

**HEALTHWEST**  
**FULL BOARD MINUTES**

**March 22, 2024**

**8:00 a.m.**

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

**CALL TO ORDER**

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

**ROLL CALL**

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

Others Present: Rich Francisco, Holly Brink, Gina Post, Christy LaDronka, Shannon Morgan, Kristi Chittenden, Pam Kimble, Anissa Goodno, Jackie Farrar, Brittani Duff, Tasha Kuklewski, Jennifer Hoeker, Amber Berndt, Rachel Harden, Brandon Baskin, Amy Witt, Stacie Petersen, Kelly Betts, Melina Barrett, Gina Kim, Gordon Peterman, Latesha Johnson, Suzanne Beckeman

Guests Present: Angela Gasiewski, Matt Farrar

**MINUTES**

HWB 64-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to approve the minutes of the February 23, 2024 Full Board meeting as written.

**MOTION CARRIED.**

**COMMITTEE REPORTS**

***Finance Committee***

HWB 60F - It moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the February 16, 2024, meeting as written.

**MOTION CARRIED.**

HWB 61F - It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve expenditures for the month of January 2024, in the total amount of \$7,801,706.53.

**MOTION CARRIED.**

HWB 62F – It was moved by Mr. Hardy, second by Commissioner Hovey-Wright, to approve the HealthWest Executive Director to accept the Assisted Outpatient Treatment I/I Initiative Grant for a total of \$308,042 effective April 1, 2024 through September 30, 2025.

**MOTION CARRIED.**

HWB 63F – It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the HealthWest Board of Directors to approve the projected expenditure with Core Solutions, Inc. with a total of \$133,000.00 effective October 1, 2023 through September 30, 2024.

**MOTION CARRIED.**

## **OLD BUSINESS**

There was no old business.

## **NEW BUSINESS**

Mr. Hardy shared that he will be presenting on Homelessness at the CMHA Summer Conference in June. More details to follow.

## **COMMUNICATION**

Brandon Baskin, Rachel Harden, Amy Witt and Stacie Petersen provided a presentation on Care Coordination, Housing, Veterans Services and Groups.

## **DIRECTOR'S COMMENTS**

Mr. Francisco, Executive Director, presented his Formal Director's report.

- Michigan MichiCANS soft launch update with MDHHS. Had our “touch base” meeting with MDHHS implementors of MichiCans Monday 3/18. There are only two weeks left of the pilot testing. Staff will be ready to complete the various trainings as part of the implementation time from MDHHS. They have divided all training participants into 3 major cohorts for the entire state. There are about 5000 identified to complete the training, and certification by Oct. 1, 2024. We are part of Cohort 3, and our training will be in following months:
  - ***MichiCANS Certification Training*** - August and September
  - ***Action Planning Training*** - November and December
  - ***Supervisor Training*** - November and December
  - ***Leadership Training*** – August
- We have received from Stacia, the LRE CFO, an update on the meeting with MDHHS and actuary (Thursday, 3/21). There seems to be a consensus that the general rates increase overall is going to be right around 6.28%. However, this can vary by population from April to September. Stacia is calculating the amounts based on information provided by Milliman and will share with CMHSPs as soon as that is completed. This increase hopes to address revenue drops we have been seeing related to PHE ending and revenue dropping.
- Last month, I gave an update on CFAP but recent developments at the state level suggest that this is not resolved yet. I stated that those that are CCBHC demonstrations are exempt from Conflict Free requirements. We are hearing that this may only apply to those services that are CCBHC services and does not apply to the other non-CCBHC services. CMHA along with other partners have drafted a summary of concerns related to the MDHHS-proposed Conflict Free access and Planning approach. Some points the group is bringing up are that consumer choice must be preserved, and how can this happen in CFA (Conflict Free Access recommendation) along with Self Determination and right to choose providers. The right to choose case managers and coordinators, right to independent facilitation, the right to use CMHSP Recipient Rights system.

### **Lakeshore Regional Entity updates:**

- I shared during Finance Committee that LRE and CMHSPs are holding meetings and continue to go over the LRE/CMHSP contract. The date this will be finalized will be in August or just in time for the next fiscal year. The LRE will continue to extend the contract until the LRE/CMHSP contract is final, which is going all the way to August in time for September board approval.

- Update on N180 request for more funds went from 25M to 19M and now down to 17M per the most recent meeting at LRE Ops meeting 03/20. Per Bill this is worst case scenario, root causes – redetermination revenue drops, about 9 million, increased cost from autism to 7M, individuals coming back to services previously opted out of Medicaid about 3M. Other considerations they have are onboarding 3 DCOs about 1.8M. This includes Pine Rest, Family Outreach Center, Arbor Circle--Currently being paid from capitation right now until CCBHC is running well. N180 shared strategies to address the shortfall. Now that April – September rates will have added revenue, this may change the bottom-line amount N180 is asking for. N180 has strategies to address the remaining shortfall and hopefully will not need to tap into the ISF and reserves.

#### **Executive Director activities CMH level:**

- CARF dates have been received, and ours is scheduled for May 15 to 17<sup>th</sup>. This will be a busy time for Staff. Our Quality Improvement team is taking the lead and communicating and coordinating the activities related to this audit.
- We have received most SWOTs (Strength, Weakness, Opportunities and Threats) analysis from the teams at HW. Our communications team is aggregating the results to identify elements that we can incorporate as updates into the current strategic plan. HW will still hold a Strategic planning session and invite the board of directors, and other stakeholders in the fall for our strategic plan for FY2026.
- KATA and lean improvement updates:
  - 75 HealthWest staff completed the training, 2 LRE staff, 1 County staff 12 scheduled for March 21<sup>st</sup>.
  - **DEI (1) , Finance (2), Outpatient started a new one, Quality Assurance – 2 ongoing and 2 in planning stage, UM (1)---- Total 9 KATA projects going on right now.**
  - 2 teams that have completed a KATA are Autism and Outpatient Services.

#### **On the horizon:**

- Annual Needs submission Due March 31, 2024 (Thanks to Pam and her team for completing this report). This report will be presented to the board in April.
- Utilization Management Committee: Work on committee structure, data reporting and review of data to improve practices. The focus is to expand outside of Utilization review but look at other metrics and outcomes that impact clinical operations.

#### **AUDIENCE PARTICIPATION**

There was no audience participation.

#### **ADJOURNMENT**

There being no further business to come before the board, the meeting adjourned at 9:02 a.m.

Respectfully,



Janet Thomas  
Board Chair

/hb



**TO:** HealthWest Board Members  
**FROM:** Janet Thomas, Board Chair, via Rich Francisco, Executive Director  
**SUBJECT:** Full Board Meeting  
March 22, 2024  
376 E. Apple Ave., Muskegon, MI 49442  
<https://healthwest.zoom.us/j/92330401570?pwd=TFNHMWhnQmF5NVYybWRQVG54Tk1GZz09>  
One tap mobile: (309)205-3325, 92330401570# Passcode: 428623

**AGENDA**

- |     |  |             |
|-----|--|-------------|
| 1)  | Call to Order  | Action      |
| 2)  | Welcome New Board Member Mary Vazquez / Introductions  |             |
| 3)  | Approval of Agenda   | Action      |
| 4)  | Approval of Minutes  |             |
|     | A) Approval of the Full Board Minutes of February 23, 2024<br>(Attachment #1 – pg. 1-5)  | Action      |
| 5)  | Public Comment (on an agenda item)   |             |
| 6)  | Committee Reports  |             |
|     | A) Finance Committee<br>(Attachment #2 – pg. 6-8)  | Action      |
| 7)  | Items for Consideration  |             |
| 8)  | Old Business   |             |
| 9)  | New Business   |             |
| 10) | Communication  |             |
|     | A) Care Coordination / Housing / Veterans Services / Groups Presentation:<br>Brandon Baskin, Rachel Harden, Amy Witt & Stacie Petersen<br>(Attachment #3 – pg. 9-18) | Information |
|     | B) Employee Recognition: Kelly Betts, Customer Service Specialist<br>(Attachment #4 – pg.19-20)  | Information |
|     | C) Board Work Session<br>(Attachment #5 – pg.21)   | Information |
|     | D) Director's Report – Rich Francisco, Executive Director<br>(Attachment #6 – pg. 22-23)   | Information |
| 11) | Public Comment   |             |
| 12) | Adjournment  | Action      |

**HEALTHWEST**  
**FULL BOARD MINUTES**

**February 23, 2024**

**8:00 a.m.**

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

**CALL TO ORDER**

The meeting of the Full Board was called to order by Chair Thomas at 8:04 a.m.

**ROLL CALL**

Members Present: Janet Thomas, Thomas Hardy, Marcia Hovey-Wright, Remington Sprague, MD, Janice Hilleary, Tamara Madison,

Members Absent: Charles Nash, Cheryl Natte, John Weerstra, Jeff Fortenbacher, Kim Cyr,

Others Present: Rich Francisco, Holly Brink, Gina Post, Christy LaDronka, Shannon Morgan, Kristi Chittenden, Matt Plaska, Pam Kimble, Anissa Goodno, Jackie Farrar, Brittani Duff, Gary Ridley, Linda Wagoner, Tasha Kuklewski, Chelsea Kirksey, Jennifer Hoeker

Guests Present: Angela Gasiewski, Kristen Wade

**MINUTES**

HWB 58-B - It was moved by Mr. Hardy, seconded by Ms. Hilleary, to approve the minutes of the January 25, 2024 Full Board meeting as written.

**MOTION CARRIED.**

**COMMITTEE REPORTS**

***Finance Committee***

HWB 50F - It moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the January 19, 2024, meeting as written.

**MOTION CARRIED.**

HWB 51F - It was moved by Commissioner Hovey-Wright, seconded by Dr. Sprague, to approve expenditures for the month of December 2023, in the total amount of \$8,365,703.80.

**MOTION CARRIED.**

HWB 52F – It was moved by Ms. Thomas, second by Mr. Hardy, to approve the HealthWest Executive Director to allow spending among the sources based on the approved budget(s) for the term of the contract.

**MOTION CARRIED.**

HWB 53F – It was moved by Ms. Thomas, seconded by Dr. Sprague, to contract with the service vendors, Covenant Academies, Lakeshore Training System, Brewer & Bristow Training, Peter Change Enterprises, Rehman Robson and Roslund Prestige Company, through the term of their contract.

**MOTION CARRIED.**

HWB 54F - It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize the HealthWest executive Director to sign a contract with Great Lakes Recovery Centers, Inc., for March 1, 2024 through September 30.

**MOTION CARRIED.**

HWB 55F- It was moved by Ms. Thomas, seconded by Commissioner Hovey-Wright, to authorize the HealthWest Executive Director to sign a contract with Pharon's Best Haven to provide specialized residential services to eligible HealthWest consumers.

**MOTION CARRIED.**

HWB 56F- It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize the HealthWest Executive Director to sign a contract with Living Hope Home Care, LLC. for the period March 1, 2024 through September 30, 2025 to provide CLS and Respite services to eligible HealthWest consumers.

**MOTION CARRIED.**

HWB 57F- It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize HealthWest Executive Director to sign contract with Pine Rest Christian Mental Health Services effective March 1, 2024 through September 30, 2025 to provide Crisis Residential Services to eligible HealthWest Consumers

**MOTION CARRIED.**

### ***Recipient Rights Committee***

HWB 48R- It was moved by Ms. Natte, seconded by Ms. Hilleary, to approve the minutes of the December 1, 2023 meeting as written.

**MOTION CARRIED.**

HWB 49R- It was moved by Ms. Hilleary, seconded by Ms. Natte, to approve the Recipient Rights Reports for December 2023 / January 2024..

**MOTION CARRIED.**

### ***Program Personnel Committee***

HWB 46P- It was moved by Mr. Hardy, seconded by Ms. Hilleary, to approve the minutes of the December 1, 2023 meeting as written

**MOTION CARRIED.**

HWB 47P- It was moved by Mr. Hardy, seconded by Ms. Hilleary, to approve the HealthWest Network Procurement Plan that was created on September 29, 2023.

**MOTION CARRIED.**

### **ITEMS FOR CONSIDERATION**

HWB 59B- It was moved by Dr. Sprague, seconded by Mr. Hardy, to approve the HealthWest Network QAPIP Plan that was created on September 29, 2023.

**MOTION MADE ON FLOOR / MOTION CARRIED.**

### **OLD BUSINESS**

There was no old business.

## **NEW BUSINESS**

There was no new business.

## **COMMUNICATION**

- Ms. Kimble, Director of Quality Assurance, presented her QAPIP Plan.
- Ms. Madison provided a Consumer Advisory update.

## **DIRECTOR'S COMMENTS**

Mr. Francisco, Executive Director, presented his Formal Director's report.

### **MDHHS Updates:**

- Gov. Whitmer and budget director, Jen Flood presented on Feb 7<sup>th</sup> the Executive budget recommendation to the Michigan Senate and House Appropriations Committees. I did share the budget recommendation with the board via email. Some of the highlights for mental health includes:
  - \$193.3 million to expand Michigan's Certified Community Behavioral Health Clinics (CCBHC) demonstration program (\$35.6 million general fund). Funds will be used to support new CCBHC sites and establish more sophisticated oversight and monitoring for the Medicaid CCBHC system.
  - \$36.1 million to increase rates for behavioral health services provided through Medicaid health plans (\$10.2 million general fund). This proposal brings parity in reimbursement rates for behavioral health services paid through Medicaid health plan contracts to improve access to needed supports for Medicaid enrollees.
  - \$8.3 million to establish Medicaid reimbursement for peer provided substance use disorder services (\$2.5 million general fund). Peer recovery specialists will be reimbursed for services provided in a hospital setting.
  - \$7.3 million for the Michigan Crisis and Access Line (MiCAL) (\$8.3 million general fund) to ensure structural ongoing support for services currently provided to individuals experiencing behavioral health crises. Funding will ensure access to text and chat functionality, from a Michigan-based provider, 24 hours a day, seven days a week.
  - \$4 million to enhance gambling prevention and treatment services (state restricted revenue). Funding will support residential gambling treatment, recovery support services, youth education and prevention services, research and evaluation, provider training, a media campaign, and the problem gambling hotline. **(Ref: Alan Bolter, CMHA communication).**
- Michigan MichiCANS soft launch update with MDHHS. Had our "touch base" meeting with MDHHS implementors of MichiCANS Tuesday 2/20. HW is in an advantageous position, with the soft launch. Staff are ready to complete the training for the Comprehensive assessment of MichiCANS but have completed 146 screeners. Once staff complete the training for the assessment, they will be starting to complete those as well.

- The PIHP's have aggregated a report showing the trends and drops in enrollment broken down by the different PIHP regions and then again further broken down into DAB, HMP, and TANF. The data for all regions show the same downward trend in enrollments captured from June 2023 to Jan. 2024. All PIHPs share the same concerns of revenue drops, and this data is being shared to get MDHHS to adjust the rate as soon as possible. According to Stacia, LRE CFO, a separate group at MDHHS is looking at the data. HW board will receive an update as this effort statewide progresses.
- I received an email on February 9<sup>th</sup> from CMHA that MDHHS staff leading the Conflict Free Access and Planning (CFAP) have confirmed that state's CCBHCs are exempt from the CFAP requirements due to the requirements to access, person centered planning/IPOS development and service provision that CCBHCs must meet. This is good news!

#### **Lakeshore Regional Entity updates:**

- Submitted to the LRE the second round of feedback on the LRE/CNHSP contracts which was due 2/20/2024. The LRE did not complete responses to areas under the Compliance section, but assured that updates and changes were being made to this section as well. We should be hearing from the LRE on next steps regarding contract discussions.
- LRE HSW (HAB supports waiver) slots update. The HSW slots offered by MidState to LRE have been transferred to the LRE. However, it is still showing as borrowed slots in the WSA system portal. MDHHS is working to fix this and make these slots permanent to the LRE. The LRE strategy is to roll out ten per month starting in February, ten per March and ten per April for a total of thirty slots transferred.

#### **Executive Director activities CMH level:**

- Our IT team is working with County IT to assist in the implementation of the County O365 roll out. It makes sense to have the County leverage HW's current tenant and get the County system updated on Microsoft office. The County is planning to add about fifty licenses of O365 to get started, and then adding additional more licenses.
- We still have not received a date for our CARF accreditation audit, and still waiting on CARF to provide a date. An update from our Quality Improvement team indicated that they may be having a tough time finding surveyors. We will keep the board updated on this as we hear more.
- I have started a workgroup of HW staff to begin looking at our current Strategic Plan and developing an update and document to track progress. In the fall, I will be putting together a strategic work retreat for internal staff in preparation for FY25. The goal is to just update the Strategic plan now with status updates but to do a full survey and input from various stakeholders in the fall.

#### **On the horizon:**

- Strategic Plan development
- CARF accreditation – April/May timeframe.



**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the board, the meeting adjourned at 8:54 a.m.

Respectfully,

Janet Thomas  
Board Chair

/hb

***PRELIMINARY MINUTES***  
***To be adopted and approved at the Full Board Meeting of March 22, 2024***

**HEALTHWEST**

**FINANCE COMMITTEE REPORT TO THE BOARD**

**via Jeff Fortenbacher, Committee Chair**

1. The Finance Committee met on March 15, 2024.
- \* 2. It was recommended, and I move to approve the minutes of the February 16, 2024, meeting as written.
- \* 3. It was recommended, and I move to approve expenditures for the month of January 2024, in the total amount of \$7,801,706.53.
- \* 4. It was recommended, and I move to approve the HealthWest Executive Director to accept the Assisted Outpatient Treatment I/I Initiative Grant for a total of \$308,042 effective April 1, 2024 through September 30, 2025.
- \* 5. It was recommended, and I move to approve to authorize the HealthWest Board of Directors to approve the projected expenditure with Core Solutions, Inc. with a total of \$133,000.00 effective October 1, 2023 through September 30, 2024.

/hb

**HEALTHWEST**

**FINANCE COMMITTEE MEETING MINUTES**

**Friday, March 15, 2024  
8:00 a.m.**

**CALL TO ORDER**

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

**ROLL CALL**

Committee Members Present:     Jeff Fortenbacher, Janet Thomas, Thomas Hardy, Commissioner Marcia Hovey-Wright

Committee Members Absent:     Remington Sprague, M.D., Commissioner Charles Nash

Also Present:     Rich Francisco, Holly Brink, Shannon Morgan, Gina Post, Brandy Carlson, Gordon Peterman, Amber Berndt, John Weerstra, Gina Kim, Jackie Farrar, Kristi Chittenden, Cyndi Blair, Justine Belvitch, Suzanne Beckeman, Linda Wagner, Melina Barrett, Natalie Walther, Latesha Johnson, Jamey Curtis

Guests Present:     Angela Gasiewski

**MINUTES**

It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the February 16, 2024, meeting as written.

**MOTION CARRIED**

**ITEMS FOR CONSIDERATION**

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

It was moved by Mr. Hardy, seconded by Commissioner Hovey-Wright, to approve expenditures for the month of January 2024, in the total amount of \$7,801,706.53.

**MOTION CARRIED**

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

Ms. Carlson presented the January report, noting an overall cash balance of \$7,943,383.80 as of January 31, 2024.

**C.     Finance Update Memorandum**

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

**D.     Authorization to Approve Grant Funded Agreements**

It was moved by Mr. Hardy, second by Commissioner Hovey-Wright, to approve the HealthWest Executive Director to accept the Assisted Outpatient Treatment I/I Initiative Grant for a total of \$308,042 effective April 1, 2024 through September 30, 2025.

**MOTION CARRIED**

**E.     Authorization to Approve Increase Projected Contract Expenditures for Core Solutions, Inc.**

It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the HealthWest Board of Directors to approve the projected expenditure with Core Solutions, Inc. with a total of \$133,000.00 effective October 1, 2023 through September 30, 2024.

**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:

- LRE Contract Discussion at the LRE continues to occur. A discussion workgroup has been formed and on March 14, 2024 a meeting was held to bring some regional staff from across the CMH to discuss all the items brought back from the second round of feedback. The first round of feedback mostly came from our CMH and WM with our corporate counsel offering some suggestions. There is more work to be done before the contract with the LRE will be executed. The LRE will continue to extend the contract until the new agreement is finalized. The LRE is forecasting that August will be the timeframe for execution of the contract.
- Regional COFR discussions. The CMH regional COFR workgroup continues to meet with West Michigan setting the meetings. I have mentioned before that because most of the CMHs in our region are now CCBHC demonstrations, the CMHs are seeing a need for better standardized guidelines on how to deal with COFR situations. There will be a dual approach because our region must account for those CMHs that are not CCBHC demonstration sites. The workgroup's goal is to develop a set of guidelines for COFR best practice.
- The CARF survey date has now been set and that will be on May 15 through to May 17.

**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

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

Respectfully,

Jeff Fortenbacher  
Committee Chair

/hb

**PRELIMINARY MINUTES**  
**To be approved at the Finance Meeting on**  
April 19, 2024

# CARE COORDINATION

VETERANS SERVICES

HOUSING

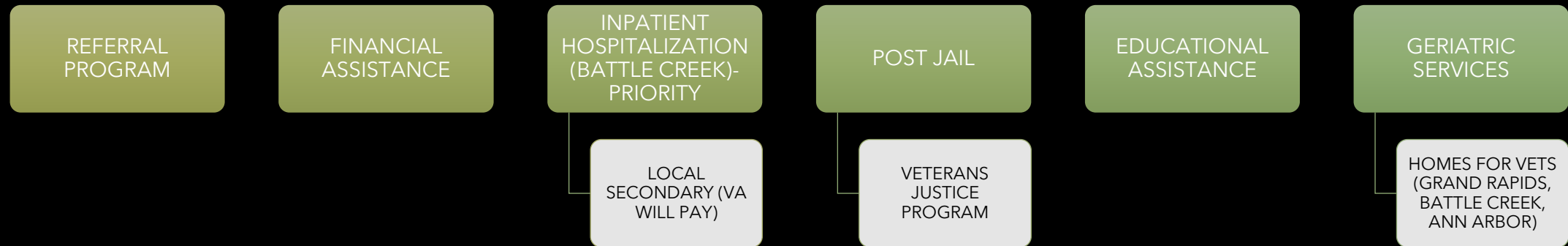
GROUPS



# VETERANS SERVICES

- SUPPORT ANY VETERAN REGARDLESS OF DISCHARGE STATUS
  - HONORABLE
  - DISHONORABLE
    - Homelessness
    - Compensation/Benefits with VA
    - Compensation/Benefits without VA
    - Support Group- Veteran 2 Veteran
      - Safe place for veterans to come and open with those who are familiar with their wounds

# CONT...



# CONT.....

SUICIDE  
AWARENESS FOR  
VETERANS

WOMEN VETERANS  
PROGRAMS (WINC,

SURVIVOR  
BENEFITS-  
CURRENT VETERAN  
AND DEPENDANTS





# HOUSING

- CHRONICALLY HOMELESS (Homeless for at least 12 of the last 36 months)
- VETERANS HOUSING (Veterans obtain housing with PSH grant)
- SOAR (SSI/SSDI Outreach, Access and Recovery)
  - Seeking to end homelessness by increasing access to SSI/SSDI income support
- PERMANENT SUPPORTIVE HOUSING (PSH)

# Permanent Supportive Housing (PSH)



**PSH is monitored by the CoC Steering Committee and subcommittees within.**

Subcommittees include Coordinated Entry, Outreach, Data, and Review



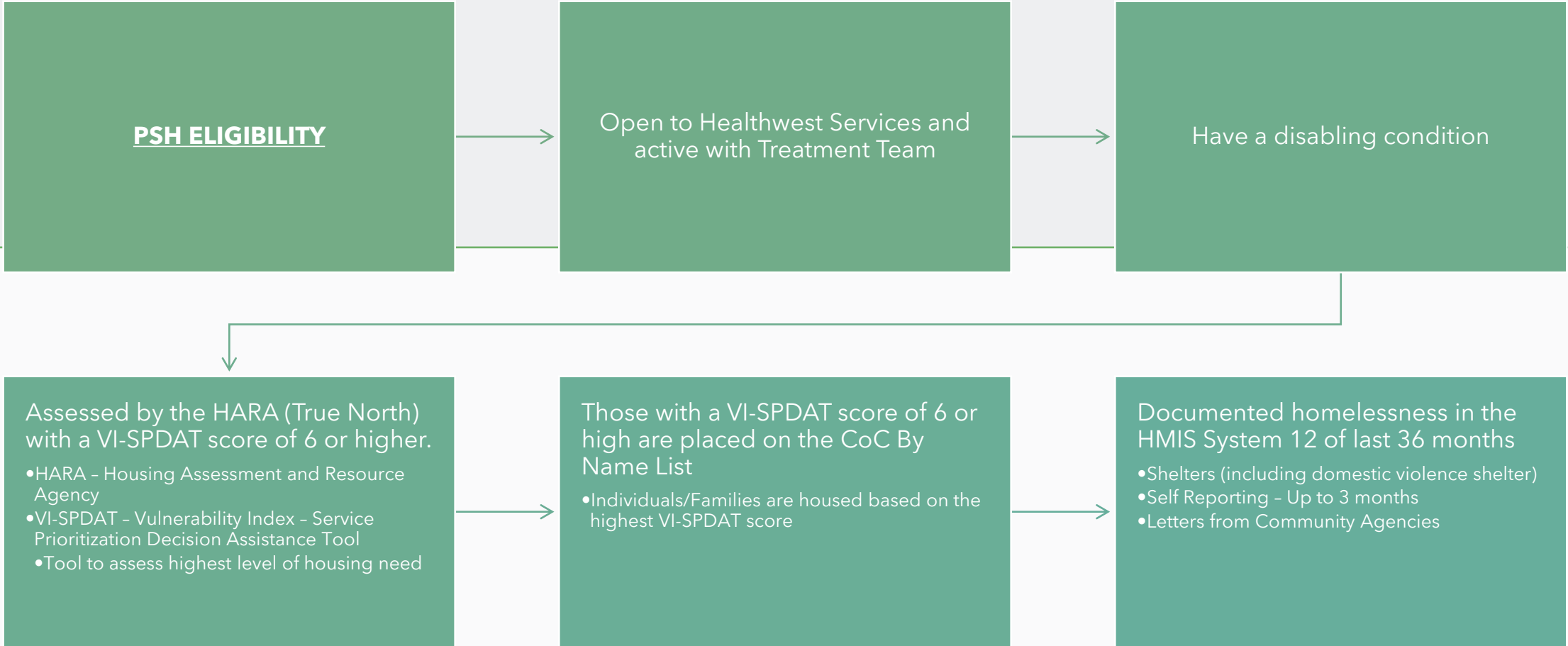
**Healthwest manages 5 PSH grants totaling: \$294,900.00**

Housing 29 individuals and 2 Families



**Healthwest also received the Home ARP grant for Housing Navigation in the amount of \$45,000.00 a year for 2 years**

This grant services any member of the community in need of assistance with finding housing including utilizing Housing vouchers (section 8).



# Once in a PSH program:

## 01

Goals are entered in the Treatment plan with focus on:

- Obtaining income
- Focus on mental and physical health
- Linking to other agencies for needs
- Following through with monthly HUD visits
  - These ensure the individual has the ability to live independently

## 02

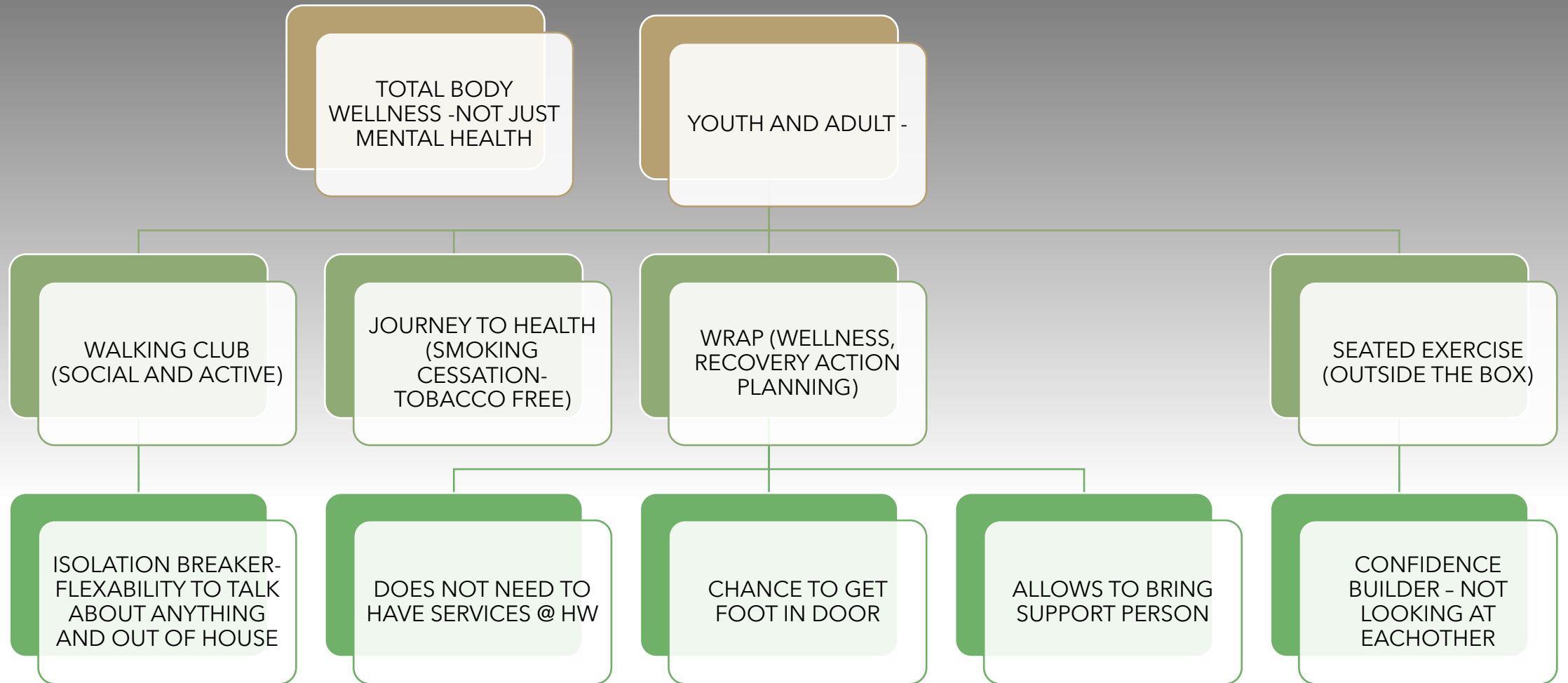
There is no time limit for residing in a PSH program as long as they stay active with treatment and follow all the HUD rules.

## 03

Healthwest follows the Housing First Model - Prioritizes access to permanent, stable housing, linked with services as needed.



# GROUPS



The background features a repeating pattern of stylized thought bubbles in shades of grey and teal. Each bubble contains a black question mark. In the center, a larger bubble contains a blue line-art illustration of a lit lightbulb with radiating lines. The entire scene is overlaid with a faint green grid and decorative curved lines at the top and bottom.

THOUGHTS?



## **HealthWest Employee Recognition / Feedback from Consumers:**

### **An email came through for Leadership on February 26th**

*I was wondering who I can connect with at HealthWest to let them know how much I appreciate Carrie Crummett. She has been partnering with me to find a temporary placement for one of our youth struggling with her mental health. This young lady was in the Lotus program at Pine Rest but because she had reached her 180 days in the program, she was discharged on Friday. We did not have anywhere for this youth to go so I reached out to Carre for assistance, and she did not hesitate to try and help. I really appreciated that and wanted to pass on how that partnership was really refreshing. Thanks!*

**Keep up the GREAT work Carrie Crummett!!!!!!**

### **An email came through for Customer Service on March 12<sup>th</sup>**

*I watched the TV 8 Grand Rapids report about your employees being directed to assist, along with police officers, to certain 911 calls. I am very grateful for this proactive program to have been developed and put into action. Thank you to all the individuals that put in efforts to make this happen. I hope and pray that the program is successful. I am wondering if you are the only city in Michigan structuring a response team this way. I hope you track call results to collect information that proves this is an effective approach to applicable situations. If there are positive results with this approach it is imperative that it is transferred to other communities.*

**Keep up the GREAT work Heather Wiegand & Corrections Team!!!!!!**

### **An email came through for Customer Service on March 13<sup>th</sup>**

*"I am currently sitting in my garage while Pacia Savage does therapy work for my youngest. It has been mentally exhausting the past 3 weeks. Seeing Pacia pull into the driveway made me want to cry because she is a reminder that we can get through this time and not alone. The best way to explain how I feel seeing her today is like an angel flying down from heaven. Pacia is our angel God sent us to my family at least".*

*"Andrea Rinehart (Wraparound Coordinator) is here to work with my son, but she is also here for us as a family means so much".*

**Great Job Andrea & Pacia!! Keep up the great work!!!!**

## **Customer Service received a phone call on March 18<sup>th</sup>**

*This caller shared that she was thankful for Cassandra Gansen's integrity, precision, and honesty while giving testimony. The caller felt that Cassandra professionally represented HealthWest.*

**Great Job Cassandra, Keep up the great work!!**

## **Customer Service received a phone call on March 19<sup>th</sup>**

*Customer Service received a call today from a parent who specifically named Jillian Eppard who is a Parent Support Partner in the Montague Schools. "I am thankful for Jillian's support".*

**Jillian, keep up the great work! Thank you for all you do!!!!**





## Board of Directors

### HW Board Work Session:

We have decided to postpone the Board Work Session to a later date. Our CARF visit has been scheduled for May 15<sup>th</sup> – 17<sup>th</sup> and we feel this takes priority at this time, along with the current financial audit. Holly will review possible dates for June / July and present a new survey for your availability.

#### **Educational Opportunities:**

- Community Leadership Big Picture
- CCBHC Updates
- Rate of Units & Service Codes from Pilot
- Growth of DCO Services / Old Baselines
- Changes to MichiCANS
- SUD Update & How Funding Works
- Club House – Member Driven
- Other Areas of Interest



## MEMORANDUM

Date: March 22,2024

To: HealthWest Board of Directors

CC: Mark Eisenbarth, Muskegon County Administrator  
 Matt Farrar, Muskegon County Deputy Administrator  
 Angie Gasiewski, Muskegon County Finance Director

From: Rich Francisco, Executive Director

Subject: **Director's Update**

### MDHHS Updates:

- Michigan MichiCANS soft launch update with MDHHS. Had our “touchbase” meeting with MDHHS implementors of MichiCans Monday 3/18. There are only two weeks left of the pilot testing. Staff will be ready to complete the various trainings as part of the implementation time from MDHHS. They have divided all training participants into 3 major cohorts for the entire state. There are about 5000 identified to complete the training, and certification by Oct. 1, 2024. We are part of Cohort 3, and our training will be in following months:
  - **MichiCANS Certification Training** - August and September
  - **Action Planning Training** - November and December
  - **Supervisor Training** - November and December
  - **Leadership Training** – August
- We have received from Stacia, the LRE CFO, an update on the meeting with MDHHS and actuary (Thursday, 3/21). There seems to be a consensus, that the general rates increase overall is going to be right around 6.28%. However, this can vary by population from April to September. Stacia is calculating the amounts based on information provided by Milliman and will share with CMHSPs as soon as that is completed. This increase hopes to address revenue drops we have been seeing related to PHE ending and revenue dropping.
- Last month, I gave an update on CFAP but recent developments at the state level suggest that this is not resolved yet. I stated that those that are CCBHC demonstrations are exempt from Conflict Free requirements. We are hearing that this may only apply to those services that are CCBHC services and does not apply to the other non-CCBHC services. CMHA along with other partners have drafted a summary of concerns related to the MDHHS-proposed Conflict Free access and Planning approach. Some points the group is bringing up are that consumer choice must be preserved, and how can this happen in CFA (Conflict Free Access recommendation) along with Self Determination and right to choose providers. The right to choose case managers and coordinators, right to independent facilitation, the right to use CMHSP Recipient Rights system.

### Lakeshore Regional Entity updates:

- I shared during Finance Committee that LRE and CMHSPs are holding meetings and continue to go over the LRE/CMHSP contract. The date this will be finalized will be in August or just in time for the next fiscal year. The LRE will continue to extend the contract until the LRE/CMHSP contract is final, which is going all the way to August in time for September board approval.
- Update on N180 request for more funds went from 25M to 19M and now down to 17M per the most recent meeting at LRE Ops meeting 03/20. Per Bill this is worst case scenario, root causes – redetermination revenue drops, about 9 million, increased cost from autism to 7M, individuals coming back to services previously opted out of Medicaid about 3M. Other considerations they have are onboarding 3 DCOs about 1.8M. This includes Pine Rest, Family Outreach Center, Arbor Circle--Currently being paid from capitation right now until CCBHC is running well. N180 shared strategies to address the shortfall. Now that April – September rates will have added revenue, this may change the bottom-line amount N180 is asking for. N180 has strategies to address the remaining shortfall and hopefully will not need to tap into the ISF and reserves.

### Executive Director activities CMH level:

- CARF dates have been received, and ours is scheduled for May 15 to 17<sup>th</sup>. This will be a busy time for Staff. Our Quality Improvement team is taking lead and communicating and coordinating the activities related to this audit.
- We have received most SWOTs (Strength, Weakness, Opportunities and Threats) analysis from the teams at HW. Our communications team is aggregating the results to identify elements that we can incorporate as updates into the current strategic plan. HW will still hold a Strategic planning session and invite the board of directors, and other stakeholders in the fall for our strategic plan for FY2026.
- KATA and lean improvement updates:
  - 75 HealthWest staff completed the training, 2 LRE staff, 1 County staff 12 scheduled for March 21<sup>st</sup>.
  - **DEI (1) , Finance (2), Outpatient started a new one, Quality Assurance – 2 ongoing and 2 in planning stage, UM (1)---- Total 9 KATA projects going on right now.**
  - 2 teams that have completed a KATA are Autism and Outpatient Services.

### On the horizon:

- Annual Needs submission Due March 31, 2024 (Thanks to Pam and her team for completing this report). This report will be presented to the board in April.
- Utilization Management Committee: Work on committee structure, data reporting and review of data to improve practices. The focus is to expand outside of Utilization review but look at other metrics and outcome that impact clinical operations.