

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING

Patrick Barrie Room

705 N. Zeeb Rd, Ann Arbor, MI

Wednesday, August 8, 2018

6:00 PM



Agenda

	<u>Guide</u>
I. Call to Order	1 min
II. Roll Call	2 min
III. Consideration to Adopt the Agenda as Presented	2 min
IV. Consideration to Approve the Minutes of the 7-11-18 Regular Meeting and Waive the Reading Thereof (Board Action) {Attachment #1}	2 min
V. Audience Participation (5 minutes per participant)	
VI. Old Business	20 min
a. August Finance Report {Attachment #2}	
b. Board Action Request {Attachment #3, 3a}	
Consideration to approve the Board Governance Policy Manual	
VII. New Business	45 min
a. Board Action Request	
Consideration to approve the proposed 2018 Budget amendment and allocations as presented {Attachment #4, 4a}	
b. FY19 Preliminary Budget Objectives, Assumptions and Strategies {Attachment #5}	
c. Board Action Request {Attachment #6, 6a}	
Consideration to approve the SUD Grant Coordinator Position: Gambling Disorder Prevention	
d. Board Action Request {Attachment #7}	
Consideration to approve the 2 PROJECT ASSERT contract amendments as presented	
e. CEO Annual Review and Contract Renewal – Due for Board Approval in December	
VIII. PIHP CEO Report to the Board	15 min
a. Report from the SUD Oversight Policy Board (OPB)	
IX. Adjournment	

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
REGULAR BOARD MEETING MINUTES
July 11, 2018**



Members Present: Judy Ackley, Greg Adams, Marth Bloom, Barb Cox, Susan Fortney, Roxanne Garber, Sandra Libstorff, Charles Londo, Sharon Slaton, Ralph Tillotson

Members Absent: Charles Coleman, Kent Martinez-Kratz, Caroline Richardson

Staff Present: Connie Conklin, Jane Terwilliger, Kathryn Szewczuk, Stephannie Weary, Lisa Jennings, James Colaianne, Suzanne Stolz, Kristen Ora, Nicole Phelps

Others Present: Laurie Lutomski

I. Call to Order
Meeting called to order at 6:05 p.m. by Board Chair R. Tillotson

II. Roll Call
J A quorum of members present was confirmed.

III. Consideration to Adopt the Agenda as Presented

**Motion by S. Slaton, supported by M. Bloom, to approve the agenda
Motion carried**

IV. Consideration to Approve the Minutes of the May 9, 2018 Regular Meeting and Waive the Reading Thereof

**Motion by S. Fortney, supported by S. Slaton, to approve the minutes of May 9, 2018 Regular Meeting and waive the reading thereof
Motion carried**

V. Audience Participation

VI. Presentation on FY18 Supplemental and Rate Setting
J J. Colaianne provided an overview of capitation payment rate development. Discussion followed.

VII. Old Business
a. July Finance Report
J S. Stolz presented. Discussion followed.

VIII. New Business
a. Board Action Request
Consideration to approve the Annual Summary and Evaluation of the Quality Assessment and Performance Improvement Program (QAPIP) for FY17
b. Board Action Request
Consideration to approve the Annual Plan for Quality Assessment and Improvement Activities during the calendar year 2018

Motion by J. Ackley, supported by B. Cox, to approve
a. the Annual Summary and Evaluation of the Quality Assessment and Performance Improvement Program (QAPIP) for FY17
b. the Annual Plan for Quality Assessment and Improvement Activities during the calendar year 2018
Motion carried

- IX. PIHP CEO Report to the Board
 -) J. Terwilliger provided local and state updates, including the External Quality Review, Rate Setting, 298 legislation and the Criminal Justice SUD Project through MCHE.
 - a. Report from the SUD Oversight Policy Board (OPB)
 -) None
- X. Adjournment

Meeting adjourned at 7:38 p.m.

Roxanne Garber, CMHPSM Board Secretary



Financial Highlights For the Period Ending June 30, 2018

CMHPSM Strategies:

1. CMHPSM will continue to coordinate with CMHSP's to review current year budgets and actual expenditures.
2. A shared decision model will be utilized to monitor and stabilize budgets and services.
3. CMHPSM will trend traditional Medicaid Eligibles and HMP Enrollees from the most current listing to apply the rates and monitor incoming revenues.
4. CMHPSM is monitoring the potential overages and is working with the CMHSP's to minimize costs yet providing medically necessary services.
5. ASSURANCE OF FINANCIAL RISK PROTECTION-INTERNAL SERVICE FUNDS - The CMHPSM has established a Medicaid Internal Services Fund (ISF) for purposes of risk protection. This fund was examined by the actuary to establish the appropriate level of funding for this risk pool. In accordance with the MDHHS/PIHP contract, the ISF may be funded up to 7.5% of Medicaid revenues for the close of FY2017. The Medicaid ISF is a separate interest-bearing account and is not co-mingled with any other funding. In cases where Medicaid liability is 100% to 105% of Medicaid revenue and the amount available in the ISF is sufficient, the ISF will be used to cover that deficit. If the ISF is not sufficient, each CMHSP will provide local funding in proportion to their share of the deficit. For cases where the deficit is over 105%, each CMHSP will cover their share of the deficit with their local funds up to the capped risk corridor of 110%. (Total risk obligation for the region is 7.5%).

**Community Mental Health Partnership of Southeast Michigan
Preliminary Statement of Revenues and Expenditures
For the Period Ending June 30, 2018**

	FY18 Amended Budget	YTD Actual	YTD Budget	YTD Actual O/(U) Budget	Percent Variance Actual to Budget
Operating Revenue					
Medicaid Capitation	\$127,180,895	\$93,566,259	\$95,385,671	(\$1,819,412)	-1.91%
Medicaid SUD Capitation	2,206,898	1,710,923	1,655,173	55,750	3.37%
Healthy Michigan Plan	8,877,703	6,835,466	6,658,277	177,189	2.66%
Healthy Michigan Plan SUD	4,243,420	3,139,098	3,182,565	(43,467)	-1.37%
Autism	6,864,108	5,186,154	5,148,081	38,073	0.74%
SUD Community Block Grant	6,094,398	4,596,330	4,570,799	25,532	0.56%
Block Grants	386,626	289,970	289,970	-	0.00%
SUD PA2 - Cobo Tax Revenue	1,826,092	1,369,569	1,369,569	-	0.00%
SUD PA2 - Cobo Tax Use of Reserve	1,598,399	1,198,799	1,198,799	-	0.00%
Local Match	1,577,780	1,183,335	1,183,335	-	0.00%
Other Revenue	327,921	221,533	245,941	(24,408)	-9.92%
Use of Risk Reserve	5,741,041	4,305,781	4,305,781	-	0.00%
Total Revenue	\$166,925,280	\$123,603,217	\$125,193,960	\$(1,590,743)	
Funding For CMHSP Partners					
Lenawee CMHSP	17,661,576	13,246,182	13,246,182	-	0.00%
Livingston CMHSP	26,501,323	19,875,992	19,875,992	-	0.00%
Monroe CMHSP	28,565,189	21,423,892	21,423,892	-	0.00%
Washtenaw CMHSP	70,738,924	53,054,193	53,054,193	-	0.00%
Total Funding For CMHSP Partners	\$ 143,467,012	\$ 107,600,259	\$107,600,259	\$ -	
Funding For SUD Services					
Lenawee County	2,029,879	1,491,571	\$1,522,409	(30,838)	-2.03% a
Livingston County	2,754,448	1,823,555	2,065,836	(242,281)	-11.73% a
Monroe County	2,529,806	1,673,070	1,897,355	(224,285)	-11.82% a
Washtenaw County	7,546,966	4,893,533	5,660,225	(766,691)	-13.55% a
Total Funding For SUD Services	\$ 14,861,099	\$ 9,881,729	\$11,145,824	\$(1,264,096)	
Other Contractual Obligations					
Hospital Rate Adjuster	2,207,816	1,617,892	\$1,655,862	(37,970)	-2.29%
USE and HICA Tax	1,059,026	794,270	794,270	-	0.00%
Local Match	1,577,780	1,183,335	1,183,335	-	0.00%
Total Other Costs	\$4,844,622	\$3,595,496	\$3,633,467	\$(37,969)	
CMHPSM Administrative Costs					
Salary & Fringe	2,137,588	1,531,990	1,603,191	(71,201)	-4.44%
Administrative Contracts	1,398,669	944,930	1,049,002	(104,071)	-9.92% b
Board Expense	4,400	245	3,300	(3,055)	-92.58% c
All Other Costs	211,890	120,390	158,918	(38,528)	-24.24% d
Total Administrative Expense	\$3,752,547	\$2,597,555	\$2,814,410	\$(216,855)	
Carry Forward	\$0		\$0	\$0	
Total Expense	\$166,925,280	\$123,675,039	\$125,193,960	\$(1,518,920)	
Revenues over (under) Expenditures	\$0	\$(71,822)	\$0	\$(71,822)	

a - SUD programs continue to be under budget due to the Innovative Strategies and STR grants not fully

b - Administrative contracts under budget due to capitalization of the EHR and timing of payment for customer service interpretation contract.

c - Board expense under budget due to cancelled meetings.

d- Other costs under budget due to staff trainings cancelled or delayed and purchase of computer hardware not utilized.



Regional Board Action Request

Board Meeting Date: August 8, 2018

Action Requested: Approve the Board Governance Policy Manual

Background: The CEO has completed a review of the current Board Governance Policy Manual approved in 2016. There are no recommendations for change.

Connection to PIHP/MDCH Contract, Regional Strategic Plan or Shared Governance Model: The Board Governance Policy Manual is included in the CMHPSM Bylaws and the Regional Operations Agreement.

Recommend: Approval



Community Mental Health Partnership of Southeast Michigan

Board Governance Policy Manual

POLICY TABLE OF CONTENTS

- 1. Mission and Values**
 - 1.0 Mission, Vision and Values
 - 1.1 Bylaws and Policy Review and Amendment

- 2. CEO Responsibilities**
 - 2.0 CEO Responsibilities
 - 2.1 Treatment of Consumers
 - 2.2 Treatment of Staff
 - 2.3 Compensation and Benefits
 - 2.4 Financial Policies
 - 2.5 Emergency CEO Succession
 - 2.6 Communication and Support to the Board
 - 2.7 Community Resources

- 3. Governance Process**
 - 3.0 Governing Style
 - 3.1 Board Responsibilities/Duties
 - 3.2 Board Member Ethics
 - 3.3 Board Chair's Role
 - 3.4 Policy Review and Amendment
 - 3.5 Cost of Governance

- 4. Board-CEO Linkage**
 - 4.0 Governance-Management Connection
 - 4.1 CEO's Responsibilities
 - 4.2 Monitoring CEO Performance

Section 1: *MISSION, VISION AND VALUES*

1.0 *MISSION/VISION AND VALUES*

The Mission/Vision and Values of the CMHPSM are:

Mission: To provide quality behavioral healthcare that promotes recovery and wellness, fosters resilience and supports self-determination and empowerment so that individuals served in the four county region that comprises the CMHPSM are successful in achieving their personal goals and dreams.

Vision: The CMHPSM will be a comprehensive system of care working in an integrated fashion with substance abuse and primary healthcare systems so that the care and services provided better meet consumer needs in a more efficient and cost effective manner

Values:

-) Respect the diversity of our communities and the people we serve
-) Zero Tolerance for stigma
-) Coordinated and continuous care between and across healthcare systems and providers
-) Meaningful partnerships with consumers and community stakeholders
-) Learning organization disciplines of systems thinking, team learning, shared vision, personal mastery, and mental models
-) Data based decision making
-) Innovation and creativity
-) Provision of the best quality services to the most people at the best cost

1.1 *BYLAWS AND POLICY REVIEW AND AMENDMENT*

The Board will review the regional mission, vision, and values statements for relevance to current needs and interest of the four county partners at least every two years. The Board will ensure stakeholder involvement in the review of the mission/vision and values.

Section 2: CEO RESPONSIBILITIES

2.0 EXECUTIVE RESPONSIBILITIES

The CEO shall ensure that all practices, activities, decisions, and/or organizational circumstances shall be lawful, prudent and in compliance with commonly accepted business and professional ethics. The CEO will recommend either new or revised Board Governance policies to address areas of non-compliance.

2.1 TREATMENT OF CONSUMERS

With respect to interactions with and services provided to consumers or those applying to be consumers, the CEO shall ensure the CMHPSM has an established process that is followed to monitor conditions and procedures employed across the four county region so that services and supports are provided in a manner that is dignified, respectful, appropriate, not unnecessarily intrusive, and promotes safety. The manner in which services and supports are provided shall be in accordance with the CMHPSM Mission and Vision statements.

2.2 TREATMENT OF STAFF

The CEO shall promote conditions for the staff that are fair, dignified, respectful, organized, and clear.

Further, by way of example, but not limited to the following:

1. Operate with written personnel rules which: (a) clarify rules for staff, (b) provide for effective handling of grievances, and (c) protect against wrongful conditions, such as nepotism and preferential treatment for personal reasons.
2. Have a process for exit interviews and staff satisfaction surveys.
3. Ensure each employee of the CMHPSM shall have due process in the event of an adverse disciplinary action.
4. Within fiscal constraints, provide necessary resources to staff for the performance of their job duties.
5. Staff shall have annual performance appraisals.

2.3 COMPENSATION AND BENEFITS

The CEO shall administer board approved competitive compensation and benefits.

2.4 FINANCIAL POLICIES

The CEO shall ensure the financial policies and practices of the CMHPSM meet state and federal

requirements and are compliant with Generally Accepted Accounting Practices (GAAP).

Further, by way of example, but not limited to the following:

1. Financial Policies and amendments related to:
 - A. Procurement—approved 2014
 - B. Investments—approved 2014
 - C. CEO Scope of Authority—approved 2014
 - D. CEO Authority for Position Control—approved 2014
 - E. Financial Risk Management—in development

shall be approved by the Board.

2. The CEO and CFO shall review the financial policies annually and make recommendations to the Board for amendments when needed.

2.5 EMERGENCY CEO SUCCESSION

To protect the CMHPSM from sudden loss of CEO Services, the CEO shall have no fewer than two other executives familiar with Board and CEO issues and processes.

2.6 COMMUNICATION AND SUPPORT TO THE BOARD

The CEO shall keep the Board informed and supported in its work.

Further, by way of example, but not limited to the following:

1. Submit monitoring data required to the Board (see policy on Monitoring CEO Performance) in a timely, accurate, and understandable fashion, directly addressing provisions of Board Policies being monitored.
2. Keep the Board informed of relevant trends, anticipated adverse media coverage, threatened or pending lawsuits and material external and internal changes, particularly changes in the assumptions upon which any Board Policy has previously been established.
3. Advise the Board if, in the CEO'S opinion, the Board is not in compliance with its own policies on Governance Process and Board – CEO Linkage, through the Board Chair.
 - a) If there is a breakdown in the relationship between the Board Chair and the CEO, the CEO shall inform the full CMHPSM Board of the breakdown.
 - b) In the event the CMHPSM Board is unable to resolve the issues, the leadership of the CMHSPs that appoint the CMHSP members to the CMHPSM Board shall meet to address the issues and develop recommendations for the CMHPSM Board to act upon.

4. Marshal for the Board information from as many staff and external perspectives, on issues and options as needed for fully informed Board choices.
5. Provide a mechanism for official Board communications.
6. The CEO shall provide a compliance report to the Board at least annually and any time there are any violation at either the CMHPSM or the CMHSPs. This report shall include a review of the implementation of operational policies to ensure that areas of noncompliance are identified and addressed before the noncompliance results in sanctions from regulatory bodies.
7. Report in a timely manner an actual or anticipated noncompliance with any Board Policy.

2.7 REGIONAL RESOURCES

The CEO shall be informed and take advantage of collaboration, partnerships and innovative relationships with agencies and organizations, including state, regional and county specific resources. The CEO shall also stay abreast of current affairs as they apply to this industry through conferences and seminars.

Section 3: GOVERNANCE PROCESS

3.0 GOVERNING STYLE

The Board will govern with an emphasis on (a) outward vision, (b) diversity in viewpoints, (c) strategic leadership, (d) clear distinction of Board and CEO roles, (e) collective rather than individual decisions and, (f) proactivity.

The Board must insure that all divergent views are considered in making decisions, yet must resolve into a single organizational position. Once a decision is made the Board must speak in one voice publicly.

Accordingly:

1. The Board will establish written policies reflecting the Board's values and perspectives. The Board's major policy focus will be on the intended long-term impacts outside the organization, not on the administrative or programmatic means of attaining those effects.
2. The Board will enforce discipline whenever needed. Discipline will apply to matters such as attendance, preparation for meetings, violation of policies, and disrespect for roles.
3. Continual Board development will include orientation of new Board Members and periodic Board discussion of process improvement.
4. The Board will listen respectfully to citizen comments and assure that an internal process is in place to follow up on the concerns expressed.

3.1 BOARD RESPONSIBILITIES/DUTIES

The Board will ensure appropriate organizational and CEO performance and promote a link between the regional community and the CMHPSM.

Further, by way of example, but not limited to the following:

1. Meetings

- (a) Attend Board meetings
- (b) If unable to attend Board meetings provide advance notice to the CEO and Board Chair
- (c) Be prepared and on time
- (d) Listen with an open mind
- (e) Participate in discussion and encourage dialogue
- (f) Make decisions in the best interest of the PIHP region
- (g) Speak with one voice after a decision has been made

2. Board Member Personal Development

- (a) Complete Board orientation and training
- (b) Commit to ongoing development of Board Member skills

3. Operational Policies

- (a) Relevant operational policies applicable to the Board are included by reference (i.e. CMHPSM Travel Expense Reimbursement Policy)

3.2 BOARD MEMBER ETHICS

The Board commits itself and its members to ethical, businesslike, and lawful conduct, including proper use of authority and appropriate decorum when acting as Board Members.

Further, by way of example, but not limited to the following:

1. Operate with the best interest of the PIHP region in mind.
2. Recuse from conflict of interest.
3. Board Members will not use their board position to obtain employment in the organization for themselves, family members, or close associates. Should a Board Member apply for employment, he or she must first resign from the Board.
4. Board Members shall not attempt to exercise individual authority over the organization.
5. The Board will not evaluate, either formally or informally, any staff other than the CEO.
6. Board Members will respect confidentiality.

3.3 BOARD CHAIR'S ROLE

The Board Chair assures the integrity of the Board's process and, represents the Board to outside parties. The Board Chair has no authority to make decisions about policies created by the Board nor authority to supervise or direct the CEO.

3.4 POLICY REVIEW AND AMENDMENT

1. The Board Bylaws and Board Policies shall be reviewed in April of every year.
2. Board Policies may be suspended, rescinded, or amended by 3/4 of the serving membership and will be superseded by any change in federal or state law.

3.5 COST OF GOVERNANCE

The Board will invest in its governance capacity.

Accordingly:

1. Board members shall be compensated at the rate of the appointing CMHSP per meeting for attendance at all Board meetings, assigned committee meetings, workshops, required training, and other Board approved functions. Board members are entitled to one meeting allowance per day.
2. Travel expenses shall be reimbursed by the appointing CMHSP
3. The Board shall be informed of its budget and expenses.

Section 4: BOARD-CEO LINKAGE

4.0 GOVERNANCE-MANAGEMENT CONNECTION

The Board shall appoint a CEO of the Community Mental Health Partnership of Southeast Michigan who meets the standards of training and experience established by the Michigan Department of Health and Human Services (MDHHS). The Board shall establish general policy guidelines within which the CEO shall execute the duties and responsibilities of a Pre-Paid Inpatient Health Plan as required by state and federal laws, rules, regulations, and the Medicaid Specialty Supports and Services contract with the MDHHS.

4.1 CEO's RESPONSIBILITIES

The CEO of the CMHPSM shall function as the chief executive and administrative officer of the PIHP and shall execute and administer the program in accordance with the approved annual plan and operating budget, the general policy guidelines established by the Board, the applicable governmental procedures and

policies, and the provisions of the Mental Health Code. The CEO has the authority and responsibility for supervising all employees. The terms and conditions of the CEO's employment, including tenure of service, shall be as mutually agreed to by the Board and the CEO and shall be specified in a written contract.

4.2 MONITORING CEO PERFORMANCE

There will be systematic and objective monitoring of the CEO's job performance and achievement of organizational goals as agreed upon.

Adopted the 8th of June 2016

Board Chairperson

Date

Board Secretary

Date



Regional Board Action Request

Board Meeting Date: August 8, 2018

Action Requested: Approve the proposed 2018 Budget amendment and allocations as presented.

Background: The fiscal year 2018 budget is representative and in an adherence to the contracts entered into with the Michigan Department of Health and Human Services (MDHHS). Amendments by line item are attached.

Connection to PIHP/MDCH Contract, Regional Strategic Plan or Shared Governance Model:

PIHP/MDCH Contract Section 8.0 Contract Financing
CMHPSM Regional Agreements

Recommend: Approval

**Community Mental Health Partnership of Southeast Michigan
FY 2017/2018
2nd Budget Amend**

	FY18 Current Budget	YTD Actual	2nd Amend Budget	Increase (Decrease) Budget
Operating Revenue				
Medicaid Capitation	\$127,180,895	\$93,566,259	\$128,824,711	1,643,816 a
Performance Based Incentive Pool			\$1,133,238	1,133,238 b
Medicaid SUD Capitation	2,206,898	1,710,923	\$2,264,122	57,224 c
Healthy Michigan Plan	8,877,703	6,835,466	8,992,448	114,745 a
Healthy Michigan Plan SUD	4,243,420	3,139,098	4,154,073	(89,347) c
Autism	6,864,108	5,186,154	6,863,011	(1,097) d
SUD Community Block Grant	6,094,398	4,596,330	6,414,335	319,937 e
Block Grants	386,626	289,970	386,626	-
SUD PA2 - Cobo Tax Revenue	1,826,092	1,369,569	1,826,092	-
SUD PA2 - Cobo Tax Use of Reserve	1,598,399	1,198,799	1,598,399	-
Local Match	1,577,780	1,183,335	1,577,780	-
Other Revenue	327,921	221,533	327,921	-
Local Risk Corridor CMHSP's share			2,688,283	2,688,283 f
Shared Risk Corridor MDHHS share			2,688,283	2,688,283 f
Use of Risk Reserve	5,741,041	4,305,781	7,135,209	1,394,168 g
Total Revenue	\$166,925,280	\$123,603,217	\$176,874,530	\$9,949,250
Funding For CMHSP Partners				
Lenawee CMHSP	17,661,576	13,246,182	17,656,948	(4,628) h
Livingston CMHSP	26,501,323	19,875,992	28,485,189	1,983,866 h
Monroe CMHSP	28,565,189	21,423,892	30,968,952	2,403,763 h
Washtenaw CMHSP	70,738,924	53,054,193	75,985,237	5,246,312 h
Total Funding For CMHSP Partners	\$ 143,467,012	\$ 107,600,259	\$ 153,096,326	\$9,629,313
Funding For SUD Services				
Lenawee County	2,029,879	1,491,571	2,073,579	43,700 e
Livingston County	2,754,448	1,823,555	2,813,747	59,299 e
Monroe County	2,529,806	1,673,070	2,584,269	54,463 e
Washtenaw County	7,546,966	4,893,533	7,709,441	162,475 e
Total Funding For SUD Services	\$ 14,861,099	\$ 9,881,729	\$ 15,181,036	\$319,937
Other Contractual Obligations				
Hospital Rate Adjuster	2,207,816	1,617,892	2,207,816	-
USE and HICA Tax	1,059,026	794,270	1,059,026	-
Local Match	1,577,780	1,183,335	1,577,780	-
Total Other Costs	\$4,844,622	\$3,595,496	\$ 4,844,622	\$0
CMHPSM Administrative Costs				
Salary & Fringe	2,137,588	1,531,990	2,137,588	-
Administrative Contracts	1,398,669	944,930	1,398,669	-
Board Expense	4,400	245	4,400	-
All Other Costs	211,890	120,390	211,890	-
Total Administrative Expense	\$3,752,547	\$2,597,555	\$3,752,547	\$0
Carry Forward	\$0		\$0	\$0
Total Expense	\$166,925,280	\$123,675,039	\$176,874,531	\$9,949,250
Revenues over (under) Expenditures	\$0	\$(71,822)	\$0	\$(0)

**Community Mental Health Partnership of Southeast Michigan
FY 2017/2018
2nd Budget Amend**

a - Medicaid Specialty Services and Healthy Michigan Plan Revenue increased based on MDHHS amended FSY 2018 Rates and decreased for Performance Based Incentive Pool.

b - Performance Based Incentive Pool is 0.75% of capitation payments paid based on achievement of matrix objectives in FY17 contract.

c - SUD capitation revenue adjusted for eligible trends and the Performance Based Incentive

d- Autism adjusted based on eligible trends and the Performance Based Incentive Pool.

e- SUD Block Grant increased for approval of Opioid State Targeted Response (STR) carryforward. Expenditures correlate with revenues

f - State and local portion of the risk corridor shared 50/50 between 105-110% of budgeted revenues.

g - Use of Risk Reserve is increased to fully utilize the risk reserve to cover the 100-105% portion of the risk corridor.

h - Increase (Decrease) of the CMHSP budgets based on each respective FY18 projected expenditures.

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
Projected Summary by Funding Source
FY 2017/2018

		FY18 Current Budget	FY18 Projected Use of Funding Source	Over (Under) Final Budget to Actual	% Variance
M E D I C A I D	Lenawee	15,625,756	15,209,064	(416,692)	-2.67%
	Livingston	23,755,074	22,309,949	(1,445,125)	-6.08%
	Monroe	25,471,622	27,752,593	2,280,971	8.95%
	Washtenaw	63,977,427	66,404,219	2,426,792	3.79%
	Medicaid Total	128,829,879	131,675,825	2,845,946	2.21%
	A U T I S M	Lenawee	830,553	617,502	(213,051)
Livingston		1,120,385	3,327,951	2,207,566	197.04%
Monroe		1,262,088	1,291,123	29,035	2.30%
Washtenaw		2,758,484	2,455,705	(302,779)	-10.98%
Autism Total		5,971,510	7,692,281	1,720,771	28.82%
H M P		Lenawee	1,205,267	1,830,382	625,115
	Livingston	1,625,862	2,847,289	1,221,427	75.12%
	Monroe	1,831,483	1,925,236	93,753	5.12%
	Washtenaw	4,003,011	7,125,313	3,122,302	78.00%
	HMP Total	8,665,623	13,728,220	5,062,597	58.42%
	TOTAL MCAID/HMP		143,467,012	153,096,326	9,629,314

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN
Projected Summary by Funding Source
FY 2017/2018

	1st Amend Budget	Use of Risk Reserve	Total FY18 Revenues	Admin & Operations	Projected YTD use by affiliates	Projected YTD Expenditures	Revenues over (under)
MEDICAID/AUTISM	135,687,721	7,135,209	142,822,930	3,862,382	139,368,106	143,230,488	(407,558)
HMP	8,992,448		8,992,448	233,236	13,728,220	13,961,456	(4,969,008)
PBIP	1,133,238		1,133,238			-	1,133,238
TOTALS	144,680,169	7,135,209	151,815,378	4,095,618	153,096,326	157,191,944	(5,376,566)

	<u>ISF Available</u>
Beginning FY18 Medicaid ISF	7,135,209
Budgeted Use of ISF	<u>(7,135,209)</u>
Available ISF	-
	<u><u>(5,376,566)</u></u>
	<u><u>2,688,283</u></u>
Local Risk Corridor CMHSP's share	2,688,283
Shared Risk Corridor MDHHS share	<u>2,688,283</u>
Total Shared Risk	<u><u>5,376,566</u></u>

CMHPSM's Risk Management Strategy states if the ISF is not sufficient, each CMHSP will provide local funding in proportion to their share of the deficit. For cases where the deficit is over 105%, each CMHSP will cover their share of the deficit with their local funds up to the capped risk corridor of 110%.



Fiscal Year 2019 Preliminary Budget Objectives, Assumptions and Strategies

Community Mental Health Partnership of Southeast Michigan is using the following objectives, assumptions and strategies to prepare the beginning FY19 budget to be presented at the September 2018 board meeting. Amendments will be presented throughout the year to recognize any changes in assumptions or contractual obligations and updates to PIHP rates established by MDHHS.

CMHPSM FY19 Budget Objectives:

1. Fiscal Year 2019 budget will be presented at the September 2018 Board of Directors meeting.
2. The proposed budget will uphold the mission and vision of CMHPSM.
3. The fiscal year 2019 budget will deliver a responsible balance of financial management, oversight monitoring, regulatory management, an accountable service delivery system, and an adherence to the contracts entered into with the Michigan Department of Health and Human Services (MDHHS).

CMHPSM FY19 Assumptions:

1. Rates will not be released by MDHHS until early September 2018. The preliminary budget will use the fiscal year 2018 rates applied to Traditional Medicaid Eligibles and HMP Enrollees listings for the CMHPSM region. The budget will be amended as soon as rates are released, verified and applied to the current eligible listing.
2. CMHPSM will trend those Traditional Medicaid Eligibles and HMP Enrollees from the most current listing to apply the rates.
3. The Risk-Based Funding Allocation Model that provides an actuarially sound model using the risk weights will be used to establish the CMHSP allocation.
4. Administrative expenditures will be based on fiscal year 2018 actual year to date information, will include the board approved salary schedule and any projected increases in fringes/contracted services.

CMHPSM Strategies:

1. CMHPSM will collaborate with CMHSP's to establish a consistent and reasonable methodology to balance the budget as a PIHP in whole.
2. CMHPSM has coordinated with CMHSP's to review current year budgets and actual expenditures.
3. A shared decision model will be utilized to complete the fiscal year 2019 budget to be presented to the board for approval.
4. CMHPSM in collaboration with the CMHSP's has identified four key areas to increase revenue and reduce expenditures. These areas include:
 - autism advocacy
 - reviewing community living supports authorizations as it is aligned through the state-wide parity
 - inpatient diversion
 - seeking full utilization of habilitation supports waiver slots



Regional Board Action Request

Board Meeting Date: August 8, 2018

Action Requested: Approve SUD Gambling Disorder Prevention Grant Coordinator Position

Background:

The State has approved the CMHPSM response for a regional approach to prevention of Gambling Disorders and addiction. The \$200,000 annual grant requires a grant coordinator at the PIHP level to manage the grant and the efforts in the community. This grant primarily focuses on prevention, community needs assessments and implementation of evidence-based practices that will be aligned with the current prevention activities across our communities. The initial phases of the grant follow the strategic prevention framework, a SAMHSA model approach that involves community needs assessment; data driven decision making and use of evidence-based practices to impact communities. In addition, the PIHP will focus on universal assessment of gambling disorders in the SUD population, as these addictions often are co-occurring. Recruitment of therapists who are interested in participating in the rigorous certification training required by the State will be another focus, as well as increased awareness of the gambling hotline and treatment opportunities. Funding for this grant originates from the Casino tax initiated with the approval of Casino's in Michigan and is not utilized for other SUD purposes. This position will work under the supervision of the PIHP Clinical and SUD Director. The Gambling Disorder Prevention Coordinator will engage communities across the region, serve as liaison to the providers and state grant managers; assisting with training coordination; ensuring accurate data collection, and timely report compilation and submission, as well as assisting with grant evaluation components and tracking of outcomes. The SUD Grant Coordinator will work with providers in the community to ensure client services are obtained in a seamless and efficient manner. This position is requested to be placed within the CMHPSM Tier II which has a salary range of \$49,667 - \$70,667.

Continuation of the SUD Grant Coordinator position will be reviewed annually as part of the ongoing allocation from MDHHS, Office of Recovery Oriented Systems of Care (OROSC). The funding of this position is fully grant supported.

Connection to PIHP/MDHHS Contract, Regional Strategic Plan or Shared Governance Model:

Grant funded position meets service needs for addressing the prevention initiatives as directed by Michigan Department of Health and Human Services, OROSC.

Recommend: Approval

Community Mental Health Partnership of Southeast Michigan Job Description

Job Title: SUD GAMBLING DISORDER Prevention Grant Project Coordinator

Location: 705 N. Zeeb

Rd.

Supervision Received: PIHP Clinical and SUD Services Director

Position ID: XXXXXXXXXXX

Pay Grade: \$49,667 – 70,667

FLSA Exempt Status: Exempt

Position Status: Full time

Last Review/Approval:

Job Summary

The Gambling Disorder Prevention Grant Project Coordinator, under the direction of the Clinical and SUD Services Director, will provide oversight of grant implementation, budgets, goals, objectives and activities, and serve as a liaison to funded program personnel as well as the MDHHS grant management staff. The position will assist in grant data collection and will submit monthly, quarterly and annual reports as directed. The position's work will involve participation in staff meetings, identifying gaps in services for target populations and assisting in activities designed to fill those gaps. The position is responsible for conducting community needs assessments, facilitation and implementation of strategic prevention framework activities, community presentations on grant goals, objectives, activities, and program information.

Essential Duties and Responsibilities

-) Evaluates the work of program providers to ensure for the effective use of program resources and that quality of services delivered are appropriate.
-) Directs activities of program providers/implementers as necessary.
-) Assists in evaluating program providers.
-) Facilitates access to necessary training programs for providers.
-) Establishes and oversees administrative procedures to meet grant objectives.
-) Oversees program policies regarding participant eligibility, program requirements, and program benefits.
-) Prepares and maintains records and reports, such as budgets, personnel records and grant targets.
-) Assists in researching and analyzing participant and community needs to determine program direction and goals.
-) Prepare and submit reports to the State of Michigan, verifying accuracy and completeness and ensuring deadlines are met
-) Attend and participate in various state, regional and local workgroup, county collaborative groups and other meetings to promote grant implementation as needed

Supervisory Responsibilities

-) N/A

Education and Experience Requirements

-) Minimum of bachelor's degree in field related to the job responsibilities is required, Master's preferred.
-) One - two years of related experience including program implementation, management, reporting, evaluation
-) Or any equivalent combination of education, experience, and training that provides the required knowledge, skills, and abilities

Competencies Required

-) Knowledge of grant coordination procedures preferred.
-) Awareness of co-occurring populations (Mental Health, Substance Use Disorders) preferred.

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-) Must be able to effectively communicate, written, oral and electronic skills, with various populations, program participants and professional colleagues required.
-) Ability to organize, prioritize and document in a timely manner required.
-) Ability to troubleshoot and identify resources required.
-) Public speaking skills required.
-) Must maintain confidentiality.
-) Knowledge of applicable laws, regulations, policies and procedures and ability to interpret and disseminate information
-) Ability to set expectations, provide guidance and monitor progress toward goals
-) Skill in evaluating information to determine compliance with standards
-) Ability to maintain composure and display tact and professionalism in all interactions
-) Skill in resolving conflict and negotiating
-) Ability to keep commitments and take responsibility for own actions
-) Knowledge of instructional design and presentation methods
-) Knowledge of media production, communication and dissemination techniques and methods; including alternative ways to inform via written, oral and visual media
-) Skill in meeting quality standards and identifying ways to improve services
-) Ability to translate concepts and information into easily understandable reports or materials
-) Ability to organize, prioritize and plan work activities and projects to meet deadlines
-) Ability to make timely decisions using sound and accurate judgment within specified constraints
-) Ability to express ideas effectively and adapt message to audience orally and in writing
-) Ability to identify and find solutions to complex problems
-) Ability to effectively work on multiple projects at one time and adapt quickly to changing demands
-) Ability to work independently with minimal supervision and maintain working relationship to collaborate as part of a team
-) Attention to detail and quality
-) Ability to behave ethically, honestly and with integrity

Physical Demands and Work Environment

The physical demands and work environment described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Duties require sufficient mobility to work in a normal office setting and use standard office equipment including a computer, vision to read printed materials and a computer screen and hearing and speech sufficient to communicate in person or over the telephone.

Special Position Requirements

This position requires travel within the CMHPSM region and to meetings outside of the region when requested.

Please note this job description is not designed to cover or contain a comprehensive listing of activities, duties or responsibilities that are required of the employee for this job. Duties, responsibilities and activities may change at any time with or without notice.

This document does not create an employment contract, implied or otherwise, other than an "at will" relationship.

This job description has been approved by:

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Chief Executive Officer _____

Date _____

Position authorized by CMHPSM Regional Board

Date _____

Employee signature below constitutes employee's understanding of the requirements, essential functions and duties of the position.

Employee _____

Date _____



Regional Board Action Request – Vendor Contracts

Board Meeting Date: August 8, 2018

Action(s) Requested: Approval of the vendor purchases listed below.

Organization - Background	Term	Funding Amount	Funding Source	Agreement Type
Home of New Vision – Increase in PROJECT ASSERT peer services by 1.0 FTE in emergency room (Trinity).	7/1/2018 - 9/30/2018	Increase of \$54,302 from \$35,868 to \$90,170	State Targeted Response Grant Funded	Amendment
Catholic Charities of Southeast Michigan – Increase in PROJECT ASSERT peer services by 1.0 FTE in emergency room (Promedica).	7/1/2018 - 9/30/2018	Increase of \$50,023 from \$33,015 to \$83,038	State Targeted Response Grant Funded	Amendment

Recommend: Approval