

Strategic Priorities & Budget Plan FY 2022



SAGINAW COUNTY
COMMUNITY MENTAL
HEALTH AUTHORITY

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Mission and Vision Statements

- **SCCMHA Mission Statement**

As the public manager of supports and services for citizens with mental illness, developmental disabilities and chemical dependency and their families, SCCMHA actively strives to develop a system of care and a community that values and embraces the potential and contributions of all individuals with disabilities.

- **SCCMHA Vision Statement**

A belief in potential.

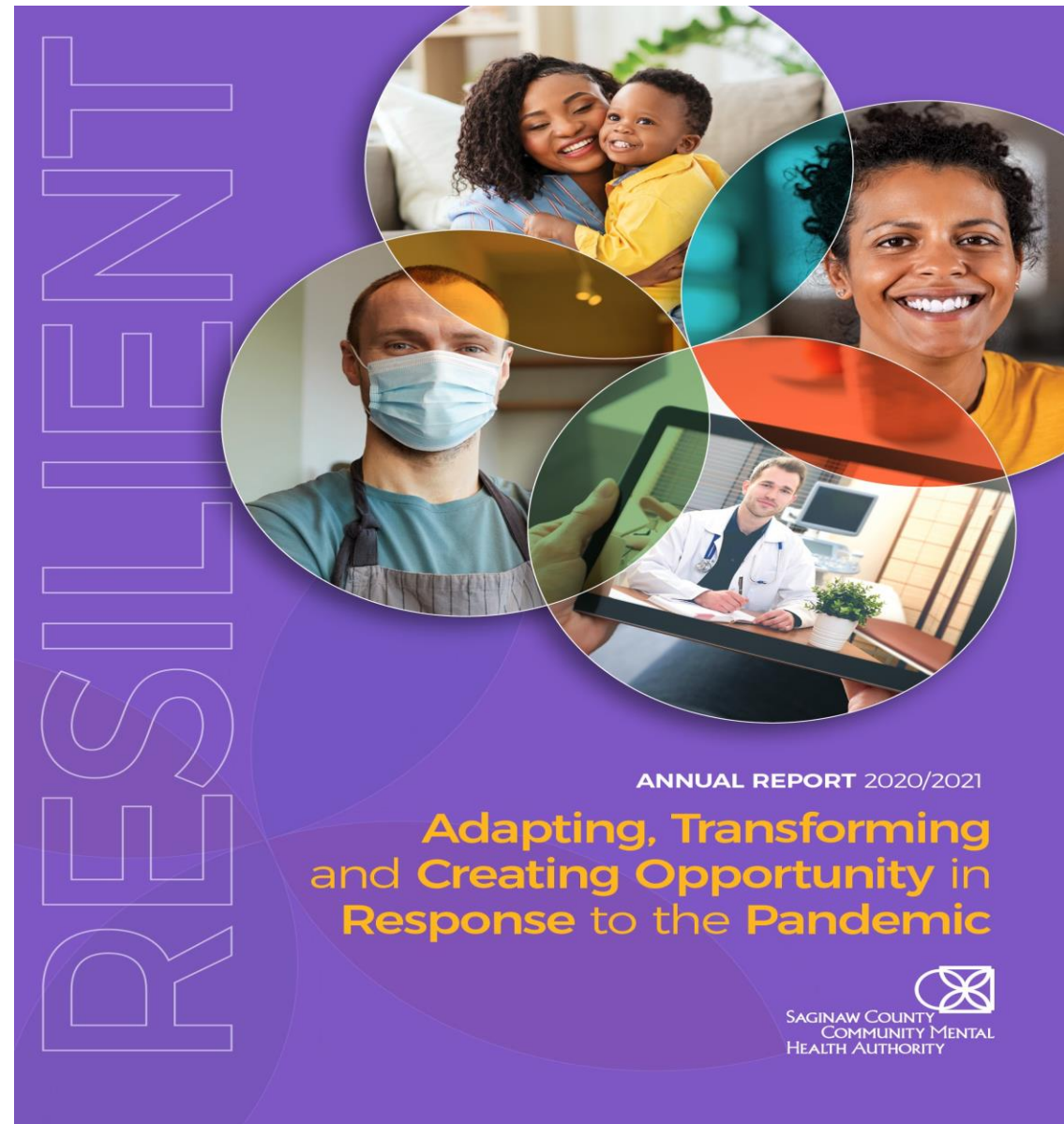
A right to dream.

An opportunity to achieve.

- **53 Core Values and Operating Principles**

www.sccmha.org/about-us/core-values-and-operating-principles.html

FY 2020-2021 Annual Progress Report



SCCMHA Strategic Priorities 2021-2022

Strategic Priority 1:

Focus on Consumer Services and Outcomes

Rationale: Supporting consumers to achieve their stated outcomes is our top priority. We are committed to helping customers imagine a better life. Our behavior, actions and utilization of the benefit will demonstrate our belief in the potential for growth and achievement of outcomes.

Strategic Goal 1.1:

Increase the Numbers of Persons Served Across All Populations (and Improve Consumer Experience at all Access Points)

- 1.1.1 Improve internal and external messaging to communicate availability of service (access) & expanding referral base including MDHHS Entitlements portal
- 1.1.2 Implement / expand services for consumers with co-morbid chronic health conditions, hoarding disorders and secondary trauma. Improve and expand outreach to transitional age youth, LGBTQ2+ population, Hispanic / Latinx population, veterans, and military families

- Transitional Age Youth (TAY) program was expanded to include two (2) Case Managers, two (2) Peers and a Therapist (previously the team consisted of one (1) Case Manager, one (1) Peer and a Therapist) ✓
- Hired a Veteran and Military Family Navigator to connect veterans and military families to services in the Tri-County area utilizing newly awarded Block Grant Funding ✓
- Expanded the Hispanic Behavioral Health Block Grant to include assistance with follow-up treatment after inpatient hospital stays **NEW**

- 1.1.3 Continue to develop school-based services for children
- 1.1.4 Develop and enhance Crisis Stabilization at Front Door

Centralized Access & Intake (CAI) / Crisis Intervention Services







- Investigate potential for Crisis Stabilization after hours at Hancock to reduce Emergency Department (ED) utilization
- Renamed the Mobile Urgent Treatment Team (MUTT) to Mobile Response and Stabilization Services MRSS ✓
- Expanded MRSS services to adults in Saginaw County **NEW**
- Extend MRSS hours to 24/7, utilizing newly awarded Juvenile Response Team Grant
- Extend service hours to address the increased need for services and allowing for care to be easily accessible for individuals seeking and receiving services **NEW**

Strategic Goal 1.2:



Expand the Expectation and Use of the Service Array Across All Populations

- 1.2.1 Work to serve more consumers annually across all populations regardless of ability to pay or residence
- 1.2.2 Educate customers, family members & guardians about the service array and connecting services to person centered planning to achieve outcomes (benefit information)
- 1.2.3 Expand education about the specialty service array to professional staff (create a mandatory training for record holders on the service array)



- 1.2.4 Improve adequacy of service array with special emphasis on Ancillary Health:
- Crisis Stabilization, MRSS, Speech, Physical and Occupational Therapies
- 1.2.5 Improve adequacy of Service Array with new 1115 (c) & (i) Waiver requirements for FY 2020 
- Add Overnight Health and Safety for 1915 HSW, CWP, SED enrolled populations and 1915(i) (former b3 recipients). This new service will be added to FY 2021 provider contracts. 
 - Add Fiscal Intermediary Options for HSW and SED Waiver enrollees 
 - Add Non-Family Training for HSW enrollees 
 - Implement clarifications to benefit definitions and scope for Supported Employment and Housing Assistance services
 - Improve processing of Durable Medical Equipment (DME) and related commodities 
- 1.2.6 Expand Telehealth Services to include Intake / Assessment, therapy, case management and enhanced health care to accommodate consumer's needs 
- 1.2.7 In accordance with the CCBHC (Certified Community Behavioral Health Clinic) model, establish and provide outpatient mental health and substance use services, either directly or through designated collaborating organizations (DCOs), to ensure that services are available to all consumers **NEW**
- 1.2.8 Develop Personalized Benefit Pathways and create tools to guide CAI team referral and IPOS Development **NEW**

Strategic Goal 1.3: (New) Expand Data Collection and Quality Reporting

- 1.3.1 Expand the use of stratified data from sources such as Care Connect 360 and SENTRI and other inputs to prioritize and inform clinical decision making and outcome strategies. Data captured will be used to measure the effectiveness of the CCBHC and will prepare SCCMHA to participate in potential future expansion of the CCBHC Model. **NEW**
- 1.3.2 Publish outcome data results for all stakeholders 
- 1.3.3 Achieve full adoption of transition of care protocols (9 Touch) and implement a PDSA to measure effectiveness of intervention. 
- 1.3.4 Working collaboratively with physical healthcare partners, monitoring key performance indicators and quality measures, and evaluating the impact on quality and overall health outcomes
- 1.3.5 Develop a strategy to evaluate prevalent Social Determinants of Health to determine the impact on key health outcomes indicators from stratified data
- 1.3.6 Develop strategies to address healthcare disparities and improve health outcomes for African American consumers / families and other consumers of color

Strategic Priority 2: Enhancing Leadership and Succession Planning

Rationale: Recruit, mentor, and develop future leaders to ensure a trained, competent, and qualified workforce representative of the community demographics to become the future leaders of SCCMHA.

Strategic Goal 2.1: CMH Leadership Training

- 2.1.3 Finalize and implement Succession Plan for Management Team



- 2.1.5 Continue leadership and sustainability strategies to support Multicultural Training across the network and with other Saginaw community groups
- 2.1.6 Develop and identify knowledge transfer opportunities / strategies
- 2.1.7 Develop strategies to reduce single person dependency across operations

Strategic Goal 2.2:

Institutionalize Relationships with Community Partners to Ensure They Are Not Personality Dependent (predictable environment)

- 2.2.1 Continue to institutionalize System of Care collaborative relationships through signed MOUs or formal contracts
- 2.2.2 Continue to develop MOUs with key community partners:
 - Chippewa Tribe
 - Aleda E. Lutz VA Medical Center ✓
 - Saginaw County Consortium of Homeless Assistance Providers (SC-CHAP)
 - Saginaw Public Housing Authority
 - Juvenile Court / Detention Center
 - Saginaw Specialty Courts ✓
 - Local Law Enforcement and Other First Responders (First Responders Guide for Behavioral Health Interventions) ✓
 - Saginaw Intermediate School District (SISD) / Transition Planning / Great Start Collaborative
 - Central Michigan University (CMU) Medical School / Integrated Care efforts
 - Saginaw Public Schools / MH co-location and Transition Planning
 - Michigan Rehabilitation Services
 - Great Lakes Bay Health Centers ✓
 - Genoa Pharmacy ✓

Strategic Goal 2.3:


Staff Retention, Recruitment and Supporting Equity, Diversity, & Inclusion Among the Workforce and Network

- 2.3.2 Development of formal onboarding process for new staff
- 2.3.4 Continue to recruit for staff diversity (race, cultural, SOGI)
 - Evaluate Staff Retention and Recruitment Strategies and Assets to address workforce shortages **NEW**
 - Participate in HRSA Education Loan Forgiveness Program **NEW**
 - Recruit, credential and contract with practitioners (clinical staff) who speak a language that reflects members' linguistic needs
 - Recruit, credential and contract with practitioners (clinical staff and administrative staff) whose cultural and ethnic backgrounds are similar to the underrepresented member population
 - Require practitioners (clinical staff) to complete cultural competency training, including implicit bias courses based on racial / ethnic composition of the member population
 - Identify language spoken and ethnic backgrounds of practitioners (clinical staff) in the provider network to assess whether they meet members' language needs and cultural preferences
- 2.3.5 Engage Expert Consultant on Race & Culture to engage in DEI Organizational Assessment with recommendations **NEW**



Strategic Goal 2.4: Addressing and Enhancing Staff Safety & Accountability

2.4.4 Continue to pursue technology tools for staff safety in the community

- Rework 8-1-1 system – Continue for 2022
- Evaluate Vestige personal protection device used by MRSS team 

2.4.6 Expansion of external security cameras at SCCMHA sites

- Installed brighter outdoor lighting at Towerline
- In bidding process to address outdoor lighting at Hancock

2.4.7 Upgrade of WIFI locksets to hardwired badge readers at Hancock building

2.4.8 Expanded Crisis Response Team for aggressive persons to Bay Road, Towerline & Maple

2.4.9 Install new security alarm and upgrade existing alarms Expanded Crisis Response Team for aggressive persons to Bay Road, Towerline & Maple

- Community Ties North 

2.4.10 Write policy for use of electronic security systems for use of monitoring staff safety

2.4.11 Develop process for electronic check in at each SCCMHA facility

2.4.12 Activated SCCMHA Emergency Management Team on March 13, 2020 in response to COVID-19 Pandemic. Senior managers have met 57 times through September 2021, planning and implementing operational and safety measures to both continue to provide essential services and address staff and network safety.

2.4.13 Developed training methods for virtual training via Zoom Pro to assure competency and integrity of training of professional staff / direct care staff & to assure safety of social distancing during COVID-19 Pandemic

2.4.14 Developed a comprehensive *SCCMHA COVID-19 Return to Work and Reopening Plan* which also referenced additional guidance to staff including:

- Essential Behavioral Health Services Directive: When to Provide In Person Care and Service (In Home / Community / Office Based)
- SCCMHA COVID-19 Physical Environmental Preparedness Plan and reworked furniture placement and other building accommodation and signage to ensure social distancing and heightened building cleaning and sanitation provisions
- Developed reliable supply chain vendor for needed personal protective equipment (PPE) and sanitation supplies, built adequate Inventory Supply and Management System and staff training in its use

2.4.15 Development of several internal policies and procedures to guide staff safety during the COVID-19 Pandemic to ensure a safe environment for our employees and a revision to our Family Medical Leave Policy and a new COVID-19 Sick Bank Benefit

2.4.16 Development and continuous updating of front door screening protocol for staff members and consumers, informed by CDC, MDHHS and SCHD

2.4.17 Provided contracted network organizations with heightened support and communication, including; infection and testing guidance, PPE supplies, enhanced reimbursement for PPE and other critical services and commodities, COVID-19 premium pay for front facing direct care staff and overtime cost coverage and premium pay for professional staff of Crisis Intervention Services working shifts at the Covenant Hospital Emergency Care Center during Stay at Home Orders.

2.4.18 Continue to adhere to and follow COVID-19 safety measures as required by CDC, MDHHS and the SCHD

NEW 

2.4.19 Establish Contract with new virtual EAP called ESPYRE for Staff and Select Network Contractors **NEW** 


Strategic Goal 2.6:

Expanding Organization Mastery of Benefit Interpretation

2.6.1 Unpack and continue to train staff in the new Medicaid Waiver and Public Policy Changes for FY 2021 

2.6.2 Describe Baseline Service Delivery Workflows by discipline

- Then Assign Coding and Credentialing to the Workflows and develop code charts for staff

2.6.3 Developed Coding Benefit and Integrity workgroup to help train a cross section of staff on code interpretation (CBI now standing committee) and plan for FY 2022 Service Code and Modifier changes 

2.6.4 Establishment of an Implementation Team to interpret, design, and implement new MDHHS / Milliman FY22 standardized costing and coding parameters systemwide **NEW**

Strategic Goal 2.7:

Knowledge Transfer to Emerging Leaders

2.7.1 Introduction of Public Reference Documents (Mental Health Code, Medicaid Manual, State Coding List, etc.)

2.7.2 Teach the regulatory / authority context of CMH Service Environment

2.7.3 Teach the benefit boundaries and coordination of benefits context

2.7.4 Identify other public services and programs and related eligibility criteria needed by customers we serve

Strategic Priority 3:

Enhanced Electronic Business Environment to Meet Major Agency Priorities

Rationale: Unify data systems for the purpose of obtaining a cohesive business management data system. Utilize tools for staff to be more efficient.

Strategic Goal 3.2: Future Electronic Expansion

3.2.1 Health Information Exchanges (HIE) – continue to monitor with healthcare partners for expanded functionality and interoperability

- Develop a HIE workgroup lead by the Business Intelligence Team **NEW**
- Offer Connectivity between the AZARA platform and the agency's PHI data **NEW**
- Develop Application Programming Interfaces (APIs) within the EMR and the data warehouse allowing for the acceptance, transfer, and utilization of mental and physical health data **NEW**
- Enhance the Admission, Discharge and Transfer (ADT) documents, functionality, and utilization within the Sentri system **NEW**

3.2.2 Study / Plan Data Processing Capability to accept external data into our Warehouse – interoperability of information coming in from MDHHS or other partners

3.2.3 Interfaces to other business partners (Great Lakes Bay Health Centers)



- Promote SCCMHA capacity for interoperability with community partners
- Communicate Continuity of Care Documents (CCDs) with local FQHC (GLBHC) and other health care partners (direct messaging)
- Maintain accuracy of provider registry in Sentri II to ensure the capacity for direct messaging
- Investigate foreign key capability leading to read only pages in EHR (reciprocal arrangements) with the local FQHC (GLBHC)
- Review registries that are available through MSHN and/or Michigan Health Information Network (MiHIN) to provide a greater scope of consumer registry information specifically the Statewide Consumer Directory and Health Directory

3.2.4 Interface with Mid-State Health Network, Medicaid Health Plans

3.2.6 Explore the feasibility / utility of providing access & reporting in Zenith and Care Connect 360

3.2.7 Integrate the MiPathways data base into SENTRI II with single sign on functionality


3.2.9 Support Integrity and future use of SCCMHA's Data Warehouse (DW)

- Identify data assets and develop protocols for data governance for the DW
- Develop policies and guidance for users of the DW
- Refine and protect architecture of DW (management, protection, training, access, tools)
- Create new and enhance existing data integrity efforts in both the DW and the EMR **NEW**
- Create a data dictionary of all SCCMHA's digital data assets and objects utilizing metadata **NEW**

3.2.10 Implement Electronic Visit Verification (EVV) system to interface once defined by the State of Michigan


3.2.11 Procure and implement electronic contract management and e-signature software (DocuSign) for FY22 contracts distribution to service provider network **NEW**


Strategic Goal 3.3: Update and Improve the Information Technology Infrastructure and Workforce Technologies

3.3.1 Upgrade the Wireless System in all buildings by replacing the current wireless controller with 2 new redundant controllers as well as full replacement of all Access Points (APs) 

3.3.2 Install a natural gas generator in the Hancock Building to ensure the continuous operation of the IT network, servers, and Information Systems.

3.3.3 Increase the fiber connections between buildings which will provide additional bandwidth

3.3.4 Upgrade server software and increase the storage capacity of all servers to support the growth of the agency's Information Systems 

3.3.5 Develop desktop support processes and implement a robust Help Desk ticketing system to better support the IT needs of staff 

3.3.6 Create HelpDesk policies and procedures to ensure strong IS/IT support within the agency **NEW**

3.3.7 Offer IT Remote HelpDesk support to enhance socially distanced IT support **NEW**

3.3.8 Continue to develop the Information Technology and system's talent resources by providing up-to-date training opportunities:

- SQL programming, database administration and Power BI Dashboarding
- Network, Server, and Microsoft 365 administration
- Website and internet application development
- SharePoint, OneDrive, and Microsoft Teams collaboration tools
- Network Infrastructure **NEW**
- Data Analytics and Database Administration **NEW**
- Cyber Security - Phishing, Education, Simulations, MS Defender, and InTune **NEW**

- Project Management **NEW**
- Quality & Process Improvement **NEW**

3.3.9 Develop, provide and support technologies that support virtual meetings, business and telehealth service for leadership and staff:

- Acquisition, provisioning, and support of mobile devices (Microsoft Surfaces, laptops, iPads, and iPhones) ✓
- Provide the ability to access the Internet anywhere through Mobile Wireless Providers such as Verizon MiFis ✓
- HIPAA Compliant video conferencing tools (ZOOMPro and Skype for Business) ✓
- HIPAA Compliant video conferencing tools (ZOOM for Healthcare, DOXY.ME and Microsoft Teams) **NEW** ✓
- Implement a new ticketing system (Team Dynamics) **NEW**
- Develop a policy identifying HIPAA compliant A/V conferencing tools and their applicable settings **NEW**

3.3.10 Offer and Support Complete Telehealth Solutions:

- Discover, test and roll-out a robust, easy to use resource ✓
- Friendly Telehealth System (DOXY.ME) ✓
- Provide headsets and webcams to ensure Consumer Privacy ✓
- Acquire and support wireless DME technologies for consumers that meet medical necessity criteria – such as iPads for the delivery of therapy or to assist with communication challenges ✓
- Develop strategies to acquire additional fund sources to assist consumers with purchasing services and devices which will allow them to participate in their care through Telehealth ✓
- Investigate new state-of-the-art telehealth solutions **NEW**
- Rollout and Support for TECH and TECH+ iPad Programs which puts technology in the hands of Consumers allowing for virtual face-to-face services **NEW**

3.3.11 CrisisConnect **NEW**

- Invite law enforcement to partner with SCCMHA in planning for their virtual access to mental health consultation and crisis services 24/7
- Write Mental Health Adult Block Grant to fund new iPads for patrol cars across shifts at Saginaw City Police, Saginaw Township Police, Saginaw Sheriff's Department and Buena Vista Police Department ✓
- Develop Implementation Plan and Timeline
- Develop metrics against which success of CrisisConnect will be evaluated
- Survey law enforcement partners to inform use cases for service development ✓

3.3.12 Ensure the security of the agency's digital infrastructure by creating a strong Information Security Team comprised of Compliance, Information Technology, Information Systems and Quality department staff **NEW**

- Review and update all information safeguard policies, procedures, and implementations to ensure compliance with the HIPAA security rule **NEW**
- Contract with an external entity to perform an SRA (Security Risk Assessment) and identify CAP (Corrective Action Plans) for all areas of noncompliance **NEW**
- Implement a strong Cyber Security program which includes education, training, and phishing simulations **NEW**
- Rollout agency cybersecurity tools - Microsoft Defender, and InTune **NEW**

- Implement tools that provide strong virus detection **NEW**
- Utilize a Mobile Device Management System (MDMS) to ensure full endpoint security **NEW**
- Rollout Two-factor Authentication (2FA) **NEW**
- Implement full email encryption **NEW**

3.3.13 Discover, Investigate, Vet and Implement (budget permitting) new State-of-the-Art Information Technologies **NEW**

Strategic Goal 3.4:

Transform Information Management to “Business Intelligence” to Measure Consumer Quality of Care, Informed Decision Making and Improved Business and Clinical Outcomes

- 3.4.1 Maximize available cross functional sources of data into formats that are user friendly and better inform decision making / develop standards to guide this work
- 3.4.2 Teach and expand knowledge of warehouse architecture and data field definitions to drive data interpretation integrity
- 3.4.3 Implement new tools for management, supervisors and staff which will assist in the efforts of improving the quality of care to consumers and their families

- Published Microsoft Power BI Dashboards

3.4.4 Roll out solutions that will assist in the collaboration of strategic thought

3.4.5 Expanded use of the Office 365 suite which includes OneDrive, SharePoint and Microsoft Teams **NEW**



Strategic Goal 3.5:

Build a Data Driven Quality Program based on Business Intelligence

- 3.5.1 Development of a Business Intelligence Unit consisting of Quality, Information Systems and Data Analytics talent and processes. (NEW)
- 3.5.2 Development of a data driven Quality Program led by a Manager of Business Intelligence and Quality Program
- 3.5.3 Utilize Information Technology, Information Systems, and Information Management tools to execute the goals of the Quality Program
- 3.5.4 Utilize quality metrics that include both processes and outcomes that will result in systematic quality improvement, compliance with state reporting will drive bonus incentive payment **NEW**
- 3.5.5 Continuously monitor performance to ensure that the performance indicators are improving outcomes
- 3.5.6 Support data driven decision making, business intelligence & superb data analytics **NEW**

Strategic Priority 4:

Diversifying and Expanding our Role in the Healthcare Landscape

Rationale: To maximize our partnerships in the Saginaw health care market implementing collaborative approaches to population health.

Strategic Goal 4.1:

Explore and Develop our Potential Roles in Healthcare

- 4.1.1 Continue to seek financial support for Community Care HUB
- 4.1.2 Community Health Improvement Plan (CHIP) – Continue leadership participation and cost sharing
- 4.1.3 Continue to pursue the SAMHSA-HRSA framework “6 Levels of Integration Framework”, moving from Level 4 “Close collaboration, onsite with some system integration” to a Level 5 “Close collaboration approaching an integration Practice”, that demonstrate elements of seeking joint system solutions, frequent face to face communication, and developing a collaborative team **NEW**

Strategic Goal 4.2:

Core Skills for Workforce on Physical Health and Substance Use Disorders

- 4.2.1 Continue to develop training on specific health conditions to promote workforce health care literacy
- 4.2.2 Formalize and expand medication training beyond the case management core training
- 4.2.3 Improve the care coordination efforts of staff to address whole person health care by including SUD and physical health care content into agency training curriculums.
- 4.2.4 Through the use of Business Intelligence tools, prioritize training topics that relate to prevalent chronic health conditions
- 4.2.5 Identify and implement core competencies in prevention of substance use disorders, treatment of co-occurring disorders and addiction counseling **NEW**

Strategic Goal 4.3:

Achieved Certified Community Behavioral Health Clinic Status: SAMHSA Expansion Grant & MDHHS CCBHC Demo

- 4.3.3 Expand capacity to serve uninsured/underinsured
- 4.3.4 Enhance existing integrated care teams by adding treatment capacity for CODs
- 4.3.5 Increase by 35% the number of activated consumers who are successfully engaged in treatment following an eligibility screening
- 4.3.6 Increase the use of mobile crisis intervention and stabilization services by 30%
- 4.3.7 Establish a well-trained peer/community health worker service delivery model
- 4.3.8 Effectively utilize Peer staff in service delivery, & create infrastructure to support them
- 4.3.9 Utilize or leverage community assets to create an action plan(s) that imbeds cultural competency across the entire agency
- 4.3.10 Develop strategies to improve processes and outcomes to achieve improved health outcomes
- 4.3.11 Meet established criteria related to care coordination, crisis response and service delivery requirements of CCBHC Expansion and Demonstration Grants to achieve certification **NEW**

Strategic Goal 4.4:

Align Business and Quality Processes to Achieve Managed National Committee for Quality Assurance (NCQA) Behavioral Health Organization Accreditation ON HOLD

- 4.4.1 Complete Readiness Assessment and engage consultant to complete gap analysis
- 4.4.3 Continue to develop Work Plan
- 4.4.5 Bring existing documents into MBHO compliance in next business cycle including Quality Plan, Annual Quality Report, UM Plan, UM Annual Report, Provider Directory, and all other related contracts and policies
- 4.4.6 Complete survey preparation on NCQA electronic tool
- 4.4.7 Work with NCQA to complete application process, schedule a preliminary survey site visit in summer of 2021 and full survey in spring 2022
- 4.4.8 Align CCBHC performance and quality goals with NCQA quality measures to improve processes and achieve measurable outcomes

Strategic Goal 4.5:

Surveillance of Any and All Mental Health Code and Social Welfare Act amendments and Related Legislation Pertaining to System Redesign Impacting PIHPs, CMHSPs and their Networks

- 4.5.1 Advance advocacy against legislative proposals that would harm the PIHP / CMHSP System and those served by it

Strategic Priority 5: Improved Health and Quality of Life

Rationale: To provide dedicated efforts to help consumers achieve their optimal health and well-being.

Strategic Goal 5.1: Health and Wellness

- 5.1.1 Utilize the Eight Dimensions of Wellness to guide and inform the promotion of wellness to consumers, their families, and caretakers.
- Expand access to consumer focused prevention / wellness activities by utilizing existing community resources such as mobile dental services and community events
 - Symptom Management – expand access - of myStrength mobile app
 - Expand access, increase utilization and add additional functionality to the CEHR portal for consumers
- 5.1.6 Develop and Implement Strategies for compliance with Home and Community Based Services (HCBS) Rule with active compliance plans for residential and nonresidential programs by March 2023
- 5.1.8 Work to reduce the racial and cultural disparities in access and improved quality health care outcomes
- Increase the capacity of the workforce to identify and address disparities in the delivery of health care services, especially in African American, LatinX, and LGBTQ+ populations
 - Increase the capacity of staff to understand institutional racism and implicit bias in providing access and treatment support services
 - Promote consumer care and coordination among service providers
 - Work to eliminate the stigma associated with mental illness, intellectual / developmental disability and addiction
- 5.1.9 Integrate health criteria into decision making, where appropriate
- Increase the capacity of certified electronic health records, business intelligence and data platforms to identify and manage populations at risk
 - Develop policies and programs to identify at risk consumers and provide effective interventions using EBPs and EBP matching at intake.
 - Advance the identification of SUD to improve the overall health and recovery of consumers. Work to improve screening, intervention, treatment and referral when co-occurring or substance use disorders are identified.
- 5.1.10 Expand the use of integrated data systems to promote cross-sector information exchange

- Promote the use of interoperable systems to support data-driven prevention decisions and implement evidence-based prevention policies, practices and programs

5.1.11 Develop a skilled, cross-trained, and diverse prevention workforce

- Enhance the current continuing education and training content to include an emphasis on increasing the capacity of staff to address physical and behavioral health, focusing on prevention in all settings

5.1.12 Help consumers improve their mental and physical health through health promotion and disease & injury prevention

- Implement sustainable and meaningful health promotion activities, which are evidence-based and work to engage consumer participation

5.1.13 Ensure appropriate and responsible use of resources to meet the needs of consumers, through use of evidence-based decision making and practices, evaluation, and reporting

- Monitor and report our performance through key performance indicators

5.1.14 Support the Saginaw community (health professionals, private sector health care providers, and community and non-government organizations) in population health improvement strategies

- Continue to Participate in Saginaw CHIP process
- Participate in MiHIA THRIVE Initiative
- Promote and implement the activities and strategies developed in the administration of the Promoting the Integration of Primary and Behavioral Health Care Integration (PIPBHC) and the CCBHC SAMHSA grants in active partnership with GLBHC
- Continue to offer training in Mental Health First Aid, Suicide Prevention and Trauma Informed Community content

5.1.15 Through a well-informed workforce, educate and support consumers and those they identify as family to engage in their own health and well-being

5.1.16 Create venues that require the inclusion of consumers and peers to inform and develop health initiatives

5.1.17 Collaborate with community stakeholders to address social determinants of health that impact all at risk populations within Saginaw County

5.1.18 Continue to adhere to State and SCCMHA monitoring, and prescribing policies that are related to narcotics intended to reduce the harm and misuse associated with prescription drugs

5.1.19 Continue to provide leadership and workforce training to the health care region in understanding stigma, access barriers and safe points of service for LGBTQ community with special emphasis on at risk youth and young adults

Strategic Priority 6:

Improved Financial Position and Long-Term Sustainability

Rationale: Improve the ability to manage the organization and service network through strategies which best meet the needs of Saginaw citizens that ensures the organization manages within available resources while pursuing new funding opportunities.

Strategic Goal 6.1:

Implement Capital Bond Improvements as Financed by Saginaw County Bond Financing for Hancock and Albert & Woods Buildings

6.1.1 Implement capital improvement needs for next five (5) years as specified in Bond documents

- Near completion of Group Rooms on Hancock Building First Floor ✓
- Near completion of WIFI security lock sets ✓

6.1.2 Implement Capital improvement needs through budget favorability

- Bayside Lodge Remodel – targeted completion November 2020 ✓
- Software upgrade to Office 365 ✓
- Repair and expansion of berm on south side of Albert and Woods Building ✓
- Telehealth computer equipment for group homes ✓
- Badge reader and security system upgrades at all buildings

2021 Capital Projects

- ProMaster Vans (4) for Consumer Program Transportation ✓
- Elevator rebuild at Hancock Building ✓
- HVAC Unit Replacement at Lamson for CTN ✓

2022 Planned Capital Projects

- Generator for Hancock Building **NEW**
- Space Planning – CSS & other possible remodels **NEW**
- Enhanced Lighting of Hancock Building Parking Lots **NEW**

Strategic Goal 6.3:

Develop a Long-Term Financial Stability Plan

- 6.3.1 Pursue other funding sources including federal, state, and local grants for expansion of programs ✓
- 6.3.2 Develop and implement the newly required Standard Cost Allocation Costing model. Perform costing investigations to compare operating costs to industry averages for the purpose of identifying outlier metrics to be considered for performance improvement **NEW**
- 6.3.3 Participate in Value Based Purchasing Learning Community to drive new payment strategies with network and funding strategies with potential system changes ✓
- 6.3.4 Continue to explore drivers of Quality and Evidence-based Practices (EBP) outcomes to drive both payment and funding strategies
- 6.3.5 Proactively participate in the Behavioral Health Fee Screen development process initiated by the State. Ensure that integrity of costing is maintained
- 6.3.6 Develop mastery over CCBHC reporting requirements and Perspective Payment System 1 for enhanced funding **NEW**
- 6.3.7 Continue to seek ways to maximize Commercial Insurance Billing Reimbursement **NEW**
- 6.3.8 In conjunction with Clinical Directors, assist with the development and update of productivity standards to be used as a guide for measuring administrative efficiencies, clinical outcomes and service costs
- 6.3.9 Seek resolution in the Local Match Obligation reductions proposed by Saginaw County **NEW**



Strategic Goal 6.4:

Ensuring Mastery for First/Third-Party Service Billing and Related Credentialing for Coordination of Benefits

- 6.4.1 Ensure that all Third-Party Billing and Coordination of Benefits policies and procedures are up to date and board operated and network billing staff receive necessary training to consistently apply applicable rules
NEW
- 6.3.2 Develop processes to refer consumers to properly credential providers based on primary insurances payors and monitor and address any changes in consumer primary insurance coverage after initial assignment to a provider **NEW**

FY 2022 Preliminary Operating Budget

REVENUES	FY 23 Budget		FY 22 Budget		FY 21 Year End			
					Projection			
Medicaid Revenue	\$	67,313,042	72.1%	\$	65,993,178	70.7%	\$	63,085,380
Autism Revenue	\$	9,671,942	10.4%	\$	9,482,296	10.2%	\$	8,726,277
Healthy MI Rev	\$	8,652,875	9.3%	\$	8,483,211	9.1%	\$	7,461,401
General Fund Revenues	\$	2,430,008	2.6%	\$	2,300,000	2.5%	\$	2,637,931
Grant Revenue	\$	2,990,000	3.2%	\$	4,461,872	4.8%	\$	2,596,404
County Appropriations	\$	1,050,302	1.1%	\$	1,050,303	1.1%	\$	1,050,303
Performance Incentive	\$	650,000	0.7%	\$	650,000	0.7%	\$	672,528
FFS Revenue	\$	550,000		\$	550,000	0.6%	\$	739,396
Other Revenues	\$	425,000	0.5%	\$	425,000	0.5%	\$	442,734
Total Revenues	\$	93,733,169	100%	\$	93,395,860	100%	\$	87,412,354

EXPENSES	FY 21 Year End							
	FY 23 Budget		FY 22 Budget		Projection			
Salaries & Wages	\$	18,074,019	20.1%	\$	17,719,626	20.1%	\$	15,947,664
Fringe Benefits	\$	5,120,037	5.7%	\$	5,019,644	5.7%	\$	4,517,680
Retirement Exp	\$	2,036,460	2.3%	\$	1,996,530	2.3%	\$	1,796,877
Contracted Clinician Services	\$	1,634,716	1.8%	\$	1,602,663	1.8%	\$	1,602,663
Provider Network Services	\$	53,570,116	59.7%	\$	52,519,721	59.6%	\$	50,460,124
State Facility Expense	\$	442,980	0.5%	\$	434,294	0.5%	\$	600,000
Facility Operating Expense	\$	1,703,639	1.9%	\$	1,670,235	1.9%	\$	1,558,405
Depreciation expense	\$	1,334,109	1.5%	\$	1,307,950	1.5%	\$	1,307,950
Clinical Operating Expense	\$	2,044,715	2.3%	\$	2,004,623	2.3%	\$	1,862,621
Admin Operating Expense	\$	2,721,973	3.0%	\$	2,721,973	3.1%	\$	2,179,579
Technology Operating Expense	\$	640,293	0.7%	\$	627,739	0.7%	\$	627,739
Local match drawdown	\$	407,715	0.5%	\$	407,715	0.5%	\$	407,715
Interest Expense	\$	133,160	0.1%	\$	133,160	0.2%	\$	133,160
Total Expenses	\$	89,730,774	100%	\$	88,165,874	100%	\$	83,002,177

Revenue over Expense	\$	4,002,394		\$	5,229,986		\$	4,410,177
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Any Questions?



Main Facility

500 Hancock, Saginaw, Michigan 48602

Phone: (989) 797-3400

Toll Free: 1-800-258-8678

Michigan Relay 711

24 Hour Mental Health Emergency Services

(989) 792-9732

Toll Free: 1-800-233-0022

www.sccmha.org

