Detroit Wayne Integrated Health Network



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FULL BOARD Wednesday, September 18, 2024 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 August 21, 2024
- VI. RECEIVE AND FILE Approved Finance Committee Minutes August 7, 2024 Approved Program Compliance Committee Minutes – August 14, 2024

VII. ANNOUNCEMENTS

- A) Network Announcements
- B) Board Member Announcements

VIII. DEMARIA CONSTRUCTION PRESENTATION

IX. BOARD COMMITTEE REPORTS

- A) Board Chair Report
 - Community Mental Health Association of Michigan (CMHAM) Annual Fall Conference October 21st & 22nd 2024 – Grand Traverse, Michigan
 - 2) Regional Chamber of Commerce Mackinac Policy Conference 2025 Mackinac Island, Michigan (May 27th - May 30, 2025)
- B) Executive Committee
 - 1) Board Study Session Update October, 2024
 - 2) Metro Region Meeting Detroit Wayne Integrated Health Network Hosts October 24th 2024 (Virtual)

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

Manny Singla, Interim President and CEO

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- C) Finance Committee
- D) Program Compliance Committee
- E) Recipient Rights Advisory Committee

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

XI. BOARD SELF-ASSESSMENT POLICY #2016-11 (Policy/Bylaw)

XII. UNFINISHED BUSINESS

- **Staff Recommendations:**
- A. **BA#22-39 (Revision 3)** Allen Law Group, PC (*Executive*)
- B. BA#23-18 (Revision 2) Global Solutions Group Inc. (Finance)
- C. BA#23-25 (Revision 2) Social Media Management (Westcomm) (Finance)
- D. BA#23-30 (Revised) Public Affairs Associates (PAA) (Finance)

XIII. NEW BUSINESS

Staff Recommendations:

- A. BA #25-01 Multicultural Integration Providers FY 25 (Program Compliance)
- B. BA #25-02 Substance Use Disorder (SUD) Treatment Provider Network FY 25 (Program Compliance)
- C. BA #25-03 Substance Use Disorder (SUD) Prevention Provider Network FY 25 (Program Compliance)
- D. BA #25-04 707 Food Service (Program Compliance)
- E. **BA #25-06** Jail Diversion FY 25 (*Program Compliance*)
- F. BA #25-07 Comprehensive Service for Behavioral Health (CBH) FY 25 (Program Compliance)
- G. **BA#25-10** Behavioral Health Homes FY25 (*Program Compliance*)
- H. BA #25-11 Substance Use Disorder (SUD) Health Homes FY 25 (Program Compliance)
- I. **BA#25-12** Michigan Rehabilitation Services (MRS) (*Program Compliance*)
- J. BA #25-13 DWIHN Provider Network System FY 25 (Program Compliance)
- K. BA #25-14 Credentialing Verification Organizations FY 25 (Program Compliance)
- L. BA #25-15 Children's Crisis Intervention Services FY 25 (Program Compliance)
- M. BA #25-16 Adult Crisis Intervention Services FY 25 (Program Compliance)
- N. BA #25-17 Children's Initiatives MDHHS Grants FY 25 (Program Compliance)
- O. BA #25-18 Children's Services Health Quality Initiative Program FY 25 (Program Compliance)
- P. BA #25-19 HPS Consulting, LLC (Program Compliance)
- Q. BA #25-20 Juvenile Restorative Program FY 25 (Program Compliance)
- R. **BA#25-21** PIHP Michigan Department of Health and Human Services (MDHHS) and Detroit Wayne Integrated Health Network (*Executive*)
- S. BA #25-22 Medical Billing and Claims Auditing Services FY 25 (Program Compliance)
- T. BA #25-24 Autism Spectrum Disorder (ASD) Provider Network FY 25 (Program Compliance)
- U. BA #25-25 FY2024/2025 Detroit Wayne Integrated Health Network Operating Budget (Finance)
- V. **BA #25-27** –CMHSP Agreement Michigan Department of Health and Human Services (MDHHS) Agreement *(Executive)*

XIV. AD HOC COMMITTEE REPORTS

- A. Policy/Bylaw Committee
- B. Strategic Plan Committee
- C. Board Building Committee
- D. CEO Search Committee

XV. INTERIM PRESIDENT AND CEO MONTHLY REPORT

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

XVI. PROVIDER PRESENTATION - PSYGENICS, Inc.

XVII. REVIEW OF ACTION ITEMS

XVIII. 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).

XIX. ADJOURNMENT



DETROIT WAYNE INTEGRATED HEALTH NETWORK FULL BOARD/ANNUAL MEETING Meeting Minutes Wednesday, August 21, 2024 1:00 p.m.

BOARD MEMBERS PRESENT

Dr. Cynthia Taueg, Chair Dora Brown, Treasurer Kenya Ruth, Immediate Past Chair Karima Bentounsi Angela Bullock Lynne F. Carter, M.D. Angelo Glenn Bernard Parker William Phillips

BOARD MEMBERS ATTENDING VIRTUALLY: None

BOARD MEMBERS EXCUSED: Ms. Garza Dewaelsche; Commissioner Jonathan C. Kinloch; and Mr. Kevin McNamara, Vice Chairperson

SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD ATTENDING VIRTUALLY: Mr. Thomas Adams, Chair, Substance Use Disorder Oversight Policy Board

GUEST(S): Ms. Katie Gonzales and Ms. Donna McBride, Spectrum Community Services

CALL TO ORDER

The Board Chair, Dr. Taueg, welcomed and thanked everyone for attending the meeting both in person and virtually and called the meeting to order at 1:01 p.m. and requested a roll call.

ROLL CALL

Roll call was taken by Mr. Angelo Glenn, Board member and a quorum was present.

APPROVAL OF THE AGENDA

The Board Chair called for a motion on the agenda. It was moved by Mr. Parker and supported by Ms. Brown approval of the agenda with BA#25-25 Exigent Approval being added under the Board Chair's Report. There was no further discussion. Motion carried; agenda adopted as amended.

MOMENT OF SILENCE

The Board Chair, Dr. Taueg, 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 July 17, 2024. It was moved by Ms. Brown and supported by Mr. Glenn approval of the Full Board minutes of July 17, 2024. There was no further discussion. Motion carried.

RECEIVE AND FILE

The approved minutes from the Finance Committee meeting of July 3, 2024 and the Program Compliance Committee meeting of July 10, 2024 were received and filed.

ANNOUNCEMENTS

Network Announcements

Ms. T. Devon, Director of Communications reporting. A verbal report was provided. It was reported that a huge Opioid Summit was planned for tomorrow at Laurel Manor in Livonia and approximately 300 people are scheduled to attend; DWIHN is one of the major sponsors. The Staff Appreciation picnic is scheduled for Friday August 23rd at Nankin Mills and an invitation was extended to all board members along with t-shirts that could be worn to the outing.

Next week DWIHN will be sponsoring an opioid overdose awareness event to commemorate international suicide, overdose prevention day. We will be holding an event at Clark Park and will have speakers who are survivors as well as some of our providers, mobile units and our SUD providers will also be in attendance and there will be a balloon release. Board members were invited to attend. There will also be a back-to-school bash at the corner ballpark on that same Friday. This event is held each year and last year it was thought that over 1,000 people attended; attendees will receive free backpacks filled with school supplies for children. There will also be a fashion and talent show that day. All the information can be found in the My DWIHN app.

Board Announcements

There were no Board Announcements.

BOARD COMMITTEE REPORTS

Board Chair Report

Dr. Taueg, Chairperson gave a verbal report. It was reported in the last month there were a few exigent approvals requested and staff understands that exigent approval should be rare and typically there are some time constraints for the immediate approval and she will be reporting to the Full Board on the exigent approvals that are made. She would like to keep those types of approvals to a minimum as she believes strongly in the committee process as a way of vetting and understanding the board actions that come before them. She noted that staff has been very good and would not bring an exigent approval unless it was necessary. It was noted that there were a couple of exigent approvals; the first was Board action #24-71 which was Crisis Care Center Additional Parking spaces in which there were some negotiations with the owner of the lot and approvals were needed in order to solidify our presence and keep the parking spaces which are adjacent to the Crisis Care Center; this was approved. The Mobile Clinic Van Community Services was approved and the last was Board Action #25-25 Professional Liability Insurance. It was requested that Legal provide an overview. Ms. M. Gray, Associate VP of Legal Affairs reported. It was noted that BA#25-05 was for Professional Liability Insurance and Access Liability Insurance. The quote was received on Monday morning and there were some changes from the last time in that there is now one company doing all of what three different companies were doing to get us to adequate coverage. We now have more coverage for the professional portion and the amounts were provided. Dr. Taueg noted that approval was also provided for this board action.

It was reported that the Community Mental Health Association of Michigan Fall Conference is scheduled October 21st & 22nd 2024 in Grand Traverse Michigan. There are currently six board members that have expressed interest in attending and Mr. Parker is running for CMHAM Treasurer and DWIHN has five votes.

The National Council on Mental Wellbeing NatCon25 will be held in Philadelphia, Pennsylvania May 5th-7th 2025. There are two board members that have expressed interest in attending. Board members should notify the Board Liaison if they are interested in this conference.

The Regional Chamber of Commerce Mackinac Policy Conference 2025 will be held May 27th - May 30, 2025. It was noted that there have been a number of changes in the registration and hotel reservation process. Ms. Blackshire, Board Liaison at the request of the Chair noted that we have several board members as well as staff members registered to attend the Mackinac Policy Conference, however the island is sold out and we are currently working on hoteling space for board members. It was requested that Ms. B. Blackwell, VP of Governmental Operations and Chief of Staff report on additional updates. It was reported that we are working with our Lobbyists Public Affairs Associates to obtain additional lodging on the island for both board members and staff that will be attending the conference and will work with the Board Liaison to keep everyone apprised as to how things transpire. The report of the Board Chair was received and filed.

Executive Committee

The Board Chair, Dr. Taueg gave a verbal report. It was reported that the Executive Committee met on Monday, August 19, 2024. The Metro Region Meeting is scheduled for Thursday, October 24th and will be a virtual meeting and DWIHN is the host. Board members were encouraged to mark their calendars.

Finance Committee

Ms. Brown Chair of the Finance Committee provided a verbal report. It was reported the Finance Committee met on Wednesday, August 7th and there were no outstanding items to report. DWIHN liquidity remains sufficient to support the operations. The VP of Finance along with our Auditors Plante Moran provided a presentation on internal controls and segregation of duties in light of recent developments as it relates to fraudulent activities and wanted to make sure that our in house processes were sufficient and we have our checks and balances in place and that something of that nature escalating for us would be a rarity. The Budget Hearing was held immediately following the Finance Committee meeting. The details of that meeting will be presented at the Full Board meeting in September. Ms. Ruth thanked Ms. Brown, the Board Chair, the VP of Finance, her entire team and Plante Moran for coming together and doing the wonderful presentation in light of the embezzlement scandal.

The record reflects that Mr. Phillips joined the meeting at 1:15 p.m.

Board members requested a copy of Finance Presentation on Internal Controls and the Segregation of duties. There was no further discussion. The Finance Committee report was received and filed.

Program Compliance Committee

Dr. Carter, Vice Chair of the Program Compliance Committee reported on behalf of Commissioner Kinloch, Chair. It was reported the Program Compliance Committee meet on Wednesday, August 14, 2024. There were a couple of issues outstanding and a follow up report was provided from the Adult Initiatives and Crisis Services regarding trends and members who did not follow up with appointments and there is an ongoing assessment taking place. There was a discussion regarding data collection and the apparent disparity between minority groups and that will continue to be followed. We also receive monthly reports from the Chief Medical Officer and VP of Corporate Compliance. A robust discussion occurred with the Chief Medical Officer as the Crisis Care Center is up and running; there were questions regarding how well it is going and whether there was adequate staffing and whether the needs were being met of all the patients at a high level. There was a good discussion with Dr. Faheem who provided insight regarding the staffing and followup information to make sure it is adequate because the challenges are that we have both adult and children to be cared for and we want both to be care for adequately. Corporate Compliance continues to work hard. We received quarterly reports from the Access Call Center, Innovation & Community Engagement Services and Substance Use Disorder. There were five board actions that were considered and moved to Full Board for approval. There was no further discussion. The Program Compliance Committee report was received and filed.

Recipient Rights Advisory Committee

Mr. Glenn, Chair, Recipient Rights Advisory Committee (RRAC) reported the Committee meet on August 5th, 2024. There was a staffing update and two new investigators, and one clerical support person was hired. During the committee updates, Ms. Ruth was welcomed as a board member. The Director provided complaints update report card and shared with the Interim CEO. The committee report was submitted and will be discussed at the next meeting to allow committee members an opportunity to review the report for the period of June 30th through July 15, 2024 the team closed 223 investigations and only had one late investigation. Investigator Wells presented the second half of the Abuse Neglect Policy to the committee. The Semi-Annual Report was submitted to the Department of Health and Human Services and a copy was provided to Mr. Singla, Interim CEO and the Recipient Rights Advisory Committee for their review. It was noted the next Recipient Rights Advisory Committee meeting was scheduled for October. There was no further discussion. The report of the Recipient Rights Advisory Committee was received and filed.

SUBSTANCE USE DISORDER (SUD) OVERSIGHT POLICY BOARD REPORT

Ms. Judy Davis, Director Substance Use Disorder reported on behalf of Mr. Thomas Adams, Chair of the Substance Use Disorder Oversight Policy Board. A written report was provided for the record. It was reported that the Substance Use Disorder Oversight Policy Board met on July 15, 2024. There were some updates provided by Mr. Singla, Interim CEO. There was a presentation by Meredith on their services and it was noted that they are going on one hundred years of providing services in 2025 for Substance Use Disorder; they provide both treatment and prevention services. There was one board action that was approved for our 5th Annual Men's Conference. There was some information reports provided by the SUD Director and SOAR Coordinator. Ms. Blackwell, VP of Governmental Affairs and Chief of Staff presented an award to SUD Board member Woods from the Community Mental Health Association of Michigan and there were a few public comments. There was no further discussion. The Substance Use Disorder Oversight Policy Board report was received and filed.

UNFINISHED BUSINESS

Staff Recommendations:

- A. BA#22-58 (Revision 2) Temporary Mobile Office Units Will Scotsman, Inc. The Chair, Dr. Taueg called for a motion. It was moved by Mr. Phillips and supported by Ms. Ruth approval of BA#22-58 (Revision 2) Temporary Mobile Office Units – Will Scotsman, Inc. Mr. M. Maskey, VP of Facilities reporting. Facilities is requesting board approval for additional funds to cover the additional rental services invoices for the mobile office that staff occupied during construction of the Care Center. Due to the delays in construction and generator installation the mobile offices had to be utilized longer than anticipated and the requested funds in the amount of \$33,476.43 will cover the additional time the units were needed. The contract total will not exceed \$234,808.72 with expiration date of 9/30/24. There was no further discussion. Motion carried.
- B. BA#22-68 (Revision 2) Staff Training Services, Amazing Organization, LLC (Mastery) The Chair, Dr. Taueg called for a motion. It was moved by Mr. Glenn and supported by Ms. Brown approval of BA#22-68 (Revision 2) Staff Training Services, Amazing Organization, LLC (Mastery). Ms. C. Phillips, Director of Diversity, Equity and Inclusion reporting. DWIHN is requesting a one year renewal of the agreement with Amazing Organization, LLC to provide online training services for DWIHN staff for the period of July 1, 2024 through June 30, 2025 at an additional cost of \$16,000. This revision would bring the total contract cost to not to exceed \$99,093.52. Discussion ensued regarding future training needs. There was no further discussion. Motion carried.
- C. BA#23-60 (Revision 4) Security Services at Milwaukee & Woodward Buildings, Sterling Security. The Chair, Dr. Taueg called for a motion. It was moved by Ms. Bullock and supported by Ms. Ruth approval of BA#23-60 (Revision 4) Security Services at Milwaukee & Woodward Buildings, Sterling Security. Mr. M. Maskey, VP of Facilities reporting. DWIHN Facilities is requesting board approval to modify a previously approved contract with Sterling Security, LLC to continue to provide security services on a 24hr/7-day basis for both the Milwaukee and Woodward facilities. Facilities has completed the RFP process for security services and has selected a new vendor for these services. The existing contract with Sterling Security ends July 31, 2024. As Facilities begins to transition to the new contractor, we are requesting a two (2) month contract extension to provide security coverage during the period of August 1, 2024 through September 30, 2024 along with additional funding in the amount of \$176,000. This contract total is not to exceed \$514,789.40. There was no further discussion. Motion carried.

D. BA#24-01 (Revision 2) Children's Initiatives Michigan Department of Health and Human Services (MDHHS) Grants – Additional Funding. The Chair, Dr. Taueg called for a motion. It was moved by Ms. Ruth and supported by Mr. Phillips to bundle board actions D. BA#24-01 (Revision 2) Children's Initiatives Michigan Department of Health and Human Services (MDHHS) Grants – Additional Funding; E. BA#24-06 (Revision 8) – DWIHN Provider Network System FY24; F. BA#24-12 (Revision 5) Substance Use Disorder Treatment Provider Network FY24 – 5th Annual Men's Conference and G. BA#24-47 (Revised) MI Health Link Demonstration Project FY24. The Detroit Wayne Integrated Health Network (DWIHN) is requesting board approval for the revision of BA#24-01Revised due to additional funding secured by Michigan Department of Health and Human Services (MDHHS) for two (2) of the five (5) grants. In addition, DWIHN is requesting board to reallocate funds for one (1) of the five (5) grants. Grant #1: –For FY24 System of Care Grant, due to underutilization of funds requesting reallocation of \$11,000 from Lincoln Behavioral Services (Parent Management Training Oregon – PTMO Program) to The Children's Center (Youth United Program). Lincoln Behavioral Services was originally allocated \$35,000 and \$11,000 is being reallocated to The Children's Center. Lincoln Behavioral Services new balance is \$24,000 and The Children's

Center new balance is \$282,000. In addition, due to Hegira needing additional funding to support staffing for the PMTO program \$1,000 being reallocated from DWIHN Workforce Development budget to go to Hegira for a total of \$4,500. Hegira original budget was \$3,500.00. **Grant #2:** For FY24 MDHHS has increased the funding for IECMHC from a total of \$192,486, in which Development Center received \$189,986 and DWIHN received \$2,500 for indirect costs. Thus, Development Center will be receiving a total increase of \$91,320 in funding to support additional staffing. The contract period is from October 1, 2023 through September 30, 2024 and funding is not to exceed \$281,306 for Development Centers (MiSide). **Grant #5:** For FY24 MDHHS has increased the funding for the Infant Toddler Court Grant from a total of \$116,673 to the amended amount of \$2,200 additional funds to equal the total allocation of \$118,873. There is no change to the Infant and Early Childhood Mental Health Consultation-Home Visting (Grant #3) \$123,943 (\$2,500 DWIHN). There is no change to the Infant and Early Childhood Mental Health Consultation Expansion (Grant #4) - \$210,202 (\$5,000 DWIHN). The combined total is an amount not to exceed \$1,780,406. Contract terms will remain the same. A budget adjustment will be forthcoming to certify the additional funds. DWIHN has the discretion to reallocate funds amongst providers without Board approval up to the not-to-exceed amount of \$1,780,406. There was no further discussion.

- E.BA#24-06 (Revision 8) DWIHN Provider Network System FY24 Board Action #24-06 (Revision 8) is requesting the addition of the following three (3) providers to the DWIHN Provider Network: Residential Providers: 1. Betterlife Caring Hands, LLC Credentialed 7/22/2024 for Community Living Support; Respite; Skill Building) 2. Greater Grace Health System, Inc. Credentialed 7/24/2024 for Personal Care in Licensed Specialized Residential Setting; Community Living Support. Outpatient Providers: 1. Volunteers of America Michigan, Inc. (Credentialed 3/18/2024 for Peer Directed and Operated Support Services; Supports Coordination; Targeted Case Management; Wraparound Services). BA#24-06 (Revision 8) requires no budget increase due to the reallocation of funds with the total budget. DWIHN is requesting approval for continued funding for the Provider Network System for the fiscal year ended September 30, 2024. This will allow for the continued delivery of behavioral health services for individuals with Serious Mental Illness, Intellectual/Development Disability, Serious Emotional Disturbance and Co-Occurring Disorders. There was no further discussion.
- F. BA#24-12 (Revision 5) Substance Use Disorder (SUD) Treatment Provider Network FY24 5th Annual Men's Conference. The SUD Department is requesting \$50,000.00 in PA2 funds payable to Sobriety House Inc. to support the Annual Men's Conference on August 21, 2024. The conference aims to enhance members' goals and provide community resources and support. The conference consists of motivational speakers from the community, community support resources, such as Alcoholics Anonymous, and legal services, employment services, communicable disease testing, massage therapy, meals, vaccinations, clothing closets and haircuts for our members. DWIHN has the discretion to allocate the funds among providers based on utilization without board approval up to an amount not to exceed \$7,951,781.00. There was no further discussion.
- G. BA#24-47 (Revised) MI Health Link Demonstration Project FY24 BA#24-47 (Revised) is requesting the addition of Michigan BH JV, LLC dba Beaumont Behavioral Health and Psychology Associates of Michigan to provide MI Health Link services to DWIHN members. This board action requires no budget increase due to the reallocation of funds within the total budget. Per BA#24-47 This board action is requesting a two year continuation contract through December 31, 2025 with the five Integrated Care Organization (IC)) to receive and disburse Medicare dollars to reimburse the Affiliated Providers for an estimated amount of \$24,000,000.

MDHHS has extended the MHL Pilot project through 12/31/25 at which time they will implement and launch an Integrated Dual Eligibles Special Needs Plan model by January 1, 2026. The board action will ensure the greatest degree of continuity in the infrastructure and successful transition to the new model once finalized. There was no further discussion. It was moved by Mr. Glenn and supported by Mr. Phillips to approve the bundle which is board actions D. BA#24-01 (Revision 2) Children's Initiatives Michigan Department of Health and Human Services (MDHHS) Grants – Additional Funding; E. BA#24-06 (Revision 8) – DWIHN Provider Network System FY24; F. BA#24-12 (Revision 5) Substance Use Disorder Treatment Provider Network FY24 – 5th Annual Men's Conference and G. BA#24-47 (Revised) MI Health Link Demonstration Project FY24. Motion carried.

NEW BUSINESS

Staff Recommendations:

A. BA#24-70 - Community Policing Development - City of Detroit COPS CIT - The Chair, Dr. Taueg called for a motion on BA#24-40 Community Policing Development - City of Detroit COPS CIT. It was moved by Ms. Ruth and supported by Ms. Brown approval of BA#24-70 Community Policing Development - City of Detroit COPS CIT. Ms. A. Smith, Director of Innovation & Community Engagement reporting. The City of Detroit is the recipient of a FY2021 Community Policing Development Crisis Intervention Teams CIT Implementation grant from the Department of Justice in the amount of \$64,800. This award supports the expansion of Detroit's Mental Health Co-Response Program, a partnership between the Detroit Police Department, The Detroit Wayne Integrated Health Network and City of Detroit Housing & Revitalization Department, that works to reduce the use of emergency services for mental health-related needs in favor of effective treatment of the root cause. DWIHN is the Pre-Paid Inpatient Health Plan and Community Mental Health Service Program partner. Federal grant funds totaling \$64,800 will be used to cover CIT training costs and educational supplies through August 31, 2024. The Memorandum of Understanding specified DWIHN board approval was a requirement in the agreement. In practice, such board actions are not required. The board approved budget adjustment to certify the additional funds serve as board acknowledgement of such grant funds. Discussion ensued. Motion carried.

Dr. Taueg noted that Board action #24-71 Crisis Care Center Additional Parking Spaces had been given exigent approval.

AD HOC COMMITTEE REPORTS

Policy/Bylaw Committee

The Chair, Dr. Taueg, requested the Policy/Bylaw Committee report. It was reported the Policy/Bylaws Committee did not meet during the month of August and a meeting is tentatively scheduled for September 24, 2024, but may have to be moved up due to the Chair, Mr. Phillips schedule. There was an inquiry regarding the Policy/Bylaw Committee moving to become a Standing Committee. It was noted that at the Annual Meeting held in July there was one recommendation from the Policy/Bylaw Committee that was approved by the Board which was on the Board Self-Assessment which was to require 2/3 of the board members to submit the assessment for it to be deemed valid for the year. The Policy/Bylaw Committee was still noted as an Ad Hoc Committee because there was additional work on the Charter and Board Bylaws that needed to be completed by the legal department and reviewed by the Policy/Bylaw Committee before coming to the Full Board. There was also discussion as to why the action items were taken

before the Committee reports. It was noted that the Board had approved the change in the order of the agenda items at a prior meeting. There was no further discussion.

Strategic Plan Committee

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

CEO Search Committee

The Chair, Dr. Taueg provided a verbal report on the CEO Search Committee. It was reported that the Committee has had two meetings scheduled; one is scheduled for August 28th which is next week and the other is scheduled for September 11th. It was noted that at the Annual Meeting in July the Board approved a process that allowed for the posting of the position for 30 days. The posting closed on Monday and the next step will be the screening of the applications and according to our procedure no more than 10 of those will be brough forward to the Search Committee which is where we are in the process. There are some timelines in between which will allow time for the chair of the committee and the legal attorney to go over and screen the applications. There was no further discussion. The report of the CEO Search Committee was received and filed.

INTERIM PRESIDENT AND CEO MONTHLY REPORT

Mr. Singla, Interim President and CEO provided a written report for the record. It was reported that we are in contract negotiations with the State and with the help of our legal team we were able to get an extension on the signature and the outstanding items of concern, so we now have until September 18th to be able to execute the contract if we come to an agreement. An overview was provided of the contract and the language. It was noted that we are close to 500 plus contracts that need to go out to residential and outpatient providers; the team is working closely with legal and clinical folks to roll these out. It was reported that board members Phillips and Carter provided some very valuable insights at the last Program Compliance Committee meeting on the Crisis Center and he can say without a doubt that we are in line with the guidelines that are from the State and they are going to take the feedback and look internally to ensure all those items are covered as it pertains to risk management; however from a staffing standpoint we are more than adequately staffed. The Crisis Center operations is presently working at capacity when it comes to adult services and a detailed report will be made at the next Program Compliance Committee meeting. It was reported that in terms of the Provider Stability since the Public Health Emergency has ended we are looking at incentive based models; rate parity; SUD and both SMI and IDD populations to ensure there is rate parity based on the qualifications of the person who is providing the service as well as those that need the service. An overview was provided on the central dispatch which starts in October. The Behavioral Health unit will be opening next month and will open an outpatient clinic on the 3rd floor. The Catholic Charity Clinic will be another outpatient site, and the closing is coming up on September 15th; we already own the parking lot. It was reported that one of the bigger issues on the finance side is the Medicaid gaps which is coming from folks that are losing Medicaid and are being added to General Fund as well as a gap in services because there is only a certain amount of services that general fund is eligible for and that we are expected to provide as part of utilization guidelines; we have made necessary adjustments to ensure the member is not at a loss to receive services, but we also have the fiscal responsibility to ensure the member is brought back to the most appropriate Medicaid status and we will work closely with our CRSP and internal teams to ensure that is being handled. Mobile Crisis will start 24 hour/7 day a week service starting Monday, the initial numbers look promising in terms of the growth and the service is picking up and will fill a huge void that existed for folks who either would have ended up in a crisis or in a hospital Emergency room or who would have had another type of crisis. We will also advocate for more grant dollars. It was reported that on the integration side that we have just signed between two of the health plans for a co-located service that will do SMI and SUD as a part of the pilot. The health plans will be paying us to take care of those members which are falling on the mild side. We have applied for the CCBHC and we will know in a couple of weeks that outcome. On the long term residential care we are in the process of finalizing the contract and looking at both the rates and duration of freezing those rates; we will be opening a 52 bed site in Detroit of which 31 are going to be long-term psychiatric care and 21 are going to be care for the adult population which is 65 and above. The board noted they were happy to hear about the expansion of the hours of the mobile crisis units. There was no further discussion. The Board Chair thanked Mr. Singla for his report. The Interim President and CEO monthly report was received and filed.

COMMUNICATIONS QUARTERLY MEDIA REPORT

The Chair called for the Communications Quarterly Media Report. A written report was provided for the record. T. Devon, Director of Communications reported on the Media Roundup. An overview was provided on the activities of the SUD Department; the opening of the 707 Crisis Care Center which was on Monday, June 10th 2024 and there was a full day of live coverage from Fox 2 with WDIV and WXYZ Channel 7 providing coverage throughout the day. An overview was provided on the 7 Mile Behavioral Health Campus Groundbreaking which was held on Friday, June 14th with WWJ providing a post event interview. It was also reported that in June DWIHN secured spots for PBS Kids along with Outdoor placement with bus shelters and MOGO Bike Kiosks in July.

Ms. J. Hearns, Visual Design and Outreach Manager reported on the Youth United & Community Outreach. It was reported that this quarter DWIHN participated in various outreach initiatives, most notably was the 10th Annual Interfaith-Based Wellness Beyond the Walls Conference which drew nearly 500 attendees. There was a total of 31 events attended; with estimated total event attendance and potential engagement reported at 5987; a total of 45 follow-up phone calls were made; there were 16 referrals made as a result of the follow-up and there were 15 connections to the Access Center. Youth United organized several events including CMHAD, a Courageous Conversation panel on "Life after College, the "Inside Out 2: Dinner and a Movie" a Transitional Age Youth Forum, and a Stigma Busting Bash held at the Art Block in Detroit. An update was provided on the Mental Health Youth Council which debut this quarter and met four times and focused on the significant impact of substance use on youth and importance of advocacy. It was reported that the DWIHN Mental Health Youth Ambassador Scholarship program accepted applications through mid-July and there was a large pool of talented students that applied; 11 scholarship recipients were selected from high school students across Wayne County; the awards include four - \$2,500 Scholarships for MHYC 2024 graduates and seven \$2,000 Scholarships for selected Wayne County 2024 high school graduates. Photos of the Scholarship Recipients were shared with the Board as well as the Community Outreach Upcoming Events September calendar.

Mr. M. Tate, Social Media Strategist reported on Social Media for the quarter. It was reported that there has been an 8.6% increase in total audience (19,063); 65.6% increase in engagement rate; total engagements are at 26,983 and total impressions were reported at 465,665. It was reported that Facebook is still the top social media platform and the top pages on the DWIHN website, excluding the Home page, is "For Providers" and "Careers at DWIHN". The Google Analytics for the website was provided as well as the results of the Social Media Outreach which received posts and feedback to the 2024 NFL Draft, the Crisis Care Center; the Mental Health Awareness Month at the Detroit Zoo and the 7 Mile Groundbreaking. It was noted that DWIH is actively elevating mental health awareness on social media

by sharing informative content, engaging narratives and fostering a supportive online community. Discussion ensued regarding the format of the Media Report. Communications was requested to provide in their next report measurements on what was working well and the areas that needed development. The Board thanked the Communications Team for the presentation. There was no further discussion.

PROVIDER PRESENTATION – SPECTURM COMMUNITY SERVICES

Ms. Katie Clinical and Ms. McBride, Director of Residential Services provided a written presentation for the record. It was reported that Spectrum provides Adult Supports Coordination which helps adults, and their guardians develop a person centered plan of service. The work with the individual and guardian to identify resources to meet their needs. It was noted that support is given in the individual's home or in community settings according to the plan of service to increase or maintain personal self-sufficiency, facilitate the achievement of their goals of community inclusion and independence. The Habilitation Supports Waiver Program enables Medicaid to fund necessary home and community -based services for children and adults with developmental disabilities who reside within the community. The Residential Services are licensed and unlicensed community homes that provide opportunities for socialization and promote independence with support and assistance from staff. The Home Help program is administered through MDHHS and provides personal cares services to individuals who require assistance with activities of daily living. There are five offices across the region that provide services. Discussion ensued regarding the services. The Board thanked the Spectrum staff for the presentation.

REVIEW OF ACTION ITEMS

- 1. Send Finance Presentation on Internal Controls and Segregation of Duties to Board members.
- 2. Communications requested to update next report and provide measurements on successful efforts and those that need development.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Chair, Dr. Taueg called for Good and Welfare/Public Comment. The Good and Welfare and Public Comment State was read.

Rev. Dr. Jim Holly of the Considine Center addressed the board and noted the good work that was being done throughout the community by Detroit Wayne Integrated Health Network.

Ms. Vining, Director of Considine addressed the board regarding reconsideration of their contract, their contract manager and the need for two-way communication. It was also noted that the Considine Center wanted DWIHN to continue to partner with them and gave an overview of the services that had been provided to DWIHN over the last year.

ADJOURNMENT

There being no further business, Dr. Taueg, Chair called for a motion to adjourn. It was moved by Mr. Phillips and supported by Ms. Brown to adjourn. The motion carried unanimously. The meeting was adjourned at 2:28 p.m.

Submitted by: Lillian M. Blackshire Board Liaison

FINANCE COMMITTEE

MINUTES	AUGUST 7, 2024	1:00 P.M.	8726 WOODWARD AVE DETROIT, MI 48202 (HYBRID/ZOOM)
MEETING CALLED BY	Ms. Dora Brown, Chair called th	e meeting to order at	1:09 p.m.
TYPE OF MEETING	Finance Committee Meeting		
FACILITATOR	Ms. Dora Brown, Chair		
NOTE TAKER	Ms. Nicole Smith, Finance Manage Finance Committee Members Pr		
	Ms. Dora Brown, Chair Mr. Kevin McNamara, Vice Chair Ms. Eva Garza Dewaelsche Ms. Kenya Ruth Mr. Angelo Glenn Ms. Karima Bentounsi		
	Committee Members Excused: N	one	
	Board Members Present: Mr. Be	mard Parker	
	Board Members Attending Virtu	ally: None	
	SUD Oversight Policy Board Me Mr. Thomas Adams, Chair	mbers Attending Vi	rtually:
ATTENDEES	Board Members Excused: Dr. C.	Taueg, Chair	
	Staff: Mr. Manny Singla, Interim I Ms. Dhannetta Brown, Associate V Governmental Affairs and Chief of Monifa Gray, Associate VP of Leg Compliance; Mr. Keith Frambro, V Resources; Mr. Mike Maskey, VP Director of Communications; Ms. Moody, VP of Clinical Operations;	P of Finance; Ms. E Staff; Dr. Shama Fa al Affairs; Ms. Shere P of IT Services; Mr of Facilities; Ms. Min Toni Jones, Supervis	Brooke Blackwell, VP of heem, Chief Medical Officer; Ms be Jackson, VP of Corporate c. Jody Connally, VP of Human andy and Ms. Tiffany Devon, sor of Auditing; Ms. Melissa
	Staff Attending Virtually: Mr. Je Ms. Yolanda Turner, VP of Legal		vice President of Operations; and
	Guests: Ms. Alicia Watkins and Ms	Stacey Reeves, Plant	Moran

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

Ms. Brown, Chair called for Committee member remarks. There were no Committee remarks.

IV. Approval of Agenda

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

V. Follow-up Items

The Chair called for any follow-up items. There was one item on the agenda, Board Action 24-70 Considine Little Rock Life Center – Facilities to provide a transition plan to Finance Committee within 90 days, from Full board meeting in July.

VI. Approval of the Meeting Minutes

The Chair, Ms. Brown called for approval of the minutes from the meeting on Wednesday, July 3, 2024. **Motion:** It was moved by Mr. Glenn and supported by Ms. Garza Dewaelsche approval of the Finance Committee minutes from the meeting on Wednesday, July 3, 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 eight months ended June 30, 2024, was provided for the record. The DWIHN Finance accomplishments and noteworthy items to report were:

Special presentation on internal controls and segregation of duties – Plante Moran and DWIHN CFO.

The VP of Finance, Stacie Durant gave a presentation on the Segregation of Duties at Detroit Wayne Integrated Health Network. A written PowerPoint presentation was provided for the record and to the board. The presentation focused on the allegations of a local nonprofit organization's CFO who allegedly embezzled \$40 million-dollars.. The presentation outlined the internal controls and segregation of duties within Detroit Wayne Integrated Health Network to ensure this type of fraud could not happen at DWIHN. The information presented to the Committee was obtained directly from the actual federal complaint and a 20-page indictment against the alleged companies CFO.

S. Durant reported, on June 4, 2024, the CFO of a local non-profit organization was indicted in federal court for allegedly embezzling approximately \$40 million from November 2012 until May 2024. Based on the official federal "Criminal Complaint", the embezzlement included the following: The payment of approximately \$14.9 million to an American Express Business Platinum Card and four American Express Corporate Cards issued to the CFO, his wife and several family members; payment of approximately \$24.4 million to two fictitious LLC's - The Joseph Group & Associates and William Smith & Associates; LARA listed William Smith as the registered agent for both LLC's; executed a \$5.5 million line of credit with Citizens Bank, which pledged donated revenue of the non-profit. Approximately \$2.5 million was drawn down on the line of credit. Based on the complaint, the embezzlement was covered up

several ways including but not limited to: altered documents (i.e. bank statements, board resolutions) and fictitious journal entries in the accounting system.

The record reflects that Mr. Parker joined the meeting at 1:17 p.m.

Plante Moran staff Alicia Watkins and Stacey Reeves were present during the presentation for the purpose of answering any Committee member questions as it relates to their role, responsibilities, and professional standards in auditing DWIHN internal controls and segregation of duties. Discussion ensued. The board thanked the Ms. Durant, her team, Plante Moran and the entire DWIHN staff for all of their hard work in maintaining and adhering to the policies and procedures of Detroit Wayne Integrated Health Network.

Cash and Investments – comprise of funds held by three (3) investment managers, First Independence CDARS, Comerica, Huntington Bank, and Flagstar accounts. This amount includes the \$21.9 million cash held in collateral for the two building loans.

Due from other governments – comprise various local, state and federal amounts due to DWIHN. Approximately \$7.3 million in SUD and MH block grant due from MDHHS. Approximately \$24.0 million for 3rd quarter 2024 pass- through HRA revenue.

IBNR Payable – represents incurred but not reported (IBNR) claims from the provider network; historical average claims incurred through June 30, 2024, was approximately \$651.6 million however actual payments were approximately \$600.0 million. The difference represents claims incurred but not reported and paid of \$51.6 million.

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

VIII. Unfinished Business – Staff Recommendations: None

IX. New Business – Staff Recommendations: None

X. 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.

XI. Adjournment – There being no further business; The Chair, Ms. Brown called for a motion to adjourn. Motion: It was moved by Ms. Garza Dewaelsche and supported by Ms. Ruth to adjourn the meeting. Motion carried. The meeting was adjourned at 2:28 p.m.

FOLLOW-UP ITEMS 1. None.

PROGRAM COMPLIANCE COMMITTEE

MINUTES	AUGUST 14, 2024	1:00 P.M.	IN-PERSON MEETING	
MEETING CALLED BY	I. Commissioner Jonathan Kinloch, Program Compliance Chair at 1:10 p.m.			
TYPE OF MEETING	Program Compliance Committee			
FACILITATOR	Commissioner Jonathan	ı Kinloch, Chair		
NOTE TAKER	Sonya Davis			
TIMEKEEPER				
2	Committee Members: Bernard Parker; and Wi		athan Kinloch; Dr. Lynne Carter;	
ATTENDEES	Committee Member(s) Excused: Angela	Bullock and Dr. Cynthia Taueg	
ATTENDELS	Staff: Brooke Blackwell; Yvonne Bostic; Judy Davis; Dr. Shama Faheem; Keith Frambro; Monifa Gray; Sheree Jackson; Marianne Lyons; Melissa Moody; Ryan Morgan; Cassandra Phipps (Virtual); April Siebert; Manny Singla; Andrea Smith; Dan West; and Rai Williams			
AGENDA TOPICS				
II. Moment of S	ilence			
DISCUSSION	Commissioner Kinloch	called for a momen	t of silence.	
CONCLUSIONS	A moment of silence wa	as taken.		
III. Roll Call				
DISCUSSION	Commissioner Kinloch	called for a roll call		
CONCLUSIONS	Roll call was taken by L	illian Blackshire, B	oard Liaison and there was a quorum.	

IV. Approval of the Agenda

DISCUSSION/
CONCLUSIONSCommissioner Kinloch called for a motion to approve the agenda. Motion: It was
moved by Dr. Carter and supported by Mr. Parker to approve the agenda.
Commissioner Kinloch asked if there were any changes/modifications to the
agenda. There were no changes/modifications to the agenda. Motion carried.

- A. Adult Initiatives' Quarterly Report Provide information on activities of DWIHN related to caretakers of people with dementia as this had become a huge issue with the aging population; Provide information on Returning Citizens and what we are doing at DWIHN for providing services for the Med Drop program – It was reported that a pilot program has started with MedDrop and Returning Citizens 7 to 10 days prior to release. Members are being linked with a CRSP and they are working with the Department of Corrections.
- **DISCUSSION/ CONCLUSIONS** B. **PIHP Crisis Services' Quarterly Report** – Provide trends on how many people kept their follow-up appointments, if they did not make it to their first appointment; how many people made it to their appointment in 30 days and did not make their follow-up appointment; and how many people did not make their first appointment but made it to their second appointment or rescheduled – It was reported that a sample of 20 members was reviewed; 75% made their first appointment and are continuing to receive services; a SMART Sheet has been developed with the two largest providers and DWIHN will track individuals. A discussion ensued regarding data collection on the disparity between minority groups. Additional information will be provided.

VI. Approval of the Minutes

DISCUSSION/ CONCLUSIONS

Commissioner Kinloch called for a motion to approve the July 10, 2024, meeting minutes. **Motion:** It was moved by Mr. Phillips and supported by Mr. Parker to approve the July 10, 2024, meeting minutes. Commissioner Kinloch asked if there were any changes/modifications to the July 10, 2024, meeting minutes. There were no changes/modifications to the meeting minutes. **Motion carried.**

VII. Reports

- A. **Chief Medical Officer** Dr. Shama Faheem, Chief Medical Officer submitted and gave highlights of the Chief Medical Officer's report. It was reported:
 - 1. **Behavioral Health Education, Outreach Updates** Updates were provided on the Teaching Collaborative; Dr. Faheem has met with the PMHNP Program Director to discuss start dates, supervision expectations and requirements for the PMHNP students; the Program Director for the Child and Adolescent Psychiatry Fellowship will review rotations for the current second year fellow to identify the optimal time for rotation; and a meeting will be scheduled with Trinity Health Livonia to discuss resident rotation during the month of September.
 - 2. **State Medical Director Meetings** State Medical Directors' AOT workgroup met in June and discussed challenges and successes related to AOT and how we can offer clarification or solutions for the State; Medical Directors expressed concerns about the lack of training with certain disciplines that could result in overuse or inappropriate use of AOTs; Training and/or certification options were discussed as possible solutions.
 - 3. Crisis Center Updates DWIHN opened doors to our Crisis Center on June 10th and has had over 200 adult admissions, over 25 youth admissions and our peer-run BEST program had over 35 admissions. The top three primary diagnosis for adults have been Schizophrenia Spectrum Disorder, Depressive Disorders and Alcohol Use Disorders. The top three primary diagnosis for children have been Disruptive and Impulse Control Disorders,

DISCUSSION/ CONCLUSIONS

Depressive Disorder and Trauma Related Disorders. A robust discussion took place on the Crisis Care Center update regarding staffing, the level of training and oversight of individuals treating our members, coaching and other areas. Additional information will be provided at the next Program Compliance Committee meeting when the report of the Crisis Care Center is presented. *(Action)* DWIHN has received provisional State certification and is one of two State Certified Crisis Stabilization Unit for adults.

- 4. **DWIHN Community Care Clinic Updates** DWIHN's Clinic has gone live and started accepting patients. There are currently nine (9) patients. The Adult Psychiatrist/Outpatient Medical Director, Dr. Severe started on June 30, 2024 and the part-time Child Psychiatrist started the first week of August and is currently going through the onboarding, training and credentialing process. The clinic is currently focusing on developing reports through the EMR to be able to track members served, caseload, compliance with State indicators and other Clinic KPIs.
- 5. Improving Practices Leadership Team (IPLT) Committee During the month of August, IPLT reviewed a Performance Improvement Project (PIP) on Hep C that DWIHN has been doing for the last three years encouraging our providers to screen our members for Hep C due to high prevalence of it in Michigan and especially Wayne County. Education was also provided to neighboring FQHC on treatment options and State's efforts to remove prior authorization requirements from medications to encourage treatment as part of the PIP. The goals for some HEDIS measures were lowered based on Michigan Medicaid average. DWIHN initially identified goals that were above 90% of the average for all Health plans.
- 6. **Utilization Management Committee** In the month of June, HAB Waiver utilization was at 100% and plans to sustain the utilization was discussed; there were 717 new inpatient admissions in June 2024 (1.1% increase from 709 admissions in May 2024). Preadmission Reviews (PAR) audits were completed beginning January 1, 2024 and a sampling of 25 charts per month was reviewed.
- 7. Quality Improvement Steering Committee There were multiple annual HSAG audits and deadlines that occurred for the Quality department for the month July 2024 PMV and NAV audit was completed (awaiting results); Racial disparity State PIP submission completed (awaiting results); and Compliance Review standards and evidence was submitted. The remote review is scheduled for August 2024; preparation and mock reviews completed in July 2024.
- 8. Integrated Health Care Department The OBRA team processed 613 referrals; 328 were assigned to be completed and 285 were triaged and provided exemption letters. The team completed 159 full assessments in July and 53 partial assessments with a total of 212 face-to-face contacts for July 2024. This is 31% increase, or 66 more assessments completed than June 2024. The PASARR educator provided training to 22 nursing homes; two hospitals and trained 34 staff. The OBRA team has continued to have a low rate of pended assessments; the pending rate for June is 10% and this remains under the required 24%. The State congruency rate was 98% for the month of June.
- B. **Corporate Compliance** Sheree Jackson, VP of Compliance submitted and gave highlights of the Corporate Compliance report. It was reported:
 - 1. Activity 1: Compliance Investigations FY 24 (Q3), April 1-June 30, 2024, concluded with Compliance averaging 32 investigations per month. During the June 12th report, Compliance indicated that 25 investigations were

pending. Following a risk assessment of each case, 16 cases remain pending and nine (9) have been referred to other DWIHN departments for a focused evaluation. While the five (5) investigations completed between April and June did not uncover any fraud, the investigation did reveal several areas of non-compliance (workforce training, workforce background checks, unsupported clinical documentations, and failure to maintain staffing records). All five (5) providers were placed on plans of corrections and referred to Quality for continuous monitoring. Compliance will conduct quarterly provider training sessions to address areas of non-compliance that are under increased scrutiny beginning October 2024.

2. Quarterly Update – On July 10, 2024, the Attorney General's Office reported that a DWIHN staff member fraudulently billed for services that were not provided. Consequently, the AG's office is seeking prosecution and recovering \$19, 183.19. Compliance noted, this was not a DWIHN employee as mentioned in the article. This case was investigated by the DWIHN Compliance staff and referred to the OIG in July 2023. Additionally, the Direct Care Worker was employed by a self-directed member. Commissioner Kinloch opened the floor for discussion. Discussion ensued. Commissioner Kinloch noted that the Chief Medical Officer and Corporate Compliance reports have been received and placed on file.

VIII. Quarterly Reports

- A. Access Call Center Yvonne Bostic, Director of the Access Call Center submitted and gave highlights of the Access Call Center's quarterly report. It was reported that:
 - 1. Activity 1: Call Center Performance Call Detail Report FY 24 (Q3), there were 44,567 calls handled by the Access Call Center. In an annual comparison of FY 23 (Q3) to FY 24 (Q3), there was a 1.6% increase in the abandonment rate. The department has hired the 10 approved contingent staff; have trained seven (7) and have identified the areas of need.
 - 2. Activity 2: Appointment Availability Hospital Discharge Follow-Up FY 24 (Q3), there was little change in the average of appointment availability for mental health intake and hospital discharge appointments. The greatest increase in appointment availability was for SUD intake appointments. From Q2 to Q3, there was little change in appointment availability for hospital discharge appointments but there was an increase in appointments kept by 2.6%.
 - Activity 3: Accomplishments and Updates (April 2024-June 2024 Department Overviews and Trainings) – Several departments have been trained on the transfer/conference call process for Genesys Cloud Phone System, DWIHN Website and Intranet Site, Infant Mental Health Screenings and Enrollments, Foster Care Screenings and Enrollments; and ASAM Refresher – 100% SUD techs have registered and 85% have completed this training. Opportunities for improvement were also identified.
 Commissioner Kinloch opened the floor for discussion. Discussion ensued.
- B. Innovation and Community Engagement Andrea Smith, Director of Innovation and Community Engagement submitted and gave highlights of the Innovation and Community Engagement's quarterly report. It was reported that:
 - 1. Activity 1: Justice Involved Initiatives There were 149 jail releases in this quarter compared to 75 in Q2; 47 were linked back with their provider for post-release follow-up, which is nearly double that of last

DISCUSSION/ CONCLUSIONS quarter; 13 were sent directly to another correctional facility (i.e., prison or another jail); one (1) was hospitalized; four (4) were on an AOT; and 11 were not assigned to a provider within MH-WIN. Collaboration and communication are strong between the court, hospitals, providers and DWIHN. Staff were able to visit the new jail and tour the space which currently holds space for the DWIHN Jail Navigator to potentially increase referrals to community-based services. There was a total of 796 recorded encounters for the City of Detroit Partnership, Detroit Homeless Outreach Team (DHOT). Services have been expanded to include two Sundays each month from 10am – 2pm and parts of the Eastside and Southwest Detroit. Central City Integrated Health, DPW and DWIHN leadership continue to seek additional funding sources that can be utilized to expand the team and provide additional coverage.

- 2. Activity 2: Senior Wellness This program was initiated in response to the growing challenges faced by older adults. By 2060, nearly one in four Americans are expected to be 65 or older. This quarter, collaborations with two community centers were facilitated to engage with older adults. Two community brunches were held with 43 attendees (22 and 21) to gather information about current concerns and needs. Question, Persuade and Refer (QPR) for older adults was facilitated with 27 staff who described an increase of clients with feelings of hopelessness and despair. Interventions that utilized gardening, art and forums as a strategy to support wellness and dialogue were held. By attending events in the community, 167 individuals received information about services. Continued communication and collaboration will occur with community partners to offer resources and education.
- 3. Activity 3: Workforce Development This year's Integrated Treatment and Co-Occurring Disorders Conference (ITCOD) hosted 85 individuals. In addition to the conference, there was a 3-day Dialectical Behavioral Therapy (DBT) training, A Trauma-Informed CBT training, a Clinical Supervision workshop, and a Women Veterans health and resource workshop. The Summer Youth Employment Program (SYEP) launched fully. A conference has been planned and will take place in the fourth quarter. It is anticipated to have over 550 youths. An update will be provided in the next quarterly report.

Commissioner Kinloch opened the floor for discussion. Discussion ensued.

- C. Residential Services Ryan Morgan, Director of Residential Services submitted and gave highlights of the Residential Services' quarterly report. Mr. Morgan reported on Residential Referral Efficiency and the average # of days from assessment to discharge. The process of assigning cases to staff immediately upon receiving the referral has been adjusted. Staff are required to reach out within 24 hours of receipt to schedule the residential assessment. Residential Assessments completed was 699 there were 324 AMI assessments completed and 375 IDD Assessments completed. Commissioner Kinloch opened the floor for discussion. There was no discussion.
- D. Substance Use Disorder Judy Davis, Director of Substance Use Disorder submitted and gave highlights of the Substance Use Disorder's quarterly report. Ms. Davis reported on the prevention activities of SUD Services. It was noted that the national average indicates that 39.0% of children removed from their homes and placed in out-of-home care had parental alcohol or other drug abuse as an identified condition for removal. For Wayne County for the third quarter of FY 23 and FY 24 there was a notable

increase in the number of children entering services during this period; the number of all children removed in FY 23 were 3 and the number of children removed in FY 24 were 6 which are numbers from the Women's Specialty Programs. To address the increasing percentage of children entering out-ofhome care due to parental alcohol or other drug abuse, there is a need to focus on several key areas. In collaboration with MDHHS, a form will be submitted to the designated staff at DWIHN. The form necessitates "48-hour screenings and turnaround" for accessing SUD services to prevent removal; CPS will submit the form to MDHHS via email; and MDHHS will then forward it to the respective Priority Population (PP) Coordinators at each PIHP. It is the responsibility of each PP Coordinator to report to MDHHS within one week regarding clients who have not completed a screening for SUD services. Staff has actively participated in several health fairs and community events; successfully processed 342 FSRs and paid \$3,595,664.05 in SUD claims for reimbursement; completed the 2024 MDHHS audit preparation on time, due 8/11/2024; and successfully finished the Recipient Rights Training for Advisors within the SUD Network.

Commissioner Kinloch opened the floor for discussion. Discussion ensued.

The Chair noted that the Access Call Center, Innovation and Community Engagement, Residential Services, and Substance Use Disorder's quarterly reports have been received and placed on file.

IX. Cyber Security Status Presentation

DISCUSSION/	The Cyber Security Status Presentation has been deferred.
CONCLUSIONS	The cyber becarley bracker resolution has been abjert out

X. Strategic Plan Pillar - Quality

DISCUSSION/ CONCLUSIONS The Strategic Plan Quality Pillar has been deferred.

XI. Quality Review(s)

DISCUSSION/ CONCLUSIONS There was no Quality Review(s) to report this month.

XII. VP of Clinical Operations' Executive Summary

Melissa Moody, VP of Clinical Operations submitted and gave highlights of the VP of Clinical Operations' Executive Summary. It was reported that the current enrollment of the Behavioral Health Home was 784 and in June it was 740. The Certified Community Behavioral Health Clinic (CCBHC) is expanding to its 3rd cohort of providers, who will launch September 1, 2024. Applications have been submitted and it is expected that MDHHS will announce the selected sites by mid-August. The State indicated with its approved budget it can add up to 12 sites; there are 15 sites eligible for pursuing this certification, 7 are in region 7; and two providers in region 7 withdrew from potential certification.

It was reported that the Utilization Management department had a recent leadership change and Ms. Hampton has been promoted to Interim Utilization Management Director.

DWIHN has been reviewing and discussing the Conflict Free Access and Planning information and guidance that was shared with the PIHP network. It states that the Conflict Free Service Planning activities for HCBS, including the development of the Independent Plan of Service (IPOS), assessment and coordination of services, must be independent from the delivery of HCBS services. Providers, including CMHSPs, can conduct both HCBS service planning and service delivery functions but must not conduct both functions for the same member. This is a large system-wide change and DWIHN is developing a plan that would transition our network to be in line with these requirements in a phased approach to minimize disruption in member care.

Commissioner Kinloch opened the floor for discussion. There was no discussion. The Chair noted that the VP of Clinical Operations' Executive Summary has been received and placed on file.

XIII. Unfinished Business

Commissioner Kinloch, Committee Chair informed the committee that BA #24-01 (Revised 2); BA #24-06 (Revised 8); BA #24-12 (Revised 5); and BA #24-47 (Revised) will be bundled, and a motion would be made after discussion.

- A. BA #24-01 (Revised 2) Children's Initiatives' MDHHS Grants Additional Funding – Staff requesting board approval for the revision of this board action due to additional funding secured by MDHHS for the following grants:
 - Grant #1: Regarding FY 24 System of Care Grant, due to underutilization of funds requesting reallocation of \$11,000.00 from Lincoln Behavioral Services (Parent Management Training Oregon (PMTO) Program) to The Children's Center (Youth United Program);
 - 2. Grant #2: For FY 24, MDHHS has increased the funding for IECMHC from a total of \$192,486.00; in which Development Center received \$189,986.00 and DWIHN received \$2,500.00 for indirect costs. As of July 2024, MDHHS has provided additional funding of a total \$283,806.00; in which Development Centers will be allotted \$281,306.00 and DWIHN to be allotted \$2,500.00 for indirect costs. Development Centers will be receiving a total increase of \$91,320.00 in funding to support additional staffing; and
 - 3. Grant #5: For FY 24, MDHHS has increased the funding for the Infant Toddler Court Grant from a total of \$116,673.00 to the amended amount of \$2,200.00 additional funds to equal the total allocation of \$118,873.00. There is no change to the Infant and Early Childhood Mental Health Consultation-Home Visiting (Grant #3) - \$123,943.00 (\$2,500.00 DWIHN). There is no change to the Infant and Early Childhood Mental Health Consultation Expansion (Grant #4) \$210,202.00, (\$5,000.00 DWIHN).
 Commissioner Kinloch opened the floor for discussion. There was no discussion.
- B. **BA #24-06 (Revised 8)** DWIHN Provider Network System FY 23/24 Staff requesting board approval for the addition of the following three (3) providers

DISCUSSION/ CONCLUSIONS

to the DWIHN Provider Network – 2-Residential Provider (Betterlife Caring Hands, LLC and Greater Grace Health System, Inc.) and 1- Outpatient Provider (Volunteers of America Michigan, Inc.). This board action requires no budget increase due to the reallocation of funds within the total budget. Commissioner Kinloch opened the floor for discussion. There was no discussion. **Motion carried.**

- C. BA #24-12 (Revised 4) Substance Use Disorder (SUD) Treatment Provider Network FY 24 – 5th Annual Men's Conference – Staff requesting board approval for \$50,000.00 in PA2 funds payable to Sobriety House, Inc. to support the Annual Men's Conference on August 21, 2024. The conference aims to enhance members' goals and provide community resources and support. Commissioner Kinloch opened the floor for discussion. There was no discussion.
- D. BA #24-47 (Revised) MI Health Link Demonstration Project FY 24 Staff requesting board approval for a two-year continuation contract through December 31, 2025 with five Integrated Care Organizations (ICO) to receive and disburse Medicare dollars to reimburse the Affiliated Providers for an estimated amount of \$24,000,000.00. MDHHS has extended the MI Health Link Pilot project through 12/31/25 at which time they will implement and launch an Integrated Dual Eligibles Special Needs Pan Model by January 1, 2026. Commissioner Kinloch opened the floor for discussion.

The Chair called for a motion on BA #24-01 (Revised 2); BA #24-06 (Revised 8); BA #24-12 (Revised 5); and BA #24-47 (Revised). **Motion:** It was moved by Mr. Parker and supported by Mr. Phillips to move BA #24-01 (Revised 2); BA #24-06 (Revised 8); BA #24-12 (Revised 5); and BA #24-47 (Revised) to Full Board for approval. Commissioner Kinloch opened the floor for further discussion. There was no further discussion. **Motion carried.**

XIV. New Business: Staff Recommendation(s)

DISCUSSION/

CONCLUSIONS

A. BA #24-40 - Community Policing Development - City of Detroit COPS CIT -Staff requesting board approval for a budget adjustment to certify the additional funds serve as board acknowledgement of such grant funds. The City of Detroit is the recipient of a FY 21 Community Policing Development - Crisis Intervention Teams, CIT Implementation Grant from the Department of Justice in the amount of \$64,800.00. This award supports the expansion of Detroit's Mental Health Co-Response Program, a partnership between the Detroit Police Department, Detroit Wayne Integrated Health Network and the City of Detroit Housing and Revitalization Department that works to reduce the use of emergency services for mental health related needs in favor of effective treatment of the root cause. DWIHN is the Pre-paid Inpatient Health Plan and Community Mental Health Service Program partner. Federal grants funds totaling \$64,800.00 will be used to cover CIT training costs and educational supplies through August 31, 2024.

The Chair called for a motion on BA #24-40. **Motion:** It was moved by Mr. Parker and supported by Dr. Carter to move BA #24-40 to Full Board for

approval. Commissioner Kinloch opened the floor for discussion. There was no discussion. **Motion carried.**

XV. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS C.N.W., a parent of a DWIHN member addressed the committee regarding concerns of her son's services and experience with a provider and at the Crisis Center. She has requested from the committee assistance with getting her son into an extended program. The parent was directed to speak with DWIHN's Customer Service Director for assistance.

	ACTION ITEMS	Responsible Person	Due Date
1.	Chief Medical Officer's Report – Provide update on the Crisis Care Center's staffing, the level of training and oversight of individuals treating our members, coaching and other areas.	Grace Wolf	September 11, 2024

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Mr. Parker and supported by Dr. Carter to adjourn the meeting. **Motion carried. ADJOURNED:** 3:14 p.m. **NEXT MEETING:** Wednesday, September 11, 2024 at 1:00 p.m.

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: <u>22-39R3</u> Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Floyd E. Allen & Associates, PC

Contract Title: <u>Allen Law Group PC</u>

Address where services are provided: 'None'

Presented to Executive Committee at its meeting on: 9/16/2024

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

Amount of Contract: <u>\$ 845,000.00</u> Previous Fiscal Year: <u>\$ 585,000.00</u>

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2021

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 Detroit Wayne Integrated Health Network ("DWIHN") is requesting an extension of the existing Agreement between DWIHN and the Allen Law Group. The current term is ending on September 30, 2024. As such, the requested extension will extend the Agreement for legal services through September 30, 2025 in an amount not to exceed \$260,000; bringing the total 3-year contract to \$845,000.

The Allen Law Group has a unique understanding of DWIHN's business and provides expertise in employment law, labor negotiations and other projects as assigned. In addition to transactional legal matters, ALG continues to assist in matters related to standing up the Crisis Centers, the purchase of the Catholic Charities property, negotiating leases and providing litigation and arbitration support as needed, advising on the CEO search and Labor negotiations. ALG will continue to supplement the Legal Department and has agreed to a monthly flat rate fee for agreed upon non-litigation matters (litigation and arbitration, if any, will be billed hourly). ALG will provide DWIHN with access to at least two (2) attorneys under this Agreement. The flat rate results in major cost savings to DWIHN. The Allen Law Group has previously provided legal services to DWIHN and are familiar with DWIHN's business operations. George Pitchford will be the primary attorney providing services. It is in the best interest of DWIHN to continue to utilize their services. Outstanding Quality Issues (Y/N)? <u>N</u> If yes, please describe:

Source of Funds: Multiple

Fee for Service (Y/N): \underline{N}

Revenue	FY 23/24	Annualized
MULTIPLE	\$ 845,000.00	\$ 845,000.00
	\$	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64916.814000.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Stacie Durant

Signature/Date:

Manmohan Singla

Signed: Thursday, September 12, 2024

Signed: Thursday, September 12, 2024

Board Action Taken

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison Date: September 18, 2024

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 23-18R2 Revised: Y Requisition Number: Presented to Full Board at its Meeting on: 9/18/2024 Name of Provider: Global Solutions Group Inc Contract Title: 2nd Extension: Virtual Chief Information Security Officer for Continuous Comprehensive Cybersecurity Risk Assessment Address where services are provided: None___ Presented to <u>Finance</u> Committee at its meeting on: 9/4/2024 Proposed Contract Term: 10/1/2024 to 9/30/2025 Amount of Contract: \$ 374,664.00 Previous Fiscal Year: \$ 249,776.00 Program Type: <u>Continuation</u> Projected Number Served- Year 1:__ Persons Served (previous fiscal year): Date Contract First Initiated: 10/1/2022 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).

DWIHN is requesting approval to exercise the second of three one-year renewal options with Global Solutions Group, Inc. to retain a Virtual Chief Information Security Officer, to develop a complete set of information technology and security policies adequate to meet audit requirements, along with delivering a comprehensive risk assessment to identify gaps in physical, technical and administrative controls and provide recommendations for remediation, actions or plans to eliminate or prevent further occurrences.

This renewal will extend the contract an additional year through September 30, 2025, with a FY 2025 cost not to exceed \$124,888 and a total contract cost not to exceed \$374,664.

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

Source of Funds: Multiple

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
Multiple	\$ 374,664.00	\$ 374,664.00
· · · · · · · · · · · · · · · · · · ·	S	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64915.817000.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Friday, August 30, 2024

Signature/Date:

Stacie Durant

Signed: Thursday, August 29, 2024

Board Action Taken

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison Date: September 18, 2024

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 23-25R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Westcomm Inc

Contract Title: Social Media Management Services - Westcomm

Address where services are provided: None____

Presented to Finance Committee at its meeting on: 9/4/2024

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

Amount of Contract: \$296,100.00 Previous Fiscal Year: \$197,400.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2022

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 Detroit Wayne Integrated Health Network is requesting approval of a contract renewal between DWIHN and Westcomm Inc. to provide Social Media Management services for one year period beginning October 1, 2024 through September 30, 2025.

In July 2022, an RFP 2022-007 process began in which Westcomm was chosen over four other qualified companies with a score of 298 points out of a possible 300. It was recommended the company be awarded a one-year contract with three one-year renewal options for a total amount not to exceed \$98,700 annually. This is the second year of the three-year renewal.

The partnership includes social media management services such as creating engaging and relevant content at least 3-5 times per week on various and appropriate channels including Facebook, Instagram, Twitter, Linked In, Snap Chat and Tik Tok. Westcomm Inc. also manages and creates paid search and display ads to reach target audiences including a younger demographic.

Board approval is requested to extend the agreement at a cost of not to exceed \$98,700, for a period of one year through September 30, 2025.

Board Action #: <u>23-25R2</u>

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

Source of Funds: <u>Multiple</u>

Fee for Service (Y/N):

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 296,100.00	\$ 296,100.00
	\$	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.817000.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Friday, August 30, 2024

Stacie Durant

Signed: Friday, August 30, 2024

Board Action Taken

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison Date: September 18, 2024

DETROIT WAYNE INTEGRATED HEALTH NETWORK BOARD ACTION

Board Action Number: 23-30R Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Public Affairs Associates, LLC

Contract Title: Lobbyist Services - Public Affairs Associates

Address where services are provided: None____

Presented to Finance Committee at its meeting on: 9/4/2024

Proposed Contract Term: <u>10/1/2024</u> to <u>9/30/2026</u>

Amount of Contract: <u>\$400,000,00</u> Previous Fiscal Year: <u>\$200,000,00</u>

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2017

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).

DWIHN Administration is requesting to modify BA #23-30 with Public Affairs Associates (PAA). PAA continues to work in conjunction with DWIHN staff and board members for government and legislative services. As we are in the midst of key projects that still need major lobbying efforts, such as our multiple crisis facilities, behavioral healthcare campus, CCBHC and direct outpatient services, having any change in our lobbying efforts would cause devastating effects to these projects.

PAA has been a critical piece to DWIHN's legislative plan in working with the MDHHS and Lansing leadership that has garnered us unprecedented success with the award of \$66 million in grant funding to build an integrated behavioral healthcare campus and expand our crisis care services.

We are requested a two year extension at \$100,000 annually, for a total of \$200,000 for the two-year period, through September 30, 2026. The total contract is not to exceed \$400,000 with the two-year extension through 9/30/2026.

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

Source of Funds: Local Funds

Fec for Service (Y/N):

Revenue	FY 24/25	Annualized
Local Funds	\$ 400,000.00	\$ 400,000.00
	S	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64910.817003.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Friday, August 30, 2024

Stacie Durant

Signed: Friday, August 30, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-01</u> Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Detroit Wayne Integrated Health Network

Contract Title: Multicultural Integration Programs

Address where services are provided: 707 W. Milwaukee, Detroit, MI 48202___

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$730,630.00 Previous Fiscal Year: \$836,920.00

Program Type: Continuation

Projected Number Served- Year 1: <u>1,000</u> Persons Served (previous fiscal year): <u>900</u>

Date Contract First Initiated: 10/1/2024

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).

The Detroit Wayne Integrated Health Network (DWIHN) is requesting approval of the memorandums of understanding between Community Mental Health Association of Michigan (CMHAM), Michigan Department of Health and Human Services (MDHHS) and Pre-paid Insurance Health Plan (PIHP) for the PIHP Veteran Navigator (PIHP VN), Peer Navigator, Navigator Assistant and the Multicultural Integration Providers formerly known as the Multicultural Programs.

The Multicultural Integration vendors were selected through MDHHS to provide services for the "Priority Population" who were identified as high risk. The services that will be performed will include outpatient services, case management services, psycho-behavioral treatment, outreach, mental health services, referrals, coordination and treatment services, mental health treatment for victims of trauma, poverty and parental abandonment, Drop-In Center availability, preventive community based mental health service options and assistance with the Healthy Michigan enrollment process.

The duties for the PIHP Veteran Navigator are to identify resources and making linkages in the PIHP region appropriate for Veteran and Military Families (V/MFs), making appropriate referrals, coordinating care, providing follow up and either directly providing or assuring wraparound services are available. Those duties will be conducted through a variety of means and will involve performing basic assessment of needs and planning to address the needs of the V/MF. The PIHP VN will continually assess the quality of services provided, vet organizations for quality delivery to V/MFs and make referrals for V/MFs. The Veteran Navigator will also have the assistance of a Peer Navigator and a Navigator Assistant.

Revenue for these services is supported by E-Grants & Management Systems (EGrAMS) categorical funds for Ethnic Services. The amount of this proposed term of this Memorandums of Understanding is October 1, 2024, through September 30, 2025, and will not exceed \$730,630.00.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>Y</u>

Revenue	FY 24/25	Annualized
MDHHS Grant	\$ 711,930.00	\$ 711,930.00
State General Funds	\$ 18,700.00	\$ 18,700.00
Total Revenue	\$ 730,630.00	\$ 730,630.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board: Manmo-han Singla

Stacie Durant

Signed: Thursday, Sentember 5a2024

Signed Stralas day in Sebier Fiberus, 2024cer

Signature/Date:

Signature/Date:

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-02 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: DWIHN SUD Department

Contract Title: Substance Use Disorder- Treatment Network

Address where services are provided: see attachment

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$4,542,882.00 Previous Fiscal Year: \$7,951,781.00

Program Type: New

Projected Number Served-Year 1: 15,000 Persons Served (previous fiscal year): 15000

Date Contract First Initiated: 10/1/2024

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).

The SUD Department is requesting approval to contract for the delivery of Substance Use Disorder Treatment Services for the 2025 fiscal year with a total budget not to exceed \$4,542,882.

Treatment services will be funded with Federal Block Grant dollars (\$3,121,782) and PA2 funds (\$1,421,100), together totaling \$4,542,882.

It should be emphasized that the SUD Treatment, Women's Specialty Services (WSS) and State Disability Assistance (SDA) block grant for claims-based activity based on medical necessity and is included in the overall provider network board action therefore the below amounts do not reflect the entire SUD treatment, SDA and WSS grant allocation from MDHHS.

Treatment programs and amounts are summarized below:

Block Grant Funds (\$3,121,782) •Women's Specialty Services: \$665,000 •ARPA: \$721,739 •SOR IV: \$1,475,043 •Media efforts: \$260,000

PA2 Funds (\$1,421,100)

The Substance Use Disorder Department offer a range of services to support individuals on their journey to recovery. From withdrawal management to outpatient services, including FDA approved Medication Assisted Treatment. SUD programs include residential services, intensive outpatient, dual diagnosis day treatment, case management, recovery housing, early intervention services, relapse prevention, peer recovery services, intensive wraparound program, communicable disease program, and healthy outreach.

Additionally, we organize events including the Opioid Summit, Faith-Based Conference, Recovery Walk, Women and Men's Annual Conferences along with providing Narcan, Yoga and communicable disease prevention services

The Detroit Wayne Integrated Health Network 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 \$4,542,882.

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

Source of Funds: Block Grant, PA2

Fee for Service (Y/N): \underline{Y}

Revenue	FY 24/25	Annualized
Block Grant	\$ 3,121,782.00	\$ 3,121,782.00
PA2	\$ 1,421,100.00	\$ 1,421,100.00
Total Revenue	\$ 4,542,882.00	\$ 4,542,882.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Board Action #: 25-02

Manmohan Singla

Stacie Durant

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-03 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: DWIHN SUD Department

Contract Title: Substance Use Disorder- Prevention Network

Address where services are provided: see attached list

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: <u>\$ 6,147,683.00</u> Previous Fiscal Year: <u>\$ 6,501,847.00</u>

Program Type: New

Projected Number Served- Year 1: 35,000 Persons Served (previous fiscal year): 35000

Date Contract First Initiated: 10/1/2024

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).

DWIHN is requesting to contract for the fiscal year 2025 for an amount not to exceed \$6,147,683 for the delivery of Substance Use Disorder prevention services.

The following prevention programs have been granted funding from MDHHS for fiscal year 2025:

Block Grant - \$3,442,608)

•SUD Prevention Services: \$2,789,425 •Gambling Prevention: \$173,913 •SOR IV: \$350,000 •ARPA: \$125,270 •Tobacco Prevention: \$4,000

PA2 - \$2,705,075

The prevention services are funded with \$3,442,608 of Federal Block Grant dollars and \$2,705,075 of PA2 funding totaling in \$6,147,683.

DWIHN SUD Prevention network will engage in one or more of the 6 CSAP Primary Strategies: seamless Information Dissemination throughout all strategies; offering Alternatives and Community-Based services to foster

Board Action #: 25-03

prevention-prepared communities; conducting capacity-building education and direct services; advocating for environmental change; and streamlining problem identification and referral mechanisms. Moreover, we aim to bolster school-based programming, leveraging peer-to-peer pro-social services, elevating public awareness, and mobilizing communities to counter alcohol, tobacco, and other drug-related issues. This includes advocating for environmental and legislative changes to mitigate underage and alcohol-related activities' consequences. To address the opioid crisis, state opioid response programs will benefit from MDHHS funding, focusing on evidence-based practices, overdose education, naloxone distribution, harm reduction, and peer outreach connections.

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 \$6,147,683 for the fiscal year ending September 30, 2025.

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

Source of Funds: Block Grant, PA2

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Block Grant	\$ 3,442,608.00	\$ 3,442,608.00
PA 2	\$ 2,705,075.00	\$ 2,707,075.00
Total Revenue	\$ 6,147,683.00	\$ 6,149,683.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Manmohan Singla

Signed: Thursday, September 5, 2024

Stacke Durant

Signed: Wednesday, September 4, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-04 Revised: Requisition Number:

Presented to Full Board at its Meeting on: <u>9/18/2024</u>

Name of Provider: Variety Food Services Inc

Contract Title: 707 Food Service

Address where services are provided: 707 W Milwaukee Ave Detroit, MI 48202

Presented to Program Compliance Committee at its meeting on: 9/11/2024

Proposed Contract Term: 10/1/2024 to 9/30/2027

Amount of Contract: <u>\$ 586,967.48</u> Previous Fiscal Year: <u>\$ 0.00</u>

Program Type: New

Projected Number Served-Year 1: 3,000 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 8/14/2024

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).

Detroit Wayne Integrated Health Network (DWIHN) is requesting a three-year contract (with a 2-year renewal option) with Variety Food Services, Inc (selected under RFP #2024-019) to provide a Meal Program and Delivery Services to individuals served at the Care Center. The contract term is from **October 1**, **2024 through September 30**, **2027**. The contract amount shall not exceed \$586,967.48 for the duration of 3 years.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>N</u>

Revenue	FY 23/24	Annualized
Multiple	\$ 586,967.48	\$ 586,967.48
*	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical):

ACCOUNT NUMBER: 64950.817100.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer Signature/Date: Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Wednesday, August 28, 2024

Stacie Durant

Signed: Wednesday, August 28, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-06</u> Revised: Requisition Number:
Presented to Full Board at its Meeting on: <u>9/18/2024</u>
Name of Provider: DWIHN Provider Network - see attached list
Contract Title: <u>FY25 Jail Diversion</u>
Address where services are provided: <u>'None'</u>
Presented to <u>Program Compliance</u> Committee at its meeting on: <u>9/11/2024</u>
Proposed Contract Term: <u>10/1/2024</u> to <u>9/30/2025</u>
Amount of Contract: <u>\$ 1,305,000.00</u> Previous Fiscal Year: <u>\$ 1,305,000.00</u>
Program Type: <u>Continuation</u>
Projected Number Served- Year 1:<u>_3,200</u> Persons Served (previous fiscal year): <u>3000</u>
Date Contract First Initiated: <u>10/1/2020</u>

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 is requesting a continuing contract with the following providers for jail diversion programs: Central City Integrated Health (CCIH) - Homeless Outreach; CNS Healthcare - Co-Responder Program; Team Wellness - Co-Responder Program and City of Southgate 28th District Court Regional Veterans Treatment Court. The total amount is not to exceed \$1,305,000 of which \$905,000 will be allocated to providers with the remaining \$400,000 allocated to DWIHN to fund Behavioral Health Specialists. Funding breakdown is as follows:

<u>\$225,000 Central City Integrated Health</u>: CCIH is continuing with Detroit Homeless Outreach (DHOT) program, to bridge the gaps that exist between the police, homeless, and service providers.

<u>\$300,000 CNS HealthCare and \$300,000 Team Wellness:</u> Providers CNS Healthcare and Team Wellness will continue a Co-Response Program model in multiple precincts within the Detroit Police Department. The program is founded on the basis that by working together, behavioral health specialists and law enforcement can respond appropriately to the needs of individuals in the community who are in crisis.

<u>\$80,000 Southgate 28th District Veterans Court:</u> The City of Southgate 28th District Court Downriver Regional Veterans Treatment Court is a jail diversion program for individuals who have served in the United States Armed

Services. Participants will receive mental health treatment; peer support; judicial supervision; medication; job placement; and education.

<u>\$400,000 DWIHN Staffing (salaries and fringes)</u>: Behavioral Health Specialists will be allocated to local police departments to assist in patrolling hot spot locations frequented by homeless, with mental health or substance abuse issues.

Funds can be reallocated amongst providers should the need arise so long as the total does not exceed \$1.305,000 for the fiscal year ending September 30, 2025.

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

Source of Funds: Medicaid

Fee for Service (Y/N): <u>N</u>

Revenue	FY 24/25	Annualized
Medicaid	\$ 1,305,000.00	\$ 1,305,000.00
		\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical):

ACCOUNT NUMBER: 64941.827206.00005

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer Signature/Date: Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Monday, September 9, 2024

Stacie Durant

Signed: Monday, September 9, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-07 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: FY25 CBH

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$ 523,908.00 Previous Fiscal Year: \$ 616,956.00

Program Type: Continuation

Projected Number Served- Year 1: 1.600 Persons Served (previous fiscal year): 1500

Date Contract First Initiated: 10/1/2022

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 Detroit Wayne Integrated Health Network ("DWIHN") is requesting approval to use block grant dollars for several vendors, individuals and projects approved by the Michigan Department of Health and Human Services (MDHHS) through the Comprehensive Services for Behavioral Health – 2024/25 Block Grant.

Notification was received from MDHHS approving **\$523,908** for the below-referenced programs which cover the grant period of October 1, 2024 to September 30, 2025. A list of vendors is enclosed.

Amount (Program):

- \$22,500 (Drop-In Centers),
- \$270,000 (Integrated Treatment with Co-occurring Disorders),
- \$120,000 (Trauma Informed Care),
- \$51,408 (Clubhouse Engagement), and
- \$60,000 (Senior Wellness)

Funds within each program may be reallocated amongst vendors/ contractors should the need arise so long as the total does not exceed the amount allocated to each program.

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

Source of Funds: Block Grant

Fee for Service (Y/N): <u>N</u>

Revenue	FY FY25	Annualized
Block Grant	\$ 523,908.00	\$ 523,908.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Sunday, September 8, 2024

Stacie Durant

Signed: Friday, September 6, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-10</u> Revised: Requisition Number:
Presented to Full Board at its Meeting on: <u>9/18/2024</u>
Name of Provider: Arab Community Center for Economic & Social Services
Contract Title: <u>Behavioral Health Home FY 2025</u>
Address where services are provided: <u>Multiple</u>
Presented to <u>Program Compliance</u> Committee at its meeting on: <u>9/11/2024</u>
Proposed Contract Term: <u>10/1/2024</u> to <u>9/30/2025</u>
Amount of Contract: <u>\$ 1.350,000.00</u> Previous Fiscal Year: <u>\$ 1.350,000.00</u>
Program Type: <u>Continuation</u>
Projected Number Served- Year 1: <u>1,000</u> Persons Served (previous fiscal year): <u>784</u>
Date Contract First Initiated: <u>5/1/2022</u>
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 presented to request continuation of Behavioral Health Home (BHH) Services in Wayne County with the following existing BHH providers: Arab Community Center for Economic and Social Services (ACCESS), Community Living Services, CNS Healthcare, The Guidance Center, Hegira Health, Inc., Psygenics, Inc., and Team Mental Health Services (DBA Team Wellness Center).

The providers listed submitted a BHH certification packet which DWIHN developed in consultation with the National Council on Mental Wellbeing. The certifications were reviewed and approved by DWIHN's Health Home Director. The certifications outline the provider's ability to meet BHH organizational and program requirements. Topics addressed in the certifications include confirming providers meet basic MDHHS and Medicaid requirements.

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. The total amount for FY 2025 is approximately \$1,350,000.

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

Source of Funds: Medicaid

Fee for Service (Y/N): \underline{N}

Revenue	FY 24/25	Annualized
MULTIPLE	\$ 1,350,000.00	\$ 1,350,000.00
	\$	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Manmohan Singla

Stacie Durant

Signed: Wednesday, August 28, 2024

Signed: Wednesday, August 28, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-11</u> Revised: N Requisition Number:
Presented to Full Board at its Meeting on: <u>9/18/2025</u>
Name of Provider: Star Center Inc.
Contract Title: <u>SUD Health Home FY2025</u>
Address where services are provided: <u>'None'</u>

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$918,000.00 Previous Fiscal Year: \$918,000.00

Program Type: Continuation

Projected Number Served-Year 1: 1,000 Persons Served (previous fiscal year): 661

Date Contract First Initiated: 10/1/2021

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 DWIHN Health Homes team is requesting approval of a Comparable Source Contract between Detroit Wayne Integrated Health Network and the following Service Providers to continue SUD Health Home (SUDHH) Services in Wayne county: Hegira Health, Inc., Metro-East Drug Treatment Corporation, Nardin Park Recovery Center, Inc., New Light Recovery Center, Inc., Quality Behavioral Health, Inc., Rainbow Center of Michigan, Inc., Sobriety House, Star Center, Inc., and The Guidance Center. SUD Health Home was known as "Opioid Health Home" previously but is changing its name and expanding qualifying diagnoses to a more expansive "SUD Health Home" for FY 2025.

The amounts listed for each provider are estimates based on prior year activity and are subject to change. Amounts may be reallocated amongst providers without board approval. **The amount for FY 2025 is approximately \$918,000.**

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

Source of Funds: Medicaid

Fee for Service (Y/N): <u>N</u>

Revenue	FY 24/25	Annualized
Medicaid	\$ 918,000.00	\$ 918,000.00

	S	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla Stacie Durant

Signed: Wednesday, August 28, 2024

Signed: Wednesday, August 28, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-12 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Michigan Rehabilitation Service

Contract Title: Michigan Rehabilitation Services (MRS)

Address where services are provided: 17411 Grand River, Detroit, MI 48227____

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$443,565.00 Previous Fiscal Year: \$443,565.00

Program Type: Continuation

Projected Number Served- Year 1: 1,620 Persons Served (previous fiscal year): 2079

Date Contract First Initiated: 10/1/2024

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 Board Action request a one year contract for the fiscal year ending September 30, 2025 for the continued funding for an Interagency Cash Transfer Agreement (ICTA) between Detroit Wayne Integrated Health Network (DWIHN) and Michigan Rehabilitation Services (MRS) for the amount of \$443,565.00. The agreement was established in 1994 as a means to increase member access to MRS thereby enabling members to become employed and self sufficient. DWIHN funding of \$443,565.00 combined with MRS ICTA Federal Share revenue of \$1,199,268.00 brings the program total revenue to \$1,642,833.00 for Wayne County.

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

Source of Funds: General Fund

Fee for Service (Y/N): <u>N</u>

Revenue	FY 24/25	Annualized
State General Fund	\$ 443,565.00	\$ 443,565.00
	S	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.07226

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Manmohan Singla

Signed: Tuesday, September 3, 2024

Stacie Durant

Signed: Monday, September 2, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-13 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: DWIHN Provider Network - see attached list

Contract Title: Provider Network System FY 24/25

Address where services are provided: Service Provider List Attached

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: <u>\$ 853,432,628.00</u> Previous Fiscal Year: <u>\$ 805,847,768.00</u>

Program Type: Continuation

Projected Number Served-Year 1: 77,000 Persons Served (previous fiscal year): 75,943

Date Contract First Initiated: 10/1/2018

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).

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval for continued funding for the Provider Network System for the fiscal year ending September 30, 2025.

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 based on prior year activity and are subject to change.

The board action amounts include: Mental health treatment services, SUD claims based Medicaid, HMP, Women Specialty Services, State Disability Assistance and block grant treatment, Behavioral Health Home and Opioid Health Home services which are supplemental, voluntary services that Medicaid members with specific diagnoses may opt into to receive comprehensive care coordination facilitated by a health home care team and EBSE claims based activity.

In addition, it should be noted that the hospitals listed under HRA change based on consumers stay. As such, hospitals may be added and amounts reallocated without board approval to avoid delay of payment; the funds are a pass through from MDHHS.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>Y</u>

Revenue	FY 24/25	Annualized
Multiple	\$ 853,432,628.00	\$ 853,432,628.00
	\$	\$
Total Revenue	\$	S

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:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Wednesday, September 4, 2024

Stacie Durant

Signed: Tuesday, September 3, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-14 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: HealthStream, Inc.

Contract Title: Credentialing Verification Organization

Address where services are provided: 500 11th Avenue North Suite 1000, Chicago, IL 60606

Presented to Program Compliance Committee at its meeting on: 9/11/2024

Proposed Contract Term: 9/1/2024 to 9/30/2027

Amount of Contract: <u>\$ 500,000.00</u> Previous Fiscal Year: <u>\$ 0.00</u>

Program Type: Continuation

Projected Number Served-Year 1: 3,400 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 9/1/2024

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).

DWIHN is requesting approval of this board action for a **three (3) years contract effective September 1, 2024 through September 30, 2027 for an amount not to exceed \$500,000 with HealthStream, Inc**, in response to the Credentialing Verification Organization RFP #2024-017 issued in May 2024, for a National Committee for Ouality Assurance accredited Credentialing Verification Organization.

HealthStream primary source verifies Medicaid and Medicare sanctions, licensure, work history, malpractice history, education and training for practitioners and providers. In addition HealthStream conducts continuous monitoring of DEA licenses, Office of Inspector General and System for Award Management sanctions, and licensure. All HealthStream activities are electronic. After the DWIHN Credentialing Committee meets and make appropriate disposition HealthStream will send Credentialing/Re-Credentialing letters and certificates to providers or practitioners. HealthStream also has the capabilities to share all credentialing data with the State of Michigan's Universal Credentialing CRM platform and is being utilized by other PIHPs, creating synergies of a single solution. The contract ensures that DWIHN is compliant with the credentialing requirements delineated in 42 Code of Federal Regulations 422.204, their executed agreements with MDHHS and the five Integrated Care Organizations.

Currently DWIHN is under contract with Mediversant to assist with credentialing. DWIHN will remain in contract with the vendor and will transition the services over the course of the year.

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

Source of Funds: Multiple

Fee for Service (Y/N): N

Revenue	FY 24-27	Annualized
Multiple	\$ 500,000.00	\$ 500,000.00
	S	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64934.827211.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Tuesday, September 3, 2024

Stacie Durant

Signed: Tuesday, September 3, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-15</u> Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Guidance Center, The, New Oakland Child Adolescent and Family Ctr, Safehaus, Inc

Contract Title: Childrens Crisis Intervention Services - FY25 Provider Network

Address where services are provided: Multiple____

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$1,800,000.00 Previous Fiscal Year: \$1,800,000.00

Program Type: Continuation

Projected Number Served-Year 1: 3,500 Persons Served (previous fiscal year): 3000

Date Contract First Initiated: 1/1/2016

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 asking for a continuation of the contract with New Oakland Family Centers (NOFC), Safehaus, Inc and The Guidance Center (TGC) for \$1,800,000 to continue with the provision of Crisis Intervention Services. The amount is an estimate and may not reflect the actual costs for the fiscal year.

As a result of the crisis continuum of care RFP, this board action is requesting approval for the provision of Pre-Admission Review (PAR) services and Mobile Intensive Crisis Stabilization Services (ICSS) for children.

This board action is also requesting a continuation of Safehaus, Inc crisis residential unit (CRU) services for children.

The Guidance Center and New Oakland Family Centers will provide pre-admission screening services for youth in crisis with severe emotional disturbance (SED) and intellectual and developmental disabilities (I/DD) designations. PAR services include 24-hour availability to provide assessment and screening services for individuals to determine if members meet inpatient criteria or re-direction to lower levels of care.

New Oakland Family Centers will provide Intensive Crisis Stabilization Services (ICS) to children in need of ongoing support and stabilization in the community. The service is intended to provide a short term alternative to inpatient psychiatric services with community stabilization and supports.

Safehaus, Inc will provide crisis residential unit (CRU) services for children in crisis. CRUs provide services that are a short-term alternative to inpatient psychiatric services, and are designed for a subset of youth that meet psychiatric inpatient admission criteria, or who are at risk for admission, but can be appropriately served in settings less intensive than a hospital.

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

Source of Funds: Multiple

Fee for Service (Y/N): \underline{Y}

Revenue	FY 24/25	Annualized
Multiple	\$ 1,800,000.00	\$ 1,800,000.00
	S	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Monday, August 26, 2024

Stacie Durant

Signed: Monday, August 26, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-16</u> Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Hegira Health Inc., Team Mental Health Services

Contract Title: Adult Crisis Intervention Services

Address where services are provided: Multiple

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$9,400,000.00 Previous Fiscal Year: \$9,400,000.00

Program Type: Continuation

Projected Number Served- Year 1: 11,000 Persons Served (previous fiscal year): 10500

Date Contract First Initiated: 1/1/2016

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 asking for a continuation of the contract with Hegira Health, Inc Community Outreach for Psychiatric Emergencies (COPE) and Team Wellness Centers, for \$9,400,000 to continue with the provision of Crisis Intervention Services. The contract is a fee for service therefore the amount is an estimate and may not reflect the actual costs for the fiscal year.

As a result of the crisis continuum of care RFP, this board action is requesting approval for the provision of Crisis Stabilization Units (CSU), Pre-Admission Review (PAR) services, and Mobile Intensive Crisis Stabilization Services (ICSS) for adults.

CSU services will be provided by Hegira Health (COPE) and Team Wellness. CSUs provide walk-in crisis assessments related to both mental health and substance use and function as a Pre-admission screening unit. CSUs are responsible for crisis assessment 24/7 and coordination across multiple systems of care.

Hegira Health will provide Intensive Crisis Stabilization Services (ICS) to adult members in need of ongoing support and stabilization in the community. The service is intended to provide a short term alternative to inpatient psychiatric services with community stabilization and supports.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>Y</u>

Revenue	FY 24/25	Annualized
Multiple	\$ 9,400,000.00	\$ 9,400,000.00
¥	\$	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer Signature/Date: Stacie Durant, Vice President of Finance Signature/Date:

Manmohan Singla

Signed: Tuesday, August 27, 2024

Stacie Durant

Signed: Tuesday, August 27, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-17</u> Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Black Family Development

Contract Title: Children's Initiative MDHHS Grants

Address where services are provided: 2995 Grand Blvd. Detroit Mi. 48202____

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$1,698,755.00 Previous Fiscal Year: \$1,780,406.00

Program Type: Continuation

Projected Number Served-Year 1: 12,200 Persons Served (previous fiscal year): 12095

Date Contract First Initiated: 10/1/2017

Provider Impaneled (Y/N)? \underline{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 contracts effective October 1, 2024, through September 30, 2025, for the following providers:

1. \$1,043,582 for the System of Care Block Grant. The System of Care Block Grant expands the capacity of Connections Wayne County's System of Care to support the needs of the most complex children and youth with serious emotional disturbance (SED) served within Wayne County's Public Mental Health System. The Michigan Department of Health and Human Services affords this transforming grant in the amount of \$1,043,582 to supplement Medicaid covered services. It also supports research and evaluation as well as special projects such as facilitating professional development trainings for DWIHN children's service providers. DWIHN collaborates with Black Family Development, Inc., Development Centers (MiSide), Ruth Ellis Center, Starfish Family Services, Southwest Counseling Solutions (MiSide) The Children's Center, The Guidance Center, Hegira Health, Inc., and Lincoln Behavioral Services to complete the grant goals, objectives, and activities.

2. \$424,137 for Infant and Early Childhood Mental Health Consultation (IECMHC). The service will be provided by Development Centers (MiSide) who will be receiving \$204,852 and The Guidance Center who will be receiving \$103,007. DWIHN was informed on August 23 2024, that Hegira Health, Inc. will not be a provider for this contract for FY 25. Thus, \$93,778 of funding previously allocated to Hegira Health, Inc. will either be distributed between Development Centers and The Guidance Center or to another selected provider. In addition, DWIHN will receive \$22,500 for indirect costs. The program is a prevention based, indirect intervention that teams a mental health professional with childcare providers to improve the social, emotional, and behavioral health of children. 3. \$118, 847 for Infant and Early Childhood Mental Health Consultation in Home Visiting (IECMHC-HV). The service will be provided by Development Centers who will receive \$111,347. DWIHN will receive \$7,500 for indirect costs. IECMHC-HV is a prevention based, indirect intervention that teams a mental health professional with home visiting programs to improve the social, emotional, and behavioral health of children.

4. \$112,189 for the Infant Toddler Court Program. The purpose of the Infant Toddler Court Program is to increase the spread and coordination of Michigan Baby Courts to ensure children and their families in the child welfare system (CWS) or at-risk for entry into DWC receive equitable, high-quality, coordinate, and trauma-informed services. DWIHN employed a Coordinator to provide services for this grant. DWIHN is the provider of this program and will receive \$112,189.

The overall total funding from MDHHS allocated for these programs is not to exceed \$1,698,755 for the fiscal year ended September 30, 2025. DWIHN is seeking the initial board approval to reallocate funds amongst providers within each program up to the total program amount without board approval during FY25.

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

Source of Funds: Block Grant

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Federal/ State Grant	\$ 1,698,755.00	\$ 1,698,755.00
	S	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: Various

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Manmohan Singla

Signed: Wednesday, September 4, 2024

Stacie Durant

Signed: Tuesday, September 3, 2024

09/04/2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-18 Revised: Requisition Number: Presented to Full Board at its Meeting on: 9/18/2024 Name of Provider: America's Community Council Contract Title: Children Services Health Quality Initiative Program Address where services are provided: Multiple___ Presented to Program Compliance Committee at its meeting on: 9/11/2024 Proposed Contract Term: 10/1/2024 to 9/30/2025 Amount of Contract: \$4,430,000.00 Previous Fiscal Year: \$3,530,000.00 Program Type: Continuation Projected Number Served- Year 1:_45,500 Persons Served (previous fiscal year): 44000 Date Contract First Initiated: 10/1/2023 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 for **FY24/25 contracts in the not to exceed amount of \$4,430,000.00** to provide funding for the new Health Quality Initiative in accordance with 45 CFR 158.150.

School Based Health Quality Initiative: Funding of \$2,980,000 will be distributed to the eleven (11) CMH Providers delivering the services include Assured Family Services, America's Community Council, Arab Community Center for Economics and Social Services, Black Family Development Inc., Detroit Wayne Integrated Health Network, Development Centers, Hegira Health Inc., Southwest Counseling Solutions, Starfish Family Services, Team Mental Health Services (Team Wellness), and The Guidance Center. The overall performance expectation for the School Success Initiative is to ensure students and their families have access to behavioral and integrated health services within a school-based and community-based setting and provide evidence-based psychoeducation training and intervention to children and school professionals. This initiative will help reduce the stigma surrounding children and families that can benefit from performance expectations, continue providing school-based behavioral health services, and increase integrated health services to children and families, across all of Wayne County, throughout the FY 24/25 school year and fiscal year.

Out of the total funding, \$32,608 will be allocated to DWIHN to fund a Therapist who will deliver prevention services completed in school(s).

ACCESS and Development Center to provide budget information forthcoming for the School Based Health Quality Initiative Program.

GOAL Line: Community Education Commission to receive \$550,000 for the GOAL Line Program. The purpose is to increase access to behavioral health and social-emotional supports through its enrichment programming at the Northwest Activities Center (NWAC) through the 2024-2025 school year as well as summer 2025. The program objectives include having in-school and out-of-school behavioral health specialists, afterschool enrichment and social emotional learning, youth development, healthy living, and social responsibility programming.

Requesting to reallocate funds up to \$3,530,000 related specifically to the SSI and Goal Line programs for the fiscal year ending September 30, 2025 as needed without board approval.

HOPE Mobile Outreach Services: Additionally, the funding of \$650,000 will support the continuation of the HOPE Mobile Outreach Services from Black Family Development. With this program, Black Family Development provides a mobile and electronically accessible behavioral health spectrum of care nestled in neighborhoods located in five (5) Detroit zip codes and city wide. BFDI will provide both mobile, and e-behavioral healthcare to youth, and their families, embedded in Detroit neighborhoods through the Detroit Wayne Integrated Health Network (DWIHN) and Medicaid funding.

Integrated Infant Mental Health Program: This is an unsolicited proposal pilot program for \$250,000 of the children services health quality initiative funding; in which, Starfish will be the Provider to deliver the services. Post COVID, children services have not recovered and continue to see reductions in funding due to fewer children served. The goal is to encourage and facilitate the integration of behavioral health and physical health within the service delivery system. Starfish Integrated Health utilizes evidence-based practices to ensure the comprehensive wellness of all patients served. Additionally, working to improve standardized screening, assessment, intervention, referral, and follow-up services for OB/GYN patients at the Obstetrics and Gynecology Associates clinic.

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

Source of Funds: Medicaid

Fee for Service (Y/N): N

Revenue	FY 24/25	Annualized
Medicaid	\$ 4,430,000.00	\$ 4,430,000.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): <u>Clinical</u>

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer Signature/Date: Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Thursday, September 5, 2024

Stacie Durant

Signed: Wednesday, September 4, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-19 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: HPS Consulting LLC

Contract Title: HPS Consulting, LLC

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 9/11/2024

Proposed Contract Term: <u>9/1/2024</u> to <u>5/31/2027</u>

Amount of Contract: \$ 263,250.00 Previous Fiscal Year: \$ 199,375.00

Program Type: Modification

Projected Number Served-Year 1: 75,000 Persons Served (previous fiscal year): 75000

Date Contract First Initiated: 9/1/2024

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).

DWIHN is requesting a Professional Service Contractual Agreement with HPS Consulting, LLC to provide clinical care consultative support as DWIHN prepares for National Committee for Quality Assurance (NCQA) Reaccreditation in 2027. The contract is a three (3) year term from September 2024-May 2027 not to exceed \$263,250. HPS hourly rate is \$150.00. HPS submitted a RFP bid with 3 other vendors and they were awarded the bid based on the DWIHN bid process in July 2024. Each vendor was evaluated using a scoring methodology. A Recommendation of Intent to Contract Memo has been reviewed and approved by Procurement for consulting services.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>N</u>

Revenue	FY 23/24	Annualized
MULTIPLE	\$ 263,250.00	\$ 263,250.00
	S	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64910.817000.00000

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Stacie Durant, Vice President of Finance

Signature/Date:

Signature/Date:

Manmohan Singla

Signed: Tuesday, August 27, 2024

Stacie Durant

Signed: Tuesday, August 27, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: BA 25-20 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Team Mental Health Services

Contract Title: Juvenile Restorative Program

Address where services are provided: 'None'____

Presented to Program Compliance Committee at its meeting on: 9/11/2024

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

Amount of Contract: \$ 1,900,000.00 Previous Fiscal Year: \$ 1,970,000.00

Program Type: Continuation

Projected Number Served-Year 1: 100 Persons Served (previous fiscal year): 98

Date Contract First Initiated: 6/1/2023

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).

DWIHN is seeking approval for Team Wellness to receive a (1) one year renewal contract for FY25 (October 1, 2024 - September 30, 2025) to deliver the Juvenile Restorative Program. Team Wellness to receive a budget of \$1,900,000 for FY25. Approximately \$1.6 million is related to Medicaid claims based services. The amount serves as an estimate and actual costs could differ. The remaining \$300,000 allocation relates to jail diversion costs as defined in the CMHSP and PIHP contracts however is considered administrative costs yet excluded from MLR calculations per the 42 CFR 158.

The program provides comprehensive, integrated behavioral health services that work in conjunction with the juvenile justice system. The purpose of the alternative program is to help the youth to appropriately respond to the covert, as well as the overt, influencers and social determinants that impact whether they exude behavior that is deviant or normed. Defiance, truancy, violence and the abuse of alcohol and/or other drugs, mental illness, childhood trauma, family dysfunctions, or other indicators and their related criminal and/or civil judicial actions, are directly treated; in order to reduce recidivism and further involvement in the juvenile justice system.

This is program is for youth with court involvement for ages 12 to 18 years old and services offered include: Mental Health Treatment; Substance Use Treatment; Individual and Group Therapy; Peer Mentorship; Employment, Skill Building & Pre-Vocational Training; Education support; Dental Care; Primary Care Services; Housing Assistance; Family Therapy; Psychiatry; Nutrition; Physical Education; Court Advocacy; Life Skills; and Food security.

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

Source of Funds: Medicaid

Fee for Service (Y/N): Y

Revenue	FY 24/25	Annualized
Medicaid	\$ 19,000,000.00	\$ 1,900,000.00
	\$	\$
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:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Selfezze

Signed: Tuesday, September 3, 2024

Stacie Durant

Signed: Monday, September 2, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-21 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Michigan Department of Community Health

Contract Title: PIHP: Michigan Department of Health and Human Services and Detroit Wayne Integrated Health Network

Address where services are provided: 'None'___

Presented to Executive Committee at its meeting on: 9/16/2024

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

Amount of Contract: <u>\$ 1,036,048,571.00</u> Previous Fiscal Year: <u>\$ 1,026,100,729.00</u>

Program Type: Continuation

Projected Number Served-Year 1: 70,000 Persons Served (previous fiscal year): 70000

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).

This board action is requesting the approval of the Detroit Wayne Integrated Health Network's (DWIHN) Prepaid Inpatient Health Plan (PIHP) contract with the State of Michigan's Department of Health and Human Services (MDHHS) for an amount not to exceed \$1,036,038,571 for the Fiscal Year ending September 30, 2025.

The purpose of this contract is for MDHHS to obtain DWIHN's services to manage the following:

- Medicaid (including Habilitation Waiver Supports, Hospital Rate Adjustment and DHS Incentive) -\$779,819,061
- Healthy Michigan Plan (including Hospital Rate Adjustment) \$131,655,984
- Autism Medicaid \$88,630,085
- CCBHC supplemental \$32,607,197
- SED Waiver \$978,816
- Children's Waiver \$2,357,428

This board action encompasses the mandated payments for Hospital Rate Adjustment to the community hospitals, Medicaid drawdown and IPA tax payments to the State of Michigan.

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

Source of Funds: Medicaid

Fee for Service (Y/N): \underline{N}

Revenue	FY 24/25	Annualized
Medicaid	\$ 1,036,048,571.00	\$ 1,036,048,571.00
	S	\$
Total Revenue	S	\$

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:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Thursday, September 12, 2024

Stacie Durant

Signed: Thursday, September 12, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-22 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

Name of Provider: Berry, Dunn, McNeil & Parker LLC

Contract Title: Medical Billing and Claims Auditing Services

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 9/11/2024

Proposed Contract Term: <u>10/1/2024</u> to <u>9/30/2027</u>

Amount of Contract: \$ 750,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served-Year 1: 600 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 9/19/2024

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).

DWIHN seeks approval to enter into a three-year agreement with Berry, Dunn, McNeil & Parker, LLC, for Medical Billing and Claims Auditing Services, with a total contract value not to exceed \$250,000 per year over three years. This contract will be effective upon Board approval, with an option to renew for an additional two years. Pursuant to a RFP, the contractor was selected and deemed the most responsive. The contract is billed based on time and material and will be used on an as needed basis. The contract term was determined with careful consideration of factors such as price volatility, market indices for pricing, the potential variability in available bidders, departmental requirements, and other relevant factors.

> The integration of medical billing and claims auditing services, alongside third-party auditing of direct care services, equips the Compliance and Quality department with better tools and support. This results in a more efficient and timely response to allegations, enhanced compliance, and improved quality of care provided.

The total contract amount shall not exceed \$750,000 for the period 10/1/2024 through 09/30/2027.

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

Source of Funds: Multiple

Fee for Service (Y/N): <u>Y</u>

Revenue	FY 23/24	Annualized
MULTIPLE	\$ 750,000.00	\$ 750,000.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64929.817100.00000

In Budget (Y/N)?<u>N</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Thursday, August 29, 2024

Stacie Durant

Signed: Thursday, August 29, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: 25-24 Revised: N Requisition Number: Presented to Full Board at its Meeting on: 9/18/2024 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: 9/11/2024 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: 10/1/2014 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 DWIHN Board Approval for Autism Service 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 is not to exceed \$92,649,972.

The 21 (twenty-one) Autism Service Providers are: 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

The 3 (three) Independent Evaluator Providers are: 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): <u>Y</u>

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)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Thursday, September 5, 2024 09/05/2024

Stacie Durant

Signed: Wednesday, September 4, 2024

Board Action #: 25-24

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

Board Action Number: <u>25-25</u> Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 9/18/2024

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: 9/4/2024

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

Amount of Contract: <u>\$1,186,099,754.00</u> Previous Fiscal Year: <u>\$1,150,651,761.00</u>

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 Detroit Wayne Integrated Health Network (DWIHN) is requesting Board approval for the FY 2025 Operating Budget in the amount of \$1,186,099,754.

The FY 2025 Operating Budget consists of the following revenue:

- \$892,363,713 Medicaid, DHS Incentive, Medicaid-Autism, Children's/ SED Waiver, HAB, CCBHC Supplemental;
- \$143,684,858 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;
- \$32,489,449 State Grants (MDHHS/ MDHHS SUD, OBRA);
- \$24,222,760 Federal Grants (MDHHS/ MDHHS SUD, SAMHSA);
- \$953,543 Local Grants;
- \$6,760,000 Interest Income;
- \$40,000 Miscellaneous Revenue;
- \$23,315,129 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	\$ 1,186,099,754.00	\$ 1,186,099,754.00
	\$	\$
Total Revenue	\$	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Manmohan Singla

Signed: Thursday, August 29, 2024

Stacie Durant, Vice President of Finance

Signature/Date:

Stacie Durant

Signed: Thursday, August 29, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison

 Board Action Number: 25-27
 Revised: Requisition Number:

 Presented to Full Board at its Meeting on: 9/18/2024

 Name of Provider: Michigan Department of Community Health

 Contract Title: Grant Agreement between Michigan Department of Health and Human Services and Detroit Wayne

 Integrated Health Network for Community Mental Health Services Program - FY 25

 Address where services are provided: 'None'___

 Presented to Executive Committee at its meeting on: 9/16/2024

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

 Amount of Contract: \$21,460,901.00

 Previous Fiscal Year: \$21,460,901.00

 Projected Number Served- Year 1:_30,000

 Persons Served (previous fiscal year): 30000

 Date Contract First Initiated: 10/1/2022

 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).

This board action is for the approval of the Grant Agreement between the Michigan Department of Health and Human Services (MDHHS) and Detroit Wayne Integrated Health Network (DWIHN) for the Community Mental Health Services Program (CMHSP). The term of the contract is 10-1-2024 through 9-30-2025. The contract amount is not to exceed \$21,460,901. This contract is for the provision of a comprehensive array of mental health services and supports.

This contract, although not reflected in the amount above, also includes the required Medicaid drawdown payment to MDHHS for \$1,990,464 and local portion for state facility costs payment to the state of Michigan estimated at \$5,700,000 in accordance with the Mental Health Code.

Outstanding Quality Issues (Y/N)? <u>N</u> If yes, please describe;

Source of Funds: General Fund

Fee for Service (Y/N): \underline{N}

Revenue	FY 24/25	Annualized
General Fund	\$ 21,460,901.00	\$ 21,460,901.00
	\$	\$
Total Revenue	S	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: MULTIPLE

In Budget (Y/N)?<u>Y</u>

Approved for Submittal to Board:

Manny Singla, Interim Chief Executive Officer

Signature/Date:

Stacie Durant, Vice President of Finance

Signature/Date:

Manmohan Singla

Signed: Thursday, September 12, 2024

Stacie Durant

Signed: Thursday, September 12, 2024

The following Action was taken by the Full Board on the 18th day of September, 2024.

X Approved

Rejected

□ Modified as follows:

□ Tabled as follows:

Executive Director -initial here:

Signature: Lillian M. Blackshire Board Liaison



Interim President and CEO Report to the Board Manny Singla September 2024

FINANCE

Detroit Wayne Integrated Health Network's (DWIHN) received \$2,024,962 on July 31st in Opioid settlement funds; this amount was slightly higher than the budgeted amount of \$1.9 million.

DWIHN is requesting board approval to bill \$1.3 million of the \$3 million of the 707 W. Milwaukee cost overruns to the \$60 million Integrated Care Center grant as a result of the MDHHS changes in configuration of the care center. The DWIHN VP of Finance conferred with the DWIHN VP of Facilities, and we believe the \$1.3 million is supported and available. DWIHN has received written confirmation from MDHHS that they are amendable to such charges. It should be noted that the legislative appropriation PA166 of 2022 section 1965(b) page 244 is as follows:

"\$45,000,000.00 to a CMHSP located in a county with a population of at least 1,750,000, according to the most recent federal decennial census for capital costs of an integrated care center facility that includes a walk-in behavioral health crisis services center".

DWIHN received the second Woodward appraisal at \$2 million higher thus reducing the required cash collateral to approximately \$2.5 million compared to the prior estimate of \$4.5 million.

In the event that DWIHN is approved to be a Certified Community Behavioral Health Clinic (CCBHC), it will be imperative that DWIHN ramp up its direct services to members in Wayne County. Failure to do so, could have a significant financial impact.

LEGISLATIVE EFFORTS

Working with PAA and Sen. Santana's office, DWIHN has receiving a direct special grant for \$500k in the Department of Health and Human Services FY25 Budget for our partnership with Vital Data Technologies and MDHHS for our work in developing a repository for access to improve member health across healthcare systems through coordination of care.

CMHAM Fall Conference in October...Bernard Parker running for Treasurer

CMHAM Fall Conference Presentation – featured workshop will be our very own Cassandra Phipps, Director of Children's Initiatives, presenting "Putting Children First: Sharing Solutions for Infants, Toddlers, Children, and Their Families".

ADVOCACY AND ENGAGEMENT

- Sept. 30: DWIHN is partnering with DPSCD in training 130 of their health educators to administrators to administer Narcan. The mandatory all-day training will take place at Henry Ford High School. DWIHN will supply NaloxBoxes in all DPSCD high schools this Fall and train students over the age of 14. The same Narcan training is also being offered to the families of all students.
- Sept. 24: DWIHN partnering with Channel 4 having an all-day Narcan training:



- Sept. 21: NAMI Walk to be held at University of Detroit Mercy Campus to raise awareness for mental health programs and services in our community.
- Sept. 18: Check presentation from DeMaria Construction for the second year has raised \$15,000 to help support DWIHN Constituent Voice Members and other persons we support live inclusive lives.
- Sept. 17: Annual Walk-A-Mile in My Shoes Rally on the Capitol Lawn in Lansing
- Sept. 11: DWIHN Trauma counselors and parent support partners were on hand at a school forum following a suicide at Allen Park High School. DWIHN Back to school outreach events, social media postings have been ongoing since late August.
- Sept. 6: Chief Medical Officer, Dr. Shama Faheem shared information on our social media platforms regarding our crisis and trauma resources following the tragic school shooting in Georgia.
- Aug. 30: DWIHNs SUD Director Judy Davis spoke with CH4 on our efforts surrounding Opioid Awareness Day as we held a training in Clark Park in Southwest Detroit. <u>https://www.clickondetroit.com/news/local/2024/08/30/narcan-training-in-detroit-saves-lives-amid-opioid-crisis/</u>
- Aug. 22: DWIHN was recognized as one of Crain's 2024 Best Places to Work, thanks to the feedback from our staff.

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.

Health Plan Partner One

DWIHN and IHC meet monthly for care coordination. Sixteen members were identified with care gaps and those plans were developed and coordinated with Health plans staff.

Health Plan Partner Two

Care Coordination with Health Plan Two was initiated in September 2020. These meetings occur monthly. Health Plan Two had twelve members identified as having gaps in care that were coordinated with care teams to develop care plans and those care gaps were addressed. Presently, 122 members have received care coordination.

Health Plan Partner Three

DWIHN staff are working with Health Plan Three on a project of monitoring individuals who utilized the emergency room department units and how to perform data sharing. There are four CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral Services, Hegira and The Guidance Center. Health Plan Three has made updates to how staff can see the aligned CRSP, they think this will help with an increase in referrals. DWIHN in the Month of August met with the CRSP to see if any problems with getting referrals.

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 a HEDIS scorecard based on claims from our CRSP and claims pulled from the MDHHS claims warehouse CC360. DWIHN is following the guidelines set from 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 August, the HEDIS scorecard was reviewed at seven CRSP monthly meetings and FUH data.

CLINICAL OPERATIONS

Health Home Initiatives:

<u>Behavioral Health Home (BHH)-</u> Current enrollment: 807 (July- 784) <u>Opioid- (Substance Use Disorder Health Home)</u> - Current enrollment: 661 (July- 661)

The "Opioid Health Home (OHH)" is transitioning to a more expansive SUD Health Home for FY2025 (SUDHH). Stimulant use disorder and alcohol use disorder are being added as qualifying diagnoses. Behavioral Health home is also expanding to include Conduct disorder & Other behavioral and emotional disorders with onset usually occurring in childhood and adolescence.

DWIHN Health Home's enrollment goal is to break 1,000 enrollees in each program headed into FY2025. Two providers supplied application materials to join the Behavioral Health Home program, and one applied to join SUD Health Home program. Recommendations for these sites will be presented at an upcoming PCC meeting. The Health Home team is hard at work on process improvement and building improved data monitoring reports to track outcomes and people's engagement with Health Home programs in FY25. The Health Homes team welcomed Amy Adams to DWIHN as the new SUD Health Home Administrator.

<u>CCBHC State Demonstration</u> - Current enrollment: 10,326 (July-10,124) within six (6) providers. Certified Community Behavioral Health Clinic (CCBHC) is expanding to its 3rd cohort of providers, who will launch October 1, 2024. The State indicated with its' approved budget it can add up to 12 sites. There were 15 sites eligible for pursuing this certification, seven (7) of which are in region 7. One provider (Hegira) received full CCBHC certification, one (1) provider received provisional certification (DWIHN), two (2) providers withdrew from potential certification, and three (3) did not meet CCBHC certification requirements.

DIRECT CLINICAL SERVICES

DWIHN Direct Clinical Service Provision:

Effective September 23, 2024, DWIHN Community Care Clinic will offer in person services on the third floor of the 707 Milwaukee building. This site location will be temporary until the purchase and remediation of the Annex building is completed. DWIHN currently provides adult outpatient services to individuals 18 years and older with a severe mental illness. Services include, intake assessment, treatment planning, therapy, case management, outpatient psychiatric evaluation and management. A second site location has been identified in the Wyandotte service area with plans to finalize both sites soon. As site locations are being built to suit, the direct services team continues to provide treatment to individuals in the community and through telehealth.

For the month of September, the DWIHN Community Care Clinic team has begun providing children outpatient services, for children ages 6 years and older, through telehealth. In person services for children

will also begin at the 707 building on September 23, 2024. This level of care is slightly less intensive than home based services but still provides evidence-based practice for children with severe emotional disorders (SED). The DWIHN direct services team has also received provisional approval by Michigan Department of Health and Human Services (MDHHS) to provide children home based services. Home Based services are the most intensive outpatient level of care for children and has defined parameters established by the state regarding service delivery requirements. Recruitment efforts are underway to hire staff to fill this unique role Lastly, the direct services team applied and was approved to deliver services through the School Success Initiative for DWIHN. This approval will provide students in the public school system, additional access to the DWIHN treatment services array. Services are planned to begin effective this month.

The current staff hired to deliver DWIHN direct services is as follows: one (1) full-time medical director/psychiatrist for adult services, one (1) part-time child psychiatrist, three (3) behavioral health clinicians, one (1) full-time case manager, one (1) direct services administrator, and one (1) office manager and (1) peer support specialist. Additional positions will be filled based on service need.

CCBHC Demonstration Expansion:

DWIHN has received provisional certification to become a CCBHC demonstration site effective January 2025. The DWIHN clinical team has a few paperwork items die to the State by November 22, 2024, and then full certification will be granted. This certification will greatly expand the access of behavioral health services to individuals with mild to moderate mental health diagnosis regardless of residency, insurance or ability to pay. CCBHC demonstration sites are required to provide nine (9) core services to its beneficiaries. Those services are Crisis Services, Screening Assessment and Diagnosis, Outpatient Behavioral Health Services, Person Centered Planning, Outpatient Primary Screening and Monitoring, Behavioral Health Urgent Care, Targeted Case Management, Psychiatric Rehabilitation, Peer and Family Supports and Intensive Community Based Services to Veterans. Lastly, the State requires the use of specific evidence-based practices be utilized to deliver CCBHC services. This certification will be a huge shift for DWIHN and will positively broaden the scope of services delivered to members in the community.

Direct Services Next Steps:

- Develop direct service model of practice around CCBHC performance measures.
- Continue to build and enhance direct services to serve up to 200 children and adult individuals by December 2024. This will improve the timeliness performance indicator for children and adults non-emergent request for service.
- Build home based and outpatient services for children. This will improve the children's timeliness performance indicator.
- Build ACT services for adults with mental illness.
- Apply for Joint Commission accreditation to deliver substance use disorder services.
- Improve compliance with follow-up after acute care settings by offering same day access to individuals.
- Improve recidivism rate
- Enhance electronic medical record to meet contractual quality performance measures.

HUMAN RESOURCES

During the past month, DWIHN has hired the following staff:

Administrative Assistant II Behavioral Health Clinician Outpatient Clinics (2) Behavioral Health Technician CONTINGENT Call Center Representative Crisis Care Shift Supervisor Contingent Customer Service Specialist Part Time Dispatch Coordinator Part Time (4) Fiscal Informatics Analytics Administrator Medical Records Specialist Mobile Crisis Clinician Nurse Practitioner Part Time Peer Support Crisis Services Contingent (4) Peer Support Mobile Crisis (2) Peer Support Mobile Crisis Contingent Peer Support Specialist Crisis Services (2) Psychiatrist Outpatient Clinics Part Time Psychiatrist Part Time Recipient Rights Investigator Registered Nurse Crisis Services Senior Financial Analyst SUD Health Home Administrator

DWIHN HR has continued contract negotiations with AFSCME unions Supervisory Institute Session #5 (Performance Appraisals) was conducted August 20 for supervisory staff. LEADx Workshop #3 (Delegation) was held August 29, 2024. DWIHN has been recognized as one of Michigan's Top Workplaces for 2024 by Crain's. DWIHN has also been recognized by Corps! Magazine for its diverse workforce and is a recipient of their Salute to Diversity Award for the second year in a row

CRISIS SERVICES

Inpatient Hospital Discharge Planning - DWIHN Liaisons continue to meet with members at selected inpatient hospitals (BCA, Kingswood, Beaumont Behavioral (BBH)) to engage members in discharge planning when members are admitted without an assigned provider. Liaisons meet with members to discuss barriers to ongoing service connection and support selection of a preferred provider prior to discharge. Liaisons complete a discharge planning worksheet, coordinate with inpatient treatment teams, and work to ensure the member attends their hospital discharge planning appointment.

Current Status:

DWIHN Liaison Discharge Planning, No CRSP at Inpatient Admission



DWIHN Liaison Discharge Planning, No CRSP at Admission

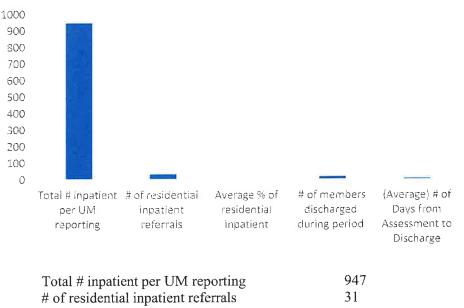


The team has improved the percentage of members who received service within 30 days of discharge from BCA, Kingswood, and BBH, after having been admitted without an assigned CRSP. This is in comparison to the percentage of members who received a service within 30 days at all other hospitals after having been admitted without an assigned CRSP. DWIHN Liaisons have improved the percentage of appointments kept (70% in July).

The team has recognized the need to collect data for reasons members miss their follow-up appointments to initiate targeted interventions. The team will expand on the previously developed report to include percentages of members receiving ongoing care post-discharge at 30-, 60-, 90-, and 120-day markers. These trends will be analyzed to determine common barriers to ongoing treatment in the community. The team found there to be an increase in missed appointments for both TWC and CCIH.

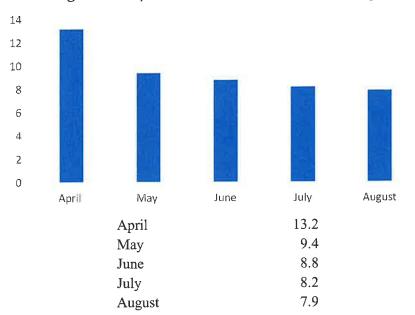
RESIDENTIAL SERVICES

<u>Residential Referral Efficiency</u>- The Residential Services Department continues to examine the efficiency of residential referrals from hospital settings. It is important to maintain an efficient referral process to minimize the duration of hospital stays.



August Inpatient Admissions

Total # inpatient per UM reporting	947
# of residential inpatient referrals	31
Average % of residential inpatient	3.27%
# of members discharged during period	17
Average # of days from assessment to discharge	7.9



Since streamlining the residential referral and assignment process there has been a continued decrease in the time to takes to discharge a member from the hospital to a residential setting. The Residential Services Department managers continue to meet with staff weekly to review cases and develop discharge plans. Additionally, we are taking part in meetings with hospital emergency departments to problem solve and discuss barriers to placement and discharge. The Residential Services Department was recently able to onboard 3 newly credentialed residential service providers during the month of August.

SUBSTANCE USE DISORDERS

Overdose and Racial Disparity

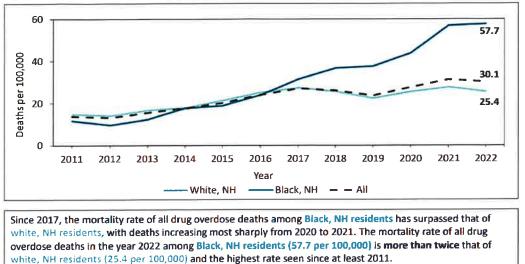
The drug overdose crisis is a sweeping epidemic across the nation, totaling 891 overdose deaths in the Wayne County in 2022 alone. Opioids, a category that encompasses both prescription pain relievers like Oxycontin and illicit drugs such as heroin and fentanyl account for about 61% of these deaths.

Communities of color have historically borne a disproportionate burden in the drug overdose crisis, in Michigan and nationwide. This is a result of systemic racism and the high rates of mass incarceration. For instance, Black Americans are more likely to live in poverty and have limited access to quality healthcare, posing barriers to treatment for substance use disorder. Additionally, they are overrepresented in the criminal justice system, leading to isolation from support networks, social stigma, and limited job and housing opportunities upon release. These factors significantly heighten the risk of substance use disorders and overdose.

Avg. # of Days from Assessment to Discharge

Mortality Overdose Data





The SUD department marked Overdose Awareness Day by organizing a comprehensive community training session focusing on overdose prevention and response. The event included hands-on naloxone training, distribution of educational materials, and insightful discussions led by our SUD Board Chair, Thomas Adams local recovery coaches that are now community leaders. The initiative's goal was to raise awareness and empower the community to address the overdose crisis effectively.

DWIHN has successfully recorded over 1,737 overdose reversals since the 2016 launch of Narcan training, providing the opioid overdose reversal medication at no cost to community groups. In FY23, SUD funded the distribution of nearly 5,793 kits. As part of the effort to ensure naloxone availability in communities of color, the SUD Department has conducted in-person and virtual trainings on naloxone administration for 5,585 individuals, providing training to various community organizations, including law enforcement, barbershops, churches, schools, and provider agencies. Additionally, as of April 2024, 5,342 fentanyl test strips and 2,853 xylazine test strips were distributed. Data indicates people using drugs practice safer use when knowing these substances are present.

Crucial steps in addressing racial disparities in overdose rates is to support programs that tackle arrest and incarceration issues, launch campaigns to reduce the stigma surrounding substance use, and partner with the Detroit Public Schools Community District (DPSCD) to implement Narcan (naloxone) training in all public schools. DWIHN will install red distribution boxes in these schools' common areas to ensure easy access to Narcan, thereby strengthening the immediate response capability in the event of an opioid overdose. This initiative aims to provide essential training and resources to school personnel, potentially saving lives. The "A Leg Up" program is designed to deliver evidence-based wraparound services to individuals transitioning out of the criminal justice system with Opioid Use Disorder (or a history) and any co-occurring SUD or Mental Health condition.

UTILIZATION MANAGEMENT

<u>General Fund Exception</u>- is the process designed to prevent the interruption of needed services while the insurance acquisition/reinstatement effort is underway. There has been a surge in General Fund Exception requests, following the termination of the Pandemic Emergency Order. During the Order, changes were made to Medicaid program eligibility, administration, and policies to prevent beneficiaries from losing health insurance. Now, many members are no longer eligible or failing to take the necessary steps to keep their benefits active (e.g., missed redetermination dates).

As a result of this substantial increase in requests UM initiated the following:

- Revision and distribution of General Fund Benefit Eligibility Grid
- Initial Discussion of Non-Clinical Quality Improvement project
 - The General Fund UM Specialist met with Quality Department Data Analyst to begin development of non-clinical Quality Impact Assessment (QIA) for prevention of lapse in Medicaid benefits, with the goal of reversing the increase in General Fund Exception requests.
- Members requesting General Fund Exceptions beyond their intended purpose are being identified and problem solved.

<u>Self-Directed Services</u> - Self-Directing Services (SD) is a partnership between Detroit Wayne Integrated Health Network and members using specialty mental health services. Self-Directing services is a method of service delivery that shifts budget authority and control of services to the person, as identified in their Individual Plan of Service (IPOS). Based on services authorized in the IPOS, the member will select qualified service providers of their choice. The costs of services will be outlined in an individual budget and managed by the person through a Financial Management Service (FMS).

In the month of August, there are 1,276 members who self-direct their services. Of those self-directing, 365 utilize agencies and 881 direct hires. This continues to reflect lower use of traditional agency-supported arrangements.

				Self-D	irectio	ig Serv	ices				
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug
Total Members	1243	1247	1252	1258	1264	1279	1279	1262	1248	1268	1276

The SD team has been working with the Financial Management Service (FMS) agencies to ensure readiness for Electronic Visit Verification (EVV), effective 9/9/24. EVV is a validation of the date, time, location, type of services provided, and the individual(s) receiving or providing services. This information helps to ensure that beneficiaries receive the expected care.

The SD team self-identified data for housing assistance and use of support brokers as opportunities for improvement. Additionally, the team receives two proposed outcomes for state litigation which will impact the unit rate for members who self-direct (H2015) and have a Habilitation Supports Waiver (HSW). However, the court must make a final ruling. Staff will work with I/DD Program Administrator to identify data sources relevant to housing assistance and research use of support brokers. Additional action related to unit rates will be explored, following official court ruling expected in September 2024.

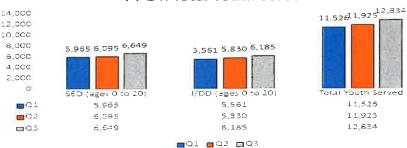
The Habilitation Supports Waiver (HSW)

The program provides home and community-based services to Medicaid beneficiaries with intellectual or developmental disabilities. HSW's goal is to assist people with developing skills to live independently in community settings (vs. institutions or more restrictive settings). DWIHN enrollment has consistently remained above 99% which has resulted in DWIHN receiving additional 41 additional HSW slots from MDHHS.

CHILDREN'S INITIATIVES

Overall Clinical Services:

During FY 24, Q2 DWIHN served a total of 12,834 unduplicated children, youth, and families in Wayne County ages 0 up to 21st birthday, including both Serious Emotional Disturbance (SED) and Intellectual/ Developmental Disability (I/DD) disability designations. This total is slightly higher than FY 24/Q2 with 11,925 members served. During FY 23 there were 12,123 unduplicated youth who received services.

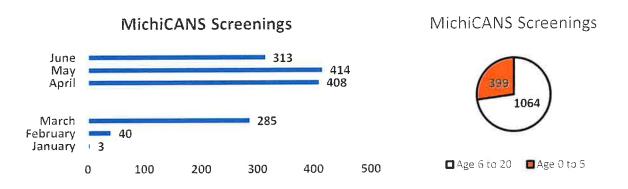


FY 24: Total Youth Served

MichiCANS

Screener and comprehensive assessment for children and youth ages 0 to 21st birthday. This tool is used to support Family Driven, Youth Guided care planning and level of care decisions, facilitate quality improvement initiatives, and monitor outcomes of services. The MichiCANS tool will replace the Child and Adolescent Functional Assessment Scale (CAFAS) and Pre-School and Early childhood Functional Assessment Scale (PECFAS) assessments effective October 2024. In addition, the MichiCANS will also be required for children and youth with serious emotional disturbances (SED) and intellectual developmental disabilities (IDD). In addition, the Devereux Early Childhood Assessment (DECA) will change during October 2024 as well to be administered as an assessment tool for ages 0 to 6 for both SED and IDD children.

The below is the chart of total MichiCANs screenings completed by DWIHN Access Department. FY24/Q2 = 328 screenings and FY24/Q3 = 1,135 screenings (total of 1,463). Of the total, 339 screenings pertained to the age range of 0 to age 5 (27.27%) and 1,064 of the screenings were associated with the 6 to 20 age range (72.72%).



In preparation for October 2024 MichiCANs the following is being completed:

- Update the Screening Eligibility Bulletin to include an additional guidance for Providers to reference
- Continue to participate in monthly MichiCANs meetings in preparation for the hard launch
- Finalize the referral process for Department of Health and Human Services (DHHS) to submit referrals for children and youth involved in the foster care system that meet criteria for community mental health services according to MichiCANS Screener eligibility.
- By September 2024 update policies and utilization guidelines to incorporate MichiCANs requirements

Juvenile Restorative Program (JRP)

JRP is a short-term 3-to-6-month program that includes a comprehensive array of services including therapeutic services (individual, group, and family), care management, peer supports, educational services, skill building services, meals, and transportation to all members.

During the year of 2022-2023 there were, on average, about 70 to 80 youth held at the Juvenile Detention Facility (JDF) due to not enough juvenile placement residential beds. Consequently, this resulted in overcrowding and the mental health needs of youth were unaddressed. In addition, there were funding barriers due to the community mental health system being unable to deliver Medicaid funded services in the jail setting for youth. As a result, various collaborative meetings were held with DWIHN Leadership, Children Providers, Juvenile Justice Partners, Hospitals, etc. to address the dire need to support youth in the juvenile justice system. The Juvenile Restorative Program was developed to prevent juvenile justice recidivism and to have community-based services specifically to address the high risk needs of youth.

The goal for FY24 was to service at least 70 youth within the juvenile restorative program, which has been accomplished. During FY24 there have been 102 referrals to the program, 91 intake assessments completed, 87 youth actively enrolled in the program (attended consistently minimum of 30 days), and 32 discharges. In reviewing the demographics of the members referred to the program the most prevalent ages were age 16 and 17; in which, age 13 was the youngest age. Also, the primary disability designation was Serious Emotional Disturbances (SED) as well. Lastly, Oppositional Defiant Disorder was the most common diagnosis referred to the program.

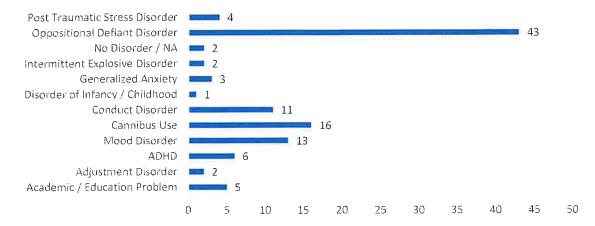
Juvenile Restorative Program	FY 23 / Q4 July - Sep	FY 24 / Q1 Oct - Dec	FY 24 / Q2 Jan – Mar	FY 24 / Q3 Apr - Jun	FY 24 / Q4 July <i>Preliminary</i>	Total
# of Referrals	24	25	24	19	10	102
# of Actively Enrolled (Attended at least 30 days)	23	19	22	13	10	87

Summary of youth services include:

- Youth are attending therapy sessions, group sessions, and life skill activities according to the individual plan of service (IPOS).
- Youth are attending online schooling and working towards receiving high school diplomas.
- Youth are completing psychiatric evaluations and stabilizing on medications.
- Youth are reducing substance use.







Youth participating in the Juvenile Restorative Program (JRP) are court ordered and or court approved prior to enrollment. Referrals are submitted by the Care Management Organization (CMO) Care Managers. Assured Family Services (AFS) is the Children Provider who completes screenings and intake assessments for adjudicated youth in the juvenile justice system and assigns to a CMO. The CMO provides coordination with the court system and youth while there is court involvement.

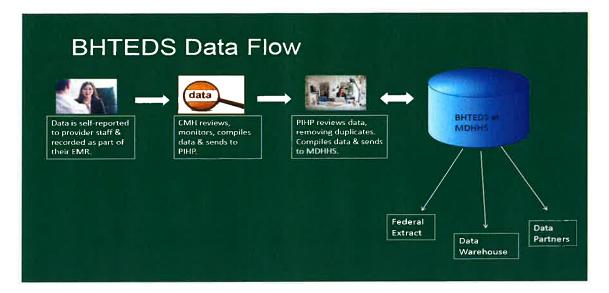
The discharge planning process involves families participating in (4) parent sessions and ensure there is a school plan in place of either traditional schooling or a GED program. As of July 2024, there have been a total of 32 actively enrolled youth who were discharged from the program. Most of the youth who graduated from the program returned to traditional school and/or completed the GED program. Also, youth were connected to housing and completed other goals in the Individual Plan of Service (IPOS). Out of the 87 actively engaged youth in the program, 8% returned to Juvenile Detention Facility (JDF). The main reasons were due to violating probation: vehicle theft, and domestic violence in the home, or tether violation.

ADULT INITIATIVES

BH-TEDS

In 2015, Michigan Department of Health and Human Services (MDHHS), in collaboration with the Substance Abuse and Mental Health Services Administration (SAMHSA), implemented the Behavioral Health-Treatment Episode Data Sets (BH-TEDS). BH-TEDS are demographic information used as a point-in-time snapshot to assist in identifying level of function in one's environment. The information gathered is a combination of questions dictated by the State and the Federal government, and the data collected is used for funding and rate setting for services. The providers within the DWIHN complete these at point of entry to the network, which is the admission, yearly during the annual reassessment (update) and at discharge from the network. This data is then sent to DWIHN through our Mental Health Wellness Information Network (MHWIN), where it is compiled and forwarded to the State. A BH TEDS episode covers all services provided between the two "bookends"- admission and discharge - with the services provided in between considered updates.

Adult Initiatives is monitoring the BH TEDS compliance among our providers. This assists in identifying areas that require more training with the providers regarding correctly addressing data fields as well as some system/technical issues that providers have had submitting their BH TEDS data to MHWIN.



Adult Initiatives has developed a strong working relationship with the MDHHS BH TEDS coordinator, as well as introduced the coordinator to our providers at our Adult Provider Forum to facilitate conversations regarding what is working well within the data flow and what needs improvement. Adult Initiatives has begun attending a quarterly BH TEDS workgroup and has attended a BH TEDS training, which will improve the dissemination of updates to our provider network as well as assist in problem solving errors or rejection of files from the State.

DWIHN serves approximately 123,000 members and all this data is transferred from each individual provider's electronic medical record or PCE system to our MHWIN system. Earlier this year it was brought to our attention that our network had **24,645** admissions that were "dangling" (no updates and no discharges associated with them). Adult Initiatives worked with our IT department to address these dangling admissions and as of August 27^{th} we had reduced this number to 4,149.

Adult Initiatives staff have worked collaboratively with providers to identify barriers to gathering and transmitting the data. A significant issue that has come to light is the ability for our MHWIN system to "talk" to the provider systems and transmit the data correctly. As noted in the description, an admission is completed at the members first entry point to our network and subsequently to one of our providers. Every year this admission is updated, whether it be by that provider, or should they move to another agency, the update process must be the same. If there is an error in the transmission of any of these, each update attached will also be rejected. There have already been transmission errors identified with MHWIN and the PCE systems of 10 of our adult providers. Adult Initiatives has been working with our IT department to develop a plan to fix the technological issues preventing the effective communication between the PCE systems.

COMMUNICATIONS

Main Activities

- ✓ Media Outreach-24/7 mobile units, opioid overdose awareness event
- ✓ Mobile Outreach
- ✓ Access Call Center calls related to Comms outreach
- ✓ Community Events and Outreach
- ✓ Social Media Outreach
- ✓ Identified Opportunities for Improvement

ACTIVITY 1: 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:

Mobile Crisis Services: (Hyperlinks connect to stories and interviews)

Mobile Crisis went fully operational on Monday, August 26th and <u>WDET's The Metro shared with their</u> <u>audience on Wednesday, August 28th</u>. Jakeya Kellom, Director of Mobile Crisis Services, was in-studio to discuss the services.

SUD Outreach-Opioid Overdose Awareness Event:

On <u>August 30, WDIV's Will Jones joined DWIHN SUD Services for Opioid Awareness Day Activities</u> at Clark Park in Southwest Detroit. The day was filled with personal stories of resilience, Narcan training, and a balloon release ceremony. Along with highlighting the training and attendees, Jones fielded an in-depth interview with Joshua Forsythe, a peer recovery coach, from Abundant Recovery Services.



The August 30th issue of the Hamtramck Review shared the event with its readers.

The <u>Ask the Messengers</u> team were on the scene for the event interviewing participants, the episode will air later this month along with the Celebrate Recovery Walk.

ACTIVITY 2: MOBILE OUTREACH

The DWIHN Mobile Outreach Clinician, Kevin Giles, was able to add new events to the calendar and continued the partnership with Wayne Metro and Black Family Development. One of the major events of the month was Detroit Police Department's National Night Out on August 6th.

Category	
Number of mobile events attended	12
Number of meaningful engagements	1,145
Number of screenings in the system	0
Number of follow-up calls made	20
Number of referrals made as a result of follow up	86
Benefit assistance referral	0
Bill payment referral	0
Complex Case Management referral	0
Connection to Access Center	6
Housing referral	0

ACTIVITY 3: ACCESS CALL CENTER CALLS RELATED TO OUTREACH

Each quarter the Access Call Center asked callers "How Did you Hear About Us?" During the 3rd quarter of FY'23-24, the total number of calls managed by the Call Center were **44,567**.

The total number of callers who answered the question was 28,145 or 63%.

- Of those callers, 587 of them heard about the services from: website, online, flyer, hotline, TV, radio, internet, Google, social media, myDWIHN app.
- ▶ Provider Network: 14,450 calls
- ▶ Hospitals: 3,630
- ➢ Billboards: 29

*special note: this is a snapshot of the categories and not a complete list

ACTIVITY 4: COMMUNITY OUTREACH

In August, DWIHN staff actively engaged in various outreach activities, like the Detroit Health Department's Children's Wellness Fair, the Seize the Smoke Anti-Violence Event, PBS Kids- Be My Neighbor Day and NCADD's Community Street Festival. DWIHN also hosted Back to School events and supported the 2024 Detroit Opioid Summit.

Upcoming Events:

- September 13⁻ Celebrate Recovery Walk & Rally, 9am-3pm
- September 16-17 25th Annual Substance Use and Co-occurring Disorder Conference, 12-4pm
- September 17 Walk a Mile in My Shoes Rally (Lansing) 12-3pm
- September 21 DWIHN Men's Conference 9am-4pm
- September 28 Statewide Youth Summit 10am-3pm

Channel 4/Mariner's Inn partnership: On Tuesday, Sept. 24, DWIHN, in partnership with Mariner's Inn and MASCO, will hold a community-wide Narcan training at WCCCD Downriver Campus.



ACTIVITY 5: SOCIAL MEDIA OUTREACH

Social Media Influencer	# of Posts	Engagement/Impressions	
The Capital Brand/Randi Rosario	2 Post, 4 Story Posts	Over 38.7K total views	
Kathleen Springer	4 Posts	21.7k total views	

DWIHN is actively elevating mental health awareness on social media by sharing informative content, engaging narratives, and fostering a supportive online community. Through strategic and compassionate messaging, DWIHN is creating a digital space that encourages dialogue, educates the public, and helps reduce the stigma associated with mental health challenges.

Performance Report Summary

- ▶ Impressions: 128,840 down 3.2%
- Engagements: 11,585 up 2%
- Post Click Links: 3,154 up 90.2%
- Engagement Rate: 9% up 5.8%
 - Total Audience Growth over the last month was 19,634

Google Analytics

- 2,067 Business Profile interactions
- 4,238 People viewed the DWIHN Business Profile
 - 2,358 (56% Google search desktop)
 - 1,656 (39% Google search mobile)
 - 194 (5% Google Maps mobile)
 - 30 (1% Google Maps desktop)
- o 1,972 Searches DWIHN was shown in users search results:
 - DWIHN 481
 - Wayne County Community Mental Health 118
 - Mental Health Services Detroit 107
 - 707 Crisis Center Detroit 100
 - dwctraining 95

IDENTIFIED OPPORTUNITIES FOR IMPROVEMENT

Continue identifying events and opportunities where voting information can be distributed at events:

- Walk a Mile in My Shoes Rally
- o NAMI Walk
- WDIV Community-wide training
- Youth United Statewide Youth Summit



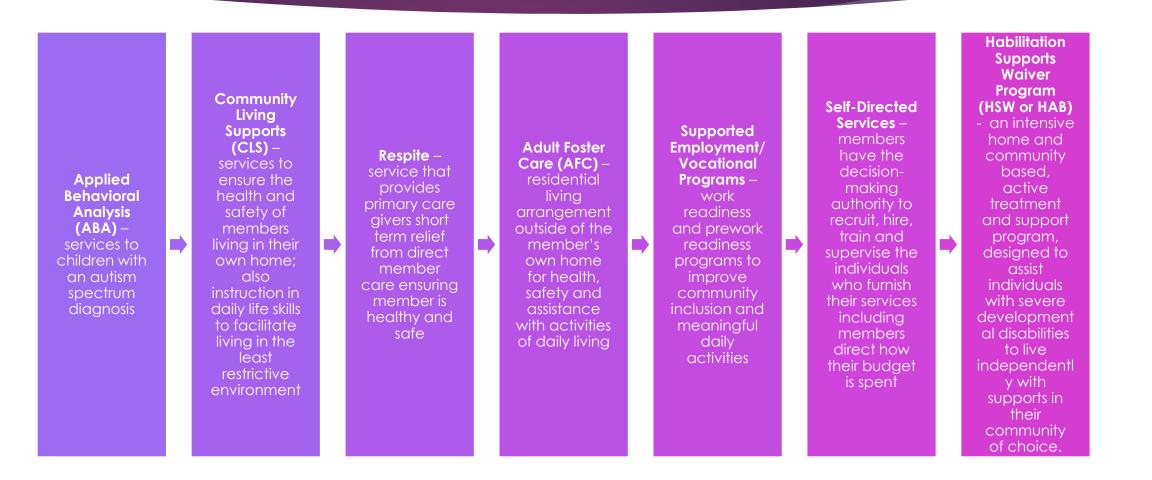
The mission of PsyGenics is to improve the health and wellness of our community by delivering quality services to individuals diagnosed with intellectual and developmental disabilities and mental illness.

We provide an integrated continuum of holistic care designed to meet each consumers changing needs and maximize their independence, self-responsibility and community engagement.

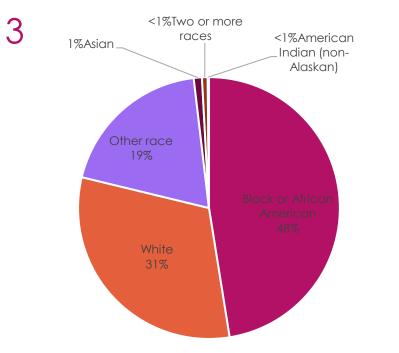
Through our dedicated staff, supporters and community network, we offer an environment that nurtures consumers' behavioral, physical, economic, social, and spiritual wellbeing.

2

Coordination of Services



Who We Serve



Ethnicity

Black or African American

White

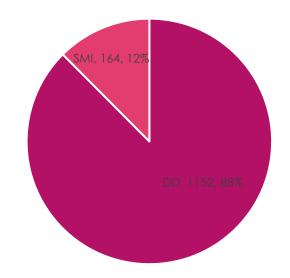
Other race

Asian

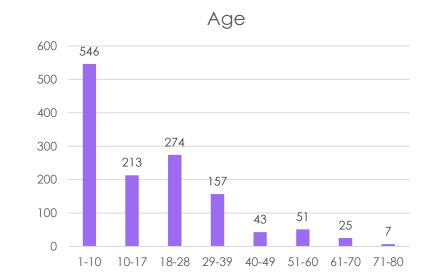
Two or more races

 American Indian (non-Alaskan)





DDSMI



1316 CONSUMERS 57% CHILDREN 88% I/DD ADULTS/CHILDREN 12% SMI ADULTS

What makes us special?

- Female owned and operated
- Deliver quality services perfect CARF score 2022 with plans to repeat later this year
- Walk in hours for case management and psychiatric services
- Rapidly growing Your Wellness Connection (BHH) program
- Member Events nearly every month
- In-house speech and occupational therapy with full gyms and training kitchens



Coming Soon

Member Boutique

- Dress for success in employment opportunities
- Practice shopping skills and activities of daily living
- Resource for those who have clothing needs

Connect With Us

Dearborn

1 Parklane Blvd., Ste. 200 E Dearborn, MI 48126 Phone: 313-846-2606 Fax: 313-846-2657 Toll-free Customer Service: 866-921-2462 TTY: 313-693-4792

Trenton

1660 Fort St., Trenton, MI 48183 Phone: 734-304-4159 Fax: 734-304-4162 Toll-free Customer Service: 866-921-2462 TTY: 313-693-4792

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How can PsyGenics, Inc. continue to support the needs of DWIHN members in 2025?

WE ARE HERE FOR OUR MEMBERS!