

EXECUTIVE COMMITTEE SUMMARY

Wednesday August 12, 2020, 3:00 PM

Present: Mark DeYoung, Peg Driesenga, John Snider, Stan Stek, Jane Verduin

WELCOME

- a. Review of August 12, 2020 Meeting Agenda
- b. Review of July 8, 2019 Meeting Minutes

The August 12, 2020 meeting agenda and the July 8, 2020 meeting minutes were accepted as presented.

FINANCIAL UPDATE

i. Ottawa PA2 Funds

- Ottawa County was running a surplus in PA2 funds. Those funds are maintained and held at the LRE. Ottawa County is stating that because they are owed Medicaid funds, because there is not a regional deficit elimination plan and because it is their belief that if the LRE is bankrupt and they could lose these funds, they have decided to hold PA2 funds.
- PA2 Funds are under the jurisdiction of the LRE, which is in legislation. There is no allowance in this statute for the counties to hold PA2. Prevention/Treatment providers are paid through the LRE but without the funds that Ottawa is holding, we cannot pay them. The LRE has a reserve but the OPB must approve use of the funds in the reserve.
- There is no Board action required. The LRE is using Roz Parmenter as legal for this situation.
- Ms. Doyle comments that she feels confident that this will work out and there will be cost settlement by the end of the year. The OPB could also approve using surplus funds to pay providers, if necessary.

ii. Revenue projections summary –

- The handout is updated revenue projections through July. Currently we are projecting \$320 million in revenue. There is a continued increase in membership in comparison to the prior month. This is largely due to unemployment and includes July, August, and September with a projected \$1.3 million increase in revenue.

PROVIDER NETWORK STABILITY UPDATE

- The LRE and CMHs are in the process of gathering and reviewing provider surveys and applications. There has been further clarification from MDHHS about the use of different revenue sources that providers are receiving from the federal government. We have to be

extremely cautious of double dipping and having to take back funds at the end of the year.

- There are regular meetings with the CMHs to review the applications. We have communicated clearly and, on several occasions, to providers, that if there is a dire need from a provider that they should contact the CMHSP immediately.
- There has been an extension up to August 28 to apply for federal funds.
- A summary matrix will be presented and meetings will continue for review.

MDHHS/LRE SETTLEMENT UPDATE

- LRE negotiating team met with MDHHS on August 4th. MDHHS was provided with the proposed methodology of the MC drawdown. The state was not prepared to go into detail. They have brought this to their finance people for additional review of the proposed methodology.
- Mr. DeYoung comments that the meeting was more positive and there seemed to be a willingness to move forward.

BEACON CONTRACT NEGOTIATIONS UPDATE

- LRE and CMH CEOs have been discussing the Beacon contract with another meeting scheduled for tomorrow afternoon. The discussions are centered on what Beacon has done and what changes are needed based on the regional needs.
- The intent is to begin meetings with Beacon in the next 2 weeks.

MENTAL HEALTH REDESIGN UPDATE

- MDHHS sent a document “5 Pillars”, which was sent to the Executive Committee. These are planning pillars for the future of the mental health system. Mr. Hofman would like to draw attention to the first pillar because there is some push from state advocates that the mental health system and CMHs are not held accountable as it should be.
 1. Drive improved outcomes and more funding to the front lines through streamlined oversight PIHP/CMHP accountability reforms.
 2. Integrate physical and behavioral health care at the point of service with a person-centered approach and inclusion of social determinates of health.
 3. Ensure all Michiganders have access to behavioral health, mental health and substance use prevention, treatment, services and follow up services for the best quality life.
 4. Provide people with outreach, service delivery, and access to behavioral health services at their preferred locations and mechanisms. *Consider telehealth and telephone services utilized during COVID-19.*

5. Provide quality and time efficient patient care flow from community to residential treatment or institution (hospital, juvenile detention centers, jail) to community with individualized clinical treatment.
- PIHP Meetings- there has not been any discussions during the PIHP meetings related to any major systemic changes in the near future, but that may change. Allen Jansen has taken the lead on this project and has commented that the State is looking at how PIHPs handle the Network Stability Plans.
- Lame duck and the FY21 budget will play a role in the redesign. The previous model has not been brought up as a possibility.

2020 LRE BOARD REAPPOINTMENTS

Below are the At-Large Board members that will be up for reappointment in 2020. Mr. DeYoung will contact them and discuss their interest in continuing to be on the LRE Board.

- Jane Verduin – August Board
- Matt Fenske – November Board

BOARD MEETING AGENDA ITEMS

- i. Policies
- ii. PIHP/MDHHS Amendment #4

BOARD WORK SESSION AGENDA

There will not be a work session.

OTHER

UPCOMING MEETINGS

- August 13, 2020 – Consumer Advisory Panel, 1:00 PM
- August 20, 2020 – LRE Executive Board Meeting, 1:00 PM
- September 9, 2020 – Executive Committee, 3:00 PM
- September 17, 2020 – LRE Executive Board Meeting, 1:00 PM

ADJOURN