# Strategic Priorities & Budget Plan FY 2024







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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 https://www.sccmha.org/about/about-sccmha/operating-principles.html



## FY 2022-2023 Annual Progress Report



#### LEADERSHIP MESSAGE

### Thank You For All You Do

Dear Staff and Community Members, We are happy to share our 2022/23 Annual Report with you.

The Saginaw County Community Mental Health Authority (SCCMHA) has delivered on our mission of serving as the public manager of behavioral health and disability supports and services

for individuals - youth, adults and their families with emotional disorders, mental illness, intellectual/ developmental disabilities and substance use disorders. On behalf of the SCCMHA Board of Directors, I want to sincerely thank our staff and everyone working within the SCCMHA network for the important work they do for the consumers and the families we serve. I truly appreciate the remarkable service they provide.

We continue to face workforce shortages, especially in clinical areas of our system. This means that caseloads have been high, and we are keenly aware of the strain this has placed on our clinical teams and service delivery system overall. We have seen some marked improvements in qualified applicants for new and vacant positions across the network which supports our hope that workforce shortages are improving, just not at the pace we would like to see. We continue to

staff up to handle the unmet need for services in the Saginaw community, based upon the 100 to 150 new people each month presenting for service.

2022-23

If you are a new staff member with SCCMHA, or at one of over 100 provider agencies within our service network, welcome! We are pleased that you have joined our collective workforce of just under 1,900 people who are committed to our vision and mission. If you are a staff member who has tenure in the network, thank you, for all that you do to continue delivering exemplary service. Our thanks as well to the administrative and many other staff members behind the scenes, who provide necessary functions supporting clinical and program staff.

We continue to make improvements and build service infrastructure and are looking forward to a bright future. It is through our internal and external teams' commitment, talent and enthusiasm that we are providing a safety net with a full array of services that so many vulnerable people in our community need. We truly are all together better for it.

Sancha M. Jondsey

Sandra M. Lindsey Chief Executive Officer

### **Behavioral Health Home Services Launch**

CCMHA became one of several new implementation sites for the MSHN Regional Expansion of Behavioral Health Home (BHH), BHH is a service which specifically targets Medicaid-eligible enrollment for adults

with mental illness and children with emotional disorders and accompanying co-morbid chronic health conditions. SCCMHA enrolled 84 consumers into the program in May with a target of 475 enrollees for this fiscal year. The focus

of the BHH is on care coordination and integration of primary care with behavioral health care services.



**Health Care Needs.** 



SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

### **SCCMHA Strategic Priorities 2023-2024**

### **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, substance use disorders, hoarding disorders and secondary trauma. Improve and expand outreach to Transitional Age Youth, LGBTQ2+ population, Hispanic / Latinx and Black / African American populations, Veterans, Military Families and Pregnant women
- 1.1.3 Continue to develop school-based mental health services for elementary children
- 1.1.4 Develop and enhance Crisis / Mobile Response and Stabilization Service at Front Door for 24/7 service delivery access

#### Centralized Access & Intake (CAI) / Crisis Intervention Services

- Extend MRSS hours to 24/7, utilizing newly awarded MI Kids Now Grant NEW
- Expanded Mobile Response and Stabilization (MRSS) services to adults in Saginaw County
- Promote MRSS to outlying / rural areas in Saginaw County utilizing funding from MI Kids Now Grant NEW
- Implement Crisis Connect Virtual connection between MRSS / CIS and local law enforcement
- Implement Connections between New National 988 Behavioral Health Treatment and Text Lines through MDHHS MiCAL
- Extend service hours to address the increased need for services and allowing for care to be easily
  accessible for individuals seeking and receiving services
- Extend service hours for psychiatric clinic services for children
- MRSS Hours are currently offered from 8:00 AM to 10:00 PM. MRSS staff to begin with 24-hour-a-day services on Friday and Saturday. NEW

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- 1.1.5 Meet all MSHN Reporting and Service Quality Metric Benchmarks
- 1.1.6 Creating video productions of programmatic services to assist consumers and/or guardians with choice of 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 persons centered planning to achieve outcomes (benefit information)

- Update and publish new comprehensive services publication "Our Services"
- Continue to update individual service brochures NEW
- Develop key brochures in Spanish NEW
- Distribute new nursing services brochure and educate staff, AFCs and guardians on nursing services NEW
- 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 Substance Use Disorders, Mild / Moderate Disorders, Mobile Crisis Response and Stabilization Service, Psychiatry, Nursing and Ancillary Health
- 1.2.5 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
  - Continue to develop outpatient services for the mild to moderate populations utilizing telemedicine agencies Array and Innovatel for adult therapy NEW
  - Develop DCO for SUD services with Saginaw Psychological Services NEW
- 1.2.6 Implement Personalized Benefit Pathways and create tools to guide CAI team referral and IPOS Development including the following components
  - Core Tools Matrix Symptom severity screening/assessment tools for clinical decision making
  - Episode of Care Framework mapping for adults with mental illness and children with emotional disorders
  - Service Recommendations information to inform Individual Plans of Service and related Service Authorization
  - CAI standardized Front Door Workflows NEW
- 1.2.7 Establish Coordination of Benefits (COB) Workgroup and engage PCE to make required changes to Billing, Claims, Consumer Insurance, Pre-Authorization Modules in electronic health record (SENTRI)
- 1.2.8 Plan and prepare for individual consumer enrollment in the ISPA Medicaid Waiver commencing in FY 2023 for all ages and population types receiving the following services:
  - **Community Living Supports**
  - Enhanced Pharmacy
  - **Environmental Modifications**
  - Family Support & Training
  - Financial Management Services / Fiscal Intermediary Services
  - Housing Assistance
  - Respite
  - **Skill Building**
  - Specialized Medical Equipment and Supplies (Assistive Tech)
  - Supported /Integrated Employment
  - Vehicle Modification
- 1.2.9 Monitor and develop strategies as needed to address health disparities for Black/African Americans and Hispanic/Latinx consumers for improved outcomes informed by MSHN HEDIS data matrixes



- Develop partnership with Women of Colors to develop a grant funded Peer Support Specialist position who will work specifically with Black / African American Community to assist with engagement and work to dispel myths and stigmas associated with mental health services NEW
- Promote new name of the Hispanic Behavioral Health Services Program "Salud Mental de Saginaw." Rebrand promotional items through block grant funding, as a means to inform and educate the Hispanic / Latinx community. NEW
- 1.2.10 Informed by MDHHS Medicaid Policy changes related to the end of the federal COVID-19 Public Health Emergency, adjust telehealth and telephonic service modalities
- 1.2.11 Increase the role of nursing in the education of group home staff related to first aid, health education, and medication administration. Nurses will oversee medication return demonstration for both home managers and group home staff. **NEW**
- 1.2.12 Achieve MDHHS Certification for Supported Employment Unit to provide Individual Placement Services an Evidenced-Based Practice

### Strategic Goal 1.3: Expand Data Collection and Quality Reporting

- 1.3.1 Expand the use of stratified data from sources such as Care Connect 360, Zenith, AZARA, 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 new Behavioral Health Home activity.
- 1.3.2 Work collaboratively with physical healthcare partners, monitoring key performance indicators and quality measures, and evaluating the impact on quality and overall health outcomes
- 1.3.3 Develop a strategy to evaluate prevalent Social Determinants of Health to determine the impact on key health outcomes indicators from stratified data

### 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

- 2.1.1 Finalize and implement Succession Plan for key Management Team members
- 2.1.2 Continue leadership and sustainability strategies to support Multicultural Training across the network and with other Saginaw community groups
- 2.1.3 Develop and identify knowledge transfer opportunities / strategies
- 2.1.4 Develop strategies to reduce single person dependency across operations
- 2.1.5 Departmental / Key Functional Changes in response to MDHHS regulatory changes, CCBHC Status and Senior Staff Retirements

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- Reorganization of Finance Department & Business Operations
- Customer Services & Security
- Recipient Rights
- Corporate Compliance
- Workforce Diversity Officer NEW
- Manager of CEO Office



- Public Relations Specialist in CEO Office NEW
- Reorganization of Health Services NEW
- 2.1.6 Begin Planning with SCCMHA Board of Directors for CEO Retirement
- 2.1.7 Restart of American Society of Employers (ASE) leadership training for supervisors. Training includes two modules, Principles and Practices of Supervisors 1 & 2 for sixteen (16) new managers. Goal is to continue this training with all future newly hired supervisors
- 2.1.8 Imbedded new Culturally and Linguistically Appropriate Services (CLAS) Standards into Procurement Policy and Network Contracts---Discrimination & Priority Awards NEW

### Strategic Goal 2.2: Institutionalize Relationships with Community Partners to Ensure They Are Not Personality Dependent (predictable environment)

- 2.2.1 Continue to develop MOUs or other Engagement Documents with key community groups and partners to define collaborations:
  - BWell Initiative to Inform Community Health Improvement Plan
  - Central Michigan University (CMU) Pediatric & OB Practice Clinic MH Consultation
  - Michigan Rehabilitation Services
  - Quest Diagnostics Lab (SCCMHA sub vendor of GLBHC lease)
  - Saginaw Advocates & Leaders for Police and Community Trust (ALPACT)
  - Saginaw Intermediate School District (SISD) / Transition Planning / Great Start Collaborative
  - Saginaw Public Housing Authority
  - Great Start Collaborative
  - Women of Colors Behavioral Health African American Disparity Project Peer Support Specialist Project
  - CHW provider for Hoarding program NEW
  - Update Saginaw First Responders Guide for Behavioral Health NEW

#### **Strategic Goal 2.3:**

### Staff Retention, Recruitment and Supporting Equity, Diversity, & Inclusion (DEI) Among the Workforce and Network

- 2.3.1 Development of new formal onboarding process for new staff
- 2.3.1 Continue to recruit for staff diversity (race, cultural, SOGI)
  - Evaluate Staff Retention and Recruitment Strategies and Assets to address workforce shortages
    - Implemented signing bonuses ranging from \$2000 to \$10,000 for clinical and other hard to recruit staff. Goal is to continue this along with using alternate and non-traditional media publications in an attempt to reach as broad of an audience as possible during the current Statewide staffing challenges. NEW
  - Participate in HRSA and MI Kids Now Education Loan Forgiveness Program
  - Recruit, credential and / or 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 DEI and 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 including American Sign Language

- 2.3.3 Conduct DEI Organizational Assessment with Recommendations to inform the creation of an Implementation Plan
  - Appoint DEI Staff Team
  - Publish and Post DEI Organizational Climate Assessment Report to SCCMHA website
  - Establish Metrics/Targets to measure increased diversity of the workforce at levels NEW
  - Establish process for annual agency policy review that includes a DEI lens. NEW
  - Develop DEI Staff Communication Plan NEW
  - Establish DEI 101 eLearning training module for all staff NEW
  - Hire Diversity and Workforce Development Officer with Matrixed Reporting to CEO and HR Director NEW
  - Establish DEI Page in "About Us" Section of SCCMHA Website
  - Create standard DEI interview questions to be utilized during the interview process to assure all new staff have preliminary knowledge of the importance of DEI NEW
  - Provide DEI Training to all SCCMHA staff
  - Provide and fund Implicit Bias Training to clinical staff in accordance with new LARA health care workforce licensing requirements

### Strategic Goal 2.4: Addressing and Enhancing Staff Safety & Accountability

- 2.4.1 Continue to pursue technology tools for staff safety in the community
  - Rework 8-1-1 system
- 2.4.2 Expansion of external security cameras at SCCMHA sites (vendor purchase order awarded)
- 2.4.3 Expand Crisis Response Team process for aggressive persons at Bay Road, Towerline & Maple building locations
- 2.4.4 Install new security alarm and upgrade existing alarms
- 2.4.5 Write policy for use of electronic security systems for staff safety monitoring
- 2.4.6 Continue to adhere to and follow COVID-19 safety measures as required by CDC, MDHHS and the SCHD
  - Continue Electronic Daily COVID-19 Symptom Self-Assessment
  - Continue SCCMHA COVID-19 Amended Safety Procedures
  - Continue to monitor COVID-19 Infection Rates in Residential Programs
- 2.4.7 Continue SCCMHA Provider Network Stabilization Programs including DSW Increases as per MSHN, MDHHS and Michigan Legislative Appropriation
- 2.4.8 Plan and Implement Strategies related to the end of the Federal COVID-19 Public Health Emergency
  - Adapt to changes in Service Delivery and Related Telephone and Virtual Telehealth modalities and related Billing Codes 🗸
  - Support Consumers with restart of Medicaid Redetermination Process to maintain insurance coverage
- 2.4.9 Created new position and hired Security Coordinator with the focus of this position to oversee the security functions within all SCCMHA facilities. Goal is to develop and implement a comprehensive security program to ensure the safety of all staff, consumers and visitors. **NEW**

#### **Strategic Goal 2.6:**

#### **Expanding Organization Mastery of Benefit Interpretation**



- 2.6.1 Unpack and continue to train staff in the Medicaid Waiver and Public Policy Changes for FY 2024
  - Plan and Implement Enrollment of Consumers Network wide in the 1915 (i) ISPA Home and Community Based Waiver and related Services Benefit
  - Train new select clinical staff and contracted clinical teams as needed, in the enrollment process and service benefits under the Serious Emotional Disorders Waiver, Habilitation Supports Waiver, I/DD Children' Waiver
  - Train leadership and involved staff in new array of MDHHS federal and state Medicaid Authorities that fund and determine select services and their related regulations
- 2.6.2 Describe Baseline Service Delivery Workflows by discipline
  - Then Assign Coding and Credentialing to the Workflows and develop Auth Package charts for staff (as of 10/1/22 Auth Base packages by 15 different disciplines)
- Plan for FY 2023 Service Code, Modifier and Benefit Changes at the Coding and Benefit Integrity
   Workgroup, to inform staff training and development of appropriate Individual Plan of Service (IPOS)
   development, implementation and monitoring

#### Strategic Goal 2.7: Knowledge Transfer to Emerging Leaders

- 2.7.1 Introduction of Public Reference Documents (Mental Health Code, Social Welfare Act Medicaid Manual, MDHHS-CMHSP and MSHN-CMHSP Annual Contracts, 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 Application Programming Interfaces (APIs) within the EMR and the data warehouse allowing for the acceptance, transfer, and utilization of mental and physical health data
  - Enhance the Admission, Discharge and Transfer (ADT) documents, functionality, and utilization within the Sentri system
- 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 three-year lease extension signed for AZARA)
  - 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 and Commercial Payers
- 3.2.5 Explore the feasibility / utility of providing access & reporting in Zenith and Care Connect 360
- 3.2.7 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
  - Create a data dictionary of all SCCMHA's digital data assets and objects utilizing metadata
  - Create a new Data Integrity work group
  - Move SCCMHA Data Warehouse to the CLOUD

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

3.2.10 Rollout Automated Appointment Reminders via text message and voice phone calls

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

- 3.3.1 Install a natural gas generator in the Hancock Building to ensure the continuous operation of the IT network, servers, and Information Systems (vendor purchase order awarded)
- 3.3.3 Develop desktop support processes and implement a robust Help Desk ticketing system to better support the IT needs of staff
- 3.3.4 Create HelpDesk policies and procedures to ensure strong IS/IT support within the agency
- 3.3.6 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
  - Data Analytics and Database Administration
  - Cyber Security Phishing, Education, Simulations, MS Defender, and InTune
  - Project Management
  - Quality & Process Improvement

- 3.3.8 Offer and Support Complete Telehealth Solutions (2 teletherapy vendor contracts completed):
- 3.3.9 CrisisConnect Virtual Connection between Mobile Crisis Response & Stabilization and Law Enforcement
  - Develop metrics against which success of CrisisConnect will be evaluated
  - Expand the CrisisConnect Program to additional Law Enforcement Agencies in the Service Area **NEW**
  - Expand the CrisisConnect Program by providing an option of an iPhone versus an iPad to Law Enforcement NEW

3.3.10 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

- Review and update all information safeguard policies, procedures, and implementations to ensure compliance with the HIPAA security rule
- Contract with an external entity to perform an SRA (Security Rick Assessment) and identify CAP (Corrective Action Plans) for all areas of noncompliance
- Implement a strong Cyber Security program which includes education, training, and phishing simulations
- Rollout agency cybersecurity tools Microsoft Defender, and InTune
- Implement tools that provide strong virus detection
- Utilize a Mobile Device Management System (MDMS) to ensure full endpoint security
- Rollout a new cybersecurity awareness training and simulation platform
- Add additional badge readers to all Server and Communication rooms as well as any locations where Network technology or devices that have administrative access to the network resources are located NEW
- Develop a 9-year Network upgrade strategy and plan, broken into 3 phases, with each phase covering a 3-year time period NEW
- 3.3.11 Discover, Investigate, Vet and Implement (budget permitting) new State-of-the-Art Information Technologies
- 3.3.12 Rollout Azure File Sync to allow for cloud backups as well as the ability to access the G:\ drive off network
- 3.3.13 Vet and rollout a Secure Text Messaging Service that provides both clinical collaboration and patient engagement
- 3.3.14 Rollout diction software to be used for documenting within the EHR
- 3.3.15 Vet and rollout a new Secure Electronic Fax Server that will remove the dependence on traditional fax machines and eliminate the potential HIPAA breaches that analog services provide. **NEW**
- 3.3.16 Expand the provision of agency iPhones to additional clinical staff who provide services out in the community. This technology will allow for remote utilization of additional agency technologies such as Office 365 applications including Outlook, Secure Text Messaging, DOXY telehealth and an available hotspot for connectivity. **NEW**
- 3.3.17 Add two additional instances of the existing TeamDynamix ticket system to be used by the Continuing Education department for training registration requests as well as by the Maintenance department for custodial and environmental services requests **NEW**
- 3.3.18 Strategically with a phased in approach, adapt and implement Microsoft Intune, a cloud-based service and mobile device management (MDM) solution, which will help manage and secure employees' devices, including smartphones, tablets, and computers. Phases will include, in no particular order:
  - Device Management manage and configure devices remotely NEW



- App Management enables the distribution and management of applications on various platforms. This includes installing, updating, and removing apps as needed NEW
- Security and Compliance enforce security measures such as passcode policies, encryption, and remote wipe capabilities to protect company data on devices NEW
- Conditional Access set access controls based on device compliance, ensuring that only secure and compliant devices can access resources NEW
- Identity and Access Management integrate with Azure Active Directory for user authentication and identity management, making it easier to control access to resources NEW
- Endpoint Protection provides endpoint protection capabilities, including antivirus and malware protection, to safeguard devices from security threats NEW
- Inventory and Asset Management maintains an inventory of all managed devices, hardware and software assets NEW
- Remote Assistance facilitates remote troubleshooting and support for end-users 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
  - Publish Microsoft Power BI Dashboards
- 3.4.4 Roll out solutions that will assist in the collaboration of strategic thought

### 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
- Development of a data driven Quality Program led by a Quality & Medical Records Supervisor 3.5.2
- 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
- Continuously monitor performance to ensure that the performance indicators are improving outcomes 3.5.5
- Support data driven decision making, business intelligence & superb data analytics 3.5.6
- 3.5.7 Assist agency workgroups with implementing the Data Driven Quality Improvement Program by creating/ managing and following up on Quality Improvement Plans (QIPs) that are monitored by the workgroup's governing body 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 Roles in Healthcare

- 4.1.1 Community Health Improvement Plan (CHIP) Continue leadership participation and cost sharing
- 4.1.2 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

### 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 Develop formal partnerships with local universities to obtain CME or CE approval to expand interdisciplinary practices to additional professional disciplines that will enhance the delivery of integrated and multidisciplinary care
- 4.2.3 Support the care coordination efforts of staff to address whole person health care by including saturating 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 Adopt nationally recognized core competencies and support staff skill development in the substance use disorders care continuum
- 4.2.6 Identify gaps in staff's implementation of core competencies through the administration of annual selfassessments
- 4.2.7 Prepare, train staff and implement DECIPHER (Disparities Elimination through Coordinated Interventions to Prevent and Control Heart and Lung Disease Risk) Project. DECIPHER is a research project with U of M and John Hopkins University with implementation partners in both states. Go Live is the Spring 2025 with adult consumers participants with SMI and 1 CVD risk factor in evidence-based practice called IDEAL Goals. NEW

### Strategic Goal 4.3:

#### Achieve and Maintain Certified Community Behavioral Health Clinic Status

- 4.3.4 Plan for and commence enrollment of Medicaid eligible network consumers thru DCOs for mental health and primary substance use disorder services
- 4.3.5 Plan for and commence enrollment of non-Medicaid Consumers in concert with third Party Billing outsourcing to Yeo & Yeo
- 4.3.6 Establish Sliding Fee Scale parameters and implement for non-Medicaid CCBHC Enrolled Consumers
- 4.3.7 Expand capacity to serve uninsured and under insured, including persons with SUD Primary disorders and those with Mild/Moderate Conditions
- 4.3.8 Train workforce and build capacity of clinical staff to deliver all CCBHC Evidence Based Practices

- 4.3.9 Establish Designated Community Organization (DCO) Agreements
  - Contracted Network Clinical Teams including Third Party Billing Arrangements
  - Skill Build, Supported Employment, Respite
  - SUD Providers (Outpatient / MAT)
  - Mild/Moderate Treatment Providers for Service via Telehealth (4 Therapists hired through Array / Innovatel)
  - Explore opening network to expand in-person outpatient service to persons with Mild/Moderate conditions to expand service as per CCBHC NEW
- 4.3.10 Increase by 35% the number of activated consumers who are successfully engaged in treatment following an eligibility screening
- 4.3.11 Increase the use of mobile crisis intervention and stabilization services by 30%
- 4.3.12 Effectively utilize Peer staff in service delivery, & create infrastructure to support them
- 4.3.14 Develop strategies and metrics to measure/improve processes and to achieve improved physical health outcomes
- 4.3.15 Meet established criteria related to care coordination
- 4.3.16 Develop mastery and methods to monitor daily visits to unform utilization and monitor CCBHC Perspective payments from and quarterly reconciliation with MSHN

#### **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 exising community resourses such as moble dental services and community events
  - Continue to promote consumer utilization of CEHR portal to advance consumer engagement in self management
- 5.1.2 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



- Monitor network for compliance with Home and Community Based Services (HCBS) Rule compliance NEW
- 5.1.3 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 disabilitiey and addiction
- 5.1.4 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 integrated practice and promote a culture of identifying at risk consumers and provide effective interventions using EBPs and EBP matching at intake.
  - Advance the identification of SUD to improve the overal health and recovery of consumers. Work to
    improve screening, intervention, treatment and referral when co-occurring or substance use disorders
    are identified.
- 5.1.5 Expand the use of integrated data systems to promote cross-sector information exchange
  - Promote and advance the use of interoperable systems to support data-driven prevention decisions and implement evidence-based prevention policies, practices and programs
- 5.1.6 Develop a skilled, cross-trained, and diverse prevention workforce
  - Enhance the current continuing education and training content to include an emphasis upon increasing the capacity of staff to address physical and behavioral health, focusing on care-coordination, health education and prevention in all settings
- 5.1.7 Help consumers improve their mental and physical health through health promotion and disease & injury prevention
  - Activate enrollment activity as MSHN Behavioral Health Home Site for Medicaid beneficiareis including adults with mental illness and children/youth with emotional disorders and chronic health conditions NEW
  - Provide behavioral health screenings, referrals and care coordination to patiets at CMU Pediatric and OB Clinic at GLBHC/Hancock
  - Implement sustainable and meaningful health promotion activities, which are evidence-based and work to engage consumer participation
  - Increase Screening, Care Management, Care-coordination, Health Education NEW
- 5.1.8 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, trend outcomes, and implement evidence-based strategies to improve the outcomes
- 5.1.9 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 Community Health Improvement Process at BWell project at the Saginaw Department of Public Health with community partners.
  - 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) in active partnership with GLBHC and determine post grant award sustainability. Sustainability plan completed and provided to state.
  - Continue to offer training in Mental Health First Aid, Suicide Prevention and Trauma Informed Community content
- 5.1.10 Through a well-informed workforce, educate and support consumers and those they identify as family to engage in their own health and well-being
- 5.1.11 Create venues that require the inclusion of consumers and peers to inform and develop health initiatives
- 5.1.12 Collaborate with community stakeholders to address social determinants of health that impact all at risk populations within Saginaw County
- 5.1.13 Continue to provide leadership and workforce training to the health care region in understanding stigma, access barriers and safe points of service for the entire community with special emphasis on at risk individuals impacted by inequities and disparities.

### 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

- Hancock natural gas generator to power our entire building (vendor purchase order awarded)
- Hancock and A&W Security Software and Camera upgrades and standardization (vendor purchase order awarded)
- A&W Water Tower and Chiller replacement (vendor purchase order awarded)
- 6.1.2 Plan to Implement Capital improvement needs through budget favorability
  - Upgrading nine (9) agency commercial fleet vehicles (vendor purchase order awarded)
  - Continued planning for remodel for CSS & other locations
  - Group home facilities and equipment upgrades (ongoing)

### Strategic Goal 6.2:

### Develop a Long-Term Financial Stability Plan

- 6.2.1 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
- 6.2.4 Continue to seek ways to maximize Commercial Insurance Billing Reimbursement
- 6.2.5 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
- 6.2.6 Continue to Seek resolution in the Local Match Obligation reductions implemented by Saginaw County in 2019
- 6.2.5 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
- 6.2.7 Maximize CCBHC Perspective Payments and Bonus Incentive arrangements NEW

#### Strategic Goal 6.3: Develop a Long-Term SCCMHA Staffing and Network Provider Stabilization Effort

- 6.3.1 Implementation of network wide legislative appropriated \$2.35 premium pay through 09/30/23 for direct care professionals (DCW) \$3.20 for FY 2024
- 6.3.2 Implement Retention Bonus Payments to SCCMHA employees and the Contracted Provider Network Staffing Crisis Stabilization Program
- 6.3.3 Implemented Staffing and Network Provider Stabilization:

#### FY 2023 Stabilization Staffing Summary will be reported on 10/20/23

- \$XXX,XXX YTD unusual expenditure reporting by network
- \$XX,XXX FY23 Unique provider stabilization payment made based on regional plan
- \$X,XXX,XXX = MSHN Staffing Crisis Provider Stabilization applications
- \$XXX,XXX = FY 23 SCCMHA employee stabilization special payroll run Qtr 1 & 2
- \$XXX,XXX= FY 23 SCCMHA employee stabilization special payroll run Qrt 3 & 4

### Strategic Goal 6.4: Ensuring Mastery for First/Third-Party Service Billing and Related Credentialing for Coordination of Benefits

- 6.4.1 Outsource Third-Party Commercial Billing and Payor Enrollment / Credentialing to Yeo & Yeo Medical Billing Division
- 6.4.2 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



# FY 2024 Preliminary Operating Budget

	FY 23 Adopted Budget		FY 24 PRELIMINARY		FY 25 Estimated	
REVENUES				Budget		Budget
Medicaid Revenue ( Autisim & DCW)	\$	75,118,000	\$	75,724,874	\$	75,010,068
Healthy MI Revenue	\$	5,627,000	\$	6,879,244	\$	6,879,244
CCBHC - Medicaid	\$	7,516,000	\$	14,296,136	\$	15,010,943
CCBHC - Supplemental	\$	-	\$	23,880,995	\$	25,075,045
Behavioral Health Home Revenue	\$	-	\$	374,268	\$	392,981
General Fund Revenue	\$	2,150,000	\$	2,150,000	\$	2,150,000
Grant Revenue	\$	2,351,436	\$	1,667,583	\$	1,667,583
County Appropriations	\$	1,050,302	\$	823,000	\$	823,000
Performance Incentive	\$	700,000	\$	820,000	\$	820,000
Fee For Service Revenue	\$	550,000	\$	595,547	\$	595,547
Other Revenues	\$	650,000	\$	621,107	\$	621,107
Other Revenues - OPEB Trust	\$	-	\$	726,512	\$	726,512
TOTAL REVENUES	\$	95,712,738	\$	128,559,266	\$	129,772,030
Percentage Increase (Decrease)				34.32%		0.94%
EXPENDITURES						
Salaries & Wages	\$	16,218,903	\$	22,974,877	\$	23,664,123
ringe Benefits	\$	5,554,457	\$	7,119,974	\$	7,333,573
Fringe Benefits - Pension Exp	\$	3,000,436	\$	2,116,187	\$	2,179,673
letirees Medical Expense	\$	1,618,331	\$	726,512	\$	748,307
Provider Network Services	\$	59,814,298	\$	59,494,004	\$	61,278,824
DCO Expense - CCBHC	\$	-	\$	24,553,066	\$	25,535,189
State Facility Expense	\$	456,009	\$	583,780	\$	583,780
Facility Operating Expense	\$	1,788,793	\$	2,773,477	\$	2,607,056
Depreciation Expense	\$	1,106,294	\$	1,093,552	\$	1,113,552
Clinical Operating Expense	\$	985,846	\$	936,774	\$	964,878
Administration Operating Exp	\$	3,045,908	\$	2,598,873	\$	2,676,839
Fechnology Operating Expense	\$	740,250	\$	1,489,158	\$	1,383,833
ocal Match Drawdown	\$	307,715	\$	260,872	\$	268,698
nterest Expense	\$	139,817	\$	172,497		172,497
TOTAL EXPENDITURES	\$	94,777,057	\$	126,893,602	\$	130,510,820
Percentage Increase (Decrease)				33.89%		2.85%
		935,681		1,665,664		(738,790)



# 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



