

## HEALTHWEST

### FINANCE COMMITTEE MEETING MINUTES

**May 17, 2024**

**8:00 a.m.**

#### CALL TO ORDER

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

#### ROLL CALL

Committee Members Present: Jeff Fortenbacher, Janet Thomas, Thomas Hardy, Commissioner Marcia Hovey-Wright, Remington Sprague, M.D.

Committee Members Absent: Commissioner Charles Nash

Also Present: Rich Francisco, Holly Brink, Gina Post, Brandy Carlson, Shannon Morgan, Amber Berndt, John Weerstra, Melina Barrett, Brittani Duff, Gary Ridley, Justine Tufts, Jennifer Hoeker, Suzanne Beckeman, Bethany Sebree, Matt Plaska, Kris Redmon, Christy LaDronka, Gordon Peterman, Latesha Johnson

Guests Present: Angela Gasiewski

#### **MINUTES**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve the minutes of the April 19, 2024, meeting as written.

**MOTION CARRIED**

#### **ITEMS FOR CONSIDERATION**

A. Approval of Expenditures for March 2024

It was moved by Commissioner Hovey-Wright, seconded by Dr. Sprague, to approve expenditures for the month of March 2024, in the total amount of \$11,722,160.32.

**MOTION CARRIED**

B. Monthly Report from the Chief Financial Officer

Ms. Carlson presented the February report, noting an overall cash balance of (\$1,058,479.39) as of March 31, 2024.

C. Finance Update Memorandum

Ms. Carlson presented the Finance Update Memorandum for the Board review.

D. Authorization to Approve FY2024 Fee Schedule

It was moved by Mr. Hardy, seconded by Dr. Sprague, to approve the FY2024 HealthWest Fee Schedule effective June 1, 2024.

**MOTION CARRIED**

E. Authorization to Approve Bathroom Remodification

It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize HealthWest to procure and fund a Bathroom Remodification completed by Accessible Home Design, LLC up to \$18,600 to be completed by September 30, 2024.

**MOTION CARRIED**

F. Authorization to Enter a Grant Funded Project Agreement

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to accept grant from Michigan Public Health Institute (MPHI), on behalf of MDHHS, in the amount of \$30,366, titled "Mobile Crisis/Crisis Stabilization Unit Tracking Module Grant," effective May 1, 2024, through September 30, 2024.

**MOTION CARRIED**

G. Authorization to Procure Battery Operated Lift

It was moved by Commissioner Hovey-Wright, seconded by Dr. Sprague, to authorize HealthWest to procure and fund a Battery-Operated incline Platform Lift, inclusive of installation, complete by A4 Access up to \$36,435.00 to be completed by September 30, 2024.

**MOTION CARRIED**

H. Authorization to Increase Purchase Order for Rehmann Robson

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to authorize HealthWest to increase the Rehmann Robson purchase order, not to exceed, \$54,000.00 through September 30, 2024.

**MOTION CARRIED**

I. Authorization to Approve Behavioral Center of Michigan Reimbursement

It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize HealthWest to reimburse the Behavioral Center of Michigan \$94,600.00 for Community Inpatient Services.

**MOTION CARRIED**

J. Authorization to Approve Contract with Redi-Rental

It was moved by Dr. Sprague, seconded by Mr. Hardy, to authorize HealthWest to sign a 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 15<sup>th</sup>, 2024, at a total cost not to exceed \$12,173.56.

**MOTION CARRIED**

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

There was no new business.

## **COMMUNICATIONS**

Ms. Carlson provided communication from Roslund Prestage & Company.

## **DIRECTOR'S COMMENTS**

Rich Francisco, Executive Director HW

- First, I would like to share with the Finance Board Committee that we have hired a Chief Clinical officer, Christy LaDronka to the position. I have no doubt that Christy, with her background, will provide the leadership needed guide our Clinical programs and service delivery at HW. She is about a week into her new role and already asking the right questions.
- From LRE Ops and Executive Committee meeting: MDHHS has sent N180 Executive Director and the LRE Executive Director a letter that outlines a plan of correction for N180 to address and serve the individuals on their Autism wait list. There is an estimate of about 300 individuals who I believe are at various stages of the wait list such as waiting for initial assessment, waiting for services, or waiting for a different provider. N180 defends that there is a much higher need than is reflected in what the current rate for autism is. This has been one of the reasons that N180 is projecting a deficit. On top of just the autism shortfall in funding, N180 has also projected additional funding shortfall in other areas and will request utilization of the ISF dollars. The LRE executive board meeting will continue to have a discussion on this at the next LRE Board work session and will discuss strategies to address these overspend (higher utilization). The LRE Ops group, which I am a part of, is trying to get together to help brainstorm/resolve the funding issues because it will take a concerted effort from all levels.
- Internal to HW, I will be looking more closely at our service levels for the different programs. We will begin with Autism and expand from there. We are forecasting an underspend in this Autism, and I am trying to understand where we are at with the various stages of service delivery in Autism. We do have a wait list for initial testing based on the data, but I would really like our staff to have access review and monitor it on a regular basis to see where we fall as far as service delivery. By having access to this information, the leaders in the program can pivot and make decisions when they see we are not at normal levels for service delivery.
- I attended a meeting at the state level to discuss some Capitation Rate Structure proposal from Milliman related to CCBHC services for FY2025: Richard Carpenter led the meeting with other PIHPs and CMHSP that are CCBHC to determine the impact of the proposed changes. Again, there are still a lot that is unknown and partners, PIHP and CMHSPS across the state are in the process of a Q and A and producing feedback to the proposed structure. I am sure Brandy will be providing more information on this as it develops. Some of the proposed changes are listed below:
  - One of the proposed changes is to include the CCBHC PPS-1 in the capitation rates.
  - The rate determination will occur on a regionwide basis so Capitation for the region, not statewide like we are used to for all other services. For CCBHC, it will be calculated for the region by Milliman using historical funding inputs.
  - The rate structure for CCBHC program would include Program PPS-1 Medicaid expenditures.
  - The proposed structure would remove the CCBHC Supplemental payments.
  - CCBHC service expenses delivered by non-CCBHC providers would remain in other existing payments.

*HW Corrective Action Plan: Dated March 28,2024 received from Michigan Department of Treasury. I believe that Brandy has already brought this to your attention at the last finance committee meeting, but I wanted to reiterate that HW is going to be addressing the findings from the Financial Audit. This is not the first time that HW was cited for this in our financial audit. The audit findings letter request that HW address the findings by improving deficiencies in the area of:*

- **Actual expenditures exceeded the amounts authorized in the budget. Please describe actions being taken to prevent budget variances.**

***HW responded with the detailed strategies:***

Corrective Action – HealthWest has implemented a number of additional financial dashboards and reports that are reviewed by the Board, Leadership members and Finance members on a monthly basis. Monthly meetings are occurring with our Provider Network to discuss service delivery and payment issues. Monthly review of Medicaid revenue and projections to our Medicaid population are monitored monthly. All these actions will improve the process to amend the budget appropriately. Finally, mid-year budget adjustments have been added to our budget cycle.

**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 8:51 a.m.

Respectfully,

Jeff Fortenbacher  
Committee Chair

/hb

**PRELIMINARY MINUTES**  
**To be approved at the Finance Meeting on**  
June 28, 2024



# FINANCE COMMITTEE

May 17, 2024 – 8:00 a.m.

376 E. Apple Ave. Muskegon, MI 49442

Committee Chair: Jeff Fortenbacher  
Committee Vice-Chair: Janet Thomas

## AGENDA

- |    |  |             |
|----|--|-------------|
| 1. | Call to Order  | Quorum      |
| 2. | Approval of Minutes  |             |
|    | A. Approval of the Minutes of April 19, 2024<br>(Attachment #1 pg.1-3)                             | Action      |
| 3. | Items for Consideration  |             |
|    | A. Approval of Expenditures for March 2024<br>(Attachment #2 pg. 4)                                | Action      |
|    | B. Monthly Report from the Chief Financial Officer<br>(Attachment #3 pg. 5-9)                      | Information |
|    | C. Finance Update Memorandum<br>(Attachment #4 pg. 10-11)  | Information |
|    | D. Authorization to Approve FY2024 Fee Schedule<br>(Attachment #5 pg. 12-19)                       | Action      |
|    | E. Authorization to Approve Bathroom Remodification<br>(Attachment #6 pg. 20-25)                   | Action      |
|    | F. Authorization to Enter Grant Funded Project Agreement<br>(Attachment #7 pg. 26)                 | Action      |
|    | G. Authorization to Procure Battery-Operated Lift<br>(Attachment #8 pg. 27-29)                     | Action      |
|    | H. Authorization to Increase Purchase Order for Rehmann Robson<br>(Attachment #9 pg. 30)           | Action      |
|    | I. Authorization to Approve Behavioral Center of Michigan Reimbursement<br>(Attachment #10 pg. 31) | Action      |
|    | J. Authorization to Approve Contract for Redi-Rental<br>(Attachment #11 pg. 32)                    | Action      |

**Main Office**

- 4. Old Business
- 5. New Business
- 6. Communication
  - A. Roslund Prestage & Company  
(Attachment #12 pg. 33-34) Information
  - B. CMHA Summer Conference  
(Attachment #13 pg. 35-47) Information
  - C. Muskegon County Employee Appreciation Day / Picnic  
(Attachment #14 pg. 48) Information
- 7. Director's Comments
- 8. Audience Participation
- 9. Adjournment Action

/hb

**HEALTHWEST**

FINANCE COMMITTEE MEETING MINUTES

**April 19, 2024**

**8:00 a.m.**

**CALL TO ORDER**

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

**ROLL CALL**

Committee Members Present: Janet Thomas, Thomas Hardy, Commissioner Marcia Hovey-Wright, Remington Sprague, M.D.

Committee Members Absent: Jeff Fortenbacher, Commissioner Charles Nash

Also Present: Rich Francisco, Holly Brink, Gina Post, Brandy Carlson, Shannon Morgan, Amber Berndt, John Weerstra, Gina Kim, Jackie Farrar, Kristi Chittenden, Justine Belvitch, Melina Barrett, Anissa Goodno, Urbaine Ndoeye, Mickey Wallace, Brittani Duff, Gary Ridley

Guests Present: Angela Gasiewski, Christina Schaub, William Hirschman

**MINUTES**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve the minutes of the March 15, 2024, meeting as written.

**MOTION CARRIED**

**ITEMS FOR CONSIDERATION**

**A. Approval of Expenditures for February 2024**

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve expenditures for the month of February 2024, in the total amount of \$8,222,864.46.

**MOTION CARRIED**

**B. Monthly Report from the Chief Financial Officer**

Ms. Carlson presented the February report, noting an overall cash balance of \$2,511,359.26 as of February 29, 2024.

**C. Finance Update Memorandum**

Ms. Carlson presented the Finance Update Memorandum for the Board review.

**D. HealthWest 2023 Financial Statement**

Roslund Prestage & Company presented the HealthWest 2023 Financial Statement for the Board review.

**E. Authorization to Approve Contract Increase for Relias Learning**

It was moved by Mr. Harvey, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Board of Directors to sign the amendment to the contract with Relias Learning to purchase 100 additional Training Seats, increasing the total expenditure to \$79, 131.00

**MOTION CARRIED**

## **OLD BUSINESS**

There was no old business.

## **NEW BUSINESS**

There was no new business.

## **COMMUNICATIONS**

There was no communication.

## **DIRECTOR'S COMMENTS**

Mr. Francisco, Executive Director, provided his Director's Report:

- I received a notification Memo from the LRE this week. This prompted a review of SEDW services, possibly our non-compliance with a requirement of the program to provide Wrap Around services each month to individuals in this program. I am having our Compliance Team and Quality Improvement Team review the data. There was a change in January per MDHHS that SEDW program recipients get Wrap Around services, code H2022. While we do not have many kids in the SEDW program, we want to ensure that we are complying with service delivery requirements.
- HealthWest is also looking into the CCBHC T1040 codes, and reviewing whether we are providing all the codes related to the mild to moderate services that we are providing. The LRE is developing reports to review these codes for accuracy and completeness per CMHSP. We at HW use this along with our internal reports as a starting point and to help dig into our encounter reporting related to CCBHC and adjust procedures or practice if we need to.
- There continues to be ongoing discussion with LRE on the CMHSP/LRE contract. The goal is still to have the contract finalized by October 1, 2024 and CMHSPs will be signing current contract extensions until then.
- CARF survey date has now been set, and that will be on May 15<sup>th</sup> through May 17<sup>th</sup>. Staff have been busy preparing and ensuring our policies and procedures for various standard requirements are updated. Shortly after our CARF audit week, I will be attending the CMHA director's forum on May 19<sup>th</sup>.
- NatCon Update:
  - Successful conference but a very busy conference. There was a handle of themes this year with one of the biggest themes is the use of AI in various areas of HealthCare and Mental Health. Just so many areas that are using AI now and the value that it adds to the any sector. We will be seeing more AI on the day-to-day technology such as in the wearables for diagnostics and prevention and Electronic medical records enhancement with AI for efficiency.
  - The TED talk presentations were very successful, and many people truly enjoyed that format more than the traditional 45 to an hour session on topics.
  - The conference ended with an interview format presentation with Michelle Obama and interviewed by renowned author Isabelle Wilkerson. The halls were packed and the presentation was very encouraging and positive.
- Lastly, Mr. Francisco share that that him and Cyndi met with MDHHS director, Donata Kidd, to touch base on projects that overlapped with them. One is an update on the MichiCANS soft launch, MDHHS is now doing their soft launch and pilot and are not doing the MichiCANS prescreen. They are completing MichiCANS for kids entering the foster care system, and if a referral is made to HW it will be routed to us via CC360. Upon the completion of their assessment, we will be keeping our eye on the prescreens referred to our CMH. The other discussion we had was surrounding the Medicaid enrollment process, and Donata was going to look more into the various cases where we have individuals that are dropping off



from DAB to other fund sources. She is going to look for systemic issues on their end. In the meantime, she wants HW to escalate cases to her to investigate further.

**AUDIENCE PARTICIPATION**

Angela Gasiewski, Muskegon County Finance Director, shared the audit report from this year was a very dramatic improvement and recognized Ms. Carlson and her Finance Team for all of their hard work and great improvement.

**ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 8:36 a.m.

Respectfully,

Janet Thomas  
Committee Vice-Chair

/hb

**PRELIMINARY MINUTES**  
**To be approved at the Finance Meeting on**  
May 17, 2024

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Administration	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>Expenditures for the month of March 2024 totaled \$11,722,160.32. HealthWest had three pays in March. Large or unusual expenditures for the month includes:</p> <ol style="list-style-type: none"> <li>1. Payments to Beacon Services in the amount of \$477,546.45 for Residential Services.</li> <li>2. Payments to Cherry Street in the amount of \$143,374.59 for SUD Services.</li> <li>3. Payments to Fa-Ho-Lo Family in the amount of \$125,056.98 for Residential Services.</li> <li>4. Payments to Mercy Health Partners MHP in the amount of \$431,653.39 for Community Inpatient Services.</li> <li>5. Payments to MOKA in the amount of \$1,227,715.82 for Residential Services.</li> <li>6. Payments to Neurobehavioral in the amount of \$194,032.00 for Community Inpatient Services.</li> <li>7. Payments to Peter Chang Enterprises PCE in the amount of \$144,562.02 for Latitude43 for electronic health records.</li> <li>8. Payments to Pine Rest in the amount of \$322,470.03 for Community Inpatient Services.</li> <li>9. Payments to Pioneer Resources in the amount of \$564,150.53 for Residential, Autism and Skill Building Services.</li> <li>10. Payments to Preferred Employment in the amount of \$102,975.79 for Support Employment Services.</li> <li>11. Payments to Samaritas in the amount of \$162,248.85 for</li> <li>12. Payments to Services of Hope in the amount of \$156,501.42 for CCBHC Services.</li> <li>13. Payments to Turning Leaf in the amount of \$217,866.00 for</li> <li>14. Payments to West Shore Medical in the amount of \$71,910.65 for</li> </ol>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
I move to approve expenditures for the month of March 2024, in the total amount of \$11,722,160.32.			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

HealthWest



March 2024

Board Report

**COMMUNITY MENTAL HEALTH  
INTERIM BALANCE SHEET 2220  
MENTAL HEALTH**

**March 31, 2024**

<b>ASSETS</b>	<b>THIS YEAR</b>	<b>LAST YEAR</b>
Cash in Bank	(1,058,479.39)	(7,007,144.37)
Imprest (Petty) Cash	2,700.00	2,700.00
Accounts Receivable	158,911.22	97,428.42
Due From Other Funds	2,482,211.77	3,774.83
Prepaid Items	479,787.00	387,210.44
Due from other governments	8,208,365.71	15,712,451.82
<b>Total Assets</b>	<b><u>\$ 10,273,496.31</u></b>	<b><u>\$ 9,196,421.14</u></b>
<b>LIABILITIES AND EQUITY</b>		
Accounts Payable	\$ 43,040.67	\$ 44,687.98
Undistributed Receipts	13,861.43	1,041.04
Medicaid Children's Waiver	-	47,067.89
Medicaid SED Waiver	-	(9,387.73)
Unearned Revenue - Lilac St Donation	-	50,100.00
<b>Total Liabilities and Equity</b>	<b><u>\$ 56,902.10</u></b>	<b><u>\$ 133,509.18</u></b>
<b>DEFERRED INFLOWS OF RESOURCES</b>		
Deffered Medicaid fee for services and capitation	<u>\$ 7,348,752.52</u>	<u>\$ 20,118,082.05</u>
Fund Balance at beginning of year	(1,855,032.17)	(17,073,240.73)
Nonspendable FB-Prepays	406,196.22	
<b>**Total Fund Balance</b>	<b><u>\$ (1,448,835.95)</u></b>	<b><u>\$ (17,073,240.73)</u></b>
<b>TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND FUND BALANCE</b>		
	<b><u>\$ 5,956,818.67</u></b>	<b><u>\$ 3,178,350.50</u></b>
<b>NET OF REVENUES VS EXPENDITURES</b>		
	<b><u>\$ 4,316,677.64</u></b>	<b><u>\$ 6,018,070.64</u></b>
<b>Transferred to HealthWest LRE FY2019 Account for:</b>		
Due to Fund 2220 HealthWest (2221-0000-214.222)	\$2,479,928.03	\$0.00
Fund 2221 Fund Balance	\$2,242.12	\$0.00
<b>Transferred to County Equipment Revolving Account for:</b>		
Mental Health Center Building (6660-0000-349220)	\$2,554,917.89	\$2,612,350.87
Future Equipment Purchases (6660-0000-349222)	\$117,184.04	\$89,534.24

**COMMUNITY MENTAL HEALTH  
INTERIM BALANCE SHEET 7930  
CMH CLIENT FUNDS**

**March 31, 2024**

<b>ASSETS</b>	<b>THIS YEAR</b>	<b>LAST YEAR</b>
Cash	\$ 464,792.64	\$ 715,110.96
Imprest Cash	\$ 40,655.36	\$ 34,537.88
Accounts Receivable	\$ 177.00	\$ 177.00
<b>Total Assets</b>	<b><u>\$ 505,625.00</u></b>	<b><u>\$ 749,825.84</u></b>
<b>LIABILITIES AND EQUITY</b>		
Accounts Payable	\$ 650.00	\$ -
Due to Other Funds	\$ 1,886.79	\$ 3,051.33
Undistributed Receipts	\$ 503,088.21	\$ 746,774.51
	<b><u>\$ 505,625.00</u></b>	<b><u>\$ 749,825.84</u></b>

## HealthWest

### Statement of Revenues, Expenditures and Changes in Fund Balances

Budget to Actual

For the Period from October 1, 2023 through March 31, 2024

	Original Budget	YTD Budget	YTD Actual	Over (Under) YTD Budget
<b>Revenues</b>				
Medicaid funding:				
Medicaid capitation	\$ 62,472,930	\$ 31,236,465	\$ 30,137,050	\$ (1,099,415)
Medicaid - Autism capitation	8,901,598	4,450,799	4,675,459	224,660
Medicaid capitation - settlement	-	-	(5,010,045)	(5,010,045)
Healthy Michigan Plan	7,443,215	3,721,607	3,921,355	199,748
Healthy Michigan Plan - settlement	-	-	1,139,459	1,139,459
CCBHC Supplemental	9,829,312	4,914,656	5,514,218	599,562
CCBHC - Settlement	-	-	1,456,597	1,456,597
State General Fund:				
Formula Fundings	2,066,287	1,033,144	1,033,144	-
Settlement	-	-	-	-
Grant Revenue	7,196,098	3,598,049	2,544,817	(1,053,232)
Local revenue:				
County appropriation	706,819	353,410	353,407	(3)
Client and third party fees	283,778	141,889	321,047	179,158
Performance Based Incentive Program (PBIP)	-	-	-	-
Interest income	138,398	69,199	90,612	21,413
Other revenue	364,845	182,423	76,876	(105,547)
<b>Total revenue</b>	<b>99,403,280</b>	<b>49,701,641</b>	<b>46,253,996</b>	<b>(3,447,645)</b>
<b>Expenditures</b>				
Salaries and wages	32,935,119	16,467,559	14,363,180	(2,104,379)
Fringe benefits	11,089,790	5,544,895	7,610,787	2,065,892
Staff professional development	121,533	60,767	155,167	94,400
Contractual expense	36,696,994	18,348,497	24,250,921	5,902,424
Overhead expense	1,019,872	509,936	1,201,830	691,894
Supplies	851,406	425,703	179,085	(246,618)
Utilities	238,811	119,406	190,596	71,190
Insurance	342,207	171,104	-	(171,104)
Capital outlay	4,928	2,464	3,083	619
Other expenses	1,458,724	729,362	546,168	(183,194)
Transfers	-	-	116,466	116,466
<b>Total expenditures</b>	<b>84,759,384</b>	<b>42,379,693</b>	<b>48,617,283</b>	<b>6,237,590</b>
<b>Net change in fund balance</b>	<b>14,643,896</b>	<b>7,321,948</b>	<b>(2,363,287)</b>	<b>(9,685,235)</b>
Fund balance (deficit), beginning of year	(1,448,836)	(1,448,836)	(1,448,836)	-
<b>Fund balance (deficit), end of year</b>	<b>\$ 13,195,060</b>	<b>\$ 5,873,112</b>	<b>\$ (3,812,123)</b>	<b>\$ (9,685,235)</b>

This financial report is for internal use only. It has not been audited, and no assurance is provided.

Oct-March 2024

Summary Speciality Services

	<u>Actual YTD</u>	<u>Budget</u>	<u>Balance</u>	<u>% Utilized</u>	<u>Annualized Budget</u>	
<b>Total Expense Budgeted Services</b>	\$ 17,222,434.08	\$ 43,249,401.00	\$ (26,026,966.92)	40%	\$ 21,624,700.50	50.00%
<b>Speciality Services</b>						
<b>Autism</b>	\$ 470,909.79	\$ 1,491,050.00	(1,020,140.21)	32%	\$ 745,525.00	50.00%
<b>Community Inpatient</b>	\$ 2,957,297.53	\$ 6,167,000.00	(3,209,702.47)	48%	\$ 3,083,500.00	50.00%
<b>Outpatient</b>	\$ 2,505,439.47	\$ 7,558,082.00	(5,052,642.53)	33%	\$ 3,779,041.00	50.00%
<b>Specialized Residential</b>	\$ 9,447,170.00	\$ 20,998,125.00	(11,550,955.00)	45%	\$ 10,499,062.50	50.00%
<b>SUD Services</b>	\$ 1,841,617.29	\$ 7,035,144.00	(5,193,526.71)	26%	\$ 3,517,572.00	50.00%
<b>Total Speciality Services</b>	\$ 17,222,434.08	\$ 43,249,401.00	\$ (26,026,966.92)	40%	\$ 21,624,700.50	

Budget (Allocated/**Overallocated**)



## MEMORANDUM

Date: May 17, 2024

To: HealthWest Board of Directors  
Rich Francisco, Executive Director

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

From: Brandy Carlson, Chief Financial Officer

Subject: **Finance Update**

During the month of May, HealthWest will bring the following motions to the County Commissioners for approval.

- To continue an aggregate threshold master agreement with Applied Imaging and Great American Financial. And to sign the contract authorizing additional services by Papercut, through October 31, 2026, for an amount not to exceed \$140,000 annually. Further, authorize HealthWest to solicit for the new fiscal year.

HealthWest entered into an agreement with Applied Imaging to lease and maintain all the copiers and printers in November 2021. Since then, HealthWest has added units to support new locations and amended the agreement in January 2022, April 2022, and July 2022. In February 2023, a lease agreement was completed for a Value Lease Amendment, thus consolidating all prior agreements. The lease agreement is held with Applied Imaging but paid to Great America Financial. At this time, HealthWest also entered a maintenance plan for the units that were owned by the County. HealthWest would now like to add Papercut to our agreement with Applied Imaging. Papercut would allow HealthWest to track which departments are printing or making copies to better allocate funds, among many other things. It has been made aware to HealthWest that the County of Muskegon has terminated their contract with Applied Imaging. Therefore, HealthWest is also requesting to submit a Request for Proposal (RFP) to maintain integrity in our procurement process. This RFP will be completed for the new fiscal year.
- To add a Comprehensive Jail Assessment Specialist position, Wage Grade HX 00190, Funding Account 7500.

Family Outreach Center has been contracted with HealthWest for the last five (5) to seven (7) years to provide services in the jail, conducting American Society of Addiction

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Medicine (ASAM) assessments, facilitating groups and providing support to persons identified in need of treatment and resources for Substance Use Disorder (SUD). Family Outreach Center has chosen to discontinue providing this service and HealthWest is planning to provide the service internally. This requires adding a Comprehensive Jail Assessment Specialist position (HX-00190, \$22.907/hr - \$28.863/hr) to the HealthWest jail-based team to continue this service and support care coordination, connecting individuals to HealthWest and other providers in the community. The cost of this position will be grant funded by the State Opioid Response (SOR) Grant (7500-3000002). This change will reduce our contracting costs and increase our personnel budget. This position will cost HealthWest \$73,155; however, the reduction in cost of the contract with Family Outreach Center will offset this cost.

- Reclassify the Substance Use Disorder (SUD) Assessor, Position X88901, Wage Grade HX 00210, to a Comprehensive Assessment Specialist, Wage Grade HX 00190, and freeze Employee E93028659 at the current pay rate.  
HealthWest has created a Comprehensive Assessment Team in an effort to more closely manage client assessments. This team will conduct all assessments, including Substance Use Disorder (SUD), so we no longer need a dedicated SUD assessor. The employee in the position is willing to move to the new Comprehensive Assessment Team if we are willing to freeze her pay until the new pay grade catches up to her. The employee is currently at Pay Grade HX 00210 (\$23.528 - \$29.615) at Step 6, and the new position is at Pay Grade HX 00190 (\$22.907 - \$28.863). This change will not cause a funding account change for this position.
- To place Employee E93032517 at Step 2 of Wage Grade HX 00447.  
This employee was offered the position of Chief Clinical Officer for HealthWest, which is an Executive Level position overseeing all clinical operations for the agency and entails significant workload and responsibility. The employee has worked for Muskegon County/HealthWest for almost ten (10) years, hire date 10/20/2014, and has almost ten (10) years of exemplary supervisory and management experience with HealthWest. We would like to place her at Step 2 of the Chief Clinical Officer wage grade. We feel this is fair because the employee would be eligible for a merit increase in her current role within the next few months, which would have allowed us to put her at Step 2 of the new wage grade if she accepted the position after her next merit increase. The employee is currently at Wage Grade HX 00432 (\$43.351 - \$55.160) at Step 4 (\$104,177) and will go to Wage Grade HX 00447 (\$52.885 - \$67.464) at Step 2 (\$115,498) if approved.

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## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>																																																												
<b>REQUESTING DIVISION</b> Finance Department	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer																																																													
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>																																																															
<p>Authorization is requested for HealthWest to approve the FY2024 Fee Schedule effective June 1, 2024.</p> <p>Rates have been calculated based on billable services provided in FY2024 utilization of services to date and the Standard Cost Allocation methodology.</p> <p>For your review, the highest utilized services are as follows:</p>																																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">CPT Code:</th> <th style="width: 45%;">Service Description:</th> <th style="width: 15%;">Proposed HealthWest Rate</th> <th style="width: 15%;">FY19 Section 904 Report</th> <th style="width: 15%;">FY23 LRE CMHSP Range</th> </tr> </thead> <tbody> <tr> <td>H0036</td> <td>Homebased Services</td> <td>\$74.29</td> <td>\$63.00 - \$118.00</td> <td>\$61.66 - \$136.74</td> </tr> <tr> <td>H0031</td> <td>Mental Health Assessment by Non-Physician</td> <td>\$200.27</td> <td>\$273.00 - \$995.00</td> <td>\$217.05 - \$1,480.72</td> </tr> <tr> <td>H2030</td> <td>Clubhouse Psychosocial</td> <td>\$5.71</td> <td>\$6.00</td> <td>N/A</td> </tr> <tr> <td>T1017</td> <td>Targeted Case Management</td> <td>\$197.53</td> <td>\$62.00 - \$87.00</td> <td>\$112.14 - \$252.20</td> </tr> <tr> <td>H0018</td> <td>Crisis Residential</td> <td>\$400.59</td> <td>\$405.00 - \$448.00</td> <td>N/A</td> </tr> <tr> <td>H0032</td> <td>Mental Health Service Plan Development by Non-Physician</td> <td>\$158.83</td> <td>\$154.00 - \$210.00</td> <td>\$111.69 - \$320.97</td> </tr> <tr> <td>H2023</td> <td>Supported Employment</td> <td>\$124.78</td> <td>\$7.00 - \$92.00</td> <td>\$26.16 - \$170.43</td> </tr> <tr> <td>T1002</td> <td>RN Services</td> <td>\$252.42</td> <td>\$59.00 - \$127.00</td> <td>\$66.40 - \$249.40</td> </tr> <tr> <td>90837</td> <td>Psychotherapy, 60 minutes</td> <td>\$211.00</td> <td>\$178.00 - \$222.00</td> <td>\$250.47 - \$453.43</td> </tr> <tr> <td>H0039</td> <td>Assertive Community Treatment</td> <td>\$72.42</td> <td>\$24.00 - \$102.00</td> <td>\$118.76 - \$192.60</td> </tr> <tr> <td>99215</td> <td>Evaluation &amp; Management – Established Patient</td> <td>\$309.00</td> <td>\$242.00 - \$443.00</td> <td>\$301.72 - \$825.85</td> </tr> </tbody> </table>				CPT Code:	Service Description:	Proposed HealthWest Rate	FY19 Section 904 Report	FY23 LRE CMHSP Range	H0036	Homebased Services	\$74.29	\$63.00 - \$118.00	\$61.66 - \$136.74	H0031	Mental Health Assessment by Non-Physician	\$200.27	\$273.00 - \$995.00	\$217.05 - \$1,480.72	H2030	Clubhouse Psychosocial	\$5.71	\$6.00	N/A	T1017	Targeted Case Management	\$197.53	\$62.00 - \$87.00	\$112.14 - \$252.20	H0018	Crisis Residential	\$400.59	\$405.00 - \$448.00	N/A	H0032	Mental Health Service Plan Development by Non-Physician	\$158.83	\$154.00 - \$210.00	\$111.69 - \$320.97	H2023	Supported Employment	\$124.78	\$7.00 - \$92.00	\$26.16 - \$170.43	T1002	RN Services	\$252.42	\$59.00 - \$127.00	\$66.40 - \$249.40	90837	Psychotherapy, 60 minutes	\$211.00	\$178.00 - \$222.00	\$250.47 - \$453.43	H0039	Assertive Community Treatment	\$72.42	\$24.00 - \$102.00	\$118.76 - \$192.60	99215	Evaluation & Management – Established Patient	\$309.00	\$242.00 - \$443.00	\$301.72 - \$825.85
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<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other																																																														
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other																																																														

**COMMUNITY MENTAL HEALTH OF MUSKEGON COUNTY  
FY2024 RATES**

**PROPOSED EFFECTIVE 6/01/2024  
FEIN: 38-6006063**

<b>HCPC/CPT CODE</b>	<b>DESCRIPTION</b>	<b>DURATION</b>	<b>FY 2024 RATES</b>
0362T	Behavior identification supporting assessment	15 mins	114.11
0373T	Adaptive behavior treatment with protocol modification requiring 2+ technicians for patient who exhibits destructive behavior(s)	15 mins	37.50
90791	Psychiatric Assessment	Encounter	329.00
90832	Individual Therapy, 30 minutes	16-37 mins	126.75
90832 ST	Trauma Focused CBT Individual Therapy, 30 minutes	16-37 mins	132.22
90834	Individual Therapy, 45 minutes	38-52 mins	203.93
90834 ST	Trauma Focused CBT Individual Therapy, 45 minutes	38-52 mins	198.34
90837	Individual Therapy, 60 minutes	53+ mins	211.00
90837 ST	Trauma Focused CBT Individual Therapy, 60 minutes	53+ mins	211.00
90839	Crisis Intervention, 1st hour	30-74 mins	311.00
90840	Crisis Intervention, each additional 30 minutes	30 mins	87.87
90846	Family Therapy	Encounter	253.00
90847	Family Psychotherapy with Patient Present	Encounter	253.00
90853 UN	Group Therapy, 2 patients served	Encounter	92.00
90853 UP	Group Therapy, 3 patients served	Encounter	92.00
90853 UQ	Group Therapy, 4 patients served	Encounter	92.00
90853 UR	Group Therapy, 5 patients served	Encounter	92.00
90853 US	Group Therapy, 6 or more patients served	Encounter	92.00
90887	Interpretation or explanation of results of psychiatric exams	Encounter	107.40
92507	Speech & Language Individual	Encounter	307.00
92523	Evaluation of speech sound production with evaluation of language comprehension and expression	Encounter	395.00
92526	Swallowing Treatment	Encounter	418.18
92610	Speech & Language Evaluation	Encounter	396.00
96112	Assessments and Testing, first hour	First Hour	197.58
96113	Assessments and Testing, each additional 30 mins	30 mins	93.51
96116	Neurobehavioral Status Exam, per hour	First Hour	145.28
96121	Neurobehavioral Status Exam, each additional hour	60 mins	118.34
96127	Brief Emotional/Behavioral Assessment w/ scoring & documentation, per standardized instrument	Encounter	7.40
96130	Psychological Testing, first hour	First Hour	198.97
96131	Psychological Testing, each additional hour	60 mins	135.24
96136	Psychological or Neuropsychological Testing, first 30 mins	First 30 mins	66.57
96137	Psychological or Neuropsychological Testing, each additional 30 mins	30 mins	61.28
96372	Medication Administration	Encounter	43.00
97110	Therapeutic Exercises to Develop Strength	15 mins	172.00
97112	Neuromuscular Re-Education of Movement	Encounter	35.64
97116	Gait Training	Encounter	31.04
97129	Cognitive Skills Development	15 mins	35.40
97151	Behavior Identification Assessment	15 mins	42.82
97151 U5	ABA Behavior Identification Assessment	15 mins	42.82
97153	Adaptive Behavior Treatment	15 mins	30.00
97154 UN	Group Adaptive Behavior Treatment by Protocol, 2 patients served	15 mins	17.45
97154 UP	Group Adaptive Behavior Treatment by Protocol, 3 patients served	15 mins	11.63
97154 UQ	Group Adaptive Behavior Treatment by Protocol, 4 patients served	15 mins	8.73
97154 UR	Group Adaptive Behavior Treatment by Protocol, 5 patients served	15 mins	6.98
97154 US	Group Adaptive Behavior Treatment by Protocol, 6 or more patients served	15 mins	5.82
97155	Clinical Observation & Direction of Adaptive Behavior Treatment w/ Protocol Modification	15 mins	30.00
97156	Family Behavior Treatment Guidance	15 mins	37.50
97157 UN	Multiple Family Behavior Treatment Guidance Administered by Qualified Professional, 2 patients served	15 mins	23.79
97157 UP	Multiple Family Behavior Treatment Guidance Administered by Qualified Professional, 3 patients served	15 mins	15.86
97157 UQ	Multiple Family Behavior Treatment Guidance Administered by Qualified Professional, 4 patients served	15 mins	11.89
97157 UR	Multiple Family Behavior Treatment Guidance Administered by Qualified Professional, 5 patients served	15 mins	9.52
97157 US	Multiple Family Behavior Treatment Guidance Administered by Qualified Professional, 6+ patients served	15 mins	7.93
97158	Adaptive Behavior Treatment Social Skills Group	15 mins	23.79
97158 UN	Adaptive Behavior Treatment Social Skills Group, 2 patients served	15 mins	11.89
97158 UP	Adaptive Behavior Treatment Social Skills Group, 3 patients served	15 mins	7.93
97158 UQ	Adaptive Behavior Treatment Social Skills Group, 4 patients served	15 mins	5.95
97158 UR	Adaptive Behavior Treatment Social Skills Group, 5 patients served	15 mins	4.76
97158 US	Adaptive Behavior Treatment Social Skills Group, 6 or more patients served	15 mins	3.97
97161	PT Evaluation/Re-Evaluation, Low Complexity	Encounter	97.48
97161 WX	PT Evaluation/Re-Evaluation - LOCUS Assessment, Low Complexity	Encounter	97.48
97162	PT Evaluation/Re-Evaluation, Moderate Complexity	Encounter	260.62
97162 WX	PT Evaluation/Re-Evaluation - LOCUS Assessment, Moderate Complexity	Encounter	260.62
97163	PT Evaluation/Re-Evaluation, High Complexity	Encounter	425.25
97163 WX	PT Evaluation/Re-Evaluation - LOCUS Assessment, High Complexity	Encounter	425.25
97165	OT Evaluation/Re-Evaluation, Low Complexity	Encounter	305.00
97165 WX	OT Evaluation/Re-Evaluation - LOCUS Assessment, Low Complexity	Encounter	305.00
97166	OT Evaluation/Re-Evaluation, Moderate Complexity	Encounter	450.00
97166 WX	OT Evaluation/Re-Evaluation - LOCUS Assessment, Moderate Complexity	Encounter	450.00
97167	OT Evaluation/Re-Evaluation, High Complexity	Encounter	602.00
97167 WX	OT Evaluation/Re-Evaluation - LOCUS Assessment, High Complexity	Encounter	602.00
97168	OT Re-Evaluation	Encounter	67.02
97168 WX	OT Re-Evaluation - LOCUS Assessment	Encounter	67.02
97530	Therapeutic Activities, Direct	15 mins	157.00
97530 Y4	Therapeutic Activities, Direct - SAMHSA approved EBP for co-occurring disorders	15 mins	157.00
97533	Sensory Integrative Techniques	15 mins	100.38
97535	Self-care/Home Management Training	15 mins	34.56
97537	Community/Work Reintegration Training	15 mins	38.84
97542	Wheelchair Management/Propulsion Training	15 mins	39.23
97803	Health Assessment/Nutrition	15 mins	78.00
97803 WX	Health Assessment/Nutrition - LOCUS Assessment	15 mins	78.00
99075	Medical Testimony	Hours	remove
99202	Evaluation and Management, New Patient 15-29 mins	Encounter	144.00
99202 QJ	Evaluation and Management, New Patient 15-29 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	144.00
99202 Y4	Evaluation and Management, New Patient 15-29 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	144.00
99203	Evaluation and Management, New Patient 30-44 mins	Encounter	204.00
99203 QJ	Evaluation and Management, New Patient 30-44 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	204.00
99203 Y4	Evaluation and Management, New Patient 30-44 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	204.00
99204	Evaluation and Management, New Patient 45-59 mins	Encounter	246.00

99204 QJ	Evaluation and Management, New Patient 45-59 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	246.00
99204 Y4	Evaluation and Management, New Patient 45-59 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	246.00
99205	Evaluation and Management, New Patient 60-74 mins	Encounter	405.00
99205 QJ	Evaluation and Management, New Patient 60-74 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	405.00
99205 Y4	Evaluation and Management, New Patient 60-74 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	405.00
99211	Evaluation and Management, Established Patient	Encounter	68.00
99211 QJ	Evaluation and Management, Established Patient - Service/items provided to a prisoner or patient in state or local custody	Encounter	68.00
99211 Y4	Evaluation and Management, Established Patient - SAMHSA approved EBP for Co-occurring disorders	Encounter	68.00
99212	Evaluation and Management, Established Patient 10-19 mins	Encounter	100.00
99212 QJ	Evaluation and Management, Established Patient 10-19 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	100.00
99212 Y4	Evaluation and Management, Established Patient 10-19 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	100.00
99213	Evaluation and Management, Established Patient 20-29 mins	Encounter	170.00
99213 QJ	Evaluation and Management, Established Patient 20-29 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	170.00
99213 Y4	Evaluation and Management, Established Patient 20-29 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	170.00
99214	Evaluation and Management, Established Patient 30-39 mins	Encounter	257.00
99214 QJ	Evaluation and Management, Established Patient 30-39 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	257.00
99214 Y4	Evaluation and Management, Established Patient 30-39 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	257.00
99215	Evaluation and Management, Established Patient 40-54 mins	Encounter	309.00
99215 QJ	Evaluation and Management, Established Patient 40-54 mins - Service/items provided to a prisoner or patient in state or local custody	Encounter	309.00
99215 Y4	Evaluation and Management, Established Patient 40-54 mins - SAMHSA approved EBP for Co-occurring disorders	Encounter	309.00
99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	Encounter	31.76
G0177	Family Psycho-Education: Educational Groups	Encounter, min 45 mins	228.57
G0177 Y4	Family Psycho-Education: Educational Groups - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	228.57
G0177 UN	Family Psycho-Education: Educational Groups, 2 patients served	Encounter, min 45 mins	114.29
G0177 UN/Y4	Family Psycho-Education: Educational Groups, 2 patients served - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	114.29
G0177 UP	Family Psycho-Education: Educational Groups, 3 patients served	Encounter, min 45 mins	76.19
G0177 UP/Y4	Family Psycho-Education: Educational Groups, 3 patients served - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	76.19
G0177 UQ	Family Psycho-Education: Educational Groups, 4 patients served	Encounter, min 45 mins	57.14
G0177 UQ/Y4	Family Psycho-Education: Educational Groups, 4 patients served - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	57.14
G0177 UR	Family Psycho-Education: Educational Groups, 5 patients served	Encounter, min 45 mins	45.71
G0177 UR/Y4	Family Psycho-Education: Educational Groups, 5 patients served - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	45.71
G0177 US	Family Psycho-Education: Educational Groups, 6 or more patients served	Encounter, min 45 mins	38.10
G0177 US/Y4	Family Psycho-Education: Educational Groups, 6 or more patients served - SAMHSA approved EBP for co-occurring disorders	Encounter, min 45 mins	38.10
H0001	Alcohol and/or Drug Assessment	Encounter	150.00
H0001 QJ	Alcohol and/or Drug Assessment - Service/items provided to a prisoner or patient in state or local custody	Encounter	150.00
H0001 Y4	Alcohol and/or Drug Assessment - SAMHSA approved EBP for co-occurring disorders	Encounter	150.00
H0002	Brief Screening for Non-Inpatient Program	Encounter	170.48
H0002 QJ	Brief Screening for Non-Inpatient Program - Service/ites provided to a prisoner or patient in state or local custody	Encounter	170.48
H0002 WX	Brief Screening for Non-Inpatient Program - LOCUS Assessment	Encounter	170.48
H0018	Crisis Residential	Per Diem	400.59
H0020	Medication Assisted Treatment	Per Diem	25.00
H0025	School Success & Child Care Expulsion	Encounter	418.00
H0031	Mental Health Assessment, by non-physician	Encounter	200.27
H0031 QJ	Mental Health Assessment, by non-physician - Service/items provided to a prisoner or patient in state or local custody	Encounter	200.27
H0031 WX	Mental Health Assessment, by non-physician - LOCUS Assessment	Encounter	200.27
H0032	Mental Health Service Plan Development by Non-Physician	Encounter	168.78
H0032 TS	Mental Health Service Plan Development by Non-Physician, Monitoring Treatment Plans	Encounter	168.78
H0032 QJ	Mental Health Service Plan Development by Non-Physician - Service/items provided to a prisoner or patient in state or local custody	Encounter	168.78
H0032 TS/QJ	Mental Health Service Plan Development by Non-Physician, Monitoring Treatment Plans - Service/items provided to a prisoner or patient in state or local custody	Encounter	168.78
H0032 Y4	Mental Health Service Plan Development by Non-Physician - SAMHSA approved EBP for co-occurring disorders	Encounter	168.78
H0032 TS/Y4	Mental Health Service Plan Development by Non-Physician, Monitoring Treatment Plans - Service/items provided to a prisoner or patient in state or local custody - SAMHSA approved EBP for co-occurring disorders	Encounter	168.78
H0034	Medication Training and Support	15 mins	257.00
H0034 Y4	Medication Training and Support - SAMHSA approved EBP for co-occurring disorders	15 mins	257.00
H0036	Community psychiatric supportive treatment	15 mins	74.29
H0036 QJ	Community psychiatric supportive treatment - Service/items provided to a prisoner or patient in state or local custody	15 mins	74.29
H0036 ST	Community psychiatric supportive treatment - Related to trauma or injury	15 mins	74.29
H0036 ST QJ	Community psychiatric supportive treatment - Related to trauma or injury - Service/items provided to a prisoner or patient in state or local custody	15 mins	74.29
H0036 UN	Community psychiatric supportive treatment - 2 patients served	15 mins	37.15
H0036 UN QJ	Community psychiatric supportive treatment - 2 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	37.15
H0036 UN ST	Community psychiatric supportive treatment - 2 patients served - Related to trauma or injury	15 mins	37.15
H0036 UN ST QJ	Community psychiatric supportive treatment - 2 patients served - Related to trauma or injury - Service/items provided to a prisoner or patient in state or local custody	15 mins	37.15
H0036 UN Y2	Community psychiatric supportive treatment - 2 patients served - Dialectical Behavior Therapy (DBT)	15 mins	37.15
H0036 UN Y3	Community psychiatric supportive treatment - 2 patients served - Parent Management Training Oregon Model	15 mins	37.15
H0036 UN Y4	Community psychiatric supportive treatment - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	37.15
H0036 UP	Community psychiatric supportive treatment - 3 patients served	15 mins	24.76
H0036 UP QJ	Community psychiatric supportive treatment - 3 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	24.76
H0036 UP ST	Community psychiatric supportive treatment - 3 patients served - Related to trauma or injury	15 mins	24.76
H0036 UP ST QJ	Community psychiatric supportive treatment - 3 patients served - Related to trauma or injury - Service/items provided to a prisoner or patient in state or local custody	15 mins	24.76
H0036 UP Y2	Community psychiatric supportive treatment - 3 patients served - Dialectical Behavior Therapy (DBT)	15 mins	24.76
H0036 UP Y3	Community psychiatric supportive treatment - 3 patients served - Parent Management Training Oregon Model	15 mins	24.76
H0036 UP Y4	Community psychiatric supportive treatment - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	24.76
H0036 UQ	Community psychiatric supportive treatment - 4 patients served	15 mins	18.57
H0036 UQ QJ	Community psychiatric supportive treatment - 4 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	18.57
H0036 UQ ST	Community psychiatric supportive treatment - 4 patients served - Related to trauma or injury	15 mins	18.57
H0036 UQ ST QJ	Community psychiatric supportive treatment - 4 patients served - Related to trauma or injury - Service/items provided to a prisoner or patient in state or local custody	15 mins	18.57
H0036 UQ Y2	Community psychiatric supportive treatment - 4 patients served - Dialectical Behavior Therapy (DBT)	15 mins	18.57
H0036 UQ Y3	Community psychiatric supportive treatment - 4 patients served - Parent Management Training Oregon Model	15 mins	18.57
H0036 UQ Y4	Community psychiatric supportive treatment - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	18.57
H0036 UR	Community psychiatric supportive treatment - 5 patients served	15 mins	14.86
H0036 UR QJ	Community psychiatric supportive treatment - 5 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	14.86
H0036 UR ST	Community psychiatric supportive treatment - 5 patients served - Related to trauma or injury	15 mins	14.86

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H0036 UR Y2	Community psychiatric supportive treatment - 5 patients served - Dialectical Behavior Therapy (DBT)	15 mins	14.86
H0036 UR Y3	Community psychiatric supportive treatment - 5 patients served - Parent Management Training Oregon Model	15 mins	14.86
H0036 UR Y4	Community psychiatric supportive treatment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	14.86
H0036 US	Community psychiatric supportive treatment - 6 or more patients served	15 mins	12.38
H0036 US QJ	Community psychiatric supportive treatment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	12.38
H0036 US ST	Community psychiatric supportive treatment - 6 or more patients served - Related to trauma or injury	15 mins	12.38
H0036 US ST QJ	Community psychiatric supportive treatment - 6 or more patients served - Related to trauma or injury - Service/items provided to a prisoner or patient in state or local custody	15 mins	12.38
H0036 US Y2	Community psychiatric supportive treatment - 6 or more patients served - Dialectical Behavior Therapy (DBT)	15 mins	12.38
H0036 US Y3	Community psychiatric supportive treatment - 6 or more patients served - Parent Management Training Oregon Model	15 mins	12.38
H0036 US Y4	Community psychiatric supportive treatment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	12.38
H0036 Y2	Community psychiatric supportive treatment - Dialectical Behavior Therapy (DBT)	15 mins	74.29
H0036 Y3	Community psychiatric supportive treatment - Parent Management Training Oregon Model	15 mins	74.29
H0036 Y4	Community psychiatric supportive treatment - SAMHSA approved EBP for Co-occurring disorders	15 mins	74.29
H0038	Peer-specialist	15 mins	153.61
H0038 QJ	Peer-specialist - Service/items provided to a prisoner or patient in state or local custody	15 mins	153.61
H0038 UN	Peer-specialist - 2 patients served	15 mins	76.81
H0038 UN QJ	Peer-specialist - 2 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	76.81
H0038 UN Y4	Peer-specialist - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	76.81
H0038 UP	Peer-specialist - 3 patients served	15 mins	49.83
H0038 UP QJ	Peer-specialist - 3 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	49.83
H0038 UP Y4	Peer-specialist - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	49.83
H0038 UQ	Peer-specialist - 4 patients served	15 mins	49.83
H0038 UQ QJ	Peer-specialist - 4 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	49.83
H0038 UQ Y4	Peer-specialist - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	49.83
H0038 UR	Peer-specialist - 5 patients served	15 mins	30.72
H0038 UR QJ	Peer-specialist - 5 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	30.72
H0038 UR Y4	Peer-specialist - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	30.72
H0038 US	Peer-specialist - 6 or more patients served	15 mins	24.92
H0038 US QJ	Peer-specialist - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	24.92
H0038 US Y4	Peer-specialist - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	24.92
H0038 Y4	Peer-specialist - SAMHSA approved EBP for Co-occurring disorders	15 mins	153.61
H0039	ACT	15 mins	72.42
H0039 QJ	ACT - Service/items provided to a prisoner or patient in state or local custody	15 mins	63.23
H0039 UN QJ	ACT - 2 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	31.62
H0039 UP QJ	ACT - 3 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	21.08
H0039 UQ QJ	ACT - 4 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	15.81
H0039 UR QJ	ACT - 5 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	12.65
H0039 US QJ	ACT - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	10.54
H0046	Peer mentor services provided by a DD peer mentor	15 mins	226.40
H0046 UN	Peer mentor services provided by a DD peer mentor - 2 patients served	15 mins	113.20
H0046 UP	Peer mentor services provided by a DD peer mentor - 3 patients served	15 mins	75.47
H0046 UQ	Peer mentor services provided by a DD peer mentor - 4 patients served	15 mins	56.60
H0036 UR	Peer mentor services provided by a DD peer mentor - 5 patients served	15 mins	45.28
H0036 US	Peer mentor services provided by a DD peer mentor - 6 or more patients served	15 mins	37.73
H0048	Alcohol and Drug Testing, collection and handling only, specimens other than blood	Encounter	23.21
H2000	Comprehensive Multidisciplinary Evaluation	Encounter	20.40
H2000TS	Comprehensive Multidisciplinary Evaluation, monitoring treatment plans	Encounter	114.68
H2011	Crisis Intervention Service	15 mins	553.18
H2011 HT	Crisis Intervention Service - mobile crisis	15 mins	553.18
H2011 HT Y4	Crisis Intervention Service - mobile crisis - SAMHSA approved EBP for co-occurring disorders	15 mins	553.18
H2011 QJ	Crisis Intervention Service - mobile crisis - service/items provided to a prisoner or patient in state or local custody	15 mins	553.18
H2011 Y4	Crisis Intervention Service - SAMHSA approved EBP for co-occurring disorders	15 mins	553.18
H2014	Skills training and development	15 mins	58.16
H2014 QJ	Skills training and development - Service/items provided to a prisoner or patient in state or local custody	15 mins	58.16
H2014 UN	Skills training and development - 2 patients served	15 mins	28.84
H2014 UN QJ	Skills training and development - 2 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	28.84
H2014 UN WZ	Skills training and development - 2 patients served - Out of Home Non-Vocational Habilitation	15 mins	28.84
H2014 UN WZ Y4	Skills training and development - 2 patients served - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	28.84
H2014 UN Y4	Skills training and development - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	28.84
H2014 UP	Skills training and development - 3 patients served	15 mins	19.76
H2014 UP QJ	Skills training and development - 3 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	19.76
H2014 UP WZ	Skills training and development - 3 patients served - Out of Home Non-Vocational Habilitation	15 mins	19.76
H2014 UP WZ Y4	Skills training and development - 3 patients served - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	19.76
H2014 UP Y4	Skills training and development - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	19.76
H2014 UQ	Skills training and development - 4 patients served	15 mins	14.42
H2014 UQ QJ	Skills training and development - 4 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	14.42
H2014 UQ WZ	Skills training and development - 4 patients served - Out of Home Non-Vocational Habilitation	15 mins	14.42
H2014 UQ WZ Y4	Skills training and development - 4 patients served - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	14.42
H2014 UQ Y4	Skills training and development - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	14.42
H2014 UR	Skills training and development - 5 patients served	15 mins	11.61
H2014 UR QJ	Skills training and development - 5 patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	11.61
H2014 UR WZ	Skills training and development - 5 patients served - Out of Home Non-Vocational Habilitation	15 mins	11.61
H2014 UR WZ Y4	Skills training and development - 5 patients served - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	11.61
H2014 UR Y4	Skills training and development - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	11.61
H2014 US	Skills training and development - 6 or more patients served	15 mins	9.82
H2014 US QJ	Skills training and development - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	9.82
H2014 US WZ	Skills training and development - 6 or more patients served - Out of Home Non-Vocational Habilitation	15 mins	9.82
H2014 US WZ Y4	Skills training and development - 6 or more patients served - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	9.82
H2014 US Y4	Skills training and development - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	9.82
H2014 WZ	Skills training and development - Out of Home Non-Vocational Habilitation	15 mins	58.16
H2014 WZ Y4	Skills training and development - Out of Home Non-Vocational Habilitation - SAMHSA approved EBP for Co-occurring disorders	15 mins	58.16
H2014 Y4	Skills training and development - SAMHSA approved EBP for Co-occurring disorders	15 mins	58.16
H2015	Comprehensive Community Support Services	15 mins	59.55
H2015QJ	Comprehensive Community Support Services - Service/items provided to a prisoner or patient in state or local custody	15 mins	59.55
H2015QUJ	Comprehensive Community Support Services - Service/items provided to a prisoner or patient in state or local custody - Overnight Health & Safety	15 mins	59.55





H2023URQJ4Y	Supported employment - 5 patients served - Service/items provided to a prisoner or patient in state or local custody - Financial planning	15 mins	124.78
H2023URY4	Supported employment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	124.78
H2023URY41Y	Supported employment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders - Career planning/discovery	15 mins	124.78
H2023URY42Y	Supported employment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders - Job Development/placement	15 mins	124.78
H2023URY43Y	Supported employment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders - Self employed	15 mins	124.78
H2023URY44Y	Supported employment - 5 patients served - SAMHSA approved EBP for Co-occurring disorders - Financial planning	15 mins	124.78
H2023URY5	Supported employment - 5 patients served - Individual placement support/EBP	15 mins	124.78
H2023URY51Y	Supported employment - 5 patients served - Individual placement support/EBP - Career planning/discovery	15 mins	124.78
H2023URY52Y	Supported employment - 5 patients served - Individual placement support/EBP - Job Development/placement	15 mins	124.78
H2023URY53Y	Supported employment - 5 patients served - Individual placement support/EBP - Self employed	15 mins	124.78
H2023URY54Y	Supported employment - 5 patients served - Individual placement support/EBP - Financial planning	15 mins	124.78
H2023US	Supported employment - 6 or more patients served	15 mins	124.78
H2023US1Y	Supported employment - 6 or more patients served - Career planning/discovery	15 mins	124.78
H2023US2Y	Supported employment - 6 or more patients served - Job Development/placement	15 mins	124.78
H2023US3Y	Supported employment - 6 or more patients served - Self employed	15 mins	124.78
H2023US4Y	Supported employment - 6 or more patients served - Financial planning	15 mins	124.78
H2023USQJ	Supported employment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	15 mins	124.78
H2023USQJ1Y	Supported employment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody - Career planning/discovery	15 mins	124.78
H2023USQJ2Y	Supported employment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody - Job Development/placement	15 mins	124.78
H2023USQJ3Y	Supported employment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody - Self employed	15 mins	124.78
H2023USQJ4Y	Supported employment - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody - Financial planning	15 mins	124.78
H2023USY4	Supported employment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	15 mins	124.78
H2023USY41Y	Supported employment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders - Career planning/discovery	15 mins	124.78
H2023USY42Y	Supported employment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders - Job Development/placement	15 mins	124.78
H2023USY43Y	Supported employment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders - Self employed	15 mins	124.78
H2023USY44Y	Supported employment - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders - Financial planning	15 mins	124.78
H2023USY5	Supported employment - 6 or more patients served - Individual placement support/EBP	15 mins	124.78
H2023USY51Y	Supported employment - 6 or more patients served - Individual placement support/EBP - Career planning/discovery	15 mins	124.78
H2023USY52Y	Supported employment - 6 or more patients served - Individual placement support/EBP - Job Development/placement	15 mins	124.78
H2023USY53Y	Supported employment - 6 or more patients served - Individual placement support/EBP - Self employed	15 mins	124.78
H2023USY54Y	Supported employment - 6 or more patients served - Individual placement support/EBP - Financial planning	15 mins	124.78
H2023Y4	Supported employment - SAMHSA approved EBP for Co-occurring disorders	15 mins	124.78
H2023Y41Y	Supported employment - SAMHSA approved EBP for Co-occurring disorders - Career planning/discovery	15 mins	124.78
H2023Y42Y	Supported employment - SAMHSA approved EBP for Co-occurring disorders - Job Development/placement	15 mins	124.78
H2023Y43Y	Supported employment - SAMHSA approved EBP for Co-occurring disorders - Self employed	15 mins	124.78
H2023Y44Y	Supported employment - SAMHSA approved EBP for Co-occurring disorders - Financial planning	15 mins	124.78
H2023Y5	Supported employment - Individual placement support/EBP	15 mins	124.78
H2023Y51Y	Supported employment - Individual placement support/EBP - Career planning/discovery	15 mins	124.78
H2023Y52Y	Supported employment - Individual placement support/EBP - Job Development/placement	15 mins	124.78
H2023Y53Y	Supported employment - Individual placement support/EBP - Self employed	15 mins	124.78
H2023Y54Y	Supported employment - Individual placement support/EBP - Financial planning	15 mins	124.78
H2030	Mental Health Clubhouse	15 mins	5.71
H2030 Y4	Mental Health Clubhouse - SAMHSA approved EBP for Co-occurring disorders	15 mins	5.71
JJ Bundle	Jail Treatment Team Services	15 mins	58.27
JTC	JTC Treatment Team Services	15 mins	25.55
S5110	Family psycho-education: skills workshop	15 mins	23.96
S5110UN	Family psycho-education: skills workshop - 2 patients served	15 mins	11.98
S5110UP	Family psycho-education: skills workshop - 3 patients served	15 mins	7.99
S5110UQ	Family psycho-education: skills workshop - 4 patients served	15 mins	5.99
S5110UR	Family psycho-education: skills workshop - 5 patients served	15 mins	4.79
S5110US	Family psycho-education: skills workshop - 6 or more patients served	15 mins	3.99
S5111	Home care training, family per session	Encounter	156.83
S5111ST	Home care training, family per session - Related to trauma or injury	Encounter	156.83
S5111UN	Home care training, family per session - 2 patients served	Encounter	138.63
S5111UNST	Home care training, family per session - 2 patients served - Related to trauma or injury	Encounter	138.63
S5111UNY2	Home care training, family per session - 2 patients served - Dialectical Behavior Therapy (DBT)	Encounter	138.63
S5111UNY3	Home care training, family per session - 2 patients served - Parent Management Training Oregon Model	Encounter	138.63
S5111UNY4	Home care training, family per session - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	138.63
S5111UP	Home care training, family per session - 3 patients served	Encounter	125.82
S5111UPST	Home care training, family per session - 3 patients served - Related to trauma or injury	Encounter	125.82
S5111UPY2	Home care training, family per session - 3 patients served - Dialectical Behavior Therapy (DBT)	Encounter	125.82
S5111UPY3	Home care training, family per session - 3 patients served - Parent Management Training Oregon Model	Encounter	125.82
S5111UPY4	Home care training, family per session - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	125.82
S5111UQ	Home care training, family per session - 4 patients served	Encounter	78.00
S5111UQST	Home care training, family per session - 4 patients served - Related to trauma or injury	Encounter	78.00
S5111UQY2	Home care training, family per session - 4 patients served - Dialectical Behavior Therapy (DBT)	Encounter	78.00
S5111UQY3	Home care training, family per session - 4 patients served - Parent Management Training Oregon Model	Encounter	78.00
S5111UQY4	Home care training, family per session - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	78.00
S5111UR	Home care training, family per session - 5 patients served	Encounter	66.96
S5111URST	Home care training, family per session - 5 patients served - Related to trauma or injury	Encounter	66.96
S5111URY2	Home care training, family per session - 5 patients served - Dialectical Behavior Therapy (DBT)	Encounter	66.96
S5111URY3	Home care training, family per session - 5 patients served - Parent Management Training Oregon Model	Encounter	66.96
S5111URY4	Home care training, family per session - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	66.96
S5111US	Home care training, family per session - 6 or more patients served	Encounter	52.28
S5111USST	Home care training, family per session - 6 or more patients served - Related to trauma or injury	Encounter	52.28
S5111USY2	Home care training, family per session - 6 or more patients served - Dialectical Behavior Therapy (DBT)	Encounter	52.28
S5111USY3	Home care training, family per session - 6 or more patients served - Parent Management Training Oregon Model	Encounter	52.28
S5111USY4	Home care training, family per session - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	52.28
S5111Y2	Home care training, family per session - Dialectical Behavior Therapy (DBT)	Encounter	156.83
S5111Y3	Home care training, family per session - Parent Management Training Oregon Model	Encounter	156.83
S5111Y4	Home care training, family per session - SAMHSA approved EBP for Co-occurring disorders	Encounter	156.83
S9470	Nutritional counseling dietician visit	Encounter	64.00
S9470Y4	Nutritional counseling dietician visit - SAMHSA approved EBP for Co-occurring disorders	Encounter	64.00
T1001	Nursing/Nutrition Assessment	Encounter	455.49
T1001QJ	Nursing/Nutrition Assessment - Service/items provided to a prisoner or patient in state or local custody	Encounter	455.49
T1001WX	Nursing/Nutrition Assessment - LOCUS Assessment	Encounter	455.49
T1002	RN services	15 mins	252.42
T1002QJ	RN services - Service/items provided to a prisoner or patient in state or local custody	15 mins	252.42
T1002Y4	RN services - SAMHSA approved EBP for Co-occurring disorders	15 mins	252.42



T1012	Recovery Supports	Encounter	41.00
T1012QJ	Recovery Supports - Service/items provided to a prisoner or patient in state or local custody	Encounter	41.00
T1012UN	Recovery Supports - 2 patients served	Encounter	20.50
T1012UNQJ	Recovery Supports - 2 patients served - Service/items provided to a prisoner or patient in state or local custody	Encounter	20.50
T1012UNY4	Recovery Supports - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	20.50
T1012UP	Recovery Supports - 3 patients served	Encounter	13.67
T1012UPQJ	Recovery Supports - 3 patients served - Service/items provided to a prisoner or patient in state or local custody	Encounter	13.67
T1012UPY4	Recovery Supports - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	13.67
T1012UQ	Recovery Supports - 4 patients served	Encounter	10.25
T1012UQQJ	Recovery Supports - 4 patients served - Service/items provided to a prisoner or patient in state or local custody	Encounter	10.25
T1012UQY4	Recovery Supports - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	10.25
T1012UR	Recovery Supports - 5 patients served	Encounter	8.20
T1012URQJ	Recovery Supports - 5 patients served - Service/items provided to a prisoner or patient in state or local custody	Encounter	8.20
T1012URY4	Recovery Supports - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	8.20
T1012US	Recovery Supports - 6 or more patients served	Encounter	6.83
T1012USQJ	Recovery Supports - 6 or more patients served - Service/items provided to a prisoner or patient in state or local custody	Encounter	6.83
T1012USY4	Recovery Supports - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	6.83
T1012Y4	Recovery Supports - SAMHSA approved EBP for Co-occurring disorders	Encounter	41.00
T1015	Family psycho-education: joining	Encounter	223.69
T1015UN	Family psycho-education: joining - 2 patients served	Encounter	111.85
T1015UNY4	Family psycho-education: joining - 2 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	111.85
T1015UP	Family psycho-education: joining - 3 patients served	Encounter	74.56
T1015UPY4	Family psycho-education: joining - 3 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	74.56
T1015UQ	Family psycho-education: joining - 4 patients served	Encounter	55.92
T1015UQY4	Family psycho-education: joining - 4 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	55.92
T1015UR	Family psycho-education: joining - 5 patients served	Encounter	44.74
T1015URY4	Family psycho-education: joining - 5 patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	44.74
T1015US	Family psycho-education: joining - 6 or more patients served	Encounter	37.28
T1015USY4	Family psycho-education: joining - 6 or more patients served - SAMHSA approved EBP for Co-occurring disorders	Encounter	37.28
T1015Y4	Family psycho-education: joining - SAMHSA approved EBP for Co-occurring disorders	Encounter	223.69
T1017	Targeted Case management (face to face) & Supports Coordination	15 mins	197.53
	Targeted Case management (face to face) & Supports Coordination - Service/items provided to a prisoner or patient in state or local custody	15 mins	196.14
T1017QJ	Targeted Case management (face to face) & Supports Coordination - LOCUS Assessment	15 mins	197.53
T1017WX	Targeted Case management (face to face) & Supports Coordination - LOCUS Assessment	15 mins	197.53
T1017Y4	Targeted Case management (face to face) & Supports Coordination - SAMHSA approved EBP for Co-occurring disorders	15 mins	197.53
T1023	Screening for inpatient programs	Encounter	1,159.39
T1023QJ	Screening for inpatient programs - Service/items provided to a prisoner or patient in state or local custody	Encounter	1,159.39
T1023WX	Screening for inpatient programs - LOCUS Assessment	Encounter	1,159.39

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Finance	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>HealthWest authorization is requested to procure a Bathroom Remodification to be completed by <b>Accessible Home Design, LLC</b> in the amount of \$18,600.00 funded under the Children's Waiver Program (CWP).</p> <p>This purchase will be fully funded with CWP dollars and is required in improving the youth's independence in bathing by putting in a roll-in shower. Prior Review and Approval has been obtained, three quotes were received, and Lakeshore Regional Entity authorization has been approved. The youth currently requires support from another person and a grab bar to safely bathe. He/she is fully dependent for bathing, but with modifications to the environment, the youth has the potential to increase his/her independence with this task. He/she is currently bathing in a tub using a Bella Vita Bath Lift with transfer in and out. The grab bar is a suction cup and not secured to a wall stud, which can become loose with little to no warning. As the youth grows, the bathing process is not conducive to care. This bathroom modification will include a roll-in shower to allow for safe access, as well as facilitating his/her engagement in the task.</p>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
I move to authorize HealthWest to procure and fund a Bathroom Remodification completed by <b>Accessible Home Design, LLC</b> up to \$18,600 to completed by September 30, 2024.			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

HWB 81-F

**Accessible Home Design, llc**  
 9450 Sanborn Ave SE  
 Alto, MI 49302 US  
 616-836-2468  
 accessiblehd@gmail.com  
 accessiblehd.com

## Estimate

ADDRESS
Nick Brown HealthWest

SHIP TO
Nick Brown HealthWest

ESTIMATE #	DATE	
24-1139	03/05/2024	

### P.O. NUMBER

ADA Bathroom for Bard Rd

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	<b>02.10 Demo</b>	Demo and dispose of ceramic tile floor	1	800.00	800.00
	<b>02.10 Demo</b>	Demo and dispose of fiberglass tub surround	1	600.00	600.00
	<b>06 Floor Frame</b>	Floor Framing as needed	1	1,400.00	1,400.00
	<b>14 Plumbing</b>	Linear drain upgrade with stainless steel grate	1	1,100.00	1,100.00
	<b>14 Plumbing</b>	Remove toilet, replace flange	1	300.00	300.00
	<b>14 Plumbing</b>	Remove sink and vanity	1	300.00	300.00
	<b>02 Site Work</b>	Labor to reinstall vanity and top	1	500.00	500.00
	<b>14 Plumbing</b>	Labor to reinstall toilet	1	200.00	200.00
	<b>14 Plumbing</b>	Provide and install shower fixtures and new valve	1	1,400.00	1,400.00
	<b>Tile</b>	Labor to install shower wall tile	1	1,500.00	1,500.00
	<b>Tile</b>	Cost of tile at \$4/sf (allowance)	1	600.00	600.00
	<b>22 Specialty</b>	Labor and materials to provide and install grab bar into wall tile	2	300.00	600.00
	<b>Tile</b>	Install Schluter waterproofing system	1	1,100.00	1,100.00
	<b>Tile</b>	Labor to install bathroom floor tile	1	1,100.00	1,100.00
	<b>Tile</b>	Cost allowance of shower and bathroom floor tile materials at \$8/sf	1	1,100.00	1,100.00
	<b>24 Paint</b>	Painting labor and materials for bathroom walls, two coats	1	400.00	400.00
	<b>24 Paint</b>	Painting labor and materials for bathroom ceiling, two coats	1	300.00	300.00
	<b>07 Wall Frame</b>	Wall Framing labor and materials to provide and install wall blocking	1	300.00	300.00

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	<b>28 Commissions</b>	throughout shower walls for grab bar support General Contracting fee, applicable sales tax, estimated shipping and handling, design fee, overhead and profit. This document will be signed by both parties and used as the contract between both contractor and client.	1	5,000.00	5,000.00

This proposal, if accepted, along with our standard terms and conditions, which are herein incorporated, constitute the agreement between the parties, and no previous or subsequent representations will be accepted unless submitted and accepted in writing. This proposal shall remain valid for a period of 30 days from submittal date, and may be subject to price changes related to labor or materials changes. All change orders will be delivered in written form, signed and dated by contractor and client prior to proceeding with change order scope. All discrepancies not being able to be resolved between the contractor and client will be brought before an arbitrator. Down payment of \$8,000 due with (this document) signed contract, \$8,000 due after tile is complete, \$2,600 due at job completion. All materials will be ordered upon receiving the down payment, and installed according to timeline.

SUBTOTAL	18,600.00
TAX	0.00
<b>TOTAL</b>	<b>\$18,600.00</b>

Accepted By

Accepted Date



Search HOME SAFE HOME MICHIGAN INC.



## Proposal 1-2

Issue Date March 8, 2024

Expires April 7, 2024

**PENDING**

PENDING

Download PDF

### PREPARED BY

**Brandon Polich**

HOME SAFE HOME MICHIGAN INC.

(616) 634-2785

brandon@homesafehomemi.com

2290 28th St SW Ste B, Wyoming, MI

49519, USA

### PREPARED FOR

**Nick Brown**

Healthwest

(231) 670-6746

Nick.Brown@healthwest.net

376 E Apple Ave, Muskegon, MI 49442,

USA

**SUBJECT** **Related Documents** →

Home Safe Home Proposal (1) - Apple Ave

### FILES

Upload Files

### COMMENTS

KR

Post a message...



Post

Fri, Mar 8



**Reply to comment on Proposal 1-2**

Added by 3:37 PM

Brandon Polich

NB

**Nick Brown** 24 days ago

Perfect.

Thank you!

BP

**Brandon Polich** 24 days ago

Absolutely!

Have a great weekend.

Reply

### PROPOSAL DETAILS

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

DESCRIPTION	QTY	UNIT PRICE	TOTAL
Demolition			\$2,802.61
Framing Modification			\$4,903.85
Installation			\$12,094.84
<b>Optional Work</b>			\$0.00
Please select any options			
<input type="checkbox"/> Waterproof & Tile Behind Toilet			\$661.03
<input type="checkbox"/> Install Second Floor Drain Between Shower and Vanity	1 Each	\$2,047.37	\$2,047.37
<input type="checkbox"/> P&I Marble Threshold Under Door	1 Each	\$608.00	\$608.00
<b>TOTAL</b>			<b>\$19,801.30</b>

**The above specification, costs, and terms are hereby accepted.**

---

**NICK BROWN**

**DATE**

**YOUR SIGNATURE**

**YOUR NAME**

Kris Redmon

---

**KAYLA KING**

**DATE**

✓ Save

⊘ Decline

Approve

Porters Construction LLC  
874 Agard Rd  
Muskegon, MI 49445 US  
porters.construction.mc@gmail.com



**Porters**  
Construction

# Estimate

**ADDRESS**

Nick Brown  
HealthWest  
376 E. Apple Avenue  
Muskegon, MI 49442

**ESTIMATE #** 1095  
**DATE** 01/16/2024  
**EXPIRATION DATE** 02/16/2024

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	<b>Services</b>	Remove Drywall from around the bath and Shower area Remove Current Bathtub and Shower Install new shower pan insert (ADA roll in shower pan) Install blocking for Grab bars Move any associated drain and plumbing required for new shower Install new stand up shower wall inserts Install grab bars Install new Shower handles and shower head Install drywall and finish. Prime and Paint replaced walls in bathroom to match current bathroom paint.	1	5,500.00	5,500.00

TOTAL **\$5,500.00**

Accepted By

Accepted Date

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Finance Department	<b>REQUEST DATE</b> May 17, 2024		<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>Authorization is requested for HealthWest to enter into a grant funded project agreement with Michigan Public Health Institute (MPHI), on behalf of MDHHS, in the amount of \$30,366 for the grant titled, "Mobile Crisis/Crisis Stabilization Unit Tracking Module Grant" effective May 1, 2024, through September 30, 2024.</p> <p>Total Funding: \$30,366</p> <ul style="list-style-type: none"> <li>FY24 (5/1/24 - 9/30/24): \$30,366</li> </ul> <p>HealthWest will utilize these funds from MDHHS who was awarded a Substance Abuse and Mental Health Services Administration (SAMHSA) funding opportunity to strengthen and enhance mental health emergency preparedness and crisis response efforts in Michigan. HealthWest will follow the MDHHS intention to use some of this funding to adopt technology to track crisis services and corresponding metrics for crisis services, specifically mobile crisis. This grant opportunity is limited to state demonstration Certified Community Behavioral Health Clinics (CCBHCs) and Community Mental Health Services Programs (CMHSPs) who meet the eligibility requirements.</p> <p><b>Funds may only be used to develop or purchase a technical platform to allow for tracking of crisis services, specifically mobile crisis services. The module must be able to gather Children's ICSS metrics specified in the PIHP Schedule E contract.</b></p> <p>Budget includes funding for:</p> <ul style="list-style-type: none"> <li>Salary/wages &amp; Fringe: .05 FTE Senior IT Analyst for the duration of the project (3/1/24-9/30/24)</li> <li>Software: New application/software for implementation that meets the grant requirements</li> <li>Supplies and Materials: Headsets for staff answering the warm/helpline.</li> </ul>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
<p>I move to authorize acceptance of the above grant from Michigan Public Health Institute (MPHI), on behalf of MDHHS, in the amount of \$30,366, titled - "Mobile Crisis/Crisis Stabilization Unit Tracking Module Grant" effective May 1, 2024, through September 30, 2024.</p>			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		



## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Finance	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>HealthWest authorization is requested to procure a Battery-Operated Incline Platform Lift inclusive of Installation to be purchased from and installed by <b>A4 Access</b> in the amount of \$36,435.00 funded under the Children's Waiver Program (CWP).</p> <p>This purchase will be fully funded with CWP dollars and is required to for the youth to safely exit/enter his home for medical appointments and fire evacuation. A Concord Inclined Platform Stair Lift was installed in the home in 1998. This stair lift stopped operation in 2019 and the company that installed it is no longer a viable business, other vendors will not complete repairs on a product that they did not install for liability reasons. The youth require to be transferred by ambulance gurney for all medical appointments via ambulance one to two times per month.</p>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
I move to authorize HealthWest to procure and fund a Battery-Operated Incline Platform Lift, inclusive of installation, completed by <b>A4 Access</b> up to \$36,435.00 to completed by September 30, 2024.			
<b>COMMITTEE DATE</b>	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b>	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

HWB 83-F



**Name:** Kristine Redmon - HealthWest

**Date:** May 1, 2024

**Project:** [REDACTED]

**Address:** [REDACTED]

**City:** [REDACTED]

**State:** MI

**Zip:** [REDACTED]

**Phone:** [REDACTED]

**Project:** X3-C Incline Platform lift

<b>Qty:</b>	<b>Description:</b>	<b>Amount:</b>
1	<b>X3-C Battery Operated Incline Platform Lift—2 stop</b> To include: Custom 27 1/2" x 35 1/2" auto fold side load platform, 13 FPM rated speed, 550lb. capacity, 2-keyless wireless call stations, Silver Moon Colored Aluminum Rails, power fold up arms, emergency stop switch, automatic access ramps w/non-skid surface, manual lowering device, Attendant Remote, platform obstruction sensors, direct mount, folding seat, Bryant Disconnect. <b>1 year labor warranty</b> <b>2 year parts warranty</b>	<b>\$22,595.00</b>
1	Installation	\$10,120.00
1	Freight	\$ 900.00
1	Permit and Inspection	\$ 820.00
1	Remove and dispose of existing lift	\$ 2,000.00
	<b>Tax – See Note Below**</b>	<b>RX</b>
	<b>Total</b>	<b>\$36,435.00</b>

**Options Do Not Include Tax**

<b>Included</b>	<b>Remove and Dispose of Existing Lift</b>	<b>\$ 2,000.00</b>
YES NO	<b>3 year maintenance contract (includes 2 visits a year)</b>	<b>\$ 2,130.00</b>
YES NO	<b>5 year parts warranty (Additional to the 2 years), requires a maintenance contract.</b>	<b>\$ 2,500.00</b>
YES NO	<b>7 year maintenance contract (includes 2 visits a year)</b>	<b>\$ 2,940.00</b>
YES NO	<b>Platform Key switch</b>	<b>\$ 130.00</b>
YES NO	<b>Optional RAL Color (May Affect Delivery Time)</b>	<b>\$ 2,350.00</b>
<b>Included</b>	<b>Bryan Motor-Controller Disconnect</b>	<b>\$ 350.00</b>

\*Tax is waivable with a doctor RX.

Michigan Elevator Contractor License 2103065

Name: [REDACTED]



2845 Crooks Road, Rochester Hills, MI 48309 • 877-406-7056 • Fax 248-829-8395 • A4-Access.com **LIFTS • ELEVATORS • RAMPS**

**A4 Access offers a limited one-year labor warranty during normal business hours. Garaventa offers a two-year parts warranty.**

**Electrical by Others. Unit requires 110 volt, single phase, 20 amp and the disconnect specification is Square D H221N Fused Disconnect with a Square D EIK 031 Auxiliary contact for the battery back-up.**

**Construction work by others.**

**Alterations to door, doorway and handrails to be done by others if necessary.**

**Reinforcing steps for the towers to support the rails.**

**If this proposal meets your approval, please sign, date and return one copy to A4 Access in the envelope provided, along with your check for the down payment. Credit cards also accepted.**

---

**TERMS & CONDITIONS**

All materials are guaranteed as specified: All work to be completed in a workmanlike manner and according to standard practices. Any alteration or deviation from the above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are covered by workers compensation. All prices are subject to change after thirty (30) days. Cancellations will be assessed charges according to costs incurred to date.

---

**Schedule of Values:**

**Deposit with signed contract: \$3,000.00**

**Payment to put the equipment into production: \$22,595.00**

**Additional charges due to price increases beyond our control in wages and materials will be assessed by a change order showing increase in cost and a 5% markup.**

**Payment upon delivery of equipment to job site \$7,000.00**

**Remaining Balance Payment in Full at State Elevator Inspection \$3,840.00**

Offered By: Jeremia Filippis (for A4 Access) Date: May 1, 2024  
Jeremia Filippis

Accepted By: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Finance Department	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</b>			
<p>Authorization is requested to increase the Purchase Order for <b>Rehmann Robson</b> up to a maximum up \$54,000 through September 30, 2024.</p> <p>Rehmann LLC is providing consultation and support to HealthWest, its Executive Director, Chief Financial Officer, and Director of Finance on an as needed basis for the following:</p> <ul style="list-style-type: none"> <li>• Changes necessary to implement the MDHHS Standard Cost Allocation Methodology</li> <li>• Implementation of the new general ledger and chart of accounts</li> <li>• Other consulting as requested, including but not limited to <ul style="list-style-type: none"> <li>○ Behavioral Health Home</li> <li>○ Opioid Health Home</li> </ul> </li> </ul>			
<b>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</b>			
<p>I move to authorize HealthWest to increase the Rehmann Robson purchase order, not to exceed, \$54,000.00 through September 30, 2024.</p>			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Finance Department	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Brandy Carlson, Chief Financial Officer	
<b>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</b>			
<p>Authorization is requested for HealthWest to reimburse <b>Behavioral Center of Michigan</b> for a 70-day Community Psychiatric Inpatient stay in the amount of \$94,600.00.</p> <p>The individual served has Medicare primary and therefore HealthWest is responsible for the Medicaid Co-Pay. However, the Medicare days ran out at day 8 and a retro-review was completed by the HealthWest Utilization Department for the remaining 62 days. It was deemed that community inpatient services were required for the individual and Medicaid would be utilized for the remaining days. The dates of service were April 4, 2023, through June 13, 2023.</p>			
<b>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</b>			
I move to authorize HealthWest to reimburse Behavioral Center of Michigan \$94,600.00 for Community Inpatient Services.			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		

HWB 85-F

## REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

<b>COMMITTEE</b> Finance Committee	<b>BUDGETED</b> X	<b>NON-BUDGETED</b>	<b>PARTIALLY BUDGETED</b>
<b>REQUESTING DIVISION</b> Provider Network	<b>REQUEST DATE</b> May 17, 2024	<b>REQUESTOR SIGNATURE</b> Shannon Morgan, Contract Specialist	
<b><u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u></b>			
<p>Authorization is requested for HealthWest to contract with <b>Redi-Rental</b> (2232 Glade St., Muskegon, MI 49444) for the rental of portable restrooms, sinks, tables, chairs, tents and fencing for the <b>Health, Wellness, and Recovery Picnic</b> on <b>August 15<sup>th</sup>, 2024</b> at Hackley Park.</p> <p>The Health, Wellness, and Recovery event is an open house at Hackley Park for our providers to present information about their respective services. Redi-Rental has offered to be a sponsor of the event by taking 25% off the total invoice for a total cost not to exceed <b>\$12,173.56</b>. This event has historically operated as a <b>\$0 net expense</b>, as the event has numerous sponsorships to cover the total cost of the event.</p> <p>Three additional companies were contacted to request quotes. Cascade Rental Center is booked for the scheduled date, and neither Rent Smart Rentals or Statewide Part Rentals do not have enough inventory to support our needs.</p>			
<b><u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u></b>			
<p>I move to authorize HealthWest to sign a 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 15<sup>th</sup>, 2024, at a total cost not to exceed \$12,173.56.</p>			
<b>COMMITTEE DATE</b> May 17, 2024	<b>COMMITTEE APPROVAL</b> _____ Yes    _____ No    _____ Other		
<b>BOARD DATE</b> May 31, 2024	<b>BOARD APPROVAL</b> _____ Yes    _____ No    _____ Other		



## Communication with Those Charged with Governance during Planning

April 23, 2024

To the Members of the Board  
HealthWest  
Muskegon, Michigan

We are engaged to examine HealthWest's (the CMHSP's) compliance with the compliance requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund Contract for the year ended September 30, 2023. Professional standards require that we provide you with the following information related to our compliance audit.

We would also like to extend the opportunity for you to share with our firm any concerns you may have regarding the CMHSP, whether they be in relation to FSR reporting, controls over assets, or issues regarding personnel, as well as an opportunity for you to ask any questions you may have regarding the compliance audit.

### **Our Responsibilities under U.S. Generally Accepted Auditing Standards and Government Auditing Standards**

As stated in our engagement letter, our responsibility, as described by professional standards, is to express opinions about whether the CMHSP complied with the requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund Contract. Our compliance audit does not relieve you or management of your responsibilities.

As part of obtaining reasonable assurance about whether the CMHSP complied with the requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund Contract, we will also perform tests of the CMHSP's compliance with certain provisions of laws, regulations, and other contracts.

Our responsibility is to plan and perform the compliance audit to obtain reasonable, but not absolute, assurance that the CMHSP complied with the requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services that are applicable to the Medicaid Contract and General Fund Contract. We are responsible for communicating significant matters related to the audit that are, in our professional judgement, relevant to your responsibilities in overseeing the compliance process. However, we are not required to design procedures specifically to identify such matters.

### **Planned Scope, Timing of the Audit, Significant Risks, and Other**

An audit includes examining, on a test basis, evidence supporting the CMHSP's compliance with the requirements described in the *Compliance Examination Guidelines* issued by Michigan Department of Health and Human Services; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested.

Our audit will include obtaining an understanding of the entity and its environment, including internal control, sufficient to assess the risks of material noncompliance and to design the nature, timing, and extent of further compliance audit procedures. Noncompliance may result from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the entity or to acts by management or employees acting on behalf of the entity.

We will generally communicate our significant findings at the conclusion of the compliance audit. However, some matters could be communicated sooner, particularly if significant difficulties are encountered during the audit where assistance is needed to overcome the difficulties or if the difficulties may lead to a modified opinion. We will also

communicate any internal control related matters that are required to be communicated under professional standards.

During planning for this engagement, we considered the following significant risks of noncompliance. Our auditing procedures have been tailored to help detect these risks should they occur. Should any actual instances of noncompliance be detected during the performance of our engagement, these would be communicated to the Board in the *Communication with Those Charged with Governance at the Conclusion of the Audit*. Those risks considered during planning are:

- Improper identification of consumer eligibility
- Improper expenditure recognition due to fraud

Again, these are risks that are considered in determining the audit procedures to be applied. While these are risks that are considered during planning, it is not an indication that any such activity has taken place. To address these risks, we incorporate unpredictability into our compliance audit procedures, emphasize the use of professional skepticism, and assign staff to the engagement with industry expertise.

Christina Schaub is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

The information included in this letter is intended solely for the use of those charged with governance and management of the CMHSP, and is not intended to be, and should not be, used by anyone other than these specified parties.

Sincerely,

A handwritten signature in cursive script that reads "Roslund, Prestage & Company, P.C." The signature is written in black ink and is positioned above the printed name of the firm.

Roslund, Prestage & Company, P.C.  
Certified Public Accountants



# **Annual Summer Conference**



## ***The Importance of Belonging***

**Grand Traverse Resort  
Traverse City, MI**

**June 10, 2024 - Pre-Conference**

**June 11-12, 2024 - Main Conference**



# CONFERENCE REGISTRATION

This conference will be in-person only. There will be no virtual option for attendees.

<b>REGISTRATION FEES (per person)</b>				
<b>Pre-Conference Institutes</b>		<b>Member</b>	<b>Non-Member</b>	
<b>Monday, June 10, 2024, from 1:00pm – 3:00pm</b>				
<b>CHOOSE ONE:</b>				
Pre-Conference Institute #1: Implicit Bias: Seeing More Clearly by Examining Ourselves		\$65	\$78	
Pre-Conference Institute #2: The Intersectionality between Chronic Pain and Mental Health				
<b>Main Conference June 11-12, 2024</b>				
Main conference registration fee provides you with a program packet, admission to all keynote sessions, all workshops, 2 breakfasts, 2 lunches, and all breaks.				
	<b>Member Early Bird</b>	<b>Member After 5/31/24</b>	<b>Non-Member Early Bird</b>	<b>Non-Member After 5/31/24</b>
<b>Main Conference</b>	\$430	\$470	\$512	\$561
<b>One Day</b>	\$335	\$375	\$399	\$447
<b>SCHOLARSHIPS AVAILABLE</b>				
<p><i>A limited number of scholarships are available to individuals who receive services and their families. Conference scholarships will cover conference registration fees only. Consumers who serve as CMH board members are not eligible. Deadline to request scholarship: Friday, May 10, 2024. To request a scholarship form, contact Chris Ward at <a href="mailto:cward@cmham.org">cward@cmham.org</a> or 517-237-3143.</i></p>				
<b>EARLY BIRD DEADLINE: FRIDAY, MAY 31, 2024</b>				
<b>PAYMENT METHODS AND CANCELLATION POLICY</b>				
<ul style="list-style-type: none"> <li>• Payment methods available in advance and onsite: credit card, check, or exact cash.</li> <li>• If payment has not been received, fees will be collected at registration the day of the event unless alternate arrangements are pre-approved by CMHA.</li> <li>• Purchase Orders are not considered payment.</li> <li>• All No Shows will be billed the full amount.</li> </ul>				
<b>To Pay By Check:</b> Make payable to CMHA and mail to 507 S. Grand Avenue, 2 <sup>nd</sup> Floor, Lansing, MI 48933				
<b>Cancellation Policy:</b> Substitutions are permitted at any time. No-shows will be billed at the full training rate. Cancellations must be received in writing at least 10 business days prior to the conference for a full refund less a \$25 administrative fee. If cancellation is received less than 10 business days prior to the training, no refund will be given. Please notify <a href="mailto:apiesz@cmham.org">apiesz@cmham.org</a> if you cannot attend the conference.				
<b>Attendee Changes/Edits:</b> Please notify <a href="mailto:apiesz@cmham.org">apiesz@cmham.org</a> if you have any changes to your conference registration.				
<b>Evaluation:</b> There will be an opportunity for each participant to complete an evaluation of the course and the instructor. If you have any issues with the way in which this conference was conducted or other problems, you may note that on your evaluation of the conference or you may contact CMHA at 517-374-6848 or through our website at <a href="http://www.cmham.org">www.cmham.org</a> for resolution.				

**[Register for the Conference!](#)**

**Conference Registration Ends Thursday, June 6 at 3:00pm!**

**[Exhibitor & Sponsorship Registration Open Now!](#)**

**Deadline: Friday, May 31, 2024**



# HOTEL RESERVATIONS

**Grand Traverse Resort: 100 Grand Traverse Village Boulevard, Acme, MI 49610-0404**

**2024 Room Rates:** Rates below do not include 6% state tax, 5% city assessment, or \$20.95 nightly resort fee.

Room Type	Rate	Room Type	Rate
Hotel Guest room	\$177	Tower Guest Room	\$209
Studio Condo	\$177	1 Bedroom Condo	\$209
2 Bedroom Condo	\$259	3 Bedroom Condo	\$299

When making your reservations, you will be charged a one-night deposit.

Group rate will be honored two days before and two days after the conference, based on availability.

**Online Hotel Reservations:** [BOOK YOUR ROOM HERE!](#)

Or for reservations by phone (800) 236-1577 and indicate code: CMHA624

**Deadline for Reduced Hotel Rate:** May 10, 2024 (The reduced rate will still be honored up until the conference, availability permitting.)

**Hotel Cancellation Deadline & Policy:** If you **cancel 3 days prior to your arrival**, your reservation is fully refundable, minus a \$25 processing fee.



# CONTINUING EDUCATION

**Social Workers:** Each “Pre-Conference Institute” on 6/10/24 qualifies for **2 CE Hours** for Social Work. The “Main Summer Conference” course (6/11/24-6/12/24) qualifies for a maximum of **7 Continuing Education Hours**. The Community Mental Health Association is an approved provider with the Michigan Social Work Continuing Education Collaborative. Approved Provider Number: MICEC 060818. Qualifies as “face-to-face (in-person) education.”

**Substance Use Disorder Professionals:** CMHA is approved by Michigan Certification Board for Addiction Professionals (MCBAP). CMHA maintains the responsibility for the program and content. Substance Use Disorder Professionals participating in one of the “Pre-Conference Institutes” on 6/10/24 qualifies for **2 CE hours**. Substance Use Disorder Professionals participating in the “Main Summer Conference” course (6/11/24-6/12/24) may receive a maximum of **10 contact hours**. It is important that attendees keep a copy of the conference program brochure containing the workshop descriptions along with their attendance record form.

**Continuing Education Requirement:** National Accreditation Rules: National Accreditation rules indicate that if you are over five (5) minutes late or depart early, you forfeit your continuing education hours for that session. Please note that this is a National rule that CMHA must enforce or we could lose our provider status to provide continuing education hours in the future. This rule will be strictly followed.

**Certificate Awarded:** At the conclusion of this conference, turn in your Certificate of Attendance form to CMHA Staff to be approved. Turn in the top sheet and retain the bottom sheet which serves as your certificate. No other certificate will be given.

**Certificate Issued by:** Christina Ward, Director of Education and Training, [cward@cmham.org](mailto:cward@cmham.org); 517-374-6848

**Grievance:** If you have any issues with the way in which this conference was conducted or other problems, you may note that on your evaluation or you may contact CMHA 517-374-6848 or through our webpage at [www.cmham.org](http://www.cmham.org) for resolution.



# PRE-CONFERENCE INSTITUTES

**MONDAY, JUNE 10, 2024**

**1:00pm – 3:00pm**

## **Implicit Bias: Seeing More Clearly by Examining Ourselves**

- Qualifies for 2 CE Hours for Social Work + Related MCBAP Education Contact Hours
- This pre-conference institute meets the minimum standards for implicit bias as outlined in the social work general rules. All other licensure professionals should check with their own licensure body to determine if this training meets the requirements for your license.
  - *Stephanie Lange, LMSW, ACSW, CAADC, CCS, CTP, MDHHS Content Expert*

The goal of this session is to understand implicit bias and how it impacts our work in the behavioral health field and in our professional lives. Understanding bias, microaggressions, intergroup anxiety, and related human behaviors can make a large impact when it comes to making connections and achieving outcomes. Leaving bias unchecked negatively impacts outcomes for clients and our workplace overall. Every human being possesses bias in some form, and we all have a responsibility to unpack it to be authentic in the field of mental health service. Objectives: 1. Recognize when and how unconscious bias occurs and why it's important to understand. 2. Explore how unconscious bias is relevant in the behavioral health field. 3. Identify three strategies to counteract implicit bias.

**OR**

## **The Intersectionality between Chronic Pain and Mental Health**

- Qualifies for 2 CE Hours for Social Work + Specific MCBAP Education Contact Hours
- This pre-conference institute qualifies for 2 CEs and fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for pain management.
  - *Matthew Mitchell, DHA, Associate Professor of Social Work, Saginaw Valley State University*

Chronic pain and mental health disorders are often found to be co-occurring. Studies suggest that chronic pain and mental health problems can worsen each other. This session aims to discuss the most effective treatment approaches for individuals diagnosed with a mental health or substance use disorder who are also experiencing chronic pain. Objectives: 1. Gain an understanding of how pain is a warning system. 2. Gain understanding of the intersectionality between chronic pain and mental health and substance abuse issues. 3. Gain understanding of best practice approaches when supporting a client with a mental health or substance abuse diagnosis and chronic pain.

**[Register for the Conference!](#)**

**[Exhibitor & Sponsorship Registration Open Now!](#)**

***Deadline: Friday, May 31, 2024***



## **Creating Cultures of Belonging Where Everyone Can T.H.R.I.V.E.**

- Qualifies for 1 CE Hour for Social Work + Related MCBAP Education Contact Hour
- *Tonya C. Bailey, PhD, President & Lead Consultant, TCB Consulting, LLC*

When a community has a culture that supports and nurtures everyone, a sense of belonging occurs. Creating cultures of belonging requires dedicated leaders and intentionality. This interactive presentation offers opportunities for individuals to work Together, Helping others, be Resilient, be Innovative, be Valued, and be Effective (T.H.R.I.V.E.). The keynote will provide tangible tools for participants to use immediately after the session has concluded. Objectives: 1. Increase understanding of the benefits and importance of creating cultures of belonging in a community. 2. Develop leadership abilities in fostering cultures of belonging. 3. Learn practical tools and resources to foster a sense of belonging in your communities.

## **From the Streets to the Stage**

- Qualifies for 1 Specific MCBAP Education Contact Hour
- *Mark Lundholm, Recovery Expert, Author, Comedian*

Mark Lundholm has seen and experienced the bottom of life. He was a criminal at 13, an addict and former coke dealer, a check forger, homeless at 27, and did prison time for bank fraud. His amazing story of how he turned his life around is an inspiration to anyone in recovery. Hilarious, irreverent, and emotional stories of hope, healing, heart, and humor designed especially for the dedicated people who work on the front lines of the disease of addiction, codependency, alcoholism, and other dysfunctional family dynamics. They will be invited to examine themselves professionally AND personally to rediscover passion, purpose and potential.

## **How New Resources from Opioid Settlements and Opioid Health Homes can Improve Substance Use Disorder Services**

- Qualifies for 1 CE Hour for Specific MCBAP Education Contact Hour
- *Jared Welehodsky, JD, State Assistant Administrator, Office of the Chief Medical Executive, Michigan Department of Health and Human Services*
- *Kelsey Bowen, MPH, CHES, Opioid Health Home, Service Delivery Transformation Section, Behavioral and Physical Health and Aging Services Administration, Michigan Department of Health and Human Services*
- *Amy Dolinky, Technical Advisor, Opioid Settlement Funds Planning and Capacity Building, Michigan Association of Counties*

In this keynote, attendees will learn about new resources available to address substance use disorder in Michigan. The State of Michigan and local governments have settled lawsuits with numerous companies over their role in creating the opioid epidemic. This funding is now available for state and local governments to address gaps in substance use disorder services. You will learn how state and local governments are using this funding to address services. In addition, Michigan has expanded the Opioid Health Home model statewide to improve substance use disorder. You will learn how this program improves coordination of services for Michigan residents with a diagnosis of alcohol, stimulant or opioid use disorder.

## **Hope, Healing and Happiness**

- Qualifies for 1 Related MCBAP Education Contact Hour
- *Angela Rose, Survivor and Author*

Angela Rose was just 17 years old when she survived being kidnapped, and she has transformed into a multi-national advocate, educator, and healer. With over two decades of experience in fostering self-empowerment and community development, Angela has dedicated her life to helping survivors to thrive after trauma. She founded PAVE (Promoting Awareness, Victim Empowerment) in 2000. Participants will discover innovative healing modalities that can help survivors to thrive after trauma. Learn about tangible and free tools to take back to your community and the people you serve. Many of these approaches can not only help the survivors we serve but can help advocates or others dealing with vicarious trauma. This keynote will include integrative healing techniques and will leave participants feeling grounded, hopeful, and uplifted. Objectives: 1. List ways of fostering self-empowerment and community development to make positive changes in their lives personally and professionally. 2. Learn tools and techniques to properly respond and promote resilience when a survivor discloses from the lens of a trauma survivor. 3. Identify coping mechanisms to help survivors to thrive after trauma.



# CONFERENCE AGENDA

Monday, June 10, 2024	
11:00am	<b>CMH Golf Outing:</b> Wolverine Golf Course, Grand Traverse Resort \$75 per person (9 holes and a cart) <ul style="list-style-type: none"> <li>– Call 231-534-6470 for tee times to reserve your spot.</li> <li>– Deadline for pre-registration: Monday, June 3, 2024</li> <li>– Credit card is required to hold a tee time.</li> <li>– 48-hour cancellation and no shows will be billed.</li> </ul>
12:30pm	<b>Registration for Pre-Conference Institutes</b>
1:00pm – 3:00pm	<b>Pre-Conference Institute #1: Implicit Bias: Seeing More Clearly by Examining Ourselves</b> <b>Pre-Conference Institute #2: The Intersectionality between Chronic Pain and Mental Health</b> <ul style="list-style-type: none"> <li>– Member Fee: \$65 per person. Fee includes materials and refreshments.</li> <li>– Non-Member Fee: \$78 per person. Fee includes materials and refreshments.</li> </ul>
2:00pm – 6:15pm	<b>Early-bird Conference Registration</b>
3:00pm – 3:40pm	<b>CMHSP/PIHP Board Chairperson Roundtable and Networking</b> This roundtable will be an informal gathering of chairpersons to discuss the latest issues affecting board members. Hear solutions used by chairpersons to overcome challenges in their board. Compare notes and learn what works and what doesn't. Bring your questions and be ready to be an active participant in this lively discussion! If the board chairperson is unable to attend, a board member may come in their place.
4:00pm – 5:30pm	<b>CMHA Members: Board of Directors Meeting</b>
5:40pm – 6:15pm	<b>CMHA Members: Member Assembly Meeting</b>
Tuesday, June 11, 2024	
7:15am – 5:00pm	<b>Conference Registration and Exhibits Open</b>
7:15am – 8:15am	<b>Group Networking Breakfast</b>
8:00am – 8:15am	<b>Conference Welcome</b> – <i>Dr. Carl Rice, Jr., CMHA President; LifeWays Board Member</i>
8:15am – 9:15am	<b>Keynote: Creating Cultures of Belonging Where Everyone Can T.H.R.I.V.E.</b> <ul style="list-style-type: none"> <li>■ Qualifies for 1 CE Hour for Social Work + Related MCBAP Education Contact Hour</li> <li>– <i>Tonya C. Bailey, PhD, President &amp; Lead Consultant, TCB Consulting, LLC</i></li> </ul> When a community has a culture that supports and nurtures everyone, a sense of belonging occurs. Creating cultures of belonging requires dedicated leaders and intentionality. This interactive presentation offers opportunities for individuals to work Together, Helping others, be Resilient, be Innovative, be Valued, and be Effective (T.H.R.I.V.E.). The keynote will provide tangible tools for participants to use immediately after the session has concluded. Objectives: 1. Increase understanding of the benefits and importance of creating cultures of belonging in a community. 2. Develop leadership abilities in fostering cultures of belonging. 3. Learn practical tools and resources to foster a sense of belonging in your communities.
9:15am – 9:45am	<b>Exhibitor-Sponsored Refreshment Break</b>



	<b>Concurrent Workshops</b>
9:45am – 11:15am	<p><b>1. Applied Behavior Analysis in Schools: A Joint Guidance Project with MDHHS and MDE</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Mary Luchies, PhD, LP, LBA, Section Manager Access, Workforce Development and Education Section Manager Intellectual/Developmental Disabilities and Autism Spectrum Disorder Services, Bureau of Children's Coordinated Health Policy and Supports, Michigan Department of Health and Human Services</i></li> <li>– <i>Lisa Collins, EdS, MA CCC-SLP, Section Manager Access, Workforce Development and Education Bureau of Children's Coordinated Health Policy and Supports, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>A panel of stakeholders convened by MDHHS and MDE has worked to develop guidance for the implementation of applied behavior analysis (ABA) in schools and during the school day. This presentation will outline the process and the guidance. ABA as an evidence-based practice is not new to educators as an effective treatment intervention for students with autism. This guidance is intended to help navigate the sometimes complex systems of federal, state and local rules related to education for students and supports that help children learn. The panel includes voices from ABA providers, school administrators, insurance providers, and state of Michigan staff to help ensure guidance that makes sense to everyone working to help Michigan's young learners succeed in school. Objectives: 1. Describe applied behavior analysis and how it can be coordinated within educational systems. 2. Identify the distinction between board certified and licensed behavior analysts and educational behavior support personnel. 3. Understand laws that impact child and family supports in educational settings.</p>
	<p><b>2. Michigan's Crisis System: Basics and Beyond</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Krista Hausermann, LMSW, CAADC, CCBHC Behavioral Health Program Specialist, Section Manager, Crisis and Stabilization Services, Michigan Department of Health and Human Services</i></li> <li>– <i>Amy Kanouse, MPH, Behavioral Health Program Specialist, CCBHC Demonstration, Behavioral and Physical Health and Aging Services Administration, Michigan Department of Health and Human Services</i></li> <li>– <i>Amanda Lopez, PhD, LP, Manager, Home and Community-Based Services Policy and Implementation Section, Bureau of Children's Coordinated Health Policy and Supports, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>Participants will learn about the model for Michigan's crisis system and how it is being tailored to fit Michigan's diverse landscape. This presentation will highlight the various crisis initiatives and how they support the development of this comprehensive model. MDHHS staff will identify and share progress on the implementation of core crisis components, i.e. mobile crisis, urgent care and crisis stabilization units; highlighting successful innovations at the local level. Objectives: 1. List three federal or state regulations which impact Michigan's crisis system. 2. Identify three research-based practices which are incorporated into the crisis system. 3. Explain two strategies being taken to help address crisis workforce shortages.</p>
	<p><b>3. CCBHC Dashboard</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Ric Compton, MPH, Chief Executive Officer, Riverwood Center</i></li> <li>– <i>Caleb Richardson, BA, Business Intelligence Manager, Riverwood Center</i></li> </ul> </li> </ul> <p>Riverwood Center has developed a Certified Community Behavioral Health Center (CCBHC) Dashboard through our Business Intelligence Staff with Power BI that uses real time (weekly) data from our PCE Electronic Health Record System to provide updates on Encounters, Quality Measurements, provider productivity by department and individuals. The Encounters section pulls data from the PCE system to show PIHP accepted, preliminary validation error and sent encounters. Moreover, the dashboard also tracks how Riverwood is doing on the six quality metrics and allows for supervisors and staff to drill down and provide responses to challenges or inefficiencies in achieving the goals or benchmarks. The CCBHC Dashboard will also track encounters by program area and can be used to drill down to individual provider by month and track the trends over time. The Dashboard has multiple functions and can be used by supervisors during supervision and department meetings to help cage multiple quality and encounter metrics to help improve quality of care and access. Objectives: 1. Identify metrics that are tracked by the CCBHC Dashboard. 2. Understand the process from EHR (PCE) to Dashboard and how the process was developed using Power BI. 3. Return to their respective CMH and begin the process of developing their own dashboard.</p>

	<p><b>4. Supporting Children with Their Adaptive Needs: Navigating the Waiver Programs, 1915(i) SPA, and the Children with Special Needs (CSN) Fund</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours</li> <li>– <i>Marcia Franks, BS, Intellectual and Developmental Disability Specialist, Children with Special Needs (CSN) Fund Coordinator, Michigan Department of Health and Human Services</i></li> <li>– <i>Rae-Anne Galarnau, LBSW, QIDP, Intellectual and Developmental Disability Specialist, Michigan Department of Health and Human Services</i></li> <li>– <i>Kimberly Hoga, LPC, QIDP, CMHP, Children’s Waiver Program, Data Analyst, Michigan Department of Health and Human Services</i></li> </ul> <p>Families of children with special needs often face numerous barriers to accessing essential adaptive equipment and environmental adaptations. These barriers include lack of understanding of services covered by their child’s program(s), confusion about how to obtain equipment for their child, and unnecessary delays trying to navigate the behavioral health and medical systems. The Children’s Waiver Program, the Habilitation Supports Waiver, the Additional Mental Health Supports 1915(i) SPA, and the CSN Fund each covers environmental modifications and adaptive equipment. By better understanding when and how program resources should be utilized, families will obtain the services they need in a more family-centered and efficient manner. This workshop will review policies related to assisting children with special needs access environmental modifications and adaptive equipment. Objectives: 1. Improve understanding of policies and guidelines for the CWP, HSW, 1915(i) SPA programs and the Children with Special Needs (CSN) Fund. 2. Recognize which program is most appropriate to access based on individual assessments and plans of care. 3. Be familiar with new strategies to provide family-centered support for families with children with special needs.</p>
	<p><b>5. Supported Decision-Making: Tools You Can Use</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours</li> <li>– <i>Mary Shehan, MS, QSE, Peer Mentor, Community Inclusion Coordinator, Michigan Developmental Disabilities Council (MIDDC)</i></li> <li>– <i>Jake Schaafsma, Certified Peer Mentor and Peer Sexuality Educator, Peer Mentor, HealthWest</i></li> </ul> <p>The trend in decision-making is to help people get the support they need to make decisions without removing their rights with guardianship. This presentation will talk about ways to help people understand decision-making. People attending will learn about tools they can use to decide where they need decision-making support and how to get support in the least restrictive ways. Special focus will be given to how Peer Mentors can use these tools to support others through the decision-making process. Objectives: 1. Understand the difference between guardianship and supported decision-making. 2. Explore tools that can be used to figure out where people need support with decision-making. 3. Learn how anyone can use these tools to help others find the least restrictive supports.</p>
	<p><b>6. Keeping Kids Safe: Coordination between Child Welfare and Behavioral Health</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours</li> <li>– <i>Rachel Willis, LMSW, Bureau Director, Bureau of Children’s Coordinated Health Policy and Supports, Bureau Director, Out of Home Services, Children’s Services Administration, Michigan Department of Health and Human Services</i></li> <li>– <i>Patty Neitman, MS LLP, Bureau Director, Bureau of Children’s Coordinated Health Policy and Supports, Michigan Department of Health and Human Services</i></li> </ul> <p>This workshop will explore "Keeping Kids Safe," an overview of MDHHS initiatives focused on improving the safety and well-being of children. The primary components of Keeping Kids Safe include prevention, intervention, stability, wellness and workforce. This session will also explore the coordinated efforts between the MDHHS Children’s Services Administration (CSA) and Bureau of Children’s Coordinated Health Policy and Supports (BCCHPS) to support the behavioral health needs of youth touched by the child welfare system. Objectives: 1. Understand the primary components of the MDHHS Keeping Kids Safe Action Agenda. 2. Understand coordination efforts between CSA and BCCHPS to support Keeping Kids Safe. 3. Understand how Keeping Kids Safe impacts the provider community.</p>
11:15am – 12:15pm	<b>Group Networking Lunch</b>



12:15pm – 1:15pm	<p><b>Keynote: From the Streets to the Stage</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1 Specific MCBAP Education Contact Hour <ul style="list-style-type: none"> <li>– <i>Mark Lundholm, Recovery Expert, Author, Comedian</i></li> </ul> </li> </ul> <p>Mark Lundholm has seen and experienced the bottom of life. He was a criminal at 13, an addict and former coke dealer, a check forger, homeless at 27, and did prison time for bank fraud. His amazing story of how he turned his life around is an inspiration to anyone in recovery. Hilarious, irreverent, and emotional stories of hope, healing, heart, and humor designed especially for the dedicated people who work on the front lines of the disease of addiction, codependency, alcoholism, and other dysfunctional family dynamics. They will be invited to examine themselves professionally AND personally to rediscover passion, purpose and potential.</p>
	<p><b>Concurrent Workshops</b></p>
1:30pm – 3:00pm	<p><b>7. The Top 10 Lessons from 10 Years of Mobile Crisis Service in Michigan</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Robert Lagrou, DO, Director, Crisis Services, Medical Director, New Oakland Family Centers</i></li> <li>– <i>Amelia Jackson, LMSW, Director, Crisis Services, New Oakland Family Centers</i></li> </ul> </li> </ul> <p>Dr. Robert Lagrou and Amelia Jackson are the medical and clinical leaders of New Oakland Family Centers' Mobile Intensive Crisis Stabilization (ICS) program. Established in 2013, the New Oakland's Mobile ICS capability is the longest-serving program of its kind in Michigan, having just concluded its 10th year of service. During that time, the team has developed important insights about best practices, overcoming obstacles to care and providing the strongest basis for helping individuals in crisis begin a sustainable path to recovery. Together, Dr. Lagrou and Ms. Jackson will discuss what they have identified as the Top 10 most important lessons from their time leading the Mobile ICS team and capability at New Oakland. Objectives: 1. Identify and understand the potential hurdles in delivery of a Mobile Crisis program. 2. Understand person-centered clinical and administrative strategies for overcoming those hurdles. 3. Create a roadmap for success in future implementation or improvement of Mobile Crisis initiatives.</p>
	<p><b>8. Building Partnerships: Working with Cannabis Retailers to Prevent Underage Cannabis Use</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Specific MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Kenneth Dail, Certified Prevention Consultant, Alliance Coordinator, Michigan Youth Cannabis Action and Education Alliance (MYCAEA)</i></li> </ul> </li> </ul> <p>Substance use prevention agencies and community coalitions have a long history of building bridges and creating opportunities to strengthen communities. Preventing underage cannabis use has been no exception. The presenter will give example of a few Michigan communities that have worked with their local cannabis retailers to educate adults and create systems to keep their products out of the hands of those under 21. Objectives: 1. Identify three different ways to partner with local cannabis retailers to keep cannabis safely out of the hands of those under 21. 2. Learn about MYCAEA's efforts to link communities addressing this issue and other agencies throughout the state willing to help you. 3. Understand the link between the environment created by having cannabis retailers in a neighborhood and adolescent cannabis use.</p>
	<p><b>9. Addressing Systemic Challenges for Youth with Complex Needs</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Stacy Farrell, LMSW, Manager, Division of Adult Home and Community-Based Services Director, Office of Advocate for Children, Youth and Families, Michigan Department of Health and Human Services</i></li> <li>– <i>Alex Kruger, LLMSW, Manager, Division of Adult Home and Community-Based Services, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>This workshop will explore various state level efforts and collaboration to address systemic challenges related to youth with highly complex needs. Presenters will discuss roles and resource collaboration of various MDHHS divisions and programs, including: the Office of Advocate for Children, Youth, and Families (OACYF), Intensive Community-based Treatment Services (ICTS), Psychiatric Residential Treatment Facilities (PRTF) and State Hospital Administration. Objectives: 1. Understand roles of various divisions within MDHHS that focus on addressing challenges for youth with highly complex needs. 2. Understand different state initiatives that are focused on addressing challenges faced by youth with highly complex needs. 3. Learn about collaboration within MDHHS and across systems to address systemic challenges for youth with highly complex needs.</p>

	<p><b>10. The Case for Sexuality Education for People With I/DD: Resources For Comprehensive, Inclusive Curriculums</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Mary Shehan, MS, QSE, Peer Mentor, Community Inclusion Coordinator, Michigan Developmental Disabilities Council (MiDDC)</i></li> <li>– <i>Jake Schaafsma, Certified Peer Mentor and Peer Sexuality Educator, Peer Mentor, HealthWest</i></li> </ul> </li> </ul> <p>We understand what the lack of sexuality and relationship education for people with intellectual and developmental disabilities (I/DD) can lead to: High rates of abuse, being charged with a sex crimes, unplanned pregnancies, sexually transmitted infections, and isolation and loneliness. We also know that self-advocates want to learn about this topic and often say they are still healing from the trauma of learning the hard way. These statistics can improve by providing medically accurate, age-appropriate sexuality and healthy relationship education for people with intellectual and developmental disabilities. Another reason this is so important is there are ways to provide this education by having self-advocates become one of the sexuality and relationship instructors or peer educators of this topic which provides them with leadership opportunities that are part of the solution. Objectives: 1. Explore the importance of building “Sexual Self-Advocacy” and skills for individuals with I/DD and how these skills generalize to other aspects of their lives. 2. Examine how to support, educate, and empower individuals with I/DD to become sexually healthy by having self-advocates as the sexuality educators themselves. 3. Discuss ways your organization can address sexuality and healthy relationships by training self-advocates to lead classes and work as peer educators to others with I/DD.</p>
	<p><b>11. Boardworks 2.0: Board Member Orientation &amp; the Role of Board Members in the Rights Protection Process</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours + RR CE Hour in Category I (Operations) <ul style="list-style-type: none"> <li>– <i>Robert Sheehan, CEO, Community Mental Health Association of Michigan</i></li> <li>– <i>Raymie Postema, BS, Director, Office of Recipient Rights, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>This session is designed for new and current board members. Board members of CMHA member organizations are provided an overview of CMHA, its mission, governance and committee structure, and the structure and purpose of the Boardworks series learning program. The second segment of this workshop will cover the role of the CMHSP, PIHP, and provider boards of directors as it relates to the rights protection process. Attendees will learn how the Board relates to the Recipient Rights Advisory Committee, to the selection of the Recipient Rights Director and its role in the Recipient Rights Appeals Committee. This workshop will review the rights of recipients as enumerated in the Mental Health Code, discuss the role of rights in the protection of consumers, training requirements for agency staff, confidentiality issues, the Recipient Rights Annual Report and how the Board can use this tool for process improvement. Objectives: 1. Describe the mission of CMHA and its governance structure. 2. Explain the relationship of the Board of Directors to the Recipient Rights Advisory Process Committee. 3. Identify the purpose of the recipient rights process as outlined in the Michigan Mental Health Code.</p>
3:00pm – 3:30pm	<b>Exhibitor-Sponsored Refreshment Break</b>
3:30pm – 5:00pm	<b>Concurrent Workshops</b>
	<p><b>12. A Good Life for Children, Youth and Families</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Jan Lampman, BA, QIDP, CAPP, Community Drive</i></li> <li>– <i>Justin Tate, LMSW, Manager, Office of the Advocate for Children, Youth and Families, Bureau of Children’s Coordinated Health Policy and Support, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>This workshop will explore the Family Driven, Youth Guided Policy through the Charting the LifeCourse Framework and Principles and discover how the framework can enhance planning with children, youth, and families. Objectives: 1. Discover how the Charting the LifeCourse Framework can enhance planning with children, youth, and families. 2. Identify the values that are important as we begin to think differently about what it means to support children, youth, and families to have good lives. 3. Identify how Charting the LifeCourse Framework and Principles can be used to reframe the conversation.</p>

	<p><b>13. Behavioral Health Quality Measures</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– Jackie Sproat, MSW, Manager, Data, Payment and Integrity Section Director, Division of Contracts and Quality Management, Michigan Department of Health and Human Services</li> <li>– Kasi Hunziger, MS, Manager, Data, Payment and Integrity Section, Michigan Department of Health and Human Services</li> </ul> </li> </ul> <p>The federally required quality program in our public behavioral health system is being updated. The Michigan Mission Based Performance Indicator System (MMBPIS) of state specific measures focused on access to care has been in place for many years. In the meantime, national quality landscape has evolved and now includes required state reporting of CMS behavioral health (BH) core set measures. This session will describe the measures included in the CMS BH core set, and illustrate how Michigan is performing on these measures in recent years in comparison with national benchmarks. Special focus will be given to measures that are included in the PIHP Performance Bonus Incentive Program (PBIP). Data will also be shared during the session on deliverables recently added to the PBIP based on BHTEDS living arrangement and employment data. Objectives: 1. Summarize work underway to update the specialty behavioral health quality measure program. 2. Understand child and adult measures included in the CMS behavioral health core set, and Michigan’s performance within these measures relative to other states. 3. Understand the BHTEDS deliverable included in the PIHP Performance Bonus Incentive Program.</p>
	<p><b>14. Crisis Through the Peer Lens</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– Julie Smythe, MA, CPSS, Recovery Workplace and Recovery Community Organization Statewide Coordinator, Coordinator of Peer Recovery Trainings and Services, Michigan Department of Health and Human Services</li> <li>– Sara Szczołka, BS, CPRC, Recovery Workplace and Recovery Community Organization Statewide Coordinator, Michigan Department of Health and Human Services</li> <li>– Pam Werner, MA, Peer Services Area, Michigan Department of Health and Human Services</li> </ul> </li> </ul> <p>State and national information will be provided on the integration of peer workers in crisis settings. Resources will be shared on how the significant involvement of peers, as an evidence-based practice, is critical to the effectiveness of crisis services. Discussion will be centered on how the agency can support peers to prevent role drift. MDHHS Peer Services Area has piloted a three-day training for Certified Peer Support Specialists (CPSSs) and Certified Peer Recovery Coaches (CPRCs). This workshop will highlight the connection, compassion, and care of lived expertise the peer brings to the crisis setting. Objectives: 1. Understand the role of the peer worker in crisis settings. 2. Define peerness and peer drift. 3. Understand the role of peers as an evidence-based practice.</p>
	<p><b>15. Benefits of Partnering with Your Local NAMI Affiliate</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– Kevin Fischer, Executive Director, NAMI Michigan</li> </ul> </li> </ul> <p>NAMI, the National Alliance on Mental Illness is the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. From advocacy, education and support, local communities and Community Mental Health organizations benefit from a strong partnership with their local NAMI affiliate. If your county does not have a local NAMI affiliate, you will learn how to help establish one. Objectives: 1. Understand “Who/What is NAMI” and the benefits of partnering with/establishing a NAMI affiliate in your community. 2. Be aware of what education and support programs NAMI offers and the importance of NAMI Smarts for Advocacy Training. 3. Learn the tools to establish a NAMI affiliate in your community.</p>
	<p><b>16. Boardworks 2.0: Foundations – Ensuring a Consumer Focus</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– Sara Lurie, MS, LMSW, CAADC, CPC, CEO, Community Mental Health Authority of Clinton, Eaton, Ingham Counties</li> <li>– Rebecca West-Russell, BA, CPSS, Customer Service Representative, CPSS, Community Mental Health Authority of Clinton, Eaton, Ingham Counties</li> </ul> </li> </ul> <p>The presenters will address the public policy expectations of the community system, reflecting intended beneficiaries as the sole purpose of the existence of the community system itself. You will learn about the key elements of Commitment to the Life Plan (Person-Centered planning and support). The workshop will include information about recovery orientation, resiliency perspective and element cultural representation. Objectives: 1. List at least three Self-Determination principles. 2. Identify at least two opportunities and/or strategies for building community partnerships and collaboration. 3. Learn how Peers can help in customer service and health and wellness.</p>

<b>Wednesday, June 12, 2024</b>	
7:30am – 12:00pm	<b>Conference Registration and Exhibits Open</b>
7:30am – 8:45am	<b>Breakfast Activities</b> (full breakfast buffet will be served until 8:45am) Regional Breakfast Meetings Non-Member and Staff Networking Breakfast
9:00am – 10:00am	<p><b>Keynote: How New Resources from Opioid Settlements and Opioid Health Homes can Improve Substance Use Disorder Services</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1 CE Hour for Specific MCBAP Education Contact Hour <ul style="list-style-type: none"> <li>– <i>Jared Welehodsky, JD, State Assistant Administrator, Office of the Chief Medical Executive, Michigan Department of Health and Human Services</i></li> <li>– <i>Kelsey Bowen, MPH, CHES, Opioid Health Home, Service Delivery Transformation Section, Behavioral and Physical Health and Aging Services Administration, Michigan Department of Health and Human Services</i></li> <li>– <i>Amy Dolinky, Technical Advisor, Opioid Settlement Funds Planning and Capacity Building, Michigan Association of Counties</i></li> </ul> </li> </ul> <p>In this keynote, attendees will learn about new resources available to address substance use disorder in Michigan. The State of Michigan and local governments have settled lawsuits with numerous companies over their role in creating the opioid epidemic. This funding is now available for state and local governments to address gaps in substance use disorder services. You will learn how state and local governments are using this funding to address services. In addition, Michigan has expanded the Opioid Health Home model statewide to improve substance use disorder. You will learn how this program improves coordination of services for Michigan residents with a diagnosis of alcohol, stimulant or opioid use disorder.</p>
10:00am – 10:30am	<b>Exhibitor-Sponsored Refreshment Break</b>
10:30am – 12:00pm	<b>Concurrent Workshops</b>
	<p><b>17. What's Going on in Lansing</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Alan Bolter, Associate Director, Community Mental Health Association of Michigan</i></li> </ul> </li> </ul> <p>Hear about the latest goings-on in the Michigan Legislature. What was included in the FY25 budget? What are the major policy items impacting the public mental health system? How has the political shift in Lansing impacted the legislative process and what big issues will the legislature tackle in the future? This workshop will provide an update on the latest legislation and budget issues impacting the CMH system and how members can convey our advocacy message moving forward.</p>
	<p><b>18. Demolishing Sexual Assault Barriers to Justice and Healing</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Lisa Saruga, MA, Counselor, Healthy Mind Counseling</i></li> </ul> </li> </ul> <p>The Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) have recognized sexual violence as a serious global public health issue. While we often hear about sexual violence as a human rights issue that exists in other nations, the epidemic here in the U.S. places us in the top 10% of countries with the highest levels of sexual violence. Sexual Violence impacts half of women in America and 1/3 of men. Our own epidemic is largely ignored and minimized. We will explore this issue from several perspectives, including prevention, treatment, community resources, and legislative loopholes that stand in the way of justice for victims. Objectives: 1. Identify critical community resources for response to sexual violence. 2. Identify legal gaps and loopholes to justice, and what we can do to increase safety for victim/survivors of sexual violence. 3. Recognize the health and economic consequences of sexual violence in our communities.</p>

	<p><b>19. Crisis Services for Children and their Families</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Gwenda Summers, MA, LPC, Director, Families Forward, Community Mental Health Authority of Clinton, Eaton, Ingham Counties</i></li> <li>– <i>Alyssa Newmoyer, BS, Director, Families Forward; CSU Specialist, Michigan Department of Health and Human Services</i></li> </ul> </li> </ul> <p>Expand your understanding of developing crisis services, as MDHHS introduces Michigan's model for Child and Family Crisis Stabilization Units. MDHHS will offer clarity as this new level of care for children and their families is presented. Community Mental Health Authority of Clinton, Eaton and Ingham Counties, Families Forward, a progressive program who has been offering CSU-like services for children and families for over 25 years, will share insights into their experience. CMHA-CEI Families Forward will describe key components of their program that have led to success and share how common barriers to serving children and families in a crisis setting have been previously overcome. Attendees are encouraged to ask questions and actively engage in discussion during this workshop. Objectives: 1. Describe all key components of Michigan's Child &amp; Family CSU model. 2. Summarize the importance of family and caregiver partnership in crisis services. 3. Implement core activities and interventions provided by CMHA-CEI Families Forward for crisis services focused on children, youth, and their families.</p>
	<p><b>20. The Value of Inclusion: Increasing Engagement with Community Partners to Improve Outcomes and Expand Options for People with Disabilities</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours for Social Work + Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Beth Durkee, Mental Health Program Supervisor I/DD, Community Mental Health of Ottawa County</i></li> <li>– <i>Tedra Jackson, Deputy Director, MI Developmental Disabilities Council</i></li> </ul> </li> </ul> <p>Join us for an insightful and engaging workshop that explores how Ottawa County Community Mental Health collaborated with the Michigan Developmental Disabilities Council and community partners to improve outcomes for individuals with intellectual/developmental disabilities. Participants will gain practical insights and actionable strategies that promote and ensure that all people with developmental disabilities are able to live in their communities, have full access to services they need and lead self-determined lives. Objectives: 1. Examine the connection between the council's work and ongoing quality improvement. 2. Describe how to access the council to improve and expand person-centered practices. 3. Identify the values that are important as we begin to think differently about what it means to support people with intellectual/developmental disabilities.</p>
	<p><b>21. Mental Health Issues and Homelessness</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1.5 CE Hours Related MCBAP Education Contact Hours <ul style="list-style-type: none"> <li>– <i>Thomas "Cowboy" Hardy, HealthWest Board of Directors, Primary Consumer, Formerly Homeless and Disabled Veteran</i></li> </ul> </li> </ul> <p>This workshop will provide an understanding of the homeless crisis and the underlying mental health issues usually associated with those that are homeless. The workshop will delve into the various mental health and trust issues homeless individual's face. The presenter will also share some of their personal experiences and what he does now to give back to his community by participating in special projects. He will also offer ideas on ways that others can get involved. Objectives: 1. Learn what Point-in-Time County and Housing Inventory Count reports are and how they work. 2. Identify underlying mental health issues that are associated with those who are homeless. 3. List ways to give back in your community.</p>
12:00pm – 1:30pm	<p><b>Group Networking Lunch and Closing Keynote: Hope, Healing and Happiness</b></p> <ul style="list-style-type: none"> <li>■ Qualifies for 1 Related MCBAP Education Contact Hour <ul style="list-style-type: none"> <li>– <i>Angela Rose, Survivor and Author</i></li> </ul> </li> </ul> <p>Angela Rose was just 17 years old when she survived being kidnapped, and she has transformed into a multi-national advocate, educator, and healer. With over two decades of experience in fostering self-empowerment and community development, Angela has dedicated her life to helping survivors to thrive after trauma. She founded PAVE (Promoting Awareness, Victim Empowerment) in 2000. Participants will discover innovative healing modalities that can help survivors to thrive after trauma. Learn about tangible and free tools to take back to your community and the people you serve. Many of these approaches can not only help the survivors we serve but can help advocates or others dealing with vicarious trauma. This keynote will include integrative healing techniques and will leave participants feeling grounded, hopeful, and uplifted. Objectives: 1. List ways of fostering self-empowerment and community development to make positive changes in their lives personally and professionally. 2. Learn tools and techniques to properly respond and promote resilience when a survivor discloses from the lens of a trauma survivor. 3. Identify coping mechanisms to help survivors to thrive after trauma.</p>
1:30pm	<b>Conference Adjourns</b>

Muskegon County Employees Appreciation Day Attachment #14  
Saturday, August 10, 2024  
Muskegon County Airport (MKG)  
114 Sinclair Drive, Muskegon, MI 49441



The Muskegon County Employees Appreciation Day includes tickets to the 2024 Wings Over Muskegon Air Show for Muskegon County

**HealthWest Board Members have been approved for 2 tickets (Board Member & one guest)**

**\*MORE DETAILS TO FOLLOW\***

