



**Detroit Wayne
Integrated Health Network**

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**FULL BOARD
Wednesday, February 19, 2025
Detroit Wayne Integrated Health Network
Administration Building
8726 Woodward Avenue
Detroit, Michigan 48202
1:00 p.m.
AGENDA**

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES – January 15, 2025**
- VI. RECEIVE AND FILE –** Approved Finance Committee Minutes – January 13, 2025
Approved Program Compliance Committee Minutes – January 8, 2025
- VII. ANNOUNCEMENTS**
 - A) Network Announcements
 - B) Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Metro Region Meeting – Oakland Community Health Network Host (Hybrid)- March 27, 2025
 - 2) Board Committee Appointments – (April)
 - 3) CEO Incentive Compensation Objectives 2024/2025
 - 4) Annual Meeting - June 18, 2025
 - 5) Update Community Mental Health Association of Michigan (CMHAM) Annual Winter Conference – Kalamazoo, Michigan (February 4th & 5th 2025)
 - 6) National Council for Mental Well Being – NATCON 25 – Philadelphia, PA (May 5th -7th 2025)
 - 7) Regional Chamber of Commerce Mackinac Policy Conference 2025 – Mackinac Island, Michigan (May 27th – May 30, 2025)
 - 8) Community Mental Health Association of Michigan Annual Summer Conference – Grand Traverse, Michigan (June 10 -11 2025)

Board of Directors

Dr. Cynthia Taueg, Chairperson
Karima Bentounsi
Jonathan C. Kinloch

Kevin McNamara, Vice Chairperson
Angela Bullock
Bernard Parker

Dora Brown, Treasurer
Lynne F. Carter, MD
William Phillips

Eva Garza Dewaelsche, Secretary
Angelo Glenn
Kenya Ruth

James E. White, President and CEO



9) Community Mental Health Association of Michigan Annual Fall Conference – October 27 – 28 2025, Grand Traverse, MI

B) Executive Committee

- 1) Substance Use Disorder Oversight Policy Board – Full Board Appointments
- 2) City of Detroit and Wayne County Appointments/Reappointments
- 3) Annual Report to the Commission – March 20, 2025

C) Finance Committee

D) Program Compliance Committee

E) Recipient Rights Advisory Committee

F) Policy/Bylaw Committee

G) Nominating Committee

IX. SUBSTANCE USE DISORDER (SUD) OVERSIGHT POLICY BOARD REPORT

X. UPDATED QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PLAN (QAPIP) DESCRIPTION FY2023-2025 *(Program Compliance)*

XI. QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PLAN (QAPIP) EVALUATION AND WORK PLAN FY 2024 *(Program Compliance)*

XII. QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PLAN (QAPIP) WORK PLAN FY 2025 *(Program Compliance)*

XIII. UTILIZATION MANAGEMENT (UM) PROGRAM EVALUATION FY 2024 *(Program Compliance)*

XIV. UNFINISHED BUSINESS

Staff Recommendations:

- A. BA#21-64 (Revision 3) – COVID Supplemental Carryover *(Program Compliance)*
- B. BA#22-58 (Revision 3) – Temporary Mobile Office Units - Willscot *(Executive)*
- C. BA#23-15 (Revision 2) – DWC Training Platform Contract Extension 2 *(Program Compliance)*
- D. BA#23-57 (Revision 4) – Claims Audit and Utilization Review Systems (CAURS) and Information Technology Consulting -Bizanalytix Technologies, LLC *(Program Compliance)*
- E. BA#25-24 (Revised) – Autism Spectrum Disorder Service Provider Network FY 25 *(Program Compliance)*
- F. BA#25-25 (Revision 2) – FY25 Detroit Wayne Integrated Health Network Operating Budget *(Finance)*

XV. NEW BUSINESS

Staff Recommendations:

- A. BA #25-08 - COVID Comprehensive Behavioral Health (CCBH) FY 25 *(Program Compliance)*
- B. BA#25-53 – AI Models: Development and Implementation *(Finance)*
- C. BA#25-54 – Mend VIP Telehealth Platform *(Finance)*
- D. BA#25-55 – Michigan Child Collaborative Care (MC3) Program and Behavioral Health Consultant *(Program Compliance)*
- E. BA#25-56 – Public/Private Investment (Trillium) *(Executive)*

XVI. AD HOC COMMITTEE REPORTS

- A. Strategic Plan Committee
- B. Board Building Committee

XVII. PRESIDENT AND CEO MONTHLY REPORT

- A. Update Crisis Care Center
- B. Update Integration Pilot
- C. Update CCBHC
- D. Update Long Term Residential Care

XVIII. REVIEW OF ACTION ITEMS

XIX. GOOD & WELFARE/PUBLIC COMMENT/ANNOUNCEMENTS

Members of the public are welcome to address the Board during this time for no more than two minutes. (The Board Liaison will notify the Chair when the time limit has been met.) Individuals are encouraged to identify themselves and fill out a comment card to leave with the Board Liaison; however, those individuals that do not want to identify themselves may still address the Board. Issues raised during Good and Welfare/Public Comment that are of concern to the general public and may initiate an inquiry and follow-up will be responded to and may be posted to the website. Feedback will be posted within a reasonable timeframe (information that is HIPAA related or of a confidential nature will not be posted but rather responded to on an individual basis).

XX. ADJOURNMENT



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
FULL BOARD
Meeting Minutes
Wednesday, January 15, 2025
1:00 p.m.**

BOARD MEMBERS PRESENT

Dr. Cynthia Tauzeg, Chairperson	Angela Bullock Karima Bentounsi
Kevin McNamara, Vice Chairperson	Lynne F. Carter, M.D.
Dora Brown, Treasurer	Angelo Glenn
Eva Garza Dewaelsche, Secretary	Jonathan C. Kinloch
Kenya Ruth, Immediate Past Chair	Bernard Parker
Karima Bentounsi	William Phillips

BOARD MEMBERS ATTENDING VIRTUALLY: None

BOARD MEMBERS EXCUSED: None

SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD ATTENDING VIRTUALLY: None

GUEST(S): None

CALL TO ORDER

The Board Chair Dr. Tauzeg, welcomed and thanked everyone for attending the meeting both in person and virtually and called the meeting to order at 1:02 p.m. A roll call was requested.

ROLL CALL

Roll call was taken by Ms. Garza Dewaelsche, Secretary and a quorum was present.

APPROVAL OF THE AGENDA

The Board Chair, Dr. Tauzeg called for a motion on the agenda. **It was moved by Mr. Phillips and supported by Mr. Parker approval of the agenda.** There was no further discussion. **Motion carried.**

MOMENT OF SILENCE

The Board Chairperson, Dr. Tauzeg called for a moment of silence. Moment of Silence taken.

APPROVAL OF BOARD MINUTES

The Chair called for a motion on the Board minutes from the Full Board meeting of November 20, 2024. **It was moved by Mr. Glenn and supported by Mr. Parker approval of the Full Board minutes of November 20, 2024.** There was no further discussion. **Motion carried.**

RECEIVE AND FILE

The approved minutes from the Finance Committee meeting of November 6, 2024 and the Program Compliance Committee meeting of November 13, 2024 were received and filed.

ANNOUNCEMENTS

Network Announcements

There were no Network Announcements.

Board Announcements

Ms. Ruth and the Board wished board member Angela Bullock a happy birthday. There were no additional Board Announcements.

BOARD COMMITTEE REPORTS

Board Chair Report

The Board Chair, Dr. Taueg provided a verbal report. It was reported that per the Board Bylaws the Nominating Committee needed to be established. The board members who have volunteered to serve on the Nominating Committee are Commissioner Jonathan C. Kinloch, who would serve as Chair; Mr. Bernard Parker; Vice Chair; Mr. Angelo Glenn and Ms. Kenya Ruth. The slate of appointments needed to be submitted for Full Board confirmation at this meeting and the committee would be responsible for recommending a slate of officers to the Full Board at the February meeting so that the officers would be selected by April 1st . The Board Chair called for a motion. **It was moved by Mr. Phillips and supported by Ms. Bullock approval of the recommended slate of board members to serve on the Nominating Committee.** The recommended board members to serve on the Nominating Committee were Commissioner Jonathan C. Kinloch, Chair; Mr. Bernard Parker, Vice Chair; Mr. Angelo Glenn and Ms. Kenya Ruth. There was no further discussion. **Motion carried.**

The Community Mental Health Association of Michigan Annual Winter Conference (CMHAM) will be held in Kalamazoo, Michigan February 4th and 5th 2025. Mr. Parker and Commissioner Kinloch will be attending the conference along with several staff members. The National Council for Mental Well Being – NatCon 25 will be held in Philadelphia May 5th -7th she and Mr. Parker are scheduled to attend. The Regional Chamber of Commerce Mackinac Policy Conference will be held on Mackinac Island, Michigan May 27th – 30th; there are several board members scheduled to attend and DWIHN is working on lodging and there were no updates at this time. The Chief of Staff will provide additional information as it becomes available. A brief discussion took place regarding 298 Bulletin boards. There was no further discussion.

Executive Committee

The Board Chair gave a verbal report. It was reported that the Board Executive Committee met on Monday, January 13, 2025. The Board Study Session was held on December 4th at the Corner Ballpark and was a wonderful informative session. The CCBHC was covered in great detail along with other topics. There will be another study session later this spring. There was no further discussion.

Finance Committee

Ms. Brown, Chair of the Finance Committee provided a verbal report. It was reported that the Finance Committee met on Monday, January 13, 2025 after the Board Executive Committee meeting. Our finance department is working diligently with the auditors to complete the fiscal year end audit. We should have that document available to the Board in March. There were four board actions that were moved forward for consideration to the Full Board. The liquidity remains sound, and our cash flow is sufficient to support our operations. There was no further discussion. The Finance Committee report was received and filed.

The Chair, Dr. Tauzeg called for the report of the Program Compliance Committee report.

Program Compliance Committee

Commissioner Kinloch, Chair of the Program Compliance Committee provided a verbal report. It was reported the committee met on Wednesday, January 8, 2025. A monthly report was received from Corporate Compliance. Overviews were provided on compliance, investigations, contract actions, compliance risk, and a follow-up was provided on the unauthorized access that occurred in August 2024, in which a threat actor gained remote access. It was noted that, as of December 30th 2024, nine members have registered for credit, monitoring. A contract termination notification was issued to Pontiac General Hospital, effective December 11th 2024, due to actions taken by CMS that impacted the services provided to DWIHN members. All affected members, with the assistance of Utilization Management, have been appropriately removed from the facility prior to the termination date and have been placed in other facilities. Quarterly reports were received from Adult Initiatives, Crisis Services, PIHP Crisis Services and Utilization Management as well as Clinical Operations. It was reported that during the month of November there was a total of 155 presentations at the Adult Crisis Stabilization Unit with 128 admissions; **African Americans made up 78% of the presentations, individuals between the ages 25 and 34 made up 35% of the presentations and males made up 55%.** Clinical services noted that the Home Health team will be presenting at the CMHAM Winter Conference in Kalamazoo on February 4th 2025 on Health Home implementation, and how it intersects with Certified Community Behavioral Health Clinical Services. The CCBHC has 15,637 members enrolled as of December 19th 2024, which is over a 20% increase since November 2024. DWIHN Care Clinic was given CCBHC full certification status and will be joining the CCBHC State demonstration as the Region's 8th CCBHC site on January 1, 2025. The State needs to get approval from CMS for us to be involved in that initiative. The behavioral health home has 828 members enrolled as of December 19th 2024.

All of the Quarterly reports were very informative. The complete reports can be found in the Program Compliance Committee agenda packet that has been posted to the website and in Board Effects. The Committee considered three Board actions under Unfinished Business, and two board actions under New Business. All board actions were moved to full board for approval. There was no further discussion. The Program Compliance Committee report was received and filed.

The Chair noted that she attended the meeting; the report provided was very thorough and that it was an excellent meeting; she encouraged board members to take a look at the agenda packet as there were some very good outstanding results in some of the quarterly reports and some

innovative work that's being done to reduce hospitalization and keep people active and as well as they can be so.

The Chair noted for the record that board member Bentounsi and Dr. Carter had joined the meeting.

Recipient Rights Advisory Committee

Mr. Glenn, Chair, Recipient Rights Advisory Committee (RRAC) reported that the committee did not meet during the month of January. The next meeting is scheduled for February 3rd 2025 and there was no report.

Policy/Bylaw Committee

Mr. Phillips, Chair, Policy/Bylaw Committee reported that the committee did not meet during the month of January. The committee is scheduled to meet in February and a report will be provided at that time.

SUBSTANCE USE DISORDER (SUD) OVERSIGHT POLICY BOARD REPORT

Ms. Judy Davis, SUD Director noted on behalf of Mr. Adams, SUD Oversight Policy Board Chair that the SUD Oversight Policy Board did not meet during the month of December. The next meeting is scheduled for Monday, January 29th 2025 and there was no report.

Dr. Taueg, Chair called for Unfinished Business.

UNFINISHED BUSINESS

Staff Recommendations:

A. BA#21-28 (Revision 3) Janitorial Services – Services to Enhance Potential The Chair called for a motion. **It was moved by Mr. Phillips and supported by Mr. Glenn approval of BA#21-28 (Revision 3) Janitorial Services – Services to Enhance Potential.** Ms. D. Durant, VP of Finance and Ms. B. Blackwell, Chief of Staff and VP of Governmental Affairs reporting. Revised BA#21-28R3 is requesting approval to extend and increase the contract amount for janitorial services at our Woodward Facility with Services to Enhance Potential (STEP). Facilities is in the process of issuing an RFP for janitorial services and would like to continue to utilize STEP during this process. Facilities is requesting an increase in contract amount of \$32,500 bringing the contract total not to exceed \$330,215.00 with a term ending April 30, 2025. Discussion ensued regarding the terms of the contract; the services provided by STEP; the Procurement process and the RFP. A copy of the RFP was requested by the board. There was no further discussion. **Motion carried.**

B. BA#25-01 (Revision 1) Multicultural Integration Providers. The Chair called for a motion. **It was moved by Commissioner Kinloch and supported by Ms. Bullock approval of BA#25-01 (Revision 1) Multicultural Integration Providers.** Ms. R. Williams, Director of Managed Care Operations reporting. Detroit Wayne Integrated Health Network is requesting approval to amend the original board action for Comprehensive Services for Behavioral Health -2025 with the Michigan Department of Health and Human Services (MDHHS). The DWIHN Veteran Navigator received additional funding for Fiscal Year 2025 in the amount of \$35,207.00 which brings the total amount for the Veteran Navigator, Peer Navigator, and the Navigator Assistant to \$195,207.00. The additional funding does not include the other participants who are a part of the Multi-Cultural Integration Grant; American Indian Health and Family Services (AIHFS), Community Health and Social Services Center (CHASS), Southwest Counseling Solution (Hispanic and Veterans), and Association of Chinese Americans (ACA). Revenue for these services is supported by E-Grants & Management Systems (EGrAMS)

categorical funds for Ethnic Services. The amount of the proposed term of this Memorandum of Understanding is October 1, 2024 through September 30, 2025 and will not exceed \$765,837.00. A budget adjustment to certify the additional funds will be forthcoming. There was no further discussion. **Motion carried.**

C. BA#25-02 (Revised 1) – Substance Use Disorder (SUD) Treatment Provider Network FY25. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Commissioner Kinloch approval of BA#25-02 (Revised 1) Substance Use Disorder (SUD) Treatment Provider Network FY25.** Ms. J. Davis, Director Substance Use Disorder reporting. The SUD Department is requesting approval to provide additional SUD treatment services in an amount not to exceed \$1,406,939. Additional treatment services are summarized as follows: - Grant Funds (\$1,056,939.00) Healing and Recovery Opioid Settlement Funds received from MDHHS: \$371,739.00; Alcohol Use Disorder Funds - \$655,200.00; Tobacco Free Pilot Program - \$30,000.00. PA2 Funds (\$350,000.00) – Screening Brief Intervention to Treatment \$350,000.00. The SUD Department offers services to support recovery. Program to support children affected by opioid overdoses by fostering resilience and creating a nurturing environment. An analysis of overdose trends among racial groups and an initiative focusing on enhancing recovery housing facility to promote stable living environments. The purpose of the AUD project is to organize a series of Local Townhall Meetings. AUD Conferences and Media aimed at raising awareness about alcohol use disorders (AUD) and promoting the available treatment options within the community. Tobacco Free Pilot project will offer training, technical assistance, and best practices to the selected site. The SBIRT initiative has been a lifeline for members identified as at risk for SUD problems and the peers have been providing invaluable support to the community and members served in the emergency department (ED) and Federally Qualified Health Centers (FQHC’s). With the additional allocations noted above, SUD treatment services are funded with Grant dollars (\$4,178,721) and PA2 Funds (\$1,771,100) together totaling \$5,949,821.00 DWIHN has the discretion to distribute these funds amongst service providers based on utilization without further board approval provided the total does not exceed the approved budget of \$5,949,821.00. There was no further discussion. **Motion carried with Mr. Phillips abstaining.**

D. BA#25-03 (Revised) Substance Use Disorder (SUD) Prevention Provider Network FY25. The Chair called for a motion. **It was moved by Ms. Ruth and supported by Ms. Bullock approval of BA#25-03 (Revised) Substance Use Disorder (SUD) Prevention Provider Network FY25.** Ms. J. Davis, Director of Substance Use Disorder reporting. The Substance Use Disorder (SUD) Department is seeking approval to provide additional prevention services funded through two key sources: PA2 funding by \$320,000.00 and Healing and Recovery Opioid Settlement Funds received from MDHHS for \$497,826.00. With the addition of the aforementioned amounts, total SUD prevention services are funded with grant funds totaling \$3,940,434 and PA2 funds totaling \$3,025,075. The revised not-to-exceed amounts totals \$6,467,683. The proposed funding increase will allow for the continuation and expansion of vital prevention services that have shown effectiveness in addressing substance use challenges in our communities. By enhancing outreach and community impact, we aim to create a healthier environment for our residents. DWIHN has the discretion to reallocate the dollars within funding sources among the providers without board approval based upon utilization up to an amount not to exceed \$6,467,683 for the fiscal year ending September 30, 2025. There was no further discussion. **Motion carried with Mr. Phillips abstaining.**

E. **BA#25-25 (Revision 1) FY2025 DWIHN Operating Budget.** The Chair called for a motion. **It was moved by Ms. Ruth and supported by Mr. Glenn approval of BA#25-25 (Revision 1) FY2025 DWIHN Operating Budget.** Ms. S. Durant, VP of Finance reporting. DWIHN requests board approval to amend the FY2025 Operating Budget as follows: 1. Certify the following grant revenues and authorize expenditures of a like amount (\$2,386,966): Additional Block Grant revenues for Veteran Navigator Program (\$35,207); Infant & Early Child Mental Health (\$108,827), Mental Health COVID funding (\$174,620), SUD Recovery Incentives Infrastructure (\$442,488), and SUD prevention efforts (\$3,500); OBRA/PASARR grant revenue totaling \$122,324 to fund one additional Registered Nurse position; \$1,000,000 Opioid Healing and Recovery Engagement and Infrastructure funding from MDHHS; \$500,000 allocation from MDHHS for Crisis Stabilization Unit startup support. II. The board action also includes the use of \$463,400 of Medicaid/Local Reserves to support the following budgetary needs: 1. Cyber privacy/breach insurance (BA #25-45): \$168,400 2. Rental Space to house direct services and CCBHC operations (BAs #25-28 and #25-44): \$295,000. The revised FY2025 Operating Budget totaling \$1,209,208,065 consists of the following revenues: \$911,276,166 – Medicaid, DHS Incentive, Medicaid-Autism, Children’s/SED Waiver, HAB, CCBHC Supplemental; \$145,823,434 – Healthy MI Plan; \$12,552,243 MI Health Link; \$21,460,905 – State General Funds; \$23,533,633-Wayne County Local Match Funds; \$4,723,521-County PA2 Funds; \$34,516,030 – State Grants (MDHHS/MDHHS SUD, OBRA); \$25,112,853-Federal Grants (MDHHS/MDHHS SUD, SAMHSA); \$1,608,743 – Local Grants; \$6,760,000 Interest Income; \$40,000-Miscellaneous Revenue; \$21,800,537 – Medicaid/Local Reserves. Discussion ensued regarding the new Earned Sick Time Law and its impact on budget and if it had been accounted for in the budget. It was determined there needed to be more evaluation of the impact. The board requested that staff share with the Finance Committee updates on the Earned Sick Time Law. There was no further discussion. **Motion carried.**

New Business

Staff Recommendations:

A. **BA #25-48 – ARC’s Renewal** - The Chair called for a motion. **It was moved by Ms. Bullock and supported by Mr. Phillips to bundle and approve BA#25-48 ARC’s Renewal and BA#25-51 DWIHN Provider Network System as the board actions had been reviewed and recommended for approval by the Program Compliance Committee.** Ms. R. Williams, Director of Contract Management. The Detroit Wayne Integrated Health Network (DWIHN) is requesting Board approval of three (3) one-year contract renewals with 1. ARC Detroit; 2. ARC of Northwest Wayne County and 3. ARC of Western Wayne County. Each contract period will begin 10/1/2024 and end 9/30/2025 not to exceed amounts are as follows: The ARC Detroit not to exceed \$117,369; The ARC of Northwest Wayne County – not to exceed \$296,101; The ARC of Western Wayne County – not to exceed \$185,927. The proposed contracts will provide advocacy, supportive services, and educational information by addressing issues facing persons with intellectual developmental disabilities. The contract further targets supportive family members, and the community through advocacy and information. The design and delivery of the programs will ensure active engagement and coordination in the mental health system. The ARC Detroit- Total not to exceed -\$117,369 The Advocacy and Community Awareness Program will engage and assist individuals who are I/DD and their families to develop skills and provide access to information, promoting individual growth and family well-being. The ARC of Northwest Wayne County – Total not to exceed - \$296,101 – The After I’m Gone Program - \$134,220 Assists families in planning for the future, when family members are no

longer able to provide help. Guardianship Alternatives Information Network (GAIN) - \$56,552 Offers information about guardianship and legal alternatives to guardianship for consumers, parents, and mental health professionals. The Lekotek Program - \$105,329 – Provides families with monthly individual play sessions with their child to explore toys and play for children with disabilities. The ARC of Western Wayne County – Total amount not to exceed \$185,927 – The After I'm Gone Program \$56,377 assists families in planning for the future when family members are no longer able to provide help. The Take Charge Helpline -\$129,550 – Developed to address concerns of parents and children, and adults with I/DD. The Helpline broadens the geographical reach to consumers and the community, to engage, inform and encourage. The website is a portal to general information on mental health and disability related topics. There was no further discussion.

B. BA#25-51 – Provider Network System FY24/25. R. Williams, Director of Contract Management reporting. The Detroit Wayne Integrated Health Network (DWIHN) is requesting the addition of the following 5 providers to the DWIHN provider network as outlined below, without change to the total provider network amount. Residential Providers – 1. CNS Hearts of Love Home Care, LLC-credentialed 12/5/2024 for Community Living Support); 2. New Dawn AFC Home, LLC -credentialed 12/5/2024 for Personal Care in Licensed Specialized Residential Setting; Community Living Support); 3. No Places Like Home AFC – credentialed 10/29/2024 for Personal Care in Licensed Specialized Residential Setting; Community Living Support; 4. Pauline’s Place LLC -credentialed 12/5/2024 for Personal Care in Licensed Specialized Residential Setting; Community Living Support) 5. Special Care Services 2 Inc. – credentialed 12/5/2024 for Community Living Support. Board approval will allow for the continued delivery of behavioral health services for individuals with: Serious Mental Illness, Intellectual/Developmental Disability, Serious Emotional Disturbance and Co-Occurring Disorders. The services include the full array behavioral health services per the PIHP and CMHSP contracts. The amounts listed for each provider are estimated and are subject to change. There was no further discussion. **Motion carried.**

C. BA #25-49 – MDHHS/FEMA Wayne County Strong. – The Chair called for a motion. **It was moved by Mr. Glenn and supported by Commissioner Kinloch approval of BA#25-49 MDHHS/FEMA Wayne County Strong. Ms. A. Smith, reporting.** The Detroit Wayne Integrated Health Network (DWIHN) is requesting the approval of utilizing grant renewal funds to enter into a contract with various vendors to resume a virtual and face-to-face crisis counseling program designed to serve victims of flooding in Wayne County under BA#25-49. Each of the partners is named and approved via the federal funder and the State of Michigan. This is a grant renewal for DWIHN and MDHHS from FEMA. The state’s partners in this grant pursuit are Detroit Wayne Integrated Health Network (DWIHN) and MPHI. DWIHN will be the grant’s lead partner and will disburse all funding to identified partners/providers-listed below. The providers were selected based upon them covering the zip codes that the president’s declaration deemed as disaster areas or areas most impacted by the floods. The cost of this initiative is not to exceed \$3,633,298.31 for the nine-month period ending May 18, 2025. A comprehensive breakdown is as follows: Team Wellness \$455,618.40; Black Family Development \$354,492.00; Central City Integrated Health \$209,397.60. Discussion ensued regarding the persons that would be assigned to the project. There was no further discussion. **Motion carried with Ms. Ruth and Mr. Phillips abstaining.**

D. BA #25-50 – Gregory Terrell and Company – Residential Provider Payroll Audits. – The Chair called for a motion. **It was moved by Ms. Bullock and supported by Ms. Ruth**

approval of BA#25-50 Gregory Terrell and Company – Residential Provider Payroll Audits. Ms. S. Durant, VP of Finance reporting. This board action is requesting the approval for a one year contract effective January 31, 2025 through January 31, 2026. This board action is a time extension only and does not require additional funds. The revised board action #21-52R approved in February 2023 was for an amount not to exceed \$100,000. To date, the provider has spent \$37,000 with \$63,000 remaining on the purchase order. Effective October 1, 2020, MDHHS discontinued the use of H0043 and mandated community living supports report under H2015. This mandate requires providers to bill using certain modifiers and associated rates based on the number of staff and consumers that reside in the home. In an effort to ensure residential providers are billing with the proper modifier/rate, DWIHN is required to perform payroll audits. In response to an Invitation for Bid (IFB), Gregory Terrell & Associates, a Detroit based accounting firm, was deemed the lowest bidder. The contract terms of the IFB ended on January 31, 2025 therefore this board action would constitute a new contract. The firm will assist with accumulating the staff hours and consumers in the home whereby DWIHN finance staff will evaluate whether the proper modifier/rate was used for reimbursement of services. The amount of the contract is estimated as the contract is based on hours billed; DWIHN has over 200 providers subject to audit. There was no further discussion. **Motion carried.**

- E. **BA #25-52 – Snow Removal Services – DWIHN – Winter Services, LLC.** The Chair called for a motion. **It was moved by Ms. Ruth and supported by Commissioner Kinloch approval of BA#25-52 Snow Removal Services – DWIHN – Winter Services, LLC.** Facilities is requesting Board approval to enter into contract with Winter Services, LLC to provide snow removal and deicing services for our DWIHN facilities. An Invitation for Bid (IFB) was issued for a three-year contract with 2 one-year options to extend. Procurement received five (5) proposals in total and recommended award to Winter Services in an amount not to exceed \$97,230.00 for three-year period ending May 31, 2027. There was no further discussion. **Motion carried.**

AD HOC COMMITTEE REPORTS

Strategic Plan Committee

The Chair, Dr. Taueg requested the Strategic Plan Committee report. Dr. Carter, Committee Chair reported that the Strategic Plan Committee did not meet during the month of January and there was no report.

Board Building Committee

The Chair, Dr. Taueg requested the Board Building Committee report. Mr. Parker, Committee Chair reported that the Board Building Committee did not meet during the month of January and there was no report.

The Board Chair, Dr. Taueg called for the President and CEO Monthly Report.

PRESIDENT AND CEO MONTHLY REPORT

Mr. White, President and CEO provided a written report for the record. He wished everyone a Happy New Year. It was reported that there had been some successes that would not have been possible without our amazing staff and gave congratulations to Mr. Connally, VP of Human Resources for the successful negotiation of a new collective bargaining agreement with ASFCME that was recently ratified. It was noted that this puts the employee's morale in a really good place and they were happy that they were able to get it done. There would be a Staff Celebration on February 7th and 12th and more information would be share on the accomplishments. The two

dates were selected to accommodate the 24/7 operations at the Crisis Center; invitations would be extended to the Board to attend as their schedules permitted. The Chair noted that the board needed to approve the collective bargaining agreement that had been ratified by its members. **It was moved by Commissioner Kinloch and supported by Mr. Glenn approval of the recommendation of the CEO ratification of the ASFCME Collective Bargaining Agreement.** Mr. Connally distributed copies of the agreement and was requested to give an overview of the changes in the agreement. It was noted that there were changes in the holidays, the time off between the holidays would no longer be provided under this contract; staff would be allowed to utilize their PTO if supported by operations however, it will not be compensated as holiday time; there were changes in the economic improvements; employees will receive a ratification bonus of \$750.00 and improvements on scheduled increases whereby a certain percentage of pay increases are guaranteed and the remainder is based on employees individual performance. Discussion ensued regarding the length of the agreement; days off between Christmas Day and New Year's Day; impact on retirement benefits; and the use of PTO. **Motion carried.** The board congratulated Mr. Connally and the CEO on a job well done. The CCBHC demonstration expansion has received the full certification from the Michigan Department of Health and Human Services as a certified CCBHC. We are working with MDHHS and CMS to address their inquiry before receiving the final approval and we are confident that will be moving forward. We are still providing services at 707 which are the direct clinical services and are expecting to open our clinic at 6 Mile and Evergreen within the coming month or so. Mr. White thanked Dr. Fahim; Ms. Moody; Ms. Reynolds; and Ms. Patterson for their tireless efforts and noted that this is part of the Board's Strategic Plan and aligns perfectly with the pillar on accessibility for our community. It was noted that he hears constantly from the community about the work of the Crisis Center, the CIT; and the Mobile Crisis Units which are impactful and saving lives in our community.

It was reported that the Integrated Health Pilot update collaboration with the Medicaid health plans is holding monthly care coordination meetings to address the care gaps. The goal of care coordination is to close the gaps in care within 90 days. For FY2025 93 members were serviced in care coordination. We are continuously working with our health plan partners finding ways to further integrate using data integration.

The Adult Crisis Stabilization Unit serves individuals 18 years or older, regardless of their insurance status, who are seeking mental health or substance use disorder services; individuals can receive mental health services on a voluntary or involuntary basis. There were 181 presentations leading to 116 admissions for the month of December which completely impacted Detroit and Wayne County. Kudos were given to Ms. Wolfe, VP and Dr. Mammo, Medical Director, on their work with Crisis Care Services. The Child and Family Crisis Unit serves individuals 5 to 17 years old regardless of their insurance status as well who are seeking mental health or substance use disorder services. The occupancy for the CFCU is 14 individuals at one time and the length of stay for CFCU is 72 hours; for the month of December there were 37 presentations leading to 28 admissions. The BEST Unit is quite unique, the CEO noted that wanted to learn more about it to determine what we can do to further expand it. It is a post crisis transitional unit run by peer support specialists and focuses on continued support and services and a post crisis innovation model. The average length of stay is three days and there were 10 admissions for the month of December. The CEO also noted that we are going on a slight deferment at the Crisis Center; a problem was identified with the bathroom tiles. The first floor work will start on January 17th and could take up to three days and patients will be deferred to

other facilities. The good news is that we will continue to triage at the location and determine what services are needed and make determinations; the worst case scenario is the adult side will be closed for three days. The youth side could be closed for three days but could open in two days.

We are continuing to work with Trillium to establish a contract to bring 52 beds to the city of Detroit; the intent of the proposed partnership is to engage in best practice models that includes active engagement for our providers to assist members through effective discharge, planning, connecting them to services, post discharge, and resources and keeping them out of the revolving door of the system. Discussion ensued regarding the cost of the work that is being done at Milwaukee being paid by the vendor; CCBHC providers; contracts and Designated Collaborating Organization contract agreements with some of our existing contractor providers to deliver services for CCBHC that we are not yet able to provide; and the DCO's being part of the normal contracted providers that were approved in the overall provider network. Ms. Turner, VP Legal Affairs noted for the record that the DCO is not a subcontract or an amendment of a contract, but the DCO agreements are with providers that are already in the network and typically there would be a new board action before you in the event we would be contracting with someone to provide different services and there is an amount above \$50,000. These particular agreements are not as if the providers are being guaranteed a certain dollar amount of service but would work just like our outpatient agreements or residential agreements as services are provided they will bill for those particular services and all those providers are already in the network to provide services in the DWIHN network. Further discussion ensued regarding the contracts. The Board requested that the Program Compliance Committee receive a report on these sites because there appeared to be no one on the East Side that is servicing anybody and he, Mr. Parker would like to see a map of where these sites are to make sure that we are servicing all the populations in Wayne County. Discussion ensued regarding the BEST Program. Ms. Wolf, VP of Crisis Services gave an overview of the program and its services, which is building empowered and supportive transitions and has been operational since the 707 Crisis Care Center opened. It is a six bed transitional unit so the folks that are at our adult crisis stabilization unit if they need more time, can move over to our BEST Unit which is a 100% peer support run with wraparound services to assist folks with being more successful with their discharge.

Mr. Phillips noted that one of the things that he had challenged Mr. Singla to do was to look at expanding IT solutions and look at a needs assessment based on demographics of census data information that we have and make decisions to expand so that we continuously touch the entire county and city. Mr. Singla reported that there have been some exciting solutions brought forward and a presentation will be made to the Board. Discussion ensued regarding not having any areas that are not serviced as we continue to expand, bus transportation opportunities for people to reach us, and contracts with Uber and Lyft. Mr. White noted for the record that it was also reported that there was some good work that was taking place with our CIT Unit and mobile crisis unit that is partnering with law enforcement around the county and have even done some work outside of the county to establish those best practices which is under the direction of Ms. Andrea Smith. There was no further discussion. The Chair thanked both Mr. White and Mr. Singla for the report. The President and CEO Monthly Report was received and filed.

REVIEW OF ACTION ITEMS

1. Provide a copy of the RFP for Board action #21-28 (Revision 3) for Janitorial Services.
2. Share with the Finance Committee any updates on the Earned Sick Time Act.
3. Provide a map of the CCBHC locations.

GOOD AND WELFARE/PUBLIC COMMENT

The Chair Dr. Tauzeg called for Good and Welfare/Public Comment. The Good and Welfare and Public Comment State was read. There were two written summaries received from Qualtrics; Ms. K. DeBose and Ms. V. Glover both from New Dawn AFC Home that introduced New Dawn AFC Home to the Board and highlighted the exceptional services that they provide that focused on fostering growth, respect and commitment to adults with mental or physical challenges.

Mr. J. Farley, President of Friends of Fathers addressed the Board in person and provided information from MDHHS that updated the forgiveness of state owed pregnancy and birth expenses. He also noted that his company educates, advocates and provides resource services for fathers in the Michigan area in reference to child support.

ADJOURNMENT

There being no further business, Dr. Tauzeg, Chair called for a motion to adjourn. **It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche to adjourn. The motion carried unanimously.** The meeting was adjourned at 2:14 p.m.

Submitted by:
Lillian M. Blackshire
Board Liaison

FINANCE COMMITTEE

MINUTES

JANUARY 13, 2024

2:00 P.M.

8726 WOODWARD AVE.
DETROIT, MI 48202
(HYBRID/ZOOM)

MEETING CALLED BY

Ms. Dora Brown, Chair called the meeting to order at 1:03 p.m.

TYPE OF MEETING

Finance Committee Meeting

FACILITATOR

Ms. Dora Brown, Chair

NOTE TAKER

Ms. Lillian Blackshire, Board Liaison

Finance Committee Members Present:

Ms. Dora Brown, Chair
Mr. Kevin McNamara, Vice Chair
Ms. Eva Garza Dewaelsche
Ms. Kenya Ruth
Mr. Angelo Glenn
Ms. Karima Bentounsi - Virtually

Committee Members Excused: None

Board Members Present:

Dr. Cynthia Tauog

Board Members Attending Virtually: None

ATTENDEES

SUD Oversight Policy Board Members Attending Virtually: None

Board Members Excused: None

Staff: Mr. James E. White, CEO; Mr. Manny Singla, Executive VP of Operations; Ms. Stacie Durant, VP of Finance; Ms. Brooke Blackwell, VP of Governmental Affairs and Chief of Staff; Ms. Yolanda Turner, VP of Legal Affairs; Ms. Monifa Gray, Associate VP of Legal Affairs; Ms. Sheree Jackson, VP of Corporate Compliance; Mr. Jody Connally, VP of Human Resources; Mr. Mike Maskey, VP of Facilities; and Ms. Ebony Reynolds, VP of Direct Services

Staff Attending Virtually: Ms. Dhannetta Brown, Associate VP of Finance; Mr. Jeff White, Associate Vice President of Operations

Guests: None

AGENDA TOPICS

I. Roll Call Ms. Lillian Blackshire, Board Liaison

II. Roll Call

Roll Call was taken by Ms. Blackshire, Board Liaison and a quorum was present.

III. Committee Member Remarks - None

IV. Approval of Agenda

The Chair, Ms. Brown called for a motion on the agenda. **Motion:** It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche approval of the agenda. There were no changes or modifications requested to the agenda. **Motion carried.** The Chair noted that Mr. Glenn had joined the meeting.

V. Follow-up Items

The Chair called for any follow-up items. There was one follow-up item for DBE/WBE Programs use in Procurement Policy. S. Durant, VP of Finance stated the request was from the Policy/Bylaw Committee and was requested by Mr. Parker at the meeting held on November 20, 2024. There were two documents to review; one was the legal opinion that was requested from outside counsel and the second document is from the Procurement department. Discussion ensued regarding the process and documents. It was requested by Mr. McNamara to receive a recommendation and opinion from outside counsel on how we can improve our purchasing process to include people in the community who are women based and minority based businesses. (Action)

VI. Approval of the Meeting Minutes

The Chair, Ms. Brown called for approval of the minutes from the meeting on Wednesday, November 6, 2024. **Motion:** It was moved by Ms. Ruth and supported by Ms. Garza Dewaelsche approval of the Finance Committee minutes from the meeting on Wednesday, November 6, 2024. There were no corrections to the minutes. **Motion carried.** Minutes accepted as presented.

VII. Presentation of the Monthly Finance Report

S. Durant, VP of Finance presented the Monthly Finance report. A written report for the two months ended November 30, 2024, was provided for the record. It was reported that the Auditors, Plante Moran started field work today and they will be working on the audit for the next six to eight months. The balance sheet, income statement and cash flows are attached to the report. The balances could change as a result of the audit since it has not been completed. The DWIHN Finance accomplishments and noteworthy items to report were:

Due from other governments – comprise various local, state and federal amounts due to DWIHN. Approximately \$2.7 million in SUD and MH block grant due from MDHHS. Approximately \$9.5 million for October and November 2024 pass- through HRA revenue.

Accounts Receivable – Approximately \$3.4 million relate to 3rd and 4th quarter 2024 Wayne County PA2. In addition, approximately \$3 million due from FI cost settlement for FY24 Self-determination providers.

Prepayments and deposits – Accounts comprises of several advances made in prior year to primarily children providers to assist with temporary cash flow needs – The Children Center (\$2.5million) and Starfish (\$.8 million).

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through November 30, 2024 was approximately \$151.3 million however actual payments were approximately \$90.3 million. The difference represents claims incurred but not reported and paid of \$61.0 million.

The Chair, Ms. Brown, noted that the Finance Monthly Report was received and filed.

IX. Unfinished Business – Staff Recommendations:

a. Board Action #21-28 (Revision 3) – Janitorial Services to Enhance Potential (STEP).

Mike Maskey, VP of Facilities Department reporting. Detroit Wayne Integrated Health Network is requesting approval to extend and increase the contract amount for janitorial services at our Woodward facility with Services to Enhance Potential (STEP). Facilities is in the process of issuing an RFP for janitorial services and would like to continue to utilize STEP during this process. Facilities is requesting an increase in contract amount of \$32,500 bringing the contract total not to exceed \$330,215.00 with a term ending April 30, 2025. The Chair called for a motion. **Motion:** It was moved by Ms. Ruth and supported by Mr. McNamara approval of BA #21-28(Revision 3) to Full Board. Discussion ensued. **Motion carried.**

b. Board Action #25-25 (Revision 1) – FY 2025 DWIHN Operating Budget.

Ms. S. Durant VP of Finance Department reporting. Detroit Wayne Integrated Health Network is requesting to amend the FY 2025 Operating Budget as follows: Certify the following grant revenues and authorize expenditures of a like amount (\$2,386,966): Additional Block Grant revenues for Veteran Navigator Program (\$35,207), Infant & Early Child Mental Health (\$108,827), Mental Health COVID funding (\$174,620), SUD Recovery Incentives Infrastructure (\$442,488), and SUD prevention efforts (\$3,500). OBRA/ PASARR grant revenue totaling \$122,324 to fund one additional Registered Nurse position. \$1,000,000 Opioid Healing and Recovery Engagement and Infrastructure funding from MDHHS. \$500,000 allocation from MDHHS for Crisis Stabilization Unit startup support. The board action also includes the use of \$463,400 of Medicaid/ Local Reserves to support the following budgetary needs: 1. Cyber privacy/ breach insurance (BA 25-45): \$168,400. 2. Rental space to house direct services and CCBHC operations (BAs 25-28 and 25-44): \$295,000. The revised FY 2025 Operating Budget totaling \$1,209,208,065 consists of the following revenues: \$911,276,166 - Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB, CCBHC Supplemental; \$145,823,434 - Healthy MI Plan; \$12,552,243 - MI Health Link; \$21,460,905 - State General Funds; \$23,533,633 - Wayne County Local Match Funds; \$4,723,521 - County PA2 Funds; \$34,516,030 - State Grants (MDHHS/ MDHHS SUD, OBRA); \$25,112,853 - Federal Grants (MDHHS/ MDHHS SUD, SAMHSA); \$1,608,743 - Local Grants; \$6,760,000 - Interest Income; \$40,000 - Miscellaneous Revenue; \$21,800,537 - Medicaid/ Local Reserves. The Chair called for a motion. **Motion:** It was moved by Mr. Glenn and supported by Ms. Ruth approval of BA#25-25 (Revision 1) FY 2025 DWIHN Operating Budget to Full Board. Discussion ensued regarding positions for the CCBHC operations and autism services. **Motion carried.**

X. New Business – Staff Recommendations:

a. Board Action #25 -50 – Gregory Terrell and Company.

S. Durant, VP of Finance Department reporting. DWIHN is requesting approval for a one year contract effective January 31, 2025 through January 31, 2026. This board action is a time extension only and does not require additional funds. The revised board action 21-52R approved in February 2023 was for an amount not to exceed \$100,000. To date, the provider has spent \$37,000 with \$63,000 remaining on the purchase order. Effective October 1, 2020, MDHHS discontinued the use of H0043 and mandated community living supports report under H2015. This mandate requires providers to bill using certain modifiers and associated rates based on the number of staff and consumers that reside in the home. In an effort to ensure residential providers are billing with the proper modifier/rate, DWIHN is required to perform payroll audits. In response to an Invitation For Bid (IFB), Gregory Terrell & Associates, a Detroit based accounting firm, was deemed the lowest bidder. The contract terms of the IFB ended on January 31, 2025 therefore this board action would constitute a new contract. The firm will assist with accumulating the staff hours and consumers in the home whereby DWIHN finance staff will evaluate whether the proper modifier/rate was used for reimbursement of services. The amount of the contract is estimated as the contract is based on hours billed; DWIHN has over 200 providers subject to audit. The Chair called for a motion. **Motion:** It was moved by Ms. Ruth and supported by

Ms. Garza Dewaelsche approval of BA #25-50 – Gregory Terrell and Company to Full Board. Discussion ensued regarding the services. **Motion carried.**

b. Board Action #25-52 – Snow Removal Services – DWIHN – Winter Services LLC. M. Maskey, VP of Facilities Department reporting. DWIHN is requesting approval to enter into contract with Winter Services, LLC to provide snow removal and deicing services for our DWIHN facilities. An IFB was issued for a three-year contract with 2 one-year options to extend. Procurement received five (5) proposals in total and recommended award to Winter Services in an amount not to exceed \$97,230.00 for three-year period ending May 31, 2027. The Chair called for a motion. **Motion:** It was moved by Ms. Ruth and supported by Mr. Glenn approval of BA #25-52 – Snow Removal Services -winter Services to Full Board. Discussion ensued regarding the services and billing. **Motion carried.**

XI. Good and Welfare/Public Comment – The Chair read the Good and Welfare/Public Comment statement. There were no members of the public requesting to address the committee.

XII. Adjournment – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. **Motion:** It was moved by Mr. McNamara and supported by Mr. Glenn to adjourn the meeting. **Motion carried.** The meeting was adjourned at 2:21 p.m.

FOLLOW-UP ITEMS

1. Additional information requested on the Procurement Process.
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PROGRAM COMPLIANCE COMMITTEE

MINUTES

JANUARY 8, 2025

1:00 P.M.

IN-PERSON MEETING

MEETING CALLED BY	I. Commissioner Jonathan Kinloch, Program Compliance Chair at 1:17 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Commissioner Jonathan Kinloch, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	<p>Committee Members: Angela Bullock; Commissioner Kinloch; Bernard Parker; William Phillips; and Dr. Cynthia Tauieg</p> <p>Committee Member(s) Excused: Dr. Lynne Carter</p> <p>Staff: Brooke Blackwell; Judy Davis; Stacie Durant (Virtual); Dr. Shama Faheem; Monifa Gray; Marlana Hampton; Sheree Jackson; Marianne Lyons; Melissa Moody; Sherri Ruza (Virtual); Manny Singla (Virtual); Andrea Smith; Yolanda Turner; Ortheia Ward; Daniel West; James White; Rai Williams; and Grace Wolf</p>

AGENDA TOPICS

II. Moment of Silence

DISCUSSION	Commissioner Kinloch called for a moment of silence.
CONCLUSIONS	A moment of silence was taken.

III. Roll Call

DISCUSSION	Commissioner Kinloch called for a roll call.
CONCLUSIONS	Roll call was taken by Lillian Blackshire, Board Liaison and there was a quorum.

IV. Approval of the Agenda

DISCUSSION/ CONCLUSIONS	Commissioner Kinloch called for a motion to approve the agenda. The committee was informed that BA #25-49 (MDHHS/FEMA Wayne County Strong) would be moved to the Executive Committee meeting for review and approval. Motion: It was moved by Mr. Parker and supported by Mr. Phillips to approve the agenda as amended. Commissioner Kinloch asked if there were any more changes/modifications to the agenda. There were no further changes/modifications to the agenda. Motion carried as amended.
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V. Follow-Up Items from Previous Meetings

DISCUSSION/ CONCLUSIONS	<i>There were no Follow-Up Items from Previous Meeting to review this month.</i>
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VI. Approval of the Minutes

DISCUSSION/ CONCLUSIONS	Commissioner Kinloch called for a motion to approve November 13, 2024, meeting minutes. Motion: It was moved by Mr. Parker and supported by Mr. Phillips to approve the November 13, 2024 meeting minutes. Commissioner Kinloch asked if there were any changes/modifications to the November 13, 2024, meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.
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VII. Reports

DISCUSSION/ CONCLUSIONS	<p>A. Chief Medical Officer – <i>The Chief Medical Officer’s report was deferred to the Program Compliance Committee meeting in February 2025.</i></p> <p>B. Corporate Compliance – Sheree Jackson, VP of Compliance submitted and gave an update on the Corporate Compliance report. The following items were reported:</p> <ol style="list-style-type: none"> 1. Activity 1: Compliance Investigation – FY 24 (Q4), the Compliance Department managed an average of 33 investigations, 11 of which originated from the OIG’s office. Three full-time staff members manually completed 78 Medicaid Claims Verification audits, resulting in recoupments totaling \$2,377.61 associated with 21 beneficiaries. There were eight (8) additional referrals received during the fourth quarter are pending assignment. A manual repayment plan has been established through the DWIHN’s Finance department for Novus Living I, a former provider site no longer contracted with DWIHN. There is an anticipated overpayment of \$44,073.67 resulting from using the wrong billing code. 2. Activity 2: Contract Action – A contract termination notification was issued to Pontiac General Hospital, effective December 11, 2024 due to actions taken by CMS that impact the services provided to DWIHN members. Pursuant to the termination and with the assistance of the DWIHN’s Utilization Management (UM) team, all affected members have been appropriately removed from the facility prior to the termination date. 3. Activity 3: Compliance Risk – The Compliance department has been alerted to an increase in compliance risks related to conflicts of interest, fraudulent billing and insufficient documentation for claims submitted from Q1 through Q4. Investigations are being carried out in coordination with the Office of the Inspector General. A tiered corrective action plan has been implemented for repeat offenders in accordance with the organization’s compliance framework. Additional information will be provided to the committee on the layers of tiers of compliance risks and where the individuals were placed from Pontiac General Hospital. 4. Activity 4: Unauthorized Access – A follow-up was provided on the August 20, 2024 Unauthorized Access from a staff member’s DWIHN-issued laptop while performing personal tasks that occurred in which a Threat Actor gained remote access. Investigations revealed that the Threat Actor accessed files that were open at the time of the incident. All members and reporting agencies have been notified and credit monitoring has been
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	<p>offered to the members. As of December 30, 2024, nine (9) members have registered for credit monitoring.</p> <p>The Chair opened the floor for discussion. Discussion ensued. The committee requesting the following: (Action)</p> <ol style="list-style-type: none"> 1. Provide a list (breakdown) of where individuals were placed from Pontiac General Hospital. 2. Provide information on the tiered corrective action plan being implemented for repeat offenders in accordance with the organization’s compliance framework. 3. Provide a FOIA report to the Executive Committee monthly. <p>The Chair noted that the Corporate Compliance’s report has been received and placed on file.</p>
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VIII. Quarterly Reports

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. Adult Initiatives – Marianne Lyons, Director of Adult Initiatives submitted and gave highlights of the Adult Initiatives’ quarterly report. It was reported that:</p> <ol style="list-style-type: none"> 1. Activity 1: Clubhouse – Adult Initiatives will be taking over the task of completing and maintaining the grant funds for clubhouse, effective January 2025. It was determined that the Clubhouse will begin to receive more grant funding in the new year, allowing them to provide more services to members on spenddown, while alleviating that difficulty resulting from losing the general fund money. Clubhouse has been removed from the general fund with DWIHN. Adult Initiatives has encouraged Clubhouse’s to reach out and engage with ACT and AOT platforms to have these members explore Clubhouse if deemed appropriate. 2. Activity 2: Med Drop – FY 25 (Q1), the Med Drop program had 64 members participating. This quarter, 13 new referrals were received and three (3) new cases enrolled in the Med Drop program. Of the 64 members participating, only three (3) of those members were hospitalized during this quarter. The Med Drop video, a key tool for promoting the program was filmed and will be released on DWIHN’s social media sites in January 2025. Adult Initiatives will continue to meet with the Med Drop coordinator and program providers to discuss ways to increase admission and barriers to the referral process and use various outreach platforms to promote the program to members and providers. 3. Activity 3: Evidenced Based Supported Employment (EBSE)/Individual Placement and Support (IPS) – Data reflecting recidivistic members and IPS engagement continues to be gathered; CRSPs have been continuously encouraged to meet internally with various outpatient programs to encourage IPS among all members, especially recidivistic members. Adult Initiatives met with representatives from MiSide and Hegira (separately) to discuss the area of need as it pertains to a fidelity review. These agencies have not performed one in years and must be able to meet the minimum fidelity score of 74. Supervision from both agencies ensured this department that they will be able to accommodate this requirement. Adult Initiatives will continue to assist providers with identifying recidivistic and at-risk populations (members on treatment orders) with the goal of introducing and involving those members in IPS services, as another means of engaging and reducing hospitalizations. <p>Commissioner Kinloch opened the floor for discussion. Discussion ensued. The committee requested that the department publish information on what</p>
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works with being best in class in Med Drop program after six months and share Med Drop video with the Committee. **(Action)**

B. **Crisis Care Services** – Grace Wolf, VP of Crisis Care Services submitted and gave highlights of the Crisis Care Services’ quarterly report. It was reported:

1. **Activity 1: Adult Crisis Stabilization Data** – During the month of November, there was a total of 155 presentation at the Adult Crisis Stabilization Unit with 128 admissions (African Americans made up 78% of the presentations); Individuals between the ages of 25-34 made up 35% of the presentations and males made up 55%.
2. **Activity 2: Building Empowered and Supportive Transitions Unit (BEST) Data** – The BEST Unit is a post-crisis transitional unit. The unit is run by our Peer Support Specialists and focuses on continued support and services post crisis intervention. On an average, we serve 15 individuals a month, they stay just over three (3) days, and the majority of the individuals are seeking CRSP’s appointments post-discharge. There has been a large uptick on our adult unit in the past two months of individuals needing AFC or group home care and those referrals take a lot longer than we have on the three days available to us on the adult unit. The unit has been able to assist in getting some of those placements.
3. **Activity 3: Child and Family Crisis Unit (CFCU)**- The unit sees 29 presentations a month; 19 admissions a month and 66% of the individuals on average that are presented get admitted to our unit. The demographics for children, the majority seen are African American males between the ages of 10 and 14 years old. Last quarter, more children from ages 15 to 17 years old were being seen. There is a small number of children that go to inpatient from our children’s unit. Only 10%, have been referred to inpatient for children services. For the months of October and November, there were no physical management, no emergency medications and no mechanical restraints, serving almost 300 presentations at the facility.
4. **Mobile Crisis Data (September 2024 – November 2024)** – On the average, the unit received 218 dispatches a month. The average response time is 37 minutes; average time on scene is 64 minutes; 36% of the individuals seen in the community require mobile crisis transport and 7% require law enforcement assistance which are individuals that cannot remain in the community voluntarily and need assistance with transportation. On the average, 49% can remain safely in the community; 34% end up going to a crisis stabilization unit and 17% go to an emergency department.

Commissioner Kinloch opened the floor for discussion. Discussion ensued. The committee requested an update on the Procurement of panic buttons. **(Action)**

C. **PIHP Crisis Services** – Daniel West, Director of PIHP Crisis Services submitted and gave highlights of the PIHP Crisis Services’ quarterly report. It was reported that:

1. **Activity 1: Centralize Dispatch of Pre-Admission Reviews (PARs)** – Since November 1, 2024, the PAR Dispatch Department has fielded 2,536 calls; 1,343 of those calls resulted in a request for services (1,088 adult and 255 child requests); onboarded and trained nine (9) full and six (six) part-time staff to facilitate dispatch of PARs for adults and children; received positive feedback from the community thus far and has achieved an 88% service level. The team meets regularly on the ACT forum

conducted by Adult Initiatives to reiterate the importance of ACT teams completing the PAR.

2. **Activity 2: Inpatient Hospital Discharge Planning** – For FY 25 (Q1), there was 132 appointments scheduled, and 109 appointments kept (82% increase) with the individuals that we see that made their aftercare appointments. The team has shown an improvement in members receiving services within 30 days of discharge from selected hospitals in comparison to all other hospitals.
4. **Activity 3: Reduce Inpatient Hospitalizations** – Inpatient admissions for adults and children have decreased from quarter to quarter. The team has worked closely with Adult Initiatives and coordinating PAR assessments with ACT teams from the PAR Dispatch Department; worked with PCE to provide mandatory documentation of CRSP contact within the PAR. The department has worked with PCE to add CSU as a tracked level of care within the RFS (dropdown selection).
5. **Quarterly Update** – Recidivism for adults and children has decreased for FY 25 (Q1). The adult recidivism percentage is currently at 15.78% and the children is at 9.73%.

Commissioner Kinloch opened the floor for discussion. Discussion ensued.

D. **Utilization Management** – Marlena Hampton, Director of Utilization Management submitted and gave highlights of Utilization Management’s quarterly report. It was reported:

1. **Activity 1: General Fund Exception Updates** – The General Fund Benefit Grid underwent several revisions during the previous quarter to address the need to reduce the number of requests and utilize General Fund only for identified essential services which was in response to the termination of the Pandemic Emergency Order which resulted in members losing Medicaid eligibility or failing to take the steps necessary to keep their benefits active. There was an approximate 38% decrease in General Fund Exception requests since implementation of the revised benefit grid on 11/1/24. In addition to review and revision of the General Fund Benefit Plan, staff continue to focus on overall process improvement. This includes collaboration with DWIHN’s I.T., Health Homes and Fiscal Informatics teams to review efficiencies and reduce/eliminate any authorization requests that are not traditional General Fund from the queue.
2. **Activity 2: Outpatient Authorization Updates** – The department is frequently involved with audits and system updates to ensure the department meets various MDHHS regulatory requirements. A dedicated SUD Authorizations inbox, which will be separate from PIHP Authorizations (Outpatient) and streamline communication between service areas was created; and an UM Administrator has resumed progress on SUGs for SUD, following review by the Director of SUD services and Associate VP of Clinical Operations. The department worked with I.T. to make system updates that send reminders to provider staff that an authorization was returned to them requiring further documentation/justification; continue monitoring the progress of our return to requester queue and I.T. reminders; improve timeliness and documentation of adverse benefit determination processing, in alignment with MDHHS and updated Integrated Care Organization (ICO) guidelines.
3. **Activity 3: UM Program Description and Evaluation** – The Program Description and Program Evaluation, along with its’ corresponding policies and procedures are currently being updated. The UM Director is meeting with staff and various departments to ensure that updated documents align

	<p>with feedback from HSAG review, new guidelines from NCQA, MI Health Link ICO requirements and PIHP/CMHSP contractual requirements. The UM Director with support of the VP of Clinical Operations, Strategic Operations' Director and available consultants will review the UM Work Plan which will promote timeliness and influence the next steps in presenting Utilization Management in its best light.</p> <p>Commissioner Kinloch opened the floor for discussion. Discussion ensued. The Chair noted that the Adult Initiatives, Crisis Care Services, PIHP Crisis Services and the Utilization Management's quarterly reports have been received and placed on file.</p>
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IX. Strategic Plan Pillar

DISCUSSION/ CONCLUSIONS	<i>There was no Strategic Plan Pillar to review this month.</i>
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X. Quality Review(s)

DISCUSSION/ CONCLUSIONS	<i>There were no Quality Review(s) to report this month.</i>
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XI. VP of Clinical Operations' Executive Summary

DISCUSSION/ CONCLUSIONS	<p>Melissa Moody, VP of Clinical Operations submitted and gave an executive summary of the VP of Clinical Operations' report. It was reported:</p> <ol style="list-style-type: none"> 1. Health Home Initiatives – The Health Home team will be presenting at the CMHAM Conference in Kalamazoo, Michigan on February 4, 2025. The CCBHC currently has 15,637 members enrolled as of December 19, 2024 (over 26% increase since November 2024). DWIHN continues to work with CCBHC providers on implementation of CCBHC Handbook changes that impact policies and procedures. Individual meetings were held with providers to gain feedback on DWIHN's State CCBHC Implementation Plan. The Plan was submitted to MDHHS for review and approval in December 2024. DWIHN Care Clinic was given CCBHC full-certification status and will be joining the CCBHC State Demonstration as our region's 8th CCBHC site on January 1, 2025. The Behavioral Health Home (BHH) currently has 828 members enrolled as of December 19, 2024. The Substance Use Disorder Health (SUDHH) currently has 726 members enrolled as of December 19, 2024 (over 9% increase since November 2024). 2. Children's Initiatives – The department hosted the Annual Report to the Community "Shine Brighter Together" as a deliverable for the System of Care Block Grant. This showcased highlights and accomplishments for meeting the needs of children, youth and families in Wayne County. Attendees also received a copy of the System of Care Report to the Community which provides a summary of utilization and outcome data for FY 24. 3. Autism Services – There was a total of 2,757 members assigned to DWIHN's ABA provider network for December 2024. This was a moderate increase of 54 members added from November to December. In addition, among the three (3) Individual Diagnostic Evaluation Providers, there were a total of 155 referrals, 132 kept appointments and 19 no-show appointments (it is noted the data for this month is preliminary and subject to change during next month's report). As of December 2024, there are 12 ABA Providers who passed the RFQ process.
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	<p>There are currently 22 ABA Providers contracted with DWIHN (Note: Successfully passing the RFQ does not automatically guarantee a contract).</p> <p>4. Substance Use Disorder Services – DWIHN will be involved with a Recovery Incentive (RI) Pilot Initiative which focuses on stimulant use and the use of contingency management (evidence-based treatment for stimulant use disorder). We have 14 providers that are ready to kick-off the initiative this month. This initiative aims to explore innovative solutions and gather valuable insights over a comprehensive two-year period. Participants will engage in a series of activities and assessments designed to track progress and measure outcomes.</p> <p>5. Clinical Initiatives - DWIHN is currently working with the Wayne County Health Department and the City of Detroit on a potential partnership regarding rapid access to low barrier treatment; specifically, Medications for Opioid Use Disorder (MOUD) and services for justice impacted youth, adults and families. This is currently in the data collection and planning phase. DWIHN is working with Wayne RESA on a potential plan to expand school-based prevention and treatment services to Pre-K children in stand-alone Pre-K facilities. A meeting was held to discuss the need to provide behavioral health consultation support for children Pre-K and Kindergarten classrooms. DWIHN provided an overview of the School Success Initiative Program and explained the Infant and Early Childhood Consultation Grant as well as an additional resource. The State of Michigan was awarded through CMS an Innovation and Behavioral Health Model, which the goal is to improve quality of care and behavioral health and physical health outcomes for adults enrolled in both Medicaid and Medicare with moderate to severe mental health conditions. The Care team is there to address patient care and health related social needs, including housing, food and transportation. We do not know if our region will be a part of that initiative, yet the State will need to decide what PIHP regions will be involved.</p> <p>Commissioner Kinloch opened the floor for discussion. Discussion ensued. The committee requested a copy of the System of Care Report. (Action) The Chair noted that the VP of Clinical Operations' Executive Summary has been noted and placed on file.</p>
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XII. Unfinished Business

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. BA #25-01 (Revised 1) – Multicultural Integration – Staff requesting board approval to amend the original board action for Comprehensive Services for Behavioral Health FY 2025 with the Department of Health and Human Services (MDHHS). The DWIHN Veteran Navigator received additional funding for FY 25 in the amount of \$35,207.00 which brings the total amount for the Veteran Navigator, Peer Navigator and the Navigator Assistant to \$195,207.00. The additional funding does not include the other participants who are apart of the Multi-Cultural Integration Grant (American Indian Health and Family Services (AIHFS), Community Health and Social Services (CHASS) Center, Southwest Counseling Solutions (Hispanic and Veterans) and Association of Chinese Americans (ACA). Revenue for these services is supported by E-Grants and Management Systems (EGrAMS) categorical funds for Ethnic Services. The amount proposed term of this Memorandum of Understanding is October 1, 2025 through September 30, 2025 and will not exceed \$765,837.00. A budget adjustment to certify the additional funds will be forthcoming. The Chair called for a motion on BA #25-01 (Revised 1). Motion: It was moved by Dr. Taueg and supported by Mr. Phillips to move BA #25-01 (Revised 1) to Full Board for</p>
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	<p>approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. Motion carried.</p> <p>B. BA #25-02 (Revised 1) - Substance Use Disorder (SUD) Treatment Provider Network FY 25 – Staff requesting board approval to provide additional SUD treatment services in an amount not to exceed \$1,406,939.00 (Grant Funds \$1,056,939.00 and PA2 Funds \$350,000.00). With the additional allocations noted above, SUD treatment services are funded with Grant dollars (\$4,178,721.00) and PA2 Funds (\$1,771,100.00) totaling \$5,949,821.00. The Chair called for a motion on BA #25-02 (Revised 1). Motion: It was moved by Dr. Taueg and supported by Mrs. Bullock to move BA #25-02 (Revised 1) to Full Board for approval. Commissioner Kinloch opened the floor for discussion. Discussion ensued. Motion carried with Mr. Phillips abstaining.</p> <p>C. BA #25-03 (Revised) – Substance Use Disorder (SUD) Prevention Provider Network FY 25 – Staff requesting board approval to provide additional prevention services funded through two key sources (PA2 Funds \$320,000.00 and Healing and Recovery Opioid Settlement Funds received from MDHHS for \$497,826.00). With the addition of the aforementioned amounts, total SUD prevention services are funded with grant funds totaling \$3,940,434.00 and PA2 Funds totaling \$3,025,075.00. The revised not to exceed amounts totals \$6,467,683.00. The proposed funding increase will allow for the continuation and expansion of vital prevention services that have shown effectiveness in addressing substance use challenges in our communities. The Chair called for a motion on BA #25-03 (Revised). Motion: It was moved by Mrs. Bullock and supported by Mr. Parker to move BA #25-03 (Revised) to Full Board for approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. Motion carried with Mr. Phillips abstaining.</p>
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XIII. New Business: Staff Recommendation(s)

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. BA #25-48 – ARCs Renewal – Staff requesting board approval of three (3) one-year contract renewals with ARC Detroit (not to exceed \$117,369.00), ARC of Northwest Wayne County (not to exceed \$296,101.00) and ARC of Western Wayne County (not to exceed \$185,927.00). Each contract period will begin October 1, 2024 through September 30, 2025. The proposed contracts will provide advocacy, supportive services and educational information by addressing issues facing persons with intellectual/developmental disabilities. The Chair called for a motion on BA #25-48. Motion: It was moved by Mr. Parker and supported by Mrs. Bullock to move BA #25-48 to Full Board for approval. Commissioner Kinloch opened the floor for discussion. Discussion ensued. Motion carried.</p> <p>B. BA #25-51 – DWIHN Provider Network System – Staff requesting board approval to add five (5) additional residential providers (CNS Hearts of Love Home Care, LLC, New Dawn AFC Home, LLC, No Places Like Home AFC, Pauline’s Place LLC and Special Care Services 2 Inc.) to the DWIHN provider network without change to the total provider network amount. The Chair called for a motion on BA #25-51. Motion: It was moved by Mr. Phillips and supported by Mrs. Bullock to move BA #25-51 to Full Board for approval.</p>
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	Commissioner Kinloch opened the floor for discussion. There was no discussion. Motion carried.
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XIV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	<i>There was no Good and Welfare/Public Comment this month.</i>
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ACTION ITEMS	Responsible Person	Due Date
1. Corporate Compliance - A. Provide a list (breakdown) of where individuals were placed from Pontiac General Hospital; Provide information on the tiered corrective action plan being implemented for repeat offenders in accordance with the organization's compliance framework. B. Provide a FOIA report to the Executive Committee monthly.	Sheree Jackson	February 12, 2025 COMPLETED
2. Crisis Care Services - Provide update on the Procurement of panic buttons	Grace Wolf	February 12, 2025
3. Adult Initiatives - Public information on what works with being best in class in Med Drop program after six months.	Marianne Lyons	TBA COMPLETED
4. Share Med Drop video with the Committee.		
5. VP of Clinical Operations Executive Summary - Provide System of Care report to the Committee	Melissa Moody	COMPLETED

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Dr. Tauveg and supported by Mrs. Bullock to adjourn the meeting. **Motion carried.**

ADJOURNED: 2:41 p.m.

NEXT MEETING: Wednesday, February 12, 2025 at 1:00 p.m.

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-64R3 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: COVID-19 MH BG Supplemental

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 2/1/2025 to 3/14/2025

Amount of Contract: \$ 174,620.00 Previous Fiscal Year: \$ 483,340.00

Program Type: Continuation

Projected Number Served- Year 1: 500 Persons Served (previous fiscal year): 2000

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The board action is to request approval to utilize carryover funding from FY24, awarded in support of BA 21-64R3 - Detroit Wayne Integrated Health Network's (DWIHN's) COVID-19 Mental Health Block Grant Supplemental Funding for Mental Health Connections, Training, and Outreach.

DWIHN will implement projects focusing on connecting individuals to care through services and education. Strong emphasis will be placed on the use of systems navigator and data. DWIHN will enter into several comp source agreements with vendors to execute the approved projects. This is for operation of a warm line, mental health awareness training, to address any mental health issues for individuals, and events.

Healthy Choices Community Center Counseling LLC/Kimberly Walton - Reach Us Detroit Agents/Training - \$48,000

\$42,438k Downriver Community Conference - Training/Events

Other (event space other support services): \$30,000

Indirect Cost \$22,776

Employee Travel and Training \$11,406

Board Action #: 21-64R3

Educational Supplies \$20,000

The carryover not to exceed amount is \$174,620 with the time extended to March 14, 2025.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Block Grant

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Block Grant	\$ 174,620.00	\$ 174,620.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical):

ACCOUNT NUMBER: 64933.822608.07100

In Budget (Y/N)?

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Friday, February 7, 2025

Signed: Thursday, February 6, 2025

2/7/2025 10:49:07 AM

2/6/2025 10:24:41 AM

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: Lillian M. Buckshus
Board Liaison

Date: 2/19/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 22-58R3 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: William Scotsman Inc

Contract Title: Temporary Mobile Office Units

Address where services are provided: None

Presented to Executive Committee at its meeting on: 2/17/2025

Proposed Contract Term: 10/1/2024 to 3/31/2025

Amount of Contract: \$ 270,832.04 Previous Fiscal Year: \$ 234,808.72

Program Type: Modification

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 3/16/2022

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The Board previously approved mobile offices for DWIHN staff to have the ability to have access to our network and to provide such functions as mail services, printing, scanning and material/document storage while the Milwaukee building is under construction. The DWIHN Facilities Department is requesting additional funds to cover the remaining invoices (for rental services rendered prior to 7/6/2024) resulting from a clerical error in the total contract amount.

We are requesting an increase in the amount of \$36,023.32, for a term ending March 31, 2025 with a total amount not-to-exceed amount of \$270,832.04

Outstanding Quality Issues (Y/N)? If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 23/24	Annualized
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Board Action #: 22-58R3

MULTIPLE	\$ 270.832.04	\$ 270.832.04
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64922.941000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Wednesday, February 12, 2025

Signed: Wednesday, February 12, 2025

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: Lillian M. Buckshus
Board Liaison

Date: 2/19/2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 23-15R2 Revised: Y Requisition Number: 14,187

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: WIT, Inc

Contract Title: DWC Training Platform - Contract Extension2

Address where services are provided: None

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 1/1/2025 to 9/30/2025

Amount of Contract: \$ 1,926,915.47 Previous Fiscal Year: \$ 1,517,948.00

Program Type: Continuation

Projected Number Served- Year 1: 60,000 Persons Served (previous fiscal year): 60000

Date Contract First Initiated: 10/1/2018

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval to extend terms of service to 9/30/25 with additional funds of \$408,967.47. Approximately \$60,000 was included in the budget. A budget adjustment is forthcoming for the balance.

Comparable Source contract extension between the Detroit Wayne Integrated Health Network (DWIHN) and WIT, Inc for an **amount to not exceed \$1,926,915.47.**

WIT has provided the primary operations/services package for the operations of Detroit Wayne Connect (DWC)(formerly VCE). The system, referred to as "TAP" supports the entire training product for DWC. This includes:

- Support for all Computer-Based-Training for DWC Customers, including the entire DWIHN network of organizations and staff
- Support for all Event Planning needs for face-to-face training and other supporting communications and events
- The registration process for staff participating in training
- The tracking of all training for individuals and organizations in the DWIHN network
- The billing process for DWC customers
- The system used for management of DWC website

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): Y

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 1,926,915.47	\$ 1,926,915.47
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64934.827211.00000

In Budget (Y/N)? N

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Tuesday, January 28, 2025

Signed: Friday, January 24, 2025

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

- Tabled as follows:

Executive Director -initial here: _____

Signature: Lillian M. Buckner
Board Liaison

Date: 2/19/2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 23-57R4 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Bizanalytix Technologies LLC

Contract Title: Claims Audit and Utilization Review Systems (CAURS) and Information Technology Consulting

Address where services are provided: 6837 Dulles Dr. Powell, OH 43065

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 3/1/2023 to 2/28/2026

Amount of Contract: \$ 579,600.00 Previous Fiscal Year: \$ 327,600.00

Program Type: Continuation

Projected Number Served- Year 1: 3 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 3/1/2023

Provider Impaneled (Y/N)? N

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This revised board action is requesting to exercise the second of two, one-year renewal options, extending the contract for CAURS to February 28, 2026 for an additional \$84,000 (2nd of two, one-year renewal options).

The revision also includes renewing Development and Consulting services effective 3/1/25 - 2/28/26 in the amount of \$96,000 and \$72,000 for retroactive services from 6/1/24-2/28/25.

The revised not to exceed contract not to exceed amount totals \$579,600 through February 28, 2026.

The Claims Audit and Utilization Review System (CAURS) unlike claim processing subsystems that process one claim at a time, CAURS can be used to analyze post payment data for multiple claims at a time to identify suspicious provider billing patterns along with conducting audit both internally as well as externally working with providers. DWIHN is able to identify adjudication and billing errors, and overpayments.

The reports generated by the system will be used to assist in the detection of program fraud and abuse, monitor quality of services, and provide a function for the development of program policy.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Multiple	\$ 579,600.00	\$ 579,600.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 00000.137003.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Friday, February 7, 2025

Signed: Tuesday, February 4, 2025

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

- Tabled as follows:

Executive Director -initial here: _____

Signature: Lillian M. Buckner
Board Liaison

Date: 2/19/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 25-24R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Acorn Health

Contract Title: Autism Service Providers

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 10/1/2024 to 9/30/2025

Amount of Contract: \$ 92,649,972.00 Previous Fiscal Year: \$ 91,807,643.00

Program Type: Continuation

Projected Number Served- Year 1: 2,600 Persons Served (previous fiscal year): 2,473

Date Contract First Initiated: 10/14/2024

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Requesting revision to board action for DWIHN Board to approve 3 new ABA Providers to receive a (1) one year contract for FY25 (October 1, 2024 - September 30, 2025) to deliver Applied Behavior Analysis (ABA) and Autism Evaluations. **The total projected budget for autism services for FY25 remains unchanged and is not to exceed \$92,649,972.**

The 3 new ABA Providers are: Akoya Behavioral Health, Brightview Care, and 8th Palace (DBA KDcare Community ABA Services).

21 Current ABA Providers: Acorn Health of Michigan, LLC, Advanced ABA Care, Affable Home Healthcare (DBA Attendant Care Autism Services), Autism Spectrum Therapies of Michigan (DBA Total Spectrum), Behavior Frontiers, Centria Healthcare, Chitter Chatter P.C., Dearborn Speech and Sensory Center, Inc. (DBA Metro EHS), Emagine Health Services, LLC, Gateway Pediatric Therapy, HealthCall of Detroit, Illuminate ABA Services, LLC, IOA, LLC, Lumen Pediatric Therapy, LLC, Open Door Living Association Inc., Patterns Behavioral Services Michigan, Inc, Peak Autism Center, Positive Behavior Supports Corp., SEB Connections (DBA Merakey Inc.), Strident Healthcare, Zelexa, LLC

3 Current Independent Evaluator Providers: Social Care Administrator's, LLC (DBA McCrory Center), Sprout Evaluation Center, LLC, The Children's Center of Wayne County.

The amounts listed for each provider are estimated based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval.

Outstanding Quality Issues (Y/N)? Y If yes, please describe:

Source of Funds: Medicaid, General Fund

Fee for Service (Y/N): Y

Revenue	FY 24/25	Annualized
Medicaid	\$ 92,149,972.00	\$ 92,149,972.00
State General	\$ 500,000.00	\$ 500,000.00
Total Revenue	\$ 92,649,972.00	\$ 92,649,972.00

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64940.827010.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

James White

Signed: Tuesday, February 4, 2025

2/4/2025 10:35:52 AM

Stacie Durant, Vice President of Finance

Signature/Date:

Stacie Durant

Signed: Tuesday, February 4, 2025

2/4/2025 10:31:47 AM

Board Action #: 25-24R

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckshus

Board Liaison

Date: _____

2/19/2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 25-25R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 2/17/2025

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: FY 2025 Operating Budget

Address where services are provided: None

Presented to Finance Committee at its meeting on: 2/5/2025

Proposed Contract Term: 10/1/2024 to 9/30/2025

Amount of Contract: \$ 1,213,869,645.00 Previous Fiscal Year: \$ 1,150,651,761.00

Program Type: Continuation

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 10/1/2024

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

The proposed budget amendment serves to certify the following grant revenues and authorize expenditures of a like amount (\$7,308,898):

- Wayne County Strong grant totaling \$3,633,298 (funds allocated to providers on BA 25-49)
- \$3,675,600 additional allocation from MDHHS for Crisis Stabilization Unit startup support

The board action also includes the use of \$1,059,077 of Medicaid/ Local Reserves to support the following budgetary needs:

1. Salaries and fringes for new administrative positions totaling \$573,397:
 - Two (2) new IT positions totaling \$249,942
 - Three (3) new HR positions totaling \$242,591
 - One (1) new Compliance position totaling \$80,864
2. \$99,000 for CCBHC telehealth platform services contract with Mend VIP, Inc. (BA 25-54)
3. \$350,000 for 9-month extended contract with WIT, Inc. for Detroit Wayne Connect (BA 23-15R2)
4. \$36,680 for Gravity Works Design, LLC website redesign services (BA 25-46)

The revised FY 2025 Operating Budget totaling \$1,213,869,645 consists of the following revenues:

- \$911,276,166 - Medicaid, DHS Incentive, Medicaid-Autism, Children's/SED Waiver, HAB, CCBHC Supplemental;

Board Action #: 25-25R2

- \$145,823,434 - Healthy MI Plan;
- \$12,552,243 - MI Health Link;
- \$21,460,905 - State General Funds;
- \$23,533,633 - Wayne County Local Match Funds;
- \$4,723,521 - County PA2 Funds;
- \$38,197,515 - State Grants (MDHHS/ MDHHS SUD, OBRA);
- \$28,746,151 - Federal Grants (MDHHS/ MDHHS SUD, SAMHSA),
- \$1,608,743 - Local Grants;
- \$6,760,000 - Interest Income;
- \$40,000 - Miscellaneous Revenue;
- \$19,147,334 - Medicaid/ Local Reserves

Outstanding Quality Issues (Y/N)? _ If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 1,213,869,645.00	\$ 1,213,869,645.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Modify

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? N

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Tuesday, February 4, 2025

Signed: Wednesday, January 29, 2025
Board Action #: 25-25R2

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckner

Board Liaison

Date: _____

2/19/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 25-08 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: CCBH-25: ACT/ IDDT and Behavioral Health Workforce Stabilization Support

Address where services are provided: Provider Network

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 10/1/2024 to 9/30/2025

Amount of Contract: \$ 606,282.00 Previous Fiscal Year: \$ 606,282.00

Program Type: New

Projected Number Served- Year 1: 1,600 Persons Served (previous fiscal year): 1,600

Date Contract First Initiated: 10/1/2023

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval to receive and disburse MDHHS incentive grants directed towards attracting, recruiting and retaining ACT and dual ACT/IDDT team members, and rewarding those already performing this work and DWIHN staff that have remained with the organization during and beyond the COVID pandemic.

DWIHN will enter into several comparable source agreements with vendors to carryout the approved projects. Funds can be reallocated between providers based on utilization up to the amount not to exceed \$538,282 for the fiscal year ended September 30, 2025 related to the ACT/IDDT Providers \$538,282

The board action also include the MDHHS Behavioral Health Workforce Stabilization Support \$68,000. The total amount of the board action is \$606,282 for the fiscal year September 30, 2025.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Block Grant

Board Action #: 25-08

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Block Grant	\$ 606,282.00	\$ 606,282.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Monday, February 3, 2025

Signed: Monday, February 3, 2025

2/3/2025 5:38:42 PM

2/3/2025 3:07:17 PM

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

- Tabled as follows:

Executive Director -initial here: _____

Signature: *Lillian M. Buckner*
Board Liaison

Date: 2/19/2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 25-53 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Netlink Software Group America Inc

Contract Title: RFP 2025-002 - AI Models: Development and Implementation

Address where services are provided: None

Presented to Finance Committee at its meeting on: 2/5/2025

Proposed Contract Term: 3/1/2025 to 2/29/2028

Amount of Contract: \$ 1,497,464.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 3/1/2025

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval for the development and implementation of Artificial Intelligence (AI) model (web based software) to reduce hospital recidivism and the allows data access utilizing natural language that allows DWIHN to gather for example demographic, patient claims, and geographic information on the members serviced without extensive system programming.

In response to RFP 2025-002 issued in August 2024, Netlink Software Group America, Inc. was evaluated and determined to be the most responsive to the Request for Proposal. The contract is for three (3) years effective March 1, 2025 through February 29, 2028 with a 2 year renewal option for an amount not to exceed \$1,497,464, which includes two years of support and maintenance and licensing. The costs are broken down as follows:

- Implementation \$120,000 (capitalized)
- Support and maintenance \$552,464 (expense)
- Licensing \$825,000 (expense)

This software will replace an existing software with Quest Inc. whereby DWIHN incurs \$282,000 per year or \$846,000 over 3 years. The net increase in costs for the AI model over the 3 year period is approximately \$652,000.

DWIHN will own the web-based software however continued support and maintenance and licensing fees will be incurred at approximately \$495,000 per year (a net increase of \$213,000 per year).

Board Action #: 25-53

Outstanding Quality Issues (Y/N)? _ If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 1,497,464.00	\$ 1,497,464.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: various

In Budget (Y/N)? N

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Thursday, February 13, 2025

Signed: Wednesday, February 12, 2025

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

- Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckner

Board Liaison

Date: _____

2/19/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 25-54 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Mend VIP, Inc

Contract Title: Mend VIP - Telehealth Platform

Address where services are provided: None

Presented to Finance Committee at its meeting on: 2/5/2025

Proposed Contract Term: 3/1/2025 to 2/29/2028

Amount of Contract: \$ 272,410.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 3/1/2025

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

Request to acquire 80 licenses of the Mend Engagement & Telehealth Service provided by MEND VIP. This service will be used to provide telehealth services for the members working with our CCBHC facilities. The Mend is the Sole-Source service that directly integrates with MHWIN, our EHR system provided by PCE.

The term of the contract would be 3 years, which includes the Mend Telehealth platform, implementation, initial customization of the platform, as well as customer support for the platform. **The total cost of the contract is not to exceed \$272,410.00 for the contract period 03/01/2025 through 02/29/2028.**

Outstanding Quality Issues (Y/N)? If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 272,410.00	\$ 272,410.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64915.727020.00000

In Budget (Y/N)? N

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Tuesday, January 28, 2025

Signed: Friday, January 24, 2025

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckshus

Board Liaison

Date: _____

2/19/2025

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 25-55 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Starfish Family Services

Contract Title: Michigan Child Collaborative Care Program (MC3) and Behavioral Health Consultant

Address where services are provided: 3000 Hiveley Road Inkster MI 48141'

Presented to Program Compliance Committee at its meeting on: 2/12/2025

Proposed Contract Term: 10/1/2024 to 9/30/2025

Amount of Contract: \$ 102,521.00 Previous Fiscal Year: \$ 96,636.00

Program Type: Continuation

Projected Number Served- Year 1: 850 Persons Served (previous fiscal year): 840

Date Contract First Initiated: 6/1/2015

Provider Impaneled (Y/N)? Y

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting the approval of a one year contract for an amount not to exceed \$102,521. The Michigan Child Collaborative Care Program and Behavioral Health Consultant Project provides behavioral health consultation for local primary care providers with MC3 child, adolescent and prenatal psychiatrists. Starfish Family Services provides local oversight, in collaboration with MC3 program, of the Behavioral Health Consultant as they implement MC3 in Wayne County as well as work in concert with other regional Behavioral Health Consultants.

A sum of an amount not to exceed \$92,362 will be provided to Starfish Family Services to offer behavioral health consultant services for the FY 2025 period. This provider was selected because they were already implementing integrated health care services through a Flynn Grant. When the grant ended, MDHHS asked that DWIHN continue to use this organization. **The remaining \$10,159 is allocated for DWIHN administrative costs.** Starfish Family Services Behavioral Health Consultant will act as the liaison with the primary care physician staff and the University of Michigan psychiatric staff.

Services include:

- Regional Outreach to eligible providers to ensure utilization of the MC3 program;
- Linkage between Primary Care Providers and MC3 Psychiatrist;
- Coordination of care for children, adolescents, and perinatal women;
- Behavioral Health Consultant provides consultation services in designated primary care site; and
- Collection of required data and local utilization to facilitate the project evaluation.

Outstanding Quality Issues (Y/N)? N If yes, please describe:

Source of Funds: Other

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
State Grant	\$ 102,521.00	\$ 102,521.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.01021

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Signature/Date:

James White

Signed: Tuesday, January 28, 2025

Stacie Durant, Vice President of Finance

Signature/Date:

Stacie Durant

Signed: Thursday, January 16, 2025

Board Action #: 25-55

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckshus

Board Liaison

Date: _____

2/19/2025

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 25-56 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 2/19/2025

Name of Provider: Pending

Contract Title: Public/Private Partnership (Trillium)

Address where services are provided: None

Presented to Executive Committee at its meeting on: 2/17/2025

Proposed Contract Term: 3/1/2025 to 4/30/2099

Amount of Contract: \$ 3,500,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: Persons Served (previous fiscal year):

Date Contract First Initiated: 3/1/2025

Provider Impaneled (Y/N)?

Program Description Summary: Provide brief description of services provided and target population. If propose contract is a modification, state reason and impact of change (positive and/or negative).

This board action is requesting approval between DWIHN and Pioneer Health System, LLC d/b/a Jefferson Center, an affiliate of Trillium Health, a private entity for an amount not to exceed \$3.5 million. DWIHN will receive a return of the payment equal to \$3.5 million in agreed upon reduced rates for inpatient beds; negotiated standard base rate and standard enhanced rate for all member to staffing ratios; agreed upon DWIHN standard rates for residential program; priority to DWIHN Members over other individuals seeking placement in facility beds; two (2) reserved beds in the Facility's Adult Geriatric Psychiatric Unit exclusively for the use of eligible DWIHN Members referred by DWIHN; and a reasonably sized designated office space for DWIHN staff to facilitate care and discharge of DWIHN members.

The collaboration will provide services that are developed by a private provider entity based on input from DWIHN for the unmet needs in the community, which will not only enhance the continuum of behavioral healthcare but will also pioneer the implementation of a "Value Based Care Model". Trillium plans to invest over \$20 million dollars to construct and lease a 52-bed facility, known as Jefferson Center ("Jefferson Center" or the "Facility"), which will consist of 31 beds for an Adult Psychiatric High Acuity Unit and 21 beds for an Adult Geriatric Psychiatric Unit. The Parties recognize the need for extended mental health care and Trillium is committed to developing a comprehensive plan for patients requiring adult psychiatric high acuity care exceeding 45 days, while ensuring that patients receive safe, compassionate and personalized support throughout their extended stay, promoting a successful return to the community and sustained recovery. Jefferson Center's clinicians will specialize in the field of geriatric mental health, offering expertise in treatment and education for conditions unique to this demographic including but not limited to dementia, Alzheimer's disease, and memory

Board Action #: 25-56

impairment, as well as managing challenges such as depression, bipolar disorder, and anxiety that are specific to individuals in this age group. In addition, Trillium will be investing an additional \$15 million over the next five years to establish support services such as a psychiatric emergency room and another 30-bed specialized residential program to improve access and promote the continuum of care for Wayne County residents. Jefferson Center will enable DWIHN members to be diverted from Crisis Stabilization Units, Crisis Residential Units and emergency rooms based upon medical necessity for adult psychiatric high acuity care, avoiding the need for short-term psychiatric care, thereby minimizing cost by avoiding redundancies.

This Agreement will commence once fully executed by both parties and will remain in place unless earlier terminated in accordance with with contract terms.

Outstanding Quality Issues (Y/N)? If yes, please describe:

Source of Funds: Local Funds

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
Local funds	\$ 3,500,000.00	\$ 3,500,000.00
	\$	\$
Total Revenue	\$	\$

Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)? Y

Approved for Submittal to Board:

James White, Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

James White

Stacie Durant

Signed: Tuesday, February 18, 2025

Signed: Tuesday, February 18, 2025

Board Action #: 25-56

Board Action Taken

The following Action was taken by the Full Board on the 19th day of February, 2025.

- Approved
- Rejected
- Modified as follows:

Tabled as follows:

Executive Director -initial here: _____

Signature: _____

Lillian M. Buckner

Board Liaison

Date: _____

2/19/2025



President and CEO Report to the Board
February 2025
James E. White

ADVOCACY AND ENGAGEMENT

DWHIN is receiving ongoing support from PAA as we look at the changes taking place in Lansing with newly elected lawmakers and the landscape shift in the legislature. We are working to educate key governmental stakeholders on DWHIN's policy priorities, CCBHC, direct care services and access to care initiatives.

On January 31, there was follow-up with leadership from MDHHS at the 707 Crisis Care Center. MDHHS offered feedback and guidance for youth crisis services that will allow for greater overall success of the unit and the young people it aims to serve throughout our community. Among the clarification we received, it was indicated that a parent or guardian would not be required to stay with the youth for an admission to CSU as long as appropriate consent for treatment was obtained.

Engagement

Mobile Crisis Support – Wayne County
January 28, 2025

I wanted to take a moment to express how impressed I am with the Mobile Crisis Unit and the exceptional service they provided today.

This morning, a member of our community came to our building in Wayne seeking assistance, stating that he was "having a mental health crisis and looking for help to get through this." I brought him to my office, and after building a rapport and conducting a quick field assessment, I asked if I could contact our partners at DWHIN so he could speak with a mental health professional.

From the operator who took my call to the crisis team that arrived at our building, every individual demonstrated professionalism, compassion, and excellence. The team worked respectfully, ensuring this gentleman's dignity was maintained throughout the entire process.

As a public health practitioner and first responder, I cannot overstate how grateful I am that Wayne County has access to this vital resource. It makes a significant difference in our ability to serve and support the community effectively.

Please extend my gratitude to the team for their exemplary work.

Regards,
Chief Mautz
Timothy Mautz, BS CPH PEM
Chief, Emergency Preparedness & Response

Wyandotte Today featured DWIHNs CCBHC status and the benefit to the Veterans in the community. a veteran who now serves as DWIHN's veteran navigator, said the CCBHC demonstrates how well the organization is positioned to support veterans.

<https://www.communitypublishing.com/articles-wyandotte-today/DWIHNVeterans>

Dr. Kanzoni Asabigi, SUD Board Member, discusses the crucial link between substance use and HIV transmission, emphasizing prevention and treatment strategies for vulnerable populations.

https://rollingout.com/2025/02/01/dr-kanzoni-asabigi-on-hiv/?fbclid=IwY2xjawIYuc9leHRuA2FlbQIxMQABHQ1-NAgCGxwUN0RSCM5YqBmfxLfzbA2wx8rrncCZTuxRD3D94w0Dx3ts4A_aem_ZjMdhfXrAxtfyxXAhPYpJQo

On February 21, DWIHN and the Michigan Science Center team up for a family event aimed at engaging young people. The Game Night event brings together virtual reality and gaming, along with a sit-down with Dr. Faheem to talk about the impact of gaming on our mental well-being.

Upcoming Items

- March 20: Annual Report Presentation before the Wayne County Commission.
- March 27: Tri-County Metro Region Meeting, Macomb hosting (virtual).
- Full Board Member Appointment terms set to expire March 31: Wayne County (Brown, Ruth) and Detroit (Carter, Glenn).
- SUD Oversight Policy Board - DWIHN Board Appointment terms set to expire March 31 (Asabigi, Jackson, McNamara). On February 11, Wayne County Commission reappointed board members Fielder and Taylor. The three-year terms will commence April 1, 2025.

INTEGRATED HEALTH PILOT UPDATE

The Detroit Wayne Integrated Health Network (DWIHN) continues to make progress with integrating with Medicaid Health Plans. Below is a list of updates of the collaborations with Medicaid Health Plan Partners One, Two, and Three.

Care Coordination is completed monthly with Health Plan One and Two. Historically, Data Sharing was completed with Health Plans. DWIHN would meet with the Health Plans and share data, for example address or phone numbers. In 2020, DWIHN met with two health plans to discuss care coordination. This is a service where DWIHN and the Health Plans actively search out members who have gaps in care with behavioral health and medical. The health plans work with the primary care providers and DWIHN works with the CRSP agencies to bring a team together treat a member. The goal of care coordination is to close the gaps in care within 90 days. Gaps in care could be, not engaged with a primary care provider, untreated diabetes and on antipsychotics, high hospitalizations (medical and psych), not taking medications as prescribed, not engaged with CRSP agency. For FY 2025 125 members were serviced in care coordination. This count does not include members who could not be located or refused services at the CRSP.

Health Plan Partner One

DWIHN and IHC meet monthly for care coordination. Health Plan One resumed care coordination in January. Plans and care gaps for 12 members were jointly reviewed by both care teams with 4 members had gaps in care resolved, two cases will get addressed as part of care coordination in February 2025.

Health Plan Partner Two

Care Coordination with Health Plan Two was initiated in September 2020. These meetings occur monthly. Health Plan Two had 20 members plans reviewed by the care teams in the meeting. Eleven members care gaps were resolved in 30 days and 6 will carry over to February.

Health Plan Partner Three

There has been a change in direction at Health Plan Partner Three and they are no longer able to commit staffing resources to continue the project. DWIHN is working aggressively and looking to identify a partner for Health Integration Plan project.

Shared Platform and HEDIS Scorecard

Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by health plans to measure performance on important areas of care. DWIHN has developed an HEDIS scorecard based on claims from our CRSP and claims pulled from the MDHHS claims warehouse CC360. DWIHN is following the guidelines set by the National Committee for Quality Assurance (NCQA) as to the behavioral health HEDIS measures to monitor and report on. These measures are a combination of medical interventions and behavioral health interventions that affect one's recovery and independence in the community.

During the month of January, the HEDIS scorecard was reviewed at fourteen CRSP monthly meetings.

CHIEF MEDICAL OFFICER

PIHP/CMHSP Medical Directors

DWIHN was encouraged for its Mobile Crisis data indicating low numbers of law enforcement involvement. We had 1,400 members served between Dec. 2023-Nov. 2024, with 23% of them requiring mobile crisis transport and only 6% of them requiring law enforcement assistance. Among those requiring law enforcement assistance, most of them were for transport of involuntary individuals rather than for aggression.

Michigan has been selected by CMS as one of the four states to participate in Innovative Behavioral Health Model. DWIHN is well positioned due to its NCQA status and its participation in care coordination with health plans.

State Medical Director Assisted Outpatient Treatment Advisory Committee

Mental Health Courts, Emergency Departments, Hospitals, MDHHS and CMH continue to be involved in advocacy and discussion around expansion on the use and compliance of court ordered treatment (AOT).

AOT Bills (SB 916–918, led by Sen. Hertel) are awaiting on House floor for final approval. These Bills would decrease the threshold at which law enforcement could take individuals for screenings and could result in increased crisis stabilization drop offs. It also expands other clinicians besides psychiatrist to testify for court ordered treatment and provides court-ordered treatment for misdemeanor offenders with mental health issues.

In order to improve compliance with AOT and improve data, DWIHN has been working on creation of AOT dashboard as part of AOT grant received through the Michigan Health Diversion Council.

Crisis Center Updates:

Over 90% of our admission continue to be voluntary which has been the goal for the Center despite around 25-30 % of our referrals coming from Law enforcement. This indicates that we are able to de-escalate high acuity individuals who are often brought in by law enforcement and help them get help voluntarily.

Verbal De-escalation remains the primary source of agitation management as evidenced by low use of agitation medications. (Less than 10 Intramuscular use of common combination called B52 in 3 months.

Substance Use Disorder continues to be address in the management protocol at Crisis Center knowing the high co-occurring population we serve. This has been evidenced by high use of withdrawal medications for Alcohol Use Disorder, Opioid Use Disorder and Nicotine Use Disorder.

Schizophrenia Spectrum Disorder remains the most common diagnosis resulting in crisis presentation and hospital admissions. We have been tracking use of long acting injectable at our Crisis Center and have been working with our EMR system to develop alert when the use of LAI is appropriate to improve medication compliance for this group, especially knowing that this is resulting in recurrent admissions and crisis presentation. We have also been sending referrals to First Episode Psychosis Program (FEP), which is an evidence-based program to reduce later development of schizophrenia through early intervention and treatment. Hegira got enrolled in this State expansion grant last year.

Referral rates to psychiatric hospitals for Adults at the Crisis Center as a disposition remains low (Ranges between 10-20%). Our CSU is considered a Preadmission Screening Unit. As compared to tradition preadmission screening reviews completed in emergency departments where referral rate to inpatient hospital typically averages 70%, this is a three to four times lower rate of referral for inpatient hospitalization.

DWIHN has started outpatient services and has been serving both adults and children. Currently, our Medical Director is prioritizing Joint Commission review process and developing an extensive list of Psychiatric policies and protocols for the clinic. The clinic has 181 scheduled patients, and 144 have been seen. The clinic has been compliant in meeting the State's 14-day access standard in last quarter.

CLINICAL OPERATIONS

Health Home Integrated Service Expansion

Detroit Wayne Integrated Health Network (DWIHN) recognizes the value of integrated healthcare models and continues to promote expansion throughout our provider network. As a Lead Entity, DWIHN works with our Health Home Partners to ensure they provide care management services to DWIHN members. DWIHN has nine (9) Behavioral Health Home partners serving 810 members and eight (8) Substance Use Health Home partners serving 658 members. Although DWIHN currently has the most health home enrollees State-wide, we know there are more members that can benefit from these services. The DWIHN Health Home Team is reaching out to providers to educate them on the benefits of this model and gauge their interest in becoming a provider. DWIHN recently recommended that two (2) providers be removed from the SUD Health Home program due to their inability to meet minimum program requirements.

Emily Patterson, Health Home Director, and her team (Amy Adams and Mark Matthews) presented at the CMHA Winter Conference providing education on health home models and the benefits they provide to members. It was a very insightful presentation that was very well received by audience members.

Michigan Department of Health and Human Services (MDHHS) Updates

DWIHN is currently preparing and submitting files to the Health Services Advisory Group (HSAG) in preparation for our external quality review. HSAG is contracted by MDHHS to review quality standards and to analyze HEDIS measures and results for Medicaid plans in Michigan.

Transitions of Care Technical Requirement. A PIHP must develop and implement a transition of care policy consistent with 42 CFR 438.62 to ensure continuity of care for its enrollees. The PIHP should take into consideration the impact on an enrollee's health if they lose access to the enrollee's established providers. DWIHN has an interdepartmental team developing a Transitions of Care Policy that will adhere to this MDHHS technical requirement.

In June 2023, MDHHS required members to re-apply for Medicaid and re-established Medicaid deductibles. When members applied for Medicaid and MDHHS needed additional information from the member, they automatically enrolled applicants into the Plan First program pending receipt of the requested documentation. Plan First does not cover behavioral health services. MDHHS has reported that it has stopped this practice and is working on aligning members to the appropriate Medicaid programs. This is significant as DWIHN has had to use general fund dollars to cover services for persons enrolled in Plan First.

CRISIS SERVICES

Over the last 3 months, the crisis call line has fielded approximately 3,000 calls. Of those 3,000 calls, approximately 20% resulted in a mobile crisis dispatch. In addition, there have been 542 presentations to the 707 Crisis Care Center from November – January.

As of last week (2/7/2025), policy adjustments were made to the Child and Family Crisis Unit, with the support of MDHHS. The unit is now able to serve a higher level of acuity due to the additions of emergency physical management and emergency medication. The unit has also developed a process to reduce barriers to parents seeking treatment for their children but are unable to stay for the duration of treatment. We are hopeful these two major changes will allow more families to access and utilize this resource.

DIRECT CLINICAL SERVICES

DWIHN Direct Clinical Service Provision

Beginning in February 2025, the DWIHN Community Care Clinic will expand its direct services to an additional site location at 15400 W. McNichols Rd within the Federally Qualified Health Center (FQHC), Advantage Health. Services can either be in-person or telehealth and will include comprehensive intake assessment, treatment planning, outpatient therapy, case management, psychiatric evaluation and management for children and adults. The clinic will also continue its current service delivery on the third floor of the 707 Milwaukee building for both children and adults.

Clinical Updates

The DWIHN Community Care Clinic team will be delivering school-based services in the downriver area starting this month. Services delivered will consist of screening children for behavioral health services and linking and coordinating with DWIHN's network of providers. The school-based clinician will use the social emotional learning curriculum endorsed by Wayne-RESA and they will also address social issues unique to the district's challenges with students.

The direct services clinic is currently working in partnership with the crisis care services team, to apply for Joint Commission accreditation. This accreditation will expand DWIHN's ability to provide services to individuals with co-occurring disorder, improve member safety, quality of care and quality outcomes. DWIHN has not yet received notification from Joint Commission on its scheduled review date but will provide information once received.

The direct services clinic is also working in partnership with the Communications team to increase community outreach, expand promotional materials and media presence to inform the community of DWIHN outpatient clinic services. This will support the growth of the clinic and ensure expansion of services throughout Wayne County.

To accommodate enrollment requests and comply with CCBHC requirements, the direct services team is recruiting full time intake behavioral health clinicians, that will offer multiple intake appointments for both children and adults Monday-Friday. Intakes will be offered at both clinic locations. The intake department is expected to be fully staffed by mid-March.

Community Care Clinic Data:

The DWIHN Community Care Clinic enrollment continues to increase. Current enrollment is 183 members. The current demographic data is as follows:

<u>Cities with highest enrollment</u>	<u>Race</u>	<u>Adults</u>	<u>Children</u>
Detroit 78%	African American 80%	69%	30%
Hamtramck 4%	White 14%		
Highland Park 3%	Arab American 3%		
Taylor 3%	Other 4%		

Currently the zip codes with the highest enrollment to date are 48202, 48206 and 48224. Additional demographic data by zip code has been attached in a separate report.

The direct services clinic continues to work with the DWIHN IT department to further enhance its data reporting mechanism inside its electronic health record. This data enhancement will consist of ensuring that DWIHN meets the necessary clinical, quality and compliance standards across all accrediting bodies.

Next Steps:

- Continue to build direct services in Detroit and Downriver area to serve both children and adults.
- Enhance electronic medical record to meet contractual quality performance measures, direct service model of practice and CCBHC performance measures.

- Build ACT services for adults with mental illness.
- Apply for Joint Commission accreditation to deliver substance use disorder services.

FINANCE

Detroit Wayne Integrated Health Network (DWIHN) received notification from the Michigan Department of Health and Human Services (MDHHS) of our annual Performance Incentive Bonus Payment (PIBP). DWIHN received \$6.1 million out of a possible \$6.9 million. The funds are considered local and have been appropriated to cover FY24 general fund overages. DWIHN received \$6.4 million in the previous year.

DWIHN received notification from the federal government that there would be a pause on payments in the Line of Credit Control System (LOCCS) for processing and distributing federal grants, loans and subsidies, effective January 28, 2025. The pause on payments was rescinded on January 29, 2025. These payments include grants from the U.S. Department of Housing and Urban Development (HUD) that are disbursed to five (5) providers totaling approximately \$2.1 million annually or \$175,000 per month. In an effort to not disrupt the programs, DWIHN was prepared to continue payments to these providers until such time of the pause being lifted.

DWIHN is still awaiting its Prospective Payment System Rate (PPS-1) from MDHHS. DWIHN received feedback from the Centers for Medicare and Medicaid Services (CMS) and based on the feedback, we revised the cost report to address all the questions and concerns that were raised. Until DWIHN receives CCBHC approval from CMS, the services and costs incurred are Medicaid eligible under DWIHN’s Community Mental Health Services Program (CMHSP) status.

Lastly, the annual single audit is underway and there are five (5) major programs. The audit scope and pricing take into consideration three (3) major programs. This will increase the audit contract by approximately \$12,000 per program or \$24,000. A board action amendment will be forthcoming.

HUMAN RESOURCES

During the past month, DWIHN hired the following staff:

Behavioral Health Clinician (Children Outpatient Clinics)	
Behavioral Health Clinician (School Based Initiatives)	
Behavioral Health Technician Supervisor (Contingent)	2
Behavioral Health Technician Supervisor (Contingent)	
Behavioral Health Technician (Contingent)	
Case Manager - Outpatient Clinics	3
Compliance Specialist	2
Dispatch Coordinator - PAR (Part-Time)	
Dispatch Coordinator (Contingent)	
Executive Assistant 2	
Human Resource Assistant 1	
IT Systems Administrator II	
Medical Assistant	

Parent Support Partner	
Peer Support Specialist - Crisis Services	
Peer Support Specialist - Crisis Services (Contingent)	4
Peer Support Specialist - Mobile Crisis	
Peer Support Specialist - Mobile Crisis (Contingent)	
Senior Provider Network Manager	
Student Intern	2

DWIHN HR has concluded contract negotiations with AFSCME and continues negotiations with GAA. Supervisory Institute Group D held its 11th session on February 6. The topic was “Manage Time and Priorities”.

Planning is underway for the upcoming Directors’ Retreat, scheduled for March 20-21, 2025 at Marriott at Eagle Crest.

INFORMATION TECHNOLOGY

CCBHC/Outpatient Clinic

We have successfully completed the setup of staff profiles in MHWIN for our new 6 Mile location. Additionally, we have finalized the installation of IT equipment throughout the building. This includes configuring computers, networking devices, and other necessary technology to ensure a fully operational environment for our team.

Plante Moran Financial Audit

Plante Moran has broadened the scope of their financial audit activities to encompass both the PCE system and its associated controls. We have promptly provided all initial information requested by Plante Moran for their review. This submission is part of the comprehensive ongoing financial audit process. We are now awaiting their detailed feedback to proceed further.

Security

The AmeriHealth IT audit has now been integrated into their broader services audit conducted with DWIHN. This integration allows for a more comprehensive evaluation of our services and strengthens our collaborative efforts with AmeriHealth and DWIHN. Additionally, Molena has requested additional audit information, which we have promptly provided.

MAPS Integration with MHWIN

We have successfully completed the integration of the MAPS system into MHWIN, enhancing our support for prescribers in the medication prescription process. The MAPS system provides prescribers with a comprehensive view of controlled substances that have been prescribed to a member across the state. This integration ensures that our prescribers have access to vital information that can help prevent overprescription and promote safer medication practices.

ADULT SERVICES

In collaboration with Wayne State Center for Behavioral Health and Justice, DWIHN has been provided with additional resources (toolkit) in relation to Assisted Outpatient Treatment (AOT)

services. As part of the State's AOT Diversion grant, DWIHN has been working with PCE on the development of an Assisted Outpatient Treatment (AOT) module that will provide increased communication between DWIHN, the Wayne County Probate Court Behavioral Health Unit and our provider network for members on AOT. This will improve monitoring of engagement in services and resultant communications with the court. This also includes NGRI members (Not Guilty by Reason of Insanity). The goal is to see a reduction in expired court order and increased compliance in treatment.

Senate bills 915 and 918 have proposed changes to the Mental Health Code in relation to Assisted Outpatient Treatment. These changes include allowing a qualified mental health professional to file a second or continuing order for AOT, an individual can be put on an AOT for a misdemeanor and allows a peace officer to take an individual into protective custody if the officer has "reasonable cause" to believe the person requires mental health treatment. The Senate bills passed through the Health Policy Committee and is awaiting final approval.

CHILDREN'S INITIATIVES

Detroit Wayne Integrated Health Network, DWIHN Infant Mental Health provider sites (Starfish Family Services, Guidance Center, Children's Center, CNS Healthcare, and MiSide), Wayne State University, and Merrill Palmer Skillman Institute (MPSI) are partnering on the Project Launch SAMHSA grant. Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) focuses on children from birth through 8 years of age living in Detroit, Michigan. The goal is to educate and support hundreds of parents and other adults who care for and work with young children while increasing access to high-quality infant and early childhood mental health services in multi-sector settings (home visiting, pediatric clinics, early childhood education). The overall objective of the program is strengthening opportunities to support babies, families and professionals. As part of the project, we will be tracking and recording the rates of developmental and behavioral health screeners complete at each partnering provider site.

COMMUNICATIONS

Media Outreach:

The Communications department is always looking for ways to work with the media and share stories about resources, events and activities related to DWIHN and its providers. During this month the Communications department garnered multiple media stories including the below examples (Hyperlinks connect to stories and interviews):

CCBHC

The January edition of [Wyandotte Today](#) covered the latest developments of DWIHN's certification and the impact it would have on residents, specifically veterans in the downriver area. The article interviewed both Ebony Reynolds and Veteran Navigator Chris Brown. This month's issue also featured the DWIHN logo on the Cover Page.

The [News-Herald](#) also interviewed Ebony Reynolds regarding the CCBHC accreditation and how it will allow us to provide access to quality care for many more residents and we DWIHN will have the ability to treat "mild to moderate" cases.

Stories of Recovery

The [Ask the Messengers](#) Stories of Recovery Continues, with highlighted stories of recovery with various recipients of care from our Substance Abuse Disorder provider network.

WXYZ-7 SUD Commercials

[SUD Narcan Commercials](#) ran on January 17, January 28, and February 4.

Access Call Center Calls Related to Outreach - Each quarter the Access Call Center asked callers "How Did you Hear About Us?" During the 4th quarter of FY '23-'24, the total number of calls managed by the Call Center.

The numbers show a significant increase in awareness due to advertising.

Category	3rd Qtr.	4th Qtr.
Total Number of Calls	44,567	46,306
Callers who Answered the Question	44,567	44,601
Billboard / Bus Advertisement	26	233
Website/Online/Flyer/Hotline/TV/Radio/Internet/ Google/Social Media/MyDWIHNapp	587	607

Community Outreach:

In January, DWIHN staff actively engaged in several impactful community outreach initiatives. Our team participated in the Kevin’s Song Conference, the 13th Annual MLK Community Health Fair, and the Big Brothers Big Sisters in Action: Empowering the Next Generation event, reinforcing our commitment to mental health awareness and community support.

Additionally, Youth United hosted Courageous Conversations: Let’s Talk Human Trafficking & Youth, providing a vital platform for education and dialogue on this critical issue.

Upcoming Events:

- Saturday, Feb. 15th-Center for Urban Youth & Development’s Men’s Substance Use Disorder Mental Health Summit
- Friday, Feb 21st Mental Health Pep Rally, Cornerstone Lincoln-King High School, 10-11:30am
- Friday, Feb 21st Game Time at The Michigan Science Center 1-4pm (positive effects of gaming on mental health & youth)

Social Media- Influencer Marketing Update:

Social Media Influencer	# of Posts	Engagement/Impressions
The Capital Brand/Randi Rosario	1 Post, 4 Story Posts	Over 110K total views
Kathleen Springer	4 Posts	Over 26k total views

Social Media Performance Report Summary:

Social Media Performance: (Facebook, Instagram, LinkedIn, X and YouTube)	Current Period (Jan 2025)	Previous Period (Nov/Dec 2024)

Total Audience Growth	20,762	20,639
Engagements	2,652	8,059
Post Click Links	829	3,276
Engagement Rate	3.3%	7.2%
Impressions	78,918	110,092

Google Analytics:

Google Analytics/Business Profile	Current Period (Jan 2025)	Previous Period (Nov/Dec 2024)
Profile Interactions	2,218	3,791
People Viewed Business Profile	5,650	8,664
Searches	2,553	3,826
Website Clicks	1,571	2,669