



Detroit Wayne Integrated Health Network

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**FULL BOARD MEETING
Wednesday, August 19, 2020
707 W. Milwaukee
(Virtual)
1:00 P.M. – 3:00 P.M.
AGENDA**

- I. CALL TO ORDER**
- II. ROLL CALL**
- III. APPROVAL OF THE AGENDA**
- IV. MOMENT OF SILENCE**
- V. APPROVAL OF BOARD MINUTES** – Full Board Meeting – July 19, 2020
- VI. RECEIVE AND FILE** – Approved Program Compliance Committee Minutes – July 8, 2020
- VII. ANNOUNCEMENTS**
 - A) Authority Announcements
 - B) Board Member Announcements
- VIII. BOARD COMMITTEE REPORTS**
 - A) Board Chair Report
 - 1) Board Member Appointment – Wayne County
 - 2) City of Detroit Police and DWIHN meeting
 - B) Executive Committee
 - 1) New Building
 - 2) General Fund Allocation
 - C) Finance Committee
 - D) Program Compliance Committee
 - E) Recipient Rights Advisory Committee
- IX. SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD REPORT**
- X. AD HOC COMMITTEE REPORTS**
 - A) Policy/Bylaw Committee

Board of Directors

Bernard Parker, Chairperson
Dorothy Burrell
William T. Riley, III

Dr. Iris Taylor, Vice-Chairperson
Lynne F. Carter, M.D.
Kenya Ruth

Timothy Killeen, Treasurer
Angelo Glenn
Dr. Cynthia Tauieg

Dora Brown, Secretary
Kevin McNamara



XI. SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD BYLAWS AND CHARTER

XII. RECIPIENT RIGHTS ADVISORY COMMITTEE (RRAC) BYLAWS AND CHARTER

XIII. BOARD SELF-ASSESSMENT POLICY (POLICY #2016-11)

XIV. PRESIDENT AND CEO MONTHLY REPORT

XV. UNFINISHED BUSINESS

Staff Recommendations:

- A. **BA# 19-15 (Revision 2)** - Housing Resource Center - 24 Hour Walk-In Center (Tumaini Center) Covenant House Program *(Program Compliance)*
- B. **BA# 20-59** - PCE/MHWIN Maintenance Contract Extension *(Program Compliance)*

XVI. NEW BUSINESS

Staff Recommendations:

- A. **BA# 20-58** - Grant Agreement Between Michigan Department of Health and Human Services hereinafter referred to as the "Department" and Detroit Wayne Integrated Health Network (formerly known as Detroit Wayne Mental Health Authority) for Community Mental Health Services Program (CMHSP) – 2020 *(Program Compliance)*
- B. **BA# 20-58 (Revision 1)** - Grant Agreement Between Michigan Department of Health and Human Services hereinafter referred to as the "Department" and Detroit Wayne Integrated Health Network (formerly known as Detroit Wayne Mental Health Authority) for Community Mental Health Services Program (CMHSP) – 2020 *(Program Compliance)- Unfinished Business*
- D. **BA #21-04** – AssuriCare LLC *(Finance)*
- E. **BA# 21-06** – Donated Funds Agreement 21-82009 *(Program Compliance)*
- F. **BA# 21-07** - Behavioral Health Emergency Response Call Center *(Program Compliance)*
- G. **BA#21-08** – Healthcare Effectiveness Data and Information Set (HEDIS) Certified Population Healthy Management and Data Analysis Tool Vendor Solution *(Program Compliance)*
- H. **BA# 21-09** – Comprehensive Service for Behavioral Health – 2021 *(Program Compliance)*
- I. **BA# 21-11** – DWC Training Portal *(Program Compliance)*
- J. **BA#21-12** – Systems of Care *(Program Compliance)*
- K. **BA# 21-14** - Infant Early Childhood Mental Health *(Program Compliance)*
- L. **BA# 21-15** - Treatment Foster Care Oregon *(Program Compliance)*
- M. **BA# 21-16** – My Strength *(Program Compliance)*
- N. **BA# 21-18** – Michigan Rehabilitation Services *(Program Compliance)*
- O. **BA# 21-19** – Crisis Intervention Services (Contract Extension) *(Program Compliance)*

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.

XVI. ADJOURNMENT



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
JOINT FULL BOARD and SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD MEETING
Meeting Minutes
Virtual Meeting
Wednesday, July 15, 2020
1:00 p.m.**

BOARD MEMBERS PRESENT

Bernard Parker, Chair	Angelo Glenn
Dr. Iris Taylor, Vice Chair	Kevin McNamara
Commissioner Tim Killeen, Treasurer	Kenya Ruth
Dora Brown, Secretary	Dr. Cynthia Taueg

BOARD MEMBERS EXCUSED: Dorothy Burrell; Lynne F. Carter, M.D.; William T. Riley, III

GUESTS: Ms. Ghada Abdallah, RPh – Former Board Member

CALL TO ORDER

The meeting was called to order at 1:01 p.m. by the Board Chair, Mr. Bernard Parker.

ROLL CALL

Roll call was taken by Ms. Dora Brown, Board Secretary and a quorum was present.

APPROVAL OF THE AGENDA

Mr. Parker, Board Chair welcomed everyone to the meeting and noted this was a joint meeting of DWIHN Full Board and the Substance Use Disorder Oversight Policy Board. He gave an overview of the meeting and the process for Good and Welfare and Public comment. The Chair called for a motion on the agenda.

It was moved by Ms. Brown and supported by Mr. Glenn to accept the agenda as presented. Motion carried unanimously.

MOMENT OF SILENCE

The Board Chair, Mr. Parker called for a moment of silence. Moment of Silence taken.

APPROVAL OF BOARD MINUTES

The Chair called for a motion on the Board minutes of the Full Board meeting of June 17, 2020. **It was moved by Mr. Glenn and supported by Ms. Brown approval of the Full Board minutes of June 17, 2020. Motion carried unanimously.**

RECEIVE AND FILE

The Chair called for a motion to Receive and File the approved Finance Committee minutes of June 3, 2020 and the approved Program Compliance Committee minutes of June 10, 2020. **It was moved by Commissioner Killeen and second by Mr. Glenn to "Receive and File" the approved minutes from the Finance Committee meeting of June 3, 2020 and the Program Compliance Committee minutes of June 10, 2020. The motion carried unanimously.**

ANNOUNCEMENTS

Authority Announcements

There were no Authority announcements.

Board Announcements

There were no Board announcements.

BOARD COMMITTEE REPORTS

Board Chair Report

Mr. Parker gave a verbal report. The Substance Use Disorder Oversight Policy Board requested to have a joint meeting with the Full Board. This meeting is taking place today, Wednesday, July 15th and both boards will handle their agendas separately. This meeting will provide a learning opportunity for members of both boards; demonstrate that we are all together as Boards and provide a mechanism for stronger communications. Mr. Glenn, SUD Oversight Policy Board Chair updates the Full Board and keeps us apprised as to the activities of the SUD Board by reporting at the Full Board meeting. The Full Board meeting today will be shorter and will recess after the Committee reports. The SUD Board meeting will convene and will be chaired by Mr. Glenn, Chair, SUD Oversight Policy Board after their meeting is adjourned Mr. Parker will reconvene the Full Board meeting.

The Budget Hearing, which will be held as a virtual meeting and is a joint Finance and Program Compliance Committee meeting that is open to the Public and scheduled on Wednesday, August 5th from 1:00 p.m. – 4:00 p.m. as agreed to by both chairs. This Hearing provides the best opportunity to learn about the goals and programs of the Network; the same process will be followed as in the past with the FY20/21 Budget being presented and the Board providing, in advance of the hearing, written questions to the departments through the CFO for presentation at the hearing. The Chair welcomed the SUD Oversight Policy Board members to attend the Budget Hearing meeting.

Mr. Parker gave an overview of the Resolution that was passed at the last Full Board meeting regarding the support of Peaceful Protests and Black Lives Matter Movement. It was requested at that time that staff discuss with the City of Detroit having a joint meeting to develop a program where individuals that are specialists in mental health and substance use abuse could be available to respond to calls through the 911 system when someone needs non-violent help versus sending out several police cars which could incite the situation. There have been other cities that have used this triage system (Police, Mental Health clinician and Counselor) to try to diffuse situations where a person was in distress possibly because of mental health challenges. A virtual exploratory meeting was held with Chief Craig; Deputy Chief White, Mr. Brooks, Mr. Doeh; Ms. Blackwell and himself and a representative from the City of Detroit to determine if they (the city) were interested in such a program. There was a fair discussion that took place to determine if the city had funds available to go with funds from DWIHN towards the program; a task force was to be formed to further investigate models of the program with a meeting being scheduled on August 6th. Mr. Brooks noted that he was hoping there could be a joint task force to help with this concern that has been taking place in the community and it was positive that the city was willing to meet with them. Mr. Doeh noted that there was a meeting with the workgroup; great progress was made and there will be further updating at the Executive Committee meeting. Ms. Blackwell noted there was a lot of common ground that was found during the workgroup meeting and both groups are working with the homeless population; the police department agreed to bring back data on how to integrate services for persons that are being seen frequently by both the police and DWIHN.

The Chair noted the Board would have held its annual meeting during the month of May and special recognition would have been given to outgoing board members; due to COVID-19 the meeting was not held; however he did want to recognize board members that were not returning to the Board. It was noted that Board member Ghada Abdallah had resigned and he thought it would be fitting to recognize her at this time as she was a member of both the Full Board and the SUD Oversight Policy Board. Her picture was placed on the screen and it was noted she served as the Secretary for the Full Board; her voice was always welcomed at Full Board and Executive Committee meetings; she always raised the difficult questions and looked for and at alternative resolutions. A resolution will be mailed to her home thanking her for her service. Mr. Glenn also recognized Ms. Abdallah for her strong commitment to our most vulnerable populations and noted she represented her community well and she will be missed.

The Chair noted the Board also wanted to recognize staff member, Dana Lasenby, Chief Clinical Officer who would be leaving DWIHN to take a position at Oakland Community Health Network. Ms. Lasenby has been with the organization for a number of years and has worn a number of different hats including that of interim CEO here at DWIHN. He did not think that Oakland could have selected a better person and with her type of leadership and being at Oakland it will enhance our working relationship with Oakland.

Mr. Brooks noted that Ms. Lasenby had been recognized at our staff meeting held earlier today and the Executive Leadership will be recognizing her as well with a celebratory event.

Mr. Parker noted the Board had a plaque for her that would be placed in the mail. Ms. Lasenby thanked the board for their recognition and noted that she has worked with the Authority in some capacity for thirteen years and that she has enjoyed working with one of the greatest teams in mental health. She also noted that she will miss her DWIHN family and was looking forward to continue to working with DWIHN when she transitioned to Oakland and it was because of the experience garnered with this board and at DWIHN that she was able to move to the next level. She noted she will miss everyone and expressed appreciation to everyone that has worked with her over the years.

The Chair called for a motion on the Board Chair report. **It was moved by Mr. Glenn and supported by Ms. Ruth to accept the Board Chair report. Motion carried unanimously.**

Executive Committee

Mr. Parker gave a verbal report. It was reported the Board Executive Committee met on Monday, July 13th and the Board Study Session was scheduled for Thursday, July 30, 2020 from 1:30 p.m. to 5:00 p.m. and will be held virtually. The study session is a time to receive in-depth information and are very beneficial; there will not be any voting or approvals on any matters; there are four items that will be covered; an update on the Strategic Plans will be provided to determine the status and if there are any challenges; a presentation will be given by the Finance department on factors that impact the deficit; this presentation was provided at the Finance Committee and was very informative; an update on the development of the integrated health plan will be provided; and we will receive an update on the new building; information has been provided to the building committee but not to the Full Board.

The Board Chair gave an update on in-person meetings and noted there were different phases; we are currently in Phase 4 which continues to limit the number of people that can be in the building at one time; because of the Open Meetings Act and having to be open to the public it is difficult to gauge the number of people that would attend the meetings. As long as the Governors Orders allows us to have virtual meetings we do not want to take the risk to have 100 people or more in the building attending meetings. The

Executive Committee has noted that we will not go back to open meetings until the Governor's Orders disallows it.

The Board Chair gave an update on the Public Affairs Associates (PAA) briefing that was held at the Board Executive Committee meeting. It was noted the State has not approved a budget - it has been completed but not yet voted on and some of DWHN CARES Act monies are tied up in the process. There is no agreement for the 2020/2021 Budget; Lansing is still working on it and there is anticipation that it will be completed sometime in September based on the legislators taking the Governor to court over the Executive Orders. The document will be sent to the Full Board and the SUD Oversight Policy Board. Public Affairs will come back in August or September to provide an update.

The Chair gave an update on the Black Lives Matter Movement; he noted the work being done with the City of Detroit Police Department. There was also discussion at the Executive Committee on additional activities that could take place on social injustice; one of the items was equal funding for education in the entire state of Michigan; it was noted there is a difference between what some schools receive per child versus what other children receive in areas with higher property values; this is important so that all children receive the same quality education. The Chair called for a motion on the Executive Committee Report. **It was moved by Mr. Riley, III and supported by Commissioner Killeen to accept the Executive Committee report. Motion carried unanimously.**

Finance Committee

Commissioner Killeen, Chair of the Finance Committee reported the Finance Committee met virtually on Wednesday, July 1, 2020; it was reported that at the Study Session the Board will be presented with a Finance presentation; an Operational Efficiencies update is provided at each meeting which notes the areas the Network is reviewing for savings; at the July meeting there was no report or significant updates. The committee also reviews a quarterly report regarding purchases up to \$50,000 and Cooperative and Comparative Purchases - this report was reviewed at the July meeting and the policy will be provided at the August meeting; it was reported that half of our business is being done in Wayne County. The monthly financial report was reviewed and the reports looked fine; it was noted that receiving a budget from Lansing may be difficult. Also discussed the cash flow and reported the Network should not have cash flow issues from now to the end of the year. The Committee reviewed two Board Actions BA#18-32(Revised) Milo Detroit and BA#20-24 (Revised) Outfront Media; both were approved and moved to Full Board for approval and are on the Full Board agenda. The Chair requested that Board members submit their budget questions to him for the Budget Hearing and review the budget that was sent to them. The Budget will be on the September Full Board agenda where it be voted upon. The Chair called for a motion on the Finance Committee report. **It was moved by Dr. Taueg and supported by Mr. Glenn to accept the Finance Committee report.** There was no further discussion. **Motion carried unanimously.**

Program Compliance Committee

Dr. Taylor, Chair of the Program Compliance Committee reported verbally. It was reported the Program Compliance Committee met virtually on Wednesday, July 8, 2020. The Chair noted the committee received several reports. An update on the Trails program, as requested will be reporting in thirty (30) days with a recommendation of alternative approaches of how mental health will be supported in the schools and there would be a slight underspending for this fiscal year which will be reported to the Finance Committee. Reports were received from Corporate Compliance on three agencies from which actions were to take place; there was one recoupment; the other findings were not as significant. The Medical Director's report along with the Chief Quality Officer's report highlighted the full continuum of work being done regarding those impacted by COVID-19 including adult foster care alternatives. There were reports provided regarding Access; Crisis Services; Utilization Management and NCQA. It was highlighted under Utilization Management the importance of keeping the slots under the HAB waiver program; slots were lost last year; for this year the

required rate is 95% and we are at 93% fill rate so we are progressing with the corrective action that was established regarding the program. It was reported by Utilization Management that NCQA will be visiting sometime next year in the 1st Quarter to survey us and staff is actively pursuing data that needs to be reported to support the standards as well as information that will need to be submitted next year. The Customer Pillar was reported on under the Strategic plan; it was noted that we are averaging from 21% to 68% compliance on the four major objectives under the Pillar; there are corrective strategies in place for improvement. There was one revised Board Action that were taken up at the meeting; BA#16-48 (Revised) Services to Enhance Potential (STEP)- Janitorial Contract which was moved to Full Board for approval. The Chair called for a motion. **It was moved by Mr. Glenn and supported by Ms. Brown to accept the Program Compliance Committee report.** There was no further discussion. **Motion carried unanimously.**

Recipient Rights Advisory Committee

Ms. Ruth, Vice Chair of the Recipient Rights Advisory Committee reported on behalf of Mr. William Riley, III Chair of Recipient Rights Advisory Committee. A written summary report was provided for the record. The Recipient Rights Advisory Committee met virtually on July 13, 2020. The newest member Ms. Vivian Palmer was welcomed to the committee. It was reported there are four (4) staff in the office to receive and process letters and they are all operating within the safety guidelines of wearing masks, gloves and practicing social distancing. All members can mail our office a complaint or use the new website. Recipient Rights Training is also being conducted and 68 new hires have been trained. There have been 21 no shows and providers have been requested to ensure that new hires that have signed up for training attend the training and ensure that all new hires complete the training within 30 days as mandated by the Mental Health Code. The Recipient Rights Office submitted their semi-annual report this month. The Recipient Rights department has received from October 1, 2019 to June 18, 2020; 1,103 complaints; closed 916 cases; opened cases 187; reviewed 235 incident reports and mailed 53 acknowledgement letters. The Director has implemented a morale booster for every meeting to highlight four staff which includes investigators and supervisors to encourage and highlight their hard work; this month Jerri, Chad; Trina; Christina and Nicole were highlighted for their outstanding work. The ORR Director also conducted training on “What is a Right” and explained approximately 15 different rights to the committee members as part of our on-going educational training for each meeting.

The Chair called for a motion on the Recipient Rights Advisory Committee Report. **It was moved by Mr. Glenn and supported by Dr. Taueg to accept the Recipient Rights Advisory Committee Report.** There was no further discussion. **The motion carried unanimously.**

The Chair called for a motion to recess the Full Board meeting to allow the Substance Use Disorder Oversight (SUD) Policy Board meeting to begin. **It was moved by Ms. Brown and second by Dr. Taueg to recess the Full Board meeting.** There was no further discussion. The motion carried unanimously and the Full Board meeting was recessed at 1:48 p.m.

SUBSTANCE USE DISORDER OVERSIGHT (SUD) POLICY BOARD MEETING

Mr. Angelo Glenn, SUD Oversight Policy Board Chair assumed the Chair and the Substance Use Disorder Oversight Policy Board Meeting was called to order at 1:48 p.m. An agenda was provided for the record. Mr. Glenn welcomed both boards to the meeting and thanked Mr. Parker, Chair of the Full Board for allowing the joint meeting to occur. A roll call was taken; a quorum was present with SUD Oversight Policy Board members Mr. Angelo Glenn, Dr. Cynthia Arfken, Mr. Tom Adams, Mr. James Perry, Mr. William Ventola, Ms. Margo Martin, Mr. Kevin McNamara, and Commissioner Jewel Ware in attendance; Mr. Tom Fielder and Chief William Riley, III were excused. The Chair noted that Public Comment and Good and Welfare would be taken during the Full Board meeting. The SUD Oversight Policy Board considered and approved two Board Actions one from Communications and the other from Community HAG. Reports were received by the SUD Director;

Treatment Director; Prevention Director along with a State Opioid Report (SOR) from the SOR Coordinator. There were no further discussions on the Substance Use Disorder Oversight Policy Board reports and the Substance Use Disorder Oversight Policy Board meeting adjourned at 2:23 p.m.

The Full Board meeting was reconvened by Mr. Parker, Board Chair at 2:23 p.m.

AD HOC COMMITTEE REPORTS

Policy/Bylaws Committee

Dr. Taueg, Chair reported the Policy Committee will meet on Monday, July 27, 2020 at 1:00 p.m. The Chair requested that a policy be developed that addressed mail sent and addressed to Board members be added to the Policy Committee agenda.

PRESIDENT AND CEO MONTHLY REPORT

Mr. Brooks reported. A written report was provided for the record. The CEO reported that he had been appointed to the Governor's Equity Committee which would be a third committee that he will be sitting on as well as a committee on Telehealth which he will Chair; the first meeting is scheduled for this month; he will provide updates to the Board on both committees. It was reported the Governor's Jail Diversion Council is looking at Telehealth as becoming a permanent part of their process and only in special circumstances with a rationale provided will there be in-person meetings; this process will become a part of their rules. COVID-19 testing for inmates is continuing; the Council is reviewing recommendations to the Governor regarding police reform.

There have been meetings with the Wayne County Diversion Council. The Council is similar to the Governor's Council; discussion focused on the county and training to officers as well as providing information on equity as it pertains to the police force and a paper is to be submitted.

The Michigan Department of Health and Human Services is abandoning the original documentation on the Specialty Integrated Plan (SIP) and are reviewing alternatives which DWIHN is a part of the plan. The State is looking at PIHP's as a part of the process as the department does see the value of the PIHP's. An overview of the funding was provided which included the reallocation of the monies that were sent to Michigan for COVID relief.

DWIHN is still working on the Autism benefit; we are losing roughly \$21 million dollars in Autism care and are trying to reconcile with the State. He is also working on the Death Audit and the General Fund issue of \$4.5 million dollars. Meetings have been scheduled with Lansing on a number of the issues.

He reported that we are taking into consideration our building; technology has provided resources to those working remotely and are taking in consideration physical space in the building. The building and future needs of DWIHN will be discussed at the Board Study session. Safety is one of the main concerns with our staff; all staff will be COVID tested in the next month as this will allow staff to know where they stand and staff will have access to the building in case they need to pick up files or equipment. Cleaning crews are wiping down the building on a regular basis; temperature checks are being conducted before one enters the building and everyone is required to wear masks when moving about the building and inside the building.

We are assisting the Providers with Personal Protective Equipment (PPE) when requested; we are also working with Providers to ensure they have the proper electronics to perform work. It was reported for FY 2021 contracting will be based on need and long-term goals of DWIHN. Providers will be provided early opportunities to qualify for FY 2021. This process will start with the SUD network. Mr. Brooks also noted that Chief Riley was recognized in the media. Also reported that

many households do not have access to the internet. He gave an overview of the six indicators and noted that suicide, substance use, and domestic violence rates are increasing; there will be a culture change with not being connected to students; also noted that inpatient care and costs are slowly on an up-climb as people become more comfortable with leaving their home. The indicators will become very important in the future as we continue to battle COVID-19 and behavioral health. Discussion ensued regarding the General Fund and the reduction that was to take place.

The Chair called for a motion on the President and CEO Report. **It was moved by Mr. Glenn and supported by Ms. Brown to accept the President and CEO Report.** There was no further discussion. **The motion carried unanimously.**

UNFINISHED BUSINESS

Staff Recommendations:

BA#16-48 (Revised)- Services to Enhance Potential (STEP) Janitorial Contract – Contract date extension only. The Chair called for a motion on BA #16-486 (Revised). **Motion: It was moved by Dr. Taylor and supported by Mr. McNamara approval of BA#17-56 (Revised).** Staff is requesting a **time only** extension on the STEP contract to continue janitorial services at 707 W. Milwaukee from July 31, 2020 – September 30, 2020. Many vendors were unable to participate in the Janitorial RFP process due to the COVID-19 pandemic. This extension will allow Facilities and Procurement time to secure a contract that will meet all the CDC building sanitation guidelines and regulations as well as our future building needs. There was no discussion. **The motion carried unanimously.**

BA#18-32 (Revised)- MILO Detroit – This Board action is requesting approval to pay an April outstanding invoice of \$4,816.66. An audit was performed by DWIHN and Milo and this a balance owed and will close out the 2018 contract on a previous purchase order. The Chair called for a motion on BA #18-32 (Revised). **Motion: It was moved by Mr. McNamara and supported by Ms. Ruth approval of BA #18-32 (Revised).** There was no discussion. **Motion carried unanimously.**

BA#20-24 (Revised) – Outfront Media - This Board action is a modification to close out contract on the previous purchase order and is requesting Board approval to pay an outstanding invoice from FY2019. The Chair called for a motion on BA#20-24 (Revised). **Motion: It was moved by Commissioner Killeen and supported by Mr. McNamara approval of BA#20-24 (Revised)** There was no discussion. **Motion carried unanimously.**

NEW BUSINESS

Staff Recommendations: None

FOLLOW UP ON ACTION ITEMS

The Board Chair requested the Public Affairs Association (PAA) information be sent to the SUD Oversight Policy Board and the Full Board; the Board Study Session agenda packet and the link be sent to the SUD Oversight Policy Board for the July 30th meeting and the development of a Board Mail Policy be added to the Policy Committee Agenda for the July 27th meeting.

GOOD AND WELFARE/PUBLIC COMMENT

The Board Chair, Mr. Parker read the Good and Welfare/Public Comment statement. There were no members of the public identified seeking to address the Full Board or the Substance Use Disorder Oversight Policy Board.

ADJOURNMENT

There being no further business, the Chair called for a motion to adjourn. **It was moved by Mr. Glenn and second by Ms. Ruth to adjourn. The motion carried unanimously and the meeting was adjourned at 2:46 p.m.**

Submitted by:

Lillian M. Blackshire
Board Liaison

PROGRAM COMPLIANCE COMMITTEE

MINUTES

JULY 8, 2020

1:00 P.M.

VIRTUAL MEETING

MEETING CALLED BY	I. Dr. Iris Taylor, Program Compliance Chair at 1:00 p.m.
TYPE OF MEETING	Program Compliance Committee
FACILITATOR	Dr. Iris Taylor, Chair
NOTE TAKER	Sonya Davis
TIMEKEEPER	
ATTENDEES	<p>Committee Members: Chief William Riley, III; Kenya Ruth; Dr. Cynthia Taueg and Dr. Iris Taylor</p> <p>Committee Members Excused: Dr. Lynne Carter</p> <p>Board Member(s) Present: Dora Brown, Dorothy Burrell and Bernard Parker</p> <p>Staff: Brooke Blackwell; Willie Brooks; Jacquelyn Davis; Eric Doeh; Bernard Hooper; Dr. Margaret Hudson-Collins; Dana Lasenby; Mike Maskey; John Pascaretti; Ebony Reynolds; and Michele Vasconcellos</p>

AGENDA TOPICS

II. Moment of Silence

DISCUSSION	The Chair called for a moment of silence.
CONCLUSIONS	Moment of silence was taken.

III. Roll Call

DISCUSSION	The Chair called for a roll call.
CONCLUSIONS	Roll call was taken by Board Liaison, Lillian Blackshire. There was a quorum.

IV. Approval of the Agenda

DISCUSSION/ CONCLUSIONS	The Chair called for approval of the agenda. Motion: It was moved Dr. Taueg and supported by Chief Riley to approve the agenda. Dr. Taylor asked if there were any changes/modifications to the agenda. There were no changes/modifications to the agenda. Motion carried.
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V. Follow-Up Items from Previous Meetings

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. School Programs for Summer and FY 2020 Budget – Provide remaining funds that will not be spent by end of FY 2020 – Ebony Reynolds, Clinical Officer of Clinical Practice Improvement gave a verbal update on the School Programs for Summer and FY 2020 Budget. Ms. Reynolds reported that:</p> <p><i>Of the 14 Providers in the School Success Initiative:</i></p> <ul style="list-style-type: none"> • The 11 CMHs estimate that they will return \$77,000.00 • Detroit Achievement Academy will spend their entire budget • Community Education Commission – GOAL LINE estimate returning \$56,000.00 • DPSCD estimates that they will return \$515,000.00 • Summer Youth Program estimated that they will return \$354,239 <p><i>Total estimation of return for both programs is \$1,002,239.00</i></p> <p>The committee requested that the list of remaining funds for the school programs for summer and FY 2020 budget that will not be spent be sent to the Finance Committee Chair, Tim Killeen. (Action)</p>
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VI. Approval of Meeting Minutes

<p>DISCUSSION/ CONCLUSIONS</p>	<p>The Chair called for approval of the June 10, 2020 meeting minutes. Motion: It was moved by Chief Riley and supported by Dr. Tauzeg to approve the June 10, 2020 meeting minutes. Dr. Taylor asked if there were any changes/modifications to the meeting minutes. There were no changes/modifications to the meeting minutes. Motion carried.</p>
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VII. Reports

<p>DISCUSSION/ CONCLUSIONS</p>	<p>A. Corporate Compliance Report - Bernard Hooper, Director of Corporate Compliance submitted and gave an update on the Corporate Compliance report:</p> <ul style="list-style-type: none"> • Salvation Army Harbor Lights (SAHL) – Effective July 1, 2020, Corporate Compliance has reinstated referrals to SAHL for Withdrawal Management and Residential Services. • Regina Home – Corporate Compliance has imposed a 10% financial sanction for each of the six days after the reporting deadline for them to respond to a Recipient Rights violation. The 10% sanction was imposed against the aggregate daily per diem for which Regina Home billed during the six days. The penalty amounted to \$135.09. • United Horizons Residential – At the instruction of the Office of Recipient Rights, Corporate Compliance and Managed Care Operations have suspended referrals to United Horizons Homes for 60 days as a result of a substantiated Neglect III violation. <p>Dr. Taylor opened the floor for discussion. There was no discussion.</p> <p>B. Medical Director’s Report – Dr. Margaret Hudson-Collins, Medical Director submitted and gave a report on her Medical Director’s report.</p> <ol style="list-style-type: none"> 1. DWIHN COVID-19 Response - DWIHN is continuing with our intensive care management/urgent care and SUD COVID-19 programs which have been very successful and DWIHN did not have to rely on the TCF Center.
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2. **Tri-County Medical Director's Meeting** - The main focus was primarily on each counties successes and challenges in dealing with COVID-19 issues (COVID-19 testing, lack of adequate PPEs, and inconsistent response with contact tracing). DWIHN was very successful in accomplishing these initiatives.
 3. **Constituent's Voice** - Dr. Hudson-Collins and DWIHN's constituents are actively pursuing community-based programming addressing race, police and people with disabilities. A committee was formed to galvanize interested constituents and pursue community presentations on this topic with a focus on education, training and advocacy.
 4. **Hospital Liaison Committee** - Focuses on identifying familiar faces, i.e., high utilizers of inpatient hospitalization. The long-term State hospitals are generally at capacity and alternative community housing becomes a chronic problem which has been a long-standing concern.
 5. **PIHP's Directors Advisory Meetings** - There has been a resurgence of COVID-19 cases, particularly in 20-35 years old population since the State has begun to flatten the curve and open up various businesses. There has also been a surge in the SUD population, a 40% increase in opioid use since March. These trends must be monitored closely and respond accordingly with those who fall in DWIHN's demographic.
- C. **Access and Crisis Services Quarterly Report** - Jacquelyn Davis, Director of Access and Crisis Services submitted and gave a report on the Access and Crisis Services' Quarterly report. Ms. Davis reported that during the beginning of the COVID pandemic, there has been a decrease in request for crisis services which has been significant for children; however, the data has shown it's beginning to slowly increase in the last two months of this quarter. The emergency departments have been requesting dates for when face-to-face services can restart. Staff is working with the hospitals to collect information on procedures and dates for access. There is a need for alternatives to inpatient specifically for individuals with I/DD. Staff is stressing use of Behavior Treatment Plans, Crisis Plans and improved coordination of services with the CRSP.
- D. **Utilization Management Quarterly Report** - John Pascaretti, Director of Utilization Management submitted and gave a report on the Utilization Management quarterly report.
1. **Habilitation Supports Waiver (HSW)** - DWIHN is assigned to filling 1,084 slots at 95%. At the end of June, 1,011 slots (93.3%) are filled. A Plan of Correction has been submitted to the State and awaiting response.
 2. **Evidence-based Supportive Employment** - Utilization Management and Clinical Practice Improvement will partner to tentatively design and implement a training coming this summer or by the end of summer.
 3. **Autism Spectrum Disorder (ASD) Benefit** - DWIHN has decided to rebid the RFP for the ASD Benefit requesting providers who will only complete the initial eligibility evaluation and thereby decreasing the risk. The deadline for questions is today and closes on Monday, July 20, 2020. The denial and appeal processes have been updated with the inclusion of DWIHN Physical Consultant to review requests outside of guidelines with no apparent documentation to support the need of service. There are 1,719 open cases with DWIHN.
 4. **General Fund** - There were 1,061 General Fund Authorizations. In April 2020, there were 456 General Fund requests as a result of the impact of COVID-19 limited related services to the public including the processing of Medicaid's new and renewal applications.

	<p>5. Hospital Utilization Reports – In an effort to decrease length of stay and hospital admissions, staff have developed a weekly meeting with the physician consultant to review cases with length of stay greater than 14 days. Access and Crisis, Quality Improvement and Utilization Management are working together to review causes for recidivism and admissions process.</p> <p>6. MI-Health Link – Staff managed 195 admissions for 2nd Quarter and 123 admissions for 3rd Quarter.</p> <p>7. State Hospital – There have three state hospital admissions and five discharges occurred during 3rd Quarter. Admissions are limited due to the MDHHS COVID-19 protocols. Discharges were affected at the beginning of COVID-19 restrictions which halted the placement process. There were eight admissions and 12 discharges at the end of the 3rd Quarter.</p> <p>8. Milliman Care Guidelines (MCG) – The majority of the PIHPs have adopted the use of the Guidelines to ensure parity across the state. DWIHN has screened 3,097 consumers using Indicia. COPE, the Children’s screening entities, and ACT teams have screened 3,059 cases during the 3rd Quarter. Staff continue reviewing patient’s stay utilizing the Guidelines for continued stay.</p> <p>9. Substance Use Disorder – There were 5,702 authorizations approved by SUD/UM reviewers for the second quarter of FY 2019-20. The second quarter overall benchmark was met at 90% as 5,099 were approved in total within review times-frames. There were 3,810 authorizations approved by SUD/UM reviewers for the third quarter of FY 2019-20. The third quarter benchmark was met at 98% as 3,810 were approved in total within the required review time-frames.</p> <p>10. Timeliness Report – DWIHN is required to monitor the turnaround time for all decisions (denials and approvals) including the decisions themselves and the notifications of the decisions. The timeliness for UM decision-making and notification for quarter 2 (January-March 2020) is 90%.</p> <p>11. NCQA Update – The UM department has 12 NCQA Standards. Many of the standards require policy, procedure, ongoing monitoring and uploading of meeting notes, reports and documentation to support our compliance. NCQA review starts in February 2021. Staff will notify the committee by November’s meeting of what is needed by the committee for NCQA review.</p> <p>(Action) The Chair bundled all reports and called for a motion to accept the Corporate Compliance and Medical Director’s reports; Access and Crisis Services and Utilization Management quarterly reports; and the NCQA Update. Motion: It was moved by Dr. Taueg and supported by Chief Riley to accept the Corporate Compliance and Medical Director’s reports; Access and Crisis Services and Utilization Management quarterly reports; and the NCQA Update. Motion carried.</p>
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VIII. Quality Review(s) - None

DISCUSSION/ CONCLUSIONS	There were no Quality Review(s) to review and approve.
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IX. Strategic Plan-Customer Pillar

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Michele Vasconcellos, Director of Customer Service submitted and gave a report on the Strategic Plan-Customer Pillar.</p> <p>A. Strategic Plan-Customer Pillar – This pillar involves the collaboration efforts of Customer Service, I.T., Network Management, Credentialing, Self-Determination and Utilization Management. Overall, this pillar is currently at 61% completion. Customer Service is responsible for three goals:</p> <ol style="list-style-type: none"> 1. Enhance the Provider Experience – Current completion is 49%; Expected completion is by 12/31/21 – COVID has resulted in remote technologies available to staff to support provider network, i.e., video conferencing and Call Center remote access to phone lines. 2. Ensure Inclusion and Choice for Members – Current completion is 68%; Expected completion is by 9/30/20 (may be pushed to 10/2020) – Staff has identified 220 individuals to self-direct their services. Their transition from CLS will occur in September 2020. 3. Improve Person’s Experience of Care and Health Outcomes – Current completion is 39%; Expected completion is by 12/31/21 – Provider Directory enhancements being launched with new DWIHN website. The addition of the Psychiatric inpatient care facilities, i.e., Community Care Services, Northeast Integrated Health and Team Wellness Crisis Stabilization units have been implemented and are offering additional options for hospital inpatient diversions. <p>The Chair called for a motion to accept the Strategic Plan-Customer Pillar report. Motion: It was moved by Chief Riley and supported by Mrs. Ruth to accept the Strategic Plan-Customer Pillar report. Dr. Taylor opened the floor for further discussion. She requested the updated Strategic Plan be sent to all committee members within the next ten days for review prior to the Board Study Session. There was no discussion. Motion carried.</p>
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X. Chief Clinical Officer’s (CCO) Report

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Dana Lasenby, Chief Clinical Officer submitted a full report and gave highlights on her Chief Clinical Officer’s report. Mrs. Lasenby reported that:</p> <ol style="list-style-type: none"> 1. COVID-19 Response Plan – Proactively planning for next potential resurge of COVID-19 to ensure access, placement and specialized programs for individuals served by DWIHN if TCF Field House is repurposed as hospital step-down similar to sub-acute crisis or psychiatric hospital/residential program and diversion to inpatient hospitalization. 2. COVID-19 & Inpatient Psychiatric Hospitalization – Showed a decrease in inpatient hospitalization (651) for the month of June – 9.8% decrease from May 2020. 3. COVID-19 Intensive Crisis Stabilization Services – Due to the pandemic and a shortage of mental health resources, specifically crisis services, MDHHS granted provisional approval of Team Wellness Center and Community Outreach for Psychiatric Emergencies (COPE) to provide Intensive Crisis Stabilization services. Team Wellness serviced 43 clients and COPE service 184 clients in the month of June.
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	<p>4. COVID-19 Pre-Placement Housing – Pre-placement housing provides DWIHN clients with immediate and comprehensive housing and supportive services to individuals who meet the admission criteria and eligibility. Forever Care Home serviced two clients and Detroit Family Homes serviced six clients for the month of June. Due to the COVID emergency, DWIHN is provisionally impaneling the residential providers.</p> <p>5. Residential Services Department report of COVID-19 Impact – Total number of positives cases from March 30, 2020 to June 30, 2020 were 161 and 31 deaths were reported.</p> <p>6. COVID-19 Recovery Housing/Recovery Support Services – Two additional recovery housing/support for individuals with substance use disorder were identified, Quality Behavioral Health (QBH) and Detroit Rescue Mission Ministries (DRMM). QBH serviced 20 clients and DRMM did not service any clients for the month of June.</p> <p>7. COVID-19 Urgent Behavioral Health Urgent Care Sites – Community Care Services, Northeast Integrated Health and The Children’s Center offered Urgent Behavioral Health services during the pandemic. Community Care serviced 11 adults, Northeast serviced nine (9) adults and The Children’s Center serviced seven (7) youths for the month of June.</p> <p>8. Telehealth Readiness Survey – The survey has been completed. It will be used to determine what clinical and operational guidelines are in place to ensure appropriate telehealth protocols are in use, what policies have been developed and reviewed by healthcare providers, and documentation of clinical events before, during and after a telehealth session.</p> <p>9. COVID-19 Testing, Tracing and Reporting – DWIHN will continue to collaborate efforts with the City of Detroit Health Department and the Wayne County Health Department. An environmental scan and survey have been developed to focus on home or clinic-based access on COVID-19 testing for residential/community living arrangements for staff and individuals being served.</p> <p>Mrs. Lasenby recommends continuation with the programs and plan going forward for potential research for COVID-19 and as an extension of our crisis continuum.</p> <p>The Chair called for a motion to accept the Chief Clinical Officer’s report. Motion: It was moved by Chief Riley and supported by Mrs. Ruth to accept the Chief Clinical Officer’s Report. Dr. Taylor opened the floor for further discussion. There was no discussion. Motion carried.</p>
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XI. Unfinished Business

<p>DISCUSSION/ CONCLUSIONS</p>	<p>B. BA #16-48 (Revised) – Janitorial Services – Services to Enhance Potential (STEP) Contract Extension (Time only) - The Chair called for a motion on BA #16-48 (Revised). Motion: It was moved by Mrs. Ruth and supported by Chief Riley to move BA #16-48 to Full Board for approval. Staff is requesting a time only extension on the STEP contract to continue janitorial services at 707 W. Milwaukee from July 31, 2020 – September 30, 2020. Many vendors were unable to participate in the Janitorial RFP process due to the COVID-19 pandemic. This extension will allow Facilities and Procurement time to secure a contract that will meet all the CDC building sanitation guidelines and regulations as well as our future building needs. Dr. Taylor opened the floor for discussion. There was no discussion. Motion carried.</p>
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XII. New Business: Staff Recommendation(s) - None

DISCUSSION/ CONCLUSIONS	There was no New Business to review and approve.
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XIII. Good and Welfare/Public Comment

DISCUSSION/ CONCLUSIONS	The Chair asked if there were any Good and Welfare/Public Comment. There was one written comment from Ms. R. Hall regarding concerns of the \$2.00 raise not yet being received and the reduction of client's hours. She noted she has a combative individual that needs 24- hour care and requires two staff; however, the hours for staff have been reduced to ten by DWIHN. If the client is left alone she will leave the residence and possibly hurt herself or others. The Chair requested this information be sent to staff for follow-up.
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ACTION ITEMS	Responsible Person	Due Date
1. School Programs for Summer and FY 2020 Budget – Send the list of remaining funds for the school programs for summer and FY 2020 budget that will not be spent to the Finance Committee Chair, Tim Killeen.	Lillian Blackshire	COMPLETED
2. UM Quarterly Report (NCQA Update) – Notify committee by November 2020 meeting of what is needed by the committee for the NCQA review.	Bernard Hooper	November 2020

The Chair called for a motion to adjourn the meeting. **Motion:** It was moved by Chief Riley and supported by Mrs. Ruth to adjourn the meeting. **Motion carried.**

ADJOURNED: 2:20 p.m.

NEXT MEETING: Wednesday, August 12, 2020 at 1:00 p.m. *(Virtual Meeting)*



**Board of Director's Report
Willie E. Brooks, Jr.
August 2020**

Jail Diversion

Jail Diversion Projects

Updates on the two (2) Jail Diversion projects that I represent.

Committee 1: Governor's Mental Health Diversion Council

I received notification of reappointed to the Governor's Mental Health Diversion Council for a second four (4) year term effective February 1, 2020.

Action Plan for Upcoming Year

- Strengthen and expand preemptive diversion by fostering community support services.
- Strengthen and expand law enforcement diversion for individuals with mental illness and co-occurring conditions upon initial encounter.
- Develop strategies to deliver treatment and divert individuals prior to first court appearance.
- Develop strategies to deliver treatment and divert individuals after first court appearance up to and including disposition.
- Improve re-entry outcomes, by enhancing pre-release planning, individualized connections and follow up supports between institutions and community services
- Promote and implement a continuum of care that enables the individual to maintain long-term community stability to reduce recidivism.
- Oversight and implementation of statewide pilot initiatives and administering best practices through data collected.
- Identify statutory, policy and fiscal barriers to achieving diversion goals.
- Identify specific best practices at each intercept point to create a statewide master model.
- Follow up statewide knowledge sharing conference to share Diversion Council findings and promote technical assistance from the Center for Behavioral Health and Justice

The Diversion Committee discussed telehealth policies with the courts and how many of the court hearings are now being performed via video conference. It is expected that the process of video conference will continue in the extended future as many judges are adjusting to the process.

The Diversion Committee addressed the impacts of COVID-19 to inmates throughout the state of Michigan. COVID-19 testing is increasing in the correction system with increases in positive test results.

Committee 2: Wayne County Diversion Council (WCDC)

Chief Wayne County Probate Court Judge Freddie G. Burton, Jr. heads this program. The Wayne County Diversion Council (WCDC) is dedicated to diverting non-violent people with Mental Illness and Co-occurring Mental Illness and Substance Abuse (CMISA) from the criminal legal system and into the appropriate level of treatment.

Members:

Hon. Nancy Blount (Chief Judge, 36th District Court), Laura McLaughlin (Special Projects 36thDC), Hon. Freddie G Burton, Jr. (Chief Wayne County Probate Court Judge), Hon. Timothy Kenny (Chief Judge, 3rd Circuit Court), Andrea Cole (CEO Flinn Foundation), Dean Sheryl Kubiak (Center for Behavioral Health and Justice at WSU) Scott Smith (Center for Behavioral Health and Justice at WSU), Nanci Hambrick (Center for Behavioral Health and Justice at WSU), Stacey Campbell (Center for Behavioral Health and Justice at WSU), Sojourner Jones (Community/Law Enforcement, DWIHN), Julie Black (Clinical Manager, DWIHN) Andrea Smith (Director of Program Services, DWIHN), Reid Wilson (Executive Manager, Detroit Police Department), Amanda Rzotkiewicz (Analyst, Detroit Police Department), Gary Bresnehan (Wayne County Prosecutor's Office) Alisha Bell (Chair, Wayne County Commission) Dr. Debra Pinals (Medical Director, MDHHS) Willie Brooks (CEO DWIHN).

The Wayne County Diversion Council (WCDC) discussed extending video conference court hearings indefinitely.

WCDC is reviewing the impacts of prematurely releasing inmates as the threat of COVID-19 pressures correction systems to release inmates and lower the number of incarcerations.

WCDC is looking at methods of alternative settings for individuals with mental illness. Wayne County currently has 828 inmates, down from +1400 pre-COVID-19. There are no new reported cases from the previous 83 confirmed cases. The number under quarantine is down to 6 inmates. There are 1023 inmates released on tether.

The Council discussed the merits of "Unfunding the Police" along with potential change recommendations in light of the "Black Lives Matter" (BLM) movement. The group agreed to collaborate on a position statement concerning BLM.

Telehealth Workgroup

The committee is made up of individuals through the state and is Co-Chaired by myself and Jametta Lily, CEO of Detroit Partner Network.

The purpose of the committee is to evaluate the need for Telehealth within the state and access methods to connect the state.

Some concerns discussed:

1. Lack of infrastructure
 - a. 30% of Children within Detroit have no internet
 - b. Lack of computer infrastructure
 - c. Elderly acceptance and usage of Telehealth
2. Poverty Level Among Minorities
3. Educational Shortfalls and need for virtual learning options
4. Support Systems
5. Fraud concerns with providing Telehealth infrastructure
 - a. Assuring equipment and assistance goes to the correct hands
 - b. Assuring equipment is used properly
6. Changing the Culture
 - a. Slow but steady acceptance of Telehealth
 - b. Realistic expectations
7. Segregation creates segregation

Facts

1. COVID-19 forced businesses to utilize technology that has already been existence
2. Concerns of work integrity
 - a. Monitoring productivity
 - b. Assuring integrity of services and work
 - c. Credentialing
 - d. Monitoring
3. Exposure
 - a. COVID-19 exposed issues that were already in existence
 - i. Disparity in Economics
 - ii. Disparity in Education
 - iii. Disparity in Health Care
 - iv. Selected ignorance of disparity issues

Thoughts

1. Assisting internet connections and infrastructure
 - a. Best to help versus give
 - b. Training classes
2. Realizing that helping others help all
 - a. The belief that a class system benefits society is false
 - b. Uncovering loss potential
 - c. Advantages of diversity
 - i. Added economic growth
 - d. Must have a sincere concern for people

3. Investment

- a. Need to access the financial needs for Telehealth
- b. Explaining the fact that it is an investment into society
- c. Assuring ROI for those that contribute
- d. Assuring that donated resources are used for the purpose designed

DWIHN and City of Detroit (COD) Partnership

The purpose of this workgroup is to improve police and community relationships, along with addressing improved relationships with the people we serve under mental health and substance use with the Detroit Police Department.

DWIHN and COD Partnership Goals:

- Pilot a 911 mental health crisis call diversion and response
- Increase police officer access to mental health supports
- Develop adequate places to house individuals in need of crisis services
- Evaluate and expand Crisis Intervention Team (CIT) training of police officers

Health Plan Integration / MDHHS Behavioral Health Restructure (SIP)

DWIHN is finalized agreements with two Health Plans. Currently working with clinicians, on the program design and implementation for next fiscal year.

Specialty Integrated Plan (SIP) Model

MDHHS announced a proposal, Specialty Integrated Plan (SIP) to promote integration of care within Behavioral Health and Health Care. The plans details are as follows:

- **Preserving the public safety net.** MDHHS announced that their goal is to preserve and strengthen the community benefit system through the current Community Mental Health Service Providers (CMH). Changes will occur to promote consistency of service and benefits throughout the state.
- **Specialty Integrated Plan (SIP).** MDHHS will move to a one payer and one accountable organization. The newly formed SIP will eliminate Prepaid Inpatient Hospital Plans (PIHP's) and will work directly with health care providers and CMH on the delivery of integrated care. The newly formed Sip will function as a Managed Care Organization (MCO) system and will be a full risk-bearing entity, which includes the management of profits and losses.
- **Focus on the Specialty Population.** The new program will focus on individuals formerly managed by the PIHP's, but will now include both physical and behavioral care. Individuals outside of the PIHP system will continue service with the Health Plans.
- **Multiple SIP Options.** MDHHS is pursuing 3-5 statewide SIPs that will function simultaneously and provide choice to attract and retain members. MDHHS plan is to

have multiple organizations as SIP's, including public behavioral systems, providers, hospitals, and other care entities. SIP's must be a licensed MCO.

- **Statewide Program.** MDHHS is seeking statewide provider networks to assure consistency of care and choice. CMH's can participate as providers within the SIP structure.

DWIHN Updates:

- MDHHS currently is pursuing discontinuing the SIP plan
- MDHHS is pursuing options to partner with the PIHP's in building a future for Behavior Health in Michigan
- MDHHS requested a Provider Stabilization Plan outlining DWIHN's plan for continued service through the COVID-19 pandemic. This assignment was completed June 4, 2020 as indicated by MDHHS and will also require monthly updates. The response included:
 - Members served pre and post COVID-19
 - Provider type totals for Wayne County
 - Funding and expenses trends
 - Funding Priorities
 - Operational Priorities
- MDHHS asked DWIHN and other key figures to work with them as they evaluate the future structure of Behavior Health.

2020 Funding Updates

Medicaid:

- Death Audit
 - Potential recovery of \$9 million pending. Currently pushed back another month as MDHHS analyzes the impacts on the audit to the PIHP system. This recoupment would effectively eliminate the \$10 million increase. MDHHS issued another hold on this recoupment in August as they evaluate the impacts.
- Autism
 - MDHHS is reviewing DWIHN's request to cost settle \$21 million in overspend for Autism. Autism rates and guidelines are set by MDHHS, which makes it somewhat difficult for DWIHN to control. I discussed the Autism circumstances with MDHHS on Tuesday June 2, 2020 and expressed DWIHN's concerns with this process and the lack of a cost settlement by MDHHS. MDHHS is taking a serious look at the impacts of Autism on the PIHP system.
- Provider Rate Reduction
 - DWIHN has pushed back the proposed 7% rate reduction previously scheduled for May 1, to the new fiscal year of October 2020. DWIHN is currently reviewing FY21 revenues to determine any modifications to the proposed reduction.

General Fund:

Michigan Department of Health and Human Services (MDHHS) put together a task force made up of Community Mental Health agencies to determine a method of rebasing General Fund dollars to the PIHPs. The group's decision was to lower DWIHN General Fund dollars by \$4.5 million each year to a cumulative total reduction of \$22.5 million by year five. DWIHN is in the second year of this reduction with a slated \$9 million in reductions to occur this fiscal year.

The first year of the reduction, DWIHN lobbied to have a supplemental payment in place to hold DWIHN harmless. That supplemental should carry over to FY20, which will still create a **\$4.5 million General Fund deficit**.

DWIHN is currently pursuing a long-term solution for the overall \$22.5 million slated reduction. I discussed this issue with MDHHS on June 2, 2020. There is no resolution as of today.

Building

DWIHN will review the Crisis Continuum project and the building requirements to assure it meets the needs of the new MDHHS proposal. COVID-19 is changing the way DWIHN and the provider network does business.

DWIHN is implementing return to work procedures in result to COVID-19. This process will include:

- Personal Protection Equipment (PPE) usage guidelines for staff as outlined by the Governor's office.
- Assuring social spacing practices are maintained in the work setting
- Provide on-site routine COVID-19 testing for staff
- Determining public access to the building
- A portion of staff is now working out of the Milwaukee location, effective June 1, 2020
- All staff and security have been tested.

Staffing

DWIHN is reviewing all positions to assure it meets the future needs of the MDHHS integration design along with COVID-19 changes.

This includes:

- Furloughing 10% of the DWIHN staff in result to COVID-19 limitations and changes in work structure. All staff have returned from furlough with no plans for future furloughs at this time.

- Currently establishing staff needs in result to COVID-19 changes and future DWIHN functional changes.
- Increasing technical infrastructure for remote work requirements.
- Review processes learned from offsite processing.
 - We must prepare DWIHN for the future of the organization
 - Figure what worked and what didn't work
- Re-examine building requirements
 - New Center One (NCO) potential elimination
 - Update Central Building design with spacing and hoteling needs
 - Online video conference meetings long term goals
- Off-site
 - Clearly define functions that can be performed off-site
 - Establish methods of measuring productivity
 - Establish meeting requirements and technology
 - Protocol for returning for providers and staff

Provider Network

Provider Contracting

For the contract period of FY 2020, current contracts will be carried over. DWIHN is in the process of evaluating the overall provider network and needs of the community to assure that the provider network meets our community goals of a holistic network. FY 2021 contracting will be based on need and long-term goals of DWMHA. Providers will be provided early opportunities to qualify for the next FY 2021. This process will start with the SUD network.

Communications

In the Media

Free Press – DWIHN’s Deputy CEO and Chief Operating Officer Eric Doeh was featured in the Detroit Free Press with his Op-Ed on Defunding and Reforming the Police.

<https://www.freep.com/story/opinion/contributors/2020/08/03/defunding-reforming-police/5379634002/>



Eric Doeh is the deputy CEO and chief operating officer of the Detroit Wayne Integrated Health Agency at 1900 Cass St. in Detroit. Photo by Health Resources.

To my law enforcement friends and colleagues, the solidarity and support you show for me is a testament to your part of the community. I am grateful to you who are neighbors, fathers, sons, and brothers who simply want to make sure we safely remember the lives that were taken to ensure a more safety for all.

For some of my law enforcement friends and colleagues who believe that the problem against inequality and the world. Both lives matter is becoming an effort to them. It is not just about them, or a disrespect to them, my response to them is challenge yourself to work together and create change. This is a systemic problem. A problem that when a significant population of the world cannot come to the reality that there is a major problem amongst some of its members is a problem that is not just a problem.

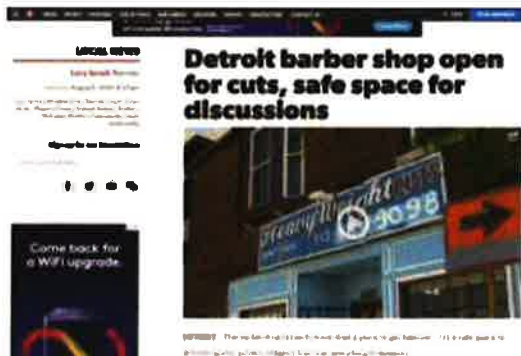
WXYZ Channel 7 – DWIHN’s Clinical Nurse Specialist, Alicia Oliver, MSN, RN was interviewed by Ameera David of Channel 7 News. The Rebound Detroit Facebook Live discussion was related to keeping senior parents physically active, what is considered safe when going out and ways they can find ways to cope with COVID.

<https://www.facebook.com/80221381134/videos/742298276530975>



WDIV-TV Local 4/ClickOnDetroit.com & The Michigan Chronicle – DWIHN was featured in a story about the impact Barbershops continue to have on the black community and how they serve as a safe haven for courageous conversations on men’s health, substance abuse, and violence. This story also ran in the Michigan Chronicle.

<https://www.clickondetroit.com/news/local/2020/08/06/detroit-barber-shop-open-for-cuts-safe-space-for-discussions/>



WDIV-

Barbershops Continue To Be A Pillar For The Black Community By Discussing Men's Health, Substance Abuse, And Violence

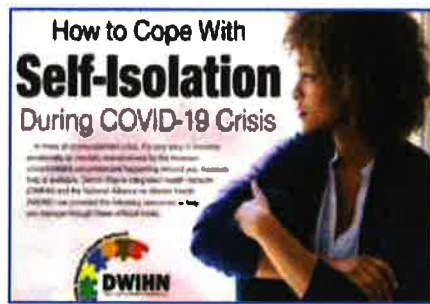
TV Local 4, NBC Detroit/ClickOnDetroit.com – DWIHN was featured on the Clickondetroit.com website of Channel 4 for one day in July. On average, the home page receives 150,000 to 200,000 impressions on any given day. For the month of July, we received over 2 million impressions on our 30 second message as well as our digital ads.



Ask the Messengers My TV20 - The Communications department in conjunction with SUD is partnering with 6 different media outlets throughout Detroit and Wayne County to combat the opioid epidemic. There will various stories and resources published within the next year about treatment, recovery, and prevention. ATM will feature a story of the Rolling Recovery Units. We will partner with Comcast, the Latino Press, MEA-TV, Fox 2 News, iHeart Radio, and the MI Chronicle.

BridgeMI.com - Director of Workforce Training & Program Development Andrea Smith was quoted in BridgeMI.com on an article about criminal justice and mental health reform. <https://www.bridgemi.com/michigan-health-watch/defund-police-or-reform-what-city-oregon-can-teach-michigan>

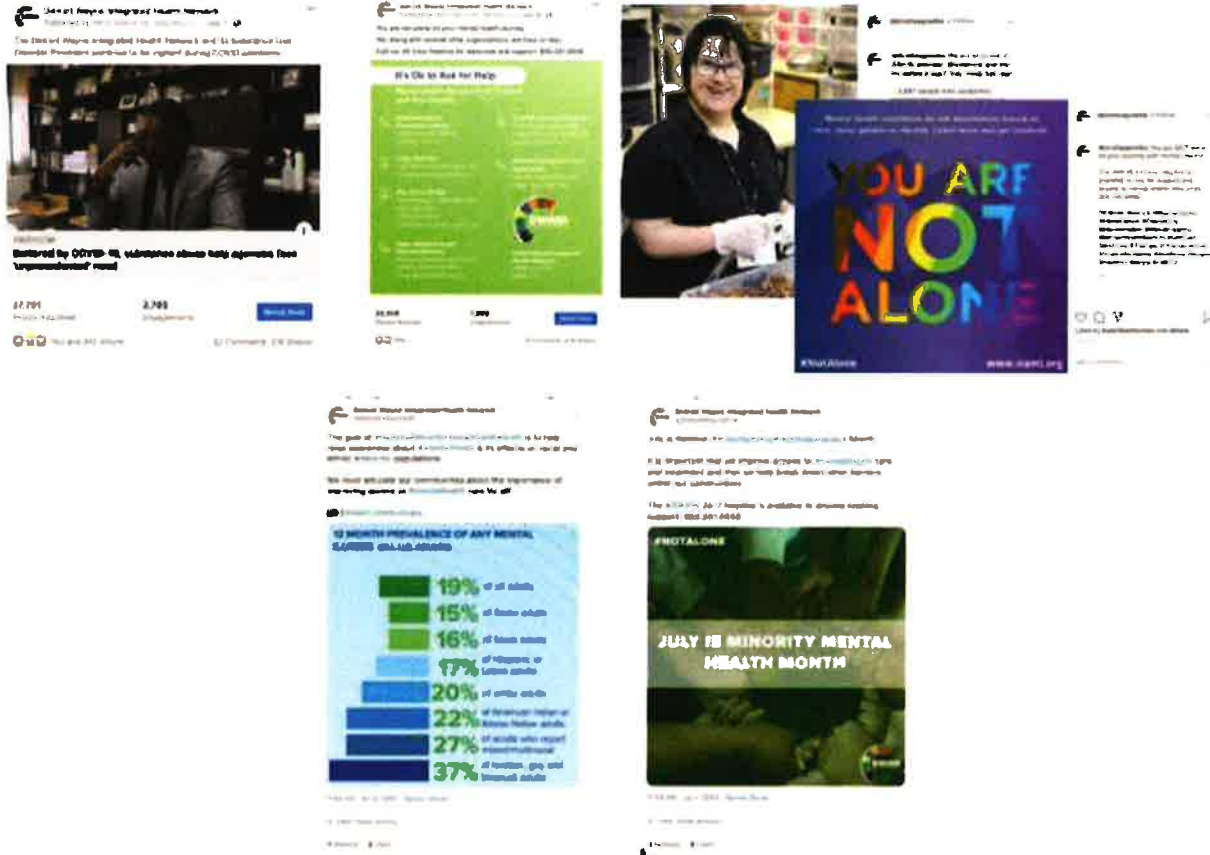
Community Newspapers- DWIHN partnerships continue with the Michigan Chronicle and the Arab American News. The latest Arab American News story focused on the COVID Therapy Line, ReachUsDetroit.org initiative.



Outfront Media – New billboards were created and will be seen throughout several locations in Wayne County including Detroit, Hamtramck, Dearborn and Southwest Detroit. The Arabic and Spanish billboards translate to “Be Seen” and “You Should Be Heard”.

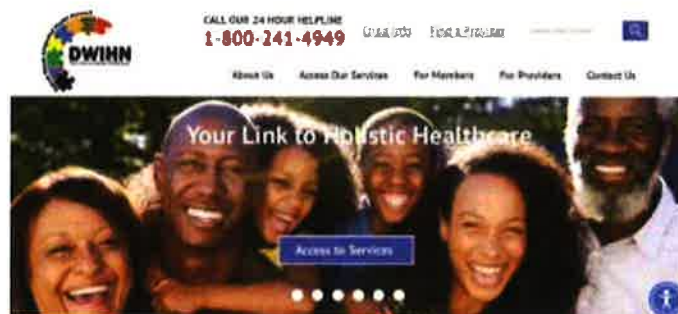


Social Media – The top performing posts for July were related to National Minority Mental Health month, our Provider highlight of JVS, LGBTQ access to care, SUD Providers continuing to offer services to the community during COVID-19. Content displaying information about mental health resources during the Coronavirus pandemic performed over average, with **8,821 engagements** which is an increase compared to previous content. Instagram and Twitter engagement and followers increased as well. There were also several graphics created for the Reach Us Detroit COVID therapy line that were shared with social media influencers who are trying to engage young people and educate them about this service.



DWIHN

Website - The DWIHN website has been completely revamped and is more user-friendly for both people we serve and the Provider network.



Community Outreach – Children’s Initiatives is offering a recurring Cultural and Linguistic Competency Learning series. Youth United held a series of virtual community outreach events including its 90’s themed Meet and Greet with Youth Move Detroit and the Courageous Conversations on Sex Human Trafficking awareness with Elli’s House. The Customer Service department has also held a virtual voter rally, an EVOLVE (Engaging Voices Offering Lessons, Love Laughter Validating Experience” event where the topic was the census and voting. They are also holding several “S.O.U.L.S Chat” forums (Supportive, Outreach, Understanding Life Situations) where people we serve can call in and discuss concerns with a caring community.

2020 Children's Cultural & Linguistic Competency Learning Series

Integrating Culture into Practice
with keynote speaker *Michelle Montgomery*

Due to the COVID-19 Pandemic, the 2020 Children's CLC Summit has transitioned into a multi-day online learning series. Attendees can virtually attend workshops that fit their schedule.

Beginning Friday, July 17th, 2020

For more information or to register, visit www.childrensconnections.org
Email: info@childrensconnections.org

Every VOTE Counts!

JOIN THE CV ADVOCACY COMMITTEE
FOR A VIRTUAL VOTING EDUCATION RALLY

**THURSDAY, JULY 16TH, 2020
1 PM - 3 PM**

GUEST SPEAKERS & PRIZES

LEARN HOW YOU CAN MAKE A DIFFERENCE BY VOTING

Meeting ID: meet.google.com/whh-tdkz-vgb
Phone Number: 1 202 783 8312 | PIN: 542 626 8246

CLOSED CAPTIONING AVAILABLE

90s MEET & GREET

07.23.2020

1 PM - 3 PM

EVOLVE!

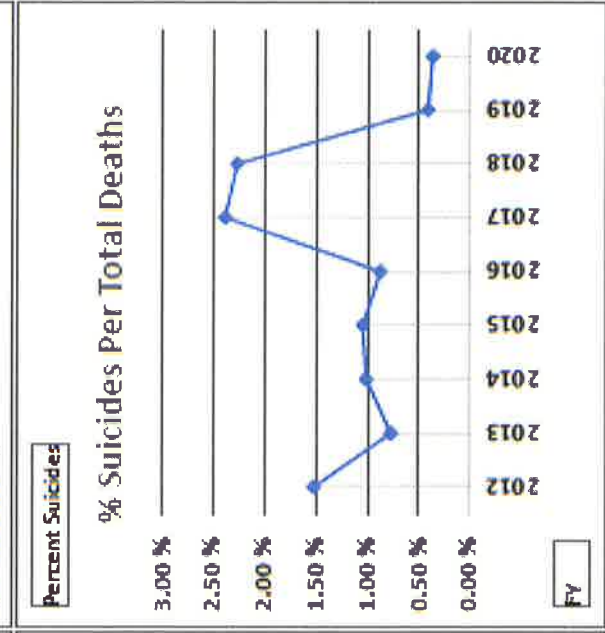
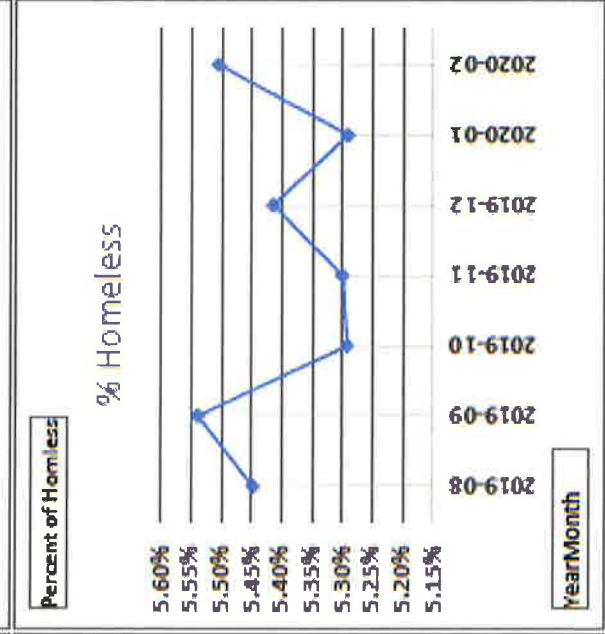
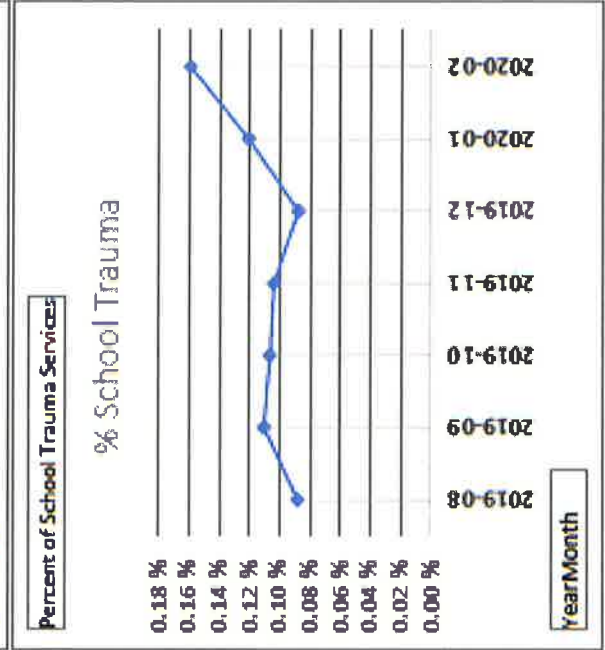
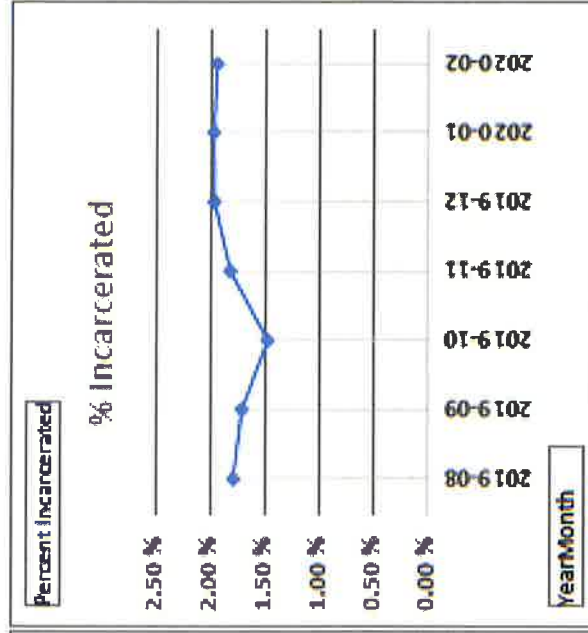
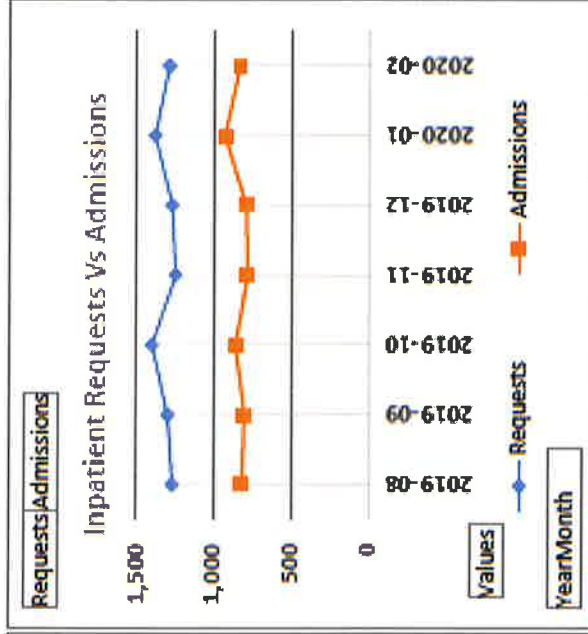
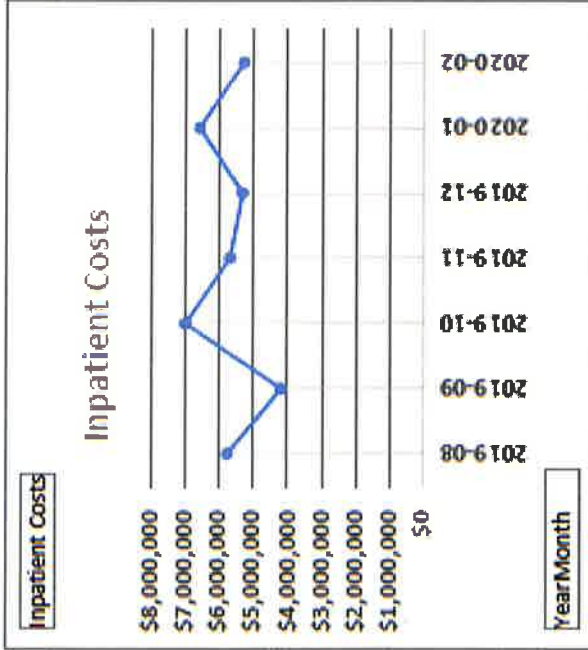
WEDNESDAY JULY 29, 2020

10:15 A.M. - 12:00 P.M.

SPARKS & TOPICS:
Voting, Online Petitions & Campaign - Virtuality Research

Please RSVP at the link below:
<https://form.jotform.com/81444536560154>

Key Mental Health Indicators



**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 19-15 R2 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Neighborhood Serv. Organizatio, Southwest Counseling Solutions, Northeast Guidance Center

Contract Title: Southwest Counseling Solutions (Housing Resource Center); Neighborhood Service Organization (NSO) Tumaani Center and Northeast Integrated Health - Covenant House

Address where services are provided: 2959 Martin Luther King, Jr. Blvd., Detroit, MI 48208

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 2,124,637.00 Previous Fiscal Year: \$ 2,124,637.00

Program Type: Continuation

Projected Number Served- Year 1: 1,750 Persons Served (previous fiscal year): 2,235

Date Contract First Initiated: 10/1/2004

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 recommends approval for modification of Board Action (19-15 R) for the above-listed contracts for continuance of programs to serve individuals experiencing homelessness or at-risk of homelessness. These programs will provide supportive services to assist individuals with severe mental illness, emotional disturbance, co-occurring disorders, and intellectual/developmental disabilities.

This Board Action recommends modification for **Southwest Counseling Solutions – Housing Resource Center** for the amount of \$1,089,715.00 to provide housing assistance, resources, intervention and collaborative community efforts to reduce homelessness of persons with mental illness and co-occurring disabilities; **Neighborhood Service Organization - 24 hour Walk-in Center (Tumaani Center)** in the amount of \$902,050.00 to provide intensive services to decrease homelessness and residential instability and increase individuals in supportive living arrangements; and for the continuation of the **Northeast Integrated Health (formerly Northeast Guidance Center) – Covenant House Program** in the amount of \$132,872 to addresses gaps in service through the provision of mental health support for young adults experiencing homelessness.

Board Action #: 19-15 R2

The total amount for this Board Action for the contract term is \$2,124,637 from October 1, 2020 - September 30, 2021.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Medicaid	\$ 1,222,587.00	\$ 1,222,587.00
General Fund	\$ 902,050.00	\$ 902,050.00
Total Revenue	\$ 2,124,637.00	\$ 2,124,637.25

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: various

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Wednesday, August 5, 2020

Signed: Wednesday, August 5, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature

William M. Blackshire

Board Liaison

Date

8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA #20-59 Revised: Requisition Number: 11,624

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Peter Chang Enterprises

Contract Title: PCE/MHWIN Maintenance Contract Extension

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 2/29/2020 to 2/28/2021

Amount of Contract: \$ 870,300.00 Previous Fiscal Year: \$ 871,200.00

Program Type: Continuation

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

Date Contract First Initiated: 3/1/2017

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).

Request 1 yr contract extension for MHWIN maintenance services with PCE.

The reactive contract with PCE and DWIHN is for hosting and maintenance of MH-WIN and the Substance Use Disorder Managed Care Module.

This extension is from February 29th, 2020 until February 28th, 2021. MH-WIN monthly cost is approximately \$72,525.00 for an annual amount of \$870,300.

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
Multiple	\$ 870,300.00	\$ 870,300.00
	\$ 0.00	\$ 0.00

Total Revenue	\$ 870,300.00	\$
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Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical):

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? N

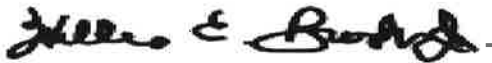
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, August 10, 2020

Signed: Monday, August 10, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20 - 58 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Michigan Department of Community Health

Contract Title: Grant Agreement Between Michigan Department of Health and Human Services hereinafter referred to as the "Department" and Detroit Wayne Integrated Health Network (formerly known as Detroit Wayne Mental Health Authority) for Community Mental Health Services Program (CMHSP) – 2020.

Address where services are provided: Varies

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2019 to 9/30/2020

Amount of Contract: \$ 30,449,273.00 Previous Fiscal Year: \$

Program Type: New

Projected Number Served- Year 1: 3,000 Persons Served (previous fiscal year): 3000

Date Contract First Initiated: 10/1/2019

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 is for receipt and dispersal of the FY 2020 Contract between Michigan Department Health and Human Services and the Detroit Wayne Integrated Health Network (DWHN) formerly known as Detroit Wayne Mental Health Authority (DWMHA) for the Community Mental Health Services Program (CMHSP). This contract is for the provision of a comprehensive array of mental health services and supports.

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 19/20	Annualized
General Fund	\$ 30,449,273.00	\$ 30,449,273.00
	\$ 0.00	\$ 0.00

Total Revenue	\$	\$ 30,449,273.00
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Recommendation for contract (Continue/Modify/Discontinue): Continue

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Tuesday, August 11, 2020

Signed: Monday, August 10, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 20 - 58 R1 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Michigan Department of Community Health

Contract Title: Michigan Department of Health and Human Services and CMHSP: Detroit Wayne Integrated Health Network for Managed Mental Health Supports and Services

Address where services are provided: Varies

Presented to Program Compliance Committee at its meeting on: 8/11/2020

Proposed Contract Term: 10/1/2019 to 9/30/2020

Amount of Contract: \$ 30,449,273.00 Previous Fiscal Year: \$

Program Type: Continuation

Projected Number Served- Year 1: 3,000 Persons Served (previous fiscal year): 3000

Date Contract First Initiated: 10/1/2019

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).

Detroit Wayne Integrated Health Network received amended language from Michigan Department of Health and Human Services for the Community Mental Health Services Program contract for FY 2020. There were several specific changes that were identified per Amendment #1; Removal of sections 4.7 SED Waiver and 6.9.7 Children's Waiver, New Contract Section 7.4.6 The General Fund Distribution Model with attachment A Final GF Allocation and Detail, Contract Attachment C6.3.2.1 CMHSP Local Dispute Resolution, Contract attachment C6.5.1.1 CMHSP Reporting Requirements – Recipient Rights Reporting Requirements and Contract attachment C6.9.6.1 School Community Transition Planning Policy. It is understood and agreed that all other conditions of the original agreement remain the same.

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

Source of Funds:

Fee for Service (Y/N): N

Board Action #: 20 - 58 R1

Revenue	FY 19/20	Annualized
General Fund	\$ 30,449,273.00	\$ 30,449,273.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 30,449,273.00	\$ 30,449,273.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Tuesday, August 11, 2020

Signed: Monday, August 10, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Lillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-04 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: AssuriCare LLC

Contract Title: AssuriCare Cloud Based Electronic Visit Verification for DWIHN provider network

Address where services are provided: 'None'

Presented to Finance Committee at its meeting on: 8/5/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 175,000.00 Previous Fiscal Year: \$ 0.00

Program Type: New

Projected Number Served- Year 1: 50,000 Persons Served (previous fiscal year): 50,000

Date Contract First Initiated: 10/1/2020

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 request is to purchase a Cloud Based Platform to provide an Electronic Visit Verification (EVV) along with bidirectional interface with our Electronic Health Record system (MHWIN) as mean of collecting progress notes as well as in compliance with Federal mandate that requires all states to use Electronic Visit Verification for Medicaid. Per member, per month.

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
175000	\$ 175,000.00	\$ 175,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 175,000.00	\$

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 00000.137003.00000

In Budget (Y/N)? N

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, August 3, 2020

Signed: Friday, July 31, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA 21-06 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Michigan, State of - Dept of Human Serv

Contract Title: Donated Funds Agreement 21-82009

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

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 400,200.00 Previous Fiscal Year: \$ 385,500.00

Program Type: Continuation

Projected Number Served- Year 1: 7,497 Persons Served (previous fiscal year): 5000

Date Contract First Initiated: 10/17/2012

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).

The Detroit Wayne Integrated Health Network (DWIHN) staff recommends approval of a one year contract extension between the DWIHN and the Michigan Department of Health & Human Services (DHHS) to continue the DHHS's Outstation Services in Wayne County and the placement of (6) Medicaid Eligibility Specialists. This agreement was established through the Donated Funds Agreement (DFA) to facilitate timely enrollment of Detroit Wayne Mental Health consumers for Medicaid eligibility. To increase capacity DWMHA has requested for

Placement of the (6) DHHS workers has resulted in a more rapid processing of Medicaid eligibility applications, determination of deductible adjustment and enrollment in the Medicaid program. The main objective of the Medicaid Enrollment Program, is to expedite enrollment in Medicaid for the provision of services and benefits for persons either eligible and/or receiving mental health services in Wayne County. This contract has also help DWIHN to realize a more effective use of its State General fund and to demonstrate the provision of improved supports and access for uninsured consumers.

The state of Michigan is the sole administrator of the State Medicaid Services, therefore, there has been no solicitation of other providers. The term for this contract extension is from October 1, 2020 through September 30, 2021. Funding for this contract is not to exceed \$400,200. Funding is subject to availability of funds as determined by DWIHN.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
General Fund	\$ 400,200.00	\$ 400,200.00
0	\$ 0.00	\$ 0.00
Total Revenue	\$ 400,200.00	\$ 400,200.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.06425

In Budget (Y/N)? Y

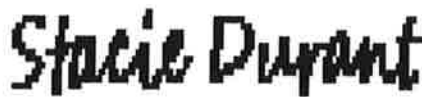
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Friday, July 31, 2020

Signed: Friday, July 31, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature

Gillian M. Blackshire

Board Liaison

Date

8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-07 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: ProtoCall Services Inc

Contract Title: Behavioral Health Emergency Response Call Center

Address where services are provided: 'None'621 SW Alder, Ste 400, Portland, OR & 2845 44th St. SW

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 335,500.00 Previous Fiscal Year: \$ 335,500.00

Program Type: Continuation

Projected Number Served- Year 1: 14,000 Persons Served (previous fiscal year): 12,000

Date Contract First Initiated: 3/1/2016

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).

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval for the extension of the ProtoCall Services Inc. contract.

ProtoCall Services Inc. currently operates the DWIHN crisis line. Crisis Calls are warm transferred from Wellplace to ProtoCall. ProtoCall was initially awarded the Behavioral Health Response Crisis Line in March 2016 via an RFP bid. The Original BO number is BO21690027.

MDHHS is working to establish a statewide crisis line with expectations to pilot beginning October 2020. The state's plan does not include a timeline for when services will begin statewide. DWIHN will decide if Crisis Line services will be RFP'd once the state's decision has been solidified. The ProtoCall contract extension is being requested to ensure there is no disruption of services to individuals calling the DWIHN crisis line.

Approval of this request will allow ProtoCall Services Inc. to fulfill its role as the Emergency Response Call Center during the period of implementation of DWIHN's full Crisis Continuum.

The FY 20/21 contract amount is \$335,500.00.

family, or community caller impacted by a crisis, and referral support for behavioral health emergencies, 24 hours per day, 7 days per week, 365 days per year for citizens of Wayne County. The goal is to provide a fully integrated crisis service system that utilizes a problem-solving approach and that markedly increases access to a comprehensive range of person-centered, recovery-oriented, and trauma informed crisis management and avoidance services.

The Behavioral Health Emergency Response Call Center is an integral part of the overall DWIHN crisis safety net, both for active consumers of DWIHN services, as well as for the community at-large. The Call Center will integrate and coordinate with other established components of the existing DWIHN crisis safety net, including but not limited to the Mobile Crisis Teams services, 24/7 clinical services teams (ACT and Home-Based) and contracted hospital providers. These services will provide opportunities to meet individuals' emergent behavioral health.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
multiple	\$ 335,500.00	\$ 335,500.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 335,500.00	\$ 335,500.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64911.815000.00000

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Page 97 of 211

Board Action #: 21-07

Signed: Friday, August 7, 2020

Signed: Friday, August 7, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Gillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-08 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Vital Data Technology, LLC

Contract Title: Healthcare Effectiveness Data And Information Set (HEDIS) Certified Population Health Management And Data Analytics Tool Vendor Solution

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2023

Amount of Contract: \$ 630,000.00 Previous Fiscal Year: \$ 197,000.00

Program Type: New

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

Date Contract First Initiated: 10/1/2020

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 requests to enter into a contract with Vital Data Technology, LLC for a Healthcare Effectiveness Data and Information Set (HEDIS) Certified Population Health Management and Data Analytics Tool vendor solution. The contract will be for three years with two, one year renewal options. Vital Data Technology was the vendor selected from the RFP process as the most responsive and responsible Proposer/most qualified Respondent. This tool will support DWIHN's initiatives regarding integrated care and NCQA accreditation.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Various	\$ 630,000.00	\$ 630,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$ 630,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64934.827211.00000

In Budget (Y/N)? Y


Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Friday, August 7, 2020

Signed: Friday, August 7, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Lillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-09 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: See attached list

Contract Title: Comprehensive Services for Behavioral Health – 2021

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 861,516.00 Previous Fiscal Year: \$ 409,109.00

Program Type: New

Projected Number Served- Year 1: 200 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 10/1/2020

Provider Impaneled (Y/N)?

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

The Detroit Wayne Integrated Health Network (“DWIHN”) is requesting approval to enter into agreement with several vendors and individuals who have been approved by the Michigan Department of Health and Human Services (MDHHS) through the Comprehensive Services for Behavioral Health - 2021 Block Grant. Notification was received from MDHHS approving \$861,516. The breakdown is as follows: \$200,000 for (IH), \$22,500 for (Drop-Ins), \$339,016 for (Clubhouse Engagement), \$200,000 for (Trauma) and \$100,000 for (Veteran Navigator). This grant covers the period of October 1, 2020 to September 30, 2021 for five projects. A list of vendors is enclosed.

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Block Grant	\$ 861,516.00	\$ 861,516.00

	\$ 0.00	\$ 0.00
Total Revenue	\$	\$ 861,516.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Willie E. Brooks

Stacie Durant

Signed: Wednesday, August 5, 2020

Signed: Wednesday, August 5, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-11 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: WIT, Inc

Contract Title: WIT, Inc

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2022

Amount of Contract: \$ 1,350,000.00 Previous Fiscal Year: \$ 1,200,000.00

Program Type: Continuation

Projected Number Served- Year 1: 63,000 Persons Served (previous fiscal year): 62,000

Date Contract First Initiated: 8/1/2016

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 requests approval of a two year contract with WIT, Inc. WIT, Inc. currently develops and maintains the software package used by VCE now known as Detroit Wayne Connect (DWC) to manage the entire training program for DWIHN staff and Providers servicing Consumers in the DWIHN network. The site (DWCTraining.com) currently serves as a revenue source by collecting fees for membership and training registration. There are nearly 63,000 active individuals that utilize the site for required training with over 24,000 being staff within the DWIHN network. The multimedia website provides 24/7 training opportunities for the community. One of the key objectives of this site is to provide convenient and easily accessible event listings, online registration, archived video recorded lectures and distance learning opportunities. Members have the benefit of a virtual transcript which tracks registration and attendance for DWC-sponsored trainings and online required courses, as well as the ability to upload all training. This also includes work on multiple data dashboards with DWIHN/DPD/WCSO. The term of the contract is from October 1, 2020 – September 30, 2022. Funding is not to exceed 1,350,000.00

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

Source of Funds:

Fee for Service (Y/N): Y

Revenue	FY 20/21	Annualized
Various	\$ 675,000.00	\$ 675,000.00
	\$ 675,000.00	\$ 675,000.00
Total Revenue	\$ 1,350,000.00	\$ 1,350,000.00

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

Type of contract (Business/Clinical): Business

ACCOUNT NUMBER: 64934.827211.00000

In Budget (Y/N)?

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:





Signed: Wednesday, August 5, 2020

Signed: Wednesday, August 5, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020

- Approved
- Rejected
- Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature

Lillian M. Blackshire

Board Liaison

Date

8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-12 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Black Family Development, Children's Center of Wayne County Inc., Development Centers Inc., Guidance Center, The, Southwest Counseling Solutions, Starfish Family Services (MH), Ruth Ellis Center, Inc.

Contract Title: System of Care

Address where services are provided: 2995 E. Grand Blvd. Detroit MI 48202

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 1,043,582.00 Previous Fiscal Year: \$ 1,043,582.00

Program Type: Continuation

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

Date Contract First Initiated: 10/1/2017

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 System of Care (SOC) 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 main goal of this initiative is to increase access to and the quality of services for children and youth in Wayne County. This initiative also aims at increasing parent and youth voice and involvement within Detroit Wayne Integrated Health Network (DWIHN)'s system and to ensure the workforce is well trained and qualified. DWIHN collaborates with Black Family Development Inc., Development Centers, Ruth Ellis Center, Starfish Family Services, Southwest Counseling Solutions, The Children's Center and The Guidance Center to complete the grant goals and activities. The Michigan Department of Health and Human Services provides this system transforming grant. Therefore, no people are served.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
block grant	\$ 1,043,582.00	\$ 1,043,582.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 1,043,582.00	\$ 1,043,582.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: VARIOUS

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Tuesday, August 4, 2020

Signed: Monday, August 3, 2020

Board Action #: 21-12

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Gillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-14 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Development Centers Inc.

Contract Title: Infant Early Childhood Mental Health Consultation

Address where services are provided: 17321 Telegraph Road, Detroit MI 48219'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 176,600.00 Previous Fiscal Year: \$ 174,748.00

Program Type: Continuation

Projected Number Served- Year 1: 25 Persons Served (previous fiscal year): 100

Date Contract First Initiated: 12/1/2017

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).

Infant and Early Childhood Mental Health Consultation (IECMHC) is a prevention based, indirect intervention that teams a mental health professional with child care providers to improve the social, emotional and behavioral health of children. Through the development of partnerships among providers and families, consultation builds adult's capacity to understand the influence of their relationships and interactions on young children's development.

Children's well-being is improved and mental health problems are prevented as a result of the Consultant's work with the child care providers, directors and parents through skilled observations, group and individualized strategies, and early identification of children with challenging behavior which places them at risk for expulsion.

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

Source of Funds:

Fee for Service (Y/N): N

Board Action #: 21-14

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
Federal Grant Fund	\$ 176,600.00	\$ 176,600.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 176,600.00	\$ 176,600.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.00217

In Budget (Y/N)? Y

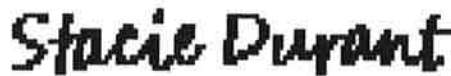
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, August 3, 2020

Signed: Monday, August 3, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-15 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: The Guidance Center

Contract Title: Treatment Foster Care Oregon

Address where services are provided: 13101 Allen Rd., Southgate, MI. 48915

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 436,496.00 Previous Fiscal Year: \$ 432,695.00

Program Type: Continuation

Projected Number Served- Year 1: 8 Persons Served (previous fiscal year): 0

Date Contract First Initiated: 1/1/2018

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) staff recommends approval of a one year contract between DWIHN and The Guidance Center to continue implementation of the Treatment Foster Care Oregon (TFCO) initiative for FY 2020-2021. Funding for this contract is through state of Michigan Department of Health and Human Services (DHHS) grant, for \$432,496, pass through Wayne State University.

Treatment Foster Care Oregon (TFCO) model is a family based service that provides individual treatment for children and their families by focusing towards diverting children from placement in a residential setting or assisting child after discharge from a residential setting. The projected number of persons served per the pilot fidelity model for this contract period is 1 to 2 per quarter. The overall goal of this program is to support the mission of the public mental health system in Michigan by providing clinical treatment in the least restrictive setting possible. Specifically TFCO initiative aims to expand intensive mental health treatment options within a community based setting. Success for this goal will be measured by the number of children and youth who successfully graduating from TFCO treatment with model fidelity and returning to their families of origin.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
State Block Grant	\$ 436,496.00	\$ 436,496.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 436,496.00	\$ 436,496.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64933.822608.01008

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Monday, August 3, 2020

Signed: Monday, August 3, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature: Gillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: BA#21-16 Revised: Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: My Strength

Contract Title: My Strength Renewal

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 70,000.00 Previous Fiscal Year: \$ 70,000.00

Program Type: Continuation

Projected Number Served- Year 1: 10,000 Persons Served (previous fiscal year): 5,000

Date Contract First Initiated: 10/3/2016

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).

Scope of Work

My Strength

My Strength meets NCQA accreditation requirements for QI8, QI9 and CC4 as well as fulfilment of Grant obligations. It will address the six aims for quality improvement: safety, effectiveness, patient centeredness, timeliness, efficiency and equity. It also has the capability to support the strategic plan in the area of Workforce supporting employee wellness promotion. MyStrength has all 9 of the self-management tools required by NCQA and has the ability for DWIHN to customize the assessment in our system. My Strength will be used with our Co-occurring population and DWIHN staff.

MyStrength uses proven, evidence-based materials grounded in Cognitive Behavioral Therapy, Mindfulness, Positive Psychology, Motivational Interviewing and other empirically, validated therapeutic approaches. The program is designed to be used independently or in conjunction with other care.

After completing the secured, online registration, each user receives a unique homepage on MyStrength based on his or her confidential wellness assessment and personal profile. The user can then engage in a personalized eLearning program, with the option to focus on stress management, depression, anxiety, or substance use. The eLearning is supported by simple tools and exercises, mood tracker and daily inspirational quotes and videos in a safe and confidential environment.

MyStrength renewal cost is \$70,000 per year for annual licensing for FY 21. This will be funded through SUD Block Grant.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
SUD Block Grant	\$ 70,000.00	\$ 70,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$	\$

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

Type of contract (Business/Clinical):

ACCOUNT NUMBER: 64932.826600.06700

In Budget (Y/N)? Y

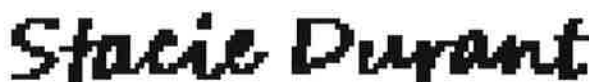
Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:

Signed: Friday, August 7, 2020

Signed: Friday, August 7, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature William M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-18 Revised: N Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Michigan Vocational Rehab Serv

Contract Title: Michigan Rehabilitation Services (MRS)

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

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

Program Type: Continuation

Projected Number Served- Year 1: 1,650 Persons Served (previous fiscal year): 3217

Date Contract First Initiated: 10/1/1994

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 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 Michigan Rehabilitation Services thereby enabling members to become employed and self-sufficient. The funds will be disbursed as follows: \$400,000.00 will be used for ICTA Agreement as described in the Scope of Service. \$43,565.00 of these funds will be used by MRS for the Intellectual/Developmental Disabilities seeking competitive integrated employment. DWIHN funding of \$443,565.00 combined with MRS Interagency Cash Transfer Agreement Federal Share revenue of \$1,199,268.00 brings the program total revenue to \$1,642,833.00 for this program.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
State General Fund	\$ 443,565.00	\$ 443,565.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 443,565.00	\$

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.827206.07226

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:




Signed: Friday, August 7, 2020

Signed: Friday, August 7, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Gillian M. Blackshire
Board Liaison

Date 8/20/2020

**DETROIT WAYNE INTEGRATED HEALTH NETWORK
BOARD ACTION**

Board Action Number: 21-19 Revised: Y Requisition Number:

Presented to Full Board at its Meeting on: 8/19/2020

Name of Provider: Hegira Programs Inc.

Contract Title: Crisis Intervention Services

Address where services are provided: 'None'

Presented to Program Compliance Committee at its meeting on: 8/12/2020

Proposed Contract Term: 10/1/2020 to 9/30/2021

Amount of Contract: \$ 8,400,000.00 Previous Fiscal Year: \$ 8,400,000.00

Program Type: Continuation

Projected Number Served- Year 1: 14,000 Persons Served (previous fiscal year): 13,000

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).

Detroit Wayne Integrated Health Network (DWIHN) is requesting approval for Hegira Health Inc. crisis intervention services via the Community Outreach for Psychiatric Emergencies (COPE). Hegira was originally awarded the contract in March 2016 via submitting an RFP bid. The original BO was BO21690028.

The extension will allow for DWIHN to continue providing adult mobile crisis services during the process of securing a building for the Crisis Assessment Center and eventually revising the crisis continuum RFP. In order to ensure consumer's in crisis are not displaced unnecessarily during the process of developing a new scope of work for Crisis Services, COPE will continue to authorize inpatient hospitalizations, crisis residential services, partial hospitalizations, and SUD withdrawal management. COPE currently is the only mobile crisis intervention and stabilization program to authorize these services for Adults. COPE is also providing services to AFC homes to divert consumers from the Emergency Department for behavioral health crisis whenever possible.

The amount for the extension from October 1, 2020 through September 30, 2021 is not to exceed \$8,400,000.00.

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

Source of Funds:

Fee for Service (Y/N): N

Revenue	FY 20/21	Annualized
multiple	\$ 8,400,000.00	\$ 8,400,000.00
	\$ 0.00	\$ 0.00
Total Revenue	\$ 8,400,000.00	\$ 8,400,000.00

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

Type of contract (Business/Clinical): Clinical

ACCOUNT NUMBER: 64931.825004.01668

In Budget (Y/N)? Y

Approved for Submittal to Board:

Willie E. Brooks, President/CEO

Stacie Durant, Chief Financial Officer

Signature/Date:

Signature/Date:



Signed: Tuesday, August 11, 2020

Signed: Monday, August 10, 2020

BOARD ACTION TAKEN

The following Action was taken by the Full Board on the 19 day of August, 2020.

Approved

Rejected

Modified as follows: _____

Executive Director - Initial here: _____

Tabled as follows: _____

Signature Lillian M. Blackshire
Board Liaison

Date 8/20/2020