



YEAR IN REVIEW

Leading Change

DETROIT WAYNE MENTAL HEALTH AUTHORITY

OCTOBER 2014 - OCTOBER 2015

HIGHLIGHTS

Board of Directors

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***Detroit Wayne Mental Health Authority
Board of Directors
2015—2016***



Marsha Bianconi



Angelo Glenn



Bernard Parker



Frank Ross



Constance Rowley



Dr. Iris Taylor



Terence Thomas



Heather Underwood



November 9, 2015

Dear Board Members, Staff, Providers and Community Stakeholders:

This has not only been a busy year “two” for the Detroit Wayne Mental Health Authority, but an exciting time for community mental health and this region. I want to thank all of you for your time, energy and effort over this past year. It is through the cooperative efforts and the dedication of the Authority staff and provider network that DWMHA has been able to put forth effective systematic policies and effect changes in the mental healthcare system that are consumer and community-focused, data driven and evidenced based. Furthermore, it is these same efforts that have allowed DWMHA to re-evaluate what internal and external organizational improvements must be made to improve our system of care. Albert Einstein said, “Without deep reflection one knows from daily life that one exists for other people.”

As a service organization we are committed to uphold high standards; DWMHA is determined to “raise that bar”. As we reflect on our second year, let us look back on our accomplishments, evaluate ourselves and set higher goals for the road ahead. As we progress into the future, we aim to be evaluated by the strides we have made, the hurdles we have overcome and, more importantly, the positive impact we have had on society and the people we serve. We will continue to strive for a quality standard we would want for someone we love.

By any measure, the Detroit Wayne Mental Health Authority has grown into a stronger organization today as we enter our third year as an Authority. We have successfully transitioned from an agency of Wayne County government to an independent governmental organization with high integrity and staff focused on ensuring the highest quality care for some of our community's most vulnerable citizens. We are at a pivotal time in our organization's growth and development. The decisions we make over the next few years will have a lasting impact on our community. By working together around a shared vision and a common agenda, we can truly achieve greatness for the citizens of Detroit and Wayne County.

DWMHA has utilized this opportunity to educate the citizens of Wayne County on the importance of not only healthcare, but mental healthcare. And how in every service we provide and every program - we need to be:

- consumer and community focused
- data driven and
- evidenced-based

Sincerely,

Tom Watkins
President and CEO

MI Health Link / Dual Eligible Project

In 2014, DWMHA was one of four Prepaid Inpatient Health Plans (PIHPs) selected to participate in the Dual-Eligible Demonstration Project, MI Health Link. The project was designed to integrate primary care with mental health and substance use disorder treatment to improve overall health care outcomes, create greater efficiencies in the delivery of services, and reduce costs. The integrated care model organizes the coordination of the Medicare and Medicaid benefits, and requires collaboration between the Integrated Care organizations (ICOs), DWMHA, and its privileged provider network. Through MI Health Link, Medicare and Medicaid benefits, rules, and payments are coordinated into one delivery system. This is one more step forward in a consumer-focused plan, which makes services more accessible to individuals by reducing the number of silos.



http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_64077---,00.html

The project began May 2015. Five ICO partners – Molina, Midwest, Aetna, AmeriHealth, and Fidelis – signed agreements to manage acute, primary, pharmacy, dental, and long-term supports and services. DWMHA manages the full scope of behavioral health services covered by Medicare and Medicaid. DWMHA continues to coordinate and monitor services delivered to individuals with mental illness, intellectual/developmental disabilities and substance use disorders.

Throughout March 2015, the Detroit Wayne Mental Health Authority held community education forums about Health Link. Eligible individuals were those ages 21 and older, living within Wayne County, with full Medicaid benefits (no spend-down), and full Medicare benefits. Consumers as well as providers were invited to these forums in order to learn what the demonstration project would entail. Transition of care procedures were developed and implemented in order to ensure continuity of care. Existing relationships with “out of network” providers were maintained by the health plan during the transition to MI Health Link.

Eligible individuals were sent information materials in April by Michigan ENROLLS. If individuals did not actively opt in or opt out by the end of June, they were passively enrolled into the demonstration program. Individuals retain the ability to opt out at any time during the lifespan of the demonstration period, which will last three years until December 2018.

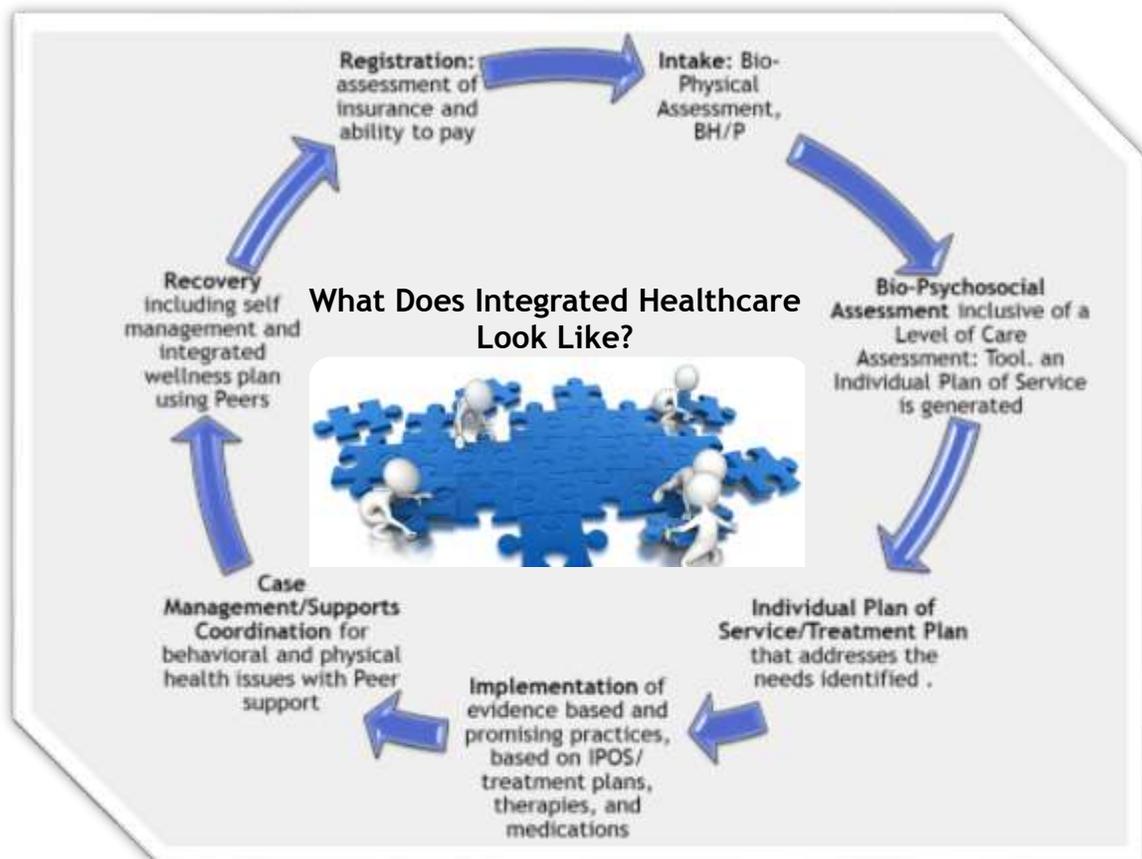
Thus far, DWMHA has had 355 MI Health Link level one referrals. 92 of these consumers have had their assessments completed and are fully enrolled, 70 have appointments scheduled to complete the required assessments, and 153 of the referrals have been voided because either the consumer declined enrollment the consumer was unable to be contacted.

Integrated Healthcare

By combining medical care with behavioral health services, DWMHA addresses the spectrum of problems that a patient might bring to the health care provider, whether it is in a primary care or mental health setting. Integrated Health Care is a systematic holistic approach to the overall care of an individual, coordinating services for physical health, mental health, substance use disorder, and developmental disabilities.

Integrated care is central to improving the overall health of consumers of mental health and substance use disorder services, and produces the best health outcomes for people with complex healthcare needs. People with mental illness and addiction disorders have an earlier rate of mortality than the general population, and higher rates of chronic life-threatening health disorders and conditions such as type II diabetes, heart disease, obesity, and hypertension. Through integration of primary and mental health care, the benefits include improved access to care, reduced morbidity, reduced life threatening and chronic conditions, better monitoring, reduced stigma, and fewer medication complications.

Detroit Wayne Mental Health Authority has made a commitment to creating a culture and infrastructure for integrated health care delivery for our consumers who have severe mental illness, intellectual and developmental disabilities, and substance use disorders. In 2014, DWMHA standardized its integrated processes and assessments. This was done through the creation of a Streamlined Access Screening Questionnaire to reduce redundancy of questions and consumer time on the phone; the standardization of the integrated Bio-Psychosocial Assessment, Pre-Plan and Individual Plan of Service; and through training providers on the standard assessment for level of care.



DWMHA also held several Integrated Healthcare Learning Collaborative sessions for DWMHA Providers, facilitated by the National Council on Behavioral Health. The intent was to assist our providers in using data, and to develop a work plan based on where they are now and what level of integration they need, based on population. DWMHA classified each behavioral health provider using the SAMSHA-HRSA Center for Integrated Health Solutions "Standard Framework for Levels of Integrated Healthcare." DWMHA staff provided educational sessions and technical assistance that has resulted in a thirteen percent (13%) increase, from 2013 to 2014, of provider organizations at a level four (out of five) integration score or greater. Sixty-five (65%) percent, or thirteen (13), of DWMHA provider's comprehensive behavioral health provider organizations are now at a level four out of five score of integration or greater.

Last year, DWMHA also established successful data sharing relationships with sixty-three percent (63%) of all the Medicaid Health Plans in Wayne County. The purpose of the Data Sharing Care Coordination Project is to identify consumers of DWMHA who are also members of Medicaid Health Plans, and share utilization and cost data of these common individuals. Through this effort, DWMHA is developing a process of sharing information on common individuals in an effort to better manage their health care utilization, cut unnecessary costs, and improve integration. Through a quality improvement process, over seventy five (75) high risk and high cost mentally ill consumers have been reviewed.

DWMHA also led the charge for the development of MI Care Connect. MI Care Connect is a health information exchange that will manage the behavioral health consent electronically, allow for the display of appropriate Care Connect 360 data, and appropriate assessment and care plan data for the purposes of highly effective care coordination to improve the health outcomes of DWMHA consumers. The data in MI Care Connect will enhance the integration of behavioral and physical health data throughout the tri-county region. In addition to the development of MI Care Connect, DWMHA is contracting with Care Management Technologies (CMT) to provide individual and aggregate data reporting and other data management tools to inform integrated clinical practice. As a result of these initiatives, DWMHA has already seen great improvements in the integration of our provider network, a milestone in effectively and responsibly caring for our consumers.

Substance Use Disorder (SUD)

House Bill 4862, which became effective in December 2012, brought the responsibilities of the Substance Abuse Coordinating Agencies, or CAs, under the administration of the Prepaid Inpatient Health Plans. Following this act, DWMHA collaborated with SUD networks in order to develop the SUD Implementation Plan. Relationships with SUD providers was a critical area of focus, and many “listen and learn” sessions followed across the community. As a result of the feedback, DWMHA made the decision to directly manage SUD benefits at the Authority, rather than folding them into the MCPN system. This was done to create the least amount of disruption to the SUD community. This was a wise decision. Due to this change, DWMHA was able to save \$2.6 million in administrative costs and redirected into services.

In April, 2014, the Substance Use Disorder (SUD) Oversight Policy Board was established. The Board, which must meet a minimum of six times per year, is required to represent the diversity of integrated services in Wayne County through inclusion of representation of underserved populations. In October 2014, SUD integration began at DWMHA.



Angelo Glenn, Thomas Fielder, Karla Mitchell, Arthur E. Nowlin, James Perry, Monique Stanton, Tom Adams, Cynthia L. Arfken, Tina Goodwin, Kori Loewe, Seana W. Page, Marsha Bianconi

Before the transition, a letter developed by the Board was sent to SUD clients, informing them of the transfer from IPH & SEMCA to DWMHA funding. In addition, SEMCA's contract was terminated in December 2014, resulting in the move of 20% of SUD clients into IPH's Carenet System. The SUD Oversight Policy Board implemented a full continuum of care, including Prevention, Early Intervention, Treatment, and Recovery with various innovative programs. A Recovery Oriented System of Care (ROSC) was also implemented. As of this transition, Substance Use Disorder services for Wayne County residents can be accessed through Detroit Wayne Mental Health Authority, including screening, diagnosis, placement, referral, therapy, residential services, detoxification, medication, and more.

The task of complete integration of policies and procedures is ongoing. Work in this area includes implementing evidence-based programs and strategies that address identified gaps and needs. Provider report cards have been created by the Board, and services and progress toward outcomes were evaluated by surveying the provider network in March 2015. The Board also prepared formal agreements with multiple community-level partners to collaborate in community planning and implementation, year-round. As of May 1, 2015, the DWMHA Finance Department initiated an automated payment system to all SUD providers. Thus far, providers have offered high praises on the issuance of timely payments. Numbers show that over 12,000 individuals have already been admitted to the DWMHA system through this integration effort.

Substance Use Disorder (SUD) Marketing Billboards

In April 2015, DWMHA began a billboard campaign with advertisements appearing near freeways, on major streets, in neighborhoods and on buses throughout Wayne County. The campaign started with a Youth Access to Tobacco Contest, where messages from our youth inspired a billboard which read, "Quit Before Life Quits You." The billboards address substance use disorders, including tobacco and opioid use disorders. In July, the campaign expanded its reach to the Hispanic population and in the fall to the Arabic population. As cultural competency is of major value at DWMHA, we want to ensure that our message is both culturally sensitive and informative, and that nobody is excluded from access to services in Wayne County. We have received a very positive response from the community about the billboards and people are responding by calling our ACCESS center looking for programs and services. Throughout the campaign, the Authority has installed over 100 billboards on Wayne County freeways, residential neighborhoods and buses promoting our 24-hour Crisis Helpline – **1-800-241-4949** - and informing citizens about the dangers of prescription drugs, heroin and smoking.



Funding of Grow Detroit's Young Talent

The Detroit Wayne Mental Health Authority is passionate about uplifting and motivating Detroit's youth. This is part of our prevention efforts to assure at risk youth have meaningful opportunities to learn and thrive. It was this passion that was the driving force behind our Board's commitment of \$600,000 in funding to City Connect that employed 386 young people in Detroit as part of the GDYT Initiative. Research has shown that when young people are purposely engaged in education and employment they are more likely to stay away from alcohol, drugs and violence, thus improving their chances of graduating from high school and perhaps going on to attend college, a trade school or university.

Due to the vision and commitment of Mayor Mike Duggan, his Grow Detroit's Young Talent Initiative which exceeded its goal and will be employing 5,594 young people this summer. Designed to match youth with paid summer employment opportunities from various Detroit businesses, based on interest, ability, and accessibility, the program also incorporates work-readiness and financial literacy training. Businesses large and small from around the region are participating in the program in an effort to empower our young people and revitalize Detroit. This investment will prepare more students for their futures, while strengthening our communities and Detroit's financial future.

At a press conference which announced the contribution made by DWMHA, hopes for next year were unveiled. With 17,000 applicants this summer, Tonya Allen, President and CEO of the Skillman foundation, and Mayor Duggan aspire to employ even more youth next summer, with the help of businesses and contributors such as DWMHA.



DWMHA was able to dovetail the efforts of the City through our efforts out-county. DWMHA formed partnerships with Highland Park, Westland, Dearborn, Belleville, Redford and Alkebu-lan Village to enhance employment efforts of on behalf of Wayne County's youth.



Funding of Downriver SUDDS Coalition

Downriver's Coalition to Stop Underage Drinking and Drug Use, SUDDS, is a grant-funded initiative that works to educate and prevent underage drinking and drug use. Drugs and drinking are expensive, both financially and biologically. Underage drinkers tend to binge drink more often than adults, leading to more frequent alcohol poisonings and deaths. Underage drug use, such as tobacco use, is also worrisome, because most adults who continue using began at a young age.

DWMHA is committed to the health of our communities' youth. To support SUDDS, DWMHA has agreed to match all grant funding provided by the national Drug Free Communities Support Program. The initiative is now in its third year of a five-year grant cycle. DWMHA funding goes toward awareness campaigns, education, and data collection to survey the impact of the SUDDS initiative. The vision of SUDDS is to one day see "a community free of underage drinking and drugs, in which its members are knowledgeable about the consequences of their use."

Opening Minds...Ending Stigma Campaign

DWMHA, in partnership with the Flinn Foundation, completed a 30 minute anti-stigma video entitled "*Opening Minds - Ending Stigma*". In accordance with Mental Health Awareness Month, the documentary made its television premiere May 23, 2015, on CBS 62. This is one example of the DWMHA Board's commitment to changing the narrative around behavioral health. There is still a stigma attached to seeking treatment for mental illness. The National Institute of Mental Health describes "depressive illness" as a "disorder of the brain" — not a personal weakness, but many are still discriminated against or fear revealing their struggles. The documentary breaks down the stigma of seeking treatment for mental disorders, so that everyone in our community can access the treatment they need and receive support on their road to recovery.

"*Opening Minds - Ending Stigma*" features vignettes from consumers sharing their experiences living with mental illness, such as PTSD, depression, Obsessive Compulsive Disorder, and more. Statewide legislators, philanthropists, local leaders and mental health advocates also made contributions, including Senator Debbie Stabenow, Lieutenant Governor Brian Calley, Nick Lyons, Director of the Michigan Department of Health and Human Services, as well as our Board Chairman, Dr. Herbert Smitherman, and President and CEO Tom Watkins. The testimonies shine a light on mental illness as something common and treatable. By addressing their own challenges, viewers can feel less alone and understand the steps they can take toward recovery. The powerful video was shown at the NAMI Michigan State Conference in May and again at the MACMHB Spring Conference.



The video was made available on our website for distribution as a public education video and throughout our system of care to providers and advocates to help end mental health stigma in our community. Additionally, copies of the documentary were uploaded on flash drives, which were given to mental health workers to share with their organizations.

DWMHA and the Flinn Foundation have also just completed production on the next installment of the "*Opening Minds - Ending Stigma*" that will center on youth and mental illness stigma. DWMHA is excited to show this wonderful Part 2 that debuted on NBC Saturday, October 24, 2015 at 7pm.

This effort has gained statewide and national recognition.

First Annual "Raising the Bar" Conference

On June 8 and 9, nearly 400 professionals from the mental, medical, and public health fields gathered to take part in Detroit Wayne Mental Health Authority's (DWMHA) first annual interdisciplinary mental health conference, "Raising the Bar." The focus of the conference was to bring awareness to mental health issues in Wayne County.



The conference was co-hosted by DWMHA, Wayne State University School of Medicine, the Detroit Veterans Affairs Healthcare System, and Michigan Area Health Education Center. The purpose was threefold: share new clinical academic knowledge with practicing health professionals, share experiences in addressing recovery challenges, and provide an inter-professional opportunity for continuing education credits.

The truly interdisciplinary conference focused on a number of topics relevant to community members, stakeholders, social workers, public officials, researchers, and medical doctors alike. Breakout workshops focused on issues as various as homeless populations, military veterans, mental health first aid, trauma and post-traumatic stress disorder, adolescent suicide prevention, behavioral addictions, housing, faith-based issues, clinical and medical interventions, and more.

Keynote speakers included Michigan Lt. Gov. Brian Calley; Michigan Department of Health and Human Services Deputy Director Lynda Zeller; Dominic Sisti, Ph.D., professor and bioethicist at the University of Pennsylvania's Perelman School of Medicine; and U.S. Sen. Debbie Stabenow.



The conference also featured a screening of DWMHA's 30-minute documentary, "Opening Minds...Ending Stigma." The film was played throughout the conference alongside a traveling art show, which showcased over 30 works of art created by consumers expressing their inner states through mediums such as drawing, painting, and sculpture.

Detroit Wayne Mental Health Authority is committed to staying on the cutting edge of evidence-based research in order to improve care for those with substance use disorders, serious mental illnesses, and developmental disorders. This conference brought multiple facets together and continued to raise awareness about mental illness. Mental illnesses are illnesses of the brain, and deserve to be treated with the same seriousness as issues that originate elsewhere in the body.

“Raising the Bar” was an attempt to unite the silos in the treatment of mental and behavioral health issues by collaborating across disciplines and community partners. The Authority is hopeful that other communities and regions will soon follow suit. In the meantime, plans for the Authority’s second conference in 2016 are already underway. There is much work yet to reach our goal.

Mental Health First Aid

As part of Mental Health First Aid Awareness, the Detroit Wayne Mental Health Authority is continuing to offer free Mental Health First Aid training courses. Mental Health First Aid (MHFA) is a free public education program that introduces participants to risk factors and warning signs of mental illnesses, builds understanding of their impact, and overviews common supports. The 8-hour course uses role-playing and simulations to demonstrate how to offer initial help in a mental health crisis and connect persons to the appropriate professional, peer, social, and self-help care. The program teaches the common risk factors and warning signs of specific types of illnesses, like anxiety, depression, substance use, bipolar disorder, eating disorders, and schizophrenia. As part of our efforts to remain accessible and culturally conscious, a course in Spanish was offered for the first time this year.

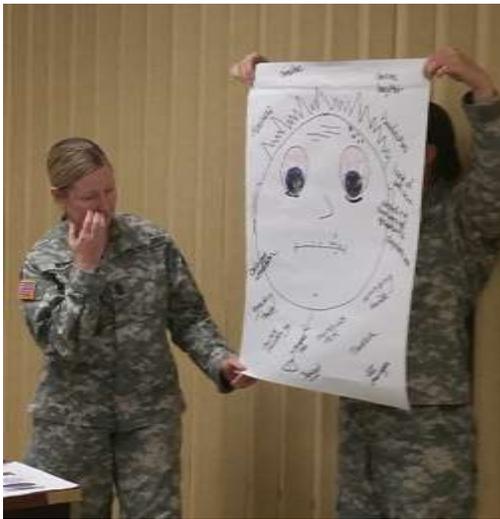


DWMHA received a grant through the Michigan Department of Community Mental Health to support and educate about the importance of Mental Health First Aid. Mental Health First Aid training greatly increases the understanding of mental health issues, and in turn, improves the recognition and appropriate treatment of mental health issues for our residents in Detroit and Wayne County. Last year nearly 3,500 people in Wayne County alone attended the Mental Health First Aid training courses; far exceeding our local goal set by MDCH. This is an effort to reduce stigma, improve mental health literacy, and greatly empower the individuals serviced throughout our region.

Mental Health First Aid equips people with the knowledge of the potential risk factors and warning signs for a range of mental health problems, including depression, anxiety/trauma, psychosis and psychotic disorders, substance use disorders and self-injury. It will also give them the skills, resources and knowledge to assess a situation, select and implement appropriate interventions, and help the individual in crisis connect with professional care. Suggested participants include family members, advocates, students, juvenile justice workforce, court professionals, law enforcement professionals, school teachers and emergency personnel.

This past year, DWMHA met regularly with local law enforcement agencies, such as the Detroit Police Department, Wayne County Sheriff Office, Wayne Police Chiefs Association and Airport Authority Police, building relationships in order to better serve and support them. By the very nature of their job, police officers are routinely exposed to extraordinary stressors, and in our society, there is an extra stigma attached to police officers that often prevent them from seeking the treatment they need. Through these relationships, DWMHA offered access to free Mental Health First Aid trainings, both in order to deal with community members, and in order to better understand themselves, if necessary.

DWMHA will continue to engage and partner with law enforcement agencies to better equip the men and women who protect and serve the citizens of Wayne County.



This Fall, DWMHA in partnership with the Flinn Foundation and the Detroit Crime Commission we will be offering a free Mental Health First Aid Instructor Training course for Wayne County law enforcement and emergency preparedness leaders. This will allow each organization to have individuals on staff who are certified MHFA Instructors and can then train their own colleagues, alleviating a lot of the overtime and budget constraints that has prevented them from receiving the training in the past.

Best Practices Task Force

The charge of the Best Practice Task Force, chaired by Dr. Cheryl Munday, is to “provide system design recommendations to the CEO and Board of Directors that will move service systems to a nationally recognized, locally good fitting, best practice model that maximizes behavioral health outcomes for those we serve, through optimally efficient use of available resources.” The Affordable Care Act, Excellence in Mental Health Act, and move toward integrated care are causing major changes in the system. DWMHA implemented its Task Force this year in order to discover what will best prepare DWMHA for the changing tides. DWMHA held a series of Behavioral Health Best Practices Task Force Community Forums throughout June and July to meet this goal.

At DWMHA, we believe that by listening to the people we serve we can greatly improve the outcomes and maximize the limited public dollars available. The community forums engaged participants on a variety of topics related to the system improvement, including what is and isn't working about the way the current system is managed, how a new model might affect different stakeholders, structural design recommendations, critical issues and populations to address. Community insights included concerns over the practicality of integration, social support, communication of services and rights, transitional services from childhood to adulthood, and more.



The forums included an informative film screening about the changes taking place in the DWMHA system. A large focus was the implementation of Behavioral Health Homes, which will provide a centralized access point and coordinator for an individual's services, behavioral or physical. Another initiative is the move toward incentivizing treatment outcomes through payment. These forums were designed to logistically be accessible to everyone, taking place throughout Wayne County, at morning and at night. However, if community members were unable to attend, all resources were made available on the DWMHA website. Community members were also able to send in ideas or concerns to the Best Practices Task Force online, to enable complete participation.

All feedback gathered at the eight community forums will be considered by the Best Practices Task Force, which will use it to refine recommendations to the Board of Directors. Each session is recorded and stored in order to review and continue extracting information. Later in 2015, the recordings will also be available on DWMHA's website.

Application for Excellence in Mental Healthcare Demonstration Project

U.S. Debbie Stabenow announced the launch of a new initiative to expand community mental health services. The initiative, made possible by her *Excellence in Mental Health Act*, "will offer patients increased services like 24-hour crisis psychiatric care, counseling, and integrated treatments for mental illness." The Excellence in Mental Health Act, signed into law last April, is one of the largest steps forward in mental health care in decades.



Senator Debbie Stabenow is to be commended for her leadership and for championing the Excellence in Mental Health Act which is providing us a pathway to securing better overall mental and physical health resources for society's most vulnerable population. Mental illness touches all of our families and communities in some way – every town, city and state that has dealt with inequality in mental health services for far too long will finally be able to reap the benefits of superior mental healthcare coverage.

Michigan was one of eight states selected for the demonstration program, and will receive an award of \$982,373 to compete in the nationwide program to improve and expand access to mental health care. Carmen McIntyre was the Authority lead on this project.

New Building for DWMHA

The development of DWMHA's new home is progressing steadily, with the move-in date projected for November 2015. The current location at 640 Temple Street has many defects and requires considerable updating to provide adequate support for the future information technology environment design. Our current renting rates are not cost-effective for the long term, and in addition, the building could be sold in the near future to accommodate the location of the new sports arena.

It is more sensible to use the leasing funds to lease space within the Temple building could be used to purchase an appropriate facility. Nearly \$1 million had been used annually to lease space. By purchasing a building in Detroit's New Center area for \$2.7 million, that money will be invested in the New Center area of Detroit. The mortgage will be paid off in a predictable number of years, and savings thereafter can be redirected into program enhancements. It will also allow for a better professional work environment with enhanced technological capacities.



Quality Improvement

The Quality Improvement team at DWMHA has made improvements this past fiscal year through their Performance Improvement Project (PIP) work. The Integrated Care Wellness Performance Improvement Project, a PIP implemented this past year, has increased in the number of consumers who have completed the Wellness Program by 500% from one consumer to five. Development of a second PIP, the Fall Precaution Performance Improvement Project, is underway.

QI also worked with Clinical Practice Improvement and Grantsmanship to develop a process to track the number of student learners seeking internships within the DWMHA provider system. The use of the HL modifier will identify the location of those student learners and the services they are providing as student interns. Currently, there are 14 providers in the program with 50 student learners participating, enrolled in the learning disciplines of Nurse Practitioner and Social Work.

The Critical Event process was redesigned to incorporate it in MH-WIN, the new computer module at DWMHA. Data submission began November 2014. As of June 2015, the QI Team has trained over 35 provider agencies and over 150 of their staff. All of the DWMHA staff has been trained and received information on the Critical Event process and source content.

Our QI Department successfully coordinated Three External Quality Reviews conducted by Health Advisory Group (HSAG). Performance Measurement Validation fully met performance standards per the ISCAT; PIP and Performance Compliance Monitoring scores will be issued in October 2015. QI also coordinated the National Core Indicators (NCI) survey. Due to this effort, Wayne State DDI was able to perform the Face-to-Face surveys for the 2015 NCI consumer surveys. Also coordinated and updated were over 50 policies with a special focus on MI Health Link, ensuring that the pre-delegation site-review/POCs were submitted.

In performance measurement, DWMHA achieved the Michigan Mission Based Performance Indicators criteria, with the exception of inpatient recidivism (readmission to inpatient within 30 days of discharge). QI also successfully completed the Michigan Department of Health and Human Services site visit of the Waiver Programs.



11 wraparound programs were re-enrolled, and the performance monitoring staff reviewed 100% of the Wraparound programs to establish baseline status. 36% scored 95% and higher. 100% of the Medicaid claims that were randomly selected for the first quarter met compliance during the case record review. Quality submitted 15 home-based renewal applications to MDHHS, and

all were approved. In addition, we have enrolled 16 new programs (seven Autism, one Crisis Residential, two Drop-in, one Intensive Crisis Residential, and five Psycho-Social Rehabilitation).

QI collaborated closely with the Autism Program to implement a successful POC. DWMHA has reduced the average number of days from referral to ABA Direct start by 12 days since January 2015.

For the first Quarter of fiscal year 2015, 157 Providers and 3,804 claim audits were reviewed for compliance. Of those, 76% (120 providers) scored 100% compliance, 13% (20 providers) scored between 99-95% compliance, and 11% (17 providers) scored below 95% were placed on corrective and/or claims adjustments occurred.

From January 1 through May 2015, 373 specialized residential facilities were reviewed with an average compliance rate of 95%. All providers scoring below 95% were placed on correction plans and are monitored by the MCPN and Authority staff. Gateway fell in this category and has submitted a plan of correction to address issues that involve egress, evacuation and fire prevention. Authority staff and Mr. Jeffrey McCall continue to work with providers and the MCPN to train on Fire Safety and Prevention.

Looking forward, as part of our continuous quality improvement process, Quality staff will be working with PCE to implement a process where all audits are prepopulated to minimize reporting errors, implement a process for tracking each claims audit, and to simplify the process for providers and MCPN's to create aggregate reports.

Information Systems

This past fiscal year, DWMHA became the first PIHP to become a Qualified Data Sharing Organization. During that period, DWMHA played a significant role in the MDHHS strategy for Health Information Exchange (HIE), as well as a lead role in the development and adoption of the state-wide standard for the Consent to share healthcare information. DWMHA also deployed the new Board Portal for tracking documents and information at the Board of Director level, and became a member of the Mi-HIN Steering Committee for HIE.

During Fiscal Year 2015, DWMHA took over near-complete control of the IT infrastructure from Wayne County. The IT Department deployed and stabilized the office system environment with the roll-out of a completely new desktop environment. In the workspace, over 80 printers, fax machines, and copiers were replaced with ten new multifunctioning Cannon Printers. DWMHA-based help desk to support IT services were also implemented.



To set the stage for the move to the new building, DWMHA acquired and deployed the new phone system that will be used in the new building, VOIP. Building access and surveillance controls are currently being deployed. Audio-Visual capabilities in the conference rooms at the new site are at the RFP stage. They also implemented the Automated Call Distribution and tracking system for the UM and Customer Service Departments.

IT established the Cost-Utilization Analytics structure, including The Cost-Utilization Steering Committee and Cost Integrity (CIG) Group. They also acquired and rolled out the DWMHA Dashboard environment, iDashboards, which creates an intuitive and easy user experience. The data forwarded to DWMHA from Providers and MCPNs. DWMHA's primary data warehouse to support analytics successfully acquired and deployed the DWMHA Population Health Management tool (CMT).

In just four months, IT developed and rolled out the new system to fully support the conversion of Coordinating Agency-Substance Use Disorder services from Institute for Population Health-Southeast Michigan Community Alliance to DWMHA. They also developed and deployed the MH-WIN module to support inpatient and outpatient utilization management. They built the electronic encounter process for reporting Medicare/Medicaid services to five regional ICOs and MDHHS for the MHL Program.

IT also made significant modifications to the claims and benefit management functions for the Medicare MHL program to the specifications of CMS, and supported the development and deployment of DWMHA standard forms, including Bio-Psych-Social, SIS, and LOCUS. Additionally, they delivered the claims processing functionality for Autism, Substance Use, and MI-Health Link.

In finance, IT provided support for the implementation of the new Payroll System, ADP, as well as the new financial system, Great Plains. They also adjusted MCPN funding models to support the HMP and shifts in State generated revenue

Other accomplishments include the continual development of Mi-Care Connect to support Integrated Care, which will be rolled out in FY-2016. Moving forward, IT is working on system preparation for both the implementation of ICD-10 diagnostic coding and the conversion from the MDHHS QI-Indicators to the new BH-TEDs records

Finance

Creation of the Authority

On June 6, 2013, the Wayne County Commission approved Enabling Resolution 2013-392 (Resolution) creating the Authority assuming all assets and liabilities of the Agency. In addition, the Resolution allowed the County to retain a portion of the Authority's cash and investments. On October 1, 2013, the County would retain 75% of the Authority's cash balance (\$48 million) decreasing each October 1 by 25% (\$16 million) until October 1, 2016; if needed, the Authority has full access to the funds to meet its obligations.

The Authority adopted GASB Statement No. 69, Government Combinations and Disposals of Government Operations and transferred all assets and liabilities of the Agency to the newly created Authority. The net activity is shown as a special item on the Statement of Revenues, Expenses, and Changes in Net position.

The Authority does not provide direct services to the community rather contracts with the Managers of Comprehensive Provider Network (MCPN) to administer the system. The MCPNs were created in 2002 in response to the State of Michigan's Application of Participation (AFP) which at the time mandated the MCPN model; refer to the notes to the financial statements for further discussion.

In accordance with Governmental Accounting Standards Board (GASB) Statement No. 61, The Financial Reporting Entity: Omnibus, an amendment of GASB Statements Nos. 14 and 34, the Authority is not a discretely presented component unit of the County.

Adoption of the Affordable Care Act

In December 2013 (effective April 1, 2014), the Michigan Legislative approved and the Governor signed in the Affordable Care Act whereby millions of uninsured consumers will be eligible for Medicaid aka Healthy Michigan Plan (HMP). In addition, as a result of the Act, the State eliminated the Adult Benefit Waiver (ABW) program for uninsured adults with no children; these consumers were automatically enrolled in HMP.

Financial Analysis

Current assets and other assets includes \$22.0 million held in the County's pooled cash and investment account. In addition, \$34.6 million is held in a separate bank account for the Medicaid Internal Service Fund (ISF) and reported as restricted net position. The ISF is established for risk funding for Medicaid cost over-runs. The Authority has \$56.2 million held in a depository with Flagstar Bank.

Current liabilities consists of accounts payable of \$31.6 million to various service providers. Due to Wayne County represents \$16.2 million of pension and healthcare expenses incurred but unpaid at year end. Unearned revenue include Healthy Michigan savings and State general fund carryover of \$9.3 million and \$4.7 million, respectively.

Invested in capital assets, net of related debt consist primarily of the purchase of the new Authority headquarters located in the historical New Center area in Detroit Michigan. The Authority purchased the building and three (3) parking lots for approximately \$2.9 million with construction renovations estimated for completion by August 1, 2015.

Unrestricted net position primarily consists of the \$15,317,247 of the MCPN's net position held at September 30, 2014; the MCPN net position balance is an asset of the Authority and reported in prepayment and deposits.

State grants consists of \$508.5 million, \$10.2 million and \$104.9 million in Medicaid, Adult Benefit Waiver and State General Funds, respectively. The Medicaid includes \$37.6 million in Healthy Michigan Plan. The Authority received a \$28 million reduction in State General Fund (operations) however the funding was replaced with approximately \$37.6 million in Healthy Michigan Plan for the six month period April 1, 2014 through September 30, 2014; ABW funds were also eliminated in April. The HMP population included Substance Use Disorder (SUD) services to consumers previously financed under the State SUD Block grants funds through the Coordinating Agencies (CAs). The variance in state grants primarily consist of prior year's deferred Medicaid carryover (\$18 million) and State General fund savings (\$4.2 million).

Local grants primarily consists of \$17.6 million in Wayne County local match. The match is used to support: (1) Medicaid drawdown to the State; (2) 10% of state facilities cost and (3) 10% of most uninsured costs to Wayne County consumers.

Salaries and related fringes represent the salaries, benefits and pension costs for approximately one hundred (180) Authority employees and contractual staff. The variance was due to additional pension and other post -employment benefit costs incurred during the year.

MCPN costs represent the costs incurred by the five (5) MCPNs – Carelink Network, Consumer Link Network, Community Living Services, Gateway Health Systems and Synergy Partners. The amount includes up to 4.5% administrative costs. The MCPNs spent approximately \$10.9 million of the prior year Medicaid carryover.

Substance use disorders represent the costs incurred to the two Coordinating Agencies (CAs) – SEMCA and the City of Detroit (via Institute for Population Health). The CAs are responsible for the administration of all substance use disorder services to residents of Detroit and Wayne County.

The Authority funded the Coordinating Agencies traditional Medicaid, ABW and HMP for \$17.2 million, \$2.9 million and \$6.3 million, respectively. The Authority enters into contracts directly with providers for a certain service that are not administrated through the MCPN's. Such services include categorical/ethnic services (\$3.9 million); various programs through Wayne County (i.e. Jails, Clinic for Child Study) (\$20.1 million); various federal programs (i.e. Housing and Urban Development (HUD), and System of Care and Transformation providers - \$9.1 million); and Medicaid drawdown (\$5.1 million). In addition, all Medicaid and ABW are subject to State of Michigan Use and HICA taxes which was approximately \$19.1 million.

Operating costs include Wayne County purchased services (\$2.2 million), building rental (\$1 million), Access Center (\$5 million), and annual maintenance of our electronic Claims Record system (\$1 million).

The Special Item represents the transfer of assets and liabilities of the Agency at October 1, 2013 including adjustments unavailable deferred revenue, capital assets, accrued compensated absences, and unfunded pension and other post- employment benefits (OPEB). The Agency reported as a special revenue fund under the modified accrual basis of accounting therefore the special items was restated under the full accrual basis of accounting.

Budgetary Highlights

The Authority adopted an annual operating budget by September 1 of the previous year. The budgetary comparison schedule has been provided to demonstrate compliance with this budget. During the year, there were several significant changes from the original to the final amended budget. There were several significant changes in state grants and contracts however the net impact primarily resulted from the State of Michigan cutting the Authority's Medicaid capitation by approximately \$30 million as compared to prior year; the MCPN's and a few direct providers budget was the offset. The increase in substance use disorder expenses related to additional Healthy Michigan Plan revenues appropriated effective April 1, 2014. The increase in HICA and Use tax expenses related to the restoration by the State of Michigan of the 6% Use tax on all Medicaid effective April 1, 2014. The increase in state purchased services resulted from an increase in state facilities rates by as much as 47% in certain facilities and consistent with the State of Michigan appropriation.

Conclusion

Together we have achieved great things for the consumers of Wayne County in our 2nd year at DWMHA. This Honorable Board, the dedicated management and staff at DWMHA have an unwavering commitment to the people with mental health needs of our community and their success. Our goals for the future will continue to drive our system of care to be consumer and community focused, data driven and evidenced-based to meet those needs that best serve our consumers. We are confident through the partnership between the board, staff and our community we will continue to be prosperous and shine bright. Together we are truly better!

