

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
REGULAR MONTHLY BOARD MEETING MINUTES
JUNE 13, 2022 – 5:15 PM
ROOM 190/191**

PRESENT: Cym Winiecke, Mike Cierzniewski, Andrea Schrems, Tracey Raquepaw, Jill Armentrout, Lisa Coney, Deb Nagel, Joan Williams, Jane Sills, Robert Woods, John Pugh

ABSENT: Steve Fresorger

GUESTS:

STAFF: Sandra Lindsey, Tim Ninemire, Ryan Mulder

I. CALL TO ORDER

Tracey Raquepaw, Chair called the meeting to order at 5:15 p.m. A quorum was established, and verification of posting was determined.

II. PUBLIC PARTICIPATION

There was no public comment.

III. APPROVAL OF BOARD MINUTES

A. Board Meeting – May 9, 2022

Motion made by Deb Nagel and supported by Cym Winiecke to approve the April 9, 2022 SCCMHA Board Meeting minutes as amended. Motion carried.

IV. APPROVAL OF COMMITTEE REPORTS

A. Recipient Rights Committee – May 18, 2022
Robert Woods, Chair – Deb Nagel, Vice Chair
Reported by Tracey Raquepaw.

Motion made by Tracey Raquepaw and supported by Jane Sills to receive and file this report as written. Motion carried.

B. Governance Committee – No Meeting
Mike Cierzniewski, Chair – Jane Sills, Vice Chair

C. Ends Committee – May 23, 2022
Jill Armentrout, Chair – Tracey Raquepaw, Vice Chair
Reported by Jill Armentrout.

Motion made by Jill Armentrout and supported by Cym Winiecke to receive and file this report as written. Motion carried.

D. Executive Limitations – May 25, 2022
Andrea Schrems, Chair – Robert Woods, Vice Chair
Reported by Andrea Schrems.

Motion made by Andrea Schrems and supported by Deb Nagel to receive and file this report as written. Motion carried.

V. CEO REPORT

A Moment of Reflection on Gun Violence and its Impact

Our world feels very overwhelming and heartbreaking right now as we almost daily hear reports of gun violence. We expect our schools to be places of safety for students and not the site of yet another incident of mass violence. We mourn the deaths of 19 young students and two teachers at Robb Elementary School in Uvalde, Texas and their families. We ache for the students and faculty and other school personnel that survived the event but are traumatized and forever changed by this event as is the entire Uvalde community by this tragedy.

Gun violence is now the leading cause of death for youth in the United States.

As I write this report, across the US the weekend of June 4th, there were more than a dozen people killed and another seventeen injured as the result of gun violence. This includes Michigan; the death of one person and injury to three others in Grand Rapids, five persons wounded in Ecorse and closer to home, three persons killed in Bridgeport including a pregnant mother who died of her gunshot injury at the hospital. Her 7-month-old baby was saved and is now without their mother.

These tragedies are added to the other recent mass gun violence casualties in the last week, seemingly driven by grievance, racism and hate, at a supermarket in New York, a medical facility in Oklahoma, a Taiwanese church in California, high school graduation celebrations in Texas and South Carolina, an entertainment district in Philadelphia and nightclub in Tennessee.

This senseless gun violence that leaves a wake of death and injury impacts not just victims and their families left with the trauma of this life changing event, but also erodes the safety of whole communities. Let's also not forget those medical professionals in our local emergency departments that must deal with the aftermath of these shootings, as though the strain of two years of COVID care and death was not enough strain on the humanity of these professionals or the mental health staff like our own, working side by side with these doctors and nurses and from whom they seek debriefing aid and comfort.

Have these tragedies not become unbearable to the American consciousness? The polarized politics on guns in our nation and the perpetual suggestion that these tragedies are the result of inadequate mental health care and not gun safety are ridiculous. Grievance racism and hate are not diagnosable mental health conditions. The refusal of a whole party of elected officials to enact reasonable gun laws directed at those posing the most recent threats since Sandy Hook Elementary, Parkland or Oxford High school last year; those too young, impulsive and not responsible enough to own or have gun access. These same elected officials that suggest guns are not the problem, even when the guns are automatic weapons, designed for warfare and to kill other human beings at a rapid rate, are also those that refuse to act. Though they point to "mental health conditions" as a mitigating factor for these events, they refuse to consider even red flag laws to limit access for those who have openly threatened gun violence or who are

experiencing temporary cognitive and emotional impairment, which should at least for a time, limit their access to guns. Their position is simply irrational, out of step with most of Americans including responsible gun owners.

Senate Bills 597 & 598

The Community Mental Health Association of Michigan (CMHA) through their Action Alert Process has communicated that it appears that Sen Shirkey is going to try to move these bills out of the MI Senate in the next two weeks. These are the bills that would amend the Mental Health Code and Social Welfare Act and irrevocably change the public mental health system; eliminating the PIHPS, relegate CMHSPs to provider only status and move the financing and management of the system to private insurance companies. I have asked Ryan to forward the latest Action Alert to all Board and CAC members.

New Project Updates:

Unwind to Federal Public Health Emergency (PHE)

The federal PHE declaration has driven the policies of Medicare and Medicaid during the COVID-19 pandemic. In recent months, with new COVID cases trending downward and hospitalizations and COVID deaths way down, MDHHS has started to plan and hold meetings with groups doing business with MDHHS in the Medicaid space, in anticipation of federal Medicaid and Medicare policy changes. Audiences invited to these meetings, include CMHSPs and PIHPs and their service networks, FQHC and health care systems serving these beneficiaries. States are waiting for the federal government to declare and end to the PHE measures put in place due to COVID-19. Many of the anticipated changes are policy accommodations, but others are economic arrangements with states and still others are around Medicaid eligibility.

One of the most complex challenges will be re-establishing the Medicaid Eligibility Redetermination Processes. During the pandemic no one lost Medicaid or Healthy MI eligibility and related coverage due to the measures prescribed in the conditions of the PHE. MDHHS will have 60 days post the end date of the PHE, to respond to the rewind of policy changes that resulted from the pandemic, including beneficiary eligibility redetermination. MDHHS and the Medicaid provider community, including SCCMHA, appreciates the challenges inherent in the restart of this process. Whether or not the MDHHS even has the correct addresses for all current beneficiaries, is in question as people may have moved over the two years of the pandemic, as an example of the involved challenges. MDHHS during their recent provider meeting did indicate that planning for communication with beneficiaries is in the works.

It is important to remember that the PIHP/CMHSP system is deeply invested in the Eligibility Redetermination not just because we need to keep beneficiaries enrolled so they have health care coverage, but also because our sub-capitation payments are directly tied to enrollment.

The other related subjects besides eligibility redeterminations and policy accommodation rollbacks will be how many telehealth billing codes will continue to be allowable in the Medicaid and Medicare programs.

Diversity Equity and Inclusion (DEI)

A presentation of the first phase of the work in DEI space at SCCMHA has resulted in a climate assessment and recommendations. DEI consultant Paul Elam, PhD has been bringing presentations about this project to several audiences including the SCCMHA Board, last month but also to the Management Team, Leadership Team and an All Staff Summit last month. Paul will be scheduled to present at the Citizens Advisory Committee at their August meeting. The SCCMHA DEI Team comprised of 14 staff members will commence work on developing a 3-year DEI Implementation Plan in July.

Season of Site Visits/Audits

Sandy described the many virtual site visits and audits scheduled yet this summer and into the fall and the administrative burden to prepare for them, which is especially challenging with workforce shortages.

- A. Medicaid Waivers Site Review – 6/13 thru 6/17
(HSW, SED, Child Waivers)
- B. HUD Shelter Plus Care – 6/27 thru 7/1
- C. PIPBHC Site Visit with MDHHS and U of M – June 9
- D. CCBHC Mid-Year Check in with MDHHS – August 9
- E. CARF – Application with voluminous documents submitted last month with request for site visit. (We believe the visit will likely be scheduled in September)
- F. MSHN DMC/MEV Interim Review July 13 thru July 14
- G. Supported Employment IPS Certification Review – September 6 & 7

New Big MDHHS Projects Coming in FY 2023

- **Electronic Visit Verification (EVV)**– electronic application being procured by MDHHS that will be used by all Home Help, CMHSP Network CLS providers and others to track work hours and locations for clocking in and out.
- **Conflict Free Assessment & Planning (CFA&P)**– this is a federal Managed Care requirement protect against financial and clinical conflict of interest between assessments and service planning and payment authorization. Lots of concerns about how this will all sort as it may mean big changes to CMH and PIHP Structural arrangements and IT System changes.
- **1915(i) SPA Medicaid Waiver** and related enrollment- this is another big change as the 1915(i) SPA, will replace the B3 Medicaid Waiver. Unlike the B3 Waiver, it will require individual enrollment and enhanced service monitoring of all most all of the 7,500 persons served by the SCCMHA and our Network

All of these new projects have been on hold due to COVID-19 but are now starting back up.

Summer Respite Camp Resumes after 2 Years of COVID Closure

SCCMHA is very pleased to report that we have organized the following summer respite camp opportunities this season and enrollment is well underway. Camp is a covered service of the Medicaid Specialty Benefit. Camp provides not only an important break for parents and care givers but is also a great consumer experience.

SCCMHA 2022 Sponsored Camps (settings unique to SCCMHA consumers) Include:

- Hartley Outdoor Education Center – Overnight respite camp (One Session- two overnight days)
- SCCMHA/GameChanger/YMCA Saginaw- Day Respite Camps (2 session weeks/4 days per session)
- Kingdom Life Ministries – offering 30 respite camp days throughout summer
- Center of Attraction- offering 25 respite camp days throughout summer

Additional integrated camp sponsorship (Child/Adult/IDD/SED) throughout the State like Camp Fishtales, Mystic Lake, Spring Hill, Indian Trails, Fowler Center, Camp Timbers, etc... are also setup and welcomed camp options SCCMHA can authorize but are not classified SCCMHA sponsored camps as we do not have exclusive access to such programs/facilities.

Each respite camper can choose both an overnight and day camp experience if families wish with camp goals and objectives written into IPOS, and additional camp opportunities with clinical IPOS supporting documentation can be further supported for specialty camps.

CEO Vacation

I will be on a much-needed vacation, from June 17-July 5. I am confident that Ryan and the rest of the Management Team are prepared to handle anything that may come-up while I am away.

Respectfully submitted,
Sandra Lindsey, CEO

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

VI. BOARD ACTION

A. Approval of FY 2021 Annual Submission

Motion made by Deb Nagel and supported by Mike Cierzniewski to approve the FY 2021 Annual Submission. Motion carried.

B. Approval of SCCMHA Resolution as June as Pride Month

Tracey Raquepaw read the resolution aloud for the Board of Directors.

Motion made by Cym Winiecke and supported by Robert Woods to approve SCCMHA Resolution as June as Pride Month. Motion carried.

C. Approval of SCCMHA Board of Director Policies

Motion made by Lisa Coney and supported by Mike Cierzniewski to approve the above SCCMHA Board of Director Policy Revisions with requested changes as documented in the policy review form. Motion carried.

D. Board Members Report on CMHA Summer Conference

Jill Armentrout, Mike Cierzniewski, Deb Nagel and Joan Williams noted that the conference was very well attended. Really appreciated session 'Hit Hard: 3 Must Have Mindsets to (re)Design Your Life' presented by Dr. Paul Artale as it was very inspirational and told of overcoming disability. Senate Bills 597 & 598 were mentioned by Bob Sheehan from podium as well.

Motion made by Deb Nagel and supported by Mike Cierzniewski to receive and file Board members Report on CMHA Summer Conference. Motion carried.

VII. BOARD INFORMATION

- A. CMHA Weekly Update – May 2022 links: <https://cmham.org/resources/weekly-update/>**
- B. Memo re: Cancellation of June 22 Executive Limitations Meeting**
- C. Email from Bob Sheehan of CMHA to CMHSP CEOs Re: State Hospital Billing Problems**
- D. May is Mental Health Month Proclamation Passed by Saginaw Co. Board of Commissioners**
- E. May is Mental Health Month Proclamation Passed by City of Saginaw**

VIII. MEDIA / PUBLICATIONS

IX. OTHER ITEMS OF INTEREST

Sandy met with leadership from Covenant Hospital about Crisis Stabilization Units. Very well acquainted with current challenges in Hospital ED. A thoughtful discussion and documents were shared with them. They appeared to be interested in such an endeavor. This was a good first step.

X. ADJOURNMENT

Motion by Robert Woods supported by Deb Nagel to adjourn this meeting at 6:12 pm. Motion carried.

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