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Meeting Agenda  
**BOARD OF DIRECTORS**  
Lakeshore Regional Entity  
April 24, 2024 – 1:00 PM  
GVSU Muskegon Innovation Hub  
200 Viridian Dr, Muskegon, MI 49440

1. Welcome and Introductions – Mr. Stek
2. Roll Call/Conflict of Interest Question – Mr. Stek
3. Public Comment (Limited to agenda items only)
4. Consent Items:  
***Suggested Motion:*** To approve by consent the following items.
  - April 24, 2024, Board of Directors meeting agenda (*Attachment 1*)
  - March 27, 2024, Board of Directors meeting minutes (*Attachment 2*)
5. Reports –
  - a. LRE Leadership – Stephanie VanDerKooi
    1. [FY 21-FY23 SUD Prevention Evaluation Report](#)
    2. [FY 21-FY23 SUD Treatment Evaluation Report](#)
6. Chairperson’s Report – Mr. Stek
7. Action Items –
  - i. March 27, 2024, Closed Session Meeting Minutes  
***Suggested Motion:*** To approve the March 27, 2024, closed session meeting minutes.
  - ii. PIHP/CMHSP FY21 Contract Extension  
***Suggested Motion:*** To approve amending **Motion LRE 24-08** “*LRE CEO to fully execute a contract extension to the LRE/CMHSP FY20/21 Contract through September 30, 2024*” to read:  
  
To approve LRE CEO to fully execute a contract amendment to the LRE/CMHSP FY20/21 contract with terms and conditions set forth in the original agreement to remain in full force and effect, except as specifically defined below:
    1. Section VI, Term. The expiration date of this Agreement is hereby extended to September 30th, 2024.
    2. Exhibit C, Member Reporting Responsibilities, is hereby deleted and replaced in its entirety with Exhibit C, Member Reporting Responsibilities, attached hereto.

3. Exhibit D, Subrecipient Awards, is hereby deleted and replaced in its entirety with Exhibit D Revenue Distribution, attached hereto.

iii. LRE Compliance Plan

***Suggested Motion:*** To approve the LRE 2024 Corporate Compliance Plan.

8. Financial Report and Funding Distribution – Ms. Chick (*Attachment 3*)

a. FY2024, March Funds Distribution (*Attachment 4*)

***Suggested Motion:*** To approve the FY2024, March Funds Distribution as presented.

b. Statement of Activities as of 2/29/2024 with Variance Reports (*Attachment 5*)

c. Monthly FSR (*Attachment 6*) –

9. CEO Report – Ms. Marlatt-Dumas

10. Board Member Comments

11. Public Comment

12. Upcoming LRE Meetings

- May 15, 2024 – Executive Committee, 1:00PM
- May 22, 2024 – LRE Executive Board Meeting, 1:00 PM

Meeting Minutes  
**BOARD OF DIRECTORS**

Lakeshore Regional Entity  
March 27, 2024 – 1:00 PM

GVSU Muskegon Innovation Hub, 200 Viridian Dr, Muskegon, MI 49440

WELCOME AND INTRODUCTIONS – Mr. Stek

Mr. Stek called the March 27, 2024, LRE Board meeting to order at 1:00 PM.

ROLL CALL/CONFLICT OF INTEREST QUESTION – Mr. Stek

**In Attendance:** Ron Bacon, Jon Campbell, Linda Dunmore, Janice Hilleary, Sara Hogan, Richard Kanten, Alice Kelsey, Stan Stek, Jim Storey, Janet Thomas, Craig Van Beek

**Absent:** Patricia Gardner, Ron Sanders, Andrew Sebolt

PUBLIC COMMENT

None.

CONSENT ITEMS:

**LRE 24-06 Motion:** To approve by consent the following items.

- March 27, 2024, Board of Directors meeting agenda
- January 24, 2024, Board of Directors meeting minutes

Moved: Ron Bacon                      Support: Linda Dunmore

MOTION CARRIED

COMMUNITY ADVISORY PANEL

March 14, 2024, Meeting minutes are included in packet for information.

LEADERSHIP BOARD REPORTS

Leadership report is included in the packet for information.

- Ms. Myers reviews her report that focuses on cyber threats and security. LRE has ongoing staff training to help mitigate threats.
- Q: Do we have insurance?
  - Yes, we do have corporate insurance that covers this.

CHAIRPERSON'S REPORT

March 20, 2024, Executive Committee (EC) Meeting Minutes are included in packet for information.

LRE Board Chair Term and Recommendation: The Executive Committee is recommending Mr. Stek be reappointed as the LRE Board Chair until the next election of Board Officers.

**LRE 24-07 Motion:** To approve reappointing Mr. Stek to complete the full term of LRE Board Chair.

Moved: Ron Bacon                      Support: Janet Thomas

ROLL CALL

MOTION CARRIED

#### ACTION ITEMS

**LRE 24-08 Motion:** To approve LRE CEO to fully execute a contract extension to the LRE/CMHSP FY20/21 Contract through September 30, 2024.

Moved: Ron Bacon                      Support: Janet Thomas

MOTION CARRIED

**LRE 24-09 Motion:** To approve extending the 2023 Corporate Compliance Plan for 1 month, through April 30, 2024.

Moved: Ron Bacon                      Support: Jon Campbell

MOTION CARRIED

#### FINANCIAL REPORT AND FUNDING DISTRIBUTION

MDHHS facilitated a rate setting meeting discussing a rate increase that includes DCW, an enrollment amendment due to the PHE unwind and a trend amendment. The LRE is estimating \$11.8 million of additional funds. This is only an estimate as we do not have the final numbers. The LRE will communicate to the state that the increase will not close the projected deficit gap. Ms. Chick has also reached out to other PIHPs to inquire if there are similar issues.

Network180 has reported that they will have cash flow issues by June and asked LRE if they could expedite the cost settlement process to help mitigate the cash flow issues. The FY23 CMH spending plans projected a surplus. The final FSRs are showing CMHs overspent by \$6.3 million. Ms. Marlatt-Dumas comments that historically this region has had large negative swings. She would like the Board to work closely with their CMH CEOs to ensure they are spending within their PMPM. The ISF will be drained of funds within 2 years if LRE continues to use the funds to cover deficits. Currently, there is \$30 million in ISF and \$16 million in the Medicaid Savings equaling \$46 million altogether. Wakely recommend that our region have \$54 million to be secure. Ms. Marlatt-Dumas reminds the Board members that LRE is not a revenue-making organization and while we will continue to advocate with legislators the CMHs must have a plan in place.

## **FY2024 January and February Funds Distribution**

**LRE 24-10 Motion:** To approve the FY2024, January and February Funds Distribution as presented.

Moved: Jon Campbell

Support: Janet Thomas

MOTION CARRIED

**LRE 24-11 Motion:** To approve LRE FY2024 Budget Amendment #2 as presented.

Moved: Ron Bacon

Support: Jon Campbell

MOTION CARRIED

### **Statement of Activities as of 1/31/2024 with Variance Report-**

Included in the Board packet for information.

- Medicaid revenues are above projections because we are using less CCBHC revenues.
- Contributing factors to revenues being under are because LRE has not received the PBIP, CCBHC performance bonus or HRA.

### **Monthly FSR-**

Included in the Board packet for information.

- Q: How does enrolment affect only 2 of the CMHs?
  - It affects all the CMHs but some of have built the decline into their projections and built in a cushion.
- **Note:** Any deficit incurred by the CCBHC is the responsibility of the CCBHC organization. The LRE is not the risk bearing entity in this situation.
- Q: Which 2 CMHs have been with CCBHC?
  - West Michigan and HealthWest. The newest CCBHCs are N180, Ottawa and OnPoint.
- Q: If there is no cushion for the CCBHCs, how will they handle a deficit?
  - They have plans in place in case of a deficit. The funds from the previous year (carryover funds) can be used and local funding. However, the CCBHCs may not use Medicaid funding.
- Q: If a CCBHC has a deficit they can use local funding to cover the deficit? What are those funds?
  - The CCBHCs can use PBIP which becomes local funding, fund balance reserves, county or grant funding, and millage funds.
- Q: Can PA2 funds be used?
  - This would be dependent on the person served and if they qualify and are eligible under PA2.

## CEO REPORT

Included in the Board packet for information. Ms. Marlatt-Dumas reports:

- LRE submitted 17 HAB waiver packets. The packets chosen are based on the highest need individuals. Over the next 2 months LRE will fill the additional slots and any others as they become open.
- N180 presented a plan to the state regarding the Autism waiting list. MDHHS did not approve the plan and will communicate after further internal discussions.
- PIHP/CMH contract is being worked on with CMHs. LRE has extended the CMH contract through the end of the fiscal year.
- A meeting was scheduled where N180 presented a recovery plan. The conversation is ongoing as more detail is needed regarding the funding request.
- The Legislative Report is attached to the end of the CEO report.
- Ms. Dumas suggests that a link be sent to one of the BoardWorks videos each month and can be discussed during the following month Board meeting.
- CMHAM has Board Works videos that can assist in understanding the role of Board members. <https://cmham.org/education-events/boardworks/>

## LRE CEO EVALUATION

**LRE 24-12 Motion:** To approve moving into closed session to discuss the LRE CEO evaluation as requested by the LRE CEO.

Moved: Ron Bacon    Support: Craig VanBeek

ROLL CALL VOTE – UNANIMOUS

MOTION CARRIED

**LRE 24-13 Motion:** To approve moving out of closed session from discussing the LRE CEO evaluation as requested by the LRE CEO.

Moved: Janet Thomas    Support: Linda Dunmore

ROLL CALL VOTE – UNANIMOUS

MOTION CARRIED

**LRE 24-14 Motion:** To approve the January 21, 2024, closed session meeting minutes.

Moved: Jim Storey    Support: Ron Bacon

MOTION CARRIED

**LRE 24-15 Motion:** To approve the retention of Bob VandePol to serve as a coach consultant pursuant to a contract to be worked out with Mr. VandePol.

Moved: Janet Thomas    Support: Ron Bacon

MOTION CARRIED

BOARD MEMBER COMMENTS

NA

PUBLIC COMMENT

NA

UPCOMING LRE MEETINGS

- April 17, 2024 – Executive Committee, 1:00PM
- April 24, 2024 – LRE Executive Board Meeting, 1:00 PM  
[GVSU, Muskegon Innovation Hub, 200 Viridian Dr, Muskegon, MI 49440](#)

OTHER:

ADJOURN

Mr. Stek adjourned the March 27, 2024, LRE Board of Directors meeting at 3:25 PM.

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Ron Bacon, Board Secretary

Minutes respectfully submitted by:  
Marion Dyga, Executive Assistant

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## Lakeshore Regional Entity Board Financial Officer Report for April 2024 4/24/2024

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- **Disbursements Report** – A motion is requested to approve the March 2024 disbursements. A summary of those disbursements is included as an attachment.
- **Statement of Activities** – Report through February is included as an attachment. This is a preliminary report. Figures may change based on the final FY2023 financial statements due to accruals, other year-end entries, the external audit, and the CMHSP final FSRs.
- **LRE Combined Monthly FSR** – The February LRE Combined Monthly FSR Report is included as an attachment for this month’s meeting. Expense projections, as reported by each CMHSP, are noted. An actual **surplus** through February of \$6.5 million and a budgeted **deficit** of \$2.2 million regionally (Medicaid and HMP, excluding CCBHC) is shown in this month’s report.. The projected annual **deficit** of cannot be determined because OnPoint did not provide expense projections on this month’s report. All CMHSPs have an actual surplus except Network180 who has a deficit of \$1,777,913. HealthWest is the only CMHSP that has a projected surplus. Network180 has a projected **deficit** of \$15.9 million, OnPoint undetermined, Ottawa \$281 thousand, and West Michigan \$481 thousand. All CMHSPs have a budgeted surplus, except Network180 with a budgeted **deficit** of \$7 million.

CCBHC activity is included in this month’s report showing an actual **deficit** of \$2.3 million, which is the responsibility of the CCBHCs and not the PIHP. A budgeted **surplus** of \$4.6 million is shown.

- **Cash Flow Issues** – Network180 reported via email on March 26, 2024 that they were expecting cash flow issues in the next few weeks due to March being a five week provider pay month and having three payrolls. They asked for the FY23 cost settlement to be expedited and paid that week. LRE was able to accommodate the request to expedite the cost settlement and requested that Network180 provide reasons why the cash flow issue was not identified earlier and to provide a cash flow analysis.



- FY 2024 Revenue Projections** – Updated revenue and membership projections by program and Member CMHSP are below. There have been additional updates to revenue projections since the original February Revenue Projections. The February projections were updated to include the rate-setting updates as outlined above (DCW, Enrollment, Utilization). This update was based on estimated rates received from Milliman at the March rate-setting meeting. The estimated rate-setting update increased the FY24 February Revenue Projections by \$11,837,704. The FY24 March revenue projection decreased (\$1,804,430) from the updated February Projections. This decrease was related to continuing dis-enrollment due to the end of PHE and the decline in Waiver payments. The FY24 March Revenue Projections were then amended to include the FY24 capitation rates received from Milliman for April to September. This FY24 March Revision increased projections \$71,599. This indicates the original rate update estimates made for and applied to the February projections were accurate. Overall projected revenue has decreased (\$7,811,612) from the initial budgeted amount, due to changes in the CCBHCs’ daily visit projections and greater than expected enrollment declines.

FY 2024 Revenue Projection				
Total LRE				
	FY24 Initial Budget Projection	FY24 Current Budget Projection	FY24 Intitial to Current Change	FY24 Intitial to Current %Change
MCD - MH	\$ 207,190,112	\$ 205,920,614	\$ (1,269,497)	-0.61%
MCD - SUD	\$ 8,537,141	\$ 8,214,263	\$ (322,877)	-3.78%
HMP - MH	\$ 17,316,375	\$ 18,609,865	\$ 1,293,489	7.47%
HMP - SUD	\$ 10,968,901	\$ 11,309,010	\$ 340,109	3.10%
Autism	\$ 43,425,979	\$ 42,191,810	\$ (1,234,169)	-2.84%
Waiver	\$ 54,702,000	\$ 51,223,233	\$ (3,478,767)	-6.36%
CCBHC MCD Base Cap	\$ 28,080,950	\$ 23,389,790	\$ (4,691,160)	-16.71%
CCBHC HMP Base Cap	\$ 8,816,400	\$ 6,046,769	\$ (2,769,631)	-31.41%
CCBHC MCD Supplemental	\$ 33,570,184	\$ 34,550,918	\$ 980,734	2.92%
CCBHC HMP Supplemental	\$ 9,710,407	\$ 9,822,186	\$ 111,778	1.15%
LRE Admin	\$ 13,922,556	\$ 13,922,556	\$ -	0.00%
ISF	\$ -	\$ -	\$ -	-
IPA	\$ 4,392,823	\$ 4,216,208	\$ (176,614)	-4.02%
<b>Total Region</b>	<b>\$ 440,633,827</b>	<b>\$ 429,417,221</b>	<b>\$ (11,216,606)</b>	<b>-2.55%</b>

CMHSPs Breakdown (Net of CCBHC)				
	FY24 Initial Budget Projection	FY24 Current Budget Projection	FY24 Intitial to Current Change	
<b>MCD - MH</b>				
OnPoint	\$ 17,284,157	\$ 16,776,431	\$ (507,727)	
Healthwest	\$ 40,828,236	\$ 40,390,763	\$ (437,473)	
Network180	\$ 106,864,576	\$ 108,049,327	\$ 1,184,751	
Ottawa	\$ 28,947,323	\$ 27,944,016	\$ (1,003,307)	
West Michigan	\$ 13,265,820	\$ 12,760,078	\$ (505,742)	
<b>Total MCD - MH</b>	<b>\$ 207,190,112</b>	<b>\$ 205,920,614</b>	<b>\$ (1,269,497)</b>	
<b>MCD - SUD</b>				
OnPoint	\$ 710,483	\$ 674,559	\$ (35,925)	
Healthwest	\$ 1,744,259	\$ 1,672,714	\$ (71,544)	
Network180	\$ 4,367,218	\$ 4,270,951	\$ (96,267)	
Ottawa	\$ 1,139,694	\$ 1,059,110	\$ (80,584)	
West Michigan	\$ 575,487	\$ 536,929	\$ (38,557)	
<b>Total MCD - SUD</b>	<b>\$ 8,537,141</b>	<b>\$ 8,214,263</b>	<b>\$ (322,877)</b>	
<b>HMP - MH</b>				
OnPoint	\$ 1,562,109	\$ 1,367,129	\$ (194,980)	
Healthwest	\$ 3,506,666	\$ 3,381,199	\$ (125,467)	
Network180	\$ 8,581,263	\$ 10,248,560	\$ 1,667,297	
Ottawa	\$ 2,937,540	\$ 2,898,449	\$ (39,091)	
West Michigan	\$ 728,797	\$ 714,528	\$ (14,269)	
<b>Total HMP - MH</b>	<b>\$ 17,316,375</b>	<b>\$ 18,609,865</b>	<b>\$ 1,293,489</b>	
<b>HMP - SUD</b>				
OnPoint	\$ 992,950	\$ 841,565	\$ (151,385)	
Healthwest	\$ 2,304,644	\$ 2,124,794	\$ (179,850)	
Network180	\$ 5,420,235	\$ 6,204,638	\$ 784,403	
Ottawa	\$ 1,776,945	\$ 1,682,842	\$ (94,103)	
West Michigan	\$ 474,127	\$ 455,171	\$ (18,956)	
<b>Total HMP - SUD</b>	<b>\$ 10,968,901</b>	<b>\$ 11,309,010</b>	<b>\$ 340,109</b>	
<b>Autism</b>				
OnPoint	\$ 3,869,583	\$ 3,718,579	\$ (151,003)	
Healthwest	\$ 8,901,598	\$ 8,654,822	\$ (246,776)	
Network180	\$ 21,692,163	\$ 21,193,524	\$ (498,639)	
Ottawa	\$ 6,399,627	\$ 6,127,589	\$ (272,038)	
West Michigan	\$ 2,563,008	\$ 2,497,295	\$ (65,713)	
<b>Total Autism</b>	<b>\$ 43,425,979</b>	<b>\$ 42,191,810</b>	<b>\$ (1,234,169)</b>	
<b>Waiver</b>				
OnPoint	\$ 6,882,345	\$ 6,036,111	\$ (846,234)	
Healthwest	\$ 13,617,785	\$ 12,246,721	\$ (1,371,064)	
Network180	\$ 21,763,578	\$ 21,074,254	\$ (689,323)	
Ottawa	\$ 8,734,882	\$ 8,516,784	\$ (218,098)	
West Michigan	\$ 3,703,410	\$ 3,349,363	\$ (354,047)	
<b>Total Waiver</b>	<b>\$ 54,702,000</b>	<b>\$ 51,223,233</b>	<b>\$ (3,478,767)</b>	

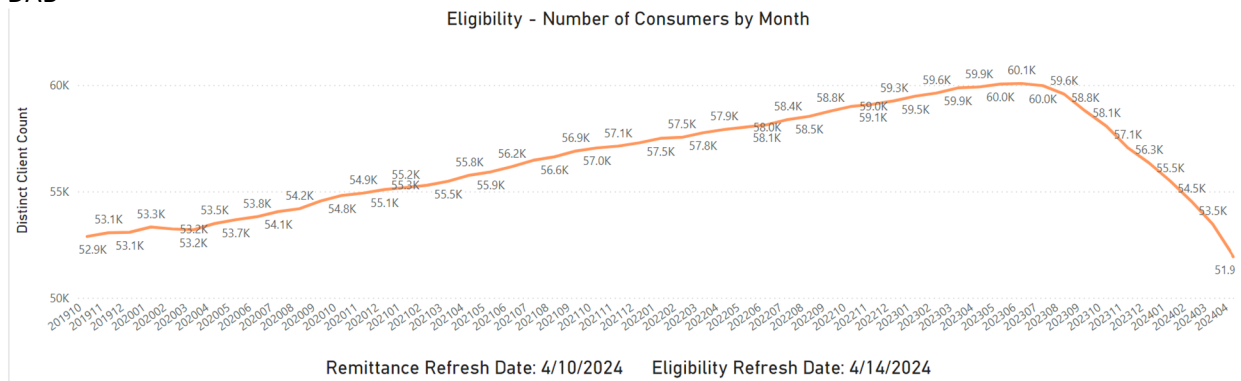
Average PMPM			
	FY24 Initial Budget Projection	FY24 Current Budget Projection	FY24 Intitial to Current Change
OnPoint	\$ 129.34	\$ 131.78	\$ 2.44
Healthwest	\$ 126.38	\$ 132.97	\$ 6.60
Network180	\$ 108.60	\$ 108.31	\$ (0.29)
Ottawa	\$ 107.13	\$ 108.91	\$ 1.78
West Michigan	\$ 131.36	\$ 132.85	\$ 1.50
<b>Total CMHSPs</b>	<b>\$ 115.07</b>	<b>\$ 116.75</b>	<b>\$ 1.68</b>

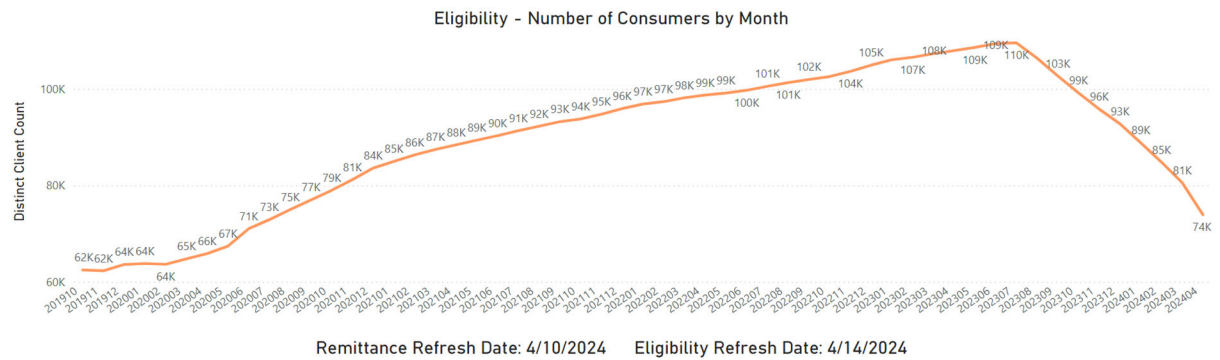
Member Month Projection			
	FY24 Initial Budget Projection	FY24 Current Budget Projection	FY24 Intitial to Current Change
OnPoint	305,898	292,996	(12,902)
Healthwest	702,952	674,634	(28,318)
Network180	1,864,549	1,793,355	(71,194)
Ottawa	545,720	521,143	(24,577)
West Michigan	250,952	240,616	(10,336)
<b>Total Member Months</b>	<b>3,670,069</b>	<b>3,522,743</b>	<b>(147,326)</b>

- Financial Data/Charts** – The chart below shows regional eligibility trends by population. The number of Medicaid eligible individuals in our region determines the amount of revenue the LRE receives each month. Data is shown for October 2019 – March 2024. The LRE also receives payments for other individuals who are not listed on these charts but are eligible for behavioral health services (i.e. individuals enrolled and eligible for the Habilitation Supports Waiver (HSW) program). Due to the end of the PHE, Medicaid eligibility redeterminations resumed in July 2023. The state’s actuary expects most disenrollments to occur August 2023 – July 2024. The most recent projections indicate the region has 52,413 DAB enrollees, 77,088 HMP enrollees, and 152,622 enrollees.

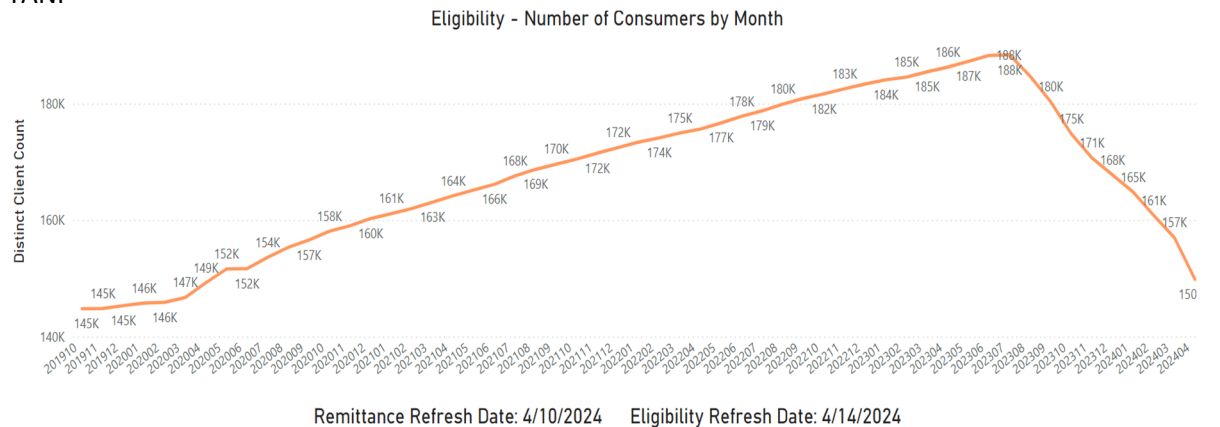
**DAB**



**HMP**



**TANF**



- **Legal Expenses** – Below, this chart contains legal expenses of the LRE that have been billed to the LRE to date for FY2022 through FY2024.

LAKESHORE REGIONAL ENTITY LEGAL EXPENSES REPORT March 31, 2024		
4/30/2022	BYLAWS/OPERATING AGREEMENT	5,700.00
7/28/2022	BYLAWS/OPERATING AGREEMENT	6,500.00
<b>BYLAWS/OPERATING AGREEMENT TOTAL</b>		<b>12,200.00</b>
11/30/2021	CCHBC SUPPORT	812.50
<b>CCHBC SUPPORT TOTAL</b>		<b>812.50</b>
2/11/2022	GENERAL/OTHER	325.00
1/16/2023	GENERAL/OTHER	10,000.00
2/3/2023	GENERAL/OTHER	250.00
12/20/2023	GENERAL/OTHER	5,000.00
1/31/2024	GENERAL/OTHER	5,000.00
2/29/2024	GENERAL/OTHER	5,000.00
<b>GENERAL/OTHER TOTAL</b>		<b>25,575.00</b>
10/31/2021	HEALTHWEST LIGATION	5,368.74
3/31/2022	HEALTHWEST LIGATION	2,016.00
4/30/2022	HEALTHWEST LIGATION	9,388.80
6/24/2022	HEALTHWEST LIGATION	13,782.40
3/31/2023	HEALTHWEST LIGATION	6,992.00
4/30/2023	HEALTHWEST LIGATION	3,728.00
11/30/2023	HEALTHWEST LIGATION	281.60
1/31/2024	HEALTHWEST LIGATION	105.60
<b>HEALTHWEST LIGATION TOTAL</b>		<b>41,663.14</b>
10/31/2021	MANAGED CARE/MDHHS CONTRACT	17,058.00
11/30/2021	MANAGED CARE/MDHHS CONTRACT	9,992.00
12/31/2021	MANAGED CARE/MDHHS CONTRACT	5,202.00
1/25/2022	MANAGED CARE/MDHHS CONTRACT	23,501.31
2/17/2022	MANAGED CARE/MDHHS CONTRACT	9,280.00
2/17/2022	MANAGED CARE/MDHHS CONTRACT	17,125.00
2/28/2022	MANAGED CARE/MDHHS CONTRACT	20,051.20
2/28/2022	MANAGED CARE/MDHHS CONTRACT	6,312.50
3/31/2022	MANAGED CARE/MDHHS CONTRACT	4,032.00
4/11/2022	MANAGED CARE/MDHHS CONTRACT	421.50
6/24/2022	MANAGED CARE/MDHHS CONTRACT	2,863.57
7/25/2022	MANAGED CARE/MDHHS CONTRACT	6,788.23
8/22/2022	MANAGED CARE/MDHHS CONTRACT	4,437.50
8/25/2022	MANAGED CARE/MDHHS CONTRACT	16,806.40
9/29/2022	MANAGED CARE/MDHHS CONTRACT	20,832.00
9/30/2022	MANAGED CARE/MDHHS CONTRACT	23,104.65
10/31/2022	MANAGED CARE/MDHHS CONTRACT	9,307.00
11/30/2022	MANAGED CARE/MDHHS CONTRACT	33,792.00
11/30/2022	EARLY PAYMENT DISCOUNT	(5,068.80)
12/31/2022	MANAGED CARE/MDHHS CONTRACT	31,494.10
1/31/2023	MANAGED CARE/MDHHS CONTRACT	25,683.40
2/28/2023	MANAGED CARE/MDHHS CONTRACT	7,472.60
3/31/2023	MANAGED CARE/MDHHS CONTRACT	3,371.20
4/30/2023	MANAGED CARE/MDHHS CONTRACT	16,563.20
5/31/2023	MANAGED CARE/MDHHS CONTRACT	5,928.00
6/30/2023	MANAGED CARE/MDHHS CONTRACT	12,537.60
7/31/2023	MANAGED CARE/MDHHS CONTRACT	7,768.80
7/31/2023	EARLY PAYMENT DISCOUNT	(3,321.04)
8/31/2023	MANAGED CARE/MDHHS CONTRACT	1,302.40
9/30/2023	MANAGED CARE/MDHHS CONTRACT	2,810.40
10/31/2023	MANAGED CARE/MDHHS CONTRACT	3,547.20
11/30/2023	MANAGED CARE/MDHHS CONTRACT	563.20
12/31/2023	MANAGED CARE/MDHHS CONTRACT	5,000.00
<b>MANAGED CARE/MDHHS CONTRACT TOTAL</b>		<b>346,559.12</b>
2/28/2023	NETWORK 180 LITIGATION	2,674.00
3/31/2023	NETWORK 180 LITIGATION	29,167.33
4/30/2023	NETWORK 180 LITIGATION	105.60
5/31/2023	NETWORK 180 LITIGATION	2,283.20
6/30/2023	NETWORK 180 LITIGATION	13,840.80
7/31/2023	NETWORK 180 LITIGATION	3,665.60
8/31/2023	NETWORK 180 LITIGATION	1,137.60
<b>NETWORK 180 LITIGATION TOTAL</b>		<b>52,874.13</b>
<b>GRAND TOTAL</b>		<b>\$ 479,683.89</b>



**BOARD ACTION REQUEST**

**Subject: March 2024 Disbursements**

Meeting Date: April 24, 2024

**RECOMMENDED MOTION:**

To approve the March 2024 disbursements of \$45,036,020 as presented.

**SUMMARY OF REQUEST/INFORMATION:**

<b><u>Disbursements:</u></b>	
Allegan County CMH	\$3,281,537.34
Healthwest	\$7,569,635.99
Network 180	\$24,507,434.96
Ottawa County CMH	\$5,810,104.98
West Michigan CMH	\$2,769,452.00
SUD Prevention Expenses	\$393,439.36
SUD Public Act 2 (PA2)	\$209,291.46
Administrative Expenses	\$495,123.91
<b>Total:</b>	<b>\$45,036,020.00</b>

98.44% of Disbursements were paid to Members and SUD Prevention Services.

*I affirm that all payments identified in the monthly summary above are for previously appropriated amounts.*

**STAFF:** *Stacia Chick*

**DATE:** *4/17/2024*



**Statement of Activities - Actual vs. Budget**  
**Fiscal Year 2023/2024**

As of Date: 2/29/24

Change in Net Assets	Year Ending	2/29/2024		
	9/30/2024	Budget to Date	Actual	Actual to Budget Variance
	FY24 Budget <i>Amendment 2</i>			
<b>Operating Revenues</b>				
Medicaid, HSW, SED, & Children's Waiver	277,612,682	115,671,951	118,339,255	2,667,304
Autism Revenue	42,278,498	17,616,041	19,341,404	1,725,363
DHS Incentive	471,247	196,353	-	(196,353)
Healthy Michigan	29,016,501	12,090,209	15,258,532	3,168,323
Performance Bonus Incentive	2,819,234	1,174,681	-	(1,174,681)
CCBHC Quality Bonus Incentive	1,745,775	727,406	-	(727,406)
Hospital Rate Adjuster (HRA)	12,576,256	5,240,107	-	(5,240,107)
Member Local Contribution to State Medicaid	1,007,548	419,812	419,812	(0)
Medicaid CCBHC Base Capitation	23,389,790	9,745,746	8,213,208	(1,532,538)
Healthy Michigan CCBHC Base Capitation	6,046,769	2,519,487	2,159,158	(360,329)
Medicaid CCBHC Supplemental Revenue	34,550,918	14,396,216	6,639,733	(7,756,482)
Healthy MI CCBHC Supplemental Revenue	9,822,186	4,092,577	3,701,418	(391,160)
MDHHS Grants	13,907,354	5,794,731	2,148,988	(3,645,743)
PA 2 Liquor Tax	3,748,366	1,561,819	408,343	(1,153,476)
Non-MDHHS Grants: DFC	141,701	59,042	58,261	(781)
Interest Earnings	640,059	266,691	143,833	(122,858)
Miscellaneous Revenue	5,500	2,292	730	(1,561)
<b>Total Operating Revenues</b>	<b>459,780,382</b>	<b>191,575,159</b>	<b>176,832,673</b>	<b>(14,742,486)</b>
<b>Expenditures</b>				
Salaries and Fringes	5,012,275	2,088,448	1,722,930	(365,519)
Office and Supplies Expense	273,326	113,886	66,970	(46,916)
Contractual and Consulting Expenses	809,861	337,442	196,464	(140,978)
Managed Care Information System (PCE)	305,200	127,167	123,000	(4,167)
Legal Expense	217,500	90,625	24,498	(66,127)
Utilities/Conferences/Mileage/Misc Exps	7,304,395	3,043,498	119,993	(2,923,505)
Grants - MDHHS & Non-MDHHS	545,800	227,417	110,396	(117,020)
Hospital Rate Adjuster / Taxes	16,783,457	6,993,107	1,228,606	(5,764,501)
Prevention Expenses - Grant & PA2	3,807,966	1,586,653	1,295,545	(291,108)
Member Payments - Medicaid/HMP	338,564,315	141,068,465	145,262,708	4,194,244
Member Payments - CCBHC Capitation	29,436,558	12,265,233	10,372,367	(1,892,866)
Member Payments - CCBHC Supplemental	44,373,103	18,488,793	12,733,572	(5,755,221)
Member Payments - PA2 Treatment	1,956,008	815,003	281,711	(533,292)
Member Payments - Grants	9,383,070	3,909,613	2,746,546	(1,163,067)
Local Contribution to State Medicaid	1,007,548	419,812	419,812	(0)
<b>Total Expenditures</b>	<b>459,780,382</b>	<b>191,575,159</b>	<b>176,705,116</b>	<b>(14,870,043)</b>
<b>Total Change in Net Assets</b>	<b>(0)</b>	<b>(0)</b>	<b>127,557</b>	<b>127,557</b>



**Statement of Activities  
Budget to Actual Variance Report**

**For the Period ending February 29, 2024**

**As of Date: 2/29/24**

**Operating Revenues**

Medicaid/HSW/SED/CWP	Less capitated Medicaid funding being utilized for CCBHC Medicaid than expected. Revenue expected to decline throughout FY24 due to declining Medicaid enrollments. Will be monitored for budget adjustments.
Autism Revenue	Revenue expected to decline throughout FY24 due to declining Medicaid enrollments. Will be monitored for budget adjustments.
DHS Incentive	This revenue is received quarterly beginning in April.
Healthy Michigan	Less capitated Healthy Michigan funding being utilized for CCBHC Healthy MI than expected. Revenue expected to decline throughout FY24 due to declining Medicaid enrollments. Will be monitored for budget adjustments.
Performance Bonus Incentive	Revenue is received after the end of the fiscal year if health plan performance metrics are met.
CCBHC Quality Bonus	Revenue is received after the end of the fiscal year if health plan performance metrics are met.
Hospital Rate Adjuster	Revenue is received quarterly. First quarter payment was delayed until April by MDHHS.
Member Local Match Revenue	N/A - Closely aligned with the current budget projections.
Medicaid CCBHC Base Capitation	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
Healthy MI CCBHC Base Capitation	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
Medicaid CCBHC Supplemental Revenue	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
Healthy MI CCBHC Supplemental Revenue	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
MDHHS Grants	MDHHS grant reimbursements are typically 45 days in arrears and SUD grant payments are received quarterly.
PA 2 Liquor Tax	PA2 revenues are received quarterly, after the Department of Treasury issues payments to the counties. Initial payments are expected in the 2nd quarter.
Non-MDHHS Grants: DFC	Grant funds are requested when provider expenditures are reported. All funds are projected to be spent this fiscal year.
Interest Revenue	Will be monitored for adjustments during the next amendment
Miscellaneous Revenue	Revenue may be received throughout the year, but the budgeted amount is not guaranteed.

**Expenditures**

Salaries and Fringes	Currently under budget. Position vacancies exist and will be monitored for possible future budget amend.
Office and Supplies	Currently under budget. Will monitor for possible future budget amend.
Contractual/Consulting	Currently under budget. Will monitor for possible future budget amend.
Managed Care Info Sys	N/A - Closely aligned with the current budget projections.
Legal Expense	Currently under budget. Will monitor for possible future budget amend.
Utilities/Conf/Mileage/Misc	This line item includes the LRE's contingency fund and will be monitored for adjustments during the next amendment.
Grants - MDHHS & Non-MDHHS	Most of these payments are billed to the LRE and paid by MDHHS 45 days in arrears. In addition, as noted above, some grants are being paid quarterly.
HRA/Taxes	IPA & HRA taxes are paid quarterly. First quarter HRA payment was delayed until April.
Prevention Exps - Grant/PA2	MDHHS SUD grant payments are made quarterly. Some dollars remain unallocated, pending provider requests.
Member Med/HMP Payments	Revenue expected to decline throughout FY24 due to declining Medicaid enrollments, resulting in lower payment to Members. Will be monitored for budget adjustments.
Member CCBHC Capitation	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
Member CCBHC Supplemental	Lower than expected CCBHC daily visits. Working with CCBHCs to revise their daily visit projections and revise revenue projections if necessary.
Member PA2 Tx Payments	Billings against this line item typically occur after other grant funding is applied. Budgets were based on projections and will be monitored for amendments.
Member Grant Payments	Most of these payments are billed to the LRE and paid by MDHHS 45 days in arrears. In addition, as noted above, some grants are being paid quarterly.
Local Contribution to State Medicaid	N/A - Closely aligned with the current budget projections.



Lakeshore Regional Entity Combined Monthly FSR Summary  
 FY 2024  
 February 2024 Reporting Month  
 Reporting Date: 4/24/24

ACTUAL:	HealthWest	Network180	OnPoint	Ottawa	West Michigan	LRE	Total
Total Distributed Medicaid/HMP Revenue	29,125,376	74,275,315	12,101,201	20,620,850	8,919,179	2,328,457	147,370,378
Total Capitated Expense	25,520,186	76,053,228	10,767,900	17,588,711	8,655,402	2,328,457	140,913,885
Actual Surplus (Deficit)	3,605,190	(1,777,913)	1,333,301	3,032,139	263,777	-	6,456,493
% Variance	12.38%	-2.39%	11.02%	14.70%	2.96%	0.00%	
<b>Information regarding Actual</b> <b>(Threshold: Surplus of 5% and deficit of 1%)</b>	Expenses are less than anticipated, however, with our January 1st rate increase we are seeing them start to go up and align closer.	Network180 is experiencing increase demands in autism and specialized residential services. Additionally, revenue projections fell for the first six months of the year. Even with the increased revenue rates, in order to serve individuals as required.	Surplus is due to higher than projected services being categorized as CCBHC. Further, OnPoint has intentionally held on certain expenditures and adding of new positions due to declining revenue projections. We expect this surplus to continue to reduce in future months, with the steep decline in enrollment.	2024 planned 6% payroll increase pending union negotiations.	Less than threshold for explanation	Less than threshold for explanation	
<b>PROJECTION:</b> <b>LRE Revenue Projections as of:</b> <b>March Revised for Final Rates</b>	HealthWest	Network180	OnPoint	Ottawa	West Michigan	LRE	Total
Medicaid	54,310,197	133,394,532	23,487,100	37,519,909	16,646,371	14,167,217	279,525,327
Autism	8,654,822	21,193,524	3,718,579	6,127,589	2,497,295	1,918,946	44,110,756
Healthy Michigan	5,505,993	16,453,198	2,208,693	4,581,291	1,169,699	2,052,602	31,971,476
Total Projected Medicaid/HMP Revenue	68,471,012	171,041,254	29,414,373	48,228,790	20,313,365	18,138,765	355,607,559
Expense Projections							
Medicaid	57,648,939	139,593,788	-	37,262,555	17,622,315	14,167,217	266,294,814
Autism	202,492	26,337,161	-	6,372,925	1,238,034	1,918,946	36,069,557
Healthy Michigan	8,722,966	20,997,909	-	4,874,597	1,933,765	2,052,602	38,581,839
Total Capitated Expense Projections	66,574,397	186,928,858	-	48,510,076	20,794,114	18,138,765	340,946,211
Projected Surplus (Deficit)	1,896,615	(15,887,604)	29,414,373	(281,286)	(480,749)	-	14,661,349
% Variance	2.77%	-9.29%	100.00%	-0.58%	-2.37%	0.00%	
<b>Information regarding Projections</b> <b>(Threshold: Surplus of 5% and deficit of 1%)</b>	Less than threshold for explanation	Network180 is experiencing increase demands in autism and specialized residential services. Additionally, revenue projections fell for the first six months of the year. Even with the increased revenue rates, in order to serve individuals as required.	No expense projections or variance explanation provided by OnPoint to LRE.	Less than threshold for explanation	Medicaid projections have increased due to rebasing of Medicaid capitation rates. Even with the rate rebasing the funding falls short as enrollment continues to trend downward.	Less than threshold for explanation	
<b>PROPOSED SPENDING PLAN:</b> Submitted to the LRE as of:	HealthWest	Network180	OnPoint	Ottawa	West Michigan	LRE	Total
Medicaid/HMP Revenue	11/1/2023	9/22/2023	11/4/2023	11/6/2023	11/3/2023		
Total Budgeted Medicaid/HMP Revenue	69,625,245	166,119,203	30,401,517	48,979,645	20,794,581	13,922,556	349,842,747
Total Budgeted Capitated Expense	64,957,020	173,091,232	30,393,469	48,900,000	20,794,114	13,922,556	352,058,391
Budgeted Surplus (Deficit)	4,668,225	(6,972,029)	8,048	79,645	467	-	(2,215,644)
% Variance	6.70%	-4.20%	0.03%	0.16%	0.00%	0.00%	
<b>Information regarding Spending Plans</b> <b>(Threshold: Surplus of 5% and deficit of 1%)</b>	HealthWest is in the process to complete a budget amendment. This will decrease slightly in the next two months.	Network180 has significant unmet service need in autism and specialized residential services and a very fragile provider network. In order to maintain a provider network to provide required services, rate increases from 3-5% are necessary. Additionally, revenue projections continue to fall monthly as enrollment trends downward.	Less than threshold for explanation	Less than threshold for explanation	Less than threshold for explanation	Less than threshold for explanation	
<b>Variance between Projected and Proposed Spending Plan</b>	(2,771,610)	(8,915,575)	29,406,325	(360,931)	(481,216)	-	16,876,993
% Variance	-3.98%	-5.37%	96.73%	-0.74%	-2.31%	0.00%	
<b>Explanation of variances between Projected and Proposed Spending Plan</b> <b>(Threshold: Surplus of 5% and deficit of 1%)</b>	HealthWest is in the process to complete a budget amendment. This will improve slightly in the next two months.	Network180 is experiencing increase demands in autism and specialized residential services. In order to serve individuals as required, expenses will exceed distributed revenue.	No expense projections or variance explanation provided by OnPoint to LRE.	Less than threshold for explanation	Medicaid projections have increased due to rebasing of Medicaid capitation rates. Even with the rate rebasing the funding falls short as enrollment continues to trend downward.	Less than threshold for explanation	

**Lakeshore Regional Entity Combined Monthly FSR Summary**  
**FY 2024**  
**February 2024 Reporting Month**  
**Reporting Date: 4/24/24**

CCBHC ACTIVITY							
	HealthWest	Network180	OnPoint	Ottawa	West Michigan	LRE	Total
<b>ACTUAL:</b>							
<b>Total Distributed Medicaid/HMP CCBHC Revenue</b>	8,981,661	5,939,835	4,284,535	3,091,697	4,642,084	608,212	27,525,303
<b>Total CCBHC Expense</b>	9,824,187	9,658,382	3,433,427	2,254,398	4,642,084	36,682	29,849,160
<b>Actual CCBHC Surplus (Deficit)</b>	(842,526)	(3,718,546)	851,108	837,299	-	571,530	(2,323,857)
<b>% Variance</b>	-9.38%	-62.60%	19.86%	27.08%	0.00%	93.97%	
<b>Information regarding CCBHC Actual (Threshold: Surplus of 5% and deficit of 1%)</b>	<p>Service expenses are coming in higher than anticipated. Many Medicaid provided services are shifting to CCBHC.</p> <p>LRE Note: Deficit is the responsibility of the CCBHC and not the PIHP.</p>	<p>As Network180 continues to implement CCBHC, daily visits have not ramped up during the first few months, but we expect this to stabilize over the year.</p> <p>LRE Note: Deficit is the responsibility of the CCBHC and not the PIHP.</p>	<p>No variance explanation provided by OnPoint to LRE.</p> <p>LRE Note: Surplus is retained by the CCBHC and not the PIHP.</p>	<p>2024 planned 8% payroll increase pending union negotiations.</p> <p>LRE Note: Surplus is retained by the CCBHC and not the PIHP.</p>	<p>Less than threshold for explanation</p>	<p>Suprlus is used to cover PIHP administration on traditional capitation administration expenses.</p>	
<b>PROJECTION:</b>							
<b>Total Projected Medicaid/HMP CCBHC Revenue</b>	21,235,992	23,193,915	9,197,728	8,528,576	11,653,450	1,459,710	75,243,431
<b>Total CCBHC Expense Projections</b>	23,578,049	26,080,116	-	7,890,392	11,653,450	88,037	69,290,044
<b>Projected CCBHC Surplus (Deficit)</b>	(2,342,057)	(2,886,200)	9,197,728	638,184	-	1,371,672	5,953,387
<b>% Variance</b>	-11.03%	-12.44%	100.00%	7.48%	0.00%	93.97%	
<b>Information regarding CCBHC Projections (Threshold: Surplus of 5% and deficit of 1%)</b>	<p>Expenses are coming in higher than anticipated. HealthWest will monitor closely and work with Clinical Leadership.</p> <p>LRE Note: Deficit is the responsibility of the CCBHC and not the PIHP.</p>	<p>As Network180 continues to implement CCBHC, daily visits have not ramped up during the first few months, but we expect this to stabilize over the year.</p> <p>LRE Note: Deficit is the responsibility of the CCBHC and not the PIHP.</p>	<p>OnPoint has provided more daily visits than projected, resulting in higher revenue and surplus.</p> <p>LRE Note: Surplus is retained by the CCBHC and not the PIHP.</p>	<p>CCBHC service activity is slightly behind, anticipate the surplus will continue to decline going forward.</p> <p>LRE Note: Surplus is retained by the CCBHC and not the PIHP.</p>	<p>Less than threshold for explanation</p>	<p>Suprlus is used to cover PIHP administration on traditional capitation administration expenses.</p>	
<b>PROPOSED SPENDING PLAN:</b>							
Submitted to the LRE as of:	11/1/2023	9/22/2023	11/4/2023	11/6/2023	11/3/2023		
<b>Total Budgeted Medicaid/HMP CCBHC Revenue</b>	17,933,215	33,799,561	8,263,139	8,528,576	11,653,450	1,459,710	81,637,650
<b>Total Budgeted CCBHC Expense</b>	22,785,723	26,966,686	6,422,864	8,440,000	11,653,450	88,037	76,356,740
<b>Budgeted Surplus (Deficit)</b>	(4,852,508)	6,832,895	1,840,275	88,576	-	1,371,672	5,280,911
<b>% Variance</b>	-27.06%	20.22%	22.27%	1.04%	0.00%	93.97%	
<b>Information regarding CCBHC Spending Plans (Threshold: Surplus of 5% and deficit of 1%)</b>	<p>Expenses are continue to come in higher than anticipated. HealthWest will monitor closely and work with Clinical Leadership.</p>	<p>No variance explanation provided by N180 to LRE.</p>	<p>No variance explanation provided by OnPoint to LRE.</p>	<p>Less than threshold for explanation</p>	<p>Less than threshold for explanation</p>	<p>Suprlus is used to cover PIHP administration on traditional capitation administration expenses.</p>	
<b>Variance between CCBHC Projected and Proposed Spending Plan</b>	2,510,451	(9,719,095)	7,357,453	549,608	-	-	672,476
<b>% Variance</b>	14.00%	-28.76%	89.04%	6.44%	0.00%	0.00%	
<b>Explanation of variances between CCBHC Projected and Proposed Spending Plan (Threshold: Surplus of 5% and deficit of 1%)</b>	<p>HealthWest is in the process to complete a budget amendment. This will improve slightly in the next two months.</p>	<p>As Network180 continues to implement CCBHC, daily visits have not ramped up during the first few months, but we expect this to stabilize over the year.</p>		<p>CCBHC service activity is slightly behind, anticipate the surplus will continue to decline going forward.</p>	<p>Less than threshold for explanation</p>	<p>Less than threshold for explanation</p>	



**CEO Report**  
**April 24th, 2024**

Every day is a good day, but today is a Great Day to be a part of the Lakeshore Regional Entity!

**PIHP/REGIONAL Update**

1. **LRE Updates**

- Currently the LRE has one position posted on the website. The LRE is in the process of interviewing candidates for the Autism Manager position. At the time of the report being drafted LRE was in the final stages of the interview process with high hopes for a potential candidate in this group.

2. **Regional Updates**

- Funding Revenue Streams/HAB Waiver Slot/Behavioral Health Homes/Opioid Health Homes
- HAB Waiver  
*Update:* LRE enrolled 15 HSW packets in April. This includes the second 10 new slots provided by MSHN along with 5 that were vacant due to death or disenrollments. The breakdown is as follows: 9 from Network 180, 1 from Ottawa, 4 from HealthWest, and 1 from West Michigan. The packets are submitted based on individuals with the greatest needs.
- Autism  
*Update:* At time of the CEO report, MDHHS had not communicated back any information regarding next steps with Network180's unresolved issues around Autism. Network180 has stated that it is estimated to cost approximately \$7 million to implement a CAP to eliminate the waitlist for ABA services in Kent County. The LRE has concerns that MDHHS is not going to provide any further funding to Network180 as this is a required Medicaid service not additional or above contract requirements.
- PIHP Contract with the CMHSP  
*Update:* LRE received communication from MDHHS that strongly recommends that LRE mirror the MDHHS/PIHP as the boilerplate for the PIHP/CMH contract. This has been communicated with the CMHs. The LRE is moving forward utilizing this direction from MDHHS as well as reviewing policies/procedures to provide a complete packet to the CMHs for review. Next meeting is scheduled

for May 3, 2024. If the PIHP and CMHs are unable to come to a consensus at that time, then this matter will be elevated to the LRE Board Chair.

- Network 180 Funding request – Recovery Plan
  - On July 24, 2023, Network180 requested \$25 million in additional funding from the region. The LRE Operations Council met and although they recognized the possible need, they did not support a regional planned funding adjustment. Network180 requested a formal denial letter from LRE with the intent to address the issue in Lansing and follow up with LRE in the future.
  - On January 15, 2024, a second request came from Network180 for \$25 million in additional funding above their Per Member Per Month. Several meetings had been scheduled with the Operations Council, however conflicts in schedules did not allow this meeting to take place until March 20, 2024.
  - Network 180 provided a recovery plan to the Operations Council for the March 20, 2024 meeting.

### RECOVERY PLAN DRAFT REVENUE INCREASES

MDHHS Rate Adjustment Medicaid / HMP	Accelerated Implementation of CCBHC PPS I	LRE contribution from the ISF/ Medicaid Saving Autism / Other
\$6,700,000 Increase Target April 2024	\$3,000,000 Increase Target April till June 2024	\$8,000,000 Increase Target October 2023 till September 2024

## RECOVERY PLAN DRAFT EXPENSE DECREASES

Temporary Shift cost of the Office of Recipient Rights to General Fund	Move Residents in Out of County Placements back to Kent	Service Efficiencies in Programs
\$(300,000) Decrease	\$(1,000,000) Decrease	\$(1,000,000) Decrease
Target FY 2024	Target April till September 2024	Target April till September 2024

- Upon review of the above charts, the MDHHS projected revenue rate adjustment increase is greater than the draft rates we were given by MDHHS during the meeting on 3/21/2024. Also, the details behind the other information are unclear. LRE will continue to work with Network180 on a containment plan as well as with the other CMHSPs to establish if this is a regional issue or Network180 specific. LRE will continue to update the Board as further information is received.

### *Update:*

- Network180 does have at least one DCO onboard in their CCBHC implementation which will enable them to begin to bring revenue in for the PPS1 portion of the CCBHC daily visits.
- An updated recovery plan has not been received from Network180 indicating modifications to the MDHHS rate adjustment column, or any updates regarding the out of county placements, or service efficiencies.

## **STATE OF MICHIGAN/STATEWIDE ACTIVITIES**

### **Legislative Update:**

CEO and COO have been meeting with Legislators across the region. The following are completed:

- Rep. Glanville
- Rep. Skaggs
- Rep. Meerman
- Rep. Snyder

- Rep. VanWoerkom
- Sen. Brinks
- Sen. Bumstead
- Sen. Victory

The LRE would like to highlight the following bills as action items:

State Legislation:	Federal Legislation
<ul style="list-style-type: none"> <li>• SB 27</li> <li>• HB 4576 &amp; 4577, 4579 &amp; 4580, 4707, 4213</li> <li>• Keep MI Kids Tobacco Free Alliance Bill Package (SB 649 &amp; 650, SB 651 &amp; 652, SB 648, SB 647, SB 654, SB 653)</li> </ul>	<ul style="list-style-type: none"> <li>• S. 2993, 1323, 2860</li> <li>• HR 2891</li> <li>• S. 3579 &amp; HR 6982 (GRIT Act)</li> </ul>

Details can be found in the full Legislative Update Report

## **OTHER**

- **Board Works Videos Available Online:**

The CMHA BoardWorks program was developed to assist Board members in fulfilling their obligations as CMH leaders, directors of policy, and advocates for those they serve. Traditionally, these modules have been offered at conferences and through DVDs. CMHA now offers updated modules available for viewing on their website. The following BoardWorks modules are currently available with more to come! Click [here](#) to view.

- Foundations – Intended Beneficiary Command – **May**
- Foundations – Public Policy – **June**
- Management – Systems - **July**
- Current and Future Funding for CMHSPs and PIHPs (formerly Budgets) - **August**
- Leadership – Participatory Governance and Ethical Implications (formerly Character) - **September**

### **Upcoming Save the Date**

Walk-a-Mile  
September 12, 2024  
Lansing, MI

Report by Mary Marlatt-Dumas, CEO, Lakeshore Regional Entity



# Lakeshore Regional Entity’s Legislative Update – 04/16/2024



This document contains a summary and status of bills in the House and Senate, and other political and noteworthy happenings that pertain to both mental and behavioral health, and substance use disorder in Michigan and the United States.

Prepared by Melanie Misiuk, SEDW & 1915(i)SPA Specialist & Stephanie VanDerKooi, Chief Operating Officer

Highlight = new updates

Highlight = old bill, no longer active

Highlight = Suggestions for Action & Supported/ Opposed by CMHAM (Community Mental Health Association of Michigan)

## STATE LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	SB 27	Legislation that would require insurers to provide coverage for mental health and substance abuse disorder services on the same level as that of coverage for physical illness. Federal law requires mental health coverage to be equal to physical illness. The bill would require insurance coverage for mental health conditions, including substance use disorders, to be no more restrictive than insurance coverage for other medical conditions.  <b>*Supported by CMHAM</b>	Sarah Anthony	1/18/23 – Introduced to the Senate; Referred to Committee on Health Policy 10/12/23 – Reported favorably with substitute; Referred to committee oof the whole with substitute 10/18/23 – Passed the Senate, Referred to House Committee on Insurance and Financial Services
***	HB 4576 & 4577	Reintroduced versions of Sen. Shirkey’s legislation (SB 597 & 598) from 2022. Legislation to create an integrated plan to merge the administration and provision of Medicaid physical health care services and behavioral health specialty services.  <b>*Opposed by CMHAM</b>	Curtis VanderWall	5/16/23 – Introduced, read, and referred to Committee on Health Policy
	HB 4320 & 4387	<i>Provides for penalties for coercing a vulnerable adult into providing sexually explicit visual material; and provides sentencing guidelines for crime of coercing vulnerable adult into providing sexually explicit visual material</i>	Sharon MacDonell	3/22/23 – Introduced; referred to Committee on Families, Children and Seniors 6/27/23 – Referred to a second reading 10/5/23 – Read a second time; substitute adopted; placed on third reading 10/17/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety 11/7/23 – Reported favorably without amendment; Referred to Committee of the Whole

**BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH**

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
				12/31/23 – Signed by the Governor, assigned PA 275'23 & 276'23
	HB 4081	Establishes a minimum number of school counselors to be employed by a school district, intermediate school district or public school academy	Felicia Brabec	2/14/23 – Introduced; referred to Committee on Health Policy
	HB 4523	Modifies eligibility for mental health court for those with violent offenses	Kara Hope	5/4/23 – Introduced; referred to Committee on Judiciary 6/7/23 - reported with recommendation with substitute (H-1), referred to a second reading 10/31/23 – read a third time, passed given immediate effect 11/1/23 - Referred to Committee on Civil Rights, Judiciary, and Public Safety 2/22/24 – Passed the House, Returned to the Senate
	HB 4579, 4580, & 4131	Requires reimbursement rate for telehealth visits to be the same as office visits <b>*Supported by CMHAM</b>	Natalie Price, Felicia Brabec	5/16/23 – Introduced; referred to Committee on Health Policy 10/31/23 – Referred to a second reading 11/14/23 – Referred to Committee on Health Policy 3/14/24 – Referred to Committee of the Whole
	HB 4649	Require height-adjustable, adult-sized changing tables in public restrooms	Lori Stone	5/23/23 – Introduced; referred to Committee on Regulatory Reform
	HB 4745-4749	Bills related to access to assisted outpatient treatment, outpatient treatment for misdemeanor offenders, hospital evaluations, mediation, and competency exams	Brian BeGole, Donni Steele, Tom Kuhn, Mark Tisdell	6/14/23 – Introduced; referred to Committee on Health Policy
	HB 4171	Modifies the priority of a professional guardian.	Curtis VanderWall	3/2/23 – Introduced; Read; referred to Committee on Judiciary
<b>***</b>	HB 4909-12 & 5047	HB 4909-12 would institute long-awaited reforms to Michigan’s guardianship statutes, and HB 5047 would create the Office of State Guardian. <b>Supported by the Department of Attorney General, Disability Rights Michigan, the Michigan Elder Justice Initiative, AARP, Alzheimer's Association, and The Michigan Long Term Care Ombudsman Program.</b>	Kelly Breen	7/18/23 – Introduced; Referred to Committee on Judiciary 10/11/23 – Reported with recommendation with substitute (H-1); Referred to a second reading 10/24/23 – Read a third time 10/25/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety
	HB 5184	Legislation would remove the social work test as a criterion for social work licensure and replace it	Felicia Brabec	10/19/23 – Introduced, Read a first time, Referred

## BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	& 5185	with the strengthening of the supervised clinical experience requirements already required for licensure.  *Supported by CMHAM		to Committee on Health Policy 11/9/23 – CMHAM (Bob Sheehan) provided testimony in favor of the bills.
	HB 5276-5280	A bill to create the office of mental health and suicide prevention in the Michigan veterans affairs agency and provide for its powers and duties; and to provide for the powers and duties of certain state governmental officers and entities.	Jennifer Conlin	10/26/23 – Introduced, read a first time, referred to Committee on Military, Veterans, and Homeland Security.
	SB 227	Would amend the childcare licensing Act to allow for emergency physical management/therapeutic de-escalation (certain levels of restraint & seclusion) in certain children’s residential settings.	Dan Lauwers Kevin Hertel Stephanie Chang	3/22/23 – Introduced 10/12/23-11/8/23 – Read several times, voted on, vote reconsidered, enrollment vacated 1/10/24 – Returned to Senate 1/11/24 – Returned to the House 1/18/24 – defeated Roll Call
	HB 4693	Would allow for remote participation for a CMH & PIHP meeting	John Fitzgerald	5/30/23 – Introduced, read, referred to Committee on Local Government and Municipal Finance
	HB 5343-5347	The “Advancing MI Health” Package seeks to increase access to care by cutting red tape encountered by many mental and behavioral health practitioners in applying to join insurance network panels. Additionally, the package assists the State of Michigan in monitoring health insurers’ compliance with federal laws mandating coverage parity for mental and behavioral health services.	Noah Arbit Felicia Brabec Betsy Coffia Denise Mentzer	11/14/23 – Introduced, read, referred to Committee on Health Policy.
	HB 5371 & 5372	The department must develop a prospective payment system under the medical assistance program for funding certified community behavioral health clinics. The payment system must fully comply with all federal payment methodologies. The department must submit to the federal Centers for Medicare Medicaid Services any approval request necessary for a Medicaid 1115 waiver.	Felicia Brabec Phil Green	11/14/23 – Introduced, read, referred to Committee on Health Policy.
	SB 625&626	These bills would address Limited Licensed Psychologists and the ability or inability to diagnose Autism.	Michael Webber Sam Singh	11/1/23 - Introduced, referred to Committee on Health Policy.
	SB 806	A bill to amend the current law to require a psychological evaluation on a minor in a hospital emergency room due to a mental health episode within three hours of being notified.	Roger Hauck	4/9/24 – Introduced, Referred to Committee on Health Policy

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	SB 649 & 650 SB 651 & 652 SB 648 SB 647 SB 654 SB 653	<b>Protect MI Kids Bill Package:</b> Keep MI Kids Tobacco Free Alliance is working on a legislative package that will address the areas of Tobacco Retail Licensure, Taxation on Vaping Products & Parity, Ending the Sale of Flavored Tobacco, and Preemption Removal (Restoration of local authority to regulate tobacco control at the municipal level)	Keep MI Kids Tobacco Free Alliance Sam Singh John Cherry Stephanie Chang Paul Wojno Sue Shink Mary Cavanaugh	<a href="https://d31hzhk6di2h5.cloudfront.net">Preemption one pager (d31hzhk6di2h5.cloudfront.net)</a>  10/17/23 – Anticipating Senator Singh will be introducing the bill package this week. 11/9/23 – Introduced, Referred to Committee on Regulatory Affairs
	HB 4049	A bill to require CRA to consider all applications by spouses of government officials for licensed marijuana establishments, and to not deny them based on their spouse’s government affiliation.	Pat Outman	1/31/23 - Introduced and referred to Committee on Regulatory Reform
	HB 4061	Kratom Consumer Protection Act: A bill to regulate the distribution, sale, and manufacture of kratom products	Lori Stone	2/1/23 - Introduced and referred to Committee on Regulatory Reform
	<i>SB 133</i>	<i>A bill to provide for the review and prevention of deaths from drug overdose; allow for creation of overdose fatality review teams and power and duties of those teams; and for other purposes</i>	<i>Sean McCann</i>	<i>3/2/23-Introduced and referred to Committee on Health Policy 10/5/23 – Reported and referred by committee of the whole favorably with substitute; passed roll call 10/10/23 – Referred to Committee on Health Policy 11/2/23 – Referred to second reading 11/8/23 - read a second time, placed on immediate passage, passed; given immediate effect, returned to Senate 11/9/23 - ORDERED ENROLLED 12/6/23 - PRESENTED TO GOVERNOR 12/13/23 – Approved by Governor 12/29/23 – Assigned PA 0313’23</i>
	HB 4430	A bill to require all marijuana sales to provide safety information at the point of sale. Safety info includes: Safe storage, proper disposal, poison control information and the following statements: (A) To avoid dangerous drug interactions, it is recommended that you consult with your prescriber or pharmacist before consuming this product. (B) Exercise care if you consume this product with alcohol. (C) Consuming this product with a controlled substance could increase the risk of side effects or overdose. (D) Do not operate heavy machinery or perform other dangerous tasks under the influence of this product unless you know how this product affects you.	Veronica Paiz	4/19/23-introduced and referred to Committee on Regulatory Reform
	<i>SB 180/179</i>	<i>Allow the Cannabis Regulatory Agency (CRA) to enter into an agreement with an</i>	<i>Roger Hauck</i>	<i>6/14/23-Passed Senate and received in House</i>



**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		<i>Indian tribe pertaining to marijuana related business if the agreement and the Indian tribe met certain conditions. It prohibits the CRA from employing any individual with pecuniary interests in tribal marijuana; and specifies that sales of marijuana by a tribal marijuana business on Indian lands would be exempt from the State's 10% excise tax on marijuana. Require the Department of Treasury to deposit money into the Marihuana Regulation Fund that was collected under an Indian Tribe Agreement.</i>		<i>Committee on Regulatory Reform 10/5/23 – Reported with recommendation without amendment; referred to second reading; place on third reading; passed by ¾ vote; returned to Senate 10/10/23 – Ordered enrolled 10/24/23 – Signed by Governor and given immediate effect, assigned PA 0166'23</i>
	<i>SB 141/HB 4201</i>	<i>The bill would amend the Michigan Liquor Control Code to eliminate a January 1, 2026, sunset on provisions that allow a qualified licensee to fill and sell qualified containers with alcoholic liquor for the purpose of off-the-premises consumption and to deliver alcoholic liquor to a consumer in the State if the qualified licensee meets certain conditions.</i>	<i>Mallory McMorrow &amp; Kristian Grant</i>	<i>6/13/23 - Passed Senate, referred for second reading in House Committee on Regulatory Reform. 5/3/23 - Passed House, referred to Senate Committee on Regulatory Affairs 7/19/23-Assigned PA 0095'23 with immediate effect</i>
	HB 4833	The bill would amend the public health code to eliminate the requirement for acute care and behavioral health hospitals to carry a SUD Service Program license. The issue was identified through a LARA workgroup revealing duplicate licensure in some circumstances. The endeavor is to clean up the duplication and reduce burden on LARA as well as our members.	Ranjeev Puri	6/22/23 - referred to Committee on Health Policy
	HB 4913	A bill to criminalize all possession or distribution of Xylazine under the Controlled Substances Act.	Kelly Breen	7/18/23-Introduced and referred to Committee on Judiciary
	<i>SB 247</i>	<i>The bill would allow the holder of a special license issued by the MLCC to sell and serve alcoholic liquor on the premises of a licensed public area of a facility used for intercollegiate athletic events on dates and times other than the dates and times provided to the MLCC. A licensee that had been issued a catering permit could deliver and serve alcoholic liquor at a private event on the premises on dates and times other than the dates and times provided to the MLCC.</i>	<i>Sean McCann</i>	<i>7/19/23-Assigned PA 0096'23 with immediate effect</i>
	HB 4734/4735 /4736	A bill package to require all school districts to have an opioid antagonist in each school building, and at least one trained staff in each building; require local health departments to provide antagonist and training to schools & staff.	David Prestin John Fitzgerald Matt Koleszar	6/13/23-Introduced and referred to Committee on Education
	HB 4322	The bill would allow individuals who are 19 years of age or older to be employed at or volunteer for marijuana establishments, with the direct supervision of a person 21+.	Kevin Coleman	6/28/23-Read a third time in House, substitute adopted, and postponed temporarily
	HB 4600	The bill would prohibit the CRA from denying an application based on spouses of applicants holding positions in certain governmental bodies	Mike McFall	5/18/23-Introduced and referred to Committee on Regulatory Reform 9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HB 4601	The bill to include within a Cannabis Processor License the ability to extract THC concentrates and package for sale on the premises; allow for transfer of products amongst other licensed establishments both on the same location and to other locations; prohibit the denial of a license based upon the background check of an applicant's spouse.	Mike McFall	reading 5/23/23-Introduced and referred to Committee on Regulatory Reform 9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third reading
***	HB 4707	The bill would amend the Insurance Code to require health insurers in Michigan to provide coverage for medically necessary treatment of a mental health or substance abuse disorder. The bill would set requirements for coverage of out-of-network services and emergency services, as well as requirements related to prior authorization, utilization review, and the determination of level of care for insured individuals. The bill states that it would not apply to any entity or contracting provider that performs utilization review or utilization management functions on an insurer's behalf. <b>***Supported by CMHAM.</b>	Felicia Brabec	6/7/23 – Introduced, read, and referred to Committee on Insurance and Financial Services 6/21/23 – Reported with recommendation without amendment, referred to a second reading 10/24/23 – Read a second time, placed on third reading 10/25/23 – Removed from the House Agenda  <b>CMHAM REQUEST FOR ACTION: We are asking you to reach out to your legislators (House &amp; Senate) and the Governor and URGE them to support HB 4707 and encourage their leadership to bring the bill up for a vote in the fall legislative session. HB 4707 will go a long way in improving people's lives across the state.</b>
	HB 4213	The bill would require telemedicine coverage for SUD and behavioral health services  <b>*Supported by CMHAM</b>	Christine Morse	3/8/23 – Introduced; Referred to Committee on Health Policy 10/31/23 – Referred to second reading 11/9/23 - read a second time, placed on immediate passage, passed; given immediate effect 11/14/23 – Referred to Committee on Health Policy
	HB 4690	Secular Recovery Bill: This bill would amend the Code of Criminal Procedure to require a court that orders a defendant to attend a court-ordered substance use disorder recovery program as part of a sentence or deferred proceeding to ask on the record whether the defendant has an objection to a religious element of that program. If the defendant objects to a religious element, the court would have to identify a secular treatment program that the defendant confirms on the record eliminates their religious objection. The court would have to allow the defendant to	Betsy Coffia	5/30/23 – Introduced, Read, and referred to the Committee on Judiciary

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		participate in a secular treatment program online if one is not available locally		
	S 542	A bill to allow government agencies who are providing opioid antagonists free of charge the choice of formulation, dosage, and route of administration for opioid antagonists	Kevin Hertel	10/3/23-Introduced and referred to Committee on Health Policy
	HB 5078	A bill to allow a dispensing prescriber or pharmacist may dispense an opioid antagonist to any of the following: (a) An individual patient at risk of experiencing an opioid-related overdose. (b) A family member, friend, or other individual in a position to assist an individual at risk of experiencing an opioid-related overdose.	Carrie Rheingans	10/4/23-Introduced and referred to Committee on Health Policy 3/6/24 – Referred to a second reading
	HB 5063 & 5064	A bill to protect the use of Medical Marijuana-A qualifying patient who has been issued and possesses a registry card must not be denied any right or privilege and it allows students to be treated with medical marijuana and CBD products during school; a public school or nonpublic school shall do all of the following: (a) Authorize a qualified guardian of a qualified pupil to administer a marihuana-infused product or CBD product to the qualified pupil on the school premises, on a school bus, or at a school-sponsored activity in a location off of the school premises at which the use of a marihuana-infused product or CBD product is not prohibited. (b) Authorize a designated staff member to administer a marihuana-infused product or CBD product to a qualified pupil as described in subsection (2). (c) Authorize a qualified pupil to use or self-administer a marihuana-infused product or CBD product under the direct supervision of a designated staff member as described in subsection	Dylan Wegela Jimmie Wilson Jr.	9/28/23-Introduced and referred to Committee on Regulatory Reform
	S 466	<i>The bill would amend Part 126 (Smoking in Public Places) of the Public Health Code to allow a cigar bar that met specified conditions and whose smoking ban exemption had lapsed to requalify for the exemption if the owner or operator of the bar filed an affidavit certifying those conditions.</i>	Kristen McDonald Rivet	9/6/23 – Introduced, Referred to Committee on Regulatory Affairs 10/10/23 – Referred to Committee on the Whole 10/24/23 – Referred to Committee on Regulatory Reform 11/9/23 – rule suspended, motion to discharge committee approval, read a second time, read a third time, passed; given immediate effect, returned to Senate, given immediate effect, ordered enrolled 12/6/23 – presented to the Governor 12/13/23 – Approved by Governor 12/29/23 – Assigned PA 0318'23 with immediate effect

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HB 5198	An act to prohibit the selling, giving, or furnishing of tobacco products, vapor products, and alternative nicotine products to minors; to prohibit the purchase, possession, or use of tobacco products, vapor products, and alternative nicotine products by minors; Disallow all references to cake, candy, cupcake, pastry, pie, or any variation thereof in any advertising. Disallow reference to any food product marketed to children-cereal, ice cream, juice, Disallow references to any character/personality/celebrity, video game, mythical creature or school supply. To regulate the retail sale of tobacco products, vapor products, alternative nicotine products, and liquid nicotine containers; To prohibit certain practices that relate to the distribution and sale of certain vapor products; To authorize the seizure, forfeiture, and destruction of certain vapor products; To prescribe penalties and civil sanctions; and to prescribe the powers and duties of certain state and local agencies and departments-Compliance checks	Alabas Farhat	10/24/23- Introduced and referred to Committee on Regulatory Reform
	S 57 & 58	Makes nitrous canisters “drug paraphernalia” Bills to ban the sale of nitrous canisters if there is reason to believe they will be used to introduce an illicit substance into the body. Provides for legal penalties for anyone who sells canisters the same as penalties for selling drug paraphernalia	Stephanie Chang Joseph Bellino	11/18/23 - Passed Senate 2/21/24 - Received, read 2x in House 3/12/24 – Approved by Governor and assigned with immediate effect PA 0018’24
	HB 5554 & 5555	Bills would weaken Michigan’s smoke-free air protections by allowing hookah lounges to acquire liquor, food and/or restaurant licenses.	Mike Harris Alabas Farhat	3/12/24 – Introduced, read a first time, referred to Committee on Regulatory Reform
	HB 5529	Amend the Michigan Regulation and Taxation of Marihuana Act to allow the Cannabis Regulatory Agency (CRA) to do both of the following: <ul style="list-style-type: none"> <li>Establish and operate a marijuana reference laboratory.</li> <li>Collect, transport and possess marijuana for the purpose of testing and conducting research in support of CRA investigations and the development and optimization of testing methods performed through the CRA reference laboratory.</li> </ul>	Tyrone Carter	3/12/24 - Committee on Regulatory Reform & referred for second reading
	S 807	Bill to allow individuals who are 19 years of age or older to be employed by or volunteer for marihuana establishments.	Sean McCann	4/9/24 – Introduced, referred to committee on Regulatory Affairs

## FEDERAL LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	S. 2993	<p>Ensuring Excellence in Mental Health Act: The legislation would amend the Social Security Act and the Public Health Service Act to permanently authorize Certified Community Behavioral Health Clinics (CCBHCs) – it establishes a federal definition of CCBHCs into law and create the infrastructure needed to achieve the long-term vision of the model.</p> <p style="background-color: #90EE90;">*Supported by CMHAM</p>	Debbie Stabenow	09/28/2023 - Read twice and referred to the Committee on Finance.

BILLS & REGULATIONS PERTAINING TO SUD				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	H.Res. 39	A res. Requesting that all illicit fentanyl and illicit fentanyl-related substances should be permanently placed in Schedule I; and for other purposes.	Neal Dunn	1/17/23-Introduced and referred to Committee on Energy and Commerce & Committee on the Judiciary 1/27/23 - Referred to the House Subcommittee on Health.
	N/A – Proposed Rule	There is a proposed rule by the Substance Abuse and Mental Health Services Administration (SAMHSA) that would permanently allow providers to prescribe buprenorphine specifically for opioid use disorder treatment without an in-person visit in an opioid treatment program, but this is still in the proposal phase with comments due on Feb. 14, 2023.	SAMHSA	12/16/22 – Proposed 2/14/23 – Public Comment Due  <a href="#">Federal Register :: Medications for the Treatment of Opioid Use Disorder</a>
	HR 901	To require the Food and Drug Administration to prioritize enforcement of disposable electronic nicotine delivery system products.	Sheila Cherfilus-McCormick	2/09/2023 - Referred to the House Committee on Energy and Commerce. 2/17/23 - Referred to the House Subcommittee on Health.
	S. 464	A bill to amend the Internal Revenue Code of 1986 to deny the deduction for advertising and promotional expenses for tobacco products and electronic nicotine delivery systems.	Jeanne Shaheen	2/16/2023 - Read twice and referred to the Committee on Finance.

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 610	Marijuana 1-3 Act of 2023: A bill to provide for the rescheduling of marijuana into schedule III of the Controlled Substances Act.	Gregory Steube	1/27/23 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary
	HR 467	HALT Fentanyl Act (S.1141): This bill places fentanyl-related substances as a class into schedule I of the Controlled Substances Act; the bill establishes a new, alternative registration process for schedule I research that is funded by the Department of Health and Human Services or the Department of Veterans Affairs or that is conducted under an investigative new drug exemption from the Food and Drug Administration.	H. Morgan Griffith/Bill Cassidy 5	03/24/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 27 – 19 (S)-3/30/23-Read twice and referred to the Committee on the Judiciary. 5/17/2023 - Placed on Union Calendar #47 5/25/2023 – House adopted the amendment 5/30/2023 – Received in Senate and referred to the committee on the Judiciary.
	HR 1291	Stopping Overdoses of Fentanyl Analogues Act: To amend the Controlled Substances Act to list fentanyl-related substances as schedule I controlled substances.	Scott Fitzgerald	03/01/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 3/10/23 - Referred to the Subcommittee on Health.
	HR 1839	Combating Illicit Xylazine Act (S.993): To prohibit certain uses of xylazine.	Jimmy Panetta/ Catherine Cortez Masto 7	03/28/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary (S)-3/28/23-Read twice and referred to the Committee on the Judiciary 4/7/23 – Referred to the Subcommittee on Health
	S.983	Overcoming Prevalent Inadequacies in Overdose Information Data Sets Act or “OPIOIDS” Act: The Attorney General may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness.	Rick Scott	03/27/2023 Read twice and referred to the committee on the Judiciary

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 1734	TRANQ Research Act: To require coordinated National Institute of Standards and Technology science and research activities regarding illicit drugs containing xylazine, novel synthetic opioids, and other substances of concern, and for other purposes.	Mike Collins	03/29/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 36 – 0 5/15/23 - Passed in House, Received in Senate 6/26/23 – Passed in Senate 6/26/23 – Message on Senate action sent to the House 12/4/23 - Mr. Lucas moved that the House suspend the rules and agree to the Senate amendment; DEBATE - The House proceeded with forty minutes of debate on the motion to suspend the rules and agree to the Senate amendment to H.R. 1734; On motion that the House suspend the rules and agree to the Senate amendment Agreed to by voice vote; Motion to reconsider laid on the table Agreed to without objection. 12/14/23 – Presented to the President 12/19/23 – Signed by the President, became Public Law No.: 118-23.
	S 606	To require the Food and Drug Administration to revoke the approval of one opioid pain medication for each new opioid pain medication approved.	Joe Manchin	03/01/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	HR 2867 & S 1235	Bruce’s Law: Re-introduced as new bills (formerly HR 9221 in 2022). To establish an awareness campaign related to the lethality of fentanyl and fentanyl-contaminated drugs, to establish a Federal Interagency Work Group on Fentanyl Contamination of Drugs, and to provide community-based coalition enhancement grants to mitigate the effects of drug use.	David Trone & Lisa Murkowski	04/20/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions. 04/25/2023 - Referred to the House Committee on Energy and Commerce 04/28/2023 – Referred to the Subcommittee on Health
***	HR 2891 & S 1323	SAFE Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes. ***The LRE opposes this bill, as it indirectly supports the federal legalization of marijuana.	David Joyce & Jeff Merkley	5/3/23 - Referred to Subcommittee on Economic Opportunity 5/11/23 - Referred to Committee on Banking, Housing, and Urban Affairs

**BILLS & REGULATIONS PERTAINING TO SUD**

<b>Priority</b>	<b>BILL #</b>	<b>SUMMARY</b>	<b>SPONSOR(s)</b>	<b>STATUS/ACTION DATE</b>
***	S 2860	SafER Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes.	Jeff Merkley	9/20/2023 - Read twice and referred to the committee on Banking, Housing, and Urban Affairs. 9/28/2023 - Placed on Senate Legislative Calendar under General Orders. Calendar No. 215. 12/6/23 - Committee on Banking, Housing, and Urban Affairs. Hearings held.
	HR 3375	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids, and for other purposes.	Ann Kuster	05/16/2023-Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 5/19/2023 – Referred to the Subcommittee on Health
	HR 4106	To amend the 21st Century Cures Act to expressly authorize the use of certain grants to implement substance use disorder and overdose prevention activities with respect to fentanyl and xylazine test strips.	Jasmine Crockett	06/14/2023 - Referred to the House Committee on Energy and Commerce 06/16/2023 - Referred to the Subcommittee on Health.
	S. 1785	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids; i.e, enhanced surveillance, collection of overdose data, increase fentanyl detection and screening abilities, and other purposes.	Ed. Markey	05/31/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	HR 3563	STRIP Act: To amend the Controlled Substances Act to exempt from punishment the possession, sale, or purchase of fentanyl drug testing equipment.	Jasmine Crockett	05/22/2023 - Referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce 05/26/2023 - Referred to the Subcommittee on Health.



**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	S. 1080	Cooper Davis Act – This legislation would require Big Tech to take a more proactive role against drug dealing on their social media platforms. It will amend the Controlled Substances Act to require electronic communication service providers and remote computing services to report to the Attorney General certain controlled substances violations. <i>(Any and all electronic communications programs/applications will be required to submit reports of communications that include the sale of any counterfeit or illicit substance within a reasonable time; failure to do so will result in penalties.)</i>	Roger Marshall	3/30/2023 - Read twice and referred to the Committee on the Judiciary. 7/13/2023 - Committee on the Judiciary. Ordered to be reported with an amendment in the nature of a substitute favorably. 09/05/2023 - Committee on the Judiciary. Reported by Senator Durbin with an amendment in the nature of a substitute. Without written report, Placed on Senate Legislative Calendar under General Orders. Calendar No. 200.
	HR 3684	To direct the Secretary of Defense to establish a grant program for using psychedelic substances to treat certain conditions, and for other purposes.	Dan Crenshaw	5/25/2023-Referred to the House Committee on Armed Services.
	HR 4531 & S 2433	Support for Patients and Communities Reauthorization Act: The bill was originally passed in 2018. This bill would reauthorize certain programs under the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, and for other purposes. <i>(Reauthorize Block Grant Funding for current programs, and expansion of MAT Studies for OUD, FASD support, and others.)</i>	Brett Guthrie Bill Cassidy	7/11/2023 – Introduced in House, referred to House Energy and Commerce Committee 7/19/23 - Ordered to be Reported (Amended) by the Yeas and Nays: 49 – 0 07/20/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions 9/28/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 29-3. 12/12/23 - Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended Agreed to by the Yeas and Nays: (2/3 required): 386 - 37
	HR 3521	Saving America’s Future by Educating Kids Act of 2023: To direct the Secretary of Education to develop and disseminate an evidence-based curriculum for kindergarten through grade 12 on the dangers of vaping and misusing opioids, synthetic drugs, and related substances	Alexander Mooney	5/18/2023 - Referred to the House Committee on Education and the Workforce.

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 4105 & S 1475	To amend the Controlled Substances Act to prohibit certain acts related to fentanyl, analogues of fentanyl, and counterfeit substances, Drug Enforcement Administration shall establish and implement an operation and response plan to address counterfeit fentanyl or methamphetamine substances that includes specific ways that prevention and education efforts stop the use of counterfeit pills, how ongoing efforts are effective in increasing education and prevention, how they are tailored to youth and teen access, and how those programs can be tailored, adjusted, or improved to better address the flow of counterfeit fentanyl or methamphetamine; and for other purposes.	Ken Buck Chuck Grassley	05/09/2023 - Read twice and referred to the Committee on the Judiciary 06/16/2023 - Referred to the Subcommittee on Health
	HR 3570	To provide public awareness and outreach regarding the dangers of fentanyl, to expand the grants authorized under the Comprehensive Opioid Abuse Grant Program, to expand treatment and recovery services for people with opioid addictions, and to increase and to provide enhanced penalties for certain offenses involving counterfeit pills.	Sheila Jackson Lee	05/26/2023 - Referred to the Subcommittee on Health.
	HR 4582	Protecting Kids from Fentanyl Act of 2023: To amend the Public Health Service Act to authorize the use of Preventive Health and Health Services Block Grants to purchase life-saving opioid antagonists for schools and to provide related training and education to students and teachers, and for other purposes.	Doug Lamborn	07/12/2023 - Referred to the House Committee on Energy and Commerce. 07/14/2023 Referred to the Subcommittee on Health.
	S 2699	Opioid RADAR Act: To combat the fentanyl crisis by: 1. Secretary of Health and Human Services may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness of data on fatal and nonfatal opioid-related overdoses. 2. Director of the Centers for Disease Control and Prevention, in collaboration with the Attorney General or their designee, shall carry out a pilot program to award grants on a competitive basis to municipal wastewater treatment facilities in order to conduct wastewater analysis to determine the prevalence of certain illicit substances, such as fentanyl or xylazine, 3. The Secretary may award grants to eligible entities to provide for the administration, at public and private elementary and secondary schools under the jurisdiction of the eligible entity, of drugs and devices for emergency treatment of known or suspected opioid overdose.	Rick Scott	07/27/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	S 2484	To ensure that States do not prohibit an individual from obtaining, possessing, distributing, or using life-saving drug testing technologies, and for other purposes. <i>(More than 12 states currently have laws prohibiting the purchase, use, or possession of fentanyl testing strips)</i>	Cory Booker	07/25/2023 - Read twice and referred to the Committee on the Judiciary

## BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5040	To amend the Intelligence Reform and Terrorism Prevention Act of 2004 to limit the consideration of marihuana use when making a security clearance or employment suitability determination, and for other purposes.	Jamie Raskin	07/27/2023 - Referred to the House Committee on Oversight and Accountability 9/20/2023 - Committee Consideration and Mark-up Session Held, Ordered to be Reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30 - 14.
	S 2650	To establish a Commission on the Federal Regulation of Cannabis to study a prompt and plausible pathway to the Federal regulation of cannabis, and for other purposes	John Hickenlooper	07/27/2023 - Read twice and referred to the Committee on the Judiciary 9/20/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30- 14
	HR 5625	To establish education partnership programs between public schools and public health agencies to prevent the misuse and overdose of synthetic opioids by youth	Suzanne Bonamici	09/21/2023 - Referred to the Committee on Education and the Workforce, and in addition to the Committee on Energy and Commerce
	HR 5506	HANDS Act: To amend titles XVIII and XIX of the Social Security Act and title 10, United States Code, to provide no-cost coverage for the preventive distribution of opioid overdose reversal drugs.	Brittany Pettersen	09/14/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Armed Services
	HR 5420	Workplace Overdose Reversal Kits to Save Lives Act: To require the Secretary of Labor to issue guidance and regulations regarding opioid overdose reversal medication and employee training via OSHA	Bonnie Watson-Coleman	9/12/2023 - Referred to the House Committee on Education and the Workforce
	HR 5323	Stop Pot Act: To amend title 23, United States Code, to establish a national requirement against the use of marijuana for recreational purposes.	Chuck Edwards	9/05/2023 Referred to the Subcommittee on Highways and Transit
	HR 5715 & S2929	Tobacco Tax Equity Act of 2023: This bill increases the excise tax on cigarettes and cigars and equalizes tax rates among all other tobacco products. It also imposes a tax on nicotine for use in vaping.	Raja Krishnamoorthi	9/26/2023 Referred to the House Committee on Ways and Means 09/26/2023 Read twice and referred to the Committee on Finance
	HR 5652	Stop Overdose in Schools Act: To amend the 21st Century Cures Act to require funds to be set aside for opioid reversal agent administration training in schools, and for other purposes.	Newhouse	9/21/2023 Referred to the House Committee on Energy and Commerce

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5801	Preventing Overdoses with Test Strips Act: To ensure that expenses relating to the acquisition or use of devices for use in the detection of fentanyl, xylazine, and other emerging adulterant substances, including test strips, are allowable expenses under any grant, contract, or cooperative agreement entered into by the Substance Abuse and Mental Health Services Administration under this Act.	Josh Gottheimer	9/28/2023 Referred to the House Committee on Energy and Commerce. 9/28/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2919	ALERT Communities Act : Administrator of the Drug Enforcement Administration, shall develop and make publicly available research and marketing frameworks for developing, improving, and evaluating test strip technology for detecting fentanyl and other dangerous substances; The Secretary of Health and Human Services shall— conduct a study on the impact of the availability, accessibility, and usage of drug checking supplies, including test strips, on frequency of overdose, overdose deaths, and engagement in substance use disorder treatment and report the findings to Congress.	Margaret Wood Hassan	9/26/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2946	School Access to Naloxone Act of 2023: To amend the Public Health Service Act to provide funding for trained school personnel to administer drugs and devices for emergency treatment of known or suspected opioid overdose	Jeff Merkley	9/27/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S 3070	Youth Prevention and Recovery Reauthorization Act: A bill to reauthorize funding to hospitals, local governments, and other eligible entities to increase access to opioid addiction medications for adolescents and young adults who have been diagnosed with opioid use disorder, improve local awareness among youth of the risks associated with fentanyl, and train healthcare providers, families, and school personnel on the best practices to support children and adolescents with opioid use disorder. Reauthorize the Youth Prevention and Recovery Initiative, which has provided three-year grants to youth-focused entities for carrying out substance use disorder treatment, prevention, and recovery support services. The legislation also expanded an existing youth substance use disorder program to include services for young adults as well as children and adolescents.	Gary Peters	10/18/23 – Introduced; Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	HR 3721	United States Postal Service Shipping Equity Act: This bill authorizes the mailing of alcoholic beverages by certain entities in accordance with the delivery requirements otherwise applicable to a privately carried shipment; directs the U.S. Postal Service (USPS) to prescribe regulations (1) requiring direct delivery to a duly authorized agent at a postal facility or to the addressee, who must be at least 21 years of age and present a valid, government-issued photo identification at the time of delivery; (2) prohibiting such alcoholic beverages from being for resale or any other commercial purpose; and (3) requiring such entity to certify that the mailing is not in violation of applicable laws or regulations and to provide other information as directed by the USPS.	Newhouse	5/25/2023 Referred to the Committee on Oversight and Accountability, and in addition to the Committee on the Judiciary

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	S. 3006	SAFE in Recovery Act: To create a Task Force amongst government agency stakeholders to create and ensure a streamlined process for families to receive comprehensive wraparound services if a member is undergoing SUD Treatment	Ed Markey	10/03/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	HR 6038 & S. 3108	PROTECT Act - Preventing Opportunities for Teen E-Cigarette and Tobacco Addiction Act: bill to amend the Public Health Service Act to provide for and fund a Reducing Youth Use of E-Cigarettes Initiative- 1. Research on products, patterns of use, initiation of cigarette use following vaping, demographic patterns of use, means of access, media and exposure to advertising, marketing, reasons for use, extent of dependency, quitting resources for youth, nicotine levels and biomarkers of exposure. 2. Collaboration to develop medical and treatment guidance on youth nicotine interventions and identifying promising strategies to prevent and reduce use, develop new cessation methods and quit support 3. Increasing access to treatment, and identifying effective messaging.	Debbie Wasserman-Schultz	10/25/2023 - Referred to the House Committee on Energy and Commerce 11/3/23 – Referred to the Committee on Health
	HR 6251	HERO Act: To establish a grant program to provide schools with opioid overdose reversal drugs, to direct schools receiving Federal funds to report to certain Federal information systems any distribution of an opioid overdose reversal drug	Adam Schiff	11/06/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on Education and the Workforce
	HR 6243	To direct the Secretary of Labor to issue an occupational safety and health standard that requires employers to keep opioid overdose reversal drugs onsite and develop and implement training plans to respond to drug overdose emergencies and to amend the Omnibus Crime Control and Safe Streets Act of 1968 to expand the grants authorized under the Comprehensive Opioid Abuse Grant Program.	Ruben Gallego	11/06/2023 - Referred to the Committee on Education and the Workforce, and in addition to the Committee on the Judiciary
	HR 6144	Combatting Fentanyl Poisonings Act of 2023: To award grants to State and local law enforcement agencies to assist such agencies in planning, designing, establishing, or operating locally based, proactive programs to combat the sale, marketing, or distribution of controlled substances	Mike Garcia	11/01/2023 - Referred to the House Committee on the Judiciary
	HR 5905 & S 3039	Federal Kratom Consumer Protection Act : To require Congress to hold at least one hearing regarding Kratom and potential dangers, benefits, contribution to drug overdose deaths, and other topics. Within 2 years, the FDA must establish safety guidelines and testing as compatible with other adult dietary supplements.	Mark Pocan	10/25/2023 - Referred to the House Committee on Energy and Commerce
	HR 5592	Validating Independence for State Initiatives on Organic Natural Substances Act of 2023: To prohibit the use of Federal funds from preventing a State from implementing their own laws with respect to psilocybin.	Robert Garcia	09/20/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary

**BILLS & REGULATIONS PERTAINING TO SUD**

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 6028	States Reform Act of 2023: A bill to remove Cannabis from the list of Scheduled Substances, defer to states on prohibition, and decriminalize cannabis offenses.	Nancy Mace	10/25/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committees on the Judiciary, Natural Resources, Agriculture, Transportation and Infrastructure, Armed Services, Ways and Means, Small Business, Veterans' Affairs, Oversight and Accountability, Education and the Workforce, aviation, coast guard and maritime transportation, Highways and transit, railroads, pipelines, and hazardous materials, and Foreign Affairs
	HR 5601	MORE Act: A bill that removes marijuana from the list of scheduled substances under the Controlled Substances Act and eliminates criminal penalties for an individual who manufactures, distributes, or possesses marijuana. Also 1. requires the Bureau of Labor Statistics to regularly publish demographic data on cannabis business owners and employees, 2. establishes a trust fund to support various programs and services for individuals and businesses in communities impacted by the war on drugs, 3. imposes an excise tax on cannabis products produced in or imported into the United States and an occupational tax on cannabis production facilities and export warehouses, 4. makes Small Business Administration loans and services available to entities that are cannabis-related legitimate businesses or service providers, 5. prohibits the denial of federal public benefits to a person on the basis of certain cannabis-related conduct or convictions, 6. prohibits the denial of benefits and protections under immigration laws on the basis of an event (e.g., conduct or conviction) relating to possession or use of cannabis that is no longer prohibited under the bill, 7. establishes a process to expunge convictions and conduct sentencing review hearings related to federal cannabis offenses, and 8. directs the Government Accountability Office to study the societal impact of cannabis legalization.	Jerrold Nadler	09/21/2023 - Referred to the Subcommittee on Highways and Transit
	HR 3721	United States Postal Service Shipping Equity Act: This bill authorizes the mailing of alcoholic beverages by certain entities in accordance with the delivery requirements otherwise applicable to a privately carried shipment; directs the U.S. Postal Service (USPS) to prescribe regulations (1) requiring direct delivery to a duly authorized agent at a postal facility or to the addressee, who must be at least 21 years of age and present a valid, government-issued photo identification at the time of delivery; (2) prohibiting such alcoholic beverages from being for resale or any other commercial purpose; and (3) requiring such entity to certify that the mailing is not in violation of applicable laws or regulations and to provide other information as directed by the USPS.	Dan Newhouse	5/25/2023 Referred to the Committee on Oversight and Accountability, and in addition to the Committee on the Judiciary

S. 3579 & H.R. 6982	The GRIT Act would set aside a portion of the federal sports excise tax revenue to fund programs for gambling addiction prevention, treatment, and research. The GRIT Act provides direct and vital support to state health agencies and nonprofits addressing problem gambling. It also creates investment in best practices and comprehensive research at the national level.	Richard Blumenthal (S) Andrea Salinas (HR)	Senate: 01/11/2024 – Introduced, Read twice and referred to the Committee on Health, Education, Labor, and Pensions House: 01/11/2024 – Introduced, Referred to the House Committee on Energy and Commerce
H.R. 7283	<b>Examining Opioid Treatment Infrastructure Act of 2024:</b> To direct the Comptroller General of the United States to evaluate and report on the inpatient and outpatient treatment capacity, availability, and needs of the United States; including the barriers (including technological barriers) at the Federal, State, and local levels to real-time reporting of de-identified information on drug overdoses and ways to overcome such barriers.	Bill Foster	02/07/2024 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on Natural Resources
S 3701	<b>FACTS Act:</b> To establish education partnership programs between public schools and public health agencies to prevent the misuse and overdose of synthetic opioids by youth	Margaret Wood Hassan	1/31/2024 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions
S Con Res 27 & H Con Res 87	<b>Randy's Resolution:</b> Recognizing the need for research, education, and policy development regarding high-potency marijuana. Whereas increased potency levels correspond with greater health risks, with research showing that daily use of THC with a potency greater than 15 percent results in a 5 times increased risk of psychosis; Whereas only 3 States have enacted potency caps on marijuana flower or concentrates; Whereas the use of high-potency marijuana has been linked to potential adverse health effects, including mental health disorders and cognitive impairment; Whereas education and awareness programs are essential to inform the public about the potential risks associated with the use of high-potency marijuana.	Pete Sessions (HR) Pete Ricketts (S)	1/31/2024 - Referred to the House Committee on Energy and Commerce. 2/01/2024 - Referred to the Committee on Health, Education, Labor, and Pensions.
S. 3653	<b>Resources to Prevent Youth Vaping Act:</b> This bill directs the Food and Drug Administration (FDA) to collect user fees on products that it deems by regulation to be tobacco products, including electronic nicotine delivery systems, and addresses related issues. Currently, the FDA is authorized to collect user fees only on specific classes of tobacco products. The bill also requires each tobacco manufacturer and importer to periodically submit certain information related to the tobacco products that it sells or distributes in the United States.	Jean Shaheen	1/24/2024 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions
HR 7715	<b>VAPE Imports Act:</b> To authorize additional funding for Food and Drug Administration monitoring and prevention of illicit nicotine products at ports of entry, and for other purposes.	Gallego	03/19/2024 – Introduced, Referred to the House Committee on Energy and Commerce.



## LEGISLATIVE CONCERNS

LOCAL THREATS AND CHALLENGES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>End of PHE Medicaid Beneficiary Renewals</b>	MDHHS has started mailing renewal letters for Medicaid redeterminations following the end of the Public Health Emergency . Emergency Medicaid coverage protection extended during the COVID-19 pandemic expired on April 1st. This could result in up to 400,000 Michigan residents losing Medicaid coverage.		<a href="http://www.Michigan.gov/2023BenefitChanges">www.Michigan.gov/2023BenefitChanges</a>  <a href="#">Medicaid review could drop 400,000 Michigan residents from coverage   Bridge Michigan</a>

## MISCELLANEOUS UPDATES

MISCELLANEOUS UPDATES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>FY24 State Budget Recommendations</b>	<p>Governor Whitmer’s FY2024 State Budget Recommendation includes the following areas related to behavioral health and SUD:</p> <ul style="list-style-type: none"> <li>• \$300 million for student mental health to ensure students’ needs can be identified and provided with the right support.</li> <li>• \$210.1 million for Direct Care Worker Wages (\$74.5 million general fund) to increase wage support to direct care professionals providing Medicaid behavioral health services, care at skilled nursing facilities, community-based supports through MI Choice, MI Health Link, and Home Help programs and in-home services funded through area agencies on agencies. These funds support an increase that would average about \$1.50 / hour (10%)</li> <li>• \$5 million for behavioral health recruitment supports (general fund) that would fund scholarships and other recruiting tools to attract and support people interested in training to become behavioral health providers.</li> </ul>		<p>Access budget material at:</p> <a href="https://www.michigan.gov/budget">https://www.michigan.gov/budget</a>
	<b>MIHealthyLife</b>	In fall 2023, MDHHS will ask Medicaid health plans for new contract proposals to provide health services to people enrolled in Medicaid, including Behavioral Health. MDHHS is providing a survey for stakeholders to submit ideas to make the program better and collecting input about potential changes to the new contracts.		<a href="#">MIHealthyLife (michigan.gov)</a>



	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>CMS Plan for States to Use Medicaid for Incarcerated Substance Use Treatment</b>	Recently, the Director of the Office of National Drug Control Policy (ONDCP), Dr. Rahul Gupta, announced that all federal prisons will offer medication-assisted treatment (MAT) for substance use disorder by this summer. Additionally, Dr. Gupta noted that the Centers for Medicare and Medicaid Services (CMS) will release guidance to support states in using Medicaid 1115 waivers to cover substance use treatment for people who are incarcerated		<a href="#">A disappointing report card for primary care - POLITICO</a> (relevant information is about halfway down the page)
	<b>Post-Pandemic Telehealth Policy</b>	The recently released Michigan Medicaid bulletin reflects all of the recommendations of the CMHA Behavioral Telehealth Advisory Group		<a href="#">Final Bulletin MMP 23-10-Telemedicine.pdf (govdelivery.com)</a>
	<b>Biden-Harris Administration Announce New Proposed Parity Rules</b>	The Biden Administration's new proposal would significantly strengthen the nation's parity enforcement and ensure that people with mental health and substance use conditions do not face arbitrary barriers to receiving care. The proposed rule is aimed at improving health plan compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), which requires health plans to provide mental health and substance use coverage at parity with medical/surgical coverage. A public comment period on the proposed rule will follow.		7/25/2023: <a href="#">Departments of Labor, Health and Human Services, Treasury announce proposed rules to strengthen Mental Health Parity and Addiction Equity Act   HHS.gov</a>
	<b>US Congress Mental Health Caucus</b>	Congress has newly established a Mental Health Caucus in both the House and the Senate. 107 Representatives and 33 Senators are involved. Some key focus points are Childrens' Mental Health, 988 Support, expanding CCBHCs, and the Safer Communities Act (H.R.7272).		<a href="#">Mental Health Caucus   (house.gov)</a>  <a href="#">H.R.7272 - 118th Congress (2023-2024): Shining a Spotlight on Safer Communities Act   Congress.gov   Library of Congress</a>
	<b>Hill Day 2024</b>	Hill Day 2024 is a two-day program consisting of our Public Policy Institute (June 5) and scheduled Capitol Hill visits (June 6). Registration is free. <ul style="list-style-type: none"> <li>Hear from the Biden-Harris administration, congressional staff and advocacy experts on the latest mental health and substance use policy developments.</li> <li>Explore the new realities of the post-COVID federal funding landscape.</li> <li>Dive into the 2024 election cycle and its impacts on mental health and substance use in America.</li> <li>Meet directly with the offices of your elected officials on June 6 to share solutions and demand action to support and grow the workforce, and to expand access to comprehensive mental health and substance use treatment and care.</li> </ul>		<a href="#">Registration: Hill Day 2024 (swoogo.com)</a>  <a href="#">Register for Hill Day 2024.pdf (mcusercontent.com)</a>

	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	<b>MPA Advocacy Day</b>	Michigan Prevention Association in collaboration with Tobacco Free Michigan presents: Advocacy Day - April 18, 2024 in Lansing. Help raise awareness about prevention issues by meeting with State legislators throughout the day. Breakfast and Lunch provided. Registration cost: \$30.		<a href="#">Upcoming Events - Michigan Prevention Association</a>
	<b>UFAM Rally 2024</b>	UFAM: Unite to Face Addiction Michigan; Thursday May 16 <sup>th</sup> , 10am – 4pm. 100 N. Capitol Ave, Lansing MI 48933 The UFAM Rally creates Strength in Unity to eliminate stigma, highlight improved access to treatment, support prevention, and promote recovery from addiction through advocacy, education, and outreach. The Rally is dedicated to unifying the voices of Michigan Citizens impacted by the health crisis of addiction and the organizations working to change the way addiction and recovery are perceived and treated in our state.		<a href="#">UFAM Rally 2024 Event (ufamichigan.org)</a>

## Elected Officials

FEDERAL			
	NAME	NATIONAL OFFICE CONTACT INFORMATION	LOCAL OFFICE CONTACT INFORMATION
US Senate	Debbie Stabenow	731 Hart Senate Office Building Washington, D.C. 20510-2204 Phone: (202) 224-4822	1025 Spaulding Avenue Southeast Suite C Grand Rapids, MI 49546 Phone: (616) 975-0052
US Senate	Gary Peters	Hart Senate Office Building Suite 724 Washington, D.C. 20510 Phone: (202) 224-6221	110 Michigan Street NW Suite 720 Grand Rapids, MI 49503 Phone: (616) 233-9150
US Representative	Bill Huizenga	2232 Rayburn HOB Washington, D.C. 20515 Phone: (202) 225-4401	170 College Ave. Suite 160 Holland, MI 49423 Phone: (616) 251-6741
US Representative	Hillary Scholten	1317 Longworth House Office Building Washington, DC 20515 Phone: (202) 225-3831	110 Michigan Street NW Grand Rapids, MI 49503 Phone: (616) 451-8383
US Representative	John Moolenaar	246 Cannon House Office Building Washington, DC 20515 Phone: (202) 225-3561	8980 North Rodgers Court Suite H Caledonia, MI 49316 Phone: (616) 528-7100

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