



Northern Lakes Community Mental Health Authority

Board of Directors Packet

May 18, 2023



Administrative Office, 105 Hall Street, Suite A,
Traverse City, MI 49684

BOARD AGENDA

The Northern Lakes Community Mental Health Authority Board will meet on May 18, 2023 at 2:15 p.m. Virtual Meeting and in person at: 2715 S. Townline Rd., Houghton Lake, MI 48629 1-810-258-9588 ID: 986 665 315#

<u>TIME</u>	<u>ID #</u> <u>ITEMS</u>	<u>POLICY #</u>
2:15 p.m.	Roll Call Pledge of Allegiance Appoint Timekeeper Confirmation of Quorum Consideration of Agenda Conflict of Interest Declaration	
2:20 p.m.	Consent Agenda - Board Consideration of Board Consent Agenda* 1 Board of Directors Minutes – April 20, 2023 – <i>Approve</i> 2 Committee of the Whole Minutes – April 20, 2023 – <i>Approve</i>	
2:25 p.m.	Ownership Linkage A. Citizen Comment (May be limited to three minutes by Board Chairperson) B. Ownership Communication	1.1, 3.1
2:30 p.m.	Election of Officers Slate of Officers**	3.6
2:45 p.m. 3	Chief Executive Officer's Report	
2:55 p.m. 4	Chief Financial Officer's Report	
3:15 p.m. 5	Northern Michigan Regional Entity Report NMRE Draft Minutes	3.4
3:20 p.m.	Assurance of Organizational Performance A. Receipt of CEO Monitoring Reports CEO Response to Monitoring Reports 6 2.8 Communication & Support to the Board (Internal Inspection) * B. New Operational Worries C. May Monitoring Assignment 7 2.9 Investments (Internal Inspection)	3.0, 3.2
3:30 p.m.	Board Means Self-Assessment A. Receipt of Board Monitoring Report CEO Response to Monitoring Report	3.2, 4.2

- 8 3.7 Governance Committees (Direct Inspection)*
- 9 3.7A Recipient Rights Advisory Committee (Direct Inspection)*
- 10 3.7B Recipient Rights Appeal Committee (Direct Inspection)*

May Monitoring Assignment

- 11 3.8 Cost of Governance - Policy (Direct Inspection)
- 12 3.8 Cost of Governance Committee - Budget (Internal Inspection)
- 13 1.0 Consumer and Community Ends (Internal Inspection)

3:40 p.m.	Governance Policies Discussion and Assessment	3.1
	A. <u>Ends</u>	
	B. <u>Executive Limitations</u>	
	C. <u>Governance Process/Ownership Linkage</u>	3.4
	-Financial, Single, Compliance Audit –Approve*	
	-Committee Assignments	
	D. <u>Board/CEO Linkage</u>	
3:50 p.m.	Ownership Linkage	1.1, 3.1
	A. Citizen Comment	
	(May be limited to three minutes by Board Chairperson)	
3:55 p.m.	Announcements/Board Members Reports/Board Association	
	-Certificates	
4:00 p.m.	June 15, 2023 Agenda Planning	
4:05 p.m.	Meeting Evaluation/Comments	
4:10 p.m.	Adjournment	

NOTICE: If any person with a disability needs accommodations, please call the CEO's Office three days prior to the posted meeting date.

NEXT MEETING: June 15, 2023

* Action Items

** Action from Committee of the Whole

**Northern Lakes Community Mental Health Authority
Board of Directors Annotated Agenda
May 18, 2023**

2:15 p.m. Call to Order and Start Up

Please note that Consideration of the Agenda has been moved to this section of the agenda and that each meeting Board Members may declare any new conflict of interest.

2:20 p.m. Consent Agenda

Board Members can request any item be removed to allow for discussion as part of the board agenda.

2:25 p.m. Ownership Linkage

Definition - Connecting the authority and accountability to the owners.

As shown, this includes Citizen Comments (May be limited to three minutes by the Board Chairperson), Ownership Communication with other community agencies or individuals.

2:30 p.m. Election of Officers

2:45 p.m. Chief Executive Officer's Report

The Interim CEO Report will be reviewed with the Board.

2:55 p.m. Chief Financial Officer's Report

The Chief Financial Officer's Report will be reviewed with the Board.

3:15 p.m. Northern Michigan Regional Entity Report

The NMRE Board meeting minutes will be shared if available.

3:20 p.m. Assurance of Organizational Performance

Definition – Monitoring of how NLCMHA is complying with policy.

There are three components. 1. Receipt of CEO Monitoring Report – 2.8 Communication & Support to the Board (Internal Inspection). 2. New Operational Worries – This allows time for Board Members to raise and discuss any new concerns they have that are not on the agenda and may be worries that would be added to a future agenda. 3. May 2023 Monitoring Assignment – 2.9 Investments (Internal Inspection). Please complete in advance and submit to the Chairperson.

3:30 p.m. Board Means Self-Assessment

Definition – Review of policies that the Board is responsible for.

There are two components. 1. Receipt of Board Monitoring Report – 3.7 Governance Committees (Direct Inspection), 3.7A Recipient Rights Advisory Committee (Direct Inspection) and 3.7B Recipient Rights Appeal Committee (Direct Inspection). 2. May 2023 Monitoring Assignment – 3.8 Cost of Governance - Policy (Direct Inspection) and 3.8 Cost of Governance - Budget (Internal Inspection). 1.0 Consumer and Community Ends.

3:40 p.m. Governance Policies Discussion and Assessment

Definition – The Board's definition of, and rules, for its own job.

We have placed in bulleted format the four monthly standing policy topics by Policy Governance title. Board Members are encouraged to bring items they would like discussed.

- Ends
- Executive Limitations
- Governance Process/Ownership Linkage
 - Financial, Single, Compliance Audit – Approve & File
 - Committee Assignments

- Board/CEO Linkage

3:50 p.m. Ownership Linkage

Definition - Connecting the authority and accountability to the owners.

This is the second opportunity for Citizen Comment. (May be limited to three minutes by the Board Chairperson)

3:55 p.m. Announcements/Board Member Reports/Board Association

This is an opportunity for Board Members to report on Board visitations, committee meetings, conferences, meetings attended, events or other specific areas of mental health related interest.

- Certificate recognition for past members.

4:00 p.m. June 15, 2023 Agenda Planning

Board Members will discuss topics to include on next month's board meeting agenda.

4:05 p.m. Meeting Evaluation/Comments

Time is scheduled to allow Board Members to evaluate the meeting using the meeting evaluation form.

4:10 p.m. Adjournment

NEXT MEETING – June 15, 2023

Board of Directors Meeting Minutes

April 20, 20232:15 p.m.

Board Members Present: Tony Lentych, Dan Dekorse, Penny Morris, Ben Townsend, Greg McMorrow, Mary Marois, Tom Bratton, Al Cambridge, Sherry Powers, Pam Babcock, Ty Wessell, Kate Dahlstrom, Angela Griffis, Ruth Pilon, Carol Blake, Dean Smallegan

Absent: None.

Others Present: Brian Martinus, Interim Chief Executive Officer; Lauri Fischer, Chief Financial Officer; Tracy Andrews, Director of Integrated and Managed Health Services; Heather Sleight, Administrative Specialist; Brian Newcomb, Recipient Rights Director; Stacy Maiville, Executive Secretary; Daniel Mauk, Chief Information Officer; Dean Baldwin, Network Administrator; Joanie Blamer, Chief Population Officer, Andrea Cassell, Access Operations Manager; Deb Freed, Pat Nuffer, Cheryl Rolewig, Jody Barrett, Bruce Moore

Virtual –Ann Ketchum, Programmer Analyst II; Kari Barker, QI Compliance Director; Aimee Horton Johnson, Office Administrator; Curtis Cummins, Medical Director; Darryl Washington; Northern Health Care Management Director, Terri Henderson; Account Clerk Specialist, Treasa Cooper; Reimbursement Coordinator

Call to Order:

The meeting was called to order at 2:18 p.m. by Dan Dekorse

Timekeeper: Ty Wessell

Confirmation of a Quorum: Yes

Conflict of Interest Declaration: No

Consideration of the Agenda: It was requested to move the Board Chair election after the NLD update and add a discussion about the new email addresses. Dan introduced the 3 new Board Members, Carol Blake of Wexford, Dean Smallegan of Missaukee, and Ruth Pilon of Crawford.

MOTION:	Accept the March 16, 2023 Board of Directors and Committee of the Whole Meeting Minutes
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Greg McMorrow
SECONDER	Tom Bratton

Ownership Linkage:

A. Citizen Comment:

Pat Nuffer – Pat read quotes from family members of consumers. One family member talked about lack of housing and felt that NLCMHA did not assist enough with finding the consumer housing. The other quote spoke about a new consumer member who moved to Traverse City, received ACT from his previous community, but was denied those services in Traverse City. The consumer member's situation escalated, and the person ended up in the E.R. The family member stated that the NLCMH worker was "invisible". Pat stated that qualifications for services that seem to be a barrier. Family members need partnership with the gatekeepers. Correct information must be given to caregivers.

Judy Barrett- Stated that there has been a situation in which the consumer does not use the telephone due to the sound and can only communicate through text. Currently, CMH does not use text as a typical means of communication. The consumer's case was recently handed over to a new case worker and that new case worker was not made aware that they needed to communicate through text message. As a result, there was a disconnect between the new case worker and consumer. Judy commented: "Is there a protocol 101 for when case managers come on?"

Chief Executive Officer's Report:

Brian, the Interim Chief Executive Officer, reviewed the CEO Report. He mentioned the employee stabilization grant and the plans for those funds. Brian touched base on the progress of the Enabling Agreement and feels strongly all counties will sign off on it. Brian spoke about his community events and noted ones such as the CMH conference at Grand Traverse Resort happening June 5-7th and June 24th, a mental health summit in Traverse City.

Kate asked if Brian could hire a full or part-time grant writer and someone to work on the patient portal.

Chief Financial Officer's Report:

Lauri, the Chief Financial Officer gave her report. She mentioned that they have been finding and using grants to get certain things going such as hiring staff for the Behavioral Health home. She also stated that Gatsby 68 is not a resource that can be spent. She also touched on public act 152. She commented that the first step of the budget process is personnel.

Lauri discussed the revenues and spending, cash on hand, Medicaid spending as compared to regional funding, residential/inpatient usage, revenues/spending, and contracts. The CFO also clarified that the DHHS is responsible for consumer transportation.

Northern Michigan Regional Entity Report:

Mary discussed the NMRE meeting, it was mentioned that there was discussion about the PA2 funds at the meeting.

Assurance Of Organizational Performance:

A. Receipt of Board Monitoring Report & CEO Response to Monitoring Report:

There were only two monitoring reports turned back in for policy 1.0. The Board voted to re-do this monitoring report in May.

B. New Operational Worries:

Mary commented that she has been having difficulties with her NLCMH email.

Dan Mauk, IT spoke on behalf of these issues and presented solutions. Dan also mentioned that members can also log into office.com and log in on the website.

There was discussion about the website and out of date material. Members of the Board mentioned that they would like to see the website updated. They would also like the packets in an accessible place with the minutes and 988 to be marketed.

C. April Monitoring Assignment:

2.8 Communication & Support to the Board.

Board Means Self-Assessment:

A. Receipt of Board Monitoring Report & CEO Response to Monitoring Report:

MOTION:	The Board finds the organization 78% in compliance with Policy 3.3 Board Member Code of Conduct
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Tony Lentych
SECONDER:	Ty Wessell

MOTION:	The Board finds the organization 100% in compliance with policy 3.6 Board Chair Functions
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Tony Lentych
SECONDER	Sherry Powers

B. April Monitoring Assignment:

The Board was given the monitoring reports; policies 3.7, 3.7A, and 3.7B as their April homework.

Governance Policies Discussion and Assessment:

A. Ends: None.

B. Executive Limitations: None.

C. Governance Process/Ownership Linkage:

RRAC Minutes

MOTION:	Approve the RRAC Minutes – February 14, 2023
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	Tony Lentych
SECONDER:	Ty Wessell

The draft minutes from the RRAC Meeting held April 6, 2023, were discussed.

Chair Elections:

There was a great deal of discussion and debate about the election of a new Chairman. The Board decided to move forward with the election for the NLCMHA Chairman. Because there was not a quorum at the last NLD meeting, the Board called for nominations from the floor.

Tony Lentych nominated Ben Townsend. Ben Townsend nominated Tony Lentych.

The Board held a roll call vote for the Chair. The results were a tie. The members discussed the results and did a second vote, there was a tie again. Members debated if they should do a coin toss. Tony announced he is withdrawing from the election, making Ben Townsend the new Chairman of the Board.

MOTION: Roll Call Vote for NLCMHA Board Chair

RESULT: Tie

G. McMorrow – Tony, C. Blake – Ben, T. Bratton – Tony, A. Cambridge – Tony, B. Townsend – Ben, S. Powers- Ben, D. Smallegan – Ben, T. Wessell- Tony, A. Griffis – Ben, R. Pilon- Tony, T. Lentych – Ben, P. Babcock – Ben, K. Dahlstrom – Tony, P. Morris – Tony, M. Marois – Tony, D. Dekorse- Ben

MOTION: Second Roll Call Vote for NLCMHA Board Chair

RESULT: Tie

G. McMorrow – Tony, C. Blake – Ben, T. Bratton – Ben, A. Cambridge – Tony, B. Townsend – Ben, S. Powers- Ben, D. Smallegan – Ben, T. Wessell- Lentych, A. Griffis – Ben, R. Pilon- Tony, T. Lentych – Tony, P. Babcock – Ben, K. Dahlstrom – Tony, P. Morris – Tony, M. Marois – Tony, D. Dekorse- Ben

MOTION: Elect Ben Townsend as Chairman of the Board by default

RESULT: ADOPTED. [UNANIMOUS]

MOVER: Tony Lentych

SECONDER: Dean Smallegan

NLD:

The Board reviewed the draft NLD minutes from April and March. Pam spoke about the NLD meeting and stated who the NLD discussed for office appointments.

Vice Chair: Greg McMorrow or Tony Lentych

Secretary: Sherry or Greg.

Ben Townsend took over as the Northern Lakes Community Mental Health Board Chairman and facilitated the remainder of the meeting.

MOTION: The newly elected Chair for this term to be 13 months

RESULT: ADOPTED. [UNANIMOUS]

MOVER: Dan Dekorse

SECONDER: Greg McMorrow

Committee Appointments:

Ben, the NLCMHA Chairman made the following committee appointments:

Audit Committee – Dean, Penny

NLD – Ruth

NMRE- Possibly Greg

CMHAM - Ben

CEO Search – Dean, Carol

Ad Hoc Budget Committee – Chairman - Al, Tom, Ty, - this committee will meet in June, July, August
Governance Committee will stay as it is.

Ben commented that the CEO search committee should meet soon. Mary said that she will get a hold of the members and set that up.

The Board discussed the change they would like for policy 2.7.2

MOTION. Change 2.7.2 to read: – No less than annually The CEO communicate with the Board in total, one member of the executive team that will serve as the Interim CEO if the CEO is unavailable. If that person is unavailable, the interim shall communicate to the Board, a second executive team member.

RESULT: **ADOPTED. 15 – Yes, 1 -No**

MOVER: **Ty Wessell**

SECONDER: **Greg McMorrow**

The Board discussed the change they would like for policy 3.8.

MOTION: **Change Policy 3.8 state:** Board Member shall complete at least six months to be recognized when they leave The Board

RESULT: **ADOPTED. [UNANIMOUS]**

MOVER: **Al Cambridge**

SECONDER: **Mary Marois**

D. Board/CEO Linkage:

Mary expressed the desire to address the issues mentioned at citizen' s public comment. She would like the CEO to investigate this and bring ideas back to the Board next month as to how to resolve these matters.

Dan commented that CMH is not understood by many. To be told no when you are in crisis does not help. Would like the CEO to educate the community about CMH.

Kate mentioned that she would like the CEO to clarify to consumers and the Board what the clear expectation for getting help with transportation.

Ownership Linkage:

A. Citizen Comment: None.

Announcements/Board Member Reports/Board Association:

Ben read the certificate of recognition for Lynn Pope. Ty mentioned that she will be missed. Pam acknowledged that she has a wide expertise of the mental health industry. Al acknowledged her work on ROOC.

Ben read the certificate of recognition for Barb Selesky. Members mentioned that she will be missed.

Ben read the certificate of recognition for Rose Denny. Kate commented that Rose was the hardest working and best prepared Board member. Members mentioned that they would like to see her on the

RRAC. Mary mentioned that she is so proud of Rose and will miss her a lot. Al mentioned that Rose cared deeply for the people we serve.

The Board thanked Dan for his work on the Board. Dan also thanked the Board for having him.

Greg mentioned that NLCMH does good work.

Agenda Planning: It was requested to include how the agency assists with job placement at next month's COW IDD presentation.

Meeting Evaluation/Comments:

#1 – We spent our time on the most important governance topics – Excellent

#2 – We encouraged diversity of viewpoints – Excellent

#3 – Our decisions were made collectively –Excellent

#4 – The Board used it's time effectively – Fair

Adjournment:

The meeting adjourned at 4:26 p.m.

Respectfully Submitted,

Ben Townsend, Chairperson

Sherry Powers, Board Secretary

Stacy Maiville, Executive Secretary



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Committee of the Whole Meeting Minutes

April 20, 2023

12:30 PM

Tony Lentych called the meeting to order at 12:30

Board Members Present: Tony Lentych, Dan Dekorse, Penny Morris, Ben Townsend, Greg McMorrow, Mary Marois, Tom Bratton, Al Cambridge, Sherry Powers, Pam Babcock, Ty Wessell, Kate Dahlstrom, Angela Griffis, Ruth Pilon, Carol Blake, Dean Smallegan

Absent:

Virtual:

Others Present: Brian Martinus, Interim Chief Executive Officer; Lauri Fischer, Chief Financial Officer; Tracy Andrews, Director of Integrated and Managed Health Services; Heather Sleight, Administrative Specialist; Brian Newcomb, Recipient Rights Director; Stacy Maiville, Executive Secretary; Daniel Mauk, Chief Information Officer; Dean Baldwin, Network Administrator; Joanie Blamer, Chief Population Officer

Virtual –Ann Ketchum, Programmer Analyst II; Kari Barker, QI Compliance Director; Aimee Horton Johnson, Office Administrator; Curtis Cummins, Medical Director; Darryl Washington; Northern Health Care Management Director, Terri Henderson; Account Clerk Specialist, Treasa Cooper; Reimbursement Coordinator

Public Comment:

None

Recipient Rights Monthly Report - Currently have 52 open investigations. Substantiation rate is higher for FY23 than previous years. Added complaint source to report to show where complaints are coming from. We are continuing site visits and staff trainings. We remain at 100% compliance.

Financial Audit- Christina Schaub and Derek Miller, Auditors for Roslund, Prestage, and Company, the auditing firm used by Northern Lakes Community Mental Health gave an overview of their findings and opinions concerning the Financial, Single and Compliance Audits that were completed in FY22. They also discussed Summary of Auditor's Results. A copy of the financial audit/report was included in the packet.

Phone Survey - Deb Freed introduced Katherine Somerfield – Principal of CS Research and Consulting. Katherine gave an overview of the survey that was conducted in February/March of this year to measure community awareness and attitudes about mental health and disability issues. This survey was conducted via phone but switched over to SMS text about halfway through. Results of the survey were discussed in depth. Katherine also discussed how the survey works on the backend, as well as some of the questions asked on the survey. We had 388 completed surveys. The results of the survey are used for future marketing for the agency.

Nominee Discussion: Dan opened the floor for discussion of the two Chair nominees, Tony Lentych and Ben Townsend. Al pointed out that holding an election for the Chair today would be a violation of the by-laws. He

stated the same thing last month, but a special election never took place. A discussion ensued as to whether or not this would be considered a special election or meeting and regarding the rules/requirements surrounding both of these. A vote could be held to suspend the by-law rules, then an election could be held today. Members commented on their thoughts/feelings about voting to suspend the rules in order to hold the election today. Tony and Ben spoke about their background, experience, and candidacy and then took questions from the board members.

Agenda Planning:

Next meeting is May 18th, 2023, at the Houghton Lake office.

Meeting Evaluations/Comments:

- #1 – We spent our time on the most important governance topics – excellent
- #2 – We encouraged diversity of viewpoints – excellent
- #3 – Our decisions were made collectively – excellent
- #4 – The Board used it's time effectively – excellent
- #5 – What is the most important thing the Board could do to improve our function as a Board? Ben liked the more relaxed atmosphere of today's meeting.

Other/Adjourn:

Meeting adjourned at 2:03 p.m.

Respectfully Submitted,

Heather Sleight,

Administrative Specialist

Interim Chief Executive Officer's

Report to the Board

May 18, 2023

Citizen Comment:

NAMI Citizen Comment: I had the chance to meet in person with the concerned family members who presented their public comments at the last board meeting. We are working as a team to address the issues we discussed. We will continue monthly meetings to help best meet the needs of our consumers and their families.

PIHP Director Update:

988/ MiCAL:

- Overall March Answer Rate - 93% of calls answered within 30 seconds.
- 988: As of January 1st, we are encouraging our partners to share the 988 number. We had held off to make sure we had coordination in place with key stakeholders such as CMHSPs, CCBHCs, and 911s. We are developing Michigan marketing materials that we will put on the MDHHS website. We will let you know when we add those tools.
- As was mentioned in the Crisis Services Update, MDHHS is pausing the expansion of MiCAL covering CMHSPs' afterhours crisis lines. MiCAL will not bring on anymore CMHSPs at this time. MiCAL needs to focus on 988.

Grants of Significant Value: None

Enabling Agreement: Signed by all six counties.

Community Connections/Meetings:

- May 8-11, Military Training PEC, AK
- May 11th, Law Enforcement Meeting
- May 16th, NMRE Operations Committee Meeting
- May 18th, NLCMHA Board Meeting
- May 24th, NMRE Board Meeting
- June 5-7, Summer Conference – Grand Traverse Resort
- June 6th, RRAC Meeting
- June 8th, Law Enforcement Meeting
- June 13-16, Military Training
- June 15th, NLCMHA Board Meeting
- June 20th, NMRE Operations Committee Meeting
- June 28th, NMRE Board Meeting

May is mental health awareness month. NLCMHA is hosting a variety of events such as:

- Tools4Resilience Lunchtime Virtual Education Series
- Community Awareness Walk - May 24th
- Grayling & Houghton Lake – Inspirational rock painting event (May 16th & May 25)
- Traverse House Open House – May 31st
- Club Cadillac Open House – May 25th

NLCMHA Email Blast: In our most recent email blast we shared information on the following topics:

New hire and staff changes

Staff anniversaries

Office meeting dates

All Staff training save-the-date

May is mental health month events

Community education opportunities

Currently looking to fill the Human Resource Director vacancy:

Posted for RRAC Positions: Over social media and in person advertisements. Have had 2 other inquiries about these positions.

Media Coverage: There were some articles in the last month. I am attaching a word document of that article to this report and links are included below should you want to access them yourselves:

Respectfully submitted,
Brian Martinus, Interim CEO

https://www.record-eagle.com/opinion/letters_to_the_editor/letter-dahlstrom/article_94937e46-df80-11ed-b0ef-43d8abb17617.html

https://www.record-eagle.com/news/local_news/northern-lakes-board-candidate-steps-up-despite-trepidation/article_52f25bae-e374-11ed-990a-370975290f84.html

https://www.cadillacnews.com/news/northern-lakes-cmh-partnering-to-hold-free-virtual-education-series-in-may/article_c3e94174-def1-11ed-87fe-f34d3757a768.html

<https://www.houghtonlakeresorter.com/articles/nlcmh-to-celebrate-mental-health-awareness-month/>

TC Ticker – GT County Approves article – no link, article attached.

https://www.record-eagle.com/news/local_news/mental-health-services-take-giant-leap-forward/article_90f2d688-e9d5-11ed-88c9-47ca3b3a9b86.html

<https://www.9and10news.com/2023/05/08/grand-traverse-co-renews-support-for-northern-lakes-mental-health-authority/>

https://www.cadillacnews.com/news/northern-lakes-cmh-partnering-to-hold-free-virtual-education-series-in-may/article_c3e94174-def1-11ed-87fe-f34d3757a768.html

https://www.cadillacnews.com/news/local-agencies-hosting-events-recognizing-mental-health-awareness-month/article_f3c639ba-eb7b-11ed-ab6e-9334109d2dad.html

East bay Township Approves – No link, article attached.

<https://www.traverseticker.com/news/plans-take-shape-for-new-mental-health-center/>

https://www.record-eagle.com/opinion/letters_to_the_editor/letter-dahlstrom/article_94937e46-df80-11ed-b0ef-43d8abb17617.html

Investing in youth needs to be priority

PBS News had a recent report on the falling U.S. life expectancy. Youth suicide and drug overdose are topping the charts.

We can and must do better for our youth – from upstream/prevention all the way to urgent/crisis care. A center for youth needing help as a result of trauma, serious emotional disturbance, substance use – a northern Michigan Center of Integrated Mental Wellness for Youth and Young Adults.

As co-lead of the CHIR Wellness Center project for youth and adults, I co-wrote, in joint effort with two co-leads and consultants, a business plan and American Rescue Plan Act application that resulted in Grand Traverse County allocating \$5 million ARPA funding for mental health infrastructure. Shortly after, the leadership team changed and youth services got put on the back-burner or eliminated (incomplete data collection).

As Munson and Northern Lakes Community Mental Health move forward with adult crisis care, I and others in our community continue to advocate for a youth center as an immediate need. Envision a top-rated center where families can go and get all kinds of resources and referrals for their loved ones.

If you support our youth, please let Grand Traverse County commissioners hear from you and find me on Facebook to join the effort.

Kate Dahlstrom

Traverse City

https://www.record-eagle.com/news/local_news/northern-lakes-board-candidate-steps-up-despite-trepidation/article_52f25bae-e374-11ed-990a-370975290f84.html

Northern Lakes board candidate steps up despite trepidation

[By Patti Brandt Burgess pburgess@record-eagle.com](mailto:pburgess@record-eagle.com)

TRAVERSE CITY — A Garfield Township resident has been recommended for appointment to the Northern Lakes Community Mental Health Authority board.

David Freedman, who has worked in the behavioral health field for more than 40 years, was interviewed and recommended by a Grand Traverse County board ad hoc committee.

During his interview last week, Freedman said he was approached by someone who asked him to apply for the post vacated by Dan DeKorse, who opted out of reappointment when his term ended in December. Freedman's appointment will be on the May 3 county board agenda for possible approval.

"I almost didn't step forward because I've seen what happened to other folks and I don't expect that outcome for me, quite honestly," Freedman said. "I'm here because I overcame that fear."

Freedman said he can understand when a board or committee member is removed for malfeasance.

"It shouldn't be for other reasons," he said.

Northern Lakes board members Justin Reed and Nicole Miller were removed from their posts in July for neglecting their official duty after being accused of not voting in the county board's best interests.

More recently the county board charged Bay Area Transportation Authority board Chairman Richard Cochrun and Secretary Robert Fudge with willful neglect of duty after they voted to create two at-large seats on the BATA board, bringing it to nine members.

The pair were accused of trying to cherry-pick new members who would be loyal to BATA rather than the county board.

Cochrun and Fudge filed an emergency complaint in 13th Circuit Court to successfully stop a county board removal hearing. The two boards then agreed to a 60-day moratorium brokered by county Administrator Nate Alger and BATA Director Kelly Dunham. The moratorium ends mid-May.

And in April, an item on the county board agenda aimed to revise the appointment policy. A proposed amendment stated that appointees “should avoid signing documents containing statements of loyalty to any particular organization or interested party that is inconsistent with the appointee’s representation of the best interest of taxpayers of Grand Traverse County and the Grand Traverse County Board of Commissioners.”

The item was turned down on a vote of 4-3 along party lines with two commissioners absent. According to board attorney Gordon J. Love, five votes were needed to amend the policy.

Commissioner Brad Jewett said the county went for a long time with no one wanting to serve on boards and committees. The last two or three years there have been a lot of people stepping up, he said, though only two were interested in Northern Lakes.

“People are afraid to step forward,” Freedman said. “As a professional I don’t want my reputation harmed by anything someone else might do in order to make me look bad when I’ve spent 45 to 50 years with an untarnished reputation.”

Freedman was one of two people interviewed for the post. Dennis Mann, the only other applicant, was interviewed in March.

Jewett and commissioners Penny Morris and Scott Sieffert sit on the ad hoc appointment committee. Morris also sits on the Northern Lakes board as the county liaison. Sieffert was absent from Freedman’s interview.

In addition to his experience in the behavioral health field, Freedman is currently vice chair of the Grand Traverse County Substance Abuse Committee. He is retired but wants to continue his work as a volunteer.

He does not think Northern Lakes services meet the needs of the community.

“In my opinion there is no mental health center across the country that is expected to meet the needs,” Freedman said. “If you don’t have funding you can’t meet the needs.”

Behavioral health care has always been profoundly low on the totem pole when it comes to funding, Freedman said.

For-profit organizations and telehealth have also stolen staff from the nonprofit side, he said.

The Northern Lakes authority covers six counties and was created about 20 years with an enabling agreement that has been rewritten in the past several months.

Crawford, Leelanau, Missaukee, Roscommon and Wexford counties each appoint two members to the board, while Grand Traverse County — the most populous — appoints six.

The county board in May voted to leave the authority after decades of what they called poor service. The move would have caused the entire authority to dissolve.

Instead, the six counties resolved to rewrite the agreement that is now in the process of being signed by the six counties. Leelanau and Wexford counties have signed on and it is on the agenda for today's Roscommon County meeting.

Northern Lakes CMH partnering to hold free virtual education series in May

• May 4: Letting go of the heavy backpack: working through difficult situations. Learn how to communicate in a positive way to help others. Learn techniques how to handle situations where people might become angry, or behaviors escalate. • May 9: Navigating conflict resolution: Skills and tips to practice to positively and constructively communicate with people in your work or personal life. • May 11: A DOSE of life: Increase and balance your happy hormones to become more resilient by taking control and living your life! • May 16: Developing cultural intelligence: Gain an inside view of individual bias to increase understanding and for personal development. • May 18: Strong foundation, bright futures: building a healthy tomorrow. An overview of the parent-infant relationship and its impact on mental health, wellbeing, and resiliency. • May 23: Trying to keep yourself safe online: A roundtable discussion on ways to thwart common techniques scammers use to steal our financial and personal data. • May 25: Health is our wealth: Choices to holistically integrate your physical and mental health in order to achieve optimal health. Techniques to advocate for yourself with a primary care provider, food as medicine, and more!

Two community mental health agencies will be partnering next month to offer a free virtual education series focused on the theme of providing tools for resilience.

The upcoming series, presented by Northern Lakes Community Mental Health and North Country Community Mental Health, is looking to provide insights and strategies for promoting mental health and self-care. It is open to anyone interested in learning more about mental health issues and techniques for building resilience. The series features webinars from noon to 1 p.m. every Thursday and most Tuesdays throughout May.

Mental health professionals from both organizations as well as the Northern Michigan Regional Entity will share practical tips and techniques, insights into specific mental health issues, and strategies for promoting self-care. After each presentation, attendees will have the opportunity to ask questions and engage in discussions with the speakers. They also will receive access to myStrength, a free self-help health and wellness app.

The webinars will cover topics such as learning how to communicate positively to help others and skills and tips to practice to positively and constructively communicate with people. There will be other topics covered including staying safe online and how to holistically integrate physical and mental health to achieve optimal health.

NLCMH Community Provider Relations Specialist Cynthia Petersen said one in four adults will experience a mental health disorder at some point in their life, yet many of them cannot access the treatment they need.

“Fortunately, people are much more willing to seek help and talk about mental health issues now. This virtual education series is intended to provide opportunities for people to learn, share, ask questions, and have conversations about how to help yourself and how and when to access professional help,” she said. “A wide variety of dynamic topics were selected and people can choose to attend one or all.”

To register and receive links for the virtual education series at Event Brite go to <https://bit.ly/3zCwTKA>

- [By Rick Charmoli Cadillac News](#)
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NLCMH to celebrate Mental Health Awareness Month

| May 04, 2023

Northern Lakes Community Mental Health (CMH) is promoting Mental Health Awareness Month with activities each week in May.

“Look Around, Look Within” is this year’s theme for Mental Health Awareness Month to encourage everyone to consider how the world around them affects their mental health.

“This year, during Mental Health Awareness Month, we are offering an array of education opportunities to encourage learning and conversation about protecting your mental health, building your resilience, strengthening your wellbeing, and learning how to access help for yourself or another person when needed,” said Cindy Petersen, community provider relations specialist, Northern Lakes CMH.

Opportunities include mental health awareness walks, a series of seven virtual lunchtime webinars called Tools4Resilience, Mental Health First Aid classes and community-based activities and sharing of resources and information..

Tools4Resilience Virtual Education Series

Leading mental health agencies Northern Lakes CMH and North Country CMH are collaborating to offer a free virtual education series in May focused on the theme #Tools4Resilience.

The series provides insights and practical strategies for promoting mental health and self-care and is open to anyone interested in learning more about mental health issues and techniques for building resilience.

The series features webinars every Thursday and most Tuesdays throughout May from noon to 1 p.m.

Mental health professionals from both organizations as well as the Northern Michigan Regional Entity (NMRE) will share practical tips and techniques, insights into specific mental health issues and strategies for promoting self-care. After each presentation, attendees will have the opportunity to ask questions and engage in discussions with the speakers and will receive access to myStrength, a free self-help health and wellness app.

The #Tools4Resilience offerings include:

May 4: Letting go of the heavy backpack: working through difficult situations. Learn how to communicate in a positive way to help others. Learn techniques how to handle situations where people might become angry or behaviors escalate.

May 9: Navigating conflict resolution. Skills and tips to practice to positively and constructively communicate with people in your work or personal life.

May 11: A DOSE of life. Increase and balance your happy hormones to become more resilient by taking control and living your life!

May 16: Developing cultural intelligence. Gain an inside view of individual bias to increase understanding and for personal development.

May 18: Strong foundation, bright futures: building a healthy tomorrow. An overview of the parent-infant relationship and its impact on mental health, wellbeing and resiliency.

May 23: Trying to keep yourself safe online. A roundtable discussion on ways to thwart common techniques scammers use to steal our financial and personal data.

May 25: Health is our wealth. Choices to holistically integrate your physical and mental health in order to achieve optimal health. Techniques to advocate for yourself with a primary care provider, food as medicine and more!

Register and receive links for the #Tools4Resilience virtual education series at Event Brite at bit.ly/3zCwTKA.

Mental Health First Aid Training for the Community

A Youth Mental Health First Aid class will be held May 24 (an adult class was held May 3). It will be held in person at the Northern Lakes CMH Cadillac Office at 527 Cobb St. from 8 a.m. to 5 p.m. Visit bit.ly/3L5elaV for information or to register.

Mental Health First Aid is a ground-breaking, evidence-based training program for community members interested in learning to recognize and diffuse mental health crises.

Northern Lakes CMH will offer Mental Health First Aid trainings in August and October. Contact Beth.Burke@nlcmh.org or call (231) 876-3249 for information.

Community-Based Mental Health Awareness Walks

Northern Lakes CMH staff from each of its four offices will lead Walks For Mental Health Awareness simultaneously May 24 in four cities, Cadillac, Grayling, Houghton Lake and Traverse City from noon to 1 p.m. The public is invited. At Houghton Lake, meet at the CMH building at 2715 South Townline Rd.

Mental Health Rocks!

The public is invited to paint inspirational rocks and hide them around the community. A session for adults will be held from 10 a.m. to noon May 16, and a session for children from 3 to 5 p.m. When the rocks are found, the finder will be instructed to take a picture with it and post it on their Facebook page. Snacks will be provided.

There will also be a grand Reopening of the New Connections Drop-in Center at 404 W. Houghton Lake Dr. in Prudenville May 31.

GT County Commissioners Approve New CMH Agreement

By Beth Milligan

Grand Traverse County commissioners voted unanimously Wednesday to approve a new enabling agreement between the six counties that make up the Northern Lakes Community Mental Health Authority (CMH) – a move that protects CMH from dissolution and creates a new committee to handle disputes if they arise in the future. Grand Traverse County is the fifth county to approve the agreement, clearing the way for its adoption if Missaukee County commissioners also approve it at their meeting next Tuesday.

Six counties entered a joint agreement in 2003 to provide mental health services to their residents by founding CMH, including Grand Traverse, Leelanau, Crawford, Missaukee, Roscommon, and Wexford. Commissioners in some of those counties have expressed dissatisfaction in recent years over CMH operations, with reasons ranging from costs to quality of services to dysfunctional staff and board dynamics. Last May, Grand Traverse County commissioners [voted to dissolve their relationship with CMH](#), giving the county at least a year to actually exit the authority and create its own alternate system for delivering mental health services to residents. Any county's departure from CMH would dissolve the authority, requiring the other counties to either reestablish CMH under a new operating agreement or launch their own alternate mental health systems.

But in September, county commissioners [agreed to try and preserve CMH](#), signing a memorandum of understanding signaling their willingness to work with other counties on overhauling the enabling agreement before taking the drastic step of dissolving the authority. What followed was a “long, challenging process” to produce a new agreement, County Administrator Nate Alger said Wednesday, with the commission chair and administrator of each county meeting monthly with the CEOs of CMH and Northern Michigan Regional Entity (NMRE), which is assisting with CMH leadership transitions.

“We basically implemented a system similar to collective bargaining,” Alger said. The group went through the agreement section by section, Alger said, proposing changes and debating revisions. “The relationship early on was very strained,” Alger said, noting that some of the other counties didn’t understand Grand Traverse County’s desire to upend the status quo. “One of the most beneficial things that came out of this process is we currently have a much better relationship with the (other) five counties that comprise CMH,” he said.

The new agreement – which went through seven draft versions before being brought to commissioners Wednesday – expands and better details contract definitions and adds multiple new sections, including outlining CMH board and CEO duties. “There just needed to be more stated clarity around what those roles look like,” said Sarah Bannon of Lakeview Consultants, which is assisting with the rewrite. The new agreement also builds in more accountability and transparency, Bannon said, including a list of “key performance indicators” on which CMH will provide quarterly updates to each county board. Those indicators range from patient readmissions to filed grievances to client follow-ups to community outreach.

One new section – “scrutinized more closely than any other section,” Bannon said – outlines a dispute resolution process when one or more counties are unhappy with services or have conflicts with each other or the CMH board or CEO. If the CEO can’t resolve the dispute amicably through discussion with board members, the issue can be taken to a new dispute resolution committee. That committee will have seven voting members: two from Grand Traverse County, which at \$682,200 annually is the largest funding contributor to CMH by nearly fivefold, and one each from the

remaining five counties. A non-voting member will also be appointed by NMRE. A supermajority vote of five committee members will result in a binding decision on a dispute, provided that decision is not superseded by state or federal law.

County Commissioner TJ Andrews said the dispute resolution process gave her “significant pause,” saying she didn’t believe in creating boards to solve other boards’ problems. However, Andrews said she appreciated that “a lot of work has gone into this process” and that she was “willing to take a leap of faith that the boards will use this dispute resolution process sparingly and with public awareness and knowledge and oversight.” Noting that the new agreement is a “living document” that can be updated if needed, Andrews said: “We need to move forward, and I think this is a good way to do that.”

Chair Rob Hentschel concurred that the new agreement is “not perfect,” saying he still believes Grand Traverse County shoulders a disproportionate share of the funding burden for CMH compared to its population size. But he said there had been a “robust input process” on the document and would support it. “I’m going along with this agreement because I think it’s the best we can do,” he said. “It’s not like it can never be reopened.”

Alger said county leaders – who now have a closer working relationship after going through the rewrite process together – will continue to have regular ongoing discussions “about the performance of (CMH).” Alger expressed support for the new agreement, which was unanimously approved by commissioners Wednesday, and highlighted its importance to the region. “5,733 clients systemwide are relying on this agreement to work,” he said. “The counties are relying on the agreement to work.”

Mental health services take giant leap forward

- [By Patti Brandt Burgess pburgess@record-eagle.com](mailto:Patti.Brandt.Burgess@record-eagle.com)

TRAVERSE CITY — A possible site has been identified for a mental health center in Grand Traverse County that would be the first stop for anyone in need of mental health or substance use disorder services.

The building is near Munson Medical Center, although County Administrator Nate Alger declined to give the address as negotiations are still ongoing.

Alger toured the space Friday and told county board members at their regular meeting Wednesday that it was “sufficient.”

Alger said the leadership team working on procuring the site would likely have a proposal by the end of May or early June to apply for \$5 million in American Rescue Plan Act funding that was set aside by the GTC board in December for this purpose. The money will be used to renovate the building, he said.

The access center would get people the help they need and act as a diversion center to keep people out of emergency rooms and jail, which is often the first stop for those in crisis.

“Anybody who is in crisis, whether it’s a parent bringing a child or it’s somebody who has engaged in substance use and has overdone it and is in a crisis, or it’s law enforcement, they’re going to receive immediate assessment and they’re going to direct that person where to go,” Alger said.

“We’re hoping that’s anyplace but jail and, minimally, the emergency department.”

The county board also unanimously approved an enabling agreement that has been several months in the works. It is the seventh draft and all six of the member counties must approve it. GTC became the fifth on Wednesday.

It was exactly one year ago that county board members agreed to part ways with Northern Lakes Community Mental Health Authority after what they said was decades of poor service.

Shortly afterward, administrators and board chairs from the six counties that also include Crawford, Leelanau, Missaukee, Roscommon and Wexford began the process of rewriting the agreement.

What started as a strained relationship has improved over the course of the last months, Alger said.

The next step is to rewrite the board bylaws, which are a companion to the agreement, he said.

The new access center will expand and improve upon services that are already in place — a mobile crisis unit, a crisis line, a Welcoming Center and a contract for residential beds with Hope Network — but are insufficient, Alger said.

The Welcoming Center located in the Northern Lakes Community Mental Health building in downtown Traverse City has been open for about a year and serves people 24/7.

It is small, but has always been seen as a steppingstone for a larger, full-service center.

The access center will have space for Addiction Treatment Services, National Alliance on Mental Illness, Before During and After Incarceration, Child and Family Services and all the partnering organizations.

People will be assessed when they come in and then sent for follow-up outpatient care, to a short-term residential unit, or to a long-term inpatient psychiatric hospital.

Some may still be sent to an emergency room, but those numbers are expected to decrease over time.

The center will be established in three phases, the first of which will bring all existing services to the access point. The second will add nursing and psychiatric assessments, with the final phase adding a crisis stabilization unit (CSU) for stays of up to 72 hours, and a crisis residential unit (CRU) that will provide beds for stays of up to 14 days.

The leadership team consists of representatives from Northern Lakes, Munson, the Northern Michigan Regional Entity, the Northwest Community Health Innovation Region and the county.

“We’re putting the plan together so it can be funded, but also so it meets state criteria,” said Brian Martinus, interim CEO of Northern Lakes.

Northern Lakes received a \$3 million state grant that can be used for staffing. Martinus said a data collector and a project lead for the access point have already been hired.

State and federal opioid settlement funds also may be available for the project, and Medicaid will pay for the lion’s share of services, Alger said.

The center would be a regional one. County board Chairman Rob Hentschel said the board was unanimous in its willingness to put its ARPA funds toward mental health, knowing that the surrounding counties that would benefit from it chose their own projects. He acknowledged that GTC will reap the biggest benefit.

“I encourage administration and the whole team to keep reaching out for those state dollars with that in mind,” Hentschel said.

Commissioner Daryl V. Nelson said whenever he has talked with anybody over the last few years about mental health services, nobody was happy.

“Everybody I talked to was frustrated,” he said.

The step made by the board last year was controversial, but in the end resulted in an improved and updated agreement and better mental health services.

“This is not a victory lap, by any means,” Nelson said, noting that those who worked on the issue got a lot done in a year.

“That is lightning speed in government,” he said.

<https://www.9and10news.com/2023/05/08/grand-traverse-co-renews-support-for-northern-lakes-mental-health-authority/>

Grand Traverse Co. Renews Support for Northern Lakes Mental Health Authority

The Grand Traverse County Board of Commissioners recently signed onto a new agreement with [Northern Lakes Mental Health Authority](#).

NLCMHA was created by 6 counties: Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford. They currently serve more than 5700 clients in the area.

The previous NLCMHA Enabling Agreement was approved by the six member counties in 2003. The current agreement has taken more than a year, and each county committed significant time and resources.

Grand Traverse County Administrator Nate Alger is here to tell us more about what this renewed commitment to mental health means to them.

https://www.cadillacnews.com/news/upcoming-meet-and-greet-to-connect-child-and-family-agencies-resources/article_89c96992-e9e1-11ed-a945-33e63a80fb1a.html

Upcoming 'meet and greet' to connect child and family agencies, resources

- [By Rick Charmoli Cadillac News](#)

CADILLAC — In February 2020, a meeting was held to bring together agencies and people who interact with and/or support families and children in the community.

The idea was for these meetings to continue, but the COVID-19 pandemic had other ideas. On Friday, May 19, a meet and greet event is scheduled to bring these people and agencies together again, according to Northern Lakes Community Mental Health Child and Family Operations Manager Erika Solomonson.

“We want to get to know everyone’s face, collaborate, find some things or holes and make connections we didn’t have before,” she said. “We did a meeting back in February 2020 before it broke loose with COVID. Most everything is done virtually now, so it is nice to gather and talk in person. That is the purpose.”

The event, which is scheduled from 8:30 to 11 a.m. at the Wexford-Missaukee Intermediate School District’s Lake Superior Room, 9903 E. 13th St., will include agencies like Oasis Family Resource Center, local doctor offices, Northwest Michigan Community Action Agency, the Salvation Army and more.

To start the event, Solomonson said some of the bigger agencies and partners will talk about their programs, but for the most part, it will be a time when people can mingle, share brochures and business cards and make connections.

Solomonson said coming off the pandemic, it seems even more important that these groups come together to collaborate in supporting families and kids in the community who are in crisis.

“The more we do, the better. We know the community is struggling,” she said.

A light snack will be provided and the event is designed as a way for people and agencies to mingle and network. Tables are available for agencies to pass out fliers, referral forms or other information.

While not required, RSVPs are being taken for the event by Northern Lakes wraparound coordinator Stacie Zagurny at stacie.zagurny@nlcmh.org. Solomonson said she also can answer any questions an agency or person might have about the event.

https://www.cadillacnews.com/news/local-agencies-hosting-events-recognizing-mental-health-awareness-month/article_f3c639ba-eb7b-11ed-ab6e-9334109d2dad.html

Local agencies hosting events, recognizing Mental Health Awareness Month

- By Rick Charmoli Cadillac News
- May 6, 2023 Updated May 7, 2023

Every May, mental health takes center stage and this year local organizations are hosting events and/or bringing attention to Mental Health Awareness Month.

Mental Health Awareness Month raises awareness of trauma and the impact it can have on the physical, emotional and mental well-being of children, families and communities. It was established in 1949 to increase awareness of the importance of mental health and wellness in Americans' lives and to celebrate recovery from mental illness.

For that reason, Northern Lakes Community Mental Health will be devoting time during May to promote different activities each week. "Look Around, Look Within" is this year's theme for Mental Health Awareness Month to encourage everyone to consider how the world around them affects their mental health.

Events include mental health awareness walks, a series of seven virtual lunchtime webinars called Tools4Resilience, Mental Health First Aid classes, and community-based activities and sharing of resources and information, according to Northern Lakes CMH Community Provider Relations Specialist Cindy Petersen.

Tools4Resilience Virtual Education Series provides valuable insights and practical strategies for promoting mental health and self-care and is open to anyone interested in learning more about mental health issues and techniques for building resilience.

The series features webinars every Thursday and most Tuesdays throughout May from noon to 1 p.m. Register and receive links for the #Tools4Resilience virtual education series at Event Brite at <https://bit.ly/3zCwTKA>.

Although the adult class for the Mental Health First Aid Training already happened, a youth class is scheduled from 8 a.m. to 5 p.m. on May 24 at the Northern Lakes CMH Cadillac Office, 527 Cobb St. Participants will learn how to identify, understand and respond to signs of mental health and substance use challenges among youth.

The cost per course is \$50 and includes lunch, snacks and a valuable training manual. The public is invited to register using this link, <https://bit.ly/3L5elaV>.

Northern Lakes CMH staff from each of its four offices will lead Walks For Mental Health Awareness simultaneously in four cities, in Cadillac, Grayling, Houghton Lake and Traverse City from noon to 1 p.m. on May 24.

During May, District Health Department No. 10 is recognizing Mental Health Awareness Month working to bring attention to the work of its Reduce Stigma Action Team and the Northwest Community Health Innovation Region Behavioral Health Initiative. The Reduce Stigma Action Team recently concluded a survey across 10 counties within the Northwest CHIR to assess the status of the stigma that surrounds mental illness. One of the findings from the study is that 60% of respondents said that they feel unsafe telling others about a mental illness.

The results of this survey will inform future public awareness campaigns to reduce stigma, as well as anti-stigma training for various populations.

For more information about the Reduce Stigma Action Team, visit northernmichiganchir.org/northwest-chir/behavioral-health-initiative/stigma-mental-illness. For more information about the Northwest CHIR's Behavioral Health Initiative, visit northernmichiganchir.org/northwest-chir/behavioral-health-initiative.

East Bay Township Approves 101-Home Subdivision, Extension of STR Moratorium

By Beth Milligan

East Bay Township trustees this week approved plans for a new 101-home subdivision to be built on the east side of Three Mile Road between Potter Road and Eikey Road, and approved extending a moratorium on new short-term rental licenses for another four months. Trustees also addressed concerns from Pine Grove residents about an adult foster care facility opening in the neighborhood for individuals with mental illness and/or developmental disabilities.

Victoria Farms Subdivision

The O'Grady Development Company received unanimous trustee approval Monday to develop a new subdivision with 101 single-family homes on Three Mile Road. The 119-acre parcel is the former location of Dreves Farm and has direct access from Three Mile Road and future access from the Cinnamon Ridge subdivision (pictured, map). The site is being proposed as a residential cluster subdivision, a designation that "allows some flexibility with smaller lot sizes with larger amounts of open space preservation," according to Township Director of Planning & Zoning Claire Karner. Kyle O'Grady previously told planning commissioners the new subdivision will be similar to surrounding developments, with home sizes roughly ranging from 2,400 to 3,200 square feet at prices similar to Cinnamon Ridge. Homes in that neighborhood range from \$230,000 to \$590,000, real estate listings show. The project – formerly called Hayfield Manors, now named Victoria Farms – is proposed to be built in two phases. The first phase, which will front Three Mile Road, will include 48 homes, while the second phase will include 53 homes.

Several conditions were attached to the township board's approval. All construction traffic to the new development will be limited to using the Three Mile Road entrance, the developers must provide road connections to Cinnamon Ridge and pave a road to connect to the public road Saffron Circle, and traffic calming and landscaping amenities must be installed to provide a buffer to neighboring residents. Township officials commended the developers for modifying their plans to address concerns from neighbors about the impacts of the new neighborhood, with Trustee Mindy Walters saying the final plan represented a "good compromise."

Trustees discussed the latest draft of the new STR ordinance this week. While there seemed to be board consensus on many issues – ranging from enacting a 1,000-foot buffer between new rentals to setting a capped number of licenses on an annual basis to scheduling license renewals to all take place at the same time each year – other areas were more divisive. Trustees were particularly torn on proposed language stipulating rentals can only be turned over a maximum of once every seven days (the previous restriction was once every four days).

Multiple STR owners said in public comment that the change would essentially cut their rentals in half and significantly impact their income and that of their employees, such as house cleaners. Some trustees felt limiting rental turnovers would provide breathing room to neighbors and minimize neighborhood impacts. Other trustees didn't see an issue sticking with the current four-day language, saying the township hadn't received complaints about turnover and could have challenges enforcing date restrictions anyway. Trustees agreed to discuss the issue on its own at their June meeting to try and reach a consensus on the rule.

Adult Foster Care Home

Finally, township trustees and staff addressed concerns from Pine Grove residents Monday about a

new adult foster care home opening in their neighborhood. The property, located on Indian Trail Boulevard, has previously been used as an adult foster care facility, but is under new ownership through the Hope Network. That organization has obtained a state license to provide voluntary adult foster care for up to six individuals who have been diagnosed as developmentally disabled or mentally ill.

That is a change in focus from the type of patients who were at former adult foster care facility, which primarily provided senior care. Neighborhood resident Michelle Witkop said she understood the importance of mental health facilities, but questioned the appropriateness of locating one within a residential neighborhood next to a public park. “How safe is that going to be for our neighborhood?” she asked, adding that admission parameters for the facility weren’t clear and worrying it could include people experiencing psychosis or violent or predatory behaviors.

Township Zoning Administrator Preston Taylor and township attorney Peter Wendling both said they had extensively reviewed the project. Taylor spoke with the state licensing department, which confirmed the license was appropriate for the site’s intended use. There will be no substance abuse disorder treatment at the facility, Taylor noted. Wendling said that under state regulations, the facility is still considered an adult foster care home the same as it was previously. He also pointed out that the state has carved out special regulations for such facilities, making it difficult for townships to regulate them on a local level. “There’s not a whole lot under zoning that a municipality can do,” he said.

Wendling said he was still vetting a few aspects of the project, such as confirming with the state whether there are any specific rules about required lengths of stay for patients. However, barring any answers from the state that conflict with the facility’s plans or any future violations, the home is free to operate under state law, township officials said.

Plans Take Shape for New Mental Health Center

By Beth Milligan | May 9, 2023

A leadership team looking to bring a new mental health center to the region has identified a possible site near Munson Medical Center and will appear before Grand Traverse County commissioners this or next month with a proposal to use up to \$5 million in county American Rescue Plan Act (ARPA) funds to launch the facility.

Representatives from Grand Traverse County, Northern Lakes Community Mental Health (CMH), Northern Michigan Regional Entity (NMRE), Community Health Innovation Region, Munson Healthcare, and United Way of Northwest Michigan are on a leadership team working on “bringing access and crisis services under a single roof and serving children, youth, and adults regardless of insurance or ability to pay,” according to a memo from the group. County Administrator Nate Alger said anyone who is in crisis – either for mental health or substance abuse disorders – will be able to walk into the center and receive immediate help. After an assessment, individuals will be connected with the proper resources and organizations to guide them on where to go next for longer-term care. “We’re hoping that that is any place but jail and minimally the ED (emergency department),” Alger said. Individuals who go to the emergency room for mental health issues frequently face extensive waits for care, Alger said. “An ED is not designed for behavioral health treatment,” he said, noting that the new center could “significantly” alleviate pressure on Munson’s emergency room. The center is expected to consolidate services into one location, including central service inquiry, referrals, scheduling, crisis phone screening and interventional services, mobile crisis services, and a welcoming center.

Additional services to be provided include brief outpatient therapy, assessments, hospital preadmission screening, nursing and psychiatric assessments, peer support services, and other wraparound services. The leadership team outlined three phases for building out the center, with the first phase to include bringing existing services under one roof for 24/7 year-round access. Organizations like the National Alliance on Mental Illness, Before During and After Incarceration, Addiction Treatment Services, and Child and Family Services of Northwestern Michigan would all have space in the facility.

A second phase would add nursing and psychiatric assessments to the services offered. The third and final stage could see crisis residential unit and crisis stabilization unit beds added for both adults and youth. Alger said that while the community currently has some mental health care services available, resources are “insufficient” compared to the demand. “We want to expand and improve upon services,” he said.

Alger said the leadership team recently toured a possible location for the new center near Munson Medical Center (negotiations are active, so the address has not yet been publicly disclosed). Grand Traverse County commissioners [previously voted in December to allocate \\$5 million](#) in county American Rescue Plan Act (ARPA) funds for mental health services/infrastructure, but did not specify which projects or organizations those funds would go toward since discussions about a new mental health center were still evolving. Alger said he expects the leadership team will appear before

commissioners in late May or early June with a proposal to use that \$5 million to renovate and open the new center.

Chair Rob Hentschel said he was hopeful state grants could help defray costs, noting that Grand Traverse County would otherwise be putting up a sizable amount of its own ARPA funding to build a center that would be used by surrounding counties. “All of northern Michigan, the whole region, will benefit from having this center,” he said. Alger said other funding sources – including state grants, substance abuse funds through NMRE, Medicaid dollars, and/or contributions from partners like Munson – could help offset costs. CMH Interim Chief Executive Officer Brian Martinus added that CMH also has a \$3 million state grant that can be used toward staffing the new center.

Commissioner Darryl Nelson said that since he’s joined the board, the one issue that’s been “universally discussed” and a source of deep frustration among community leaders he’s met with is the lack of mental health resources in the region. He commended the leadership team for making rapid progress toward opening a new center over the last year. “That is lightning speed in government,” he said. “This has been a long-term problem that we have been concerned about, and it’s our responsibility cause it lands in our lap. And it’s more than just the 5,700 clients of CMH. There’s a lot more (people in need of mental health services) out there.”

Hentschel agreed, saying he was “encouraged” by the direction of the project. “There’s the ER and there’s the jail: That’s what you can do with mental health problems right now,” he said. Hentschel said individuals today are frequently sent out of the area for treatment, having to travel to places like Grand Rapids to get help when experiencing mental health issues. He encouraged the leadership team to “keep that vision” of providing robust local care in mind as it works through funding and logistical issues, calling the project a “bright shining future for Grand Traverse County and how we handle mental health services that are emergent.”

Pictured: Chart on behavioral health crises at Munson Medical Center's emergency department [from Northern Lakes Community Mental Health](#)

Munson Healthcare, Traverse City	Behavioral Health Crises in ED			
Persons in ED for suicide related diagnosis	2016	2020	2021	Jan-Apr 2022
Ages 6-17	83	80	121	50
Age 18+	900	772	840	236
Average hours in ED waiting placement				
Ages 6-17	14.1	16.0	23.8	28.2
Age 18+	14.7	12.7	28.4	30.1

**Northern Lakes Community Mental Health Authority
Financial Reporting for 4/30/2023**

Highlights:

- NLCMHA has submitted seven certification packets for habilitation supports waiver enrollment that are pending at the State of Michigan. It has been communicated to NLCMHA that the MDHHS office processing packets are short staffed and delays are occurring. Individuals who are recertifying their enrollment will not be impacted by the delays the MDHHS office is experiencing.
- During the month of April, NLCMHA had 163 active habilitation support waiver enrollees. That is a net increase of 2 from March. The average monthly HSW capitation per enrollee in April is \$5,714.
- Capitation received by the Northern Michigan Regional Entity (NMRE) the first six months of the year has exceeded the initial budget projections by \$2.5M. This includes all regional capitation for the CMHSP's and substance use services.
- The NMRE received \$2.3M this year in performance-based incentives. The State of Michigan withholds a small percentage of capitation that is then sent back to the Regional Entity's (10 in the State of Michigan) that meet performance expectations. NLCMHA is about 32% of the 21-county region and received \$731,040 of performance incentives in April. The performance incentive money is considered restricted local funds, meaning it has to be used for behavioral health initiatives but can be deposited into fund balance. Last year NLCMHA received over \$900,000 of performance incentives, however, the year before the amount was \$440,000. The finance report shows a significant increase in both revenues over expenses and the amount that is available to retain because of this money.
- The latest guidance received from MDHHS regarding redeterminations is that they will begin in June. This has not changed. A flyer published by MDHHS has been included in your packet for reference. Please be sure to share this with any individuals or guardians supporting individuals on Medicaid.

Medicaid Spending as compared to Regional Funding Advances:

- Services provided to individuals with traditional Medicaid coverage will be reported at \$35,712,106 with \$260,281 available in coordination of benefit reimbursements. This is \$1,877,537 below capitated advances provided by the NMRE and 7/12ths of the FY 2022 carryforward made available to NLCMHA.
- Services provided to individuals with Healthy Michigan Plan coverage will be reported at \$4,754,734. This is \$283,536 below capitated advances provided by the NMRE and 7/12ths of the FY 2022 carryforward made available to NLCMHA.
- Services which must be paid for by General Funds total \$991,417. This is \$839,886 below the year's allocation. Services which are paid for by general funds due to Medicaid Deductibles total \$45,832 through March 31st.

Residential/Inpatient Usage:

- At the end of April, it is expected there were 235 people in contractual specialized residential placements, 22 people in semi-independent homes, and 33 people in the direct run or board operated homes including Glen Oaks apartments. This is a total of 290 people in supported residential living arrangements. The average daily cost of a person in a contracted specialized residential home is \$261. The average daily cost of a person residing in a semi-independent placement home is \$564 and all SIP arrangements are contractual placements. The average daily cost of a person residing in the board operated home is \$416.
- The amount paid to community inpatient hospitals, on a cash basis, was \$675,702 in the month of April. Inpatient services are over budget by \$321,824 so far this fiscal year. Community hospital usage is over budget 5%, however, usage of the Forensic Center for incarcerated individuals not guilty by reason of insanity is overbudget by 13%.

Revenues and Spending:

- Revenues exceed expenses by \$2,813,871 through April 30, 2023.
- Cash on hand decreased \$3,666,816 in April. The NMRE advanced the April capitation in May.

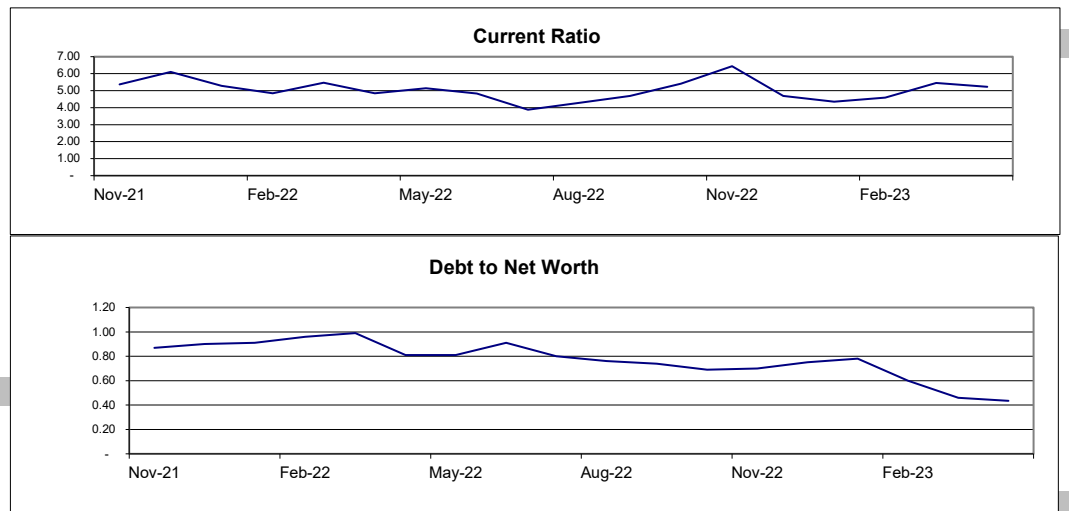
Northern Lakes Community Mental Health Authority
Finance Report As of 4/30/2023
Fiscal Year Ending September 30, 2023

Revenues	2023-#1	2023-#1	Actual	Actual	Percentage	Capitated Category	(Expenses)		
	Total Budget	YTD Budget	YTD Revenues	Over/(Under)	YTD		Provided Advances	Earned Revenues	Worries (Over)/Under
State Sources	\$ 5,222,029	3,046,184	3,588,133	541,950	69%				
Local Sources	\$ 2,031,467	1,185,022	1,674,112	489,090	82%	General Funds	1,831,303	991,417	839,886
Medicaid Sources	\$ 68,140,272	39,748,492	40,831,146	1,082,654	60%	Medicaid	37,329,361	35,451,825	1,877,537
Reimbursements	\$ 2,745,124	1,601,322	641,192	(960,131)	23%	Healthy Michigan	5,038,270	4,754,734	283,536
Northern Health Care Mgmt	\$ 11,952,470	6,972,274	6,259,008	(713,266)	52%	Behavioral Health Home	330,436	164,734	165,702
Total Revenues	\$ 90,091,362	52,553,294	52,993,591	440,297	59%	Northern Health Care Mgmt	6,259,008	5,716,441	542,567
						Local Requirements	1,674,112	532,738	1,141,374
							52,462,490	47,611,888	4,850,602
Expenditures	2023-#1	2023-#1	Actual	Actual	Percentage	Capitated Category	(Expenses)		
	Total Budget	YTD Budget	YTD Expenses	(Over)/Under	YTD		Provided Advances	Earned Revenues	Worries (Over)/Under
Personnel	\$ 30,356,676	17,708,061	16,253,142	1,454,919	54%				
Direct Operations	\$ 2,570,154	1,499,257	1,696,487	(197,231)	66%				
Contractual Services	\$ 12,967,971	7,564,650	6,491,802	1,072,848	50%				
Contract Agencies	\$ 7,891,208	4,603,205	5,350,473	(747,268)	68%				
Residential Contracts	\$ 26,547,018	15,485,761	14,358,204	1,127,556	54%				
Inpatient Services	\$ 6,491,000	3,786,417	4,108,241	(321,824)	63%				
Transportation	\$ 1,535,132	895,494	882,776	12,718	58%				
Occupied Space	\$ 1,732,203	1,010,452	1,038,595	(28,144)	60%				
Total Expenses	\$ 90,091,362	\$ 52,553,295	\$ 50,179,720	\$ 2,373,574	56%				
Net Revenues over Expenditures			\$ 2,813,871			Earned and allowable to retain			
						1,941,208			

Medicaid and Healthy Michigan Plan expenses that exceed capitation advances would need to be requested to be covered by Medicaid savings or the Medicaid Internal Service Fund held by the NM

Services/expenses which must be covered by General Funds that exceed the General Funds allocation must be covered by Local Sources or NLCMHA Fund Balance.

Monthly Indicators	Previous Month	Current Month
Current Ratio	5.46	5.23
Cash on Hand	\$ 30,025,795	\$ 26,358,979
Short Term Liabilities	\$ 5,499,205	\$ 5,043,469
According to Financial Performance Indicators the goal is greater than 2.		
Debt to Net Worth	0.46	0.43
Short Term Liabilities	\$ 5,499,205	\$ 5,043,469
Long Term Liabilities	\$ 2,968,615	\$ 2,968,615
Compensated Absences	\$ 1,386,866	\$ 1,386,866
Net Pension Liability	\$ 1,581,749	\$ 1,581,749
Unrestricted Fund Balance Audited	\$ 12,072,621	\$ 12,072,621
Net Assets (Undepreciated Value)	\$ 6,360,903	\$ 6,360,903
According to Financial Performance Indicators the goal is less than 2.5.		
Proforma YTD Fund Balance	\$ 13,204,729	\$ 14,013,829
Self Funded Health Insurance ISF	\$ 183,178	\$ 184,400
Directly provided services	38.9%	38.7%
Contractually provided services	61.1%	61.3%



Northern Lakes Community Mental Health Authority				
List of Contracts and Agreements Entered Into				
For the Month of April 2023				
		Vendor by Category	Comments or Details	Estimated Annual Financial Value of Contract or Amendment
1		Specialized Residential Services and Community Living Supports		
	*	Hope Network West Michigan SRS Contract	To Add Neo Bristol and Neo Rockford	\$306,000
	*	Hope Network West Michigan Sixth Amendment to CLS Contract	To Remove Neo Bristol and Neo Rockford	(\$306,000)
	*	Frances Specialized Residential, LLC	New SRS Contract	\$200,750
	*	Oakridge Specialized Residential, LLC	New SRS Contract	\$600,335
	*	Packard Specialized Residential, LLC	New SRS Contract	\$164,250
	*	Hope Network Behavioral Health Services Third Amendment	To Add Samuel's House	\$350,000
	*	Eden Prairie SRS Contract	To Add Bell Oaks II at Coleman	\$540,288
				\$1,855,623
2		Inpatient and Hospital Contracts Including Single Case Agreements		
	*	None		
3		Independent Contractors and Leases		
	*	None		
4		Northern Health Care Management		
	*	Loving Waters Home Care cleaning company	Home help provider	\$15,000
				\$15,000
5		Other Administrative Services (Software and EAP agreement)		
	*	Catholic Human Services (Employee Assistance Program)	\$500 per year for the EAP services, \$160 per session utilized by staff	\$ 2,420
	*	DocTract	Policy Software Annual Subscription Renewal	\$ 7,512
				\$ 9,932
6		Other Professional Services (Legal and Accounting)		
	*			
7		Grants-Revenue Contracts		
	*	MDHHS-Workforce Stabilization Grant	Three year grant to support workforce stabilization. NLCMHA will provide leadership training to the workforce.	\$ 68,000
				\$ 68,000

**NORTHERN MICHIGAN REGIONAL ENTITY
BOARD OF DIRECTORS MEETING
10:00AM – APRIL 26, 2023
GAYLORD BOARDROOM**

ATTENDEES:	Kate Dahlstrom, Ed Ginop, Gary Klacking, Eric Lawson, Mary Marois, Michael Newman, Gary Nowak, Jay O’Farrell, Karla Sherman, Don Smeltzer, Don Tanner, Chuck Varner
ABSENT:	Terry Larson, Richard Schmidt
NMRE/CMHSP STAFF:	Brian Babbitt, Jodie Balhorn, Amy Christie, Eric Kurtz, Brian Martinus, Nena Sork, Teresa Tokarczyk, Deanna Yockey, Carol Balousek, Lisa Hartley
PUBLIC:	Dave Freedman, Donna Hardies, Amy Horstman, Susan Pulaski, Ellen Templeton, Sue Winter

CALL TO ORDER

Let the record show that Chairman Don Tanner called the meeting to order at 10:00AM.

ROLL CALL

Let the record show that Terry Larson and Richard Schmidt were excused from the meeting on this date; all NMRE Board Members were in attendance.

PLEDGE OF ALLEGIANCE

Let the record show that the Pledge of Allegiance was recited as a group.

ACKNOWLEDGEMENT OF CONFLICT OF INTEREST

Let the record show that no conflicts of interest to any of the meeting Agenda items were declared.

APPROVAL OF AGENDA

Let the record show that no changes to the meeting agenda were proposed.

MOTION BY KARLA SHERMAN TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY BOARD OF DIRECTORS MEETING AGENDA FOR APRIL 26, 2023; SUPPORT BY GARY KLACKING. MOTION CARRIED.

APPROVAL OF PAST MINUTES

Let the record show that the March minutes of the NMRE Governing Board were included in the materials for the meeting on this date.

MOTION BY GARY NOWAK TO APPROVE THE MINUTES OF THE MARCH 22, 2023 MEETING OF THE NORTHERN MICHIGAN REGIONAL ENTITY BOARD OF DIRECTORS; SUPPORT BY KATE DAHLSTROM. MOTION CARRIED.

CORRESPONDENCE

1) The minutes from the March 7, 2023PIHP CEO meeting.

- 2) The minutes from the April 6, 2023 MDHHS PIHP CEO meeting.
- 3) Document from the Community Mental Health Association of Michigan (CMHAM) dated March 2023 titled "Concerns Relative to the March 23 MDHHS-Proposed Conflict-Free Access and Planning Options."
- 4) Press release from MDHHS dated March 23, 2023 announcing the launch of the Electronic Visit Verification (EVV) System in Michigan.
- 5) Press release from MDHHS dated April 2, 2023 announcing the expansion of dental benefits for Medicaid beneficiaries.
- 6) MDHHS Service Delivery Transformation Section Update for April 2023.
- 7) Letter from Jackie Sproat (MDHHS) to NMRE CEO, Eric Kurtz, dated April 3, 2023 accepting the NMRE's FY23 Risk Management Strategy.
- 8) Letter from Roslund Prestage and Company dated April 19, 2023 to the NMRE Governing Board members extending the opportunity for them to share with RPC any concerns they have regarding the PIHP, whether they be in relation to FSR reporting, controls over assets, or issues regarding personnel, as well as an opportunity for them to ask any questions they have regarding the FY22 compliance audit.
- 9) Rough projections of Capitation Populations and Funding by Month using pre-PHE Populations supplied by CMHAM.
- 10) Save the Date for the Caro Psychiatric Hospital Open House Celebration on June 5, 2023 at 10:00AM.
- 11) The draft minutes of the April 12, 2023 regional Finance Committee meeting.

Mr. Kurtz drew attention to the press release issued by the Department announcing the launch of the EVV system. The EVV system is intended to ensure beneficiaries are receiving in-home services as planned and authorized and improve the accuracy of payments for services provided. Michigan is required to implement EVV for all Medicaid personal care services and home health services that require an in-home visit by a provider. MDHHS has contracted with HHAeXchange to create the EVV system.

The announcement from MDHHS on April 3rd regarding the expansion of dental benefits for Medicaid beneficiaries was referenced; this will likely help keep beneficiaries enrolled in traditional Medicaid.

The rough projections of capitation populations and funding by month using pre-Public Health Emergency (PHE)/COVID populations were reviewed. The cumulative loss for the months June through September could reach \$42.7M statewide.

ANNOUNCEMENTS

Let the record show that there were no announcements during the meeting on this date.

PUBLIC COMMENT

Let the record show that the members of the public attending the meeting virtually were recognized.

Executive Committee Report

Let the record show that the NMRE Executive Committee met on April 20, 2023.

A legal opinion obtained from Steve Burnham dated April 6, 2023 was included in the meeting materials.

Mr. Burnham concluded that, because its role is to “advise and recommend,” the NMRE Substance Use Disorder (SUD) Oversight Committee is not subject to the Open Meetings Act (OMA). Based on this opinion, NMRE SUD Oversight Committee Members will be able to fully participate (vote) in meetings if they attend by remote means. Mr. Kurtz stressed that the NMRE still intends for SUD Oversight Committee meetings to be open to the public with meeting times, agenda, and minutes posted to the NMRE.org website.

The Executive Committee reviewed the former SUD Oversight Board “Bylaws” and revised the wording to clarify that the NMRE SUD Oversight Committee acts as a sub-committee of the NMRE Governing Board; the document was retitled “Northern Michigan Regional Entity Substance Use Disorder Oversight Committee Operating Procedures” and was distributed to Board members during the meeting. Clarification was made that the document has been reviewed by Mr. Burnham, who found no issues.

Pursuant to the “Operating Procedures” the NMRE SUD Oversight Committee officers will be members of, and appointed by, the NMRE Governing Board.

If there is cause for an NMRE SUD Oversight Committee member be removed, the SUD Oversight Committee Chair will communicate the need to the NMRE Board Chair; the NMRE Board Chair will communicate with the County.

It was noted that the frequency of meetings could be reduced from every other month (6) to quarterly (4).

MOTION BY KARLA SHERMAN TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY SUBSTANCE USE DISORDER OVERSIGHT COMMITTEE OPERATING PROCEDURES AS PRESENTED AND REVIEWED ON THIS DATE; SUPPORT BY MARY MAROIS. ROLL CALL VOTE.

“Yea” Vote: K. Dahlstrom, E. Ginop, G. Klacking, E. Lawson, M. Marois, M. Newman, G. Nowak, J. O’Farrell, R. Schmidt, K. Sherman, D. Tanner, C. Varner

“Nay” Votes: Nil

MOTION CARRIED.

MOTION BY GARY NOWAK TO APPOINT RICHARD SCHMIDT CHAIR AND JAY O’FARRELL VICE-CHAIR OF THE NORTHERN MICHIGAN REGIONAL ENTITY SUBSTANCE USE DISORDER OVERSIGHT COMMITTEE; SUPPORT BY KARLA SHERMAN. MOTION CARRIED.

MOTION BY GARY NOWAK TO ESTABLISH THAT THE CHAIR AND VICE-CHAIR OF THE NORTHERN MICHIGAN REGIONAL ENTITY SUBSTANCE USE DISORDER OVERSIGHT COMMITTEE WILL SERVE A TERM OF ONE YEAR; SUPPORT BY KATE DAHLSTROM. MOTION CARRIED.

A group of NMRE staff met on April 19th to review and update the liquor tax process. NMRE has learned that, in the UP, the county submits the liquor tax application (rather than the Provider). This is something being considered to ensure that counties support PA2 initiatives and monitor fund balances. A revision to the NMRE Liquor Tax Request Policy and Procedure will be presented to the NMRE Board soon.

Ms. Dahlstrom asked whether there has been any discussion about the PIHPs getting any of the marihuana tax funds. Mr. Kurtz responded that marihuana tax funds are distributed to municipalities and counties. State law outlines how much is distributed from the Marihuana Regulation fund. Aside from the funds distributed to municipalities and counties, additional funding is sent to the School Aid Fund and the Michigan Transportation Fund.

Ms. Dahlstrom referred to the April 2023 update on the MDHHS Service Delivery Transformation Section. She inquired about the efforts to Promote the Integration of Physical and Behavioral Health Care (PIPBHC). Clarification was made that the PIPBHC is a five-year Substance Abuse and Mental Health Services (SAMHSA) grant that seeks to improve the overall wellness and physical health status for adults with SMI or children with an SED. Integrated services must be provided between a community mental health center (CMH) and a federally qualified health center (FQHC). It was noted that some FQHCs are declining to participate. Mr. Kurtz added that he believed Northern Lakes received the SAMHSA grant several years ago but was not certain.

CEO Report

The NMRE CEO Monthly Report for April 2023 was included in the materials for the meeting on this date. Mr. Kurtz drew attention to his presentation to the Leelanau County Board of Commissioners on April 11th regarding PA2 funding. It was noted that counties need to be provided some education about local match.

February 2023 Financial Report

- Net Position showed net surplus Medicaid and HMP of \$4,136,233. Budget stabilization was reported as \$16,369,542. The total Medicaid and HMP Current Year Surplus was reported as \$20,505,775. Medicaid and HMP combined ISF was reported as \$16,369,542; the total Medicaid and HMP net surplus, including carry forward and ISF was reported as \$36,875,317.
- Traditional Medicaid showed \$82,518,695 in revenue, and \$80,370,514 in expenses, resulting in a net surplus of \$2,148,181. Medicaid ISF was reported as \$9,306,578 based on the current FSR. Medicaid Savings was reported as \$7,742,649.
- Healthy Michigan Plan showed \$14,542,394 in revenue, and \$12,554,342 in expenses, resulting in a net surplus of \$1,988,052. HMP ISF was reported as \$7,062,964 based on the current FSR. HMP savings was reported as \$8,626,893.
- Health Home showed \$908,630 in revenue, and \$747,784 in expenses, resulting in a net surplus of \$160,846.
- SUD showed all funding source revenue of \$12,179,321, and \$10,591,204 in expenses, resulting in a net surplus of \$1,588,117. Total PA2 funds were reported as \$5,001,798.

Ms. Yockey reported that a decline in revenue is expected June through September due to Medicaid redeterminations. Despite that, a lapse is anticipated for FY23. A rate adjustment is possible in September, which would be retroactive to July 1, 2023.

Liquor tax/PA2 funds have been approved for FY23 in the amount of \$2,720,209. Of that, \$652,083 has been billed through February.

It was noted that the deficits reported for traditional Medicaid for three of the five CMHSPs are a result of benefit stabilization initiatives and will be offset by surplus Healthy Michigan and each Boards' allocation of carry-forward funds.

MOTION BY GARY NOWAK TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY MONTHLY FINANCIAL REPORT FOR FEBRUARY 2023; SUPPORT BY KATE DAHLSTROM. MOTION CARRIED.

Operations Committee Report

The minutes from April 18, 2023 were included in the materials for the meeting on this date.

Ms. Dahlstrom referenced discussion about SED/IDD youth being left in emergency departments for extended periods. She questioned why hospitals don't modify some ED rooms to make them more comfortable for these situations. Mr. Kurtz responded that hospitals need to take the lead in these efforts. It was noted that the state is considering having PIHPs/CMHSPs pay for ED stays when no beds are available to place people in need of hospitalization. Mr. Kurtz added that this solution will not address the issue.

MDHHS has announced the location of a new inpatient psychiatric hospital located at the current site of the Hawthorn Center in Northville. The new hospital will care for patients currently served at both Hawthorn Center and Walter Reuther Psychiatric Hospital in Westland. During construction of the new facility, patients currently being cared for at Hawthorn Center will be moved to a separate unit at Walter Reuther. Construction is expected to begin this fall and anticipated completion is in 2026.

NMRE SUD Oversight Board Report

Let the record show that the next SUD Oversight Board meeting is scheduled for July 10, 2023 at 10:00AM.

NEW BUSINESS

Jefferson Wells

A proposal from an independent, third-party (Jefferson Wells) to conduct Medicaid Encounter Verification audits was included in the meeting materials. The cost for these services was provided based on the number of claims reviewed. The NMRE will likely fall in the middle range. Mr. Kurtz would like to begin with a one-year engagement.

Number of Claims (all lines)	Fee Estimates
500	\$32,000 – \$40,000
1,000	\$40,000 – \$55,000
2,000	\$80,000 – \$95,000

MOTION BY JAY O'FARRELL TO APPROVE A ONE-YEAR CONTRACT WITH JEFFERSON WELLS FOR MEDICAID ENCOUNTER VERIFICATION SERVICES IN AN AMOUNT NOT TO EXCEED FIFTY-FIVE THOUSAND DOLLARS (\$55,000.00); SUPPORT BY MARY MAROIS. ROLL CALL VOTE.

"Yea" Vote: K. Dahlstrom, E. Ginop, G. Klacking, E. Lawson, M. Marois, M. Newman, G. Nowak, J. O'Farrell, R. Schmidt, K. Sherman, D. Tanner, C. Varner

"Nay" Votes: Nil

MOTION CARRIED.

OLD BUSINESS

Grand Traverse County and Northern Lakes CMHA

Mr. Kurtz reported that the revised enabling agreement is making its way through the County Commissions. Voting should conclude on May 9th.

NMRE SUD Oversight Committee Operating Procedures

Let the record show that this topic was discussed under the Executive Committee report.

PRESENTATION

PhotoVoice

Amy Horstman and Ellen Templeton from the Health Department of Northwest Michigan were in attendance to present on the Drug-Free Northern Michigan (DFNM) 21-County Alliance PhotoVoice Project. Each of the prevention coalitions in the 21-country region were asked to recruit at least one youth to participate in the "Youth Speak: A Vaping Prevention PhotoVoice Project." In PhotoVoice, participants take photographs and provide narratives to translate their experiences. For this project, participants were asked to respond to the following framing questions:

- 1) What influences youth to start vaping?
- 2) What keeps youth from vaping?
- 3) How does youth vaping impact your community?

The PhotoVoice project was shared with the Board. The PhotoVoice project was also shared during the DFNM 21-County Alliance meeting on April 21st, which included legislative staffers as attendees. The project will next be presented at various Town Halls throughout the region.

Mr. Smeltzer complimented Ms. Horstman and Ms. Templeton on their efforts.

It was noted that MiPHY data shows youth vaping at approximately 20%.

COMMENTS

Board Members

- Ms. Dahlstrom distributed an article by Sarah Spohn from FlintSide dated January 11, 2023 titled, "Genesee Health System's New Facility Showcases Commitment to Flint Youths' Mental Health." The Center for Children's Integrated Services combined all kids' programs into one building; the Center is also a federally qualified health center which provides primary care.

Ms. Dahlstrom discussed the efforts undertaken by the Northern MI Community Health Innovations Region (CHIR) to develop a mental health facility that would include both crisis stabilization beds, short-term residential beds, and access to follow-up care for both adults and children in the Grand Traverse region.

Mr. Kurtz noted that the NMRE will be issuing a Request for Proposals (RFP) to attempt to develop a children's Crisis Residential Unit (CRU) in the 21-county region. Mr. Kurtz noted that similar facilities for adults are having a very difficult time recruiting and maintaining staff.

- Ms. Marois thanked the Executive Committee for their recommendations related to the NMRE Substance Use Disorder Oversight Committee.

Staff/CMHSP CEOs

It was reported that 130 individuals are registered for the NMRE Substance Use Disorder Day of Recovery Education being held at Treetops Resort on May 8th.

Public

Ms. Dahlstrom read a statement from community member Jessica Perez. In her role as a NAMI Navigator, Ms. Perez provides ongoing support to families and individuals during a mental health crisis. Ms. Perez shared her concerns about a recent Northern Lakes case.

NEXT MEETING DATE

The next meeting of the NMRE Board of Directors was scheduled for 10:00AM on May 24, 2023.

ADJOURN

Let the record show that Mr. Tanner adjourned the meeting at 11:50AM.

**CEO Response to April 20, 2023 Board Means Self-Assessment
Board Monitoring Report Evaluation
May 18, 2023**

Policy 2.8 - Communication and Support to the Board - Internal Inspection

Eleven (11) out of the sixteen (16) board members attending, completed and submitted the monitoring report.

Question One: Was this report submitted when due?– 11 Yes

Question Two: Did the report lay out the CEO's interpretation of the request? – 11 Yes

Question Three: Was I convinced that the interpretation is justified and reasonable? – 11 Yes

Question Four: Did the interpretation address all aspects of the subject?- 11 Yes

Question Five: Does the information show compliance with board direction/policy? – 11 Yes

CEO Response: 2023

In review of Board Member's assessment and comments, we are in 100% compliance with this Board policy.

Respectfully Submitted,

Brian Martinus
Interim CEO

**ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 2.9 INVESTMENTS
INTERNAL INSPECTION - CEO
MAY 18, 2023**

2.9 Investments

2.9.1 The CEO shall not fail to invest available cash using the following objectives:

Safety – Safety of principal is the foremost objective of the investment program.

Investments shall be undertaken in a manner that seeks to insure the preservation of capital in the overall portfolio.

Diversification – The investments will be diversified by security type and institution in order that potential losses on individual securities do not exceed the income generated from the remainder of the portfolio.

Liquidity – The investment portfolio shall remain sufficiently liquid to meet all operating requirements that may be reasonably anticipated.

Return on Investment – The investment portfolio shall be designed with the objective of obtaining a rate of return throughout the budgetary and economic cycles, taking into account the investment risk constraints and the cash flow characteristics of the portfolio.

2.9.2 The CEO shall not invest outside the authority authorized by Act 20 of 1943, as amended which limits investments to:

- U.S. Government Treasury Bills, notes, bonds, and other direct obligations of the United States, no limit.
- U.S. Government or Federal agency obligation repurchase agreements when backed by the full faith and credit of the U.S. government, no limit.
- Certificates of deposit, savings accounts, deposit accounts, or depository receipts of federally insured banks, insured savings and loan associations or credit unions insured by the National Credit Union Administration that are eligible to be depository of surplus money belonging to the State. Limits:
 - Not more than 25% of the combined capital and surplus of any bank.
 - Not more than the insured amount (\$250,000) for certificates of deposit.
 - Commercial paper rated at time of purchase within the two highest classifications established by not less than two standard rating services. Maturity cannot be more than 270 days after purchase.
- Banker's acceptance of United States banks.
- Mutual funds composed of investments, which are legal for direct investments by local units of government in Michigan.
- Financial institution pooled investments.

2.9.3 The CEO shall not fail to, no less than annually, assess the status and security of the defined benefit pension. The CEO shall not fail to inform the Board annually as to status and if additional funds will be needed to achieve 100% funding.

2.9.4 The CEO shall not fail to periodically analyze the financial status and performance of our deposit bank to ensure investment safety and investment performance.

2.9.5 The CEO will not designate a bank for cash deposits and check issuing which does not have a branch office in both Traverse City and Cadillac for deposits, have interest on account balances, and less than 6% as it's Tier 1 Assets to Risk Bearing Asset ratio.

CEO Interpretation - 2023

Attached are two financial documents reflecting investments and pension operations. It is our belief that our investment practices are consistent with the four policy objectives. All of the investments are federally insured or federally backed except the Huntington Municipal Analyzed Checking account.

2.9.1. The CEO shall not fail to invest available cash using the following objectives: Safety, Diversification, Liquidity, and Return on Investment.

Response:

NLCMHA uses one bank, Huntington National Bank. The past year the volume of cash maintained by NLCMHA has been consistent at about \$26M. The public health emergency placed a freeze on Medicaid redeterminations. Capitation advances from the NMRE had increased the volume of Medicaid provided to NLCMHA. The redetermination freeze will be lifted as of June 1st with a 12 month plan of reassessing every Medicaid beneficiary's qualifications. Likewise, individuals with a Medicaid deductible will be reinstated requiring NLCMHA to manage qualifying services and report them to MDHHS to instate Medicaid for each month that the deductible is met. This will also have an impact on the Medicaid advance cash flow. NLCMHA spends about \$7.5M each month through a combination of provider contracts and payroll.

Document – Investments as of 4/30/2023

2.9.2. The CEO shall not invest outside the authority authorized by Act 20 of 1943, as amended, which limits investments to:

Response:

Huntington National Bank possesses the NLCMHA investment policy which is in compliance with Act 20 and is reviewed annually. The Huntington Private Bank monitors investments held by NLCMHA for maturity and calls. All bonds are US Government backed and rated AA+. There are no Certificate of Deposits currently held by NLCMHA. Huntington Private Bank uses a Conservative Deposit Account to hold funds between investment maturities, calls, and transfers.

Document – Investments as of 4/30/2023

2.9.3. The CEO shall not fail to, no less than annually; assess the status and security of the defined benefit pension. The CEO shall not fail to inform the Board annually as to status and if additional funds will be needed and if available to maintain 100% funding.

Response:

Attached is a summary of the latest position of the Defined Benefit Pension plan (2021). The actuarial report from MERS is received in about June of each year for the prior calendar year. The last actuarial report received had a decrease in the actuarial liability as compared to the year before of \$724,293. The actuarial deficit of \$2.1M is the lowest value published since 2011. The true market value and actuarial valuation of assets are within \$34K of each other with no shortfall and a small surplus of expected assets. True market value of assets is the most volatile number in any defined benefit pension plan because it is based on a one point in time day each year, December 31st. The defined benefit pension plan is funded at 92%, up from 80% the prior year. The combined

benefit liability and market value surplus increased by \$3.2M to \$2.1M.

Document – Defined Benefit Pension Statistics 12-31-2021

2.9.4. The CEO shall not fail to periodically analyze the financial status and performance of our deposit bank to ensure investment safety and investment performance.

Response:

Huntington National Bank is based out of Columbus, Ohio. Huntington National Bank is the 22nd largest bank in the United States with \$182 B in total assets and \$151 B in total deposits. Huntington National Bank is rated 5 stars (superior) by Bauer Financial. Investment performance for NLCMHA within the confines of PA 20 does not produce great yields although is safe and secure.

2.9.5. The CEO will not designate a bank for cash deposits and check issuing which does not have a branch office in both Traverse City and Cadillac for deposits, have interest on account balances, and less than 6% as it's Tier 1 Assets to Risk Bearing Asset ratio.

Response:

Huntington National Bank has branches in both required locations. Interest is received on all funds deposited and invested. The tier 1 capital ratio is 11.3% as of Q1 2023. This is an increase of .047% from the prior year and well above the 6% regulators consider adequate.

Respectfully Submitted,

Brian Martinus (Lauri Fischer)

Board Policy being monitored

2.9 Investments

May 18, 2023

1. Was this report submitted when due?
Yes No (requires comment)

Comment:

2. Was I convinced that the interpretation is justified and reasonable?
Yes No (requires comment)

Comment:
TWO

3. Did the interpretation address all aspects of the subject?
Yes No (requires comment)

Comment:

4. Does the information show compliance with board direction/policy?
Yes No (requires comment)

Comment:

5. Other Comment: _____

Northern Lakes Community Mental Health Authority
Investments as of 4-30-2023

Broker/Bank	Description Of Bond	Market Value	Yield	Maturity	S&P Rating	Cost Basis	Acquired
Huntington Bank	Federal National Mortgage Association	\$198,177	0.25%	7/10/2023	AA+	\$200,039	
Huntington Bank	US Treasury N/B	\$98,255	0.00%	9/7/2023	AA+	\$96,232	
Huntington Bank	US Treasury N/B	\$49,252	0.00%	8/17/2023	AA+	\$48,809	
Huntington Bank	US Treasury N/B	\$247,964	0.00%	6/29/2023	AA+	\$247,084	
Huntington Bank	US Treasury N/B	\$242,148	2.13%	9/30/2024	AA+	\$248,932	
Huntington Bank	US Treasury N/B	\$243,242	2.63%	3/31/2025	AA+	\$248,975	
Huntington Bank	US Treasury N/B	\$244,766	3.00%	9/30/2025	AA+	\$251,052	
Huntington Bank	US Treasury N/B	\$198,375	2.88%	9/30/2023	AA+	\$198,837	
Huntington Bank	US Treasury N/B	\$396,000	2.88%	10/31/2023	AA+	\$402,251	
Huntington Bank	US Treasury N/B	\$242,461	2.63%	12/31/2025	AA+	\$248,281	
Huntington Bank	US Treasury N/B	\$613,770	2.50%	1/31/2024	AA+	\$621,038	
Huntington Bank	US Treasury N/B	\$96,188	2.38%	4/30/2026	AA+	\$96,211	
Huntington Bank	US Treasury N/B	\$238,398	2.13%	5/31/2026	AA+	\$239,545	
Huntington Bank	US Treasury N/B	\$486,328	2.38%	8/15/2024	AA+	\$496,119	
Huntington Bank	US Treasury N/B	\$248,477	1.38%	6/30/2023	AA+	\$248,947	
Huntington Bank	US Treasury N/B	\$245,039	2.25%	1/31/2024	AA+	\$250,180	
Huntington Bank	US Treasury N/B	\$97,219	2.00%	4/30/2024	AA+	\$100,655	
Huntington Bank	US Treasury N/B	\$243,516	2.75%	6/30/2025	AA+	\$249,648	
Huntington Bank	US Treasury N/B	\$195,344	2.25%	3/31/2024	AA+	\$194,571	
Huntington Bank	US Treasury N/B	\$243,633	2.63%	5/15/2025	AA+	\$249,297	
Huntington Bank	US Treasury N/B	\$240,781	2.63%	5/31/2027	AA+	\$242,116	
Huntington Bank	US Treasury N/B	\$122,617	3.00%	6/30/2024	AA+	\$122,261	
Huntington Bank	US Treasury N/B	\$253,789	4.50%	11/15/2025	AA+	\$252,510	
Huntington Bank	US Treasury N/B	\$124,805	4.13%	1/31/2025	AA+	\$124,790	
Huntington Bank	Eaton Vance Short Duration Government Income Fund	\$271,857	2.07%	NA	NA	\$293,805	Incrementally
		\$5,882,398				\$5,972,185	
	Total Investments	\$5,882,398				\$5,972,185	
The following are cash held at the Broker or Bank							
Huntington Bank	Huntington Conservative Deposit Account	\$34,919	0.01%				
Huntington Bank	Municipal Analyzed Checking Account	\$20,441,662	0.01%				
		\$20,476,581					
	Market Value Grand Total	\$26,358,979					

Northern Lakes Community Mental Health Authority
History of Defined Benefit Pension Plan as of Most Recent Published Report
As of December 31, 2021

Summary of MERS Defined Benefit Pension by Year	2017	2018	2019	2020	2021
Valluation Assets	\$21,550,222	\$21,009,651	\$20,603,495	\$20,832,999	\$23,288,419
PV of Accrued Benefits	\$25,761,745	\$25,381,780	\$25,550,537	\$26,132,222	\$25,407,929
Actuarial Liability	\$25,761,745	\$25,381,780	\$25,550,537	\$26,132,222	\$25,407,929
Actuarial Surplus (Deficit)	(\$4,211,523)	(\$4,372,129)	(\$4,947,042)	(\$5,299,223)	(\$2,119,510)
Market Value	\$21,308,982	\$19,180,904	\$20,335,495	\$21,425,257	\$23,322,867
Market Value (Shortfall) Surplus	(\$241,240)	(\$1,828,747)	(\$268,000)	\$592,258	\$34,448
Combined Liability	(\$4,452,763)	(\$6,200,876)	(\$5,215,042)	(\$4,706,965)	(\$2,085,062)
Percentage (Liability) Surplus to Accrued Benefit	-17.3%	-24.4%	-20.4%	-18.0%	-8.2%
Percent Funded - Total	83.7%	83.0%	81.0%	80.0%	92.0%

**CEO RESPONSE TO APRIL 20, 2023 BOARD MEANS MONITORING REPORT
3.7 GOVERNANCE COMMITTEES – DIRECT INSPECTION
MAY 18, 2023**

Policy 3.7 - GOVERNANCE COMMITTEES

Eleven (11) out of the sixteen (16) board members attending, completed and submitted the monitoring report.

Question One (Do you believe we are in strict compliance with the policy as stated for each provision?) 11 – Yes, 1 “Not Sure” (also circled yes).

Comment:

“I do not see where committees are to be made up of one person only from each county as we have been doing. Does the COW actually host the 3 forums and joint activities? Whole I believe it is a good effort to get one person from each county on each committee, it can also result in a lot of work for members from the smaller counties. I don’t believe that county commissions do this with their precincts, but I could be wrong.”

Question Two (If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance?) Comment: None.

Question Three (How do you think we could improve our process to be in full compliance?) Comment: *“I believe this policy should be updated.”*

Question Four (What do we need to learn or discuss in order to live by this policy more completely?) Comment: None.

Question Five (Does this policy remain in compliance with the Policy Governance model in terms of content and format?) 9 Yes, 1- unanswered, 1- “Not sure.”

Comment:

CEO Response 2023:

I appreciate the Board’s assessment that we are in 100% compliance with this policy.

Respectfully Submitted

Brian Martinus
Interim CEO

**CEO RESPONSE TO APRIL 20, 2023 BOARD MEANS MONITORING REPORT
3.7A RECIPIENT RIGHTS ADVISORY COMMITTEE – DIRECT INSPECTION
MAY 18, 2023**

Policy 3.7A - RECIPIENT RIGHTS ADVISORY COMMITTEE

Eleven (11) out of the sixteen (16) board members attending, completed and submitted the monitoring report.

Question One (Do you believe we are in strict compliance with the policy as stated for each provision?) – 10 Yes, 0 No, 1 – Unknown answer. (Circled and crossed out “No”. Wrote then crossed out “Not Sure”).

Comment: *“Supposed to be 7-9 members, is it?”*

Question Two (If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance? Comment: *“I do not serve on the RRAC & I have not been on this board in May during appointments.”*

Question Three (How do you think we could improve our process to be in full compliance? Comment: None.

Question Four (What do we need to learn or discuss in order to live by this policy more completely? Comment: *“I assume the RRAC Appeals process is discussed & defined in outside documents. How does it work?”*

Question Five (Does this policy remain in compliance with the Policy Governance model in terms of content and format?) – 11 Yes and 0 No. 1 “Not sure”.

Comment: None

CEO Response 2023:

I appreciate the Board’s assessment that we are in 90% compliance with this policy.

Respectfully Submitted,

Brian Martinus
Interim CEO

**CEO RESPONSE TO APRIL 20, 2023 BOARD MEANS MONITORING REPORT
3.7B RECIPIENT RIGHTS APPEALS COMMITTEE – DIRECT INSPECTION
MAY 18, 2023**

Policy 3.7B - RECIPIENT RIGHTS APPEALS COMMITTEE

Eleven (11) out of the sixteen (16) board members attending, completed and submitted the monitoring report.

Question One (Do you believe we are in strict compliance with the policy as stated for each provision?) – 10 Yes, 0 No, 1 “Not Sure”.

Comment: None

Question Two (If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance? Comment: *“I do not serve on this committee.”*

Question Three (How do you think we could improve our process to be in full compliance? Comment: None.

Question Four (What do we need to learn or discuss in order to live by this policy more completely? Comment: *“Does this committee take a vote or just recommend to the RRO. How does it work?”*

Response: The committee will review the case and make a determination to send back to the ORR department.

Question Five (Does this policy remain in compliance with the Policy Governance model in terms of content and format?) – 11 Yes, 0 No, 1 “Not Sure”, 1 Unanswered.

Comment: None

CEO Response 2023:

I appreciate the Board’s assessment that we are in 90% compliance with this policy.

Respectfully Submitted,

Brian Martinus
Interim CEO

BOARD MEANS SELF-ASSESSMENT
BOARD POLICY MONITORING 3.8 COST OF GOVERNANCE (POLICY)
DIRECT INSPECTION
MAY 18, 2023

3.8 Cost of Governance (Policy)

Because excellence in governance produces tangible financial benefits and is dependent on the Board's level of skill and support, the Authority shall commit financial resources to accomplish the following:

- 3.8.1 Introduction of new members to the mental health system;
- 3.8.2 Orientation of new members to Board Governance Policies and to the functions and responsibilities of the Board as a whole and of its individual members;
- 3.8.3 Orientation of new members to the Authority's management structures and functions;
- 3.8.4 Provision of opportunities for the education and training of Board members;
- 3.8.5 Utilization of outside resources to promote a culture of civility and genuine openness to and fair consideration of the views and values of stakeholders; and
- 3.8.6 Enabling participation on the Board through payment of per diem and reasonable expenses.

Prior Approval for Conferences. A member must obtain the prior approval of the Board Chair to attend conferences and meetings (other than Board or assigned committee meetings) as a condition of payment of per diem and reimbursement of expenses by the Authority. Subject to budget parameters, the Board Chair shall make a good faith effort to ensure equal access among members to conferences, meetings and activities.

Per Diem Rates. Board members are entitled to per diem for time associated with attendance at meetings of the Board, meetings of Board committees, and conferences and meetings for which a member has received the prior approval of the Board Chair. The per diem rate shall be reviewed annually by the Board. Changes in per diem approved by the Board shall become effective on the first day of the next succeeding fiscal year. Per diem rates paid to Board members shall not be less than the highest per diem rate paid to county commissioners among the Counties with authority to appoint members of the Board as of October 1 of each year unless modified by board action. Board members may request to waive their per diem and/or mileage by indicating on their expense voucher.

Per Diem Limitations. A Board member is entitled to the full per diem rate only when his or her time in meetings plus travel time equals or exceeds 4 hours in a single day. A Board member shall be entitled to partial per diem where meeting time plus travel time is less than 4 hours in a single day.

Transportation Expenses. The Authority shall reimburse Board members for reasonable transportation expenses incurred in the course and scope of Board-approved business. Where a member uses his or her own vehicle, the mileage eligible for reimbursement shall be the lesser of actual mileage or the round trip mileage to the member's home. The reimbursement shall be at the same rate per mile applicable to employed members of the Workforce. Board members are encouraged to car pool with staff and other Board members when possible.

Eligible Lodging Expenses. The Authority shall reimburse Board members for reasonable lodging expenses incurred in the course and scope of Board-approved business, but only if the claimed

expense is eligible for reimbursement under the following criteria:

- 3.8.7 The site of the meeting exceeds 100 miles from the member's home; and
- 3.8.8 To attend, the Board member must leave home prior to 6:00 a.m.; or

- 3.8.9 Due to the event, the Board member cannot return to his or her home prior to 7:00 p.m.;
or
3.8.10 The event is scheduled for multiple days.

Limitations on Reimbursement of Eligible Lodging Expenses. Reimbursement of an eligible lodging expense incurred by a Board member is limited to the following:

- 3.8.11 Where the event is a conference, reimbursement shall not exceed the conference room rate at the facility where the conference is held. In the event rooms are not available at the conference facility, the amount reimbursed shall not exceed the cost of a comparable room in a comparable facility. Proof of unavailability of rooms at the conference facility is required.
- 3.8.12 In all other cases, reimbursement shall not exceed the scheduled maximum allowable lodging expense applicable to Authority Employees.

Meal Expenses. Meal expenses are eligible for reimbursement, subject to the following limitations:

- 3.8.13 Reimbursement shall not exceed the scheduled maximum allowable meal expense applicable to employed members of the Workforce; and
- 3.8.14 Reimbursement for the expense does not constitute income to the Board member under federal tax laws and regulations.

Incidental Expenses. Incidental expenses for items such as office supplies and copying are reimbursable in the discretion of the Board Chair.

Reimbursement Procedure. Claims for reimbursement are subject to the approval of the Board Chair or, in his or her absence, to the approval of the CEO. A Board member seeking reimbursement shall complete and submit to the Board Chair or CEO an expense voucher in approved form setting forth each expense for which reimbursement is claimed. The voucher must clearly disclose the business nature of the claimed expenses and must be accompanied by receipts. Claimed expenses not verified by receipts are not reimbursable. Vouchers may be submitted on a monthly basis at the member's option. Expenses are not reimbursable if the claim therefore is not submitted by the earlier of 90 days after the expense is incurred or 5 days after the close of the fiscal year.

Budget Provisions for Cost of Governance. The CEO shall ensure that the budget annually includes line items for Board per diem and for Board development and expenses. The following amounts shall be budgeted.

LINE ITEM	NUMBER OF UNITS
Board Per Diem	16
Board Development and Expenses	16

Discretionary Exceptions. The CEO, Board Chair or the full Board may, for good cause shown, make exceptions to this Policy provided, however, that the fact of the exception is disclosed to the full Board at its next regular meeting.

Board Member Recognition. Board members leaving the Board will be recognized for their term on the Board. A framed certificate of recognition identifying their term on the Board will be provided. The presentation will occur at the regular Board meeting one month prior to their leaving the Board or other arrangements will be made. Northern Lakes Community Mental Health Authority will also recognize former Board members through a plaque displayed at the administrative office.

**BOARD MEANS SELF-ASSESSMENT
BOARD MEANS POLICY BEING MONITORED**

3.8 COST OF GOVERNANCE – DIRECT INSPECTION

MAY 18, 2023

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?
Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)

ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 3.8 COST OF GOVERNANCE
INTERNAL INSPECTION - CEO
MAY 18, 2023

3.8 Cost of Governance (Budget)

Because excellence in governance produces tangible financial benefits and is dependent on the Board's level of skill and support, the Authority shall commit financial resources to accomplish the following:

- 3.8.1 Introduction of new members to the mental health system;
- 3.8.2 Orientation of new members to Board Governance Policies and to the functions and responsibilities of the Board as a whole and of its individual members;
- 3.8.3 Orientation of new members to the Authority's management structures and functions;
- 3.8.4 Provision of opportunities for the education and training of Board members;
- 3.8.5 Utilization of outside resources to promote a culture of civility and genuine openness to and fair consideration of the views and values of stakeholders; and
- 3.8.6 Enabling participation on the Board through payment of per diem and reasonable expenses.

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Per Diem Rates. Board members are entitled to per diem for time associated with attendance at meetings of the Board, meetings of Board committees, and conferences and meetings for which a member has received the prior approval of the Board Chair. The per diem rate shall be reviewed annually by the Board. Changes in per diem approved by the Board shall become effective on the first day of the next succeeding fiscal year. Per diem rates paid to Board members shall not be less than the highest per diem rate paid to county commissioners among the Counties with authority to appoint members of the Board as of October 1 of each year unless modified by board action. Board members may request to waive their per diem and/or mileage by indicating on their expense voucher.

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Eligible Lodging Expenses. The Authority shall reimburse Board members for reasonable lodging expenses incurred in the course and scope of Board-approved business, but only if the claimed expense is eligible for reimbursement under the following criteria:

- 3.8.7 The site of the meeting exceeds 100 miles from the member's home; and
- 3.8.8 To attend, the Board member must leave home prior to 6:00 a.m.; or
- 3.8.9 Due to the event, the Board member cannot return to his or her home prior to 7:00 p.m.; or
- 3.8.10 The event is scheduled for multiple days.

Limitations on Reimbursement of Eligible Lodging Expenses. Reimbursement of an eligible lodging expense incurred by a Board member is limited to the following:

3.8.11 Where the event is a conference, reimbursement shall not exceed the conference room rate at the facility where the conference is held. In the event rooms are not available at the conference facility, the amount reimbursed shall not exceed the cost of a comparable room in a comparable facility. Proof of unavailability of rooms at the conference facility is required.

3.8.12 In all other cases, reimbursement shall not exceed the scheduled maximum allowable lodging expense applicable to Authority Employees.

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Budget Provisions for Cost of Governance. The CEO shall ensure that the budget annually includes line items for Board per diem and for Board development and expenses. The following amounts shall be budgeted.

LINE ITEM	NUMBER OF UNITS
Board Per Diem	16
Board Development and Expenses	16

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CEO Interpretation: 2023 Response

Below is a summary of charges to the two line-items (72400 Board Per Diems and 86100 Board Development and Travel) used to reflect the Board of Directors budget and expenditures. As shown below, the Board is trending under budget for Per Diems on a year-to-date basis. The per diem line of the budget was increased for the FY 2023 fiscal year in order to accommodate the additional committee's being considered. The budget for Development and Travel was increased at the end of fiscal year 2021 to accommodate spending patterns and the desire to provide further opportunities for Board member training and education.

Specific to the policy subsections:

1. Conferences – Board members have been attending Board Association conferences and trainings as their schedules have permitted.
2. Per Diem – In September 2018, by board action, the board per diem was increased from \$50 full day to \$75 full day and from \$25 half day to \$50 half day.
3. Transportation – Is paid at the agency rate and from vouchers submitted.

Board Per Diem Account # 72400	Fiscal Year	Annual Budget	Year to Date Budget (7 Months)	Year to Date Spending (7 Months)	Actual % over or (under)	Percentage Spent YTD (7 months =58%)
	FY15/16	15,400	8,983	4,950	(45%)	32%
	FY 16/17	15,400	8,983	4,377	(51%)	28%
	FY 17/18	15,400	8,983	4,600	(51%)	30%
	FY 18/19	15,400	8,983	9,288	3%	60%
	FY 19/20	15,400	8,983	7,850	(13%)	51%
	FY 20/21	15,400	8,983	8,425	(6%)	55%
	FY 21/22	15,400	8,983	14,725	64%	96%
	FY 22/23	34,650	20,212	10,632	(48%)	31%
Board Development & Travel Account # 86100						
	FY 15/16	24,950	14,554	9,219	(37%)	37%
	FY 16/17	24,950	14,554	7,651	(47%)	31%
	FY 17/18	24,950	14,554	13,457	(7%)	54%
	FY 18/19	24,950	14,554	13,766	(5%)	55%
	FY 19/20	24,950	14,554	10,939	(25%)	44%
	FY 20/21	24,950	14,554	1,507	(90%)	10%
	FY 21/22	45,090	26,303	11,593	(56%)	26%
	FY 22/23	45,090	26,303	19,525	(26%)	44%

Notes:

1. In order to achieve social distancing most Board meetings have been held between Kirtland College, Gateway Center, and the Cadillac office. The cost of a catered meeting at Kirtland College is about \$800 while the cost of a meeting at the Gateway Center is about \$625 and about \$500 when held at an NLCMHA location. The travel reimbursement rate increased to \$0.63 per mile from \$0.56 cents per mile effective January 1st. Travel is reimbursed at a rate of 95% of the IRS approved mileage which currently stands at \$0.655. Not included in the above costs are per diems and travel costs for consumers and others, line item 72500 Non-Board member per diems, who participate in committees or planning groups for which NLCMHA pays per diems (at the same value as board member per diems). These would include the Consumer Advisory Council, Recipient Rights Advisory Committee, Practice Management and Quality Improvement, etc.

Acct # 72500	<u>Multi-year YTD Trending</u>	
	<u>Budget</u>	<u>YTD</u>
FY 15/16	8,000	3,551
FY 16/17	8,000	3,486
FY 17/18	8,000	3,250
FY 18/19	8,000	5,099
FY 19/20	8,000	2,877
FY 20/21	8,000	3,595
FY 21/22	8,000	3,132
FY 22/23	8,000	3,573

Respectfully Submitted,

Brian Martinus (Lauri Fischer)

Board Means Policy being monitored:
3.8 Cost of Governance – Internal -
Budget May 18, 2023

1. Was this report submitted when due?
Yes No (requires comment)

Comment:

2. Did the report lay out the CEO's interpretation of the request?
Yes No (requires comment)

Comment:

3. Was I convinced that the interpretation is justified and reasonable?
Yes No (requires comment)

Comment:

4. Did the interpretation address all aspects of the subject?
Yes No (requires comment)

Comment:

5. Does the information show compliance with board direction/policy?
Yes No (requires comment)

Comment:

6. Other Comment: _____

ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 1.0 CONSUMER AND COMMUNITY ENDS
INTERNAL REPORT - CEO
May 18, 2023

1.0 Consumer and Community Ends

We are committed to the guiding principles of Culture of Gentleness and Recovery. We are committed to the Person-Centered planning process and the development of an individual Plan of Service within the context of available funding and services. We are committed to be a strong and effective partner in Michigan to improve the overall health, wellness and quality of life of the individuals, families, and communities we serve. We believe the systems of care and support we create and manage must serve and provide encouragement, support and opportunities that promote growth and create desired and positive outcomes for all persons served. We are committed to the elimination of stigma in cooperation with welcoming communities and must meet owner expectations. As a manager and a provider of public health services utilizing federal, state, local funding sources and other reimbursements we hold ourselves accountable and are held accountable. Our responsibility is not to simply serve, but to ensure eligible persons with severe mental illnesses (including those with co-occurring conditions), children with serious emotional disturbances, persons with intellectual/developmental disabilities and persons with substance use disorders have satisfying, hopeful, and contributing lives that are consistent with their hopes and dreams.

We believe active consumer involvement is critical to Ends accomplishment and in ensuring consumers served achieve the following Ends consistent with individual choice and self-determination.

Consumer Ends:

- 1.0.1 Meaningful and satisfying community experiences, work (income generation) and/or volunteering, and/or success in an educational or vocational setting
- 1.0.2 Meaningful relationships within an ever expanding circle of support.
- 1.0.3 Children and families have rewarding family relationships
- 1.0.4 A safe living environment of their choice and with whom they want (adults) as identified through the Person Centered Planning process and reflected in the Individual Plan of Service within available resources and services.
- 1.0.5 Community membership, inclusion and participation
- 1.0.6 A reduction in psychiatric symptoms (as applicable)
- 1.0.7 An enhanced overall quality of life
- 1.0.8 Sobriety (as applicable)
- 1.0.9 Integration of behavioral health and physical health services

There are multiple community stakeholders that impact and/or are impacted by what we do and we place a high priority on working cooperatively with them toward the accomplishment of our Vision, Mission, and Ends. Key stakeholders include, but are not limited to, consumers, consumer parents, families, and/or guardians; health care providers; schools; law enforcement; the spiritual community; and local, state, and federal elected officials. To promote Ends accomplishment we need skilled providers and constructive relationships with organizations who provide funds including the MDHHS, managed care organizations, health insurance providers, etc.

Community Ends:

We are committed to the following Community Ends.

1.0.10 Our respective communities and key stakeholders accept and treat consumers with respect, dignity and compassion and promote community membership.

1.0.11 Community Stakeholders know and demonstrate support of the Northern Lakes Community Mental Health Authority Ends.

Accomplishment of these Ends will be promoted by having services grounded on accessible and culturally competent services, evidenced-based practices, consumer choice, a commitment to recovery and reintegration, resilience, empowerment, and independence. A cornerstone is our commitment to excellence in person/family centered planning and services. We will utilize the most objective data available and a variety of methods to measure the degree of achievement of our Ends and will do so consistent with the MDHHS Quality Improvement Performance Indicators (measures) and satisfaction surveys, third party perspectives regarding our performance, and other locally adopted measures.

CEO Interpretation (2023)

This policy highlights the areas in which the Board and CEO are unified. We are committed to our Vision, Mission, and Values. We are committed to providing care in a culture of gentleness with the expectation that Recovery is possible. We do this through a person-centered process and the development of the Individual Plan of Service. We understand there are community stakeholders, including consumers, families, guardians, schools, law enforcement, and elected officials, and we value their partnership in meeting our Consumer and Community Ends.

NLCMHA completes an Annual Review and Agency Performance Assessment each year to demonstrate how the activities in the previous year met these Consumer and Community Ends. Those reports were shared with the Board in January and February 2023. In terms of holding ourselves accountable, NLCMHA does this through satisfaction surveys, provider network surveys, holding an Annual Public Hearing, and Annual Reports to the County Commissions.

Respectfully Submitted,

Brian Martinus
Interim CEO

Board Policy being monitored

1.0 Consumer and Community Ends

May 18, 2023

1. Was this report submitted when due?

Yes

No (requires comment)

Comment:

2. Did the report lay out the CEO's interpretation of the request?

Yes

No (requires comment)

Comment:

3. Was I convinced that the interpretation is justified and reasonable?

Yes

No (requires comment)

Comment:

4. Did the interpretation address all aspects of the subject?

Yes

No (requires comment)

Comment:

5. Does the information show compliance with board direction/policy?

Yes

No (requires comment)

Comment:

6. Other Comment: _____
