



**Agenda**

**TO: Community Mental Health Services Board Members**

**FROM: Janet Thomas, Chair, via Julia Rupp, Executive Director**

**SUBJECT: Full Board Meeting  
December 20, 2013  
8:00 AM – Mental Health Center**

- 1) Call to Order Action
- 2) Approval of Minutes of November 22, 2013  
(Previously Forwarded) Action
- 3) Committee Reports
  - A) Program/Personnel Committee Action  
(Attachment #1)
  - B) Recipient Rights Advisory Committee Action  
(Attachment #2)
  - C) Finance Committee Action  
(Attachment #3)
- 4) Items for Consideration
  - A) Motion to Contract with HGA Support Services Action  
(Attachment #4)
  - B) Motion to Sign Contract between LRE and Muskegon CMH Action  
(To be distributed)
- 5) Old Business
  - A) Lakeshore Regional Entity Update Information
  - B) Interim Analysis of Expenditures Information  
(To be distributed)
  - C) Interim Analysis of Revenues Information  
(To be distributed)

- |    |  |             |
|----|--|-------------|
| D) | Interim Balance Sheets of November 2013<br>(To be distributed)   | Information |
| E) | CMH Expenditures Financial Statement<br>(To be distributed)  | Information |
| F) | Finance Update – Interest Earnings, Public Act 423, Fees and<br>State Inpatient Account Summary<br>(To be distributed) | Information |
| G) | Budget Variance Analysis Report<br>(To be distributed)   | Information |
| H) | Year End Projection Trends<br>(To be distributed)  | Information |
| 6) | New Business   |             |
| 7) | Communication  |             |
| A) | FridayFacts of December 13, 2013<br>(Attachment #5)  | Information |
| B) | Director's Report<br>(Attachment #6)   | Information |
| 8) | Audience Participation   |             |
| 9) | Adjournment  | Action      |

/jvv

c: The Muskegon Chronicle  
County Administration

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY  
PROGRAM/PERSONNEL COMMITTEE REPORT TO CMH BOARD**

**Via Cheryl Natte, Committee Vice-Chairperson**

1. The Program/Personnel Committee met on December 06, 2013.
2. There were no action items.
3. Reports were given on the Better Together program and Mental Health First Aid.

/jvw

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY**

**PROGRAM/PERSONNEL COMMITTEE MEETING MINUTES**

**Friday, December 6, 2013**

**8 a.m.**

**Mental Health Center – Board Room B**

**CALL TO ORDER**

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

**ROLL CALL**

Committee Members Present: Cheryl Natte, Chuck Buzzell, Bonnie Gonzalez, Ken Shelton, Mike Willacker, Janet Thomas

Committee Members Excused: Jeff Fortenbacher

Add'l Board Members Present: None

Also Present: Julia Rupp, Dave Parnin, Garland Kilgore, Larry Spataro, Sue Savoie, Lauren Meldrum, Cyndi Blair, Margaret Tietze, Joy VanderVen

Guests: None

**APPROVAL OF MINUTES**

It was moved by Mr. Shelton, supported by Ms. Thomas, to approve the minutes of the November 08, 2013, meeting as written.

**MOTION CARRIED.**

**ITEMS FOR CONSIDERATION**

There were no items for consideration.

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

Ms. Natte recognized Bonnie Gonzalez as the individual chosen to receive the 2013 Arc Muskegon Robert and Joann Hommes Award of Excellence, an award given to honor an individual who has made a difference in the lives of individuals with developmental disabilities. Ms. Gonzalez will receive this award at the Arc Muskegon December holiday luncheon/board meeting next week.

## **COMMUNICATION**

### ***Report on the Better Together Program***

Cyndi Blair, Medical Services Manager, reported on the results of the past year's Better Together program at CMH. This was the result of a grant to provide information about healthy living to staff and individuals we serve. Overall, the program resulted in a total weight loss of over 448 total pounds, with 56% of the individuals participating showing improvement in one or more health measures. The grant has been continued for another year.

### ***Report on the Mental Health First Aid Program***

Loren Meldrum, Customer Services Specialist, and Sue Savoie, Quality Manager, reported on activity within the Mental Health First Aid program. Training has occurred in the Muskegon community for the adult model, with training in the youth model anticipated in the spring of 2014. Feedback from the training has been very positive. The West/Central region (Muskegon, Kent, Kalamazoo, CEI, Saginaw, and Genesee) recently submitted a proposal to DCH to continue to offer Mental Health First Aid training.

### ***FridayFacts of November 22, 2013***

The FridayFacts of November 22, 2013, were presented for board member review. Items of interest were noted, including recent legislation designed to expand the scope of practice for nurses. The newly created license for Advanced Practice Registered Nurses (APRN) allows them to handle some duties previously limited to physicians.

## **DIRECTOR'S COMMENTS**

Ms. Rupp reported the following:

Discussions continue to be held at the State level regarding payment of ABW dollars during the first three months of 2014. To date there is no news on the amount of general fund dollars.

We are continuing to recruit psychiatrists, as well as mid-level practitioners.

## **AUDIENCE PARTICIPATION**

There was no audience participation.

## **ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 8:42 a.m.

Respectfully,

Cheryl Natte  
Program Committee Chairperson

JV<sup>2</sup>

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY**

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

**via Ken Shelton, Committee Chairperson**

1. The Recipient Rights Advisory Committee met on December 6, 2013.
- \* 2. It was recommended, and I move, to approve the Recipient Rights Budget for FY2013/14.
- \* 3. It was recommended, and I move, to approve the Recipient Rights Annual Report for the period of October 01, 2012, through September 30, 2013.
- \* 4. It was recommended, and I move, to approve the Recipient Rights Report for the month of November 2013.

COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY

RECIPIENT RIGHTS ADVISORY COMMITTEE MEETING MINUTES

Friday, December 6, 2013

8 a.m.

Mental Health Center – Board Room B

CALL TO ORDER

The regular meeting of the Recipient Rights Advisory Committee was called to order by Ken Shelton, Committee Chair, at 8:42 a.m.

ROLL CALL

Committee Members Present: Cheryl Natte, Chuck Buzzell, Bonnie Gonzalez, Ken Shelton, Mike Willacker, Janet Thomas

Committee Members Excused: Jeff Fortenbacher

Add'l Board Members Present: None

Also Present: Julia Rupp, Dave Parnin, Garland Kilgore, Larry Spataro, Sue Savoie, Lauren Meldrum, Margaret Tietze, Joy VanderVen

Guests: None

APPROVAL OF MINUTES

It was moved by Ms. Thomas, seconded by Ms. Natte, to approve the minutes of the November 8, 2013, meeting as written.

**MOTION CARRIED.**

ITEMS FOR CONSIDERATION

***Motion to Accept Recipient Rights Budget for FY2013/14***

It was moved by Mr. Buzzell, seconded by Ms. Thomas, to approve the Recipient Rights Budget for FY2013/14.

**MOTION CARRIED.**

***Motion to Accept the Recipient Rights Annual Report for FY2012/13***

It was moved by Ms. Thomas, seconded by Ms. Gonzalez, to approve the Recipient Rights Annual Report for the period of October 01, 2012, through September 30, 2013.

**MOTION CARRIED.**

***Motion to Accept Recipient Rights Report for November 2013***

It was moved by Ms. Thomas, seconded by Ms. Natte, to approve the Recipient Rights Report for November 2013.

**MOTION CARRIED.**

For the month of November 2013 there were 1 CMH and 39 provider employees trained:

Rights Updates CMH	0
Rights Updates Provider	24
New Employee Training CMH	1
New Employee Training Provider	13
Respite Training Provider	2
Special Inservice Provider	0
HIPAA Training CMH	0
HIPAA Training Provider	0
Corporate Compliance Training CMH	0
Corporate Compliance Training Provider	0
NAPPI/Rights/Clinical Training Provider	0
RROAM Quarterly Meeting CMH	0
Medicaid Fair Hearing Office Training CMH	0
DCH-ORR Roundtable	0
Recipient Rights Conference	3

For this period, there were 571 incident reports and 24 rights allegations.

Statistical data showing type and code was provided for review, as well as graphs regarding the data. Discussion was held regarding this month's incident reports.

There was one death reported in November 2013.

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

There was no new business.

**COMMUNICATIONS**

There was no new communication.

**DIRECTOR'S COMMENTS**

There were no director's comments.



**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the committee, the meeting adjourned at 9:03 a.m.

Respectfully,

Ken Shelton  
Community Mental Health Board Chairperson

/mt

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY**  
**FINANCE COMMITTEE REPORT TO CMH BOARD**

**via I. John Snider II, Chair**

1. The Finance Committee met on December 13, 2013.
2. The Finance Committee received the following reports for information: End of Year Reports for FY2013 and Medicaid Eligibles Report.
- \* 3. It was recommended, and I move, to approve expenditures for the month ending November 30, 2013 in the amount of \$7,123,337.08.
- \* 4. It was recommended, and I move, to authorize the Community Mental Health Executive Director to sign a contract with those service vendors/providers who have submitted written agreements to continue service provision at the Fiscal Year 2012/2013 rates for the time period effective October 1, 2013, through September 30, 2014.
- \* 5. It was recommended, and I move, to authorize the Community Mental Health Executive Director to sign a contract with AH Services, Inc. for a clinically integrated wellness program, effective October 1, 2013, through September 30, 2014, at an amount not to exceed \$10,000.00.
- \* 6. It was recommended, and I move, to authorize the reclassification of Community Mental Health Supports Coordinator/TAT position #X86302 (NX 00150) to a Masters Level Clinician/TAT position (NX 00240) effective January 15, 2014, with the funding for this position staying in org 7321.
- \* 7. It was recommended, and I move, to authorize the salary range change for the Community Mental Health Medical Office Coordinator position #N51801 from NO 00060 to NO 00160 effective January 15, 2014, with the funding for this position staying in org 7322.
- \* 8. It was recommended, and I move, to authorize the salary range change for the Correctional Services Supervisor position #X21101 (NX 00240), Access Supervisor position #X00901 (NX 00240), and Crises Stabilization Operations Supervisor position X24401 (NX 00250) to NX 00280 effective January 15, 2014 with the funding for these positions staying in orgs 7043, 7701, and 7341 respectively.
- \* 9. It was recommended, and I move, to authorize the Community Mental Health Chief Operating Officer to sign Amendment #1B to the contract with the Michigan Department of Community Health for Medicaid Managed Mental Health Supports and Services, effective October 1, 2013, through December 31, 2013.

/jv<sup>2</sup>

COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY

FINANCE COMMITTEE MEETING MINUTES

Friday, December 13, 2013

8:00 a.m.

Mental Health Center

Board Room

CALL TO ORDER

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

ROLL CALL

Committee Members Present: John Snider, Chuck Buzzell, Bonnie Gonzalez, Terry Sabo, Janet Thomas

Committee Members Excused: Dr. Remington Sprague, Charles Nash, Scott Plummer

Add'l Board Members Present: None

Also Present: Julia Rupp, Thomas Best, Judy Cohen, Dave Parnin, Brandy Carlson, Stacey Cornett, Margaret Tietze, Joy VanderVen

Guests: None

MINUTES

It was moved by Ms. Thomas, seconded by Ms. Gonzalez, to approve the minutes of the November 15, 2013, meeting as written.

**MOTION CARRIED.**

ITEMS FOR CONSIDERATION

A. Final Reports for FY2013

1. Mr. Best presented the following County of Muskegon Accounting Department Final Reports for FY2013.

**Final Analysis of Expenditures:** Community Mental Health is 2.0% under budget.

**Final Analysis of Revenues:** Mr. Best presented the Final Analysis of Revenues through September 30, 2013. Mr. Best noted that the expenditures exceeded revenues by \$532,199.

**Final Balance Sheets:** Fund 2220 shows a positive cash balance of \$6,482,940 with \$15,539 in interest receivable. Fund 6772 shows a positive cash balance of \$3,559,270. Fund 7930 shows a positive cash balance of \$287,887.

2. Mr. Best presented the following Community Mental Health Reports for FY2013:

**CMH Expenditures Financial Statement:** For the period ending September 30, 2013, this reports shows the estimated true variance to date of \$2,210,763, which is under budget to date.

**Finance Update: Interest Earnings, Public Act 423, Fees, and State Inpatient:** The trial balances for the two areas show cash balances as follows: Regular Services - \$6,482,940 and Internal Service Fund - \$3,559,270. The average investment rate for these funds is approximately 2.53%, per the County Treasurer's office. We are a little more than \$4,700 over budget for this item in Regular Services at the end of the fiscal year. We are a little more than \$50 under budget for this in the Internal Service Fund. However, the budget for this was lowered by \$2,400 in the budget amendment approved by the board during the month of April 2013.

<u>Item</u>	<u>Regular Services</u>	<u>Internal Service Fund</u>
Cash Balance as of 09/30/13	\$ 6,482,940	\$ 3,559,270
Total Interest Earned for FY2012	\$ 40,878	\$ 5,273
Total Interest Budget for FY2013	\$ 40,000	\$ 2,800
Interest Budget Per Month for FY2013	\$ 3,333	\$ 233
Interest Earned September 2013	\$ 2,609	\$ 151
Interest Budgeted Through September 2013	\$ 40,000	\$ 2,800
Interest Earned Through September 2013	\$ 44,790	\$ 2,746

Public Act 423 has a variance of (25,779).

The Fee Report has a total variance of \$94,340. This variance report is based on the budget approved by the CMH Board during the month of April 2013.

The Inpatient Summary Report indicates a Net Utilization Variance of (\$4,936) for State Inpatient and (\$90,200) for Community Inpatient, which is based on the budget approved by the CMH Board during the month of April 2013.

**Budget Variance Analysis Report:** Our budget variance, based on the budget approved by the CMH Board during the month of April 2013 is \$2,105,094. There are, of course, no contingencies at this time. This would leave us with a net positive variance of \$2,105,094 at the end of the fiscal year. However, this figure does not really give us a true picture of where we stand as we are not able to use the different funding sources (i.e., State GF and Medicaid, etc.) to offset each other's shortfalls. Therefore, a truer picture would be as follows:

Medicaid	2,660,567
State General Fund	(477,637)
ABW from Ottawa CMH	(88,819)
LCC Revenues More than Expenditures	77,147
Ottawa Revenues Less than Expenditures	(154,983)
Local Match Shortage	(40,203)

**Year End Projection Trends:** Mr. Best presented the final FY2013 year end projection trends for board member review.

B. Approval of Expenditures for November 2013

It was moved by Ms. Thomas, seconded by Mr. Buzzell, to approve expenditures for the month ending November 30, 2013 in the amount of \$7,123,337.08.

**MOTION CARRIED.**

C. Interim Analysis of Expenditures

This item was not available for presentation at this meeting.

D. Interim Analysis of Revenues

This item was not available for presentation at this meeting.

E. Interim Balance Sheets of November 2013

This item was not available for presentation at this meeting.

F. CMH Expenditures Financial Statement

This item was not available for presentation at this meeting.

G. Finance Update – Interest Earnings, Public Act 423, Fees and State Inpatient Account Summary

This item was not available for presentation at this meeting.

H. Budget Variance Analysis Report

This item was not available for presentation at this meeting.

I. Year End Projection Trends

This item was not available for presentation at this meeting.

J. Medicaid Eligibles by County and Program

Mr. Best presented the Medicaid Eligibles report for Board member review.

K. Authorization to Contract with Vendors/Providers at Continuation Rates

It was moved by Ms. Thomas, seconded by Mr. Buzzell, to authorize the Community Mental Health Executive Director to sign a contract with those service vendors/providers who have submitted written agreements to continue service provision at the Fiscal Year 2012/2013 rates for the time period effective October 1, 2013, through September 30, 2014.

**MOTION CARRIED.**

L. Authorization to Renew Contract with AH Services, Inc.

It was moved by Ms. Thomas, seconded by Ms. Gonzalez, to authorize the Community Mental Health Executive Director to sign a contract with AH Services, Inc. for a clinically integrated wellness program effective October 01, 2013, through September 30, 2014, at an amount not to exceed \$10,000.

**MOTION CARRIED.**

M. Approval to Change Supports Coordinator/TAT to Masters Level Clinician/TAT

It was moved by Ms. Thomas, seconded by Mr. Sabo, to authorize the reclassification of Community Mental Health Supports Coordinator/TAT position #X86302 (NX 00150) to a Masters Level Clinician/TAT position (NX 00240) effective January 15, 2014, with the funding for this position staying in org 7321.

**MOTION CARRIED.**

N. Approval to Change Salary Range for Medical Office Coordinator Position

It was moved by Ms. Thomas, seconded by Ms. Gonzalez, to authorize the salary range change for the Community Mental Health Medical Office Coordinator position #N51801 from NO 00060 to NO 00160 effective January 15, 2014, with the funding for this position staying in org 7322.

**MOTION CARRIED.**

O. Approval to Change Salary Range for Three (3) Clinical Supervisory Positions

It was moved by Ms. Thomas, seconded by Ms. Gonzalez, to authorize the salary range change for the Correctional Services Supervisor position #X21101 (NX 00240), Access Supervisor position #X00901 (NX 00240), and Crises Stabilization Operations Supervisor position X24401 (NX 00250) to NX 00280 effective January 15, 2014 with the funding for these positions staying in orgs 7043, 7701, and 7341 respectively.

**MOTION CARRIED.**

P. Approval of Amendment #1B with DCH for the Medicaid Contract

It was moved by Ms. Thomas, seconded by Mr. Buzzell, to authorize the Community Mental Health Chief Operating Officer to sign Amendment #1B to the contract with the Michigan Department of Community Health for Medicaid Managed Mental Health Supports and Services, effective October 1, 2013, through December 31, 2013.

**MOTION CARRIED.**

**OLD BUSINESS**

There was no old business.

**NEW BUSINESS**

There was no new business.

**COMMUNICATIONS**

Fiscal Year 2014 Remaining General Fund Payments

Information has been received regarding the Fiscal Year 2014 remaining general fund payments. Due to the lack of immediate effect of the Health Michigan Plan, a supplemental appropriation is currently pending adoption by the legislature to restore three months of the Healthy Michigan Plan savings for fiscal year 2014.

**DIRECTOR'S COMMENTS**

Ms. Rupp reported that the Business Associate Agreement between CMHs and the Lakeshore Regional Entity will be presented to the CMH board for approval at the Friday, December 20, meeting.

**AUDIENCE PARTICIPATION**

There was no audience participation.

**ADJOURNMENT**

There being no further business to come before the Committee, the meeting adjourned at 8:48 a.m.

Respectfully,

I. John Snider  
Committee Chair

JS/jv<sup>2</sup>

## REQUEST FOR COMMUNITY MENTAL HEALTH BOARD CONSIDERATION AND AUTHORIZATION

COMMITTEE Full Board	BUDGETED X	NON BUDGETED	PARTIALLY BUDGETED
REQUESTING DIVISION Network Development	REQUEST DATE December 20, 2013	REQUESTOR SIGNATURE Judy Cohen, Network Manager	
<b>SUMMARY OF REQUEST (GENERAL DESCRIPTION, FINANCING, OTHER OPERATIONAL IMPACT, POSSIBLE ALTERNATIVES)</b>			
<p>Approval is requested for Community Mental Health to amend the contract with <b>HGA Support Services</b> (500 W. Western, Suite 300, Muskegon, MI 49440), to increase the beds in Virginia's House from 5 beds to 6 beds. A consumer was recently placed in their Lilac Home on a temporary basis. Lilac Home was approved to decrease from 6 beds to 5 beds in October due to size of the home and the make-up of its residents. HGA is in the process of increasing their AFC license at Virginia's House which is a larger home with awake staff, and is better suited for the temporary resident at their Lilac Home. The per diem would decrease from \$158.38 to \$132.14 effective January 1, 2014, through September 30, 2014.</p>			
<b>SUGGESTED MOTION (STATE EXACTLY AS IT SHOULD APPEAR IN THE MINUTES)</b>			
<p>I move to authorize the Community Mental Health Director to sign an amendment to the contract with HGA Support Services to increase the number of beds at Virginia's House from 5 beds to 6 beds, with a decrease in the per diem to \$132.14, effective January 1, 2014, through September 30, 2014.</p>			
COMMITTEE DATE	COMMITTEE APPROVAL _____ Yes    _____ No    _____ Other		
BOARD DATE	BOARD APPROVAL _____ Yes    _____ No    _____ Other		





Michigan Association of  
**COMMUNITY MENTAL HEALTH**  
Boards

December 13, 2013

FRIDAYFACTS - 6 pages

TO: CMH Executive Directors  
Chairpersons and Delegates  
Provider Alliance  
Executive Board

FROM: Michael Vizena, Executive Director  
Alan Bolter, Associate Director

RE: - **MACMHB Winter Conference Call for Proposals**  
- **BHDDA Holds Quarterly PIHP/CMHSP/CA Directors Meeting**  
- **Legislative Update**  
    - **FY14 Supplemental Will Wait Until 2014**  
    - **Senate Passes Its Own Version Of Welfare Drug Testing Bill**  
- **National Update**  
    - **Obama Administration Announces \$100 Million in Mental Health Funding**  
    - **Excellence Act Demo passes in Senate Finance Committee**  
    - **Congressman Murphy Introduces Mental Health Reform Bill**  
- **MACMHB Meetings for December, 2013**

**MACMHB Winter Conference Call for Proposals**

The Michigan Association of CMH Boards has issued its Call for Presentations for its 2014 Annual Winter Conference. The preconference activities are scheduled for Monday, February 10<sup>th</sup>, 2014, with the full conference scheduled for February 11<sup>th</sup> and 12<sup>th</sup>. The conference will be held at the Best Western Plus Hotel & Conference Center in Lansing, Michigan

Details on presentation submissions have been forwarded to all members and interested parties. The deadline for submission of presentations proposals is December 17, 2013. Persons with questions regarding presentation submissions should contact Chris Ward via email at [cward@macmhb.org](mailto:cward@macmhb.org). or by telephone at 517-374-6848.

For details on submitting a presentation proposal, follow this link:  
[http://www.macmhb.org/Winter\\_Conference/Winter\\_Conference\\_Page.html](http://www.macmhb.org/Winter_Conference/Winter_Conference_Page.html)

## **BHDDA Holds Quarterly PIHP/CMHSP/CA Directors Meeting**

On December 11<sup>th</sup>, the Behavioral Health and Developmental Disabilities Administration (BHDDA) held its quarterly PIHP/CMHSP/CA meeting in Lansing. Updates from BHDDA staff at the meeting included:

- Quarterly meetings for 2014 have not been scheduled. BHDDA leadership believe other ongoing and workgroup meetings are providing appropriate venues for dialogue and feedback from the system. BHDDA staff want to continue transparency and will consider feedback regarding discontinuance of these meetings.
- The Mental Health and Wellness Commission will be providing its recommendations to the Governor's office in December. BHDDA expects the Governor to announce the Commission's recommendation sometime in January.
- The Governor's Diversion Council is ready to launch pilot diversion program in four (4) communities. These communities have been selected on the basis of their current diversion related initiatives, including specific elements of their diversion-related programming. Selected areas include St. Joseph County, the 36<sup>th</sup> District Court (Detroit), Marquette, and Kalamazoo. BHDDA also announced that a staff person to support ongoing Diversion Council activities will soon be in place.
- The three areas for location of the Health Home initiative have been selected. They include the Northern Michigan Regional Entity catchment area, Saginaw County, and the CMH Partnership of Southeast Michigan. The Department will be working with CMHs that have existing co location initiatives, with a focus on persons with a chronic physical health condition that is not being effectively managed. Pilots are expected to begin at midyear.
- The Healthy Michigan waiver has been submitted and is under CMS review. BHDDA staff are currently engaged in discussions with Medical Services Administration (MSA) staff regarding the opportunity for Adult Benefits Waiver (ABW) consumers currently receiving services through a CMH, and current General Fund financed consumers open to CMHs that become Medicaid eligible under Healthy Michigan, to have a choice to remain with the CMHs to receive their services.
- The B waiver has been extended through 9/30/14. BHDDA staff continue to review the opportunity to submit an 1115(i) state plan amendment to serve persons with intellectual/developmental disabilities, but this
- The Department's Quality Improvement (QI) Council's focus and membership are being reconfigured and will operate under the leadership of Jeffrey Wieferich. Each of the 10 PIHPs will be expected to appoint a primary and alternate representative to participate in QI Council meetings.
- Site visits related to the implementation of the Autism waiver will begin in 2014. While efforts will be made to coordinate these site reviews with other site reviews, the Department will need to schedule these reviews consistent with CMS requirements/expectations.

- Instructions and enrollment documents were provided last week to all CMHSPs/PIHPs related to the need for certified Wraparound services in all communities. Parent Support Partners, also a B waiver state plan service, will need to be available statewide.

## **LEGISLATIVE UPDATE**

### **FY14 Supplemental Will Wait Until 2014**

On the last day of session for 2013, the House and the Senate could not reach an agreement on what would and would not be included in a FY14 supplemental budget. One of the key components of the supplemental budget would include an adjustment related to state general fund savings due to the passage of the Healthy Michigan plan not receiving immediate effect. The supplemental is expected to add \$50.9 million back to the CMH general fund reductions of \$152,931,100.00, based on an April 1 start date not January 1.

Senate Appropriations Chair Roger Kahn (R-Saginaw) gave a floor speech about how there was enough extra money in Michigan's stocking, and members could work in January to agree on how to distribute it. He said afterward that disagreements on whether there was enough money were part of what kept it from happening.

"The supplemental that we're not doing today, among the things that came up and made that difficult to get done was concerns about whether there was the money to be able to do it," said Kahn.

MACMHB staff continues to meet with legislators, fiscal agency and administration personnel regarding the implementation of the Healthy Michigan plan (Medicaid expansion) and the implications for general fund support within the CMHSPs non Medicaid community based services appropriation.

### **Senate Passes Its Own Version Of Welfare Drug Testing Bill**

On the last day of session the Senate passed SB 275 which creates a suspicion-based drug testing program for Family Independence Program (FIP) recipients. A House bill on the same subject, HB 4118, passed the House in May and has made it through the Senate Families, Seniors and Human Services Committee.

Sen. Gregory (D – Southfield) won a series of amendments that he cautioned didn't fix the bill, but made improvements. One amendment made it so that FIP-eligible children whose parents test positive for drugs could still receive benefits. The benefits would go to a third party, such as a guardian, and still get to the children. Another amendment would protect the confidentiality of results and require reporting from the Department of Human Services (DHS).

The bill ended up passing on a strictly party-line vote, 26-12.

Governor Snyder in October signed a bill into law that infused drug testing into Unemployment Insurance (UI), another state-administered assistance program.

## **NATIONAL UPDATE**

### **Obama Administration Announces \$100 Million in Mental Health Funding**

This week, the Obama Administration announced the imminent availability of \$100 million in mental health funding to be used to expand service delivery in community health settings and rural areas.

\$50 million of the funding will support nearly 200 community health centers in expanding the availability of services to individuals living with mental illness and/or substance use disorders. This funding had been authorized under the 2010 Affordable Care Act (ACA) and will support the hiring of new mental health and substance use disorder professionals; adding mental health and substance use disorder services; and employing team-based models of care, among other things. No details were immediately available about the funding opportunity announcement, but it will likely soon be available via grants.gov or on the HRSA website.

Many National Council members have established partnerships with community health centers to provide mental health and substance use services at their locations, and this new funding can be used to expand those opportunities.

The announcement yesterday also included \$50 million in federal funding to expand access to mental health services in rural areas under the US Department of Agriculture's (USDA's) Community Facilities direct loan program. The funds may be used to "improve or construct mental health service facilities or put in place innovative tools such as telemedicine to expand access to mental health services at rural schools, community centers, hospitals, and other community-based settings." The National Council has long supported increasing access to mental health and substance use treatment services in rural areas.

### **Excellence Act Demo passes in Senate Finance Committee**

Yesterday, the Senate Finance Committee voted to include the bipartisan Excellence in Mental Health Act as an amendment to the SGR Repeal (sustainable growth rate) legislation. The Excellence Act, sponsored by Senators Stabenow (D-MI) and Blunt (R-MO), would improve quality and expand access to mental health care through community mental health providers. The legislation would establish a 10 state demonstration program to offer a broad range of mental health services like 24-hour crisis psychiatric services while setting new high standards for providers. The legislation now moves to the full Senate for consideration.

The National Council for Behavioral Health has long been a champion of the Excellence Act, which would expand access to evidenced-based community health care for children and adults with serious and persistent mental illnesses. If enacted, the legislation will reduce high hospital emergency room utilization among persons living with behavioral health conditions while easing the burden on hard-pressed law enforcement agencies in urban and rural areas. Additionally, the Excellence Act demonstration will assist the Veterans Administration (VA) with serving the young men and women returning from Iraq and Afghanistan with service connected mental disorders including clinical depression and PTSD.

### **Congressman Murphy Introduces Mental Health Reform Bill**

This week, Congressman Tim Murphy (R-PA) introduced a bill to reform the nation's mental health delivery system. The legislation is the culmination of a year-long series of hearings Murphy held as chair of the House Energy and Commerce Oversight and Investigations Committee in the wake of the tragic 2012 Newtown shooting.

The National Council applauded the bill's inclusion of a demonstration program based on the bipartisan Excellence in Mental Health Act, writing in a letter to Murphy that the Excellence Act will "make an enormous contribution to expanding access to evidence-based community healthcare for children and adults with serious and persistent mental illnesses. This important measure will begin to reduce high hospital emergency room utilization among persons living with behavioral health conditions while easing the burden on hard-pressed law enforcement agencies in urban and rural areas. Perhaps most importantly, the Excellence Act demonstration will assist the Veterans Administration (VA) with serving the young men and women returning from Iraq and Afghanistan with service connected mental disorders including clinical depression and PTSD."

The National Council issued a letter thanking Murphy for his inclusion of the Behavioral Health IT Act, another National Council legislative priority. By allowing mental health and substance abuse treatment facilities to receive incentive payments for their use of electronic health records, the Behavioral Health IT Act will help improve care quality and the integration of behavioral and primary care services.

The bill, which spans nearly 140 pages, touches on many parts of the mental health system. Some of its provisions have been long supported by the National Council, such as:

- Authority for healthcare providers to bill Medicaid for mental health and primary care services provided to the same patient on the same day;

- Reauthorization of the Garrett Lee Smith Memorial Act, which funds suicide prevention activities within SAMHSA;
- Reauthorization of the Mentally Ill Offenders Treatment and Crime Reduction Act (MIOTCRA), which funds programs to support justice-involved individuals with mental health conditions;
- A provision strengthening the “six protected classes” language in Medicare Part D and extending mental health prescription drug protections to Medicaid.

Other portions of the bill have already generated controversy in the mental health field, including proposed changes to SAMHSA funding and program authorizations, changes to the Community Mental Health Block Grant, new requirements for states to provide assisted outpatient treatment (also known as involuntary outpatient commitment), and changes to the federal HIPAA privacy law.

The introduction of the bill is the first step in a long process of discussion, debate, and potential future hearings or votes. The National Council has expressed its desire to work with Congressman Murphy throughout the legislative process to ensure that the bill fully meets the needs of mental health consumers, family members, and providers.

### **MACMHB Meetings for December 2013**

(all meetings are at the MACMHB offices unless otherwise indicated)

December 20<sup>th</sup>, 9:00 a.m. - Leadership/Visioning Group

**Have a Great Weekend!**

**Congratulations SPARTANS and Spartan Fans!  
Enjoy the Rose Bowl.**

**COMMUNITY MENTAL HEALTH SERVICES OF MUSKEGON COUNTY**

**MEMORANDUM**

Date: December 20, 2013  
To: CMH Board Members  
From: Julia Rupp, Executive Director  
Subject: Monthly Activity Report

The following summarizes the activity within the agency for the past month:

- Finance staff have been busy gathering and presenting information to the BDO USA auditors for the FY 2013 audit. Things appear to be going very smoothly at the present time.
- Agency staff continue to prepare and pursue options to make sure as many consumers as possible have access to apply for and receive approval for the new Medicaid expansion and/or the other insurance marketplace.
- Our agency has completed another successful United Way campaign, reaching 80% of our goal. While this is obviously not as good as we hoped it would be, the last report we received was that the overall County of Muskegon was at only about 70% of goal.
- Planning and instruction is ongoing in the process of incorporating West Michigan CMH's electronic health record into our agency. The goal is to have this completely operational by April 1, 2014.
- MIOSHA/LARA has made revisions to the Hazard Communication Standard (Haz Com) in order to provide a common approach globally to classifying chemicals. Employers are required to train employees on changes to Safety Data Sheets (SDS) and container labels so that employees recognize and understand any hazards based on the information in the new SDS format, pictograms on container labels, and precautionary and hazard statements. The training department created an online course for all CMH staff.
- The training unit developed a newsletter for the Annual Health and Safety update.
- The Creative Minds, Changing Minds art show ran through the month of November.
- We are in the process of surveying staff, individuals receiving services, agency partners, board members, and the general public for our website/branding project.
- CMH went tobacco free on November 21, 2013.
- The Peer Supports working the adult lobby have developed a Reception Area Welcoming Log in the lobby. All lobby staff complete the log with updates and noteworthy information to ensure communication across shifts.

- Twenty four volunteer applications have been received with twelve individuals actively volunteering fifty hours to date.
- The Lakeshore Region Guide to Specialty Mental Health Services will be available for distribution together with the local Service & Provider Guide the last week of December. Both products will be posted to the CMH website this month.

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