# COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN SPECIAL BOARD MEETING

Patrick Barrie Room

**Dial-in Number Options:** 

Meeting ID: 816 3878 1508

3005 Boardwalk Dr., Ste. 200, Ann Arbor, MI

Thursday, September 22, 2022

1-312-626-6799; 1-646-518-9805; or

6:00 PM

1-470-250-9358

## Join by Computer:

https://us02web.zoom.us/j/81638781508 Please wait to be admitted from the Zoom

waiting room at 6:00 pm.



#### Agenda

/ igene		<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 8-10-2022 Regular Meeting and Waive the Reading Thereof {Att. #1}	2 min
V.	Audience Participation (5 minutes per participant)	
VI.	Old Business  a. Board Information: August Finance Report – FY2022 as of July 31st {Att. #2}	20 min
VII.	New Business  a. Board Action - FY2023 Budget & Contracts {Att. #3,3a,3b,3c,3d,3e}  b. Board Action - Employee Handbook {Att. #4,4a}  c. Board Action - Erika Behm 5-Year Anniversary Recognition {Att. #5}  d. Board Action - Election Chair/Committee for October Officers Election {Att. #	30 min
VIII.	Reports to the CMHPSM Board  a. Report from the SUD Oversight Policy Board (OPB) {Att. #7}  b. CEO Report to the Board {Att. #8}	10 min
IX.	Board Discussion - CEO Contract Update	
Χ.	Adjournment	

#### **CMHPSM Mission Statement**

# COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN REGULAR BOARD MEETING MINUTES

August 10, 2022



Members Present: Judy Ackley (remote), Molly Welch Marahar, Jim Neumann, Randy

Richardville, Alfreda Rooks, Mary Serio, Sharon Slaton, Holly Terrill,

Ralph Tillotson

**Members Absent:** Roxanne Garber, Bob King, Sandy Libstorff, Katie Scott

Staff Present: Kathryn Szewczuk, Stephannie Weary, James Colaianne, CJ

Witherow, Matt Berg, Lisa Jennings, Trish Cortes, Nicole Adelman,

Connie Conklin, Alyssa Tumolo

#### **Guests Present:**

I. Call to Order

Meeting called to order at 6:01 p.m. by Board Chair S. Slaton.

- II. Roll Call
  - Quorum confirmed.
- III. Consideration to Adopt the Agenda as Presented

Motion by R. Tillotson, supported by M. Welch Marahar, to approve the agenda as amended

**Motion carried** 

- Agenda item c in section VIII, Reports to the Board, tabled until September.
- IV. Consideration to Approve the Minutes of the 7-13-2022 Regular Meeting and Waive the Reading Thereof

Motion by M. Welch Marahar, supported by M. Serio, to approve the minutes of the 7-13-2022 regular meeting and waive the reading thereof

Motion carried

V. Audience Participation

None

- VI. Old Business
  - a. Board Information: July Finance Report FY2022 as of June 30th
    - M. Berg presented. Discussion followed.
- VII. New Business
  - a. Board Information: Stigma Training
    - Presented by A. Tumolo.
  - b. Board Information: Preliminary FY2023 Budget
    - M. Berg presented. Discussion followed.
  - c. Board Information: Employee Engagement Committee
    - J. Colaianne presented.

#### **CMHPSM Mission Statement**

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

Attachment #1 – September 2022

- The Employee Engagement Committee will target some areas, based on the survey, to focus on.
- The Regional Board is not opposed to the survey schedule moving to every 12 months.

#### VIII. Reports to the CMHPSM Board

- a. Board Information: SUD Oversight Policy Board
  - At the recent OPB meeting, the board discussed PA2 and the possibility of shifting some programs to other funding sources. The OPB also reviewed access data across the region.
- b. Board Information: CEO Report to the Board
  - The office continues to be in the yellow phase.
  - Regular staff meetings continue to happen.
  - No legislature updates, no movement of bills is expected until at least the fall.
- c. Board Information: FY2022 Quality Assessment Performance Improvement Program Status Update tabled until September 2022.

#### IX. Adjournment

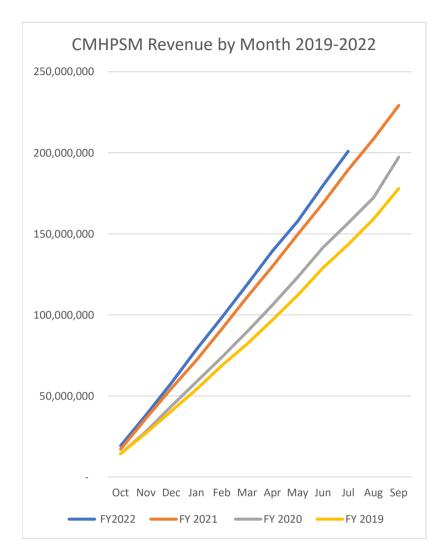
Motion by J. Neumann, supported by A. Rooks, to adjourn the meeting Motion carried

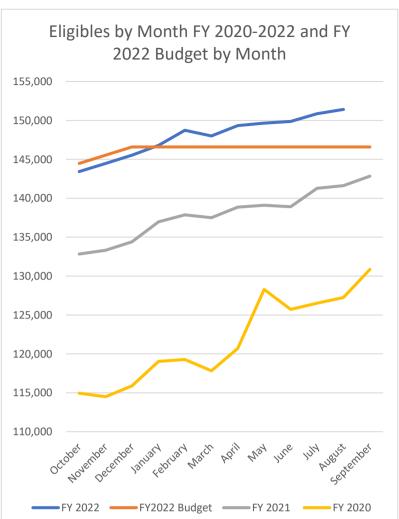
Meeting adjourned at 7:17 p.m.

Sandra Libstorff, CMHPSM Board Secretary



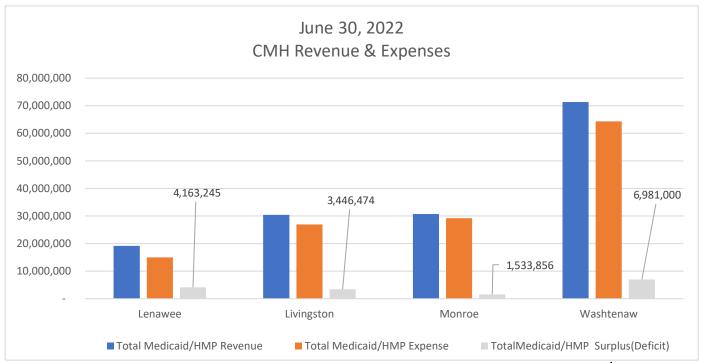
# Community Mental Health Partnership of Southeast Michigan Financial Summary for July 31, 2022





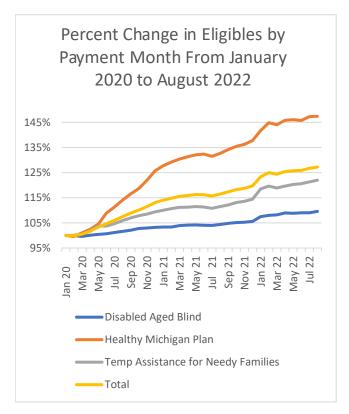
Operating Activities	Budget R1	YTD	YTD	Actual	Percent	Projected	Projected
	FY 2022	Budget	Actual	to Budget	Variance	Year-End	to Budget
MH Medicaid Revenue	226,405,583	175,351,880	178,222,102	2,870,221	1.6%	225,780,898	(624,685)
MH Medicaid Expenses	209,462,928	170,889,463	176,714,422	(5,824,959)	-3.4%	209,792,995	330,067
MH Medicaid Net	16,942,655	4,462,417	1,507,679	(2,954,738)	-66.2%	15,987,903	(954,752)
SUD/Grants Revenue	25,422,223	18,836,959	20,036,904	1,199,944	6.4%	23,860,931	(1,561,292)
SUD/Grants Expenses	20,734,080	16,995,291	16,097,420	897,870	5.3%	14,454,400	(6,279,680)
SUD/Grants Net	4,688,143	1,841,669	3,939,483	2,097,815	113.9%	9,406,531	4,718,388
PIHP							
PIHP Revenue	3,195,822	2,740,769	2,704,552	(36,217)	-1.3%	2,945,582	(250,240)
PIHP Expenses	2,983,351	2,580,377	2,224,657	355,719	13.8%	2,208,180	(775,171)
PIHP Total	212,471	160,393	479,895	319,502	199.2%	737,402	524,931
Total Revenue	255,023,628	196,929,609	200,963,557	4,033,948	2.0%	252,587,411	(2,436,217)
Total Expenses	233,180,359	190,465,131	195,036,500	(4,571,369)	-2.4%	226,455,575	(6,724,784)
Total Net	21,843,269	6,464,478	5,927,057	(537,421)	-8.3%	26,131,836	4,288,567

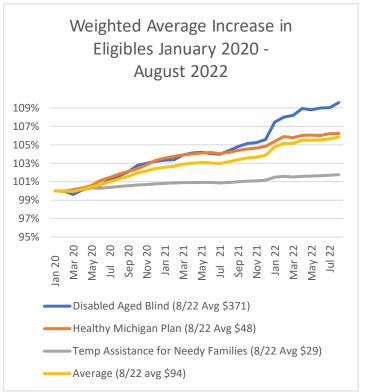
# Regional CMH Revenue and Expenses Regional Charts



Preliminary June 2022
Total Medicaid/HMP Revenue
Total Medicaid/HMP Expense
TotalMedicaid/HMP Surplus(Deficit)
Surplus Percent of Revenue

Lenawee	Livingston	Monroe	Washtenaw	Region
19,159,871	30,392,749	30,707,817	71,308,596	151,569,033
14,996,626	26,946,275	29,173,961	64,327,596	135,444,458
4,163,245	3,446,474	1,533,856	6,981,000	16,124,575
22%	11%	5%	10%	11%





### Community Mental Health Partnership of Southeast Michigan Preliminary Statement of Revenue and Expenses Notes Period Ending July 31, 2022

#### **Summary Page**

- 1. Operating cash was \$25,243,518 at the end of July 2022 compared to \$20,646,915 at the end of July 2021. The July 2022 number includes \$15,247 invested in CDs with the Bank of Ann Arbor.
- 2. Overall, the PIHP surplus line is (6.8%) under budget due to the board approved May stabilization payment.

#### Medicaid Mental Health

- 1. Medicaid revenue remains slightly above budget due to increased Medicaid eligible individuals in the Region.
- 2. A meeting is scheduled for September 9<sup>th</sup> on allocating CCBHC revenue and expenses. We hope to update the board at the next meeting.

#### Medicaid & Grant - SUD

- 1. SUD revenue totals are 6.4% over budget. Grant funding continued to gain momentum in July.
- 2. Opioid Health Homes is under budget for both revenue and expenses currently. OHH billings have been steadily increasing over the last three months
- 3. SUD Admin spending is 7.4% over budget. Overall SUD spending is 5.3% under budget.
- 4. Healthy Michigan SUD and Medicaid SUD funding continues to exceed budget resulting in the SUD surplus being 78.3% over budget.

#### PIHP

- 1. PIHP Admin spending is 13.8% under budget.
- 2. Overall, revenue is slightly over budget and expenses are under budget, this results in the net surplus being 199.2% over budget.

#### FY 2018 and FY 2019 Deficit Update

- 1. MDHHS recently sent an email telling us that our prior year FSRs submitted with a negative ISF are under review.
- 2. The FY 2021 Financial audit lists the following amounts related to the FY 2018 and FY 2019 deficits:

Due from MDHHS – FY18 State Shared Risk	\$ 7,517,412
Due from MDHHS – FY19 State Shared Risk	3,479,703
Due to Monroe CMHA	3,545,221
Due to Washtenaw County CMH	7,016,216
Total Due	\$ 21,558,552

# Community Mental Health Partnership of Southeast Michigan Preliminary Statement of Revenues and Expenditures For the Period Ending July 31, 2022

	Budget R1	YTD	YTD	Actual	Percent	Projected
	FY 2022	Budget	Actual	O(U) Budget	Variance	Year-End
MEDICAID						
MEDICAID REVENUE	400 000 004	04 400 440	00.400.000	4 704 000	4.007	400 000 004
Medicaid (b) & 1115i	109,682,931	91,402,443	93,163,839	1,761,396	-1.9%	109,682,931
Medicaid Waivers	50,399,000	41,999,167	42,821,655	822,488	-2.0%	50,399,000
Healthy Michigan Revenue	17,334,370	14,445,308	14,897,756	452,448	-3.1%	17,334,370
Medicaid Autism Prior Year Carry Forward	15,284,485 13,716,339	12,737,071	12,455,324	(281,747)	2.2%	15,284,485
Behavioral Health Home	13,710,339	-	91,632	-		13,716,339
CCBHC	4,100,000	3,416,667	3,476,364	5,482,913	-160.5%	4,100,000
DCW Revenue	12,388,728	8,935,273	8,899,580	(5,458,909)	61.1%	12,388,728
HRA MCAID Revenue	2,000,000	1,333,024	1,082,928	(250,096)	18.8%	2,000,000
HRA HMP Revenue	1,500,000	1,082,928	1,333,024	250,096	-23.1%	1,500,000
Medicaid Revenue	226,405,853	175,351,880	178,222,102	2,870,221	-1.6%	226,405,853
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MEDICAID EXPENDITURES						
IPA MCAID	1,881,435	1,318,395	1,318,395	0	0.0%	1,881,435
IPA HMP	206,960	146,488	146,488	(0)	0.0%	206,960
HRA MC	2,000,000	1,333,024	1,333,024	-	0.0%	2,000,000
HRA HMP	1,500,000	1,082,928	1,082,928	-	0.0%	1,500,000
Lenawee CMH						-
Medicaid (b) & 1115i	12,231,897	10,193,247	10,239,444	(46,196)	-0.5%	12,231,897
Medicaid Waivers	5,286,571	4,405,476	4,443,059	(37,584)	-0.9%	5,286,571
Healthy Michigan Expense	3,939,840	3,283,200	3,237,004	46,197	1.4%	3,939,840
Autism Medicaid	1,104,200	920,167	920,167		0.0%	1,104,200
DCW Expense	2,007,084	1,274,339	1,592,924	(318,585)	-25.0%	2,007,084
Stabilization	350,000	350,000	756,665	(406,665)		350,000
DHIP	24.040.502	-	43,111	(43,111)	2.00/	86,221
Lenawee CMH Total	24,919,592	20,426,429	21,232,374	(805,944)	-3.9%	25,005,814
Livingston CMH						
Medicaid (b) & 1115i	19,292,732	16,077,277	16,155,665	(78,388)	-0.5%	19,292,732
Medicaid Waivers	8,789,844	7,324,870	7,219,053	105,817	1.4%	8,789,844
Healthy Michigan Expense	3,512,381	2,926,984	2,848,596	78,388	2.7%	3,512,381
Autism Medicaid	4,902,086	4,085,072	4,085,072	-	0.0%	4,902,086
DCW Expense	2,563,571	1,627,663	2,034,579	(406,916)	-25.0%	2,563,571
Stabilization	700,000	529,915	1,079,682	(549,767)		700,000
DHIP			167,456	(167,456)	2 101	-
Livingston CMH Total	39,760,614	32,571,781	33,590,103	(1,018,322)	-3.1%	39,760,614
Monroe CMH						
Medicaid (b) & 1115i	22,010,469	18,342,058	18,473,081	(131,023)	-0.7%	22,010,469
Medicaid Waivers	8,979,416	7,482,847	7,603,872	(121,026)	-1.6%	8,979,416
Healthy Michigan	2,738,896	2,282,414	2,151,391	131,023	5.7%	2,738,896
Autism Medicaid	2,173,235	1,811,029	1,811,029	-	0.0%	2,173,235
DCW Expense	3,246,919	2,061,533	2,576,916	(515,383)	-25.0%	3,246,919
Stabilization	700,000	673,586	1,305,768	(632,182)		700,000
DHIP		-	33,158	(33,158)		-
Monroe CMH Total	39,848,935	32,653,466	33,955,215	(1,301,749)	-4.0%	39,848,935
Washtenaw CMH						
Medicaid (b) & 1115i	44,526,405	37,105,338	37,426,711	(321,374)	-0.9%	44,526,405
Medicaid Waivers	28,417,034	23,680,862	23,347,580	333,282	1.4%	28,417,034
Healthy Michigan Expense	6,284,880	5,237,400	4,916,028	321,372	6.1%	6,284,880
Autism Medicaid	5,886,723	4,905,603	4,905,602	0	0.0%	5,886,723
DCW Expense	8,421,349	5,346,888	6,683,610	(1,336,722)	-25.0%	8,421,349
CCBHC	4,059,000	3,382,500	3,363,889	18,611	0.6%	4,059,000
Stabilization	1,750,000	1,698,362	3,386,704	(1,688,342)		1,750,000
DHIP		-	25,771	(25,771)		-
Washtenaw CMH Total	99,345,391	81,356,952	84,055,896	(2,698,943)	-3.3%	99,345,391
Medicaid Expenditures	209,462,928	170,889,463	176,714,422	(5,824,959)	-3.4%	213,608,150
Medicaid Total	16,942,925	4,462,417	1,507,679	(2,954,738)	-66.2%	12,797,703
modicald (Otal	10,342,323	7,702,417	1,301,019	(2,334,130)	-00.2 /0	12,131,103

# Community Mental Health Partnership of Southeast Michigan Preliminary Statement of Revenues and Expenditures For the Period Ending July 31, 2022

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	Budget R1 FY 2022	YTD Budget	YTD Actual	Actual O(U) Budget	Percent Variance	Projected Year-End
SUD/GRANTS	F1 2022	Buuget	Actual	O(0) Budget	variance	rear-End
SUD/GRANTS REVENUE						
Healthy Michigan Plan SUD	9,742,339	8,118,616	8,890,772	772,156	9.5%	9,742,339
Medicaid SUD	3,271,563	2,726,303	3,038,728	312,425	11.5%	3,271,563
SUD DCW	803,971	570,809	656,123	85,313	14.9%	803,971
PA2 - Tax Revenue (Est)	1,800,000	899,663	1,391,724	492,061	35.4%	1,800,000
PA2 - Use of Reserve (Est)	1,414,391	426,603	621,995	195,392	31.4%	1,414,391
Federal/State Grants	7,914,959	5,699,133	5,297,966	(401,166)	-7.0%	7,914,959
Opioid Health Homes	475,000	395,833	139,596	(256,237)	-183.6%	475,000
SUD/Grants REVENUE	25,422,223	18,836,959	20,036,904	<b>1,199,944</b>	6.4%	25,422,223
SUD/GRANTS EXPENDITURES				0		
SUD Administration				· ·		
Salaries & Fringes	1,129,367	941,139	910,229	(30,911)	-3.3%	1,129,367
Contracts	276,200	230,167	261,197	31,030	13.5%	276,200
Board Expense	1,000	833	99	(734)	-88.1%	1,000
Other Expenses	78,342	65,285	157,327	92,042	141.0%	78,342
SUD Administration	1,484,909	1,237,424	1,328,853	91,428	7.4%	1,484,909
Lenawee SUD Services	2,515,259	2,096,050	1,817,771	(278,278)	-13.3%	2,515,259
Livingston SUD Services	2,421,264	2,017,720	1,837,132	(180,589)	-9.0%	2,421,264
Monroe SUD Services	2,785,632	2,321,360	2,531,114	209,754	9.0%	2,785,632
Washtenaw SUD Services	6,194,851	5,162,376	5,986,439	824,063	16.0%	6,194,851
Opioid Health Homes	403,982	53,246	76,516	23,270	43.7%	403,982
Veteran Navigation COVID Grants	180,000	150,000	123,341	(26,659)	-17.8%	180,000
SOR II	2,654,581 1,190,000	2,212,151 991,667	1,055,108 835,916	(1,157,043) (155,751)	-52.3% -15.7%	2,654,581
Gambling Prevention Grant	200,000	166,667	42,017	(124,649)	-74.8%	1,190,000 200,000
Tobacco	4,000	3,630	3,630	(124,049)	-74.076	4,000
Women's Specialty Services	699,601	583,001	459,584	(123,417)	-21.2%	699,601
SUD/Grants Expenditures	20,734,080	16,995,291	16,097,420	897,870	-5.3%	20,734,080
SLID/Grante Total	4,688,143	1,841,669	3,939,483	2,097,815	113.9%	4,688,143
SUD/Grants Total	7,000,170	1,041,003	0,000,400			4,000,140
	4,000,140	1,041,003	0,000,400		233370	4,000,140
PIHP	4,000,140	1,041,003	0,303,400			4,000,140
PIHP PIHP REVENUE			·	(41 707)		
PIHP PIHP REVENUE Incentives (Est)	2,002,943	1,619,119	1,577,413	(41,707)	-2.6%	6,309,651
PIHP PIHP REVENUE Incentives (Est) Local Match	2,002,943 940,504	1,619,119 940,504	1,577,413 940,504	· -	-2.6% 0.0%	6,309,651 3,762,016
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income	2,002,943 940,504 252,375	1,619,119 940,504 181,146	1,577,413 940,504 186,635	- 5,489	-2.6% 0.0% 3.0%	6,309,651 3,762,016 746,541
PIHP PIHP REVENUE Incentives (Est) Local Match	2,002,943 940,504	1,619,119 940,504	1,577,413 940,504	· -	-2.6% 0.0%	6,309,651 3,762,016
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income	2,002,943 940,504 252,375	1,619,119 940,504 181,146	1,577,413 940,504 186,635	- 5,489	-2.6% 0.0% 3.0%	6,309,651 3,762,016 746,541
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue	2,002,943 940,504 252,375 <b>3,195,822</b>	1,619,119 940,504 181,146 <b>2,740,769</b>	1,577,413 940,504 186,635 <b>2,704,552</b>	- 5,489	-2.6% 0.0% 3.0% -1.3%	6,309,651 3,762,016 746,541 <b>10,818,207</b>
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504	1,619,119 940,504 181,146 <b>2,740,769</b>	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504	5,489 (36,217)	-2.6% 0.0% 3.0% -1.3%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295	1,619,119 940,504 181,146 <b>2,740,769</b> - 940,504 907,746	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041	5,489 (36,217)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354	1,619,119 940,504 181,146 <b>2,740,769</b> - 940,504 907,746 503,628	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735	5,489 (36,217)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5% -43.1%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198	1,619,119 940,504 181,146 <b>2,740,769</b> - 940,504 907,746 503,628 226,832	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584	5,489 (36,217) (31,704) (216,893) (106,248)	-2.6% 0.0% 3.0% -1.3% -0.0% -3.5% -43.1% -46.8%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940 482,334
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354	1,619,119 940,504 181,146 <b>2,740,769</b> - 940,504 907,746 503,628	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735	5,489 (36,217)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5% -43.1%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198	1,619,119 940,504 181,146 <b>2,740,769</b> - 940,504 907,746 503,628 226,832	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584	5,489 (36,217) (31,704) (216,893) (106,248)	-2.6% 0.0% 3.0% -1.3% -0.0% -3.5% -43.1% -46.8%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940 482,334
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198 <b>2,981,351</b>	1,619,119 940,504 181,146 <b>2,740,769</b> 940,504 907,746 503,628 226,832 <b>2,578,710</b>	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b>	(31,704) (216,893) (106,248) (354,846)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5% -43.1% -46.8%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940 482,334 <b>8,895,456</b>
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198 <b>2,981,351</b> 2,000 <b>2,983,351</b>	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b> 793	(31,704) (216,893) (106,248) (354,846) (873)	-2.6% 0.0% 3.0% -1.3%  0.0% -3.5% -43.1% -46.8%  13.8%  -52.4%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940 482,334 <b>8,895,456</b> 2,000
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198 <b>2,981,351</b>	1,619,119 940,504 181,146 <b>2,740,769</b> 940,504 907,746 503,628 226,832 <b>2,578,710</b>	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b>	5,489 (36,217) (31,704) (216,893) (106,248) (354,846)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5% -43.1% -46.8% 13.8%	6,309,651 3,762,016 746,541 10,818,207 3,762,016 3,504,166 1,146,940 482,334 8,895,456
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198 <b>2,981,351</b> 2,000 <b>2,983,351</b>	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b> 793	(31,704) (216,893) (106,248) (354,846) (873)	-2.6% 0.0% 3.0% -1.3%  0.0% -3.5% -43.1% -46.8%  13.8%  -52.4%	6,309,651 3,762,016 746,541 <b>10,818,207</b> 3,762,016 3,504,166 1,146,940 482,334 <b>8,895,456</b> 2,000
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense  PIHP Expenditures  PIHP Total  Organization Total	2,002,943 940,504 252,375 <b>3,195,822</b> 940,504 1,164,295 604,354 272,198 <b>2,981,351</b> 2,000 <b>2,983,351</b>	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b> 793 <b>2,224,657</b>	5,489 (36,217)  (31,704) (216,893) (106,248) (354,846) (873) (355,719)	-2.6% 0.0% 3.0% -1.3% 0.0% -3.5% -43.1% -46.8% 13.8% -52.4%	6,309,651 3,762,016 746,541 10,818,207 3,762,016 3,504,166 1,146,940 482,334 8,895,456 2,000 8,897,456 1,920,751
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense  PIHP Expenditures  PIHP Total  Organization Total Totals	2,002,943 940,504 252,375 3,195,822 940,504 1,164,295 604,354 272,198 2,981,351 2,000 2,983,351 212,471 21,843,539	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377 160,393	1,577,413 940,504 186,635 2,704,552 940,504 876,041 286,735 120,584 2,223,864 793 2,224,657 479,895 5,927,057	5,489 (36,217)  (31,704) (216,893) (106,248) (354,846) (873)  (355,719)  319,502	-2.6% 0.0% 3.0% -1.3%  0.0% -3.5% -43.1% -46.8% 13.8%  13.8%  199.2%  -8.3%	6,309,651 3,762,016 746,541 10,818,207 3,762,016 3,504,166 1,146,940 482,334 8,895,456 2,000 8,897,456 1,920,751
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense  PIHP Expenditures  PIHP Total  Organization Total  Totals Revenue	2,002,943 940,504 252,375 3,195,822 940,504 1,164,295 604,354 272,198 2,981,351 2,000 2,983,351 212,471 21,843,539	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377 160,393 6,464,478	1,577,413 940,504 186,635 <b>2,704,552</b> 940,504 876,041 286,735 120,584 <b>2,223,864</b> 793 <b>2,224,657</b> 479,895 5,927,057	5,489 (36,217)  (31,704) (216,893) (106,248) (354,846) (873)  (355,719)  319,502  (537,421)	-2.6% 0.0% 3.0% -1.3%  0.0% -3.5% -43.1% -46.8%  13.8%  13.8%  199.2%  -8.3%	6,309,651 3,762,016 746,541 10,818,207 3,762,016 3,504,166 1,146,940 482,334 8,895,456 2,000 8,897,456 1,920,751 19,406,598
PIHP PIHP REVENUE Incentives (Est) Local Match Other Income PIHP Revenue  PIHP EXPENDITURES PIHP Admin Local Match Salaries & Fringes Contracts Other Expenses PIHP Admin Board Expense  PIHP Expenditures  PIHP Total  Organization Total Totals	2,002,943 940,504 252,375 3,195,822 940,504 1,164,295 604,354 272,198 2,981,351 2,000 2,983,351 212,471 21,843,539	1,619,119 940,504 181,146 2,740,769 940,504 907,746 503,628 226,832 2,578,710 1,667 2,580,377 160,393	1,577,413 940,504 186,635 2,704,552 940,504 876,041 286,735 120,584 2,223,864 793 2,224,657 479,895 5,927,057	5,489 (36,217)  (31,704) (216,893) (106,248) (354,846) (873)  (355,719)  319,502	-2.6% 0.0% 3.0% -1.3%  0.0% -3.5% -43.1% -46.8% 13.8%  13.8%  199.2%  -8.3%	6,309,651 3,762,016 746,541 10,818,207 3,762,016 3,504,166 1,146,940 482,334 8,895,456 2,000 8,897,456 1,920,751



# FY2023 BUDGET

OCTOBER I, 2022 – SEPTEMBER 30, 2023

**SEPTEMBER 14, 2022** 

## **MISSION**

Through effective partnerships, the CMHPSM ensures and supports the provision of high-quality integrated care that is cost effective and focuses on improving the health, wellness and quality of life of people living in our region.



## **VISION**

■ The CMHPSM shall strive to address the challenges confronting people living in our region by influencing public policy and participating in initiatives that reduce stigma and disparities in health care delivery while promoting recovery and wellness.



## **VALUES**

- Strength Based and Recovery Focused
- Trustworthiness and Transparency
- Accountable and Responsible
- Shared Governance
- Innovative and Data Driven Decision Making
- Learning Organization



## **MENTAL HEALTH SERVICES**

## **PIHP Retained Functions**

# **Delegated Functions**



- Oversight Monitoring of all PIHP Retained and Delegated Functions
- PIHP Regional Financial Management
- Regional Licensed Independent Practitioner Credentialing



- Service Access and Pre-Authorization of Medically Necessary Services
- Clinical Care Coordination and Community Collaboration
- Customer Services & Rights and Responsibilities
- Utilization Management
- Provider Network Management



# CMHPSM REVENUE PROJECTION METHODOLOGY

- Continued Economic / COVID Impact on Medicaid Eligible Individuals
  - Public Health Emergency End Unknown
    - MDHHS has indicated that the rates will be adjusted if the PHE ends during FY2023
  - Decrease in rates due to continued higher eligible enrollment than last fiscal year
  - We expect revenue to remain mostly flat for FY2023 in comparison from FY2022.



## **Direct Care Worker Premium Pay**

- The FY2022 direct care worker premium pay has been continued at the same level for FY2023.
- The revenue required to continue the \$2.35/hour direct care worker premium pay has been included in our rates from 10/1/2022 through 9/30/2023.
- Providers delivering direct care worker premium pay eligible services must be paid the additional \$2.35/hour directly, and \$0.29/hour goes to the provider for premium pay related employer costs.
- Applicable provider fee schedules will continue to include the \$2.64/hour premium pay increase for the entirety of FY2023.



# **Assumptions for Mental Health Budget**

- The CMHSPs will continue to receive revenue with the same methodology used in FY2022. Most Medicaid and Healthy Michigan revenue will be distributed in I/I2<sup>th</sup> monthly payments at the levels indicated within the budget. Waiver related payments will be passed through to the appropriate CMHSP after the CMHPSM administrative expense of I.57% is deducted.
- The CMHSPs will receive additional budgeted funding for FY2023.



# **Assumptions for PIHP Administration**

- Salaries are budgeted at appropriate tier placements and scheduled increases, including a 4% cost of living adjustment (COLA) for all employees on the pay tiers effective October 1, 2022. The CMHPSM CEO is the only employee not on the CMHPSM pay tier structure and has a separately negotiated contract.
- Pay Tier I was also adjusted upwards by an additional 2% after reviewing similar positions within similar industries.
- Fringe benefits are budgeted at 33% of salaries. Insurance Provider Assessment (IPA) tax is budgeted based on the number of prior year eligible individuals covered on a monthly basis. With the significant increase in eligibles during FY2022 this tax will be higher than FY2022 amounts which were based on FY2021 eligible levels.
- The administrative budget includes 28 full-time previously approved positions and two previously approved part-time positions. We have also budgeted a grant funded 1.0 FTE SUD care coordinator position and plan on bringing the job description to the Board of Directors in October 2022 for position approval.
- The state has not provided an amount for Local Match as FY2023 state budget negotiations are ongoing.
   Local Match is budgeted at the same level as FY2022.



Current Salary Tiers Effective: 4/1/2022

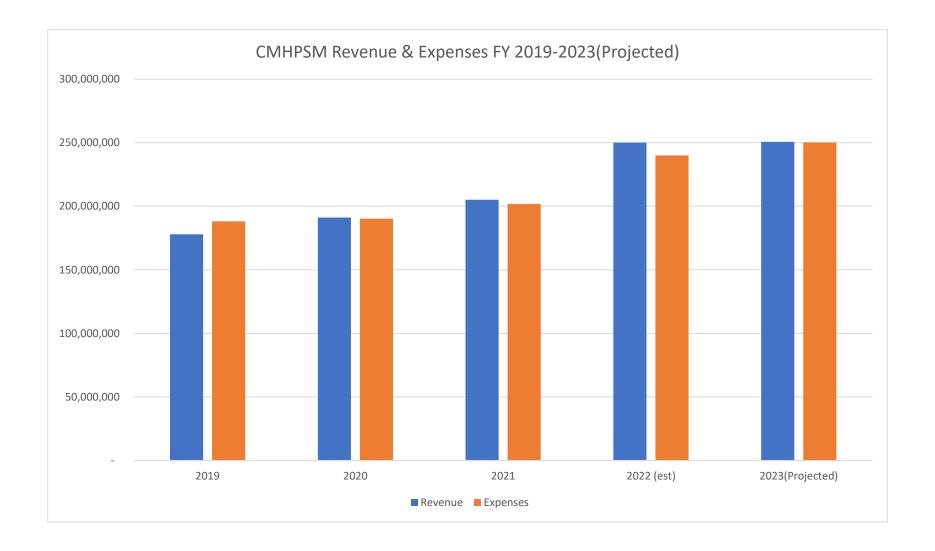
Tier	Entry Level	Step I	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
I	\$38,506.00	\$41,600.00	\$42,978.00	\$44,356.00	\$46,306.00	\$48,256.00	\$50,206.00	\$52,156.00	\$54,106.00
2a	\$51,662.00	\$54,392.00	\$57,148.00	\$59,878.00	\$62,608.00	\$65,338.00	\$68,068.00	\$70,798.00	\$73,528.00
2ь	\$54,756.00	\$57,824.00	\$60,918.00	\$63,986.00	\$67,080.00	\$70,148.00	\$73,242.00	\$76,336.00	\$79,404.00
3	\$62,426.00	\$66,196.00	\$69,966.00	\$73,736.00	\$77,506.00	\$81,276.00	\$85,046.00	\$88,816.00	\$92,586.00
4	\$78,026.00	\$82,316.00	\$86,606.00	\$90,896.00	\$95,186.00	\$99,476.00	\$103,792.00	\$108,082.00	\$112,372.00

Proposed COLA and Tier I Salary Adjustment Effective: 10/1/2022

	Tier	Entry Level	Step I	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
	l	\$40,820.00	\$44,096.00	\$45,552.00	\$47,008.00	\$49,088.00	\$51,142.00	\$53,222.00	\$55,276.00	\$57,356.00
У	2a	\$53,716.00	\$56,576.00	\$59,436.00	\$62,270.00	\$65,104.00	\$67,964.00	\$70,798.00	\$73,632.00	\$76,466.00
	2b	\$56,940.00	\$60,138.00	\$63,362.00	\$66,534.00	\$69,758.00	\$72,956.00	\$76,180.00	\$79,378.00	\$82,576.00
	3	\$64,922.00	\$68,848.00	\$72,774.00	\$76,674.00	\$80,600.00	\$84,526.00	\$88,452.00	\$92,378.00	\$96,278.00
	4	\$81,146.00	\$85,618.00	\$90,064.00	\$94,536.00	\$98,982.00	\$103,454.00	\$107,952.00	\$112,398.00	\$116,870.00









The FY 2021 Financial Audit Lists the following amounts remaining from the FY 2018 and FY 2019 deficits.

Due From MDHHS FY 2018 State Shared Risk	7,517,412
Due From MDHHS - FY 20 19 State Shared Risk	3,479,703
Total Due From MDHHS Shared Risk	\$ 10,997,115
Due to Monroe CMHA	3,545,221
Due to Washtenaw CMH	7,016,216
Total Due to CMHs	\$ 10,561,437
Total Due From FY 2018/2019	\$ 21,558,552



## CMHPSM Summary FY2022 Budget with Prior Years

Line	Οī	Bus	iness

Line of business		EV 2022 Drawaged	EV 2022	EV 2024	EV 2020
		FY 2023 Proposed	FY 2022	FY 2021	FY 2020
		Budget	Final Budget	Actuals	Actuals
Behavioral Health-Medicaid					
	Revenue	221,239,514	226,405,853	192,774,266	175,897,546
	Expenses	224,202,551	209,462,928	178,356,506	165,315,759
	Net Activity	(2,963,037)	16,942,925	14,417,761	10,581,787
SA-Medicaid & Grants					
	Revenue	26,232,600	25,422,223	21,706,822	18,790,409
	Expenses	22,804,150	20,734,080	17,550,097	16,579,078
	Net Activity	3,428,450	4,688,143	4,156,725	2,211,331
PIHP Administrative					
	Revenue	3,219,911	3,195,822	3,181,562	144,467
	Expenses	3,197,487	2,983,351	2,824,443	3,051,572
	Net Activity	22,424	212,471	357,119	(2,907,105)
CMHPSM Totals					
	Revenue	250,692,025	255,023,898	217,662,651	194,832,422
	Expenses	250,204,188	233,180,359	198,731,046	184,946,409
	Net Activity	487,837	21,843,539	18,931,605	9,886,013



	Proposed Budget	Budget R1	% Change	\$ Change
	FY 2023	FY 2022	FY22 - FY23	FY22 - FY23
MEDICAID				
MEDICAID REVENUE				
Medicaid (b) & 1115i	109,682,931	109,682,931	0.0%	0
Medicaid Waivers	50,399,000	50,399,000	0.0%	0
Healthy Michigan Revenue	17,334,370	17,334,370	0.0%	0
Medicaid Autism	15,284,485	15,284,485	0.0%	0
Prior Year Cary Forward	10,000,000	13,716,339	-27.1%	(3,716,339)
Behavioral Health Homes	650,000			650,000
ССВНС	2,000,000	4,100,000	-51.2%	(2,100,000)
DCW Revenue	12,388,728	12,388,728	0.0%	0
HRA MCAID Revenue	2,000,000	2,000,000	0.0%	0
HRA HMP Revenue	1,500,000	1,500,000	0.0%	0
Medicaid Revenue	221,239,514	226,405,853	-2.3%	(5,166,339)
MEDICAID EXPENDITURES				
IPA MCAID	2,031,950	1,881,435	8.0%	150,515
IPA HMP	223,517	206,960	8.0%	16,557
HRA MC	2,000,000	2,000,000	0.0%	0
HRA HMP	1,500,000	1,500,000	0.0%	0
Behavioral Health Homes	520,000			520,000
Lenawee CMH Total	27,026,550	24,919,592	8.5%	2,106,957
Livingston CMH Total	42,966,675	39,760,614	8.1%	3,206,061
Monroe CMH Total	43,063,829	39,848,935	8.1%	3,214,893
Washtenaw CMH Total	104,870,030	99,345,391	5.6%	5,524,638
Medicaid Expenditures	224,202,551	209,462,928	7.0%	14,739,622
Medicaid Total	(2,963,037)	16,942,925	-117.5%	(19,905,961)



	Proposed Budget FY 2023	Budget R1 FY 2022	% Change FY22 - FY23	\$ Change FY22 - FY23
SUD/GRANTS	2020			
SUD/GRANTS REVENUE				
Healthy Michigan Plan SUD	9,742,339	9,742,339	0.0%	0
Medicaid SUD	3,271,563	3,271,563	0.0%	-
SUD DCW	803,971	803,971	0.0%	
PA2 - Tax Revenue	1,800,000	1,800,000	0.0%	-
PA2 - Use of Reserve (Est)	890,159	1,414,391	-37.1%	-
Federal/State Grants	9,249,568	7,914,959	16.9%	
Opioid Health Homes	475,000	475,000	0.0%	, ,
SUD/Grants REVENUE	26,232,600	25,422,223	3.2%	
005, 0.a	20,202,000	20, .22,220	0.270	0.0,0.1
SUD/GRANTS EXPENDITURES				
SUD Administration				
Salaries & Fringes	1,244,808	1,129,367	10.2%	115,441
Contracts	309,168	276,200	11.9%	- ,
Board Expense	1,000	1,000	0.0%	- ,
Other Expenses	182,175	78,342	132.5%	-
SUD Administration	1,737,151	1,484,909	17.0%	
	.,,	1, 10 1,000		
Lenawee SUD Services	2,540,415	2,515,259	1.0%	25,156
Livingston SUD Services	2,566,539	2,421,264	6.0%	
Monroe SUD Services	2,838,699	2,785,632	1.9%	·
Washtenaw SUD Services	6,275,876	6,194,851	1.3%	·
Opioid Health Homes	380,000	403,982	-5.9%	
Veteran Navigation	200,000	180,000	11.1%	` ' '
COVID Grants	2,160,575	2,654,581	-18.6%	
SOR II	3,201,294	1,190,000	169.0%	
Gambling Prevention Grant	200,000	200,000	0.0%	
Tobacco	4,000	4,000	0.0%	0
Women's Specialty Services	699,601	699,601	0.0%	0
SUD/Grants Expenditures	22,804,150	20,734,080	10.0%	
SUD/Grants Total	3,428,450	4,688,143	-26.9%	(1,259,694)



	Proposed Budget FY 2023	Budget R1 FY 2022	% Change FY22 - FY23	\$ Change FY22 - FY23
PIHP				
PIHP REVENUE				
Incentives (Est)	2,002,943	2,002,943	0.0%	0
Local Match	940,504	940,504	0.0%	0
Other Income	276,464	252,375	9.5%	24,089
PIHP Revenue	3,219,911	3,195,822	0.8%	24,089
PIHP EXPENDITURES				
PIHP Admin				
Local Match	940,504	940,504	0.0%	
Salaries & Fringes	1,465,246	1,164,295	25.8%	300,951
Contracts	520,386	604,354	-13.9%	(83,968)
Other Expenses	269,351	272,198	-1.0%	(2,847)
PIHP Admin	3,195,487	2,981,351	7.2%	214,136
Board Expense	2,000	2,000	0.0%	0
PIHP Expenditures	3,197,487	2,983,351	7.2%	214,136
PIHP Total	22,424	212,471	-89.4%	(190,047)
Organization Total	487,837	21,843,539	-97.8%	(21,355,702)
<b>T</b>				
Totals	050 000 005	055 000 000	4 70/	(4.004.070)
Revenue	250,692,025	255,023,898	-1.7%	( ) //
Expenses	250,204,188	233,180,359	7.3%	
Net	487,837	21,843,539	-97.8%	(21,355,702)



## CMHPSM Administrative Costs FY2023 Budget Compared to FY 2022 Budget

	FY 2023 Budget					
Object	SUD/Grants	Administration	FY 2023 Budget	FY 2022 Budget R1	\$ Change	% Change
Salaries and Wages	1,183,267.64	1,101,688.57	2,284,956.21	2,062,644.79	222,311.42	10.8%
Fringe Benefits	390,478.32	363,557.23	754,035.55	680,672.78	73,362.77	10.8%
Audits		32,000.00	32,000.00	28,000.00	4,000.00	14.3%
Committee Per Diem	500.00	225.00	725.00	725.00	-	0.0%
Computer Hardware	2,000.00	31,331.18	33,331.18	20,831.18	12,500.00	60.0%
Computer Software	2,500.00	31,328.03	33,828.03	28,828.03	5,000.00	17.3%
Consulting/Contractors	374,993.44	488,385.92	863,379.36	932,687.61	(69,308.25)	-7.4%
Conventions/Conferences	2,213.80	19,655.53	21,869.33	21,869.33	-	0.0%
Employee Travel	42,412.54	25,220.14	67,632.68	65,632.68	2,000.00	3.0%
Employee Development	1,617.20	4,382.80	6,000.00	23,500.00	(17,500.00)	-74.5%
Furniture and Equipment		169.60	169.60	169.60	-	0.0%
Insurance Premiums	8,750.00	8,750.00	17,500.00	17,500.00	-	0.0%
Legal Fees		40,000.00	40,000.00	40,000.00	-	0.0%
Office Space	63,653.34	63,653.34	127,306.68	126,500.00	806.68	0.6%
Operating Supplies/Other	110,815.93	12,423.31	123,239.24	127,096.80	(3,857.56)	-3.0%
Postage	200.00	425.00	625.00	625.00	-	0.0%
Printers/Fax Machines		1,500.00	1,500.00	1,500.00	-	0.0%
Printing and Binding	250.00	1,701.25	1,951.25	1,951.25	-	0.0%
Recruitment		1,000.00	1,000.00	1,000.00	-	0.0%
Repair/MaintEquipment		1,000.00	1,000.00	1,000.00	-	0.0%
Subscriptions and Dues	331.40	11,785.99	12,117.39	12,117.39	-	0.0%
Telephone	9,121.22	13,800.00	22,921.22	22,921.22	-	0.0%
Utilities	2,750.00	2,750.00	5,500.00	5,500.00	-	0.0%
Miscellaneous	250.00	250.00	500.00	500.00	_	0.0%
	2,196,104.84	2,256,982.89	4,453,087.73	4,223,772.67	229,315.06	5.4%

## **CMHPSM FY2023 Budgeted Contracts**

## Administrative Contracts / Letters of Engagement / Vendor

Contractor	Description	Term	FY2022 DNE, Rate or N/A	FY2023 DNE, Rate or N/A
AAIDD	SIS Integration	10/1/22 - 9/30/23	\$ 2,353	\$ 2,353
Boardwalk LLC	Lease for 3005 Boardwalk \$10,608.89/month	10/1/22 – 9/30/23	\$127,306.67 + Utilities	\$131,1256.87 + Utilities
Centria	Private Duty Nursing (PDN) Assessment Services	10/1/22 - 9/30/23	\$75.00 / hr	\$75.00 / hr
Cohl Stoker & Toskey	Attorney Services Retainer (No cost retainer all services billed hourly)	10/1/22 - 9/30/23	\$ 225 / hr.	\$ 225 / hr.
Fuse Technology	Information Technology Systems services	10/1/22 - 9/30/23	\$19,796 / yr.	\$19,796 / yr.
Great Lakes Health Connect	VIPR Health Data Exchange Platform for PIHP regional data sharing.	10/1/22 – 9/30/23	\$ 1,200 / mo.	\$ 1,200 / mo.
Milliman	DRIVE user fee	10/1/22 – 9/30/23	\$1,000 / yr	\$1,000 / yr
MORC	SIS Assessor Training and SIS Assessment Services	10/1/22 – 9/30/23	Training: \$5,175, GP:\$780; IRQR: \$780 Assessments: \$647	Training: \$5,175, GP:\$780; IRQR: \$780 Assessments: \$647
Paychex	Human Resources / Payroll (based upon 26 employees)	10/1/22 - 9/30/23	\$819 / payroll	\$819 / payroll
PCE Systems	CRCT Electronic Health Record	10/1/22 - 9/30/23	\$ 486,900	\$ 486,900
Roslund, Prestage & Company	Audit Services and hourly technical assistance consulting when necessary.	10/1/22 - 9/30/23	\$ 29,150 + \$250/hr. technical assistance	\$ 30,825 + \$275/hr. technical assistance

### **CMHSP Medicaid and Other Funding**

Contractor	Contract Description	Term	Cost Settled Funding
Lenawee CMH	Master CMHSP	10/1/22-9/30/23	Per Funding Budget
Livingston CMH	Master CMHSP	10/1/22-9/30/23	Per Funding Budget
Monroe CMH	Master CMHSP	10/1/22-9/30/23	Per Funding Budget
Washtenaw County	Master CMHSP	10/1/22-9/30/23	Per Funding Budget
Lenawee CMH	Project & Sub Grant	10/1/22-9/30/23	Expense and Revenue
Livingston CMH	Project & Sub Grant	10/1/22-9/30/23	Expense and Revenue

Monroe CMH	Project & Sub Grant	10/1/22-9/30/23	Expense and Revenue
Washtenaw County	Project & Sub Grant	10/1/22-9/30/23	Expense and Revenue

#### **MDHHS / PIHP Revenue Contract**

Revenue Source	Revenue Amount	Term
MDHHS/PIHP Contract	Per Revenue Budget	10/1/22-9/30/23
EGRAMS Grants (MDHHS State Opioid Response III (SOR III) Grant, SUD Administration, Community Grant, COVID Block Grant, American Rescue Plan Act (ARPA), Gambling Prevention, Prevention, State Disability Assistance, SUD Tobacco, SUD Women's Specialty Services, Clubhouse & Veteran's Systems Navigator & Health Home related revenue)	Per Revenue Budget	10/1/22-9/30/23

#### **Other Revenue**

Contractor	Description	Revenue Amount	Term
Washtenaw County	PA2 Funding to CMHPSM	Per Tax Receipts and Revenue Budget	10/1/22-9/30/23

#### SUD Core Provider Services – HMP, Block Grant, Medicaid, PA2

Contractor	Description	Term	FY2022 DNE or N/A	FY2023 DNE or N/A
Lenawee CMH	SUD Core Provider (Cost Settled)	10/1/22-9/30/23	\$ 1,630,268	\$ 1,630,268
Livingston CMH	SUD Core Provider (Cost Settled)	10/1/22-9/30/23	\$ 1,157,271	\$ 1,157,271

#### **SUD Project Contracts**

Fund source will be determined between: Public Act 2 (PA2), Substance Abuse Block Grant (SABG), COVID Block Grant, American Rescue Plan Act (ARPA) or State Opioid Response III (SOR) 3.

County	Contractor	Description	Term	Previous FY2022 Funding	Total FY2023 / Do Not Exceed Funding
Regional	Karen		10/1/22-	\$136,937	\$136,937
	Bergbower & Associates	Synar/ DYTUR Prevention	9/30/23		
Regional	Karen		10/1/22 –	\$4,000	\$4,000
Negional	Bergbower & Associates	Tobacco/ENDS	9/30/23	\$4,000	Ş <del>4</del> ,000
Regional		Telehealth Opioid Use	10/1/22-	\$319,760	\$181,460
	Workit Health	Disorder/Stimulant Use	9/30/23	,	,
		Disorder Treatment			

County	Contractor	Description	Term	Previous FY2022 Funding	Total FY2023 / Do Not Exceed Funding
Regional	University of Michigan	Overdose Education and Naloxone Distribution	10/1/22- 9/30/23	\$48,220	\$150,000
Lenawee	Lenawee ISD	Prevention – Botvins Life Skills/Transitions	10/1/22- 9/30/23	\$0	\$200,000
Lenawee	Lenawee CMHSP	Drug Court Peer Recovery Support	10/1/22- 9/30/23	\$38,960	\$35,626
Lenawee	Lenawee CMHSP	Pathways Engagement Center	10/1/22- 9/30/23	\$510,758	\$419,974
Lenawee	Lenawee CMHSP	Jail Based MAT	10/1/22- 9/30/23	\$0	\$74,800
Lenawee	Lenawee CMHSP	Overdose Education and Naloxone Distribution	10/1/22- 9/30/23	\$0	\$16,500
Lenawee	Parkside Family Counseling	Prevention and Education Groups	10/1/22- 9/30/23	\$42,476	\$42,476
				1	
Livingston	Livingston County Catholic Charities & Livingston Community Prevention	Prevention Services- Project Success, Youth Led Prevention, CMCA, CBSG	10/1/22- 9/30/23	\$423,392	\$420,392
Livingston	Project Livingston	Stepping Stones	10/1/22-	\$546,686	\$606,031
Livingston	СМН	Engagement Center	9/30/23		
Livingston	Livingston CMH	Blended Funding - Wraparound	10/1/22- 9/30/23	\$40,000	\$40,000
Livingston	Livingston CMH	Epidemiologist (with Health Department)	10/1/22- 9/30/23	\$29,000	\$35,000
Livingston	Livingston CMH	Jail Based MAT/MOUD	10/1/22- 9/30/23	\$133,430	\$180,000
Livingston	Livingston CMH	Overdose Education and Naloxone Distribution	10/1/22- 9/30/23	\$0	\$9,500
Livingston	Livingston CMH	Project ASSERT	10/1/22- 9/30/23	\$65,600	\$92,858
Livingston	Recovery Advocates in Livingston	Recovery Community Organization	10/1/22- 9/30/23	\$101,000	\$101,000
Livingston	Recovery Advocates in Livingston	Recovery Housing	10/1/22- 9/30/23	\$48,893	\$48,893
Monroe	Catholic Charities of SE Michigan	St. Joseph Center of Hope – Engagement Center	10/1/22- 9/30/23	\$694,129	\$652,935

County	Contractor	Description	Term	Previous FY2022 Funding	Total FY2023 / Do Not Exceed Funding
Monroe	Catholic Charities of SE Michigan	Recovery Support Services	10/1/22- 9/30/23	\$125,000	\$125,000
Monroe	Catholic Charities of SE Michigan	Prevention Services - Student Prevention Leadership Teams	10/1/22- 9/30/23	\$139,772	\$139,772
Monroe	Catholic Charities of SE Michigan	Overdose Education and Naloxone Distribution	10/1/22- 9/30/23	\$0	\$6,800
Monroe	Catholic Charities of SE Michigan	Project ASSERT	10/1/22- 9/30/23	\$0	\$50,000
Monroe	Catholic Charities of SE Michigan	Recovery Community Organization - RAW	10/1/22- 9/30/23	\$150,000	\$150,500
Monroe	Jefferson School District	Student Assistance Program  – Catch My Breath/Vaping Stops Here	10/1/22- 9/30/23	\$47,515	\$50,000
Monroe	Monroe CMHA	Jail Based MAT/MOUD	10/1/22- 9/30/23	\$350,000	\$382,000
Monroe	Monroe Community Opportunity Program	Adolescent Community Center	10/1/22- 9/30/23	\$375,000	\$100,000
Monroe	Monroe County Intermediate School District	Prevention Services – Nurturing Parents as Teachers	10/1/22- 9/30/23	\$117,469	\$117,469
Monroe	Women Empowering Women	Recovery Housing	10/1/22- 9/30/23	\$48,870	\$97,470
Monroe	Women Empowering Women	Recovery Support Services	10/1/22- 9/30/23	\$34,760	\$72,540
Monroe	Women Empowering Women	Prevention – Celebrating Families	10/1/22- 9/30/23	\$0	\$11,592
Monroe	Ty's House	Recovery Housing	10/1/22- 9/30/23	\$90,000	\$70,000
Monroe	United Way of Monroe County	Prevention Coalition Services	10/1/22- 9/30/23	\$85,000	\$85,000

County	Contractor	Description	Term	Previous FY2022 Funding	Total FY2023 / Do Not Exceed Funding
Washtenaw	Avalon Housing	Harm Reduction & Integrated Care	10/1/22- 9/30/23	\$172,800	\$172,800
Washtenaw	Catholic Social Services of Washtenaw	Prevention Services – CAGE Screenings and Get Connected	10/1/22- 9/30/23	\$76,546	\$76,546
Washtenaw	Dawn Farm	Recovery Supports - Engaging Individuals with OUD	10/1/22- 9/30/23	\$94,216	\$91,800
Washtenaw	Dawn Farm	Recovery Housing	10/1/22- 9/30/23	\$53,880	\$34,160
Washtenaw	Dawn Farm	Recovery Support Services	10/1/22- 9/30/23	\$0	\$150,000
Washtenaw	Eastern Michigan University	Prevention - Prime for Life	10/1/22- 9/30/23	\$67,977	\$90,000
Washtenaw	Eastern Michigan University	Prevention Theatre Collaborative	10/1/22- 9/30/23	\$73,226	\$73,226
Washtenaw	Eisenhower Addiction Recovery Center	Vocational Placement	10/1/22- 9/30/23	\$25,000	\$25,000
Washtenaw	Home of New Vision	Recovery Opioid Outreach Team (ROOT)	10/1/22- 9/30/23	\$167,122	\$167,000
Washtenaw	Home of New Vision	MAT/MOUD Recovery Housing	10/1/22- 9/30/23	\$109,532	\$157,680
Washtenaw	Home of New Vision	Recovery Support Services	10/1/22- 9/30/23	\$413,552	\$150,000
Washtenaw	Home of New Vision	Peers in Recovery Homes	10/1/22- 9/30/23	\$0	\$120,000
Washtenaw	Home of New Vision	Project ASSERT	10/1/22- 9/30/23	\$121,000	\$130,000
Washtenaw	Home of New Vision	Engagement Center	10/1/22- 9/30/23	\$560,664	\$474,990
Washtenaw	Home of New Vision	Recovery Community Organization - WRAP	10/1/22- 9/30/23	\$113,500	\$150,000
Washtenaw	Marie's House of Serenity	Recovery Housing	10/1/22- 9/30/23	\$48,900	\$48,600
Washtenaw	Ozone House Inc.	The Engagement Program	10/1/22- 9/30/23	\$207,714	\$205,514
Washtenaw	St. Joseph Mercy Chelsea	Prevention Services – Project Success	10/1/22- 9/30/23	\$120,046	\$166,935

County	Contractor	Description	Term	Previous FY2022 Funding	Total FY2023 / Do Not Exceed Funding
Washtenaw	Therapeutics	Jail-Based MAT/MOUD	10/1/22- 9/30/23	\$113,850	\$188,200
Washtenaw	Unified – HIV Health & Beyond	Community Outreach and Harm Reduction	10/1/22- 9/30/23	\$300,000	\$200,000
Washtenaw	Unified – HIV Health & Beyond	OUD/Stimulant Use Disorder Recovery	10/1/22- 9/30/23	\$75,000	\$123,000
Washtenaw	Unified – HIV Health & Beyond	Overdose Education and Naloxone Distribution	10/1/22- 9/30/23	\$0	\$10,000

## Women's Specialty Services Combined SABG WSS and COVID BG WSS

County	Contractor	Term	FY2022 Funding	Total FY2023/DNE Funding
Lenawee	Lenawee CMH	10/1/22-9/30/23	\$27,207	\$28,340
Livingston	Livingston CMH	10/1/22-9/30/23	\$141,735	\$140,800
Monroe	Catholic Charities of Southeast Michigan	10/1/22-9/30/23	\$225,747	\$219,920
Washtenaw	Home of New Vision	10/1/22-9/30/23	\$497,984	\$486,030

## **Opioid Health Home Contracts**

Contractor	Description	Term	FY2022 DNE or N/A	FY2023 DNE or N/A	
Family Medical Center	Opioid Health Home	10/1/22-9/30/23	Per OHH Case	Per OHH Case	
raining ividuical center	Opiola Health Home	10/1/22-9/30/23	Rate	Rate	
Packard Health Clinic	Opioid Health Home	10/1/22-9/30/23	Per OHH Case	Per OHH Case	
Packaru nearth Cillic	Opioid Health Home		Rate	Rate	
Passion of Mind	Opinid Health Hama	10/1/22-9/30/23	Per OHH Case	Per OHH Case	
Passion of Millio	Opioid Health Home		Rate	Rate	
Thoropouties	Opinid Health Hama	10/1/22-9/30/23	Per OHH Case	Per OHH Case	
Therapeutics	Opioid Health Home		Rate	Rate	

## Memorandums of Understanding / Coordination Agreements / Data-Use Agreements (No Funding)

Current Medicaid Health Plan Coordination Agreements					
Aetna Health Plan					
Blue Cross Complete					
McLaren Health Plan					
Meridian Health Plan					
Molina Healthcare					
UnitedHealthcare					

Data-Use Agreements
Michigan Department of Health and Human Services (CC360 & Monthly Extract)
Michigan Department of Health and Human Services (SIS Online)
Community Mental Health Services of Livingston County (CC360 & Monthly Extract)
Lenawee Community Mental Health Authority (CC360 & Monthly Extract & SIS Online)
Monroe Community Mental Health Authority (CC360 & Monthly Extract & SIS Online)
Washtenaw County Community Mental Health (CC360 & Monthly Extract & SIS Online)
PCE Systems (CC360 & Monthly Extract)
University of Michigan (Law Resource Services Pilot)
Deerfield Solutions (LOCUS EHR Integration)

### **SUD Fee-For-Service Contracts**

Contractor	FY23-25 Term
Ann Arbor Treatment Center - CRC Health	10/1/22 – 9/30/24
Bear River	10/1/22 – 9/30/24
Catholic Charities of SE Michigan	10/1/22 – 9/30/24
Catholic Social Services of Washtenaw County	10/1/22 – 9/30/24
Dawn Inc	10/1/22 – 9/30/24
Hegira Programs Inc	10/1/22 – 9/30/24
Home of New Vision	10/1/22 – 9/30/24
Kalamazoo Probation Enhancement Program	10/1/22 – 9/30/24
Passion of Mind	10/1/22 - 9/30/24
Personalized Nursing Light House	10/1/22 – 9/30/24
Premier Services	10/1/22 – 9/30/24
Sacred Heart	10/1/22 – 9/30/24
Salvation Army Harbor Light	10/1/22 – 9/30/24
Samaritas	10/1/22-9/30/24
Therapeutics, LLC.	10/1/22 - 9/30/24
Touchstone Services	10/1/22 – 9/30/24
Trinity Health – Greenbrook	10/1/22 – 9/30/24
Women Empowering Women	10/1/22 – 9/30/24

## **FY2023 CMHPSM SUD Fee-For-Service Contract Standard Fee Schedules**

FY2023 SUD Fee-for-Service Contract F			ee Schedule		COVERAGE				10/1/2022- 9/30/2023
_	MOD	SERVICE	DURATION	Rate	MED	НМР	SABG		Difference
<b>CPT</b> 90791		Developer Evaluation	Encounter	\$100.00	<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	from FY22
		Psychiatric Evaluation	Encounter		<b>V</b> ✓	<b>V</b>	<b>✓</b>	<b>∨</b>	-
90792		Psychiatric Evaluation	Encounter	\$175.00	<b>V</b> ✓	<b>V</b>	<b>✓</b>	<b>∨</b>	-
90832		30 minutes of Psychotherapy	Encounter	\$60.00	<b>∨</b>	<b>∨</b>	<b>∨</b>	<b>∨</b>	-
90834		45 minutes of Psychotherapy	Encounter	\$85.00	<b>∨</b>	<b>∨</b>	<b>∨</b>	<b>∨</b>	-
90837		60 minutes of Psychotherapy	Encounter	\$110.00					-
90853	UN	Group Therapy per Session:	Encounter	\$26.00	✓	✓	✓	✓	-
	UP	U modifiers based on number of							
	UQ	group attendees							
	UR								
0.0000	US			400.00					
96372		Therapeutic, prophylactic, diagnostic	Encounter	\$30.00	<b>✓</b>	✓	✓	✓	-
		injection, doctor on site							
		Medication Administration							
		therapeutic, prophylactic, or							
		diagnostic injection (specify							
		substance or drug); subcutaneous or							
07010		intramuscular		ć 40.00			<b>√</b>	<b>✓</b>	
97810		Acupuncture 1 or more needles, initial 15 minutes	Encounter	\$40.00			•		-
97811		Acupuncture 1 or more needles, each additional 15 minutes	Encounter	\$40.00			✓	<b>✓</b>	-
99202		E&M New Patient Med	Encounter	\$75.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99203		E&M New Patient High	Encounter	\$100.00	<b>✓</b>	<b>√</b>	<b>√</b>	<b>✓</b>	_
99204		E&M New Patient High	Encounter	\$120.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99205		E&M New Patient High	Encounter	\$175.00	<b>✓</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99211		E&M Existing Patient No Doc Low	Encounter	\$35.00	<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	_
99212		E&M Existing Patient Low	Encounter	\$45.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99213		E&M Existing Patient Med	Encounter	\$65.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99214		E&M Existing Patient Mod-High	Encounter	\$95.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
99215		E&M Existing Patient High	Encounter	\$135.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
H0001		Alcohol and/or Drug Assessment	Encounter	\$130.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
H0001	HD	Alcohol and/or Drug Assessment	Encounter	\$130.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	_
H0003		Laboratory analysis of specimens to	Encounter	\$18.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
		detect presence of alcohol or drugs.		7_3.00					
H0004		Individual Behavioral Health	Per 15 mins	\$25.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>✓</b>	-
		Counseling and Therapy		, = 3.00					
H0004	HD	Individual Behavioral Health	Per 15 mins	\$25.00	<b>✓</b>	✓	✓	<b>✓</b>	-
		Counseling and Therapy							

		FY2023 SUD Fee-for-Service Contract F	ee Schedule			COVE	RAGE		10/1/2022- 9/30/2023
HCPCS/ CPT	MOD	SERVICE	DURATION	Rate	MED	НМР	SABG	PA2	
H0005	UN UP UQ UR US	Alcohol & Drug Group Counseling by Clinician: U modifiers based on number of group attendees	Encounter	\$40.00	<b>√</b>	<b>√</b>	<b>*</b>	<b>√</b>	-
H0005	HD	Alcohol & Drug Group Counseling by Clinician	Encounter	\$40.00	<b>✓</b>	<b>√</b>	<b>√</b>	<b>√</b>	-
H0006		SUD Case Management- Services provided to link clients to other essential medical, educational, social and/or other services.	Encounter	\$30.00			<b>✓</b>	<b>√</b>	-
H0010		Alcohol and/or drug services; sub- acute withdrawal management; medically monitored residential withdrawal management (3.7-WM)	Per Day	\$315.00	<b>√</b>	<b>✓</b>	<b>✓</b>	<b>√</b>	-
H0012		Alcohol and/or drug services; sub- acute withdrawal management; clinically managed residential withdrawal management; non- medical or social withdrawal management setting  Alcohol and/or drug services; sub-	Per Day	\$216.00*	<b>\</b>	<b>✓</b>	•	<b>✓</b>	-
		acute withdrawal management (residential addiction program outpatient) (3.2-WM)							
H0015		IOP Intensive Outpatient Care Alcohol and/or drug services; intensive outpatient (from 9 to 19 hours of structured programming per week based on an individualized treatment plan), including assessment, counseling, crisis intervention, and activity therapies or education	Per Day	\$115.00	<b>√</b>	<b>√</b>	<b>~</b>	<b>✓</b>	-
H0018	W1	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program)  3.1 Clinically Managed Low Intensity	Per Day	\$152.00*	<b>V</b>	<b>√</b>	<b>√</b>	<b>√</b>	-

		FY2023 SUD Fee-for-Service Contract F	ee Schedule		COVERAGE				10/1/2022- 9/30/2023
HCPCS/ CPT	MOD	SERVICE	DURATION	Rate	MED	НМР	SABG		
H0018	W3	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program)  3.3 Clinically Managed Population-	Per Day	\$152.00*	<b>√</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	-
H0018	W5	Specific (H0018 and W3 modifier)  Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program)  3.5 Clinically Managed High Intensity (H0018 and W5 modifier)	Per Day	\$162.00*	<b>✓</b>	<b>~</b>	<b>*</b>	<b>√</b>	-
H0018	W7	Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program)  3.7 Medically Monitored Intensive (H0018 and W7 modifier)	Per Day	\$168.00*	<b>✓</b>	<b>✓</b>	<b>√</b>	<b>√</b>	-
H0019	W1	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days)  3.1 Clinically Managed Low Intensity (H0019 and W1 modifier)	Per Day	\$152.00*	<b>✓</b>	<b>√</b>	~	<b>√</b>	-
H0019	W3	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days)  3.3 Clinically Managed Population-Specific (H0019 and W3 modifier)	Per Day	\$152.00*	✓	✓	~	<b>√</b>	-

FY2023 SUD Fee-for-Service Contract Fee Schedule							COVERAGE			
HCPCS/ CPT	MOD	SERVICE	DURATION	Rate	MED	НМР	SABG		9/30/2023 Difference from FY22	
H0019	W5	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days)	Per Day	\$162.00*	<b>✓</b>	<b>✓</b>	<b>√</b>	<b>√</b>	-	
		3.5 Clinically Managed High Intensity (H0019 and W5 modifier)								
H0019	W7	Alcohol and/or drug services; corresponds to services provided in long-term residential (non-medical, nonacute care in residential treatment program where stay is typically longer than 30 days)  3.7 Medically Monitored Intensive	Per Day	\$168.00*	•	<b>~</b>	<b>~</b>	<b>✓</b>	-	
		(H0019 and W7 modifier)								
H0018	НА	Adolescent Alcohol and/or drug services; corresponds to services provided in ASAM Level III.3 and ASAM Level III.5 programs, Alcohol and/or drug services; corresponds to services provided in short term residential (non-hospital residential treatment program)	Per Day	\$285.00	<b>✓</b>	<b>✓</b>	<b>*</b>	<b>~</b>	-	
H0019	НА	Adolescent Alcohol and/or drug services; corresponds to services provided in ASAM Level III.3 and ASAM Level III.5 programs, previously referred to as long-term residential (non-medical, non-acute care in residential treatment program where stay is typically longer than 30 days)	Per Day	\$285.00	<b>✓</b>	<b>✓</b>	<b>~</b>	<b>✓</b>	-	
H0020		Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)	Encounter	\$7.00	<b>√</b>	<b>√</b>	✓	<b>√</b>	-	
H0038		Recovery Coach/Peer Services	Per 15 mins	\$25.00	✓	✓	✓	✓	-	
H0048		Alcohol and drug testing, collection and handling only, specimens other than blood.	Encounter / per test	\$3.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	-	
H2034		Recovery/Transitional Housing	Per Day	\$27.00			✓	<b>✓</b>	-	
H2035		Group Outpatient: Alcohol/Other Drug Treatment	Per Hour	\$40.00	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	-	

		FY2023 SUD Fee-for-Service Contract F	COVERAGE				10/1/2022- 9/30/2023		
HCPCS/ CPT	MOD	SERVICE	DURATION	Rate	MED	НМР	SABG	PA2	Difference from FY22
S9976		Residential Room and Board - May be used in conjunction with H0018 & H0019.	Per Day	\$27.00			<b>√</b>	<b>√</b>	-
T1007		Treatment planning; Alcohol and/or substance abuse services, Treatment plan development and/or modification	Encounter	\$100.00	<b>✓</b>	<b>✓</b>	<b>√</b>	<b>√</b>	-
T1009		Care of the children of the individual receiving alcohol and/or substance abuse services	Encounter / Per Hour	\$15.00			<b>√</b>	<b>√</b>	-
T1012		Recovery Supports	Encounter	\$60.00	✓	✓	✓	✓	-

<sup>\*</sup>Code includes \$2.64/hr Premium Pay (\$2.35/hr Employee Wage+ \$0.29/hr) Employer Expenses for FY2023

privacy officer.

officer.

Position	Job Title	FTE	Functions	Salary	CMHPSM
ID(s)				Tier	Department
101	Chief Executive Officer	1.0	Sole employee of the CMHPSM Regional Board Chief administrative officer of the CMHPSM. Oversight for PIHP functions and regional staffing. Liaison between Regional Operations Committee and Regional Board. Provide leadership for compliance with all contractual requirements within the Medicaid contract with MDHHS.	N/A	CEO
102	SUD Services Director	1.0	Provide leadership and management of SUD treatment and prevention services including maintaining and developing relationships with the community. Staff liaison to Oversight Policy Board.	Tier 4	SUD – Department Leader
103	Chief Operating 1.0 Manage MDHHS contract requirements. Provider Network Management (CMHSPs		Tier 4	Operations - Department Leader	
104	Quality / Compliance Manager	1.0	Oversight for Delegated Functions in Quality/Compliance/Utilization Review and Customer Service Liaison for State and Federal Audits Program Integrity Waiver Services oversight.	Tier 3	Operations
105	Regional Coordinator	1.0	Coordinate PIHP administrative functions Staff support for Regional Operations Committee, Regional PIHP Board and Oversight Policy Board Coordinate special projects and initiatives including PIHP level grants and MDHHS submissions	Tier 2B	CEO
106	Data Reporting Coordinator	1.0	Provides regional coordination and communication for required reporting elements including all behavioral health and prevention reporting	Tier 2A	Information Management
107	SUD Prevention Coordinator	1.0	Provides regional level oversight for Contracted Prevention Services. Completes required SUD prevention services state reporting, provides technical assistance to prevention service providers.	Tier 2B	SUD
108	Substance Use Services Program Coordinator	bstance Use 1.0 Provides regional level oversight for programs and services across the continuum of contracted providers from prevention to treatment services.		Tier 2B	SUD
109	SUD Clinical Treatment Coordinator	1.0	Provides regional level clinical and programmatic oversight for Contracted Treatment Providers, Utilization Review for services and monitoring for Core Providers.	Tier 3	SUD

Position	Job Title	FTE	Functions	Salary	CMHPSM
ID(s)				Tier	Department
110	Utilization and Treatment Specialist	1.0	Provides consultation to external SUD-related staff Plans/coordinates follow-up or aftercare programs for consumers. Reviews and analyzes utilization of resources by the SUD provider network for treatment effectiveness.	Tier 2B	SUD
111	Regional Administrative Assistant	1.0	Supports Regional Committees, Processes Credentialing Applications, assists Regional Coordinator in large projects.	Tier 1 - Hourly	Operations
112, 113, 128	Regional Supports Intensity Scale (SIS) Assessor	3.0	MDHHS mandates a standardized assessment by administered for all Adults with I/DD in service with the region. This assessment is conducted by a certified assessor not employed by the CMH where the individual receives service.	Tier 1	Operations
114	SIS Quality Lead	1.0	This professional level position is responsible to ensure that all Supports Intensity Scale (SIS) assessors meet AAIDD quality and reliability standards and allow the completion of assessments within the required timeframes.	Tier 2A	Operations
115	Chief Information Officer	1.0	Skilled technical and leadership role for the continuity and security of all data and technical systems used by the CMHPSM including all personal computing devices, network and the electronic health record systems.	Tier 4	Information Management - Department Leader
116	Health Data Analyst	1.0	Statistician responsible for producing, analyzing and preparing information on population health statistics, performance improvement studies and required data reporting.	Tier 3	Information Management
117	Chief Finance Officer	1.0	Act as the chief financial officer including revenue projections, trend analysis and consultation to regional board, CEO and executive directors regarding finance.	Tier 4	Finance – Department Leader
118	Information Management Coordinator	1.0	Coordinates region wide projects related to the electronic health record, CMHPSM Help Desk and other information management projects as required.	Tier 2A	Information Management
119	Waiver Services Coordinator	1.0	Provides Coordination of applications and program requirements for Habilitation Supports Waiver, Autism, HCBS Waiver and subsequent site audits, represents the CMHPSM at waiver coordination activities with MDHHS, may audit clinical records as appropriate to waiver services.  Oversees SIS Program.	Tier 3	Operations

Position	Job Title	FTE	Functions	Salary	СМНРЅМ
ID(s)				Tier	Department
120	Accountant	1.0	Responsible for accounting operations, manages Grant expense tracking, accounting reports, Provides financial oversight for PIHP level grant submissions, SUD finance reporting.	Tier 2B	Finance
121	Finance Assistant	0.5	Part Time Hourly Employee - Performs a variety of functions in the claims processing, accounts payables and cash receipts processes. Responsibilities include inputting payables, issuing payments, processing claims, posting cash receipts, day-to-day finance and monitoring provider financial reporting.	Tier 1 - Hourly	Finance
127	Operations Specialist	1.0	The Operations department handles a broad range of organizational activities including both internal projects and external contracting and monitoring functions with the provider network. The Operations Specialist manages and coordinates certain functions related to maintaining contracts, regional provider network data, internal and external communications, procurement, customer service, quality improvement, monitoring and auditing.	Tier 2A	Operations
G122	Veterans Navigator	1.0	Identifies resources and make linkages in the PIHP region appropriate for Veteran and Military Families (V/MFs). Makes appropriate referrals, coordinates care, provides follow up, and either directly provides or assures wrap around services are available.	Tier 2B	SUD
G123, G124	Grants Project Coordinator	2.0	Provides oversight of grant implementation, budgets, goals, objectives and activities, and serves as a liaison to funded program personnel as well as the MDHHS grant management staff.	Tier 2A	SUD
G125	Opioid Health Home Coordinator	1.0	Functions as the liaison between HHPs, CMHPSM and Michigan Department of Health and Human Services (MDHHS); provides administrative leadership in the implementation and management of OHH services.	Tier 2B	SUD
G126	Veterans Peer Support Specialist	1.0	Responsible for carrying out activities of the Walking With Warriors program, the Veteran Peer Support Specialist's main objective is to provide ongoing support for Veterans and Military families and support the Veteran Navigator in their work.	Tier 1	SUD
G129	Behavioral Health Home Director	0.5	Behavior Health Home (BHH) Director manages BHH Lead Entity (LE) Director responsibilities for the BHH program including enrolling and disenrolling BHH participants, ensuring all required paperwork (such as consent and the care plan) are in the Waiver Support Application (WSA) system or in our electronic health record "CRCT". The BHH Director will work directly with Health Home Partners (HHPs) to ensure completion of required documentation, evaluation, and other activities.	Tier 3	Operations



#### Regional Board Action Request

Board Meeting Date: September 22, 2022

Action Requested: Approve the Fiscal Year 2023 budget and allocations as presented, including

authorization for the CMHPSM CEO to sign the included FY2023 contracts.

Background: The FY2023 budget is representative of and in an adherence to the expectations

and requirements derived from the revenue contracts entered into by the CMHPSM with the Michigan Department of Health and Human Services (MDHHS). Expense contracts for FY2023 include: Substance Use Disorder service, prevention and treatment contracts, grant funded projects, projects funded by Oversight Policy Board approved PA2 allocations, administrative contracts, mental health service contracts with the partner CMHSPs. Additional

contracts with no expense associated include various Memorandums of Understanding, coordination agreements and data-use agreements.

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

The FY2023 annual budget and associated expense and non-expense contracts abide by the stipulations of our revenue contract with MDHHS and align with our

regional strategic plan and our regional shared governance model.

Recommend: Approval

# Community Mental Health Partnership of Southeast Michigan Employee Handbook



Revised: 9/87/20224

#### HANDBOOK DISCLAIMER

We prepared this handbook to help employees find the answers to many questions that they may—have—regarding their—employment—with—Community—Mental—Health—Partnership of Southeast Michigan (CMHPSM). Please take the necessary time to read it.

We do not expect this handbook to answer all questions. Supervisors and the Regional Coordinator also serve as a major source of information.

Neither this handbook nor any other verbal or written communication by a management representative is, nor should it be considered to be, an agreement, contract of employment, express or implied, or a promise of treatment in any particular manner in any given situation, nor does it confer any contractual rights whatsoever. Community Mental Health Partnership of\_Southeast Michigan\_adheres\_to\_the\_policy\_of\_employment at will,—which\_permits the CMHPSM or the employee to end the employment relationship at any time, for any reason, with or without cause or notice.

No CMHPSM representative other than the CEO may modify at-will status and/or provide any special arrangement concerning terms or conditions of employment in an individual case or generally and any such modification must be in a signed writing.

Many matters covered by this handbook, such as benefit plan descriptions, are also described in separate CMHPSM documents. These CMHPSM documents are always controlling over any statement made in this handbook or by any member of management.

This handbook states only general CMHPSM guidelines. The CMHPSM may, at any time, in its sole discretion, modify or vary from anything stated in this handbook, with or without notice, except for the rights of the parties to end employment at will, which may only be modified by an express written agreement signed by the employee and the CEO.

This handbook supersedes all prior handbooks.

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# **Section 1 - Governing Principles of Employment**

#### 1-1 Introduction

For those of you who are commencing employment with CMHPSM, let me extend a warm and sincere welcome. We are confident that you will find our organization a dynamic and rewarding place in which to work and we look forward to a productive and successful association. We are glad to have you with us.

For those of you who have been with us, thank you for your past and continued service.

I extend to you my personal best wishes for your success and happiness here at CMHPSM. We understand that it is our employees who provide the services that our customers rely upon, and who will grow and enable us to create new opportunities in the years to come.

James Colaianne, MPA CMHPSM Chief Executive Officer

#### 1-2 CMHPSM Vision, Mission and Values

#### **Our Vision**

The- CMHPSM shall address- the -challenges -confronting -people -living -in- our- region- by influencing public policy and participating in initiatives that reduce stigma and disparities in health care delivery and promote recovery and wellness.

#### **Our Mission**

Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.

#### Our Values

- Strength Based and Recovery Focused
- Trustworthiness and Transparency
- Accountable and Responsible
- Shared Governance
- Innovative and Data Driven Decision Making
- Learning Organization Values

#### 1-3 CMHPSM Board of Directors

The CMHPSM Board of Directors consists of thirteen (13) members; twelve (12) members from the four CMHSP Partners agencies and one (1) from the Substance Use Disorder Oversight Policy Board. Three (3) representatives are appointed by each CMHSP Partner agency. At least one (1) appointee from each CMHSP Partner must be a primary or secondary consumer. Each member is appointed for a three-year term. The CMHPSM Board of Directors appoints a Chief Executive Officer who is responsible for day-to-day operations of the CMHPSM and reports to the CMHPSM Board of Directors.

## 1-4 Equal Employment Opportunity

The CMHPSM is an Equal Opportunity Employer that does not discriminate on the basis of actual or perceived race, creed, color, religion, alienage or national origin, ancestry, citizenship status, age, disability or handicap, sex, marital status, veteran status, sexual orientation, genetic information, arrest record, or any other characteristic protected by applicable federal, state or local laws. Our management team is dedicated to this policy with respect to recruitment, hiring, placement, promotion, transfer, training, compensation, benefits, employee activities and general treatment during employment.

The CMHPSM will endeavor to make a reasonable accommodation to the known physical or mental limitations of qualified employees with disabilities unless the accommodation would impose an undue hardship on the operation of our business. If you need assistance to perform your job duties because of a physical or mental condition, please let the Regional Coordinator know.

The CMHPSM will endeavor to accommodate the sincere religious beliefs of its employees to the extent such accommodation does not pose an undue hardship on the CMHPSM's operations. If you wish to request such an accommodation, please speak to the Regional Coordinator.

# 1-5 Reporting Discriminatory Employment Practices

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third- party HR partner to process the complaint. The CMHPSM will not allow any form of retaliation against individuals who raise issues of equal employment opportunity. If you feel you have been subjected to any such retaliation, report it in the same manner you would report a perceived violation of this policy. To ensure our workplace is free of artificial barriers, violation of this policy including any improper retaliatory conduct will lead to discipline, up to and including discharge.

#### 1-6 Non-Harassment

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, veteran status, sexual orientation or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

## 1-7 Reporting Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third- party HR partner to process the complaint. Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy.

If an employee feels he or she has been subjected to any such retaliation, he or she should report it in the same way the employee would report a claim of perceived harassment under Version:  $9/\frac{78}{20221}$ 

this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

#### 1-8 Sexual Harassment

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit harassment of any employee by any Supervisor, employee, customer or vendor on the basis of sex or gender. The purpose of this policy is not to regulate personal morality within the CMHPSM. It is to ensure that at the CMHPSM all employees are free from sexual harassment. While it is not easy to define precisely what types of conduct could constitute sexual harassment and there is a wide range of behavior that may violate this policy even if such behavior does not violate the law, examples of prohibited behavior include unwelcome sexual advances, requests for sexual favors, obscene gestures, displaying sexually graphic magazines, calendars or posters, sending sexually explicit e-mails, text messages and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature or sexually related comments. Depending upon the circumstances, improper conduct also can include sexual joking, vulgar or offensive conversation or jokes, commenting about an employee's physical appearance, conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

# 1-9 Reporting Sexual Harassment

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator who will work with our contracted third- party HR partner to process the complaint.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If you feel you have been subjected to any such retaliation, report it in the same manner you would report a

claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

# 1-10 Drug-Free and Alcohol-Free Workplace

To help ensure a safe, healthy, and productive work environment for our employees and others, to protect CMHPSM property, and to ensure efficient operations, the CMHPSM has adopted a policy of maintaining a workplace free of drugs and alcohol. This policy applies to all employees and other individuals who perform work for the CMHPSM.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale or distribution of controlled substances, drug paraphernalia or alcohol by an individual anywhere on CMHPSM premises, while on CMHPSM business (whether or not on CMHPSM premises) or while representing the CMHPSM, is strictly prohibited. Employees and other individuals who work for the CMHPSM also are prohibited from reporting to work or working while they are using or under the influence of alcohol or any controlled substances, which may impact an employee's ability to perform his or her job or otherwise pose safety concerns, except when the use is pursuant to a licensed medical practitioner's instructions and the licensed medical practitioner authorized the employee or individual to report to work. However, this does not extend any right to report to work under the influence of medical marijuana or to use medical marijuana as a defense to a positive drug test, to the extent an employee is subject to any drug testing requirement, to the extent permitted by and in accordance with applicable law. Violation of this policy will result in disciplinary action, up to and including discharge.

The CMHPSM maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid discipline for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them unable to perform the essential functions of their jobs or jeopardizes the health and safety of any CMHPSM employee, including themselves. Employees must notify the CMHPSM within three (3) calendar days if they are convicted of a criminal drug violation in the workplace.

All employees are hereby advised that full compliance with the foregoing policy shall be a condition of employment at the CMHPSM.

Any employee who violates the foregoing drug-free workplace policy described above shall be subject to discipline up to and including immediate discharge.

In the discretion of the CMHPSM, any employee who violates the drug-free workplace policy may be required, in connection with or in lieu of disciplinary sanctions, to participate to the CMHPSM's satisfaction in an approved drug assistance or rehabilitation program.

## 1-8 Workplace Violence

The Community Mental Health Partnership of Southeast Michigan is strongly committed to providing a safe workplace. The purpose of this policy is to minimize the risk of personal injury to employees and damage to CMHPSM and personal property.

We do not expect employees to become experts in psychology or to physically subdue a threatening or violent individual. Indeed, we specifically discourage employees from engaging in any physical confrontation with a violent or potentially violent individual. However, we do expect and encourage employees to exercise reasonable judgment in identifying potentially dangerous situations.

Experts in the mental health profession state that prior to engaging in acts of violence, troubled individuals often exhibit one or more of the following behaviors or signs: over-resentment, anger and hostility; extreme agitation; making ominous threats such as bad things will happen to a particular person, or a catastrophic event will occur; sudden and significant decline in work performance; irresponsible, irrational, intimidating, aggressive or otherwise inappropriate behavior; reacting to questions with an antagonistic or overtly negative attitude; discussing weapons and their use, and/or brandishing weapons in the workplace; overreacting or reacting harshly to changes in CMHPSM policies and procedures; personality conflicts with coworkers; obsession or preoccupation with a co-worker or Supervisor; attempts to sabotage the work or equipment of a co-worker; blaming others for mistakes and circumstances; or demonstrating a propensity to behave and react irrationally.

#### **Prohibited Conduct**

Threats, threatening language or any other acts of aggression or violence made toward or by any CMHPSM employee WILL NOT BE TOLERATED. For purposes of this policy, a threat includes any verbal or physical harassment or abuse, any attempt at intimidating or instilling fear in others, menacing gestures, flashing of weapons, stalking or any other hostile, aggressive, injurious or destructive action undertaken for the purpose of domination or intimidation. To the extent permitted by law, employees and visitors are prohibited from carrying weapons onto CMHPSM premises.

#### **Procedures for Reporting a Threat**

All potentially dangerous situations, including threats by co-workers, should be reported immediately to any member of the leadership team with whom the employee feels comfortable. Reports of threats may remain confidential to the extent maintaining confidentiality does not impede our ability to investigate and respond to the complaints. All threats will be promptly investigated. All employees must cooperate with all investigations. No employee will be subjected to retaliation, intimidation, or disciplinary action as a result of reporting a threat in good faith under this policy.

If the CMHPSM determines, after an appropriate good faith investigation, that someone has violated this policy, the CMHPSM will take swift and appropriate corrective action.

If an employee is the recipient of a threat made by an outside party, that employee should follow the steps detailed in this section. It is important for us to be aware of any potential danger in our offices. Indeed, we want to take effective measures to protect everyone from the threat of a violent act by an employee or by anyone else.

## **Section 2 - Operational Policies**

## 2-1 Employee Classifications

For purposes of this handbook, all employees fall within one of the classifications below.

**Full-Time Employees** - Employees who regularly work at least 40 hours per week who were not hired on a short-term basis.

**Part-Time Employees** - Employees who regularly work fewer than 40 hours per week who were not hired on a short-term basis. Part-Time employees generally are not eligible for CMHPSM benefits, paid holiday, or floating holiday time off, but are eligible for pro-rated paid time off and statutory benefits.

**Short-Term Employees** - Employees who were hired for a specific short-term project, or on a short-term freelance, per diem or temporary basis. Short-Term Employees generally are not eligible for CMHPSM benefits, paid holiday, or floating holiday time off or paid time off but are eligible to receive statutory benefits.

In addition to the above classifications, employees are categorized as either "**exempt**" or "**non-exempt**" for purposes of federal and state wage and hour laws. Employees classified as exempt do not receive overtime pay; they generally receive the same weekly salary regardless Version: 9/78/20221

of hours worked. Such salary may be paid less frequently than weekly. The employee will be informed of these classifications upon hire and informed of any subsequent changes to the classifications.

# 2-2 Your Employment Records

To obtain their position, employees provided us with personal information, such as address and telephone number. This information is contained in the employee's personnel file.

The employee should keep his or her personnel file up to date by informing the Regional Coordinator of any changes. The employee also should inform the Regional Coordinator of any specialized training or skills he or she may acquire in the future, as well as any changes to any required visas. Unreported changes of address, marital status, etc. can affect withholding tax and benefit coverage. Further, an "out of date" emergency contact or an inability to reach the employee in a crisis could cause a severe health or safety risk or other significant problem.

## 2-3 Background Checks

To ensure that individuals who join CMHPSM are well qualified and to ensure that CMHPSM maintains a safe and productive work environment, it is our policy to conduct pre-employment background checks on all applicants who accept an offer of employment. Background checks may include verification of any information on the applicant's resume or application form.

All offers of employment are conditioned on receipt of a background check report that is acceptable to CMHPSM. All background checks are conducted in conformity with the Americans with Disabilities Act, and state and federal laws. Reports are kept confidential and are only viewed by individuals involved in the hiring process.

If information obtained in a background check would lead the CMHPSM to deny employment, a copy of the report will be provided to the applicant, and the applicant will have the opportunity to dispute the report's accuracy. Background checks include a criminal record check, although a criminal conviction does not automatically bar an applicant from employment.

Additional checks such as a driving record review, credit check, or other allowable checks may be made on applicants for particular job categories if appropriate and job-related as determined by the CEO.

Regular criminal background checks will be conducted for all current employees every three years, at minimum. The CMHPSM reserves the right to conduct a background check for current employees at any time.

#### **Disclosing Certain Criminal Information**

All employees shall fully disclose to the Regional Coordinator any criminal felony or work-related misdemeanor convictions. Any employees that work directly with minors or who will have access to minor's records that are convicted of a felony or misdemeanor, including expressly any law relating to drugs or other controlled substances, or are charged with a felony, or are placed on the CPS Central Registry as a perpetrator, shall notify in writing the Regional Coordinator immediately, and in all cases, no later than five (5) days after such conviction, charge, or placement on the CPS Central Registry. An employee must disclose to the CMHPSM any conviction resulting from such pending charges as described in this Section. However, as required by Federal regulation, employees working with minors must disclose any arrests or charges related to child sexual abuse, child abuse, or child neglect and the disposition of such arrest or charges, and may also be required to certify that no case of child abuse or neglect has been substantiated against them.

## 2-4 Working Hours and Schedule

Normal business hours are 8:30 a.m. to 5:00 p.m. Monday through Friday. The work week will normally consist of five (5) working days. To accommodate the needs of the CMHPSM, employees may be required to work specifically scheduled days or hours. Staffing and operational needs may necessitate variations in starting and ending times, as well as variations in the total hours that may be scheduled each day and week. Employees may use flex time when planning their working hours, as approved by their supervisor. Telecommuting options are available based on the CMHPSM Remote Work operational policy and when authorized by your supervisor. It is expected that employees will maintain an up-to-date electronic calendar using the shared calendaring system to communicate planned schedules and availability to the team and supervisor.

# 2-5 Timekeeping Procedures

Employees must record their actual time worked for payroll and benefit purposes. Non-exempt employees must record the time work begins and ends, as well as the beginning and ending time of any departure from work for any non-work-related reason, on forms as prescribed by management.

Altering, falsifying, or tampering with time records is prohibited and subjects the employee to discipline, up to and including discharge.

Exempt employees are required to record their daily work attendance and report half days and full days of absence from work for reasons such as leaves of absence, sick leave, or personal business.

Non-exempt employees may not start work until their scheduled starting time.

It is the employee's responsibility to sign time records to certify the accuracy of all time recorded. Any errors in the time record should be reported immediately to their Supervisor and the Regional Coordinator, who will attempt to correct legitimate errors.

#### 2-6 Overtime

Like most successful companies, we experience periods of extremely high activity. During these busy periods, additional work is required from all of us. Supervisors are responsible for monitoring business activity and requesting overtime work if it is necessary. Effort will be made to provide employees with adequate advance notice in such situations.

Any non-exempt employee who works overtime will be compensated at the rate of one and one-half times (1.5) his/her normal hourly wage for all time worked in excess of forty (40) hours each week, unless otherwise required by law.

Employees may work overtime only with prior management authorization.

For purposes of calculating overtime for non-exempt employees, the workweek begins at 8:30 a.m. on Monday and ends 168 hours later at 8:30 a.m. on the following Monday.

# 2-7 Safe Harbor Policy for Exempt Employees

It is our policy and practice to accurately compensate employees and to do so in compliance with all applicable state and federal laws. To ensure proper payment and that no improper deductions are made, employees must review pay stubs promptly to identify and report all errors. Employees classified as exempt salaried employees will receive a salary which is intended to compensate them for all hours, they may work for the Community Mental Health Partnership of Southeast Michigan. This salary will be established at the time of hire or classification as an exempt employee. While it may be subject to review and modification from time to time, such as during salary review times, the salary will be a predetermined amount Version: 9/78/20221

that will not be subject to deductions for variations in the quantity or quality of the work performed.

Under federal and state law, salary is subject to certain deductions. For example, unless state law requires otherwise, salary can be reduced for the following reasons:

- full-day absences for personal reasons;
- full-day absences for sickness or disability if the deduction is made in accordance
  with a bona fide plan, policy or practice of providing wage replacement benefits for
  such absences (deductions also may be made for the exempt employee's full-day
  absences due to sickness or disability before the employee has qualified for the
  plan, policy or practice or after the employee has exhausted the leave allowance
  under the plan);
- full-day disciplinary suspensions for infractions of our written policies and procedures;
- family and Medical Leave absences (either full- or partial-day absences);
- to offset amounts received as payment from the court for jury and witness fees or from the military as military pay;
- the first or last week of employment in the event the employee works less than a full week; and
- any full work week in which the employee does not perform any work.

Salary may also be reduced for certain types of deductions such as a portion of health, dental or life insurance premiums; state, federal or local taxes; social security; or voluntary contributions to a defined contribution retirement plan.

In any work week in which the employee performed any work, salary will not be reduced for any of the following reasons:

- partial day absences for personal reasons, sickness or disability;
- an absence because the employer has decided to close a facility on a scheduled workday;
- absences for jury duty, attendance as a witness, or military leave in any week in which the employee performed any work (subject to any offsets as set forth above); and
- any other deductions prohibited by state or federal law.

However, unless state law provides otherwise, deductions may be made to accrued leave for full- or partial-day absences for personal reasons, sickness, or disability.

If the employee believes he or she has been subject to any improper deductions, the employee should immediately report the matter to a supervisor. If the supervisor is unavailable or if the Version: 9/78/20221

employee believes it would be inappropriate to contact that person (or if the employee has not received a prompt and fully acceptable reply), he or she should immediately contact Regional Coordinator or any other supervisor in Community Mental Health Partnership of Southeast Michigan with whom the employee feels comfortable.

# 2-8 Your Paycheck

The employee will be paid bi-weekly for all the time worked during the past pay period. Payroll stubs itemize deductions made from gross earnings. By law, the CMHPSM is required to make deductions for Social Security, federal income tax and any other appropriate taxes. These required deductions also may include any court-ordered garnishments. Payroll stubs also will differentiate between regular pay received and overtime pay received.

If there is an error in an employee's pay, the employee should bring the matter to the attention of the Regional Coordinator immediately so the CMHPSM can resolve the matter quickly and amicably.

Paychecks will be given only to the employee, unless he or she requests that they be mailed, or authorize in writing another person to accept the check.

# 2-9 Direct Deposit

Community Mental Health Partnership of Southeast Michigan strongly encourages employees to use direct deposit. Employees may add/update direct deposit information directly within the third-party HR payroll system.

# 2-10 Salary Advances

The Community Mental Health Partnership of Southeast Michigan does not permit advances on paychecks or against any accrued paid time off.

# 2-11 Performance and Salary Review

During the first year of employment, employees will normally receive performance reviews a minimum of two times; once near the end of the first six (6) months of employment and again

near the one (1) year anniversary date Thereafter employees will receive a performance review annually near their anniversary date.

Employees will complete a self-evaluation performance review, submit the self-review to their supervisor and then meet with their supervisor to discuss the review. The performance review will be discussed, and both the employee and manager will sign the form to ensure that all strengths, areas for improvement and job goals for the next review period have been clearly communicated. Performance review forms will be retained in the employee's personnel file. A positive performance review does not always result in an automatic salary increase, a promotion or continued employment. Compensation increases and the terms and conditions of employment, transfers, promotions, and demotions are determined by and at the discretion of the CMHPSM CEO.

#### **Supervision and Work Plans**

In addition to formal annual performance reviews, the CMHPSM encourages regular meetings with your supervisor to discuss your job performance and work plan. Normally supervision sessions are scheduled as needed, but minimally occur once per quarter. The purpose of these sessions is to recognize positive performance, improve poor performance and/or to address other issues in the work environment.

To improve supervision, each employee should work with their supervisor to develop an annual work plan. This work plan shall be developed at the beginning of each annual review cycle. The work plan should be designed to meet the goals of the organization and the employee. The work plan should include goals such as targets for project completion, improved accuracy of work, and professional development where needed. The work plan should be reviewed at each quarterly supervision meeting to ensure the employee is on target to meet goals and to discuss where goals should be adjusted, added or removed and ways the supervisor may be able to remove obstacles to meeting identified goals.

#### 2-12 Internal Transfers/Promotions

The CMHPSM is dedicated to assisting employees in managing their careers and reaching their professional goals through promotion and transfer opportunities. Management prefers to promote from within and may first consider current employees with the necessary qualifications and skills to fill vacancies above the entry level. CMHPSM reserves the right to seek applicants solely from internal sources initially and then external if necessary, or to post positions internally and externally simultaneously. Management maintains the right to initiate transfers of employees between facilities to meet specified work requirements and reassignment of work requirements.

## 2-13 Temporary Salary Adjustment

When an employee on a consistent but temporary basis is asked to perform the work of a higher-tiered position on the CMHPSM salary scale, a temporary salary adjustment may be utilized by the CMHPSM to compensate the employee.

- Temporary basis is defined as at least one full pay period.
- The CEO will determine when individual employees are eligible for a temporary salary adjustment. Recommendations for a temporary salary adjustment must be submitted from a Leadership Team member to the CEO.
- A temporary salary adjustment can be up to an additional ten percent (10%) increase in salary. The calculated increase percentage for salary adjustments will be determined by the CEO.
- No temporary salary adjustment will allow an employee to be compensated above the maximum step on their current position's salary tier.
- Any temporary salary adjustment will be reviewed on a bi-monthly basis and will not generally last longer than one (1) year.
- Any temporary salary adjustment will not impact the employee's regular tier and step
  position on the salary scale.
- After a temporary salary adjustment has been discontinued, the employee will revert back to their appropriate salary step level.

# 2-14 Job Descriptions

CMHPSM attempts to maintain job descriptions for all authorized positions. The contents of the job descriptions are within the sole discretion of CMHPSM. Each employee shall receive a written job description at time of hire and at every change thereafter. Each employee will review, sign and date their job description. Copies of job descriptions will be kept in individual personnel files. The CMHPSM recommends that employees and their supervisor review employee job descriptions at minimum every two (2) years, or when an individual employee's primary job functions change significantly. Job descriptions may be revised or altered at the sole discretion of CMHPSM as a means of operational efficiency and the changing nature of conducting business.

# 2-15 Job Postings

The Community Mental Health Partnership of Southeast Michigan is dedicated to assisting employees in managing their careers and reaching their professional goals through promotion and transfer opportunities. This policy outlines the on-line job posting program which is in

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place for all employees. To be eligible to apply for an open position, employees must meet several requirements:

- Should be a current, regular, full-time, or part-time employee
- Been in your current position for at least six months
- Maintain a performance rating of satisfactory or above
- Should not be on an employee conduct/performance-related probation or warning
- Must meet the job qualifications listed on the job posting
- Required to provide the employee's manager with notice prior to applying for the position

If the employee finds a position of interest on the job posting website and meets the eligibility requirements, an on-line job posting application must be completed to be considered for the position. Not all positions are guaranteed to be solely internally posted. The CMHPSM reserves the right to seek applicants solely from internal sources initially and then external sources if necessary, or to post positions internally and externally simultaneously.

For more specific information about the program, please contact the Regional Coordinator.

#### **Section 3 - Benefits**

#### 3-1 Benefits Overview/Disclaimer

In addition to good working conditions and competitive pay, it is the Community Mental Health Partnership of Southeast Michigan's policy to provide a combination of supplemental benefits to all eligible employees. In keeping with this goal, each benefit program has been carefully devised. These benefits include time-off-benefits, such as vacations and holidays, and insurance and other plan benefits. We are constantly studying and evaluating our benefits programs and policies to better meet present and future requirements. These policies have been developed over the years and continue to be refined to keep up with changing times and needs.

The next few pages contain a brief outline of the benefits programs the Community Mental Health Partnership of Southeast Michigan provides employees and their families. Of course, the information presented here is intended to serve only as guidelines.

The descriptions of the insurance and other plan benefits merely highlight certain aspects of the applicable plans for general information only. The details of those plans are spelled out in the official plan documents, which are available for review upon request from Regional Coordinator. Additionally, the provisions of the plans, including eligibility and benefits provisions, are summarized in the summary plan descriptions ("SPDs") for the plans (which

may be revised from time to time). In the determination of benefits and all other matters under each plan, the terms of the official plan documents shall govern over the language of any descriptions of the plans, including the SPDs and this handbook.

Further, the Community Mental Health Partnership of Southeast Michigan (including the officers and administrators who are responsible for administering the plans) retains full discretionary authority to interpret the terms of the plans, as well as full discretionary authority with regard to administrative matters arising in connection with the plans and all issues concerning benefit terms, eligibility and entitlement.

While the CMHPSM intends to maintain these employee benefits, it reserves the absolute right to modify, amend or terminate these benefits at any time and for any reason.

If -employees -have any -questions regarding -benefits, -they -should -contact -the- Regional Coordinator.

## 3-2 Paid Holidays

The CMHPSM observes the following ten (10) holidays each year:

- New Year's Day
- Martin Luther King Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Eve Day
- Christmas Day
- New Year's Eve Day

Should a holiday fall on a Saturday, the holiday will be observed on the preceding Friday. Should a holiday fall on a Sunday, the holiday will be observed on the following Monday. Should the Christmas Eve or New Year's Eve holiday fall on Friday, that holiday will be observed on the preceding Thursday. Should Christmas Eve or New Year's Eve fall on Saturday or Sunday, that holiday shall be observed the preceding Friday.

# Floating Holidays

In addition to the holidays listed above, the CMHPSM also observes four (4) floating holidays. The floating holidays are available to all full-time, regular employees to be taken off on either the day of the holiday, or on a different day following the date of the holiday as chosen by the employee. These four floating holidays allow employees to have additional paid leave to cover absences for personal reasons, such as religious observances or parent-teacher conferences, or to supplement PTO and holiday leave.

Employees are eligible for the designated floating holidays that occur after their start-date with the organization. The four designated floating holidays are:

- Presidents' Day
- Juneteenth National Independence Day
- Columbus / Indigenous Peoples Day
- Veterans Day

Floating holidays may only be used to cover full-day absences. They must be taken in the calendar year in which given, and on or after the date of the floating holiday. Under no circumstances will these days be carried over to the next calendar year, nor may they be cashed out if not taken or paid upon termination of employment.

A floating holiday must be scheduled and approved in advance by the employee's supervisor.

# 3-3 Paid Time Off For Full-Time Employees

We know how hard you work and recognize the importance of providing you with time for rest, relaxation, illness, well-care, and other appointments. We fully encourage you to get this rest and take care of yourself and your family by taking your paid time off. The paid time off (PTO) program combines vacation, sick and personal leave benefits into one comprehensive plan. PTO may be taken for any purpose including vacation, personal illness, or time off to care for dependents.

All full-time employees will be eligible for PTO benefits. PTO leave will accrue beginning on the first day of employment. Any employee hired before the end of the first half of the calendar.

year receives eighteen (18) PTO days; any employee hired during the second half of the calendar year receives nine (9) PTO days. All eligible employees will receive an annual PTO accrual based on length of service on January 1st of each year, thereafter. To offer employees an incentive to stay with the CMHPSM, PTO annual accrual amounts will increase based on length of service and is earned according to the following schedule:

Length of service	Annual PTO Accrual
0-2 years	18 days per year (1.5 days per month)
3-5 years	21 days per year (1.75 days per month)
6-7 years	24 days per year (2.0 days per month)
8-9 years	27 days per year (2.25 days per month)
10 or more years	30 days per year (2.5 days per month)

A maximum of seven (7) days or fifty-six (56) hours of PTO time not used prior to December 31st\_will\_be carried\_into\_the\_following\_calendar\_year. Under\_no\_circumstances shall an employee begin the calendar year with more than 56 additional hours of PTO carried over from the previous year, in addition to their annual accrued amount determined by the length of service (see table above).

PTO days may be taken in half-day or full-day increments.

Employees must ensure that they have enough accrued PTO available to cover the dates requested. All paid PTO leave hours must be exhausted before non-paid time may be used. If—paid leave has been exhausted, one (or more) full day(s) will be deducted from an employee's salary for absences from work.

Employees may not take more than two consecutive weeks of paid leave at a time without written approval of the Chief Executive Officer. Limiting the amount of leave taken is intended to allow for better planning of coverage of work activities while the employee is absent.

Employees must receive supervisory approval for PTO use in advance via the Employee Leave Request Form, except in the case of illness or emergency. In the case of illness or emergency, the employee should submit a leave request upon returning to the office. When possible, these leave requests should be made at least two (2) weeks in advance of the requested leave. Requests shall be approved/denied by the employee's supervisor within three (3) business days of the request. Every effort will be made to grant your request, however, if too many people request the same period of time off, CMHPSM reserves the right to choose who may take time off during that period. Individuals with the longest length of service generally will be given preference. If the request for time off is denied, the supervisor should provide an appropriate reason on the form returned to the employee.

Requests should be made to the supervisor with as much advance notice as possible, with a minimum of one (1) day notice for any absence that will disrupt a work assignment or a deadline. Requests shall be approved/denied by the employee's supervisor within three (3) business days of the request. For scheduled time off, an employee must find coverage for any activities, duties or responsibilities that need to be addressed in their absence. An employee

who finds it necessary to use PTO for an emergency must notify their supervisor no later than two (2) hours after the start of the workday, if possible. In case of emergency, an employee must notify their supervisor of any activities, duties or responsibilities that will need to be covered. CMHPSM may require the employee to provide verification of the emergency.

Paid time off will be paid at the employee's base rate at the time the leave is taken. If a holiday falls during the employee's time off, the day will be charged to holiday leave rather than to PTO.

Employees returning to work from an illness or leave of absence may be required by their supervisor to submit a statement from their physician verifying their ability to work.

PTO is not accrued while an employee is on unpaid leave or when short- or long-term disability benefits are paid. A pro-rated adjustment to the annual accrual will be made in accordance with the length of the leave.

## 3-4 Paid Time Off For Part-Time Employees

Part-time employees are those who are hired to work less than 40 hours per week. Part-time employees receive no benefits other than Paid Time Off (PTO), the amount of which is prorated based on the average number of hours for which the position was created. For example, a person hired into a part time 20-hour per week position during the first half of the year is eligible for 72 hours of PTO according to the PTO standards in the Employee Handbook related to start date of employment.

#### 3-5 Paid Time Off Donation

Regular employees shall be allowed to donate up to 8 hours of paid time off (PTO) to another regular—employee—who—has—experienced—a—qualifying—event,—as—determined—by the CEO.—Qualifying events may include a medical emergency, the care for an immediate family member in the event of a medical emergency, or the need for extended time off following the death of an immediate family member.

PTO hours may be donated in increments of either 4 hours or 8 hours, with 8 hours being the maximum allowable hours to be donated per qualifying event.

Donated PTO hours must be used by the recipient employee in the same calendar year in which the PTO hours were donated.

To be eligible for the receipt of a PTO donation, the recipient employee must have exhausted all of his or her own paid leave time (including PTO and employer-sponsored short-term and/or long-term disability), must complete a written request, and must have the scheduled time off or leave of absence approved by the CMHPSM.PTO must be donated to a specific recipient employee.—Once surrendered, PTO cannot be returned to the donor employee, but will remain available for use by the specific recipient employee.

If a recipient employee receives PTO hours from a donor employee with a different pay rate, the PTO hours will be converted based on the recipient employee's pay rate, so that the dollar value of the surrendered leave remains the same, but leave taken by the recipient employee is always paid at the recipient employee's regular rate of pay.

It is the responsibility of each employee to monitor his or her PTO bank to ensure that adequate PTO time is available to allow for a donation.

#### 3-6 Lactation Breaks

The CMHPSM will provide a reasonable amount of break time to accommodate an employee desiring to express breast milk for the employee's infant child, in accordance with and to the extent required by applicable law. The break time, if possible, must run concurrently with rest and meal periods already provided to the employee. If the break time cannot run concurrently with rest and meal periods already provided to the employee, the break time will be unpaid, subject to applicable law.

The CMHPSM will make reasonable efforts to provide employees with the use of a room or location other than a toilet stall for the employee to express milk in private. This location may be the employee's private office, if applicable. The CMHPSM may not be able to provide additional break time if doing so would seriously disrupt the CMHPSM's operations, subject to applicable law. Please consult the Regional Coordinator if you have questions regarding this policy.

Employees should advise management if they need break time and an area for this purpose. Employees will not be discriminated against or retaliated against for exercising their rights under this policy.

# 3-7 Workers' Compensation

On-the-job injuries are covered by our Workers' Compensation Insurance Policy, which is provided at no cost. If employees are injured on the job, no matter how slightly, they should Version:  $9/\frac{78}{20221}$ 

report the incident immediately to their Supervisor. Failure to follow CMHPSM procedures may affect the ability of the employee to receive Workers Compensation benefits.

This is solely a monetary benefit and not a leave of absence entitlement. Employees who need to miss work due to a workplace injury must also request a formal leave of absence. See the Leave of Absence sections of this handbook for more information.

## 3-8 Jury Duty

Community Mental Health Partnership of Southeast Michigan realizes that it is the obligation of all U.S. citizens to serve on a jury when summoned to do so. All employees will be allowed time off to perform such civic service as required by law. Employees are expected, however, to provide proper notice of a request to perform jury duty and verification of their service.

Employees also are expected to keep management informed of the expected length of jury duty service and to report to work for the major portion of the day if excused by the court. If the required absence presents a serious conflict for management, employees may be asked to try to postpone jury duty.

Employees on jury duty leave will be paid for their jury duty service in accordance with state law; however, exempt employees will be paid their full salary for any week in which time is missed due to jury duty if work is performed for the CMHPSM during such week.

#### 3-9 Bereavement Leave

Regular employees shall be granted bereavement leave with pay in the event of a death in the immediate family\*. Employees shall be granted three (3) days of paid leave in cases when death has occurred in the immediate family. In cases of a death of a spouse, domestic partner, parent, sibling and children of the employee, the employee's spouse, or the employee's daughter-in-law or son-in-law an additional two (2) days of paid leave shall be granted to the employee.

An employee who wishes to take time off due to the death of an immediate family member should notify their supervisor immediately. Bereavement leave will be granted unless there are unusual business needs or staffing requirements. The CMHPSM may require documented proof of an employee's relationship with the deceased.

The Chief Executive Officer may grant funeral leave to employees to attend the funeral of another CMHPSM or Regional employee.

\*For purposes of this policy, immediate family is defined as: spouse, domestic partner, parent, brother, sister, child, stepchild, daughter-in-law, son-in-law, mother-in-law, father-in-law, sister-in-law, brother-in-law, aunts, uncles, nieces, nephews, grandparents, spouse's grandparents, parents and grandparents of employee's minor children, or someone with whom the employee has a legal relationship or a related member in an employee's household and all such relatives of one's spouse.

## 3-10 Voting Leave

In the event an employee does not have sufficient time outside of working hours to vote in a statewide election, if required by state law, the employee may take off enough working time to vote. Such time will be paid if required by state law. This time should be taken at the beginning or end of the regular work schedule. Where possible, your Supervisor should be notified at least two days prior to the voting day.

## **3-11 Insurance Programs**

CMHPSM currently offers a flexible benefit program for all regular full-time employees. This program allows each employee to choose those benefits that best meet their individual needs. The program year for the plan has been December 1 through November 30 January 1 through December 31 and is renewed on an annual basis. Effective January 1, 2022, the CMHPSM is expected to transition to a January 1 through December 31 benefit plan year which will renew annually. Please contact the CMHPSM Regional Coordinator for more information. All regular full-time CMHPSM employees are eligible for Medical, Dental and Vision insurance coverage while employed.

#### **Medical Insurance**

CMHPSM currently offers regular full-time employees a medical insurance coverage option as specified in plan documents. Employees have up to 30 days from their date of hire to make the medical plan election. Once made, the election is fixed for the remainder of the plan year.

All qualified changes in family status (births, marriages, etc.) which may affect coverage must be reported to the Regional Coordinator within thirty (30) days of the event. It is the responsibility of the employee to notify CMHPSM of all changes. Please contact the Regional Coordinator to determine if a family status change qualifies under the Plan document and IRS regulations.

The terms of the medical insurance policy control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend Version: 9/78/20221

or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control.

#### **Dental and Vision Insurance**

CMHPSM automatically enrolls regular full-time employees in dental and vision insurance coverage as specified in plan documents. Employees have up to 30 days from their date of hire to elect dental and vision coverage for a spouse and/or child(ren). Once made, the election is fixed for the remainder of the plan year.

All qualified changes in family status (births, marriages, etc.) which may affect coverage must be reported to the Regional Coordinator within thirty (30) days of the event. It is the responsibility of the employee to notify CMHPSM of all changes. Please contact the Regional Coordinator to determine if a family status change qualifies under the Plan document and IRS regulations.

The terms of the insurance policies control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control. For more information regarding benefits programs or who is eligible for coverage, please contact the Regional Coordinator.

#### Life and Accidental Death & Dismemberment Insurance

CMHPSM currently offers regular full-time employees an employer-paid basic group term life policy along with an accidental death and dismemberment policy. The terms of the insurance policies control the benefits provided thereunder and the employee's eligibility for benefits. CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control. The Regional Coordinator is available to answer benefits plan questions and assist in enrollment as needed.

#### 3-12 Domestic Partner Benefits

CMHPSM acknowledges the needs of a diverse workforce and fairness in providing benefits to our employees, their dependents, and their spouses and domestic partners.

Domestic partners are those individuals who meet the following criteria:

- At least 18 years old and mentally competent to consent to a contract.
- Not legally married to anyone.
- Not related by blood to a degree of closeness that would prohibit legal marriage in the State of Michigan.
- Have entered into the domestic partner relationship voluntarily and without reservation.
- Are jointly responsible for each other's common welfare and shared financial obligations.
- Intend to continue the domestic partner relationship indefinitely, with the understanding that the relationship can be terminated at any time by either partner.

Employees who wish to apply for domestic partner benefits must complete an Affidavit of Domestic Partnership. The original form will be kept in the Regional Coordinator's office. This original form will be kept on file indefinitely with CMHPSM and will be deemed effective until one of the following occurs:

- The employee changes the partner designation by completing a new Affidavit of Domestic Partnership and returns the new form to CMHPSM.
- The employee requests removal of the document and completes an Affidavit of Termination of Domestic Partnership Benefits coverage for the domestic partner and his or her dependents will terminate at the end of the month in which the relationship ended.

# **3-13 Short-Term and Long-Term Disability Benefits**

Full-time employees are eligible to participate in the short-term and long-term disability plans, subject to all terms and conditions of the agreement between the CMHPSM and the insurance carrier.

This is solely a monetary benefit and not a leave of absence. Employees who will be out of work must also request a formal Leave of Absence. See the Leave of Absence sections of this handbook for more information.

Employees will be required to submit medical certification as requested by short term or long-term disability insurance carrier and/or the CMHPSM. Required medical certification under this policy—may—differ from—the—medical—certification—required—for—any—leave—of—absence requested.

# 3-14 Employee Assistance Program

The CMHPSM recognizes that a wide range of problems - such as marital or family distress, alcoholism, and drug abuse - not directly associated with an individual's job function can nonetheless be detrimental to an employee's performance on the job. Consequently, we believe it is in the interest of employees and the Company to provide an effective program to assist employees and their families in resolving problems such as these as the need arises. To this end, the Company provides an Employee Assistance Program (EAP) for employees and their eligible family members. The EAP is designed to provide voluntary, private, confidential, and professional counseling outside the workplace for any type of personal problem. The EAP provides consultation services for referrals to local community treatment sources.—\_All employees are eligible to use this program and are encouraged to do so. Employee visits to the EAP are held in confidence to the maximum possible extent.

Participation in the EAP does not excuse employees from otherwise complying with Company policies or from meeting normal job requirements during or after receiving assistance. Nor will participation in our employee assistance program prevent the Company from taking disciplinary action against any employee for performance problems that occur before, during, or after the employee seeks assistance through the program.

Further details can be obtained by referring to the EAP guide that is posted in the Documents section of the third-party HR system and also in the Benefit Resources section of the HUB Benefit Spot mobile app.

#### 3-15 Retirement Plan

Eligible employees are strongly encouraged to participate in the CMHPSM's 401(a) defined contribution/457 deferred compensation retirement plan. The CMHPSM will match 100% of employee contributions up to 6% of employee gross salary. The CMHPSM will initially autoenroll all eligible employees in the retirement plan at a 6% of gross salary contribution to the 457 plan, which earns the full 6% of gross salary match from the CMHPSM to the 401a plan. Employees have a right to opt out of their 457 plan contribution, and have the ability to increase or decrease their individual contribution within any applicable IRS guidelines. Upon becoming eligible to participate in the retirement plan, an employee will be provided with communication about the retirement plan, the CMHPSM's contributions, vesting requirements, and an employee's right to opt-out of the retirement plan.

Employee Contribution to 457	Employer Match of Employee Contribution to 401a %
1%-6% of Employee Gross Salary	100%
Employee contributions beyond 6%	
of Employee Gross Salary earn no	0%
Employer match beyond 6%	

457 Employee Contribution (% of Employee Gross Salary)	+	401a Employer Contribution Example (% of Employee Gross Salary)	=	Total Employee and Employer Contribution (% of Employee Gross Salary)
0%	+	0%	=	0%
1%	+	1%	=	2%
2%	+	2%	=	4%
3%	+	3%	=	6%
4%	+	4%	=	8%
5%	+	5%	=	10%
6%	+	6%	=	12%
>6%	+	Maximum employer contribution 6% of employee gross salary.	=	Employee contribution + 6%

 Employee contribution\_may not exceed\_IRS\_retirement plan maximum\_annual contribution limits. Contact the Regional Coordinator for current tax year information.

CMHPSM reserves and retains the unilateral right to amend or terminate any benefit, benefit level, employer contribution or benefit plan. In the event there arises any conflict between this summary and the plan documents, the plan documents control.

#### Section 4 - Leaves of Absence

#### **4-1 Personal Leave**

If employees are ineligible for any other CMHPSM leave of absence, the Community Mental Health Partnership of Southeast Michigan, under certain circumstances, may grant a personal leave of absence without pay. A written request for a personal leave should be presented to Version: 9/78/20221

management at least two (2) weeks before the anticipated start of the leave. If the leave is requested for medical reasons and employees are not eligible for leave under the federal Family and Medical Leave Act (FMLA) or any state leave law, medical certification also must be submitted. The request will be considered on the basis of staffing requirements and the reasons for the requested leave, as well as performance and attendance records. Normally, a leave of absence will be granted for a period of up to eight (8) weeks. However, a personal leave may be extended if, prior to the end of leave, employees submit a written request for an extension to management and the request is granted. We will continue health insurance coverage during the leave if employees submit their share of the monthly premium payments to the CMHPSM in a timely manner, subject to the terms of the plan documents.

When the employee anticipates returning to work, he or she should notify management of the expected return date. This notification should be made at least one week before the end of the leave.

Upon completion of the personal leave of absence, the CMHPSM will attempt to return employees to their original job or a similar position, subject to prevailing business considerations. Reinstatement, however, is not guaranteed.

Failure to advise management of availability to return to work, failure to return to work when notified or a continued absence from work beyond the time approved by the CMHPSM will be considered a voluntary resignation of employment.

Personal leave runs concurrently with any CMHPSM-provided Short-Term Disability Leave of Absence.

# 4-2 Military Leave

If employees are called into active military service or enlist in the uniformed services, they will be eligible to receive an unpaid military leave of absence. To be eligible for military leave, employees must provide management with advance notice of service obligations unless they are prevented from providing such notice by military necessity or it is otherwise impossible or unreasonable to provide such notice. Provided the absence does not exceed applicable statutory limitations, employees will retain reemployment rights and accrue seniority and benefits in accordance with applicable federal and state laws. Employees should ask management for further information about eligibility for Military Leave.

If employees are required to attend yearly Reserves or National Guard duty, they can apply for an unpaid temporary military leave of absence not to exceed the number of days allowed by law (including travel). They should give management as much advance notice of their need

for military leave as possible so that we can maintain proper coverage while employees are away.

#### Section 5 - General Standards of Conduct

# **5-1 Workplace Conduct**

Community Mental Health Partnership of Southeast Michigan endeavors to maintain a positive work environment. Each employee plays a role in fostering this environment. Accordingly, we all must abide by certain rules of conduct, based on honesty, common sense and fair play.

Because everyone may not have the same idea about proper workplace conduct, it is helpful to adopt and enforce rules all can follow. Unacceptable conduct may subject the offender to disciplinary action, up to and including discharge, in the CMHPSM's sole discretion. The following are examples of some, but not all, conduct which can be considered unacceptable:

- 1. Obtaining employment on the basis of false or misleading information.
- Stealing, removing, or defacing Community Mental Health Partnership of Southeast Michigan—\_property—\_or a—\_co-worker's—\_property,—\_and/or—\_disclosure—\_of confidential information.
- 3. Completing another employee's time records.
- 4. Violation of safety rules and policies.
- 5. Violation of Community Mental Health Partnership of Southeast Michigan's Drug and Alcohol-Free Workplace Policy.
- 6. Fighting, threatening, or disrupting the work of others or other violations of Community Mental Health Partnership of Southeast Michigan's Workplace Violence Policy.
- 7. Failure to follow lawful instructions of a supervisor.
- 8. Failure to perform assigned job duties.
- 9. Violation of the Punctuality and Attendance Policy, including but not limited to irregular attendance, habitual lateness, or unexcused absences.
- 10. Gambling on CMHPSM property.
- 11. Willful or careless destruction or damage to CMHPSM assets or to the equipment or possessions of another employee.
- 12. Wasting work materials.
- 13. Performing work of a personal nature during working time.
- 14. Violation of the Solicitation and Distribution Policy.
- 15. Violation—\_of—\_Community—\_Mental—\_Health—\_Partnership—\_of—\_Southeast Michigan's

Harassment or Equal Employment Opportunity Policies.

16. Violation of the Communication and Computer Systems Policy. Version: 9/78/20221

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- 17. Unsatisfactory job performance.
- 18. Any other violation of Company policy.

**Progressive Discipline Process:** 

First Occurrence: Verbal warning and notation in personnel file Second Occurrence: Written warning, included in personnel file

Third Occurrence: Three-day unpaid suspension & final written warning, included in

personnel file

Fourth Occurrence: Subjected to termination of employment

Following are examples of conduct which will be cause for immediate discharge upon the first offense:

- 1. Possession of firearms or other weapons on office premises
- 2. Unauthorized possession, use or distribution of drugs or controlled substances
- 3. Theft or attempted theft
- 4. Gross neglect of duties
- 5. Insubordination or refusal to follow instructions
- 6. Falsification of records

Obviously, not every type of misconduct can be listed. Note that all employees are employed at-will, and the Community Mental Health Partnership of Southeast Michigan reserves the right to impose whatever discipline it chooses, or none at all, in a particular instance. The CMHPSM will deal with each situation individually and nothing in this handbook should be construed as a promise of specific treatment in a given situation. However, Community Mental Health Partnership of Southeast Michigan will endeavor to utilize progressive discipline but reserves the right in its sole discretion to terminate an employee at any time for any reason.

The observance of these rules will help to ensure that our workplace remains a safe and desirable place to work.

# 5-2 Open Communication

CMHPSM is committed to creating the best work environment – a place where everyone's voice is heard, where issues are promptly raised and resolved, and where communication flows across all levels of the organization. Openness is essential to quickly resolve concerns, to recognize business issues as they arise, and to address the changing needs of our diverse workforce.

The essence of the CMHPSM's Open Communication Policy is open communication in an environment of trust and mutual respect that creates a solid foundation for collaboration, growth, high performance, and success across CMHPSM and its partner agencies.

It provides for a work environment where:

- Open, honest, appropriate, professional communication between employees and managers is a day-to-day business practice
- Employees may seek counsel, provide or solicit feedback, or raise concerns within the organization
- Managers hold the responsibility for creating a work environment where employees' professional and constructive input is welcome, advice is freely given, and issues are surfaced early and are candidly shared without the fear of retaliation when this input is shared in good faith

The CMHPSM encourages employees to discuss any issues they may have with a coworker or supervisor directly with that person in an appropriate manner. If a resolution is not reached, employees should arrange a meeting with their supervisor.—If the concern, problem, or issue is not properly addressed, employees should contact the Regional Coordinator.—Retaliation against any employee for appropriate usage of Open Communication channels is unacceptable.

The\_CMHPSM seeks to deal openly and directly with\_its\_employees and believes that communication between employees and management is critical to solving problems. Co- workers that may have a problem with one another should attempt to resolve the problem themselves. If a resolution cannot be agreed upon, both employees should approach the CEO, who will work with the employees to determine a resolution. In these instances, the decision of the CEO is final. Employees that have a problem with the CEO should address the concern directly with the CEO.

If you have a question or wish to discuss a possible violation, you should first discuss it with your supervisor. If you are not comfortable with that approach for any reason, or if no action is taken, please contact the Regional Coordinator.

# **5-3 Punctuality and Attendance**

Employees are hired to perform important functions at the Community Mental Health Partnership of Southeast Michigan. As with any group effort, operating effectively takes cooperation and commitment from everyone. Therefore, attendance and punctuality are very important. Unnecessary absences and lateness are expensive, disruptive and place an unfair burden on fellow employees and Supervisors. We expect excellent attendance from all employees. Excessive absenteeism or tardiness will result in disciplinary action up to and including discharge.

We do recognize, however, there are times when absences and tardiness cannot be avoided. In such cases, employees are expected to notify Supervisors as early as possible, but no later than the start of the workday. Asking another employee, friend or relative to give this notice is improper and constitutes grounds for disciplinary action. Employees should contact their Supervisor, stating the nature of their illness or situation and its expected duration, for every day of absenteeism.

Unreported absences of three (3) consecutive—workdays generally will be considered a voluntary resignation of employment with the CMHPSM.

# 5-4 Use of Communications and Computer Systems

The Community Mental Health Partnership of Southeast Michigan's communication and computer systems are intended primarily for business purposes; however limited personal usage is permitted if it does not hinder performance of job duties or violate any other CMHPSM policy. This includes the voice mail, e-mail, and Internet systems. Users have no legitimate expectation of privacy regarding their use of the Community Mental Health Partnership of Southeast Michigan systems.

The Community Mental Health Partnership of Southeast Michigan may access the voice mail and e-mail systems and obtain the communications within the systems, including past voice mail and e-mail messages, without notice to users of the system, in the ordinary course of business when the CMHPSM deems it appropriate to do so. The reasons for which the CMHPSM may obtain such access include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that CMHPSM operations continue appropriately during an employee's absence.

Further, the Community Mental Health Partnership of Southeast Michigan may review Internet usage to ensure that such use with CMHPSM property, or communications sent via the Internet with CMHPSM property, are appropriate. The reasons for which the CMHPSM may review employees' use of the Internet with CMHPSM property include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that CMHPSM operations continue appropriately during an employee's absence.

The CMHPSM will store, archive, and delete electronic communications according to information retention policies.

The CMHPSM's policies prohibiting harassment, in their entirety, apply to the use of CMHPSM's communication and computer systems. No one may use any communication or computer system in a manner that may be construed by others as harassing or offensive based on race, national origin, sex, sexual orientation, age, disability, religious beliefs or any other characteristic protected by federal, state or local law.

Further, since the CMHPSM's communication and computer systems are intended for business use, all employees, upon request, must inform management of any private access codes or passwords.

Unauthorized duplication of copyrighted computer software violates the law and is strictly prohibited.

No employee may access, or attempt to obtain access to, another employee's computer systems without appropriate authorization.

Violators of this policy may be subject to disciplinary action, up to and including discharge.

#### 5-5 Use of Social Media

The Community Mental Health Partnership of Southeast Michigan respects the right of any employee to maintain a blog or web page or to participate in a social networking, including but not limited to Twitter, Instagram, SnapChat, TikTok, Facebook and LinkedIn. However, to protect the CMHPSM interests and ensure employees focus on their job duties, employees must adhere to the following rules:

Employees may not post on a blog or web page or participate on a social networking platform, such as Twitter, Instagram, SnapChat, Facebook, LinkedIn or similar sites, during work time or at any time with CMHPSM equipment or property.

All rules regarding confidential and proprietary business information apply in full to blogs, web pages and social networking platforms, such as Twitter, Instagram, SnapChat, TikTok, Facebook, LinkedIn, or similar sites. Any information that cannot be disclosed through a conversation, a note or an e-mail also cannot be disclosed in a blog, web page or social networking site.

Whether an employee is posting something on his or her own blog, web page, social networking, Twitter, Instagram, SnapChat, TikTok, Facebook, LinkedIn or similar site or on someone else's account, if the employee mentions the CMHPSM and also expresses either a political opinion or an opinion regarding the CMHPSM's actions that could pose an actual or

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potential conflict of interest with the CMHPSM, the poster must include a disclaimer. The poster should specifically state that the opinion expressed is his/her personal opinion and not the CMHPSM's position. This is necessary to preserve the CMHPSM's good will in the marketplace.

Any conduct that is impermissible under the law if expressed in any other form or forum is impermissible if expressed through a blog, web page, social networking, Twitter, or similar site. For example, posted material that is discriminatory, obscene, defamatory, libelous, or violent is forbidden. CMHPSM policies apply equally to employee social media usage.

The Community Mental Health Partnership of Southeast Michigan encourages all employees to keep in mind the speed and manner in which information posted on a blog, web page, and/or social networking site is received and often misunderstood by readers. Employees must use their best judgment. Employees with any questions should review the guidelines above and/or consult with their manager. Failure to follow these guidelines may result in discipline, up to and including discharge.

# 5-6 Personal and Company-Provided Portable Communication Devices

CMHPSM-provided portable communication devices (PCDs), including cell phones and laptops, should be used primarily for business purposes. Employees have no reasonable expectation of privacy in regard to the use of such devices, and all use is subject to monitoring, to the maximum extent permitted by applicable law. This includes, as permitted, the right to monitor personal communications as necessary.

Some employees may be authorized to use their own PCD for business purposes. These employees should work with the IT department to configure their PCD for business use. Communications sent via a personal PCD also may subject to monitoring if sent through the CMHPSM's networks and the PCD must be provided for inspection and review upon request.

All conversations, text messages and e-mails must be professional. When sending a text message or using a PCD for business purposes, whether it is a CMHPSM-provided or personal device, employees must comply with applicable CMHPSM guidelines, including policies on sexual harassment, discrimination, conduct, confidentiality, equipment use and operation of vehicles. Using—a—CMHPSM-issued—PCD—to—send or—receive personal text messages is prohibited at all times and personal use during working hours should be limited to emergency situations.

If an employee who uses a personal PCD for business resigns or is discharged, the employee will be required to submit the device to the IT department for resetting on or before his or her

last day of work. At that time, the IT department will reset and remove all information from the device, including but not limited to, CMHPSM information and personal data (such as contacts, e-mails, and photographs). The IT department will make efforts to provide employees with the personal data in another form (e.g., on a disk) to the extent practicable; however, the employee may lose some or all personal data saved on the device.

Employees may not use their personal PCD for business unless they agree to submit the device to the IT department on or before their last day of work for resetting and removal of CMHPSM information. This is the only way currently possible to ensure that all CMHPSM information is removed from the device at the time of termination. The removal of CMHPSM information is crucial to ensure compliance with the CMHPSM's confidentiality and proprietary information policies and objectives.

Please note that whether employees use their personal PCD or a CMHPSM-issued device, the CMHPSM's electronic communications policies, including but not limited to, proper use of communications and computer systems, remain in effect. Michigan's Freedom of Information Act (FOIA) applies to all work-related conversations whether they occur on a personal or CMHPSM issued communication device. Employees shall not attempt to evade FOIA requirements by utilizing non-CMHPSM communication devices or services.

#### Portable Communication Device Use While Driving

Employees who drive on CMHPSM business must abide by all state or local laws prohibiting or limiting PCD (cell phone or personal digital assistant) use while driving. Further, even if usage is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking, or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while the employee is driving, and permitted by law, the employee must use a hands-free option and advise the caller that he/she is unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a cell phone while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

# 5-7 Inspections

Community Mental Health Partnership of Southeast Michigan reserves the right to require employees while on CMHPSM property, or on client property, to agree to the inspection of their persons, personal possessions and property, personal vehicles parked on CMHPSM or client property, and work areas. This includes lockers, vehicles, desks, cabinets, workstations, packages, handbags, briefcases and other personal possessions or places of concealment, as well as personal mail sent to the CMHPSM or to its clients. Employees are expected to cooperate in the conduct of any search or inspection.

# 5-8 Smoking

No use of tobacco or smoking, including the use of e-cigarettes, will be allowed anywhere in any CMHPSM building or property. CMHPSM is a tobacco-free and smoke-free workplace for the health, safety, and well-being of all of its employees and visitors. The tobacco-free workplace policy applies to:

- All employees, temporary employees, and student interns.
- All visitors (e.g. consumers or vendors) to the company premises.
- All contractors and consultants and/or their employees working on the company premises.
- All areas of CMHPSM buildings and adjacent parking areas.
- All CMHPSM-sponsored off-site conferences and meetings.

Employees who violate this policy will be subject to disciplinary action up to and including immediate discharge.

#### 5-9 Personal Mail

Personal mail should not be addressed to CMHPSM addresses. You may not use CMHPSM postage or other CMHPSM property for personal business.

# **5-10 Personal Visits and Telephone Calls**

Disruptions during work time can lead to errors and delays. Therefore, we ask that personal telephone calls be kept to a minimum, and only be made or received after working time, or during lunch or break time.

Friends, relatives, and children of employees are not allowed in the working areas without signing in. All visitors will be escorted through the offices once notified of a visitor's arrival. It will be your responsibility to ensure the confidentiality of business and consumer information in accordance with the confidentiality policy.

#### 5-11 Solicitation and Distribution

To avoid distractions, solicitation by an employee of another employee is prohibited while either employee is on work time. "Work time" is defined as the time an employee is engaged, or should be engaged, in performing his/her work tasks for Community Mental Health Partnership of Southeast Michigan. Solicitation of any kind by non-employees on CMHPSM premises is always prohibited.

Distribution of advertising material, handbills, printed or written literature of any kind in working areas of the CMHPSM is always prohibited. Distribution of literature by non-employees on CMHPSM premises is always prohibited.

# **5-12 Confidential Company Information**

During the course of work, an employee may become aware of confidential information about the Community Mental Health Partnership of Southeast Michigan's business, including but not limited to information regarding CMHPSM finances, pricing, products and new product development, software and computer programs, marketing strategies, suppliers and customers and potential customers. An employee also may become aware of similar confidential information belonging to the CMHPSM's clients. It is extremely important that all such information remain confidential, and particularly not be disclosed to our competitors. Any employee who improperly copies, removes (whether physically or electronically), uses or discloses confidential information to anyone outside of the CMHPSM may be subject to disciplinary action up to and including termination. Employees may be required to sign an agreement reiterating these obligations.

#### 5-13 Conflict of Interest and Business Ethics

It is the Community Mental Health Partnership of Southeast Michigan's policy that all employees avoid any conflict between their personal interests and those of the CMHPSM. The purpose of this policy is to ensure that the CMHPSM's honesty and integrity, and therefore its Version: 9/78/20221

reputation, are not compromised. The fundamental principle guiding this policy is that no employee should have, or appear to have, personal interests or relationships that actually or potentially conflict with the best interests of the CMHPSM.

It is not possible to give an exhaustive list of situations that might involve violations of this policy. However, the situations that would constitute a conflict in most cases include but are not limited to:

- holding an interest in or accepting free or discounted goods from any organization that does, or is seeking to do, business with the CMHPSM, by any employee who is in a position to directly or indirectly influence either the CMHPSM's decision to do business, or the terms upon which business would be done with such organization;
- 2. holding any interest in an organization that competes with the CMHPSM;
- being employed by (including as a consultant) or serving on the board of any organization which does, or is seeking to do, business with the CMHPSM or which competes with the CMHPSM; and/or
- 4. profiting personally, e.g., through commissions, loans, expense reimbursements or other payments, from any organization seeking to do business with the CMHPSM.

A conflict of interest would also exist when a member of an employee's immediate family is involved in situations such as those above.

This policy is not intended to prohibit the acceptance of modest courtesies, openly given and accepted as part of the usual business amenities, for example, occasional business-related meals or promotional items of nominal or minor value. It is your responsibility to report any actual or potential conflict that may exist between you (and your immediate family) and the CMHPSM. See the CMHPSM Conflict of Interest policy for more details.

# **5-14 Political Activity**

Every employee has the right to freely express his or her views as a citizen and to cast a vote as he or she may wish. Coercion for political purposes is strictly prohibited. Employees of federally aided programs are, however, prohibited from participation in partisan political activity under the Federal Hatch Political Activities Act.

No employee shall engage in any partisan political activity or campaigning for a non-partisan elective office during scheduled working hours or while on duty or while off duty wearing a uniform or other identifying insignia of CMHPSM or employment. Solicitation of signatures or contributions or nominating petitions is prohibited during working hours. No employee shall be required to engage in a campaign for election of any candidate.—CMHPSM Board and

employees are not permitted to use agency funds or resources to contribute to political campaigns or activities of any political party.

# **5-15 Outside Employment**

While we hope that employment with the CMHPSM is fully rewarding to you and it is generally discouraged to have outside employment, employees may engage in outside or supplemental employment in accordance with the following limitations.—\_In no case shall outside or supplemental employment conflict with or impair your responsibilities to the CMHPSM.

Any employee desiring to participate in outside or supplemental employment must obtain permission of the Chief Executive Officer in writing prior to engaging in outside or supplemental employment. All employees engaged in outside or supplemental employment shall:

- Not compete with, conflict with or compromise CMHPSM interests or adversely affect job performance and the ability to fulfill all job responsibilities.
- Nor perform any services for customers that are normally performed by CMHPSM.
- Not -use of any CMHPSM facilities, supplies, files or equipment including the unauthorized use or application of any confidential information.
- Not solicit or conduct any outside business during paid working time nor use CMHPSM facilities or staff as a source of referral for private customers or clients,
- Not use the name of the CMHPSM as a reference or credential in advertising or soliciting customers or clients.
- Maintain a clear separation of outside or supplemental employment from activities performed for CMHPSM, and
- Not cause any incompatibility, conflict of interest, or any possible appearance of conflict of interest, or any impairment of the independent and impartial performance of employee's duties. CMHPSM shall not be liable, either directly or indirectly for any activities performed during outside or supplemental employment.

You are cautioned to carefully consider the demands that additional work activity will create before accepting outside employment. Outside employment will not be considered an excuse for poor job performance, absenteeism, tardiness, leaving early, refusal to travel or refusal to work overtime or different hours. If CMHPSM determines that an employee's outside work interferes with performance, the employee may be asked to terminate the outside employment.

5-16 Use of Facilities, Equipment and Property, Including Intellectual Property

Equipment essential in accomplishing job duties is often expensive and may be difficult to replace. When using property, employees are expected to exercise care, perform required maintenance, and follow all operating instructions, safety standards and guidelines.

Employees should notify their Supervisor if any equipment, machines, or tools appear to be damaged, defective, or in need of repair. Prompt reporting of loss, damages, defects, and the need for repairs could prevent deterioration of equipment and possible injury to employees or others. The Supervisor can answer any questions about an employee's responsibility for maintenance and care of equipment used on the job.

Employees also are prohibited from any unauthorized use of the CMHPSM's intellectual property, such as audio and video tapes, print materials and software. A CMHPSM employee who creates intellectual property in the normal course of their duties cannot claim to own that intellectual property.

Improper, careless, negligent, destructive, or unsafe use or operation of equipment can result in discipline, up to and including discharge.

Further, the CMHPSM is not responsible for any damage to employees' personal belongings unless the employee's Supervisor provided advance approval for the employee to bring the personal property to work.

# 5-17 Building Access and Sign-in Procedures

CMHPSM suite doors will be locked at all times outside the hours of 8:30 AM to 4:30 PM Monday through Friday on days the CMHPSM is open to business. Your CMHPSM key fob should be used to enter the—CMHPSM office within our office building. Employees are prohibited from loaning or providing the key fob to another employee or individual.—If your key fob is lost, you must notify the CMHPSM CIO immediately for security purposes and to obtain a replacement fob. The exterior office building doors are open Monday through Friday during extended working hours that are controlled by the landlord. Landlord-issued key cards have been provided to the CMHPSM for employee use. Employees may request a key card for the exterior doors if they need to frequently access the building outside of extended work hours Monday through Friday. Employees may also temporarily check out exterior door key cards when access to the office building is infrequently required.

For safety and security reasons it is important to assure an accurate account of all building occupants at any given time.—You must sign-in/out upon entering/exiting the building at the beginning/end of your shift, for lunch breaks, or any other break where you leave the building.

# 5-18 Health and Safety

The health and safety of employees and others on CMHPSM property are of critical concern to CMHPSM. CMHPSM intends to comply with all health and safety laws applicable to our business. It is the responsibility of each employee to conduct all tasks in a safe and efficient manner complying with all local, state and federal safety and health regulations and program standards, and with any special safety concerns for use in a particular area or with a consumer.

All employees must report unsafe conditions to their supervisors. CMHPSM follows the guidelines established by the Michigan Occupational Safety and Health Administration (MIOSHA) to ensure the safety and well-being of all CMHPSM employees.

CMHPSM also follows procedures to comply with requirements of the Michigan "Right-To-Know" Law as it relates to CMHPSM operations including labeling of hazardous materials, procurement and proper placement of Material Safety Data Sheets (MSDS), development of a written Hazardous Communication Program, maintaining a chemical inventory and training of employees. The MSDS may be reviewed by employees and is available in the main kitchen area.

Any workplace injury, accident or illness must be reported to your supervisor as soon as possible, regardless of the severity of the injury or accident. Any employee involved in a work related accident or injury must (1) report that accident or injury to his/her immediate supervisor as soon as possible (ideally within 24 hours) after the injury and (2) fill out the proper reporting forms, i.e. Employee's Report of Injury. Failure to properly report an injury may disqualify an employee for benefits. It is the employee's responsibility to immediately notify their immediate supervisor or in the absence of the immediate supervisor, the next available supervisor of any injuries sustained while on the job. An employee who completes an accident report claiming their injury or illness is work related may be sent to a CMHPSM doctor or a prior approved medical facility or doctor.

#### **Emergency Response Plan**

The Emergency Response Plan is updated annually by the Leadership Team. This plan outlines procedures for responding to situations including fire, tornado warnings, severe thunderstorm warnings, disruptive persons, safe rooms, and first aid. The Emergency Response Plan is located on the CMHPSM shared drive. Quick reference guides are posted

throughout the office to be readily available and easy to use in case of emergency. Safety training is provided to new employees at orientation and to all employees annually.

#### **Inclement Weather or Other Emergency Closure**

On occasion it may be necessary to delay the start of a workday, or close CMHPSM for an entire day, due to inclement weather or another emergency. The Chief Executive Officer makes the determination, notifies the Leadership Team, and a fan-out communication list is used to notify staff prior to working hours of any CMHPSM closures and procedures to follow in the event of inclement weather or other emergency. Emergency closing information may also be relayed to all CMHPSM staff through an all-staff email, a Teams message or some other electronic communication. It is your responsibility to ensure that your contact information has been updated with your supervisor.

# 5-19 Hiring Relatives/Employee Relationships

A familial relationship among employees can create an actual or at least a potential conflict of interest in the employment setting, especially where one relative supervises another relative. To avoid this problem, the Community Mental Health Partnership of Southeast Michigan may refuse to hire or place a relative in a position where the potential for favoritism or conflict exists.

In other cases, such as personal relationships where a conflict or the potential for conflict arises, even if there is no supervisory relationship involved, the parties may be separated by reassignment or discharged from employment, at the discretion of the CMHPSM. Accordingly, all parties to any type of intimate personal relationship must inform management.

If two employees marry, become related, or enter into an intimate relationship, they may not remain in a reporting relationship or in positions where one individual may affect the compensation—or other—terms—or—conditions—of—employment—of—the—other—individual. The CMHPSM generally will attempt to identify other available positions, but if no alternate position is available, the CMHPSM retains the right to decide which employee will remain with the CMHPSM.

For the purposes of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

# 5-20 Employee Dress and Personal Appearance

You are expected to report to work well-groomed, clean, and dressed according to the requirements of your position. Some employees may be required to wear uniforms or safety equipment/clothing. Please contact your Supervisor for specific information regarding acceptable attire for your position. If you report to work dressed or groomed inappropriately, you may be prevented from working until you return to work well-groomed and wearing the proper attire.

# 5-21 Publicity/Statements to the Media

All media inquiries regarding the position of the CMHPSM as to any issues must be referred to the CEO. Only the CEO is authorized to make or approve public statements on behalf of the CMHPSM. No employees, unless specifically designated by the CEO, are authorized to make those statements on behalf of CMHPSM. Any employee wishing to write and/or publish an article, paper, or other publication on behalf of the CMHPSM must first obtain approval from the CEO.

# **5-22 Operation of Vehicles**

All employees authorized to drive CMHPSM-owned or leased vehicles or personal vehicles in conducting CMHPSM business must possess a current, valid driver's license and an acceptable driving record. Any change in license status or driving record must be reported to management immediately.

An employee must have a valid driver's license in his or her possession while operating a vehicle off or on CMHPSM property. It is the responsibility of every employee to drive safely and obey all traffic, vehicle safety, and parking laws or regulations. Drivers must always demonstrate safe driving habits.

CMHPSM-owned or leased vehicles may be used only as authorized by management.

#### Portable Communication Device Use While Driving

Employees who drive on CMHPSM business must abide by all state or local laws prohibiting or limiting portable communication device (PCD) use, including cell phones or personal digital assistants, while driving. Further, even if use is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking, or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while the employee is driving, and permitted by law, the employee must use a hands-free option and advise the caller that he/she is unable to speak at that time and will return the call shortly. Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a PCD while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

# 5-23 Business Expense Reimbursement

#### **Expenses for Conferences and Travel**

Employees will be reimbursed for reasonable expenses incurred in connection with approved travel on behalf of CMHPSM.

Employees seeking reimbursement should incur the lowest reasonable travel expenses and exercise care to avoid the appearance of impropriety. If a circumstance arises that is not specifically covered in the travel policies, the most conservative course of action should be adopted.

Requests for reimbursement of mileage for travel between work sites and other sites for meetings, training or provider monitoring will be reimbursed at the Internal Revenue Service approved travel rate.

Travel must be authorized in advance. Travelers should verify that planned travel is eligible for reimbursement before making travel arrangements. Expenses may include air travel, hotels, motels, meals, cab fare, rental vehicles, or gas and car mileage for personal vehicles. You should contact your supervisor in advance if you have any question about whether an expense will be reimbursed.

Upon completion of the trip, and within 30 days, the traveler must submit a Business Expense Reimbursement Form and supporting documentation to obtain reimbursement of expenses. Documentation is required for all expenses. Any expenses incurred during the conference that

are not covered under the pre-registration process, must have supporting receipts submitted within two (2) business days of returning from the pre-approved conference.

Exempt employees will be paid their regular salary for weeks in which they travel.

See the CMHPSM Employee Travel policy or contact the CMHPSM Regional Coordinator for more details.

#### 5-24 References

Community Mental\_Health\_Partnership\_of Southeast\_Michigan will\_respond\_to\_reference requests through the Regional Coordinator. The CMHPSM will provide general information concerning the employee such as date of hire, date of discharge, and positions held. Requests for reference information must be in writing, and responses will be in writing. Please refer all requests for references to the Regional Coordinator.

Only the Regional Coordinator may provide references related to external inquiries.

# 5-25 Employee Separation

#### **Termination**

CMHPSM requires that employees return all documents, files, computer equipment, uniforms, agency tools, business credit cards, keys, and other agency owned property on or before the last day of work. When all agency owned property has been collected, the employee will receive his or her final paycheck. If an employee is terminated, he or she is not entitled to accrued PTO days, unless required by law.

#### Job Abandonment

If an employee is absent for more than three (3) consecutive days, without notifying the CEO, the employee may be considered to have voluntarily abandoned employment with CMHPSM. If termination is determined the effective date will be the last day the employee reported for work. If an employee abandons a job, he or she is not entitled to accrued PTO days, unless required by law.

# Resignation

Should an employee decide to leave the CMHPSM, we ask that he or she provide a Supervisor with at least two (2) weeks advance notice of departure. The CMHPSM asks that individuals in leadership positions provide four (4) weeks advance notice of departure. Thoughtfulness around advance notice is appreciated. All CMHPSM property including, but not limited to, keys, security cards, parking passes, laptop computers, fax machines, uniforms, etc., must be returned at separation. Employees also must return any and all of CMHPSM Confidential Information upon separation. To the extent permitted by law, employees will be required to repay—the—CMHPSM (through—payroll—deduction,—if—lawful)—for—any—lost—or damaged CMHPSM property. As noted previously, all employees are employed at-will and nothing in this handbook changes that status.

To provide flexibility for CMHPSM employees, the CMHPSM funds all paid time off allocations on the first day of each calendar year with the assumption that employees will remain employed with the CMHPSM for the full year. Employees separating from the CMHPSM will be entitled to a cash payout of their accrued paid time off on a quarterly basis with the following limitations:

1. Employees voluntarily separating from employment during the first quarter of the calendar year shall be entitled to a payout of PTO hours up to 25% of their annual PTO allocation, deducting any PTO hours used during that quarter months. Employees separating during the second quarter of a calendar year shall be entitled to a payout of up to 50% of unused allocation, third quarter of calendar year up to 75% of unused allocation or fourth quarter of calendar year up to 100% of unused allocation.

Employee Voluntary Congretion Date	Dercentage of Annual Unused
Employee Voluntary Separation Date	Percentage of Annual Unused
	PTO Allocation eligible for Payout
Calendar Year Quarter 1 (Jan 1 – Mar 31)	25%
Calendar Year Quarter 2 (Apr 1– Jun 30)	50%
Calendar Year Quarter 3 (Jul 1 – Sep 30)	75%
Calendar Year Quarter 4 (Oct 1 – Dec 31)	100%

Example A: an employee separating voluntarily during calendar year quarter 2, with an annual PTO accrual of 21 days or 168 hours, that utilized 40 hours of PTO of current year PTO, would be eligible for 44 hours of PTO pay out, which is calculated by subtracting the current year utilized hours (40) from the maximum (50%) payout (84 hours).

Example B: an employee separating voluntarily during calendar year quarter 4, with an annual PTO accrual of 18 days or 144 hours, that utilized 64 hours of current year PTO during the year, would be eligible for 80 hours of PTO pay out, which is calculated by subtracting the current year utilized hours (64) from the maximum (100%) payout (144 hours).

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- Accrued PTO leave from a prior year or PTO leave donated from another employee to the employee separating is not eligible for CMHPSM payout. Float holidays are not PTO and thus not eligible for employee separation PTO payouts.
- All PTO payouts must be approved by the CMHPSM CEO and the employee must meet all employee separation requirements; including but not limited to advance notice, return of all CMHPSM equipment, key fobs, etc.

#### Termination of Benefits and COBRA

All regular full-time employees are eligible for Medical, Dental and Vision insurance coverage while employed at the CMHPSM. All insurance programs cease on the last day of employment with the CMHPSM. Employees separating from the CMHPSM should contact the CMHPSM Regional Coordinator related to Consolidated Omnibus Budget Reconciliation Act (COBRA) continuation of health coverage options.

#### 5-26 Exit Interviews

All Employees who are separating from employment will have the option to participate in an exit interview with the Regional Coordinator or the CEO.

# **Section 6 - Michigan Addendum**

# 6-1 Working Hours and Schedule

Community Mental Health Partnership of Southeast Michigan normally is open for business from 8:30 am to 5:00 pm, Monday through Friday. The employee will be assigned a work schedule and will be expected to begin and end work according to the schedule. To accommodate the needs of our business, at some point we may need to change individual work schedules on either a short-term or long-term basis.

Employees will be provided meal and rest periods as required by law. However, Michigan does not require meal or rest periods for adult employees.

# 6-2 Your Paycheck

The employee will be paid bi-weekly for all the time worked during the past pay period. Payroll stubs itemize deductions made from gross earnings. By law, the CMHPSM is required to make deductions for Social Security, federal income tax and any other appropriate taxes. These required deductions also may include any court-ordered garnishments. Payroll stubs also will differentiate between regular pay received and overtime pay received.

If there is an error in an employee's pay, bring the matter to the attention of Regional Coordinator immediately so the CMHPSM can resolve the matter promptly and amicably.

Paychecks will be given only to the employee, unless he or she requests that they be mailed, or authorize in writing another person to accept the check.

# **6-3 Social Security Number Privacy Act**

It is the policy of Community Mental Health Partnership of Southeast Michigan to ensure to the extent practicable the confidentiality of employees' Social Security Numbers in accordance with Michigan law.

The CMHPSM will not intentionally do any of the following acts which result in a prohibited disclosure of employees' Social Security Numbers. Violation of this policy will result in discipline up to and including discharge of the employee.

- 1. Publicly display more than four (4) sequential digits of a Social Security Number
- Use more than four (4) sequential digits of a Social Security Number as a primary account number or use more than 4 sequential digits of a Social Security Number on any identification badge or card, membership card, permit or license, except where permitted by law.
- 3. Require employees to use or transmit more than four (4) sequential digits of their Social Security Numbers over the internet or on a computer system or network or to gain access to the internet, computer system or network unless the connection is secure or the transmission is encrypted. Similarly, the Company will not require employees to use or transmit more than 4 sequential digits of their Social Security Numbers to gain access to the internet or a computer system unless the connection is secure, the transmission is encrypted, or a password or other unique personal identification or authentication device is also required.
- 4. -Include more than four (4) sequential digits of Social Security Numbers on the outsides of envelopes or packages or visible internal areas.
- 5. Include more than four (4) sequential digits of Social Security Numbers in documents or information mailed to individuals, except as permitted by law.

The Company limits access to Social Security Numbers to those employees and outside consultants whose job duties require that they use this information in connection with Company business. The employees and individuals who have access to Social Security Numbers are those who work in the following areas:

- Administration (CEO and Regional Coordinator only)
- Finance Department
- Individuals who though not employed by the Company provide legal, tax, benefits, management or other consulting services for the Company

The CMHPSM will properly dispose of documents containing Social Security Numbers by ensuring that all such materials are shredded or otherwise destroyed prior to discarding such information. Data stored in electronic format will be rendered irretrievable before computers are discarded or destroyed.

#### 6-4 Victims of Crime Leave

An employee who is a victim or victim's representative, called to serve as a witness in a judicial proceeding, must notify his/her supervisor as soon as possible.

Employees will not be compensated for time away from work to participate in a court case but may use available vacation and personal time to cover the period of absence.

Employees testifying as the victim or representative of a victim in a judicial proceeding will not be disciplined for their absence.

# 6-5 A Few Closing Words

This handbook is intended to give employees a broad summary of things they should know about Community Mental Health Partnership of Southeast Michigan. The information in this handbook is general in nature and, should questions arise, any member of management should be consulted for complete details. While we intend to continue the policies, rules and benefits described in this handbook, Community Mental Health Partnership of Southeast Michigan, in its sole discretion, may always amend, add to, delete from or modify the provisions of this handbook and/or change its interpretation of any provision set forth in this handbook. Employees should not hesitate to speak to management if they have any questions about the CMHPSM or its personnel policies and practices.

# **General Handbook Acknowledgment**

This Employee handbook is an important document intended to help you become acquainted with Community Mental Health Partnership of Southeast Michigan. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the CMHPSM's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of management.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Employee handbook.

I have received and read a copy of Community Mental Health Partnership of Southeast Michigan's Employee handbook. I understand that the policies, rules and benefits described in it are subject to change at the sole discretion of the CMHPSM at any time.

I further understand that my employment is terminable at will, either by myself or the CMHPSM, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.

I understand that no representative of Community Mental Health Partnership of Southeast Michigan other than the CEO may alter "at will" status and any such modification must be in a signed writing.

I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the CMHPSM's Employee handbook.

Employee's Printed Name:	
Employee's Signature:	
Position:	
Date:	
The signed original copy of this acknowledgment should be given to management - it will be filed your personnel file.	d in

# **Receipt of Sexual Harassment Policy**

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit harassment of any employee by any Supervisor, employee, customer or vendor on the basis of sex or gender. The purpose of this policy is not to regulate personal morality within the CMHPSM. It is to ensure that at the CMHPSM all employees are free from sexual harassment. While\_it\_is\_not\_easy\_to\_define\_precisely what\_types\_of\_conduct could\_constitute\_sexual harassment and there is a wide range of behavior that may violate this policy even if such behavior does not violate the law, examples of prohibited behavior include unwelcome sexual advances, requests for sexual favors, obscene gestures, displaying sexually graphic magazines, calendars or posters, sending sexually explicit e-mails, text messages and other verbal or physical conduct of a sexual nature, such as uninvited touching of a sexual nature or sexually related comments. Depending upon the circumstances, improper conduct also can include\_sexual\_joking,\_vulgar\_or\_offensive conversation\_or\_jokes,\_commenting\_about an employee's physical appearance, conversation about your own or someone else's sex life, or teasing or other conduct directed toward a person because of his or her gender which is sufficiently severe or pervasive to create an unprofessional and hostile working environment.

#### **Reporting Sexual Harassment**

If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator our third-party HR partner.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If you feel you have been subjected to any such retaliation, report it in the same manner you would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

I have read and I understand Community Mental Health Partnership of Southeast Michigan's Sexual Harassment Policy.
Employee's Printed Name:
Employee's Signature:
Position:
Date:
The signed original copy of this receipt should be given to management - it will be filed in your personnel file.

# **Receipt of Non-Harassment Policy**

It is the Community Mental Health Partnership of Southeast Michigan's policy to prohibit intentional and unintentional harassment of any individual by another person on the basis of any protected classification including, but not limited to, race, color, national origin, disability, religion, marital status, veteran status, sexual orientation or age. The purpose of this policy is not to regulate our employees' personal morality, but to ensure that in the workplace, no one harasses another individual.

#### **Reporting Harassment**

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If you feel that you have been subjected to conduct which violates this policy, you should immediately report the matter to your supervisor or a leadership team member. If you are unable for any reason to contact these persons, or if you have not received a satisfactory response within three (3) business days after reporting any incident of what you perceive to be a violation of this policy, please contact the CEO.

Note: If your supervisor or a leadership team member is the person toward whom the complaint is directed you should contact the CEO directly. If your complaint is directed towards the CEO, you should contact the Regional Coordinator our third-party HR partner.

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. In addition, the CMHPSM will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy.

If an employee feels he or she has been subjected to any such retaliation, he or she should report it in the same manner in which the employee would report a claim of perceived harassment under this policy. Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including discharge. All employees must cooperate with all investigations.

I have read and I understand Community Mental Health Partnership of Southeast Michigan's Non-Harassment Policy.

Employee's Printed Name:	
Employee's Signature:	
Position:	
Date:	
The signed original copy of this receipt should be given to personnel file.	management - it will be filed in your



#### Regional Board Action Request- CMHPSM Employee Handbook Annual Review

Board Meeting Date: September 22, 2022

Action Requested: Approve the CMHPSM employee handbook with the included revisions.

Background: The CMHPSM Board has directed staff to bring forth the Employee Handbook at

least annually for CMHPSM Board review and approval. All changes are identified in tracked changes format within the document provided. Notable

changes are identified below:No substantial changes

Updated and cleaned up formatting and document structure

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

The CMHPSM employee handbook is a key source of information for CMHPSM employees related to their benefits and expectations as we work together to meet the requirements of our MDHHS contract and the region's strategic plan.

Recommend: Approval



#### Regional Board Action Request

Board Meeting Date: September 22, 2022

Action Requested: Approving the CMHPSM Board Chair to sign the formal proclamation

acknowledging the five years of service by Erika Behm to the PIHP

region as a CMHPSM employee.

Background: Erika Behm reached her five-year anniversary on September 11, 2022.

Erika has worked tirelessly over the past five years to build the Veterans Navigator program into what it is today. Five years ago, the Veterans Navigator program was new to CMHPSM and to the state, and Erika has become known across the state as a resource for other Veterans Navigators, for state initiatives, and for new ideas. She works hard on a daily basis to ensure Veterans and Military Families have the resources they need, particularly related to substance use and mental health issues, but also for any additional essential services, from which Veterans and Military Families often feel disconnected. During the past few challenging years when COVID decreased people's ability to be together, she came up with creative ideas to help address feelings of isolation for Veterans and Military Families. Last but definitely not least, a legacy award was named after Erika's family and she received the first award. It is called the "Behm of Light" award and is given to individuals chosen by a committee to have "shed light" into the veteran and military community.

Erika is a true asset to the PIHP, to her new partner in this work- the CMHPSM Veteran Navigator Peer Support Specialist, to her counterparts across the state, and most of all to the Veterans and Military Families in our region and beyond.

Recommendation: Approval for the CMHPSM Board Chair to sign the proclamation



WHEREAS, the Community Mental Health Partnership of Southeast Michigan through effective partnerships, ensures and supports the provision of quality integrated care that focuses on improving the health and wellness of people living in our region; and

WHEREAS, Erika Behm as of September 11, 2022 has been employed with the CMHPSM for five years and has striven to accomplish the mission of the Community Mental Health Partnership of Southeast Michigan as the Veteran Navigator; and

Now, therefore, the Community Mental Health Board of Directors does hereby proclaim their appreciation to Erika Behm for her five years of service to the region, today September 22, 2022.

\_\_\_\_\_

**Sharon Slaton** 

**CMHPSM Board Chair** 

# **Regional Board Officers List**

\*Regional Board officer elections take place in October

FY 2022			
Chair	S. Slaton	Livingston	
Vice-Chair	J. Ackley	Lenawee	
Secretary	S. Libstorff	Monroe	
	FY 2021		
Chair	S. Slaton	Livingston	
Vice-Chair	C. Richardson	Washtenaw	
Secretary	J. Ackley	Lenawee	
	FY 2020	_	
Chair	S. Slaton	Livingston	
Vice-Chair	C. Richardson	Washtenaw	
Secretary	J. Ackley	Lenawee	
	FY 2019		
Chair	C. Londo	Monroe	
Vice-Chair	S. Slaton	Livingston	
Secretary	J. Ackley	Lenawee	
	FY 2018		
Chair	R. Tillotson	Lenawee	
Vice-Chair	C. Londo	Monroe	
Secretary	R. Garber	Livingston	
	FY 2017		
Chair	R. Tillotson	Lenawee	
Vice-Chair	C. Londo	Monroe	
Secretary	B. Cox	Livingston	
	FY 2016		
Chair	G. Lane	Monroe	
Vice-Chair	L. Berry-Bobovski	Livingston	
Secretary	B. Wilson	Lenawee	
FY 2015			
Chair	G. Lane	Monroe	
Vice-Chair	P. Ball	Washtenaw	
Secretary	L. Berry Bobovski	Livingston	
FY 2014			
Chair	G. Lane	Monroe	
Vice-Chair	J. Plas	Livingston	
Secretary	B. Wilson	Lenawee	

The officers of this Board shall be Chairperson, Vice-Chairperson, and Secretary.

- Only one individual from each Partner may serve as an officer.
- The CMHPSM officers shall have one-year terms, or until such time as their successors are duly elected.
- Officers shall not serve more than 3 consecutive terms.
- To ensure that the Chairpersonship rotates, upon the completion of a third term serving as chairperson, a new Chairperson shall be an individual affiliated with another Partner.
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# Oversight Policy Board Minutes August 25, 2022

Patrick Barrie Conference Room 3005 Boardwalk Drive, Suite 200 Ann Arbor, MI 48108

Members Present: Mark Cochran, Kim Comerzan, Ricky Jefferson, Susan Longsworth, Molly

(physical location) Welch Marahar, Dave Oblak, Dave O'Dell, Ralph Tillotson

Members Absent: Amy Fullerton, James Goetz, Frank Nagle, Carol Reader, Monique

Uzelac, Tom Waldecker

Guests:

Staff Present: Stephannie Weary, James Colaianne, Nicole Adelman, Matt Berg, CJ

Witherow, Danielle Brunk, Jessica Sahutoglu, Joelen Kersten, Jackie Bradley (Lenawee), Joelen Kersten, Michelle Lyons, Connie Conklin

(Livingston), Alyssa Tumolo, Jane Goerge, Rebecca DuBois

Board Chair M. Cochran called the meeting to order at 9:44 a.m.

1. Introductions

2. Approval of the Agenda

Motion by R. Tillotson, supported by K. Comerzan, to approve the agenda Motion carried

Approval of the July 28, 2022 Oversight Policy Board minutes
 Motion by M. Welch Marahar, supported by S. Longsworth, to approve the July 28, 2022 OPB minutes
 Motion carried

- 4. Audience Participation
  - None
- 5. Old Business
  - a. Finance Report
    - M. Berg presented.
  - b. FY23 PA2 Funding Recommendations
    - Variables for FY23 funding:
      - While the region has been approved for the \$3 million SOR 3 award, confirmation from the state has yet to be received, so FY23 SOR 3 could vary from what is currently being proposed.
      - ❖ PA2 funding amount for FY23 is unknown but estimated at FY22 level in scenario being presented (\$1.8M)
      - ❖ If/when the Public Health Emergency ends, there may be a spike of people seeking services needing to be funded via block grant if they lose their Medicaid
    - N. Adelman has been invited to join Washtenaw for a discussion on Opioid settlement funds in October.

Motion by K. Comerzan, supported by M. Welch Marahar, to accept the FY23 expenditures for PA2 funds by county as presented Motion carried

<u>Vote</u>

Yes: Cochran, Comerzan, Jefferson, Longsworth, Welch Marahar, Oblak, O'Dell,

Tillotson

No:

Absent: Fullerton, Goetz, Nagle, Reader, Uzelac, Waldeck

#### 6. New Business

- a. OPB Membership Update
  - S. Weary provided an update on the OPB members whose current terms are expiring.

#### 7. Report from Regional Board

- There was a presentation on stigma by Alyssa Tumolo.
- The Regional Board reviewed employee engagement survey results.
- The board also reviewed and discussed the draft FY23 budget.

#### 8. SUD Director Updates

- a. CEO Update included in the meeting packet.
- b. Staffing Update the SUD team is fully staffed.
- c. Back to office plans the organization is still in a reduced capacity phase. The current plan is to move to the green phase (regular capacity) on 9/6/22, but that plan may change.

#### 9. Adjournment

Motion by R. Tillotson, supported by M. Welch Marahar, to adjourn the meeting Motion carried

Voice vote, no nays

• Meeting adjourned at 10:48 a.m.

\*Next meeting: Thursday, September 22, 2022 Location 3005 Boardwalk, Suite 200; Patrick Barrie Room



# **CEO** Report

# Community Mental Health Partnership of Southeast Michigan

# Submitted to the CMHPSM Board of Directors

Septmeber 7, 2022 for the September 14, 2022 Meeting

#### CMHPSM Update

- The CMHPSM held all-staff meetings on August 8 and August 22. We are scheduled to meet in September on September 12, 2022 and potentially September 26, 2022.
- The CMHPSM leadership team is continuing to meet on a weekly basis.

#### COVID-19 Update

- The CMHPSM office continues to be closed to the public outside of public Board meetings. We implemented a March 28, 2022 return to the yellow reduced capacity phase and a return to a full hybrid office return on September 12, 2022. The most recent version of the re-opening plan is continually shared with staff as it is updated. The leadership team is continuing to review statewide and county guidance related to best practices.
- We will continue to monitor recommendations around the projected return to full office capacity in the future.

## Re-Opening Plan Phase as of September 14, 2022:

Phase:	Full Hybrid Capacity
Office:	100% Capacity – Office Open to Public
Projected Date Range for Phase:	September 12, 2022
Current Phase:	X

# CMHPSM Staffing Update

- Since our last meeting, The CMHPSM has recently filled an open position:
  - o Lyndsay Kieselbach has joined us as our Financial Accountant and Analyst
- The CMHPSM currently has an open position that we are accepting applications for:
  - o Compliance & Quality Manager

• More information and links to job descriptions and application information can be found here: https://www.cmhpsm.org/interested-in-employment

#### Regional Update

- The CMHPSM continues to update our general COVID-19 resources and information on our website: <a href="https://www.cmhpsm.org/covid19">https://www.cmhpsm.org/covid19</a>
- We have also established a webpage for provider information related to service delivery changes during this pandemic: <a href="https://www.cmhpsm.org/covid19provider">https://www.cmhpsm.org/covid19provider</a>
- Individuals receiving Behavioral Health and/or substance use disorder services can access targeted information at the following webpage: <a href="https://www.cmhpsm.org/covid19consumers">https://www.cmhpsm.org/covid19consumers</a>
- Our regional committees continue to meet using remote meeting technology, the Regional Operations Committee will work with our committees to determine best practices moving forward related to in-person versus remote regional committee meetings.
- The Regional Operations Committee continues to meet on at least a weekly basis. The remote meetings are allowing our region to share best practices while obtaining a regional picture of our COVID-19 pandemic response.

#### Statewide Update

- PIHP CEO meetings are being held remotely on a monthly basis. The PIHP CEOs last met on September 6, 2022, our August meeting was cancelled.
- The PIHP CEO / MDHHS operations meeting with MDHHS behavioral health leadership staff was held on August 4, 2022 and September 1, 2022. Included in the meetings are updates on the various emergency waivers and MDHHS COVID funding that impact our service delivery systems, funding, and requirements. I provide a summary of those meetings to our regional directors at our Regional Operations Committee meetings each month.
- CMS has indicated that there is potentially room for CCBHC expansion beyond the demonstration and pilot sites. This federal announcement has led to internal discussions at MDHHS on potential future CCBHC expansion.
- Our final FY2023 rate meeting is scheduled for Friday September 9, 2022, any significant changes will be discussed at our September Board meeting.
- Latest information on Michigan legislation will be shared at our Board meeting.

#### Future Update

- We will provide a proposed schedule for the Board of Directors FY2023 meeting schedule at our October meeting. We are hoping to schedule eight meetings and plan for four months without meetings for FY2023.
- All of the PIHPs have been approved for \$150,000 annually in new Block
  Grant funds to cover an SUD treatment care coordination position and we have
  included the position in our FY2023 expense budget. We plan to bring a job
  description and ask for approval for this grant funded position at our October
  2022 meeting.

Respectfully Submitted,

James Colaianne, MPA