

Meeting Minutes

BOARD OF DIRECTORS

Lakeshore Regional Entity August 20, 2020 – 1:00 PM

WELCOME AND INTRODUCTIONS – Mr. DeYoung

Mr. DeYoung called the August 20, 2020 LRE Board meeting to order at 1:0 PM.

<u>ROLL CALL/CONFLICT OF INTEREST QUESTION</u> – Mr. DeYoung

In Attendance: Mark DeYoung, Peg Driesenga, Matt Fenske, Patricia Gardner, Jack Greenfield, Jacquie Johnson, Jay Roberts-Eveland, Ron Sanders, John Snider, Stan Stek, Jane Verduin

Absent: Stevi Riel

No conflicts of interest were declared.

PUBLIC COMMENT

None.

CONSENT ITEMS:

LRE 20-44 Motion: To approve by consent the following items.

- August 20, 2020 Board of Directors meeting agenda
- July 16, 2020 Board of Directors meeting minutes
- LRE Policies
 - i. **Policy 3.5** Breach Notification
 - ii. Policy 5.14 Prior Review Authorization Request Children's Waiver
 - iii. Policy 5.15 Clinical Practice Guidelines and Evidence Based Practices
 - iv. **Policy 6.5** Provider Directory

Moved: Ron Sanders Support: Peg Driesenga

Policies 3.5 and 5.14, 5.15 and 6.15 are removed from the consent agenda and put under a separate heading. The Board would like all policies to be vetted during Work Sessions of the LRE Board moving forward.

ROLL CALL VOTE – UNANIMOUS MOTION CARRIED

LRE POLICIES

3.5- Breach Notification -

The Breach Notification has been updated to comply with HSAG standards.

LRE 20-45 Motion: To approve LRE Policy 3.5, Breach Notification

Moved: Stan Stek Support: John Snider

ROLL CALL VOTE – UNANIMOUS

MOTION CARRIED

Policy 5.14-Prior Review Authorization Request (PRAR) –

MDHHS had previously overseen PRARs but have decided to delegate this process to the PIHPs. Policy 5.14 outlines an updated process to be consistent with State requirements for this program. A regional, clinical review team has been put in place to evaluate these requests.

LRE Board members are concerned that this process is extremely cumbersome and will delay funding for these requests when it is needed. Ms. Thommen, LRE staff who was involved in developing the policy and process, comments that this is what was put in place and required by the State. She states that if we do not follow this process we will be out of compliance with our contracted responsibilities. This policy has been vetted by the CMHs, as well.

There are approximately 40 children involved in this waiver. The LRE is allocated slots for these individuals that have intensive needs and the goal is to make sure they receive this service. The LRE is reimbursed through capitated payments.

Ms. Gardner asks to have the State policy sent to the Board members for review prior to approval and asks that this be taken off the Board agenda until the policy can be further vetted by the LRE Board.

Policy 5.14 – Prior Review Authorization Request will be taken of the August 20 Board agenda for further review by the LRE Board.

5.15- Clinical Practice Guidelines and Evidence Based Practices –

The Board members would like to see broader participation, to include provider network input for policies that may affect the entire region. They would like to see additional wording to include providers in this policy. The policy will read as follows:

"Additionally, input will be gathered from a representative cross-section of member CMHSPs, consumer organizations, network providers and community partners, especially when required by contract or regulation."

LRE 20-46 Motion: To approve Policy 5.15, Clinical Practice Guidelines and Evidence Based Practices subject to amendment on page 1 as seen above to include provider input

Moved: Stan Stek Support: Jack Greenfield ROLL CALL VOTE – UNANIMOUS

MOTION CARRIED

6.5 Provider Directory –

The Provider Directory is a list of regional providers. This app is ready to launch and will show providers, geographically with contact information and with which CMHSPs that they are linked to. Providers can sign in and update their own information. The directory will satisfy HSAG

requirements and is an attractive interface that enables the public to find resources through a computer or phone. The LRE is working in conjunction with Company Bell.

LRE 20-47 Motion: To approve Policy 6.5, Provider Directory as presented

Moved: Jane Verduin Support: John Snider ROLL CALL VOTE – UNANIMOUS MOTION CARRIED

LEADERSHIP REPORTS

Reports are included in packet for information. Mr. Hofman suggests reading through the reports for operational updates.

Ms. VanDerKooi would like to call attention to Attachments 9 and 10-

- Attachment 9 TalkSooner has been running numerous commercials on the major networks. Ms. VanDerKooi would like to publicly thank Vicki Cavenaugh and Stevie Riel for their work on this campaign.
- Attachment 10 Ms. VanDerKooi comments on the rise of stimulant use, especially methamphetamines. We are working to understand and figure out the best way to get ahead of it. The final assessment will have findings and recommendations for our region.

Ms. Raleigh would like to discuss the LRE/Beacon data exchange with Ms. Myers, CIO offline. Ms. Ackerman, Beacon, comments that Beacon would be part of that conversation if Ms. Raleigh would like.

SUD YOUTH DATA PRESENTATION

Ms. VanDerKooi reviews the attached PowerPoint with Board members and comments that this data is updated every 2 years and that this data was gathered prior to COVID.

CONSUMER ADVISORY PANEL

Minutes from the August 13, Consumer Advisory Panel are included in the packet. Mr. Hofman highlights:

- Members discussed their experiences during the epidemic. They report a higher utilization of telehealth services which are going very well.
- Members discussed concern about homelessness and were given resources.
- Members are concerned about consumer groups within the counties. They would like clarification of participation and who is considered primary and secondary consumers. LRE will continue to gather information on this.

CHAIRPERSON'S REPORT

Minutes from the August 12, 2020 Executive Committee meeting are included in the packet.

BEACON REPORT

Ms. Ackermann reports:

- Appeals and Fair hearings
 - The lead person at Beacon is Anthony Holston and includes a national and local team.
 - o Break Down:
 - 1. Appeals are managed by Beacon where denials were rendered by Beacon total of 59 clinical appeals with 49 that were modified or upheld.
 - 2. Local appeals where denial of service came from CMHs 42 local appeals with 6 were overturned.
 - 3. Case reports that are reviewed for Fair Hearings and carried out by CMHs total of 57 Fair Hearings 4 still pending and 3 overturned of the other 53 complete.
- Notable trend for Fair Hearings in community living supports which is very similar to
 what is seen in other states. Beacon is reviewing data for these services and making sure
 individuals are getting services that are needed.
- Notable trend for Denial and Appeal notices We continue to do more work to ensure that individuals are receiving notices that are member friendly and easy to understand. We will continue to make improvements on notices.
- Appeals Process Beacon has put together an Appeals Committee that is made up of members of CMHs that were not involved in the original decision. Beacon members include clinical representation.

ACTION ITEMS

LRE 20-48 Motion: To approve reappointment of Jane Verduin as an At-Large LRE Board Member

Moved: Ron Sanders Support: Peg Driesenga

ROLL CALL VOTE - UNANIMOUS

MOTION CARRIED

LRE 20-49 Motion: To approve the LRE CEO to fully execute Amendment #4 to the FY 20 Medicaid Managed Specialty Supports and Services Program(s), the Healthy Michigan Program and Substance Use Disorder Community Grant Programs contract between LRE/MDHHS

Moved: John Snider Support: Jay Roberts-Eveland

ROLL CALL VOTE - UNANIMOUS

MOTION CARRIED

LRE 20-50 Motion: To approve the LRE 2020 Regional Utilization Management Plan

Moved: Jack Greenfield Support: John Snider

ROLL CALL VOTE - UNANIMOUS

MOTION CARRIED

The Utilization Management Plan is an overarching plan for the region and is a requirement for HSAG. This document was collaborated on by the Clinical UM committee that is facilitated by Beacon with membership of the member CMHSPs and LRE. The CMHSP CEOs have approved this document.

FINANCIAL REPORT AND FUNDING DISTRIBUTION

FY2020 July Funds Distribution

Included in the Board packet for information.

- \$46 million was disbursed which is an increase from June.
- IPA for 2 quarters was disbursed because of a mistake from the Treasurer. They allowed LRE more time and is the reason payment was for the last 2 quarters.
- Member Distribution there was a large carry over of July member payments made in August due to another rate adjustment update for DCW and also a delayed payment from the state for a recoupment took in error.

LRE 20-51 Motion: To approve the FY2020 July Funds Distribution as presented

Moved: Jane Verduin Support: Peg Driesenga ROLL CALL VOTE – UNANIMOUS MOTION CARRIED

Statement of Activities as of 6/30/2020 and Variance Report-

Presented by Ms. Coleman for information. Included in Board packet for information.

- Reflects the Amendment #2 that was approved last month.
- Continue to see a variance in SUD, BG and SOR. We have requested to carry over into next year.
- PA2 shows a variance but we have started to see payments from Treasury and received payments from all counties except Ottawa.
- All explanations are on the second page of this report.

Member Bucket Reports-

Ms. Coleman presents reports for information and highlights the following:

- The Bucket report is based on expense and revenue projections information that is received by the CMHSPs. There are variables that we have to take into account when reviewing this information even when seeing a surplus.
- The increase in revenue of \$1.4 million is related to an increase in MC/HMP enrollees, including 19 thousand additional enrollees. We have adjusted for this increase. These details are attached to the CFO Report.
- \$325 thousand decrease in expenditures but due to a delay in submissions this could change drastically.

CEO REPORT

Mr. Hofman highlights the following:

- COVID calls with the state are ongoing and we continue to meet weekly within the region. The CMHs are doing an outstanding job.
- LRE will continue to analyze COVID effects on services and report findings back to the LRE Board.
- Provider Network Plan is high profile effort. We have received applications from providers and are in the process of reviewing and following up with providers. While reviewing the committee has to take into account the other sources of Federal funding, which has made this process slower than we would like. The CMHs are the primary contact for providers. We continue to message out that if there is a provider with a dire need, they should immediately communicate this to the CMHs or LRE.
- DCW rate increase is being distributed.
- The LRE negotiating team met with the state and submitted the Medicaid drawdown proposal. MDHHS is reviewing and will set up another meeting.
- LRE continues to work on PA2 issues with Ottawa.
- There is attention at the state level regarding demographics and disparities. We will be analyzing this data more deeply.

BOARD MEMBER COMMENTS

Ms. Johnson comments that the Provider Network has a voice that should be listened to and used. The DCW (Direct Care Wage) increase has been incredibly helpful but that is supposed to end September 30. We need to be aware that this may create a crisis.

PUBLIC COMMENT

Ms. Myers comments that LRE works diligently to not be burdensome to providers.

UPCOMING LRE MEETINGS

- September 9, 2020 Executive Committee, 3:00 PM
- September 17, 2020 LRE Executive Board Meeting, 1:00 PM

ADJOURN

Mr. DeYoung adjourned the August 20, 2020 LRE Board of Directors meeting at 3:53 PM.

Mark DeYoung, Board Chair

Minutes respectfully submitted by:

Marion Dyga, Executive Assistant