

HEALTHWEST
FULL BOARD MINUTES

July 31, 2026

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 8:00a.m.

ROLL CALL

Members Present: Janet Thomas, Cheryl Natte, Jeff Fortenbacher, Thomas Hardy, Michelle Hazekamp, Janice Hilleary, Tamara Madisson

Members Absent: Charles Nash, Chris McGuigan, John M. Weerstra, Mary Vazquez, Remington Sprague, M.D.

Others Present: Rich Francisco, Holly Brink, Gina Maniaci, Brandy Carlson, Kristi Chittenden, Jennifer Hoeker, Carly Hysell, Melina Barrett, Casey Olson, Linda Anthony, Lea Streblow, Gary Ridley, Amber Berndt, Jackie Farrar, Kim Davis, Gina Kim, Anissa Goodno, Susan Plotts, Helen Dobb, Chianti Brown, Natalie Walther

Guests Present: Matt Farrar

MINUTES

HWB 100-B - It was moved by Mr. Hardy, seconded by Mr. Fortenbacher, to approve the minutes of the June 26, 2026 Full Board meeting as written.

MOTION CARRIED

COMMITTEE REPORTS

Finance Committee

HWB 96-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve the Finance Committee meeting minutes from June 12, 2026, as written.

MOTION CARRIED

HWB 97-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra to approve expenditures for the month of June 2026, in the total amount of \$8,385,886.40.

MOTION CARRIED

HWB 98-F - It was moved by Mr. Hardy, seconded by Commissioner Hazekamp, to approve FY2026 HealthWest Fee Schedule, effective August 1, 2026, including a 2% rate increase for all services except H0018 – Crisis Residential Services, which will be adjusted to reflect the current cost of service delivery.

MOTION CARRIED

HWB 99-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to authorize the HealthWest Executive Director to sign a contract with the Center for Neuropsychology and Behavioral Health effective July 1, 2026 through September 30, 2027.

MOTION CARRIED

ITEMS FOR CONSIDERATION

HWB 101-B – It was moved by Ms. Natte, seconded by Mr. Hardy, to approve the elimination of Assisted Outpatient Treatment Coordinator, Position X02900, and layoff employee E93000188, effective September 30, 2026.

MOTION CARRIED

HWB 102-B – It was moved by Mr. Hardy, seconded by Ms. Hilleary, to approve the elimination of COFR Case Manager, Position X27600, and layoff employee E93033789, effective September 30, 2026.

MOTION CARRIED

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.

Director's Update

MDHHS Updates:

- The first CCBHC Listening Session was held on 07/28/2026 – Discussed next steps for CCBHC as the demonstration ends on 09/30/2027. MDHHS has set up these sessions to solicit feedback on potential policy changes post-demonstration. The first session focused primarily on QBP discussion.

Quality Bonus Payment Program

Purpose: Explore opportunities to modernize quality incentives.

Discussion Questions

- Do the current quality measures reflect meaningful performance?
- Should improvement over time be rewarded in addition to benchmarks?
- Are there populations or priorities that should receive additional incentives?
- How should quality bonus funds be distributed?

Opportunities and Considerations

- Measure Selection
- Performance Thresholds
- Redistribution Methodology
- Population-Specific Incentives

*Evaluation Criteria

- MDHHS is seeking input on the current QBP measure and asking the questions above.
- LRE has been ordered to appear in court on August 6th, regarding the FY22 cost settlement. Hopefully there will be resolution on this matter. This could mean the LRE owes \$13M back and as you recall, MDHHS has kept about \$4M in an escrow already.
- The 4 PIHP lawsuits are moving forward, and the court has ordered mediation. The PIHPs are still concerned about the 7.5% and Waskul-related concerns.
- A PIHP rebid RFP is expected in August according to the DTMB (Dept. of Technology, Management and Budget) but no further details have been released.

LRE Level Updates:

- LRE Board meeting occurred on 7/22/2026.
 - Discussion on the FSR and the regional projected deficit for the region. CSU was discussed – N180 mentioned that there was \$5M in the state budget. However, I asked a follow up question on whether the boilerplate language would allow existing CSU to have this money. The boilerplate did say it was to increase CSUs and in the conference notes it was written as an increase to the number of CSUs.
 - Continued discussion and there is a push to review the need based funding analysis. The LRE will investigate the cost of the analysis to review an alternative funding model to PM/PM – Per member/Per month capitation rate.
 - LRE/CMHSP FY27 Draft contract is being reviewed. I have submitted my concerns and feedback on changes and new language added in the contract. I proposed new language related to sanctions, delegation and reporting responsibility of the CMHSP to the LRE.

CMH Level:

- HealthWest continues with various projects:

- **Utilization Review:** HW Continues to review utilization and establish productivity measures for teams and programs. In addition, HW is reviewing our use of General Fund dollars which should be reserved for emergency and crisis type services. We are projected to spend more in GF than is allocated to us. Establishing key performance indicators achieves the following objectives:
 - Ensure individuals and families receive timely access to the services and support needed.
 - Maintain financial stability and protect resources needed for future operations.
 - Identify operational challenges and opportunities for improvement.
 - Support staff with the tools, processes, and resources needed to be successful.
 - Demonstrate accountability to our consumers, community, Board, and funding partners.
- **HR turnover rate:** Per HR report, the latest turnover rate, see below:
 - Overall Turnover is 16.2% and is trending downward from 17.75% at the beginning of the fiscal year.
 - We started with 69 MLC's at beginning of year and we now have 72
 - We hired 5 MLCs into permanent positions from internships.
 - We have had 26 promotions this fiscal year.
 - Our overall vacancy rate is 10%
- **Strategic Plan updates** – The strategic plan is at a stage where all the data and input from the initiative setting groups is compiled into one document in draft form. The single strategic initiative portfolio is currently being reviewed by the Executive team. The development of the plan is proceeding as scheduled.
- Preliminary QBP (Quality bonus payment) award – Good news! KUDOS to HW Staff for a great performance on the QBP measures. HW met 8/9 quality measures benchmark and in some cases exceeded them. This equates with HW receiving \$1,013,956.80 in base award. In addition, HW receives another \$383,997 redistribution amount on top of that with a total of \$1,397,953.
- **Pioneer Park – County picnic is going to be on September 19th.** HW is on the planning committee again to help plan. I was on it last year and Brandy is serving on it this year.
- **SDA (Same Day Access)** – Christy LaDronka and her team continue to work rolling out same day access with the goal of improving access, timeliness to service and enhance community responsiveness. This also aligns and is best practice for CCBHC (Certified Community Behavioral Health Clinic).

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

There being no further business to come before the board, the meeting adjourned at 8:22 a.m.

Respectfully,

Janet Thomas
Board Chair
/hb

PRELIMINARY MINUTES
To be approved at the Full Board Meeting on
August 28, 2026

HEALTHWEST
FULL BOARD MINUTES

June 26, 2026

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 8:01a.m.

ROLL CALL

Members Present: Janet Thomas, Cheryl Natte, Jeff Fortenbacher, Thomas Hardy, Michelle Hazekamp, Janice Hilleary, Tamara Madisson

Members Absent: Charles Nash, Chris McGuigan, John M. Weerstra, Mary Vazquez, Remington Sprague, M.D.

Others Present: Rich Francisco, Holly Brink, Gina Maniaci, Brandy Carlson, Christy LaDronka, Jennifer Hoeker, Carly Hysell, Melina Barrett, Casey Olson, Linda Anthony, Lea Streblow, Gary Ridley, Pam Kimble, Amber Berndt, Amber Picard, Jackie Farrar, Kim Davis, Calvin Davis, Gina Kim, Michelle Lyons, Anissa Goodno

Guests Present: Alan Bolter, Matt Farrar, Stephanie VanDerKooi

MINUTES

HWB 94-B - It was moved by Mr. Hardy, seconded by Mr. Fortenbacher, to approve the minutes of the May 29, 2026 Full Board meeting as written.

MOTION CARRIED

COMMITTEE REPORTS

Finance Committee

HWB 86-F - It was moved by Mr. Weerstra, seconded by Mr. Hardy, to approve the Finance Committee meeting minutes from May 15, 2026 as written.

MOTION CARRIED

HWB 87-F - It was moved by Mr. Hardy, seconded by Ms. Thomas to approve expenditures for the month of May 2026, in the total amount of \$5,857,280.48.

MOTION CARRIED

HWB 88-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to authorize HealthWest to enter into a sole-source agreement with Mend at an estimated cost of \$217,600 for year 1 and

estimated year 2 and 3 cost of \$196,100 and authorize the HealthWest Executive Director to sign the three-year agreement.

MOTION CARRIED

HWB 89-F - It was moved by Mr. Hardy, seconded by Mr. Weerstra, to authorize the HealthWest Board to contract with Peter Chang enterprises, Inc. (PCE), for implementation and maintenance of the Crisis Residential Unit module in the Electronic Health Records (EHR) services to HealthWest, for approximately one time fee of \$38,500 and annual maintenance of \$24,960.

MOTION CARRIED

HWB 90-F – It was moved by Mr. Hardy, second by Mr. Weerstra, to authorize the HealthWest Executive Director to sign a contract with Inspiring Loving Hope Homes LLC, effective June 27, 2026, through September 30, 2027, to provide specialized residential services to eligible HealthWest consumers. The funding is within the HealthWest AFC Specialized Residential Budget of \$24,900,000.00.

MOTION CARRIED

HWB 91-F – It was moved by Commissioner Hazekamp, seconded by Mr. Hardy, to authorize the HealthWest Executive Director to sign contract #DFA27-61001 with the State of Michigan Department of Health and Human Services for \$76,400.00. This contract will fund the Eligibility Specialist at the HealthWest building from October 1, 2026, through September 30, 2027.

MOTION CARRIED

HWB 92-F – It was moved by Mr. Hardy, seconded by Ms. Thomas, to authorize the HealthWest Executive Director to sign a contract with Doctor Jawor, D.O. with a total not to exceed \$288,600.00 effective June 29, 2026, through September 30, 2027.

MOTION CARRIED

HWB 93-F – It was moved by Mr. Hardy, seconded by Mr. Weerstra, to authorize the HealthWest Executive Director to sign a contract with Northern Behavioral Solutions, LLC effective June 1, 2026, through September 30, 2027, to provide Applied Behavioral Analysis Therapy to HealthWest consumers. The funding is within the approved HealthWest Autism Budget of \$2,908,811.00.

MOTION CARRIED

ITEMS FOR CONSIDERATION

HWB 95-B – It was moved by Mr. Hardy, seconded by Ms. Natte, to approve the 2026 Quality Assessment and Performance Improvement Plan, effective June 26, 2026.

MOTION CARRIED

OLD BUSINESS

There was no old business.

NEW BUSINESS

There was no new business.

COMMUNICATION

Alan Bolter, Chief Executive Officer for the CMHA, provided updates from Lansing.

DIRECTOR'S COMMENTS

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

Director's Update

MDHHS Updates:

- Leadership change at MDHHS. I forwarded the Governor's announcement, which we received from CMHA, stating that MDHHS Director Hertel will be moving on in her career and stepping down from the role as director. The Governor announced Amy Epkey will be the acting director for MDHHS effective July 1.
- RFP update: HW has not heard of any recent new RFP released by MDHHS.

LRE Level Updates:

- The June 22, 2026, LRE Executive Work Session and Board Meeting were cancelled. The next board meeting is scheduled for July 22, 2026.
- The LRE Ops group did meet on June 17th after the LRE Executive Committee meeting. The major topic of conversation with the LRE Ops group was a discussion on the current FSR (Financial Status Report) that was shared with the CEOs. There was a significant increase in the Ottawa deficit. For the month of April's report there was an increased deficit showing at ~2.58M for Ottawa. N180 was at ~4.6M in deficit. In looking at projections and comparing to spending plans submitted by the CMHSPs, the region will need to resubmit a new Risk Management strategy report to MDHHS due to the deficit now at 16.5M. The LRE board will have to make this decision.
- CSU discussion: The Ops group also discussed the ongoing funding of N180 CSU and that it is part of capitation. The big question surrounding this is how much funding is in the capitation for CSU operations. There were questions asked whether this was contributing to N180 deficit as well.

CMH Level:

- HealthWest continues with various projects:
 - **Utilization Review:** I provided an update last month that HW is reviewing closely the service utilization. We are projecting a surplus in the budget for year end. I have developed a workgroup to closely monitor underutilization in various programs. The goal is to understand what factors are causing the decline in services and how we can affect change. The communication team will be sharing information related to this effort

with staff. Internally we have started to look at various reports and dashboards from the different teams and programs, and the directors of these programs are collaborating with staff to address the barriers contributing to the decline in services.

- **Strategic Plan updates** – The strategic plan process is at the KPI (Key Performance Indicator) development stage at this point. Gary and his team have been collaborating with staff from Quality and Compliance to develop an integrated approach for the reporting of the data which will be key components for staff to know where the agency is at related to these KPIs.
- **Facilities discussion:** HW is continuing to review ways to consolidate programs in various locations. We are exploring expanding our footprint at NIMS because they have availability and we already have several teams in that building.
- **SDA (Same Day Access)** – Christy LaDronka and her team continue to work rolling out same day access with the goal of improving access, timeliness to service and enhance community responsiveness. This also aligns and is best practice for CCBHC (Certified Community Behavioral Health Clinic).

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

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

Respectfully,

Janet Thomas
Board Chair
/hb

**PRELIMINARY MINUTES
To be approved at the Full Board Meeting on
July 31, 2026**

HEALTHWEST

FINANCE COMMITTEE REPORT TO THE BOARD

via Jeff Fortenbacher, Committee Chair

1. The Finance Committee met on July 10, 2026.
- *2 It was recommended, and I move to approve the minutes of the June 12, 2026 meeting as written.
- *3. It was recommended, and I move to approve expenditures for the month of June 2026, in the total amount of \$8,385,886.40.
- *4. It was recommended, and I move to approve FY2026 HealthWest Fee Schedule, effective August 1, 2026, including a 2% rate increase for all services except H0018 – Crisis Residential Services, which will be adjusted to reflect the current cost of service delivery.
- *5. It was recommended, and I move to approve the HealthWest Executive Director to sign a contract with the Center for Neuropsychology and Behavioral Health effective July 1, 2026 through September 30, 2027.

/hb

HEALTHWEST

FINANCE COMMITTEE MEETING MINUTES

July 10, 2026

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, Michelle Hazekamp, John M. Weerstra

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

Also Present: Holly Brink, Rich Francisco, Brandy Carlson, Christy LaDronka, Kristi Chittenden, Kim Davis, Casey Olson, Mickey Wallace, Amber Berndt, Gina Kim, Carly Hysell, Jackie Farrar, Brittani Duff

Guests Present: Angela Gasiewski

ITEMS FOR CONSIDERATION

A. Approval of the Minutes of June 12, 2026

It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve the Finance Committee meeting minutes from June 12, 2026 as written.

MOTION CARRIED

B. Approval of Expenditures for June 2026

It was moved by Mr. Hardy, seconded by Mr. Weerstra, to approve expenditures for the month of June 2026, in the total amount of \$8,385,886.40.

MOTION CARRIED

C. Monthly Report from the Chief Financial Officer

Ms. Carlson, Chief Financial Officer, presented the May report, noting an overall cash balance of \$10,169,505.83 as of May 30, 2026.

D. Finance Update Memorandum

Ms. Carlson, Chief Financial Officer, presented the Finance Update Memorandum.

E. Authorization to Approve FY2026 Fee Schedule

It was moved by Mr. Hardy, seconded by Commissioner Hazekamp, to approve FY2026 HealthWest Fee Schedule, effective August 1, 2026, including a 2% rate increase for all services except H0018 – Crisis Residential Services, which will be adjusted to reflect the current cost of service delivery.

MOTION CARRIED

F. Authorization to Contract with The Center for Neuropsychology and Behavioral Health

It was moved by Mr. Hardy, seconded by Mr. Weerstra, to authorize the HealthWest Executive Director to sign a contract with the Center for Neuropsychology and Behavioral Health effective July 1, 2026 through September 30, 2027.

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:

- State Budget for FY27 – Still waiting on the final bills to land on the Michigan.gov website. However, Alan Bolter has provided a summary of the budget and impacts to the CMH in more detail on June 3. The expected budget bills are SB 878 and HB 5630. In summary, here are the main highlights that would impact HealthWest:
 - **Direct Care Worker (DCW) Wages**
 - ✓ *The budget ultimately does not include ongoing FY27 funding for the proposed direct care worker wage increase package.*
 - ✓ *Instead, funding for minimum wage increases, sick leave costs, and wage adjustments is being handled through a FY26 supplemental appropriation.*
 - ✓ *Boilerplate requires wage increases to be passed directly through to direct care workers and allows MDHHS to recoup funds if employers do not comply.*
 - **PIHP Rate-Setting Protection**
 - ✓ *A significant win for PIHPs and CMHSPs:*
 - *Revised Section 920 requires MDHHS to include state and federal wage increases in the Medicaid rate-setting process.*
 - *MDHHS must complete rate setting before requiring implementation of new direct care worker wage mandates.*
 - **CCBHC Funding**
 - ✓ *CCBHC funding remains largely intact.*
 - ✓ *Includes \$7.9 million GF/GP to offset federal funding adjustments.*
 - ✓ *Moves \$242.3 million gross (\$46 million GF/GP) into a one-time appropriation with no net funding reduction.*

- **ABA / Autism Services**

- ✓ *The budget assumes \$21.6 million gross savings (\$7.4 million GF/GP) from changes to Applied Behavior Analysis (ABA) services.*
- ✓ *New boilerplate directs MDHHS to pursue utilization and service-delivery efficiencies.*
- ✓ *Autism behavioral technician reimbursement remains protected at not less than \$66/hour.*
- ✓ *New fraud and quality-control oversight provisions require MDHHS to devote up to 1% of autism funding to program integrity and quality reviews.*

- **Major Medicaid Cost Savings Initiatives**

- ✓ *The budget contains nearly \$480 million in Medicaid savings, including:*
 - *Pharmaceutical program changes and increased use of generics/biosimilars.*
 - *Carve-out of the adult Medicaid dental program.*
 - *ABA utilization review savings.*
 - *HMO administrative reductions.*
 - *Third-party contract savings.*
 - *Elimination of a non-Medicaid direct care wage backfill program.*

- **Important Boilerplate Outcomes -Not Included**

- ✓ *The following items sought by some policymakers were removed from the final agreement:*
 - *U.S. Citizenship Requirement (Sec. 226)*
 - *DEI Program Prohibition (Sec. 227)*
 - *PIHP Request for Proposal language (Sec. 1020)*
 - *"Mental Health Framework" prohibition (Sec. 1021)*
 - *Waskul cost reimbursement language (Sec. 1022)*

- **What Matters Most for HealthWest**

- ✓ *No PIHP procurement/RFP language made it into the budget.*
- ✓ *No Mental Health Framework prohibition was included.*
- ✓ *PIHP rate setting must account for future wage mandates before implementation.*
- ✓ *Direct care worker wage funding is being addressed through a supplemental rather than built into the FY27 base budget.*
- ✓ *CCBHC funding remains protected.*
- ✓ *ABA/autism services will face increased utilization review and quality-control oversight.*
- ✓ *Nearly \$480 million in Medicaid savings assumptions could create future implementation pressures within the Medicaid program.*

For HealthWest and the CMHA advocacy agenda, the two biggest policy takeaways are likely that the PIHP RFP language was not included, and the Mental Health Framework prohibition was not included, indicating the Legislature did not adopt those policy changes in the final budget agreement

- **LRE Updates:**

- *LRE shared the FY27 contracts with the CMH CEOs this past week. The LRE would like the CMHs to review the contract. There are some changes and updates to the contract that I have some concerns about.*
 - ✓ *There is new language on sanctions for the CMHSP citing MCL 330.1232b from the Mental Health Code. I reviewed the Master agreement between the LRE and MDHHS*

and my interpretation of the MCL code is that MDHHS uses this in a variety of ways, but it is normally reserved for serious non-compliance with standards in service delivery. This statute often involves an Administrative Procedures Act (APA) which allows for a contested case hearing if a CMH were to be sanctioned. For some of the lesser violations, MDHHS will use a softer approach such as a plan of correction before any financial sanction and before termination. The LRE contract language as written does not differentiate between what is lesser violations and what is serious violations warranting a sanction. The LRE language collapses both these types of scenarios by citing MCL 330.1232b which is problematic.

- ✓ *Secondly, the LRE also introduced language in the contract related to Network Adequacy Standards that if a member's (a CMH) network adequacy or timely access falls short, LRE can the CMH's delegated managed care function activities to bring the region back into compliance. My question is what delegated function will they be clawing back from the CMHSPs?*
- ✓ *There is also a new language related to Late/Inaccurate reports that will be defined as a material breach and not a performance issue. Does this mean they can now sanction a CMH for this? What are the criteria for this to become serious.*
- ✓ *There is also a new schedule added to the LRE/CMHSP contract that the delegation of Managed Care Function Activities can be amended by the LRE by written Change Notice (no contract amendments/re-signature needed) whenever necessary for MDHHS compliance.*

There were other changes related to ASAM and HIPAA 42 CFR language but the 4 above are the areas of concern. I will be bringing this up at the next Ops meeting for discussion.

➤ CMH Level updates:

- The biggest work right now at the CMHSP level is addressing the decrease in utilization in various programs. There is a decrease in service delivery as I mentioned before which is causing our surplus numbers in the FSR. The clinical teams are working on understanding areas that are impacted and resolving gaps in the system. There have been some changes already in several areas and we are seeing the positive impacts to service delivery. There is an ongoing workgroup that is looking at various metrics in the agency such as productivity, financial codes services review, financial determination, and internal referral processes to improve service delivery numbers.

AUDIENCE PARTICIPATION

There was no audience participation.

ADJOURNMENT

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

Respectfully,

Jeff Fortenbacher
Committee Chair

/hb

PRELIMINARY MINUTES
To be approved at the Finance Meeting
on August 21, 2026

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Full Board	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Administration	REQUEST DATE July 31, 2026	REQUESTOR SIGNATURE Susan Plotts, Human Resources Manager	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
HealthWest Board authorization is requested to eliminate the Assisted Outpatient Treatment Coordinator, Position X02900, and layoff employee E93000188, effective September 30, 2026. The grant, Assisted Outpatient Treatment Foundation Strengthening Initiative, is ending on September 30, 2026, which funded this position. The employee is aware that the position is grant funded. HealthWest is working with the employee to identify positions within HealthWest or the County for which they are qualified in hopes the employee will choose to apply for those vacancies.			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
I move to authorize and approve the elimination of Assisted Outpatient Treatment Coordinator, Position X02900, and layoff employee E93000188, effective September 30, 2026			
COMMITTEE DATE	COMMITTEE APPROVAL		
	_____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL		
July 31, 2026	_____ Yes _____ No _____ Other		

HWB 101-B

REQUEST FOR HEALTHWEST BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Full Board	BUDGETED X	NON-BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Administration	REQUEST DATE July 31, 2026	REQUESTOR SIGNATURE Susan Plotts, Human Resources Manager	
<u>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</u>			
HealthWest Board authorization is requested to eliminate COFR Case Manager, Position X27600, and layoff employee E93033789, effective September 30, 2026. HealthWest has determined the team is in need of a Nurse Care Manager, which requires a Registered Nurse License, instead of a Case Manager level position. The County of Funding Responsibility (COFR) program requires HealthWest to provide case management, but many of our clients have medical needs as well. We are budgeting for a Nurse Care Manager in the FY 2027 budget instead of the COFR Case Manager position. We will work with the employee to identify other positions within HealthWest and the County for which she is qualified in hopes that she applies.			
<u>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</u>			
I move to authorize and approve the elimination of COFR Case Manager, Position X27600, and layoff employee E93033789, effective September 30, 2026.			
COMMITTEE DATE	COMMITTEE APPROVAL		
	_____ Yes _____ No _____ Other		
BOARD DATE	BOARD APPROVAL		
July 31, 2026	_____ Yes _____ No _____ Other		

HWB 102-B



HEALTH, WELLNESS & RECOVERY PICNIC

JOIN US



THURSDAY, AUGUST 13
11 AM - 2 PM
HACKLEY PARK



WHAT TO EXPECT

FREE LUNCH & CULVERS CUSTARD
COMMUNITY RESOURCES
FREE RAFFLES
KID'S ZONE



July 31, 2026

MEETING NOTICE AUGUST 2026

The HealthWest Board will meet in the following sessions during the month of August 2026. 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.

Program Personnel Committee	Friday, August 14, 2026
Recipient Rights Committee	Friday, August 14, 2026
Finance Committee	Friday, August 21, 2026
Full Board Meeting	Friday, August 28, 2026

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

The complete schedule of committee and board meetings for 2026 can be found online at <https://healthwest.net/board-agendas-minutes-2026/>

\hb

cc: HealthWest Board Members

Main Office

376 E. Apple Ave. | Muskegon, MI 49442 | P (231) 724-1111 | F (231) 724-3659
[HealthWest.net](https://healthwest.net)

MEMORANDUM

Date: 07/31/2026

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:

- The first CCBHC Listening Session was held on 07/28/2026 – Discussed next steps for CCBHC as the demonstration ends on 09/30/2027. MDHHS has set up these sessions to solicit feedback on potential policy changes post-demonstration. The first session focused primarily on QBP discussion.

Quality Bonus Payment Program

Purpose: Explore opportunities to modernize quality incentives.

Discussion Questions

- Do the current quality measures reflect meaningful performance?
- Should improvement over time be rewarded in addition to benchmarks?
- Are there populations or priorities that should receive additional incentives?
- How should quality bonus funds be distributed?

Opportunities and Considerations

- Measure Selection
- Performance Thresholds
- Redistribution Methodology
- Population-Specific Incentives

*Evaluation Criteria

- MDHHS is seeking input on the current QBP measure and asking the questions above.
- LRE has been ordered to appear in court on August 6th, regarding the FY22 cost settlement. Hopefully there will be resolution on this matter. This could mean the LRE owes \$13M back and as you recall, MDHHS has kept about \$4M in an escrow already.
- The 4 PIHP lawsuits are moving forward, and the court has ordered mediation. The PIHPs are still concerned about the 7.5% and Waskul-related concerns.
- A PIHP rebid RFP is expected in August according to the DTMB (Dept. of Technology, Management and Budget) but no further details have been released.

LRE Level Updates:

- LRE Board meeting occurred on 7/22/2026.
 - Discussion on the FSR and the regional projected deficit for the region. CSU was discussed – N180 mentioned that there was \$5M in the state budget. However, I asked

a follow up question on whether the boilerplate language would allow existing CSU to have this money. The boilerplate did say it was to increase CSUs and in the conference notes it was written as an increase to the number of CSUs.

- Continued discussion and there is a push to review the need based funding analysis. The LRE will investigate the cost of the analysis to review an alternative funding model to PM/PM – Per member/Per month capitation rate.
- LRE/CMHSP FY27 Draft contract is being reviewed. I have submitted my concerns and feedback on changes and new language added in the contract. I proposed new language related to sanctions, delegation and reporting responsibility of the CMHSP to the LRE.

CMH Level:

- HealthWest continues with various projects:
 - **Utilization Review:** HW Continues to review utilization and establish productivity measures for teams and programs. In addition, HW is reviewing our use of General Fund dollars which should be reserved for emergency and crisis type services. We are projected to spend more in GF than is allocated to us. Establishing key performance indicators achieves the following objectives:
 - Ensure individuals and families receive timely access to the services and support needed.
 - Maintain financial stability and protect resources needed for future operations.
 - Identify operational challenges and opportunities for improvement.
 - Support staff with the tools, processes, and resources needed to be successful.
 - Demonstrate accountability to our consumers, community, Board, and funding partners.
 - **HR turnover rate:** Per HR report, the latest turnover rate, see below:
 - Overall Turnover is 16.2% and is trending downward from 17.75% at the beginning of the fiscal year.
 - We started with 69 MLC's at beginning of year and we now have 72
 - We hired 5 MLCs into permanent positions from internships.
 - We have had 26 promotions this fiscal year.
 - Our overall vacancy rate is 10%
 - **Strategic Plan updates** – The strategic plan is at a stage where all the data and input from the initiative setting groups is compiled into one document in draft form. The single strategic initiative portfolio is currently being reviewed by the Executive team. The development of the plan is proceeding as scheduled.
 - Preliminary QBP (Quality bonus payment) award – Good news! KUDOS to HW Staff for a great performance on the QBP measures. HW met 8/9 quality measures benchmark and in some cases exceeded them. This equates with HW receiving \$1,013,956.80 in base award. In addition, HW receives another \$383,997 redistribution amount on top of that with a total of \$1,397,953.
 - **Pioneer Park – County picnic is going to be on September 19th.** HW is on the planning committee again to help plan. I was on it last year and Brandy is serving on it this year.
 - **SDA (Same Day Access)** – Christy LaDronka and her team continue to work rolling out same day access with the goal of improving access, timeliness to service and enhance community responsiveness. This also aligns and is best practice for CCBHC (Certified Community Behavioral Health Clinic).