

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
REGULAR MONTHLY BOARD MEETING MINUTES
DECEMBER 14, 2020
ROOM 222 - 5:00 PM**

*Due to the COVID-19 Public Health Emergency this Board Meeting
was held virtually by telephone.*

PRESENT: Jill Armentrout, Mike Cierzniewski, Tracey Raquepaw, Andrea Schrems, Robert Woods, Chuck Stack, Jane Sills, Steve Fresorger, John Pugh

ABSENT: Larry Jones, Leola Wilson, Jordan Wise

GUESTS: Joan Williams, Lyn Bradfield, Ann Finta

STAFF: Sandra Lindsey, Laura Argyle, Ryan Mulder

I. CALL TO ORDER

Tracey Raquepaw, Chair called the meeting to order at 5:06 p.m. A quorum was established and verification of posting was determined.

II. PUBLIC PARTICIPATION

There was no public participation.

III. APPROVAL OF BOARD MINUTES

A. Board Meeting – November 9, 2020

Motion made by Robert Woods and supported by Chuck Stack to approve the November 9, 2020 SCCMHA Board Meeting minutes. Motion carried.

IV. APPROVAL OF COMMITTEE REPORTS

A. Recipient Rights Committee – November 18, 2020
Robert Woods, Chair – *Vacancy*, Vice Chair
Reported by Robert Woods.

Motion made by Robert Woods and supported by Mike Cierzniewski to receive & file this report as written. Motion carried.

B. Governance Committee – No Meeting
Vacancy, Chair – Tracey Raquepaw, Vice Chair

C. Ends Committee – October 26, 2020
Jill Armentrout, Chair – Tracey Raquepaw, Vice Chair
Tracey Raquepaw reported.

Motion made by Jill Armentrout and supported by Steve Fresorger to receive & file this report as written. Motion carried.

Executive Limitations – No Meeting
Andrea Schrems, Chair – John Pugh, Vice Chair
Reported by Andrea Schrems.

Motion made by Andrea Schrems and supported by Jane Sills to receive & file this report as written. Motion carried.

V. CEO REPORT (The following represents the outline from which Sandy gave her year end report.)

1. COVID-19 Pandemic Continues and Cases Surge Across Michigan and the US

- A. Manage COVID Response and
- B. Continue to deliver services and supports as per MDHHS & MSHN Contracts and 18 grant agreements.

2. MDHHS & PIHP Update Since the August LT Meeting

- A. MDHHS has officially put PIHP/CMHSP System Redesign on hold until next year.
- B. It is all COVID all the time at MDHHS – weekly / bimonthly MDHHS – PIHP – CMHSP Teams calls continue
- C. New and revised guidance from MDHHS continues as does guidance from CDC, Dept of Labor, MIOSHA, and Saginaw Dept of Public Health, National Council, National Assoc of County BH And DD Directors
- D. Protect and Engage Consumers in active treatment, divert from hospital emergency departments
- E. Attend to both behavioral health needs, physical health needs and related social determinants for consumers across all living arrangements
- F. Continue to Protect and Preserve Network Providers -Provider Stabilization Payments and related reimbursements for 2020 complete (PPE, lost billing, residential staff overtime, hotel rooms and other COVID related miscellaneous cost reimbursements, net any COVID federal financial assistance). This same financial assistance and support has been extended across the state through Q2 of 2021.
- G. FY 21 DCW Premium Pay Increase Extended by MDHHS thru December/ MSHN CMHSPs extended premium pay through Jan 9, 2021. Significant Advocacy in MI Legislative Lame Duck for additional DCW Premium Pay funding at least thru Q1 but through Q4 is realistically needed.
- H. HCBS Rule Compliance work continues with some COVID modifications
- I. CCBHC Transformation Implementation underway and MDHHS has indicated SCCMHA is one of 14 SAMHSA funded sites that will be included in Michigan's Expansion State status and for the first round of CCBHC site certification.
- J. Close out of 2020 MDHHS GF COVID Funding, not renewed for 2020 as federal CARES Act not reauthorized.
- K. Families First Recovery Act and federal unemployment and other federal COVID supports not reauthorized or replaced as of this report and that impacts everything.
- L. FY 21 SCCMHA Revenue Remains Stable

3. Conditions at SCCMHA

- A. SCCMHA that have tested positive remains very low
- B. COVID-19 Safety Plans are working, staff exposures are occurring outside the workplace with one exception weeks ago when staff violated agency masking and social distancing policies.
- C. PPE Stockpile and Supply Chain is adequate to demand and burn rate.
- D. All staff that test positive are being reported to Saginaw Dept of Public Health
- E. If you see COVID Safety Policy violations say something and report. LT members and all staff are obligated to report violations to supervisor. If supervisor is violating policy, report to director. If a director has violated policy

Report to CEO office.

- F. Recent concerns for staff not completing COVID Self- Assessment Screening Questions, new staff compliance reports being created to identify violators.
- G. Onsite SCCMHA operations will be continuing. We will not be returning to remote work. SCCMHA buildings are safe work locations.

4. Challenges:

- A. Ever changing science, as more is learned about the virus and its mitigation
- B. Ever changing COVID guidance policies - but public health provisions remain the best protection - masking, handwashing and social distancing.
- C. Federal CDC and MDHHS Guidance not always in alignment (Recent CDC 10 Day Quarantine change and MDHHS epidemic order guidance on same is a good example.)
- D. Need for legal interpretations of law/statute/guidance on COVID (The amount of information flowing at us is like drinking from a fire hose.)
- E. Definitional changes for how workforces everywhere are being categorized and related COVID guidance for labor sub groups is very fluid. New language change in health care industries from "essential workers" to "health care professional" as well as definitions and classifications.
- F. Concerns for adequacy of staffing in SCCMHA Residential Network, impact of recent infection surge, continuation of DCW Premium pay and workforce health and mental health- staff exhaustion, wait times on COVID testing results.
- G. 2021 Medicaid/MSHN contracts charge include CMHSPs with the responsibilities for developing strategies to address disparities in health access and outcomes for African American, Latinx and Native American consumers/families especially at care transitions as. Metrics in this regard are an element of the Bonus Incentive Payment Formula this year.
- H. Lack of alignment with Telehealth billing parameters between Medicare and Medicaid for dual eligible consumers remain unresolved.
- I. US Presidential and Congressional transition post-election, slowing down consideration of extending labor benefits and supports. Special federal COVID employee benefits ending 12/31/20.
- J. New MDHHS/Milliman Cost Allocation work will be a big lift this year and next to develop Medicaid Fee Screens by billing code. This work will also require changes to the costing of Managed Care Functions, Service Administration and Mental Health Code responsibilities. The new costing architecture will need to be in place by next October. Productivity will matter in this new financial reporting and accountability structure and will inform future Medicaid rates and CMHSP funding.

5. Priorities:

- A. Elevated surveillance of staff compliance with daily COVID Symptom Self-Assessment Questions. New reports being developed to inform management of any staff not staying compliant daily.
- B. Continued engagement of consumers especially those at high risk and with complex presentation (medical and/or behavioral and/or corrections involved.)
- C. Continued safety plan modification and implementation in concert with rule/statue and law
- D. Continued support of Network in particular residential providers
- E. Moving new computer devices to SCCMHA contracted group homes to improve communications and telehealth capability.

- F. Addressing the “digital divide” for consumers w/out adequate technology is a priority (device/data service pilots coming.)
- G. Implementation of Office 365.
- H. Hancock elevator overhaul, refurbishment and repair

MSHN CEOs at our Operations Council Meeting today (12-14, 2020) voted to extend the DCW COVID Premium Pay through Q3 (June 30, 2020) as well as Provider Stabilization Payments/reimbursements using 2020 Medicaid Savings.

Office 365

Training and the installation of Microsoft Office 365 launched with the first group of senior staff last week. The reasons on we are moving to adopt the new Microsoft upgrade include:

Collaboration and File Sharing – Through the use of OneDrive, we will have the ability to collaborate by sharing files and editing them simultaneously by the entire team. Utilization of Teams Sites which provides endless capabilities that will assist with project management, planning and organizing within a team.

Accessibility – The ability to work from anywhere by allowing us to access our files in OneDrive and our mail and calendar in Outlook from anywhere we have internet access without having to use remote desktop.

Business Intelligence – Power BI Dashboards which will put the tools in our hands to identify Gaps In Care and opportunities for Improvement. We will be able to keep a closer eye on our Performance Indicators and Outcome Measures.

Motion made by Robert Woods and supported by Chuck Stack to receive this CEO Report. Motion Carried.

VI. BOARD ACTION

A. FY 2020 Preliminary Closing Report

Laura Argyle reviewed the FY 2020 Preliminary Closing Report (Statement of Net Position – September 30, 2020). See page 35 in tonight’s packet for details.

Motion made by Chuck Stack and supported by Robert Woods to receive and file the FY 2020 Preliminary Closing Report as presented. Motion carried.

B. Certificate of Appreciation / Tribute to Charles Stack

Tonight’s meeting will be Chucks final SCCMHA Board meeting. Tracey read the Certificate of Appreciation. See page 38 in tonight’s packet for details.

Chuck thanked the SCCMHA Board and gave his appreciation for all their hard work. Moving forward Chuck reported that he will be training therapy dogs in the future. He promises to come with his dog for a visit perhaps.

Sandy noted that Commissioner Webster apologized for not yet completing the SCCMHA Board reappointments, but we would be hearing back from him shortly as there have been several changes to the BOC membership in January as well. Stay tuned.

VII. BOARD INFORMATION

A. CMHA Weekly Update – 10/02/20 link: <https://cmham.org/wp-content/uploads/2020/10/Weekly-Update-10.02.20.pdf>

B. CMHA Weekly Update – 10/09/20 link: <https://cmham.org/wp-content/uploads/2020/10/Weekly-Update-10.09.20.pdf>

C. CMHA Weekly Update – 10/16/20 link: <https://cmham.org/wp-content/uploads/2020/10/Weekly-Update-10.16.20.pdf>

D. CMHA Weekly Update – 10/23/20 link: <https://cmham.org/wp-content/uploads/2020/10/Weekly-Update-10.23.20.pdf>

E. CMHA Weekly Update – 10/30/20 link: <https://cmham.org/wp-content/uploads/2020/10/Weekly-Update-10.30.20.pdf>

VIII. MEDIA / PUBLICATIONS

IX. OTHER ITEMS OF INTEREST

Central Region Meeting of the CMHAM was held on December 8. Per Andrea the nominations for officers of the region was the primary item of business. It was a very short session.

Merry Christmas and Happy New Year. May everyone stay safe.

X. ADJOURNMENT

Motion by Robert Woods and supported by Chuck to adjourn this meeting at 6:02 pm. Motion carried.

**Minutes prepared by:
Ryan Mulder
Executive Assistant to CEO**