

HEALTHWEST

FULL BOARD MINUTES

October 24, 2025

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, Cheryl Natte, Janice Hilleary, Jeff Fortenbacher, John Weerstra, Kim Cyr, Remington Sprague, M.D., Tamara Madison, Thomas Hardy

Members Absent: Charles Nash, Chris McGuigan, Mary Vazquez

Others Present: Rich Francisco, Holly Brink, Gina Maniaci, Brandy Carlson, Christy LaDronks, Kristi Chittenden, Carly Hysell, Gordon Peterman, Amber Berndt, Jennifer Hoeker, Melina Barrett, Jackie Farrar, Kelly Betts, Helen Dobb, Shannon Morgan, Devan Peterson, Linda Anthony, Brandon Baskin, Kara Jaekel, Gina Kim, Casey Olson, Linda Wagner, Brittani Duff, Pam Kimble, Suzanne Beckeman, Stephanie VanDerKooi, Madison Rosel, Mary McGhee, Stephanie Segar

Guests Present: Matt Farrar, Sara Hough

MINUTES

HWB 10-B - It was moved by Mr. Hardy, seconded by Dr. Sprague, to approve the minutes of the September 19, 2025 Full Board meeting as written.

MOTION CARRIED

COMMITTEE REPORTS

Program Personnel Committee

HWB 1-P - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the August 8, 2025, meeting as written

MOTION CARRIED

Recipient Rights Committee

HWB 2-R - It was moved by Ms. Natte, seconded by Ms. Hilleary, to approve the minutes of the August 8, 2025 meeting as written.

MOTION CARRIED

HWB 3-R - It was moved by Ms. Thomas, seconded by Ms. Natte, to approve the Recipient Rights Reports or August 2025 / September 2025.

MOTION CARRIED

HWB 4-R - It was moved by Ms. Natte, seconded by Ms. Thomas, to approve the HealthWest Recipient Rights Recommended Budget in the amount of \$353,032.

MOTION CARRIED

Finance Committee

HWB 5-F - It was moved by Ms. Thomas, seconded by Mr. Hardy, to approve the minutes of the September 12, 2025, meeting as written

MOTION CARRIED

HWB 6-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve expenditures for the month of August 2025, in the total amount of \$11,798,574.65.

MOTION CARRIED

HWB 7-F - It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize the HealthWest Executive Director to sign a contract with BH JC Grand Rapids, LLC dba Southridge Behavioral Health Hospital effective October 1, 2025, through September 30, 2027, to provide Adult Inpatient Services to eligible HealthWest consumers. The funding is within the HealthWest Community Inpatient Budget of \$7,000,000.00

MOTION CARRIED

HWB 8-F - It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve HealthWest to contract with Rehmann LLC, 675 Robinson Road, Jackson for consulting services for FY2026.

MOTION CARRIED

HWB 9-F - It was moved by Dr. Sprague, seconded by Mr. Hardy, to approve HealthWest to enter into a sole-source agreement with Clinical Notes AI, Inc. dba Clinically AI at an estimated cost of \$171,305 for year 1 and estimated \$213,305 for year 2 and authorize the HealthWest Director to sign the two-year agreement.

MOTION CARRIED

ITEMS FOR CONSIDERATION

HWB 11-B – It was moved by Mr. Hardy, seconded by Ms. Hilleary, to authorize the HealthWest Executive Director to approve the above landlords for the HUD grant funding for Fiscal Year 2026, at a cost not to exceed the final HUD grant awarded dollars of \$341,873.33 and approve departmental signatures of the MSHDAA Agreement.

MOTION CARRIED

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

Mr. Hardy provided an update on the Consumer Advisory Council. Kelly Betts provided positive feedback and employee kudos.

DIRECTOR'S COMMENTS

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

MDHHS Updates:

- **PIHP Procurement:** No update since I present to the Finance Committee on the order and opinion from Judge Yates summarized again below:

Conclusion and Order

- The court granted summary disposition to the state on the authority to change the procurement system and reduce the number of regions.
- However, summary disposition was denied to both sides regarding the legality of the specific RFP terms, as further review is needed to determine if CMHSPs' statutory obligations are impaired.
- The order is not final; additional claims (especially regarding CMHSPs' ability to operate under the new system) remain unresolved.

In essence:

The state can change how it procures Medicaid mental health services and reduce the number of regions, but the details of the new RFP may still violate Michigan law if they undermine the statutory role of CMHSPs. The court will address those concerns in future proceedings. [20251014 O...and Order]

We are all still waiting on where this lands as it remains unresolved. In addition, I also want to share that 5 other CMHSPs have filed a lawsuit with MDHHS on the same day that the hearing above was held 10/9/2025. The new lawsuit is a little different in that it is more from the perspective of the CMHSP and the Mental Health code.

• CCBHC direct payment:

- MDHHS finally released their final opinion on the Grievance and Appeals process and guidance they are recommending as it relates to the CCBHC services. One consideration I am running past the LRE is if CMHSPs can still contract with the LRE for State Fair hearings as they are already equipped and have the expertise to deal with State fair hearings. Nothing in the documentation that I have read from MDHHS suggests that we cannot do this. I have a question out to CEOs and Mary Dumas to see if this is something we can pursue.
- Internally, we have submitted test encounter files for CCBHC services via Champs. Thanks to HW staff, specifically to Linda Anthony, Director of Health Information and Sheila Hurtubise from Finance for resolving and following up on

the errors during the testing phase. HW will monitor the payments/claims as we submit them and monitor them to ensure that we are getting paid close to what we would normally receive in a year for CCBHC payments.

- There are still data issues being figured out to separate out data for CCBHC services in reporting. Lone Myers – LRE CIO presented at the QI ROAT stating that she was at statewide meeting with MDHHS staff and stated that there seems to be a general consensus on the complexity of the data system in terms of separating out CCBHC data reporting. Our systems have run so efficiently over the years that separating them out now will pose issues around BH TEDS and other data points. Jeff Chang – PCE CEO recommendation during the meeting was that they keep one pipeline for data submission so that Episode of Care and the history of consumer data is not disrupted and continuous. MDHHS has yet to respond and see if this would be permissible.

LRE Level Updates:

- LRE at the LRE Executive board meeting presented the results of their Strategic Plan. The LRE improved in almost all areas of their measures. They have done a really great job on their strategic plan goals and objectives.
- HSAG final report was also shared, and the region performed extremely well this go around. HSAG is not an easy audit to do well on. The region scored a total of 92% overall in all the standards measured. There are still a few areas that HSAG would like the LRE to fix via a plan of correction. Overall, this was great for the LRE compared to previous audits.

CMH Level Updates:

- HW continues to work on implementing the new framework for customer services we are calling the HealthWest Way. This involves holding regular meetings with staff supervisors to continue the discussion surrounding how we can improve our focus on the customer and clients. The executive team will continue to meet with supervisors on a regular basis. The executive team will also continue to have “Hot seat” lunches with staff to offer up an opportunity to ask questions. The goal is to ensure that leadership at HW continues to have transparency and foster effective communication throughout the agency.
- HW has also created a newsletter just for supervisor level up to communicate changes more effectively, events and offering strategies to be better leaders. This effort coincides with the goal of improving communication agency wide, and also offering up strategies to become better leaders in the agency.
- HW continues to keep an eye on the changes coming from MDHHS as it relates to government shutdown and communicating that to staff right away. One example we heard on 10/23/2025 is that MDHHS received notice from USDA Food and Nutrition Service (FNS) regarding impacts to Food Assistance programs (FAP) due to the shutdown. MDHHS was informed by FNS that there may not be sufficient funding to support November FAP benefits nationwide. So MDHHS has issued a temporary pause for November FAP/SNAP benefits until further notice.
- I attended the NACBHDD (National Association of Behavioral Directors and Developmental Disability Directors) Legislative conference this past week. We heard from leaders from various agencies pushing for Behavioral Health agendas. NAMI (National Alliance on Mental Illness), NACO (National Association of Counties), APA and NASDDDS (National Association of State Directors of DD Services). Dan Gillison - NAMI,

Matt Chase (NACO), Mary Powers – NASDDDS and Dr. Arhtur Evans from APA (American Psychological Association).

- Key points from the roundtable discussion were how they see the current landscape unfolding and what priorities they see having. Some of the points brought up are how do we make resources go further, how do we rethink the workforce shortages, and what will their organizations look like if HR 1 (BBB) proceeds with huge cuts to Medicaid.
- I also heard from Congressman Don Beyer and Congresswoman Salinas who shared their work in bipartisan efforts to continue fighting to maintain Medicaid services.

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:24 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**
October 24, 2025
376 E. Apple Ave., Muskegon, MI 49442
<https://healthwest.zoom.us/j/92330401570?pwd=TFNHWWhnQmF5NVAybWRQVG54Tk1GZz09>
One tap mobile: (309)205-3325, 92330401570# Passcode: 428623

AGENDA

1)	Call to Order	Action
2)	Approval of Agenda	Action
3)	Approval of Minutes A) Approval of the Full Board Minutes of September 19, 2025 (Attachment #1 – pg. 1-5)	Action
4)	Public Comment (on an agenda item)	
5)	Committee Reports A) Program Personnel Committee (Attachment #2 – pg. 6-9) B) Recipient Rights Committee (Attachment #3 – pg. 10-12) C) Finance Committee (Attachment #4 – pg. 13-16)	Action
6)	Items for Consideration A) Approval of Payments to HUD Programs (Attachment #5 pg. 17)	Action
7)	Old Business	
8)	New Business	
9)	Communication A) Consumer Advisory Update: Kelly Betts B) Employee Kudos: Kelly Betts (Attachment #6 pg. 18-19) C) November Meeting Notice (Attachment #7 – pg. 20) D) Director's Report (Attachment #8 – pg. 21-22)	Information
10)	Public Comment	Information
11)	Adjournment	Action

HEALTHWEST
FULL BOARD MINUTES

September 19, 2025

8:00 a.m.

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

CALL TO ORDER

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

ROLL CALL

Members Present: Janet Thomas, Charles Nash, Cheryl Natte, Chris McGuigan, Janice Hilleary, Jeff Fortenbacher, Kim Cyr, Tamara Madison, Thomas Hardy

Members Absent: John M. Weerstra, Mary Vazquez, Remington Sprague, M.D.

Others Present: Rich Francisco, Holly Brink, Gina Maniaci, Brandy Carlson, Kristi Chittenden, Carly Hysell, Gordon Peterman, Amber Berndt, Gary Ridley, Jennifer Hoeker, Ann Gatt, Melina Barrett, Jackie Farrar, Kelly Betts, Helen Dobb, Shannon Morgan, Mickey Wallace, Kim Davis, Anissa Goodno

Guests Present: Angela Gasiewski

MINUTES

HWB 121-B - It was moved by Mr. Hardy, seconded by Ms. Hilleary, to approve the minutes of the August 22, 2025 Full Board meeting as written.

MOTION CARRIED

COMMITTEE REPORTS

Finance Committee

HWB 112-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve the minutes of the August 15, 2025, meeting as written

MOTION CARRIED

HWB 113-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve expenditures for the month of July 2025, in the total amount of \$8,327,423.44.

MOTION CARRIED

HWB 114 -F -It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve acceptance of the attached grants and the requirements within, for a total of \$5,338,045 for Fiscal Year 2026.

MOTION CARRIED

HWB 115-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the HealthWest Board of Directors to approve the FY25 contracted Vendors / Providers listed under the five funding sources. The total budget for the five funding services is \$50,852,923 effective September 19, 2025, through September 30, 2025.

MOTION CARRIED

HWB 116-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve the HealthWest Board of Directors to approve the FY26 budget for the contracted Vendors / Providers listed under the five funding sources effective October 1, 2025, through September 30, 2027.

MOTION CARRIED

HWB 117-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the HealthWest FY2026 Recommended Budget in the amount of \$114,363,368 for both revenues and expenditures.

MOTION CARRIED

HWB 118-F - It was moved by Ms. Thomas, seconded by Mr. Hardy, to approve the HealthWest FY2025 Projected budget in the amount of \$110,832,720 for both revenues and expenditures.

MOTION CARRIED

HWB 119-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the HealthWest Executive Director to sign a contract between Michigan Department of Health and Human Services and HealthWest for Managed Mental Health Supports and Services for the period of October 1, 2025 through September 30, 2026

MOTION CARRIED

HWB 120-F - It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the HealthWest Board of Directors to approve the Vendors listed on Attachment A and further authorize the payment of contracts.

MOTION CARRIED

ITEMS FOR CONSIDERATION

There was no items for consideration.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

There was no communication.

DIRECTOR'S COMMENTS

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

MDHHS Updates:

- PIHP Procurement: MDHHS released the FAQs on the RFP. There were over 365 questions but based on preliminary review, there were still very unclear answers. The application due date has now been pushed back to 10/13/2025. The 3 PIHPs and 3 CMHSP have not received official responses for those who have filed a lawsuit against MDHHS, and the RFP bid out. However, there is an LRE update to this covered in section: 4. LRE Executive Committee below.
 - The CMH CEOs in the region did have a meeting Tuesday 9/16 with Rehmann who is proposing a public/private partnership where Rehmann does the MCO function in contract with the newly formed Regional Entity. They are soliciting at least 2 CMHSPs from each region in the central region to start but only require minimum of two CMHSPs to form the Regional Entity. Allegan has expressed interest in potentially getting board approval to join Rehmann. There is just not enough time for HW to do this because the RFP application is due on 10/13. The County board is going to be October 21st, 2025 which does not give enough time to get resolutions in place to join.
 - Two of our partners in the region are also talking with Carelon (formerly Beacon Health Options bought out by Anthem) and looking at another option to have a private/public partnership model.
 - Midstate: Another strategy is also to create a regional entity that may only bid on a section or part of a region. There is question also if this would meet the parameters of the RFP. According to Midstate, if MDHHS does not accept it, they will file a lawsuit.
 - Region 10 is also another region considering a proposal to make a bid.
- Contracts and Finance Issues (CFI) Committee: I volunteered to be on this committee, and attended my first meeting with all other CMHSP members with CMHA. This is the platform where the contract elements with PIHP and MDHHS is discussed and pushed for negotiation. The meeting updates include discussion regarding MDHHS Procurement of PIHP and differences between the House budget and Senate expectations.

LRE Level Updates:

- LRE shared their combined Financial Status reports this past week, Monday, and it is now showing that one of our partners will have an additional 4M deficit.
- LRE Executive Committee updates:
 - MDHS FY22 Cost settlement update. The LRE is still in the 21 days hold position of MDHHS not collecting/withholding payments. LRE counsel is open to questions if MDHHS would like clarification.
 - Treasury Department update: Provider Tax and the incorrect tax the DTMB was told by MDHHS to collect which amounted to additional 915k by using the FY23 rates and not FY24 previous rate. MDHHS stated they would adjust the PIHP rates to make the PIHP whole and pay via the rates. LRE will have to review payments to ensure that the amount is 915k or close to it. The issue is that revenue for PIHP does not come in one payment but monthly, so we do not know if MDHHS will cover the full 915k payment by the end of the year.
 - 4 PIHP lawsuit for FY2025 contract – no updates and still waiting on a ruling. The 2/3 elements for not signing were CCBHC language that was added (has now been removed) from the contract, the Waskul case which has been settled, and the other is the amount 7.5% cap to ISF (which may be a moot point because LRE has not come close to the cap because it constantly runs a deficit regionally.)
 - PIHP Procurement – 3 PIHP/3 CMHSP lawsuit for preliminary injunction against the RFP. MDHHS had 10 days to respond and according to the LRE, Taft did contact the various PIHPs to see if they are willing to continue providing services after 10/1/2026. This being the reason the state is using it to try and stop the injunction. The LRE stated that PIHPs have done the work and still remain and are willing to do the work amidst the RFP release and so agreed to continue the work to provide services.
 - From the LRE and the LRE Executive Committee, it does not make any sense for region 3 (LRE) to prepare to make a bid because it would not qualify based on the criteria of the RFP.
 - FY2026 contract MDHHS/PIHP – the question of which PIHP is signing and who is not signing came up. LRE is still considering whether to sign FY2026 contract because two of the three reasons that LRE altered the language of the contract and signed have now been addressed. One was CCBHC language which has now been removed. The second was the Waskul case which is now settled. Lastly, the ISF 7.5% cap to the fund. The LRE has been running a deficit for the last couple of years and has not even been close to saving 7.5% for the ISF and so is not reason enough to not sign the new contract.

CMH Level Updates:

- CCBHC Direct payment – HW continues to work on this change in payment system for CCBHCs. HW is preparing and ensuring we have all our processes ready to respond to the changes that MDHHS would like to have in place.

- HW completed the fourth general session this week on the HealthWest Way Customer Services Training. The last group will be next week. The next step, after training completion, is for the leadership team to develop the Customer Experience Team and work on the implementation plan, communication plan, and to ensure that we communicate the importance of this training for the entire agency. The goal is to incorporate the values and customer services code of conduct into our current culture.
- Various IT and Clinical staff are currently evaluating AI or Artificial Intelligence solutions. The need for clinical documentation and timely clinical documentation completion has increased and we are looking for ways to make this process more efficient and save time. Other behavioral health organizations have used AI for documentation, resulting in notable improvements and time savings in clinical documentation.

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:27 a.m.

Respectfully,

Janet Thomas
Board Chair
/hb

**PRELIMINARY MINUTES
To be approved at the Full Board Meeting on
October 24, 2025**

HEALTHWEST

PROGRAM AND PERSONNEL COMMITTEE REPORT TO THE BOARD

via Cheryl Natte, Committee Chair

1. The Program Personnel Committee met on October 10, 2025.
- * 2. It was recommended, and I move, to approve the minutes of the August 8, 2025, meeting as written.

/hb

HEALTHWEST

PROGRAM/PERSONNEL MEETING MINUTES

October 10, 2025
8:00 a.m.

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

CALL TO ORDER

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

ROLL CALL

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

Members Absent: Mary Vazquez

Staff Present: Rich Francisco, Holly Brink, Gina Maniaci, Christy LaDronka, Kristi Chittenden, Linda Wagoner, Carly Hysell, Melina Barrett, Tasha Kuklewski, Amber Berndt, Suzanne Beckeman, Kim Davis, Kara Zielinski, Gordon Peterman, Devan Peterson, Shannon Morgan, Jennifer Hoeker

Guests Present: Sara Hough

MINUTES

It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve the minutes of the August 8, 2025 meeting as written.

MOTION CARRIED.

PUBLIC COMMENT (ON AN AGENDA ITEM)

There was no public comment.

ITEMS FOR CONSIDERATION

There was no items for consideration.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

There was no communication.

DIRECTOR'S COMMENTS

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

- **PIHP Procurement:**

On 10/9/2025, Judge Yates with the Court of Claims in Grand Rapids presided over the hearing with MDHHS vs. the PIHPs and CMHSPs who filed a lawsuit against the RFP released by MDHHS in February of this year. After presenting their cases and cross-examining witnesses, Judge Yates will offer an opinion by next Tuesday. I will keep the board informed of the results at the upcoming full board meeting. The link to the hearing is found here: <https://www.youtube.com/watch?v=XFNYkDDY2Bc>

- **HealthWest Training:**

HealthWest has completed the HealthWest Way training, with over 400 staff trained over a two-month period to implement a customer-centric framework for service. The Leadership Team assisted with various components of the training, including participating themselves. The primary goal of the customer service training is to revisit the foundational reason for HealthWest's existence. The pandemic caused a drift away from our purpose, and HW needs to reset by defining the "why." This training aims to craft the HealthWest Story, clarify what it means to be customer-centric, develop codes of conduct for excellent service, and create an implementation plan to ensure that a customer-centric philosophy (rooted in the Golden Rule) guides how we treat both clients and each other. Staff provided input through the storyboard process, identifying barriers to customer-centric service that leadership will prioritize and address. Key barriers identified include:

- Effective communication across the board, including from leadership, supervisors, and between teams (e.g., changes are not communicated well before implementation).
- Clear expectations of roles and responsibilities.
- Accountability, not just for leadership but for everyone at the agency.
- More supervisor and management training.

The Leadership Team's next steps include conducting ongoing "Brain Trust" sessions with supervisors to gather input on agency issues. A Customer Experience Team (CET) will be created to address issues identified during the HealthWest Way training. Additionally, the executive team will continue regular "Hot Seat" Q&A sessions with staff.

- **CCBHC Direct Payment:**

HW continues to work on administrative processes to address all issues related to CCBHC direct payment, including reporting data, encounter reporting for CCBHC services, and other processes that shift responsibility to the CMH, as the LRE will no longer be as involved in CCBHC oversight.

- **CSU Update:**

HealthWest will resume discussions with Trinity Health regarding the CSU. HW has

been working to secure legislative appropriations for capital improvement funds. Given the budget and cuts to MDHHS, there is a possibility this will not go through. A meeting is scheduled for Monday, 10/20/2025, to discuss potential alternative funding.

- **Urgent Care:**

HW has been running the pilot program for about three weeks and has served approximately 20 to 25 clients/patients. The Urgent Care is open Thursday & Friday from 8 a.m. to noon. We are still recruiting and have posted for additional staff to support UC.

- **Leadership Training:**

Leadership team members continue to participate in High Performance Leadership training through the Professional Development Academy. The executive team completed this training to improve leadership skills, including effective and positive communication and outcome reporting. The goal is to eventually extend this training to all supervisory staff and above, as the budget allows.

- **Board Membership:**

Mike Weesies has expressed interest in serving on the LRE board, replacing Linda Dunmore, who is retiring. I have met with him to review requirements, and he is willing to learn more.

- **KATA Projects:**

KATA is the tool we use to improve processes and outcomes, utilizing the Plan, Do, Check, Act steps. There are currently about 11 KATA projects running, and 11 have been completed. I want to highlight the CCBHC KATA project that started on 11/24 of last year. It was identified that we were heading into deficit territory for CCBHC services. The project aimed to reduce the deficit by 75%. The total deficit forecasted was about \$5.5M for CCBHC. With Linda Anthony as the KATA lead, the challenge and goal were achieved, bringing the total deficit down to about \$477K. This is a significant improvement in service delivery. Factors addressed included documentation practices and increasing daily visits to ensure steady service delivery. Kudos to HealthWest for achieving this goal!

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:19 a.m.

Respectfully,

Cheryl Natte
Program/Personnel Committee Chair

CN/hb

PRELIMINARY MINUTES

To be approved at the Program/Personnel Committee Meeting on December 5, 2025

HEALTHWEST

**RECIPIENT RIGHTS ADVISORY COMMITTEE
REPORT TO THE BOARD**

via Thomas Hardy, Committee Chair

1. The Recipient Rights Advisory Committee met on October 10, 2025
- * 2. It was recommended, and I move, to approve the minutes of the August 8, 2025 meeting as written.
- * 3. It was recommended, and I move, to approve the Recipient Rights Reports for August 2025 / September 2025.
- * 4. It was recommended, and I move, to approve the HealthWest Recipient Rights Recommended Budget in the amount of \$353,032.

/hb

HEALTHWEST

RECIPIENT RIGHTS ADVISORY COMMITTEE MEETING MINUTES

Friday, October 10, 2025
8:00 a.m.
376 E. Apple Ave., Muskegon, MI 49442

CALL TO ORDER

The regular meeting of the Recipient Rights Advisory Committee was called to order by Chair Hardy at 8:20 a.m.

ROLL CALL

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

Members Absent: Mary Vazquez

Staff Present: Rich Francisco, Holly Brink, Gina Maniaci, Christy LaDronka, Kristi Chittenden, Carly Hysell, Linda Wagoner, Melina Barrett, Tasha Kuklewski, Gordon Peterman, Jennifer Hoeker, Shannon Morgan, Kim Davis, Kara Zielinski, Devan Peterson, Suzanne Beckeman

Guests Present: Sara Hough

APPROVAL OF MINUTES

It was moved by Ms. Natte, seconded by Ms. Hilleary, to approve the minutes of the August 8, 2025 meeting as written.

MOTION CARRIED.

ITEMS FOR CONSIDERATION

A. Motion to Accept Recipient Rights Reports for August 2025 / September 2025

It was moved by Ms. Thomas, seconded by Ms. Natte to approve the Recipient Rights Reports for August 2025 / September 2025.

MOTION CARRIED.

For the months of August 2025 / September 2025, there were 98 HealthWest and 55 provider employees trained:

Rights Updates HealthWest	85
Rights Updates Provider	0
New Employee Training HealthWest/Contracted	11
New Employee Training Provider	55

For the months of August 2025 / September 2025 there were 682 incident reports and 23 rights allegations.

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

There were a total of 5 deaths reported in August 2025 / September 2025.

B. Motion to Accept FY2026 HealthWest Recipient Rights Recommended Budget

It was moved by Ms. Natte, seconded by Ms. Thomas to approve the HealthWest Recipient Rights Recommended Budget in the amount of \$353,032.

MOTION CARRIED.

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATIONS

Recipient Rights Officer, Linda Wagner, provided training on Policy 04-008 Family Planning, Policy 04-009 Restraint, Seclusion, and Physical Management, Policy 04-010 Services Suited to Condition, Dignity and Respect, and Policy 04-013 Treatment by Spiritual Means.

DIRECTOR'S COMMENTS

There was no Director's Comments.

AUDIENCE PARTICIPATION / PUBLIC COMMENT

There was no audience participation.

ADJOURNMENT

There being no further business to come before the committee, the meeting adjourned at 8:52 a.m.

Respectfully,

Thomas Hardy
HealthWest Rights Advisory Committee Chair

TH/hb

PRELIMINARY MINUTES
To be approved at the Rights Advisory Committee Meeting of
December 5, 2025

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

1. The Finance Committee met on October 17, 2025.
- * 2. It was recommended, and I move to approve to approve the minutes of the September 12, 2025 meeting as written.
- * 3. It was recommended, and I move to approve to approve expenditures for the month of August 2025, in the total amount of \$11,798,574.65.
- * 4. It was recommended, and I move to approve contract with Southridge Behavioral Health Hospital effective October 1, 2025, through September 30, 2027, to provide Adult Inpatient Services to eligible HealthWest consumers. The funding is within the HealthWest Community Inpatient Budget of \$7,000,000.00.
- *5. It was recommended, and I move to approve the Contract with Rehmann, LLC, 675 Robinson Road, Jackson for consulting services for FY2025.
- *6. It was recommended, and I move to approve HealthWest to enter into a sole-source agreement with Clinical Notes AI, Inc. dba Clinically AI at an estimated cost of \$171,305 for year 1 and estimated \$213,305 for year 2 and authorize the HealthWest Director to sign the two-year agreement.

/hb

HEALTHWEST

FINANCE COMMITTEE MEETING MINUTES

October 17, 2025
8:00 a.m.

CALL TO ORDER

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

ROLL CALL

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

Also Present: Rich Francisco, Holly Brink, Gina Manaici, Brandy Carlson, Kristi Chittenden, Amber Berndt, Shannon Morgan, Gary Ridley, Helen Dobb, Gina Kim, Gordon Peterman, Jason Bates, Linda Wagoner, Linda Anthony, Melina Barrett, Carly Hysell, Kim Davis, Chris Yeager, Mickey Wallace, Jen Hoeker, Casey Olson

Guests Present: Mark Eisenbarth

ITEMS FOR CONSIDERATION

A. Approval of Minutes

It was moved by Ms. Thomas, seconded by Mr. Hardy, to approve the minutes of the September 12, 2025, meeting as written.

MOTION CARRIED

B. Approval of Expenditures for August 2025

It was moved by Mr. Hardy, seconded by Ms. Thomas, to approve expenditures for the month of August 2025, in the total amount of \$11,798,574.65.

MOTION CARRIED

C. Monthly Report from the Chief Financial Officer

Ms. Carlson, Chief Financial Officer, presented the August report, noting an overall cash balance of \$5,467,170.10 as of August 31, 2025.

D. Approval to Contract with Southridge Behavioral Health Hospital

It was moved by Mr. Hardy, seconded by Dr. Sprague, to authorize the HealthWest Executive Director to sign a contract with BH JV Grand Rapids, LLC dba Southridge Behavioral Health Hospital effective October 1, 2025, through September 30, 2027, to provide Adult Inpatient Services to eligible HealthWest consumers. The funding is within the HealthWest Community Inpatient Budget of \$7,000,000.00.

MOTION CARRIED

E. Approval to Contract with Rehmann, LLC

It was moved by Mr. Hardy, seconded by Commissioner Nash, to approve HealthWest to contract with Rehmann LLC, 675 Robinson Road, Jackson for consulting services for FY2026.

MOTION CARRIED

F. Approval to Contract with Clinically AI

It was moved by Dr. Sprague, seconded by Mr. Hardy, to approve HealthWest to enter into a sole-source agreement with Clinical Notes AI, Inc. dba Clinically AI at an estimated cost of \$171,305 for year 1 and estimated \$213,305 for year 2 and authorize the HealthWest Director to sign the two-year agreement.

MOTION CARRIED

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATIONS

There was no communication.

DIRECTOR'S COMMENTS

Rich Francisco, Executive Director provided an update:

- **PIHP Procurement** – On 10/14, Judge Yates that presided over the hearing held on 10/9 between the PIHP/CMHSPs vs. MDHH/DTMB released an order and his conclusion on the case (25-000143-MB). I have attached a summary of the Opinion and Order.
 - **3 of our partners** – Allegan, West Michigan and N180 have passed resolutions to form regions.
- **FY26 Spending Plan** – at the Finance ROAT and at the Ops team the topic of discussion has been around the new budget revenue projections released by the LRE. The LRE used the Milliman Rate letter and updated the projections for the region. HW submitted our spending plan back in July and now it does not align with the new LRE projections. CMHs will have to review their spending plan and resubmit by Nov. 6 to the LRE in time for the LRE to complete their Risk Management Plan by Nov. 10.
- **Community Development and Strategic Planning Committee** – Brandy and I attended the committee, and I presented updates to our strategic plan for FY25 and also include plans for FY26. I shared a summary of achievements and accomplishments that met the following goals below for FY25:
 - **Improve Experience of Care and Health Outcomes**
 - a. **Expand data collection and real-time feedback to better identify and respond to community needs, ensuring timely, high-quality, and fiscally responsible care.**
 - **Ensure Long-Term Sustainability**
 - a. **Objective: Evaluate funding streams and program offerings to maintain consistent, adequate services and responsible fiscal planning.**

We received great feedback after the meeting from several people, and I want to thank and give a shoutout to HW staff as a whole, as these accomplishments are their doing from supervisors to directors and managers to the front line and support staff.

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the committee, the meeting adjourned at 8:35 a.m.

Respectfully,

Jeff Fortenbacher
Committee Chair

/hb

**PRELIMINARY MINUTES
To be approved at the Finance Meeting on
November 14, 2025**

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE	BUDGETED	NON BUDGETED	PARTIALLY BUDGETED
Full Board	X		
REQUESTING DIVISION	REQUEST DATE		REQUESTOR SIGNATURE
Finance	October 24, 2025		Carly Hysell, Director of Finance

SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)

HealthWest Board authorization is requested to approve payment to the following landlords for lease payments in the HUD programs, at a cost not to exceed the HUD grant dollars of \$341,873.33. Grant awards are as follows:

Program	Authorized	Disbursed	Available Balance	Grant Term
HUD I	\$202,226.00	\$0	\$202,226.00	OCT 25- SEP 26
HUD II	\$32,428.00	\$3,768.32	\$28,659.68	JUL 25- JUN 26
HUD III	\$40,951.00	\$2,763.00	\$38,188.00	SEP 25-AUG 26
HUD IV	\$41,443.00	\$3,333.00	\$38,110.00	SEP 25-AUG 26
HUD VETS	\$68,175.00	\$33,485.35	\$34,689.65	APR 25-MAR 26
Total	\$385,223.00	\$43,349.67	\$341,873.33	

The landlords are:

Abundant Life Homes, LLC	Lakeshore Real Property
Big Red Development, LLC	Leasehold Property Management
Blake Prince	Lighthouse Property Management
Blanchard Rentals	Lusk Properties
Blues Bay Capital	Matthew VanHolstyn
BVW Property Management, LLC	MDC Partnership
CC Vista, LLC	MDC Partnership
Cornerstone Real Estate Property Management	Meddie Ventures, LLC
Each one Reach one	MI Real Estate Management LLC
Ed Bodman	Michael Nethercott
Engel Group LLC/Real Property	Paul Kurek
Fine Apartments	Place Management, LLC
Fresh Start Property Management	RDH Management
Golden Hills Property Management	Red Snoot
HDRES Muskegon Port, LLC	Richard Mellema
Here 2 Serve Property	RW3 Investments, LLC
Ian Stack	Ryan King
Jaymark Properties	Sugar Maple Management, LLC
Joyce Kitchen	Trinity Investment Group, LLC
Keessen Properties	United Properties of West MI
Knapps Holler	Westshore Property Management
Kraai Property Management	

SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)

I move to authorize the HealthWest Executive Director to approve the above landlords for the HUD grant funding for Fiscal Year 2026, at a cost not to exceed the final HUD grant awarded dollars of \$341,873.33 and approve departmental signature of the MSHDDA Agreement.

COMMITTEE DATE	COMMITTEE APPROVAL
October 24, 2025	_____ Yes _____ No _____ Other
BOARD DATE	BOARD APPROVAL
October 24, 2025	_____ Yes _____ No _____ Other



HealthWest Employee Recognition / Feedback from Consumers:

FY2025 Regional Survey

- **HealthWest:** Has the best service, customer service and do what benefits its clients. I love the way they encourage independence and know when to help clients. I love HealthWest!
- **Chelse Ponder & Team:** Awesome. Professional and really concerned for me as a human being. A Lot of resources. I have never received such good care. They actually care about me. Thanks for all you do! Keep up the great work!
- **Dr. Jawor and Heather Bolema:** I have felt like I wanted to die but my case manager Heather and Dr. Jawor got me the help I needed. A change in my medication has helped tremendously. HealthWest saved my life a few years ago and I have been treated with respect, caring, helpful in maintaining a sense of wanting to try hard to keep living even when I'm sad.
- **Gloria, Clarissa, Jayne, Carly:** What has been the most helpful: Insight from Gloria Hammond, Clarissa, Jayne, Carly Campbell (and others). While helping me, they didn't make me feel odd or dumb. They clearly care for my son and finding the best for him, and helped me see opportunities than I might do better myself. Thank you! I can see "light" in the dark tunnel we've been traveling through. I do not expect that we're done; but I have been heard, I have learned tools and now I have hope. I know that I will still need reminders, encouragement and help. Thanks again.
- **Emily Russell:** is a good case worker.
- **Services of Hope:** Mandi is a great therapist, easy, pleasant to talk and open up too. I really enjoy my visits with her. Miss Angelita is an amazing lady and makes it to going knowing I'm getting the help I need from both of them.
- **Joanna Harrington & MOKA Services:** My daughter, is severely developmentally disabled. She will always need 24-hour care. I am thankful for case management with HealthWest, and services with MOKA I appreciate all the services that she receives.
- **Joanna Harrington & MOKA Services:** My son, is severely developmentally disabled. He will always need 24-hour care. I am thankful for the case management with HealthWest, and services with MOKA. I appreciate all the services that he receives.
- **Dr. Jawor & Shannon Woodwyk:** I am most grateful for the help provided by Dr Jawor and Shannon Woodwyk. My mental health problems are chronic, and I need psychiatric medicines to control my symptoms and not have manic attacks, which have gotten me evicted and arrested. It is especially comforting that Shannon managed my case with such diligence. We always talk monthly, and, for instance, in August I had to talk needing an intervention for an oncoming manic attack. Talking it out got me under control. Thanks be to God that I am connected to HealthWest and staff.

Customer Service Email 9/22/2025

The warmline spoke with a consumer that works with Rebecca Bolli. This consumer stated, "Rebecca is super busy and amazing."

Customer Service Call 9/26/2025

“I appreciate all the help that HealthWest does for me”. Shannon Woodwyk and Dr. Jawor are wonderful!

Customer Service Call 9/26/2025

Maddi Grunow is a great case worker. She keeps me informed. She is one of the best.

Customer Service Call 9/12/2025

“Our team is incredible” Carly, Gloria, Janay, Clarissa and Kevin.

Great Job Carly Campbell, Gloria Hammond, Janay Jones, Clarissa Cole and Kevin Schneider!
Keep up the great work!

Customer Service Call 9/12/2025

My team members have been very helpful! This individual named these team members as:
Laura, Jamie, and Kate.

Laura Case, Jamie Maurer & Kate Jackson thanks for all you do! Keep up the great work!

Customer Service Call 9/11/2025

“Our team is incredible” Carly, Gloria, Janay, Clarissa and Kevin.

Great Job Carly Campbell, Gloria Hammond, Janay Jones, Clarissa Cole and Kevin Schneider!
Keep up the great work!

Consumer Advisory Shoutout

Jerry Parker came up during our Consumer Advisory Committee. Multiple consumers said how happy they have been with the changes you have made at Clubhouse. They said the change there has been noticeable since you took over management.

Dee Greene - “she helped me get on the bus at Walk A Mile when she noticed I wasn’t doing well with the heat” “she let me use her personal phone so I could read my speech”.

Walk A Mile Rally

HUGE thank you to all of you – Dayton, Kimberly, Jennifer, Michelle, Sondra, Jake, Courtney, Dee, and Jerry! This event went well because of your help and teamwork. We had 9 staff members and 2 clubhouse staff members attended. There were 23 people on the coach bus, and one staff member drove a county vehicle just in case of an emergency. The clubhouse had a full van, and some staff joined us after a conference in Lansing. Altogether, with the clubhouse group, we had over 40 people representing HealthWest at the event! I’m so proud of how HealthWest showed up. It was truly a day where everyone pitched in. Thank you again for everything you do!



October 24, 2025

MEETING NOTICE NOVEMBER 2025

The HealthWest Board will meet in the following sessions during the month of November 2025. Please remember we must have a quorum in person for these meetings. If you participate remotely, your vote will not count. If you have any questions, please let me know.

Finance Committee

Friday, November 14, 2025

Full Board Meeting

Friday, November 21, 2025

The administrative office will contact you via email to remind you of these meetings.

The complete schedule of committee and board meetings for 2025 can be found online at <https://healthwest.net/about-us/healthwest-board-agendas-minutes/2023-board-of-directors-schedule/>

\hb

cc: HealthWest Board Members

Main Office

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HealthWest.net



MEMORANDUM

Date: 10/24/2025

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:

1. **PIHP Procurement:** No update since I present to the Finance Committee on the order and opinion from Judge Yates summarized again below:

Conclusion and Order

- The court granted summary disposition to the state on the authority to change the procurement system and reduce the number of regions.
- However, summary disposition was denied to both sides regarding the legality of the specific RFP terms, as further review is needed to determine if CMHSPs' statutory obligations are impaired.
- The order is not final; additional claims (especially regarding CMHSPs' ability to operate under the new system) remain unresolved.

In essence:

The state can change how it procures Medicaid mental health services and reduce the number of regions, but the details of the new RFP may still violate Michigan law if they undermine the statutory role of CMHSPs. The court will address those concerns in future proceedings. [\[20251014 O...and Order\]](#)

We are all still waiting on where this lands as it remains unresolved. In addition, I also want to share that 5 other CMHSPs have filed a lawsuit with MDHHS on the same day that the hearing above was held 10/9/2025. The new lawsuit is a little different in that it is more from the perspective of the CMHSP and the Mental Health code.

2. **CCBHC direct payment:**

- MDHHS finally released their final opinion on the Grievance and Appeals process and guidance they are recommending as it relates to the CCBHC services. One consideration I am running past the LRE is if CMHSPs can still contract with the LRE for State Fair hearings as they are already equipped and have the expertise to deal with State fair hearings. Nothing in the documentation that I have read from MDHHS suggests that we cannot do this. I have a question out to CEOs and Mary Dumas to see if this is something we can pursue.
- Internally, we have submitted test encounter files for CCBHC services via Champs. Thanks to HW staff, specifically to Linda Anthony, Director of Health Information and Sheila Hurtubise from Finance for resolving and following up on the errors during the testing phase. HW will

monitor the payments/claims as we submit them and monitor them to ensure that we are getting paid close to what we would normally receive in a year for CCBHC payments.

- There are still data issues being figured out to separate out data for CCBHC services in reporting. Ione Myers – LRE CIO presented at the QI ROAT stating that she was at statewide meeting with MDHHS staff and stated that there seems to be a general consensus on the complexity of the data system in terms of separating out CCBHC data reporting. Our systems have run so efficiently over the years that separating them out now will pose issues around BH TEDS and other data points. Jeff Chang – PCE CEO recommendation during the meeting was that they keep one pipeline for data submission so that Episode of Care and the history of consumer data is not disrupted and continuous. MDHHS has yet to respond and see if this would be permissible.

LRE Level Updates:

- LRE at the LRE Executive board meeting presented the results of their Strategic Plan. The LRE improved in almost all areas of their measures. They have done a really great job on their strategic plan goals and objectives.
- HSAG final report was also shared, and the region performed extremely well this go around. HSAG is not an easy audit to do well on. The region scored a total of 92% overall in all the standards measured. There are still a few areas that HSAG would like the LRE to fix via a plan of correction. Overall, this was great for the LRE compared to previous audits.

CMH Level Updates:

3. HW continues to work on implementing the new framework for customer services we are calling the HealthWest Way. This involves holding regular meetings with staff supervisors to continue the discussion surrounding how we can improve our focus on the customer and clients. The executive team will continue to meet with supervisors on a regular basis. The executive team will also continue to have “Hot seat” lunches with staff to offer up an opportunity to ask questions. The goal is to ensure that leadership at HW continues to have transparency and foster effective communication throughout the agency.
4. HW has also created a newsletter just for supervisor level up to communicate changes more effectively, events and offering strategies to be better leaders. This effort coincides with the goal of improving communication agency wide, and also offering up strategies to become better leaders in the agency.
5. HW continues to keep an eye on the changes coming from MDHHS as it relates to government shutdown and communicating that to staff right away. One example we heard on 10/23/2025 is that MDHHS received notice from USDA Food and Nutrition Service (FNS) regarding impacts to Food Assistance programs (FAP) due to the shutdown. MDHHS was informed by FNS that there may not be sufficient funding to support November FAP benefits nationwide. So MDHHS has issued a temporary pause for November FAP/SNAP benefits until further notice.
6. I attended the NACBHDD (National Association of Behavioral Directors and Developmental Disability Directors) Legislative conference this past week. We heard from leaders from various agencies pushing for Behavioral Health agendas. NAMI (National Alliance on Mental Illness), NACO (National Association of Counties), APA and NASDDDS (National Association of State Directors of DD Services). Dan Gillison - NAMI, Matt Chase (NACO), Mary Powers – NASDDDS and Dr. Arthur Evans from APA (American Psychological Association).
 - Key points from the roundtable discussion were how they see the current landscape unfolding and what priorities they see having. Some of the points brought up are how do we make resources go further, how do we rethink the workforce shortages, and what will their organizations look like if HR 1 (BBB) proceeds with huge cuts to Medicaid.
 - I also heard from Congressman Don Beyer and Congresswoman Salinas who shared their work in bipartisan efforts to continue fighting to maintain Medicaid services.