

CEO Report January 20, 2022

Hello and good afternoon. It is a great day to be a part of the Lake Shore Regional Entity!

1. COVID-

- January 7, 2022 State of Michigan received initial limited supply of new oral COVID-19 medications. MDHHS issued eligibility criteria and prescribing requirements to reach those most at-risk; continues to urge vaccination and boosters.
- January 10, 2022 the Michigan Department of Health and Human Services
 (MDHHS) updated its K-12 school quarantine and isolation guidance to reflect
 recent updates made by the Centers for Disease Control and Prevention (CDC) that
 modifies or shortens the quarantine and isolation periods to as short as five days in
 some circumstances.

Students, teachers & staff who test positive for COVID-19 and/or display COVID-19 symptoms should isolate regardless of vaccination status:

- \circ If asymptomatic, monitor for symptoms for days 0-10; and
- O Isolate at home for days 0-5 (day "0" is day symptoms begin or day test was taken for those without symptoms); and
- If symptoms have improved or no symptoms developed, return to school, while wearing a well-fitted mask, for days 6 -10; or
- O Stay home for days 0 10 if unwilling/unable to wear a mask.

If you have a fever, stay home until you are fever free for a period of 24 hours without the use of fever reducing medications.

- 2. Beacon Contract Update LRE sent Beacon Health Options Notification to Terminate on 12/29/2022. The LRE will continue to work with Beacon regarding the transition of the contracted services back to the LRE. LRE staff have been meeting with Beacon to assure that all responsibilities are transitioned back to the LRE.
 - i. Specific activity that Beacon provided support in this month included the following:
 - Finance:
 - Updated FY 2022 Revenue Projection model
 - o Provided October 2022 & November 2022 Revenue Projections
 - Utilization Management

The Beacon/LRE clinical leadership team has attended meetings, engaged in discussions, and finalized documents and tools, in preparation for IRR activities (Preadmission Screen and Continued Stay Review audits) beginning in January 2022. Specifically, the leaders attended the December UM ROAT and chaired meetings with the UM leads from most of the CMHSPs around the logistics of sharing documents in the most efficient manner. These meetings went well and audits of Preadmission Screens and Continued Stay Review documentation will begin soon. Initially, the audits will focus on a percentage of the inpatient admissions, as reported on the weekly FUH report. Over time, the clinical team hopes to expand audits to include partial hospitalization, as well as crisis residential. Results will be shared in the monthly UM ROAT meetings.

As in previous months, the Beacon UM team continues to handle the reporting of weekly FUH data for the region. Beacon clinical staff continue to be available to conduct retrospective reviews. The team is also assisting the Appeals Department with completion of the PA Services Referral Form for Network180's appeal cases and attending/contributing to those weekly meetings to discuss relevant appeals with the CMH and Appeals Department. Grand Rounds continue to be available monthly, with the respective CMHs. Additionally, the team arranges for complex case conferences with the MD as requested.

• <u>Integrated Healthcare</u>

In December, monthly joint care coordination meetings were held with each of the Medicaid Health Plans that serve this region. During the December meetings, 63 consumers were discussed with their respective MHPs related to their potential or continued benefit from having an interactive care plan within the State's claims database, CC360, and subsequently improving the care they receive and their quality of life, removing barriers, and decreasing unnecessary utilization of crisis services. There were 9 consumers discussed with their MHPs, wherein an interactive care plan was not created, but collaboration took place. During December, there were 5 new interactive care plans opened, with agreement by the respective CMHs and Medicaid Health Plans.

3. State "Action Plan" Discussions – LRE and MDHHS/Office of Attorney General have come to an agreement to lift the Sanctions. The LRE will report to MDHHS quarterly on identified areas for the 2-year term of the agreement. As part of the agreement the LRE withdrew the lawsuit against MDHHS for attempting to wrongfully terminate the LRE's contract in 2019. Past liabilities are unresolved at present time and will become the focus of the next steps.

4. Region (and Statewide) Workforce Issues Continue: As reported previously, providers across the region (and the State) continue to experience extreme workforce issues impacting services and supports.

A study conducted by the Community Mental Health Association of Michigan in December 2021 shows that the extrapolated vacancy rate for positions within the public behavioral healthcare system are as follows:

• Estimated number of positions: 100,000

Vacancies: 15,794Percent Vacant: ~16%

For direct support professionals:

• Estimated number of positions: 50,000

Vacancies: 10,286Percent Vacant: ~21%

5. Updates from Lansing

- i. **System Redesign Proposals:** Senate Bills (SB) 597 & 598 From several signs, it appears that Senator Shirkey will be planning to move these bills, in the Senate, during the January March period. This helps CMHA, its members, and allies to focus our efforts to oppose these bills.
- ii. **FY 22 supplemental budget:** The Legislature is passing, and the Governor is signing the supplemental budget bills that contain, in the main, federal ARPA dollars. This is a good sign in that it indicates that Senator Shirkey will not be holding (may not be able to hold) these dollars back to force the Governor to agree to support/sign bills SB 597 and 598.
 - **House Proposal** "Rep. Whiteford Proposal" There is not much of an update on the House (Rep. Whiteford) Proposal.
 - **Democratic Listening Tours** Rep. Brabec wrapped up the tours in mid-November. Any type of package that may possibly be put together remains to be seen.

iii. CMHA Advocacy Update

• WMCMH Advocacy video developed in partnership with CMHA – posted on the Board Associations website and LRE website.

o Online Petition

Please don't forget to sign our new online petition opposing the Shirkey bills, please join and sign the petition by visiting: **cmham.org/advocacy**

"Our strength is our numbers, and we need to show it – please sign our petition AND please forward this message to your board members, staff, and your community partners and ask them to sign and share the petition."

6. Other Items

- i. Updated version of the one-page, which lists the groups in opposition on the back side.
- ii. Short PowerPoint that provides a high-level overview of the main concerns opposing the Shirkey bills, it is the document that the new advocacy video was based on. Several CMHs in region as well as across the state are meeting with their boards of county commissioners, this PowerPoint could be shared with your commissioners.
- iii. New document that looks at the NCQA report card regarding true health plan performance with behavioral health services.
- iv. Resources CMHA will be adding a Resources section to our advocacy page on our website. The resources section will include all our SBs 597 & 598 opposition handouts, reference material, etc. all in one easy to find location.
- v. LRE By-Laws and Operating Agreement LRE revised the By-Laws and Operating Agreement were brought to the work session. Both will be presented for approval of the LRE BOD.

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