers, and corresponding changes to the intake workflow within Lat43.
- We have also started asking questions about who is missing from this data. The Data Analytics team will be developing updates to the dashboards so that we can also monitor trends regarding those who drop out of the intake process or who never receive an assessment.



Access: Initial Assessment to Next Service

Date Last Refreshed
8/22/2023 11:34:06 AM



NOTES:

- This indicator measures the number of calendar days from a completed initial biopsychosocial assessment to the next service, with a standard threshold of providing the next service within 14 days of the assessment.
- All consumers are included within this measure, regardless of population, level of care, and funding source/insurance.
- While similar in intent and basic definition to MDHHS' Michigan Mission-Based Performance Indicator System (MMBPIS) measures, it should be noted that the above data does not utilize identical inclusion/exclusion criteria. This difference is intentional, to allow clinical teams to monitor timeliness for all consumers, regardless of their inclusion in state-reported measures. MMBPIS data (which applies MDHHS parameters and inclusion/exclusion criteria) is reported to the Board and HealthWest leadership separately on a quarterly basis, following submission of the required reporting measures.

OBSERVATIONS:

- The average number of days from request for services to the initial assessment continues to improve, dropping from approximately 13.4 days to 12.6 days since the start of FY23.
- The percentage of consumers who meet MDHHS standards and receive their next face-to-face service within 14 days of their initial assessment dropped slightly, decreasing from 76.9% to 71.7% compared this same time one year ago.
- High caseloads and the current clinical workflow have been identified as barriers for this indicator as well, with the expectation that the new Assessment team and updated intake workflows will lead to improved performance once implemented.
- Additionally, the Data Analytics team will also be updating this dashboard, so that we do not overlook consumers who never receive any ongoing services, whether that is due to withdrawal from the intake process, no-shows, dropping out of services, or some other reason.

Satisfaction with Services

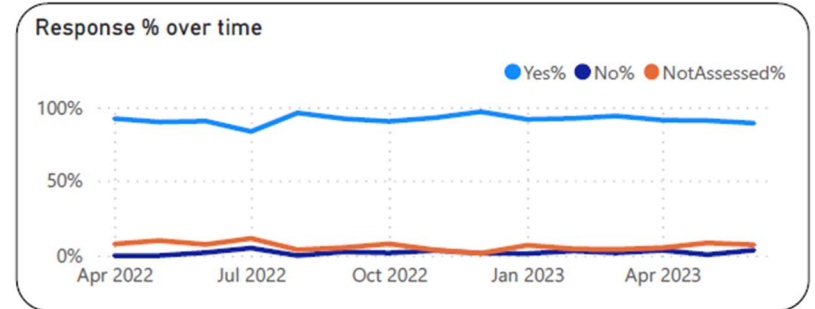
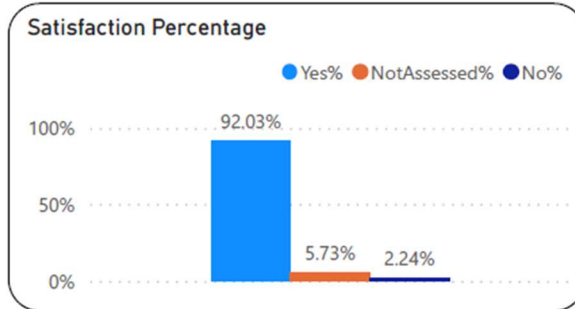
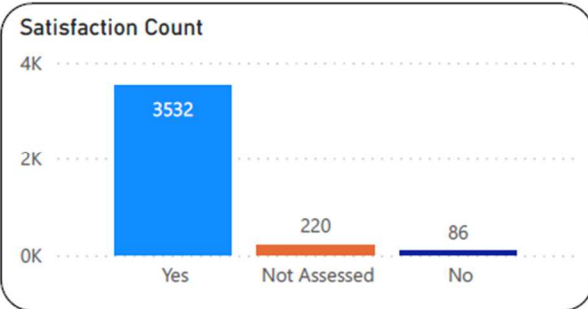
Date Last Refreshed
8/22/2023 11:34:06 AM

Review Date
4/1/2022 6/30/2023

Primary Program
All

Supervisor
All

Satisfaction Status
All



NOTES:

- The above data regarding satisfaction is based on consumers' feedback during the quarterly IPOS review process, given in response to a question that asks about the overall level of satisfaction with HealthWest services.

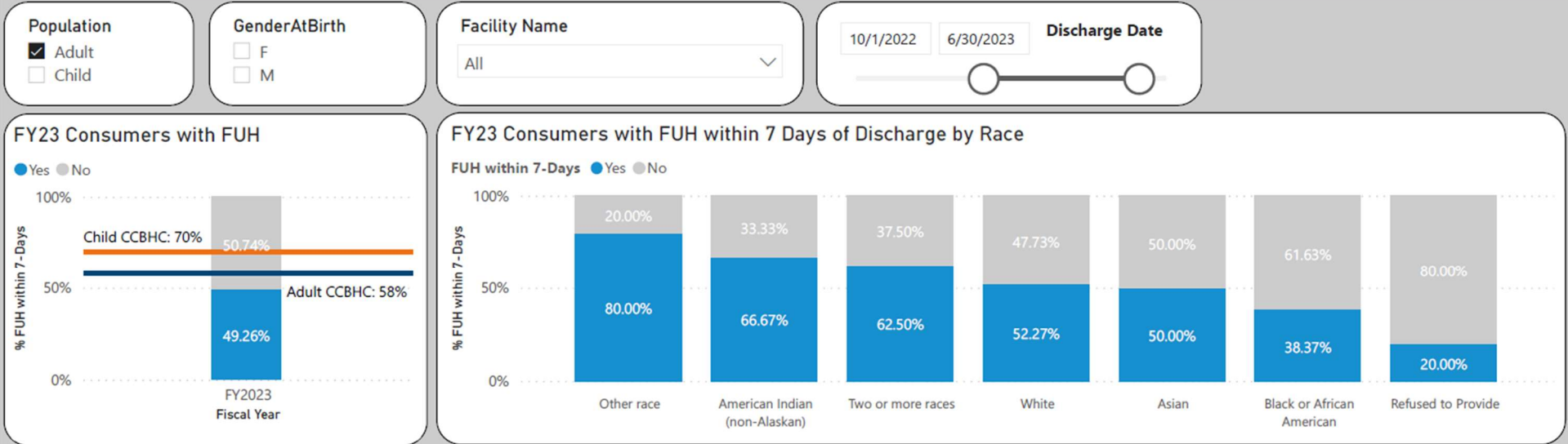
OBSERVATIONS:

- Consumer satisfaction remains high: over 92% of consumers report overall satisfaction with HealthWest services.
- Next steps are to clarify a consistent process to follow when an individual indicates that they are unsatisfied.
- We also need to review the data and understand why 220 consumers were not asked about their level of satisfaction (or why it was not documented).
- As a result of various requirements (CCBHC, LRE, grants, etc.) and new workflows in Lat43, satisfaction data is now available from a variety of sources: quarterly IPOS reviews, individual progress notes, NOMS questionnaires, regional satisfaction surveys, and CCBHC patient experience of care measures.
- Customer Services, QA, Data Analytics, and the PI Committee, among other teams, will need to evaluate these different sources, determine which are most meaningful as performance indicators and which generate the most actionable data, and look for ways to connect findings from each survey.
- From a consumer's perspective, we are also looking for ways to create efficiencies and avoid survey fatigue.



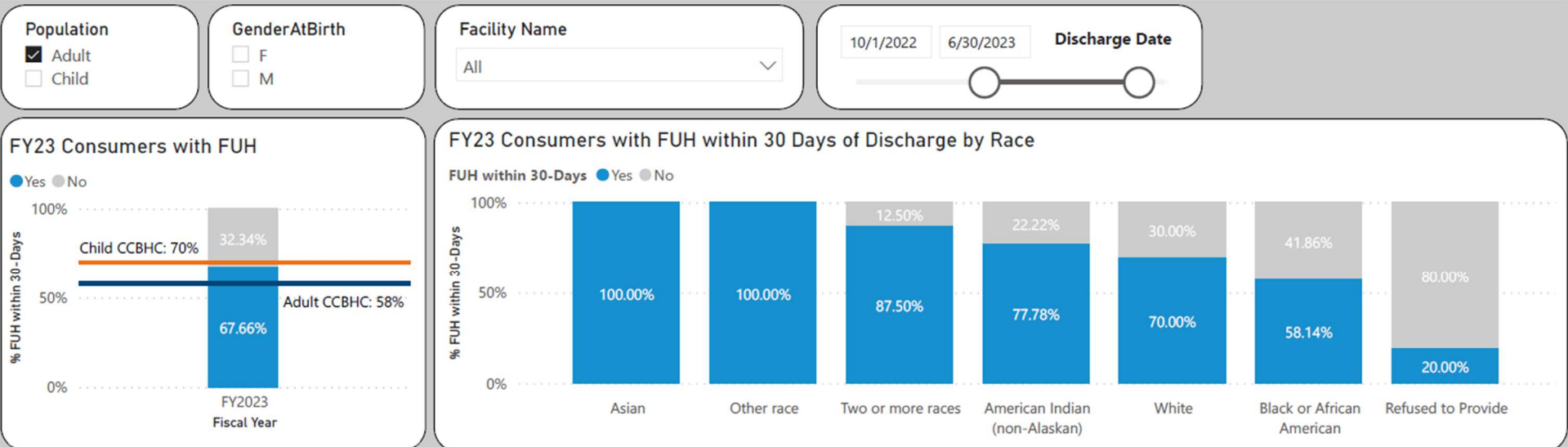
Follow-Up to Hospitalization by Race - 7 Days

Data Source: Latitude 43



Follow-Up to Hospitalization by Race - 30 Days

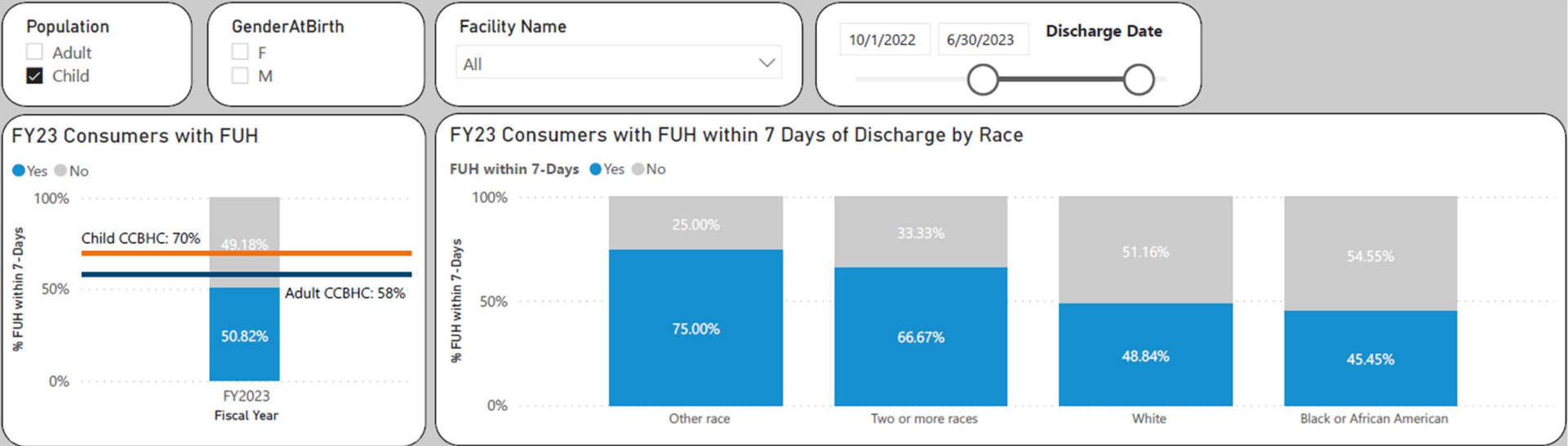
Data Source: Latitude 43





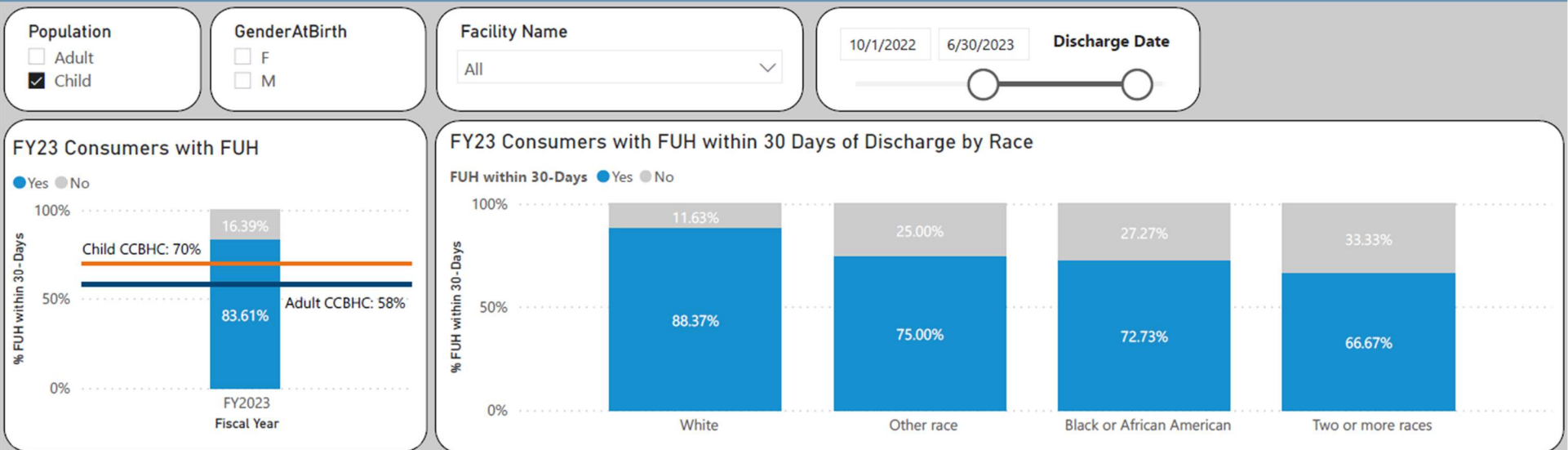
Follow-Up to Hospitalization by Race - 7 Days

Data Source:
Latitude 43



Follow-Up to Hospitalization by Race - 30 Days

Data Source:
Latitude 43



NOTES:

- Data is pulled from Lat43 records, including information about consumer demographics, hospital discharge, follow-up services, and inpatient facility.
- Consumers included in the measures are those individuals who are the responsibility of HealthWest for follow-up care.
- Measure definitions, parameters, and inclusion/exclusion criteria align with the HEDIS measures for Follow-Up to Hospitalization for Mental Illness, for adults and children (FUH-A and FUH-C, respectively).
- These are the same measures used for CCBHC quality/QBP metrics and are also incorporated into the LRE's Performance Improvement Project (PIP) to reduce disparities within FUH-A for African American men.

OBSERVATIONS:

- Adults
 - 7-day measure:
 - The current cumulative FY23 performance of 49.26% is below the CCBHC threshold for adults of 58%
 - Disparities persist between adults who are White and adults who are Black/African American (52.27% compared to 38.37%, respectively). Disparities are consistent for males and females, with a difference of between 13% and 14% for both groups.
 - This measure is the focus of current efforts to increase outreach following discharge, understand the reasons behind no-shows and cancellations, and support individuals coming out of institutions as they engage in treatment.
 - 30-day measure:
 - Cumulatively for FY23, adults continue to exceed the CCBHC threshold, with 67.66% of individuals receiving follow-up care within 30 days of discharge
 - However, a disparity continues to exist between adults who are White and adults who are Black/African American (70% compared to 58.14%, respectively). The gap between White adult females and Black/African American adult females (6.27%) is less than half of what it is for males (14.61%).
- Children
 - 7-day measure
 - While there are not significant disparities between Black/African American and White children, the cumulative FY23 performance of 50.82% is below the CCBHC threshold of 70% for children.
 - 30-day measure
 - Performance is significantly higher on the 30-day measure for children, with 83.61% of children receiving follow-up care within 30 days of discharge. This exceeds the CCBHC threshold of 70% for children.
 - While a disparity appears to emerge between Black/African American children (72.73%) and White children (88.37%), caution should be exercised when drawing conclusions, due to the small sample size for the groups in this measure.
- Next steps: Data Analytics and QA team met this week to identify enhancements to the dashboard that will create more actionable data. Enhancements will allow for drilling down into detailed, case-level data; exploration of geographical trends regarding access to follow-up care; monitoring of performance over time; and analysis of reasons for non-compliance.

About HealthWest

HealthWest is Muskegon County's Community Mental Health Service Provider (CMHSP) and Certified Community Behavioral Health Clinic (CCBHC). Our mission is to be a leader in integrated health care, inspiring hope and wellness in partnership with individuals, families, and the community. We serve upward of 8,000 Muskegon County residents per year.

As a CMHSP ...

HealthWest and all other CMHSPs traditionally serve individuals living with severe/persistent mental illness, intellectual or developmental disability, a substance use disorder and individuals with Medicaid or no insurance.

As a CCBHC ...

HealthWest and other CCBHCS serve individuals with mild or moderate mental health concerns, individuals with private insurance, youth in schools and the community at large with prevention services.

Our Services Include ...

Mental Health Services, Supports Coordination, Intellectual and Developmental Disability Services, Substance Use Services, Infant Mental Health, Autism Services, Youth Home-Based Services, School-Based Mental Health Services, Crisis Residential, Jail Diversion, Veteran Services, High-Intensity Treatment, Outpatient Therapy, Assertive Community Treatment, Employment Services, Occupational, Physical and Speech Therapy, Medical, Dental and Pharmacy, 24-Hour Crisis Response, Psychological First Aid, Clinical and Wellness Groups/Classes, Community Outreach, Education and Prevention.

Our Approach to Integrated Healthcare ...

We believe our physical and mental health is connected. That is why we've created our Integrated Health Clinic in partnership with Hackley Community Care. This clinic offers medical, dental and laboratory services and employs staff specially trained to work with individuals in services at HealthWest. In fact, our dental clinic was the first of its type in the country. Through a partnership with Trinity Health, we can also offer an on-site pharmacy. By bringing all of these services under one roof, we are improving access to quality healthcare and better serving the needs of our community.

To learn more about HealthWest, including our strategic plan and annual report, visit www.healthwest.net/about

To view our new staff orientation, visit www.healthwest.net/orientation

Important Agencies & Contacts

Michigan Department of Health and Human Services (MDHHS) - Behavioral Health and Developmental Disabilities Administration

The Behavioral Health and Developmental Disabilities Administration carries out responsibilities specified in the Michigan Mental Health Code and the Michigan Public Health Code. It also administers Medicaid Waivers for people with developmental disabilities, mental illness, and serious emotional disturbance, and it administers prevention and treatment services for substance use disorders. The administration establishes the policy directions and standards for the statewide system, including Community Mental Health Services Programs services to children and adults, substance abuse prevention and treatment, autism services to children and families, problem gambling addictions services and state hospital centers.

Website: www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth

Elizabeth Hertel, Director, 517-241-3626, HertelE@michigan.gov

Farah Hanley, Chief Deputy Director for Health, 517-335-6821, HanleyM@michigan.gov

Meghan Groen, Deputy Director - Behavioral and Physical Health and Aging Services Administration, 517-241-4072, GroenM2@michigan.gov

Lakeshore Regional Entity (LRE)

The Lakeshore Regional Entity is a Prepaid Inpatient Health Plan for people with mental illness, developmental disability, and substance use disorders in Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa counties.

Website: www.lsre.org

Customer Services, 800-897-3301, customerservice@lsre.org

Mary Marlatt-Dumas, Chief Executive Officer, 231-769-2050, marymd@lsre.org

Other LRE Community Mental Health Service Providers

West Michigan Community Mental Health (Mason, Lake & Oceana Counties)

Website: www.wmcmhs.org

Lisa Williams, Chief Executive Officer, 231-745-4659, LisaH@wmcmhs.org

Network 180 (Kent County)

Website: www.network180.org

William Ward, Executive Director, 616-855-5201, William.Ward@network180.org

Community Mental Health of Ottawa County

Website: www.miottawa.org/Health/CMH/

Lynne Doyle, Executive Director, 616-494-5421, ldoyle@miottawa.org

OnPoint (Allegan County)

Website: www.onpointallegan.org

Mark Witte, Executive Director, 269-673-6617, mwitte@onpointallegan.org

Community Mental Health Association of Michigan (CMHA)

The Community Mental Health Association of Michigan is the state association representing and advocating for Michigan's public mental health system and those served by this system.

Website: www.cmham.org

Robert Sheehan, Executive Director, 517-237-3142; rsheehan@cmham.org

Alan Bolter, Associate Director, 517-237-3144; abolter@cmham.org

Substance Abuse and Mental Health Services Administration (SAMHSA)

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation and to improve the lives of individuals living with mental and substance use disorders, and their families.

Website: www.samhsa.gov

CARF International

CARF provides accreditation services worldwide at the request of health and human service providers.

Website: www.carf.org



Save the Date!

**Annual Fall Conference
*Beyond Boundaries***

October 23 & 24, 2023

Grand Traverse Resort

Traverse City, Michigan



MEMORANDUM

Date: August 25, 2023

To: HealthWest Board of Directors

CC: Mark Eisenbarth, Muskegon County Administrator
 Matt Farrar, Muskegon County Deputy Administrator
 Angie Gasiewski, Muskegon County Accounting Manager

From: Rich Francisco, Executive Director

Subject: **Director's Update**

MDHHS Updates:

- State of Michigan, MDHHS SFY2024 Behavioral Health (BH) Capitation Rates Draft Rate was presented to the PIHPs and CMHSP on 8/23/2024. Brandy and I are still digesting the results, as this is a massive and complicated report with a lot of entity and risk factors in the calculation from Milliman. Our initial review and take away from the presentation, it does **not** suggest major changes to our current rates, but we do need to make sure we understand the impact of PHE unwind and enrollment impact on the rates, as well as other factors used. There is a period of Q and A at this point with PIHPS and CMHSP before the final rates are published.

Lakeshore Regional Entity updates:

- LRE and HealthWest corporate counsels are finalizing the details of the agreement related to the remaining 20% of past liabilities owed to the CMHSPs.
- LRE held the second meeting on 08/21/2023 on the Wakely ISF analysis results and follow up questions to the CMH Directors and Finance CFOs. The first one was 08/09/2023. There are a lot of questions regarding the model at this point and Wakely is taking that back for answers. Most of the questions surrounding the model is that it is based on Milliman rates, but the issue is that there is still a lack of understanding regarding how some of the factors used in that rate is being calculated. Historically, Milliman has based it on experience, this does not account for current experience or experience that may be coming such as the impact of CCBHC for the other CMHSPs becoming demonstration sites in Oct. of 2023.
- LRE site review is scheduled for Sept 11th – 14th for HW. Quality staff are working with teams and busy preparing for this site audit.
- I followed up with LRE on HW appointment of LRE Board member for a community member – Holly sent the information to Marion at the LRE for Linda Dunmore, CNO.

Marion stated that she will then send Linda additional form to fill out and process her appointment.

Executive Director activities:

- Compliance Committee update – We have had our first Compliance Committee meeting and have developed an agenda for what will be discussed and included, along with follow up items for issues found if needed and determining areas for improvement if needed. The group is made up of Recipient rights, Finance, Provider Network, Quality Improvement, Compliance, and Building and Environment staff.
- Quality Improvement update – At the last Full board meeting, I gave an update of the KATA lean framework training that I completed for leadership, and since that time, we have had requests to do process improvements from several staff that have attended. We now have 2 KATA projects going with Data analytics team and Quality and requests for process improvements are coming in from other teams: Autism and Access.
- I continue to have strategic planning meetings with County directors: HR, IT and finance and continuing to identify areas for improvement. The changes occurring are in HR with aligning some county and HW policies for drug testing. In Finance, we are working on integrating the chart of accounts in BSA system that the county uses and moving away from SAGE. With the help of IT, HW is also looking at potentially using AOD (attendance on demand) system that Public Health is using to replace our TimeOut system, but more evaluation will be done on this to understand how this is configured for HW use.
- Just wanted to let the Board know that I worked on motion with Kristen Wade at HR to remove the 60 day holds for internal applications, and for HealthWest to go back to the 6-month evaluation. This has become problematic for staff in terms of service delivery where in services need to be delivered right away and not being able to fill position because of this hold is proving to be a barrier. We are already dealing with a shortage of applicants and by having a hold on vacancies, it further limits us to add staff in a timely manner and provide much needed services to consumers.
- HealthWest Event: The annual Health, Wellness and Recovery health fair held on August 17 was a success! The HW staff did an excellent job at coordinating, volunteering, and ensuring this event takes place as a resource for the community to get more information on health service offerings in Muskegon.

On the horizon:

- Continuing to review Organizational Chart and evaluate programmatic level need.
- Evaluate and review grants in HW. This will include monitoring, identifying teams and programs impacted, understanding the financial status of each grant. The goal is to ensure grants are doing what they are intended to do.
- Continue to meet with Providers we contract with and other community partners.
- Continue to meet with internal teams – MI Adult teams coming up next.
- Full board program level/team level presentations will be coming. Next month we will have Ann Judson present.