



Northern Lakes
Community Mental
Health Authority

Committee of the
Whole Packet

July 20, 2023



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

COMMITTEE OF THE WHOLE - AGENDA

DATE: July 20, 2023
TIME: 12:00 p.m.
PLACE: Northern Lakes Community Mental Health Authority
204 Meadows Drive, Grayling & Virtual Meeting:
1-810-258-9588 ID 986 665 315#

TIME	ID #	ITEM	POLICY #
12:30 p.m.		Call to Meeting	2.08
12:35 p.m.		Public Comment <i>(May be limited to three minutes by the Board Chairperson)</i>	
12:40 p.m.	1	Update on Recipient Rights & Semi-Annual Recipient Rights Report - Recipient Rights Director, Brian Newcomb	
1:00 p.m.	2	NMRE Oversight Discussion/ Oversight Memo - Eric Kurtz, Chief Executive Officer, NMRE	
1:30 p.m.	3	Quality & Compliance Update - QI Compliance Director, Kari Barker	
1:40 p.m.	4	Behavioral Health Home - Behavioral Health Home Operations Manager, Andrew Waite	
2:00 p.m.		August 17, 2023, Agenda Planning	
2:05 p.m.		Meeting Evaluation/Comments	
2:10 p.m.		Other/Adjourn	

Note: This is the Board's work group and often times the Board's work groups do not follow set times.

NEXT MEETING: August 17, 2023

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

Office of Recipient Rights Director's Report
July 2023

Dates represented	10/1/20-07/11/2022	10/1/21-07/11/22	10/1/22-07/11/23
Complaints	221	457	310
OJ, No Right Inv.	36	58	40
Interventions	2	24	13
Investigations	183	376	258
Investigations Comp	183	376	183
Investigations open	0	0	75
Inv > 90 days	26	0	0
Inv < 90 days	157/183 (85.8%)	375/375 (100%)	183/183 (100%)
Summary Report Avg	178/183 (97.3%)	372/376 (98.9%)	185/185 (100%)
NLCMHA staff alleg.	44	94	48
NLCMHA Staff W/I 1 yr	5	34	9

Allegations by Population

	Total Substantiated	Total Allegations Investigated	Substantiation Rate
FY2021	172	383	45%
FY2022	330	664	50%
FY2023	172	310	55%

Received Complaint Source

Complaint Source	Count
Anonymous	14
Community/General Public	28
Guardian/Family	21
ORR	109
Recipient	64
Staff	74
Total	310

Respectfully submitted,

Brian Newcomb

Director of Recipient Rights

Section II: Remediation data for: Northern Lakes

Category (from Complaint Data)	Provider Type	Specific Remedial Action	Specific Remedial Action	CMH ONLY			
				SED	SED-W	DD-CW	HSW
72271	Residential DD	Employee left the agency, but substantiated		0		1	1
72261	Residential MI	Employee left the agency, but substantiated		0		0	
7241	Residential MI & DD	Training		0		0	
72271	Residential MI	Other		0		0	
72271	Residential MI & DD	Suspension		0		0	
72271	Residential MI & DD	Written Reprimand		0		0	
72271	Residential MI & DD	Written Reprimand		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72271	Residential MI & DD	Employment Termination		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72271	Residential MI & DD	Written Reprimand		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0		0	
72252	Residential MI & DD	Written Reprimand		0		0	
72252	Residential MI & DD	Employee left the agency, but substantiated		0		0	
7081	Case Management	Training		0		1	
1708	Case Management	Written Reprimand	Employment Termination	0		0	
72271	Residential MI & DD	Other		0		0	
72271	Residential MI & DD	Other		0		0	
72271	Residential MI & DD	Written Reprimand	Policy Revision/Development	0		1	1
7081	Residential MI & DD	Plan of Service Revision		0		1	1
7140	Residential MI & DD	Verbal Counseling		0		1	
72272	Residential MI & DD	Verbal Counseling		0		0	
72251	Residential MI & DD	Employment Termination		0		0	
7223	Residential MI & DD	Suspension	Training	0		0	
7480	Other	Suspension	Training	0		0	
7550	Residential MI & DD	Suspension	Training	0		0	
7084	Other	Employee left the agency, but substantiated		0		1	1
1708	Case Management	Employment Termination		0		0	
72271	Residential MI & DD	Written Reprimand		0		0	
72225	Residential MI & DD	Written Counseling					
7081	Residential MI & DD	Written Counseling		0		0	
72271	Residential MI & DD	Policy Revision/Development		0		1	1
7084	Residential MI & DD	Written Reprimand		0		1	1
7082	Residential MI & DD	Employee left the agency, but substantiated		0		1	1
7084	Residential MI & DD	Employee left the agency, but substantiated		0		1	1
7081	Residential MI & DD	Verbal Reprimand		0		1	
7084	Residential MI & DD	Verbal Counseling		0		0	
72271	Residential MI & DD	Written Reprimand		0		1	1
72271	Residential MI & DD	Employee left the agency, but substantiated		0		1	1
72272	Residential MI & DD	Employee left the agency, but substantiated		0		1	1
72271	Residential MI & DD	Other		0		0	
72271	Residential MI & DD	Other		0		0	

REMEDIATION TOTALS	
Contract Action	6
Demotion	0
Employee left the agency, but substantiated	26
Employment Termination	7
Environmental Basis/Enhancement	0
None	0
Other	27
Pending	0
Plan of Service Revision	3
Policy Revision/Development	7
Recipient transfer to Another Provider/Setting	25
Staff Transfer	0
Suspension	7
Training	16
Verbal Counseling	23
Verbal Reprimand	1
Written Counseling	8
Written Reprimand	21

PROVIDER TOTALS	
ACT	2
Case Management	8
Children's Foster Care	0
Clubhouse/Drop-in Center	0
Crisis Center	0
Day Program DD	0
Day Program MI	0
Inpatient	0
Other	2
Out Patient	0
Partial Hospitalization	0
Psychosocial Rehabilitation	0
Residential DD	1
Residential MI	2
Residential MI & DD	121
Respite Homes	0
SIP	1
Supported Employment	0
Workshop (prevocational)	0

WAIVER POPULATION TOTALS	
SED	1
SED-W	0
DD-CWP	41
HSW	27

72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Written Reprimand	Policy			
72271	Residential MI & DD	Written Reprimand	Policy/Development	0	1	1
7120	Case Management	Plan of Service Revision	Plan of Service Revision	0	1	1
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Other		0	0	
72271	Residential MI & DD	Employee left the agency, but substantiated	Policy	0	0	
72271	Residential MI & DD	Verbal Counseling	Policy/Development	0	0	
72271	Residential MI & DD	Verbal Counseling	Policy/Development	0	0	
72271	Residential MI & DD	Employment Termination				
7081	Case Management	Written Counseling	Training	0	1	
7084	Residential MI & DD	Written Counseling	Training	0	1	
7081	Case Management	Verbal Counseling	Training	0	1	1
7081	ACT	Written Counseling		0	1	1
7480	Case Management	Verbal Counseling		0	1	1
72261	Residential MI & DD	Employee left the agency, but substantiated		0	1	1
72271	Residential MI & DD	Written Reprimand				
72271	Residential MI & DD	Written Reprimand		0	1	1
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Other	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Employee left the agency, but	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
72271	Residential MI & DD	recipient transfer to	Verbal Counseling	0	0	
7440	Case Management	Verbal Counseling		0	1	1
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
72271	Residential MI & DD	recipient transfer to	Contract Action	0	0	
7081	Residential MI & DD	Employee left the agency, but substantiated		0	1	
7084	Residential MI & DD	Written Reprimand		0	1	1
72223	Residential MI & DD	Employee left the agency, but substantiated		0	0	
72271	Residential MI & DD	Employee left the agency, but substantiated		0	0	
7081	Residential MI & DD	Written Reprimand		0	0	

COMPLAINT DATA FOR:	Northern Lakes
RIGHTS OFFICE DIRECTOR:	Brian Newcomb

← CLICK ON CELL G AND CHOOSE FROM DROP-DOWN
 ← ENTER THE NAME OF THE LEAD RIGHTS ADVISOR (RIGHTS DIRECTOR)

Reporting Period: **FY23** October 1, 2022 - March 31, 2023

CMH	# of Consumers Served (unduplicated count)	5649	Rights Office FTEs	5
	LPH	Number of Licensed Beds		Hours/40 Spent

ALLEGATION TOTALS

Total Complaints Received	262	←	DO NOT TYPE HERE - CELL WILL AUTO FILL
Allegations	239	←	DO NOT TYPE HERE - CELL WILL AUTO FILL
Investigations	230	←	DO NOT TYPE HERE - CELL WILL AUTO FILL
Investigations Substantiated	130	←	DO NOT TYPE HERE - CELL WILL AUTO FILL
Interventions	9	←	DO NOT TYPE HERE - CELL WILL AUTO FILL
Interventions Substantiated	7	←	DO NOT TYPE HERE - CELL WILL AUTO FILL

ALLEGATIONS BY CATEGORY

Code	Category	Received
0000	No Right Involved	13

Code	Category	Received
0001	Outside Provider	10

Code	Category	Received	Investigations	Investigations Substantiated
7221	Abuse class I	0		
72221	Abuse class II -	4	4	1
72222	Abuse class II -	5	5	0
72223	Abuse class II - emotional	4	4	4
72224	Abuse class II - treating	0		
72225	Abuse class II -	1	1	1
7223	Abuse - class III	9	9	1
7224	Abuse class I - sexual	1	1	0

Code	Category	Received	Investigations	Investigations Substantiated
72251	Neglect class I	1	1	1
72252	Neglect class I - failure to	2	2	2
72261	Neglect class II	7	7	2
72262	Neglect class II - failure to	1	1	0
72271	Neglect class III	92	92	81
72272	Neglect class III - failure	2	2	2

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7550	Right Protection System	1	1	1		
7555	ion/harassment toward re	1	1	0		

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7040	Civil rights: Discrimination, Accessibility, Accommodation, etc.	3	3	0		
7044	Religious practice	0	0	0		
7045	Voting	0	0	0		

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7081	Mental Health Services Suited to Condition (includes chapter 4 violations)	36	34	12	2	2
7082	Safe, Sanitary Humane Treatment Environment	2	1	1	1	1
7083	Least restrictive setting	1	1	1		
7084	Dignity and Respect	27	27	10		

Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7100	Physical and Mental Exams	0	0	0	0	0
7110	Family Rights	6	6	1		
7120	Individual Written Plan of Service (Person-Centered Process)	6	6	2		
7130	Choice of Physician/Mental Health Professional	3	3	2		
7140	Notice of Clinical Status/Progress	1	1	1		
7150	Services of a Mental Health Professional (External to the Agency/Hospital)	0	0	0		
7160	Surgery	0	0	0		

7170	Electroconvulsive Therapy	0	0	0		
7180	Psychotropic drugs (AR 7158)	0	0	0		
7190	Medication Side Effects	0	0	0		
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7240	Fingerprints, Photographs, Audiorecordings, Use of One-Way Glass	2	2	0		
7249	Video Surveillance	0	0	0		
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7480	Communications-Visits	7	4	1	3	2
7481	Communications-Telephone	0	0			
7263	Communications-Mail	0	0			
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7281	Property-Possession and use	1	1	0		
7286	Personal Property – Limitations	1	1	0		
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7360	Labor and Compensation	0	0	0	0	0
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7440	Freedom of Movement	5	5	2		
7400	Restraint	0	0	0		
7420	Seclusion	0	0	0		
Code	Category	Received	Investigations	Investigations Substantiated	Interventions	Interventions Substantiated
7460	Complete Record	0	0	0		
7480	Disclosure of Confidential Information	7	4	1	3	2
7481	Withhold of Confidential Information (Includes Denying Recipient Access to Records)	0	0	0		
7490	Correction of Record	0	0	0		
7500	Privileged communication	0	0	0		
TOTALS		239	230	130	9	7



June 5, 2023

Hi Ben and thanks for the email update.

Sonya was out on and off most of last week, but I can help as I have been through a few of these in my past. I also saw Tom's email regarding the salary ranges, which we provided for the last search committee, and we can reproduce those. I also had names of at least two search firms that I was ready to provide to the last Search Committee. As part of the NMRE's contractual oversight, we will assist with an RFP and help Tom and the Committee to ensure independent integrity in the process. Most good search firms will do some, or most of this as well. Tom and I talked a little after the NMRE Board meeting and, like you, we want this to go as easily as possible.

With that said, I must indicate on the NMRE's behalf that starting the CEO search seems a little premature. Although, we/I am thrilled the Enabling Agreement is signed, it was in our minds, the first step in the NMRE Contractual Oversight process (which included appointing an Interim NLCMHA CEO). From an NMRE perspective, the focus now changes to ensuring NLCMHA has some stability in leadership and can manage its contractual service obligations and delegated functions. I also recall that the Enabling Agreement committee made some suggestions regarding the NLCMHA Bylaws including requiring a 2/3 or super majority vote by the "full" Board before making an offer to a CEO candidate, among other suggestions. I fully understand that the Bylaws are under the purview of the NLCMHA Board, but I want to hold true to the agreements we discussed with the county administrators and commissioners, and, at a minimum, this be done prior to starting any search. I am also concerned that this will start another round of staff posturing related to the new CEO search, as opposed to maintaining the momentum currently in place.

As some of your Board Members may or may not be aware, after the previous notice of Grand Traverse County's vote to remove itself from the from the 2003 Enabling Agreement that created the Northern Lakes Community Mental Health Authority (NLCMHA) and the clear lack of governance and consistent leadership within NLCMHA, the NMRE Board invoked enhanced contractual oversight on 8-9-22. This was done to assure NLCMHA remains viable and that services to NLCMHA beneficiaries were not interrupted due to these issues. This also came with additional attention brought on by MDHHS requiring biweekly updates regarding NLCMHA's ability to manage these contractual functions as well as approximately six (or more) contractual plans of correction regarding consumer complaints, their status, and the steps NMRE is taking to ensure these issues are resolved.

Additionally, I have been asked and have been providing regular updates to the NMRE Board Chair since the contractual oversight was put in place. In these discussions, and as referenced in the 8-9-22 Enhanced Contractual Oversight memo, the NMRE is planning to do a deeper dive into certain NLCMHA operations beyond the regular site review. The NMRE Board is expecting a review of operations, which will include service capacity and efficiency, past Human Resources operations, the effect of other NLCMHA business lines, any outstanding legal complaints/settlements, and the sustainability plans of numerous NLCMHA grants that have been requested over the past several years.

Again, acknowledging the progress that has been made with the NLCMHA Enabling Agreement and to date with NLCMHA, the NMRE Board respectfully asks that as part of the ongoing Enhanced Contractual Oversight that the NMRE appointed CEO remains in place until these activities are accomplished or till a mutually agreed upon date can be reached in the future.

If you have any questions, please feel free to contact me or reach out to Carol Balousek who can contact Don Tanner, the NMRE Board Chair, if you have any questions.

Sincerely,



Eric Kurtz
NMRE CEO



Don Tanner
NMRE Board Chair

Northern Lakes Community Mental Health Authority
Human Resource Presentation
Director of Quality Improvement, Compliance, and Customer Service
Kari Barker
FY23 Q2&Q3 7/20/23

Who: Kari Barker and team, Jess Williams, Melanie Schopieray, and Amanda Ritchie oversee Quality, Compliance, and Customer Service for staff, leadership, the Board, consumers, and external providers across Northern Lakes Community Mental Health Authority (NLCMHA).

What: The presentation shares the following information:

- Quality data
- Compliance data
- Customer Service data

When and Where: Quality, Compliance, and Customer Service staff collaborate with staff, consumers, providers, and leadership: completing required professional staff credentialing, exclusionary reporting, agency policy management, coordinating Grievance & Appeals, leading committees, providing training, conducting audits and monitoring, conducting clinical record review, coordinating annual and other agency reviews, collaborating and attending monthly meetings with the NMRE (Northern Michigan Regional Entity), and monitoring claims at all levels across NLCMHA.

Why: Developing a Culture of Integrity requires engaging the entire agency, our NMRE partners, and external partners. We're striving to be proactive in all efforts to conform to state and federal regulations through education, communication, auditing, and having a robust compliance program which includes Board engagement and advisement.

Quality Q2 & Q3

- **Clinical Record Review:** We've seen a marked increase in the quality and compliance of documentation in the clinical records. We're now averaging above 90%, when previous averages were in the low 80%, records are complete and the quality of clinical documentation and assessment on average is good. During the Michigan Department of Health and Human Services (MDHHS) Annual review, we saw an increase of 70% from last year in the completion of Individual Plan of Service (IPOS) training for direct care staff and proper documentation. We were congratulated on the depth of our assessments and the transfer of those needs into the IPOS.
- **Risk Events:** There were 6 events, 4 for challenging/aggressive behavior with no serious outcomes, 1 was a fall that did not lead to injury, and 1 was medical attention due to injury. All were responded to and reported appropriately.
- **Critical Incidents:** There were 21 critical incidents reported, 14 were non-suicide deaths by natural causes due to chronic medical conditions such as heart disease, cancer, or diabetes. Our population of individuals are aging and succumbing to complications of chronic medical conditions, many were receiving Hospice care in their homes. Chronic conditions may have worsened for those who contracted Covid-19 or did not have as much access to healthcare during the pandemic. The other incidents included 2 deaths due to car accidents, and 5 were hospital stays due to illness or injuries requiring medical attention.

- **Sentinel Events/Reviews:** There were 2 suicides in the last 2 quarters, Sentinel Reviews were convened and reported to NMRE/MDHHS according to required timelines. No recommendations for process changes were made.

Compliance Q2 & Q3

- **Compliance/Health Insurance Portability and Accountability Act (HIPAA) reports were received.** There were 6 anonymous reports received through the Ethics hotline, 2 were unable to be investigated because they did not fall within our oversight, 1 was a substantiated HIPAA violation that required remedial action and training, 1 was referred to the Office of Recipient Rights (ORR) for investigation, 1 was substantiation of Medicaid fraud and ended with termination and reports to NMRE, Office of Inspector General (OIG), and Licensing and Regulatory Affairs (Lara) for further action, and 1 didn't have enough information to allow us to investigate and the reporter didn't respond when further questions were asked.
- **Exclusionary reporting:** All clear, no sanctions or pending investigations for staff, Board members, or external providers.
- **OIG reporting:** One instance of suspicion of fraud, waste, or abuse submitted (see above). Ongoing documentation of OIG required activities such as audits of claims and data mining are being reported quarterly.
- **Compliance training:** Staff complete annual training through Relias, and virtual training is offered every other month. This will be moving to a quarterly schedule.
- **Professional Credentialing:** New hire and re-credentialing continues to be completed according to mandated timelines. The new credentialing process was in full compliance at our Annual NMRE Qualitative Review.
- **Program Integrity Review-Northern Health Care Management:** There were no compliance reviews requested.
- **Medicaid Encounter Verification (MEV) audit:** A MEV audit was conducted for F23 Q1 & Q2 through a 3rd party contracted by the NMRE, final results have not been received.

Customer Service Q2 & Q3

- **Grievances:** There were 64 grievances received, which for the most part were requests for change of provider, all were resolved within 30days per requirements.
- **Appeals:** There were 14 local appeals received, in almost 70%, the original action was upheld, they were resolved in 30days per requirements.
- **Inquiries:** There were 54 inquiries received, 100% of these were resolved within 1 day, many were referred to the appropriate people.
- **Fair Hearing requests:** There were 2 Fair Hearings requested during the 2nd Quarter, and 0 during the 3rd Quarter.
- **Mediation:** Mediation services through MDHHS have been successfully utilized a few times and may be gaining ground as an alternative to appeals and fair hearings.



C.H.A.T.
(Comprehensive
Health Assistance
Team)

CHAT Program

(A Medicaid Behavioral Health Home)

What is a Behavioral Health Home?

- A Medicaid service designed to help individuals manage their mental and physical health needs.
- Behavioral Health Home providers will integrate and coordinate all primary, acute, behavioral health, and long-term services and supports to treat the “whole=person” across the lifespan.

CHAT Program

CHAT can help individuals:

- Avoid going to the Emergency Room or being hospitalized
- Make an individual plan that includes mental and physical health strengths, needs, and goals.
- Work together with primary care providers.
- Get services if you are coming home from the hospital or residential facility.
- Get the services and support individuals need to succeed.
- Give education and information individual care, goals, and illness.
- Referral to Community and Social Support Services.

CHAT Program

How is CHAT different than other services an individual may be receiving?

- It is a team approach.
 - Care team members work together to offer support.
- It is a whole person approach.
 - It can help an individual reach their mental and physical health goals, not just one or the other.
- It is integrated.
 - CHAT team and primary care work together to improve health outcomes
- It includes consumer and family support along with education.
 - Individuals get information and support when they need it in a manner that they understand.

Eligibility

- Live within NMRE's 21 county region;
- Enrolled in Medicaid (people with spenddown not eligible), Healthy Michigan, or MIChild; and
- Have a select SMI/SED diagnosis, including the following (does not have to be primary diagnosis):
 - Other mental disorders due to known physiological condition
 - Schizophrenia
 - Schizoaffective disorders
 - Bipolar disorder
 - Major depressive disorder, single episode
 - Major depressive disorder, recurrent
 - Reaction to severe stress, and adjustment disorders
 - Other anxiety disorders
 - Attention-deficit hyperactivity disorders

CHAT Program

Core Services

- Comprehensive Care Management
- Care Coordination
- Health Promotion
- Transitional Care
- Individual and Family Support
- Referral to Community and Social Support Services

CHAT Program Staff

- Nurse Care Manager
- Peer Support
- Community Health Worker
- Medical Assistant
- Behavioral Health Specialist
- Medical Consultant
- Psychiatric Consultant

CHAT Core Services

Comprehensive Care Management

- Pre-Planning visits
- Review of medical records
- Review of claim/contact history in health exchanges (i.e., CC360)
- Huddles with team to discuss care
- Care plan development including patient goals, preferences, and desired clinical outcomes
- Address barriers to care
- Use health tools to manage and track chronic disease management goals

CHAT Core Services

Care Coordination

- Appropriate linkage, referral, coordination, and follow up as necessary
 - Assist consumer with scheduling appointments
 - Set up referral appointments
 - Closing transition of care loop

CHAT Core Services

Health Promotion

- Providing health education specific to a consumer's need:
 - Chronic conditions (i.e., diabetes, hypertension, COPD)
 - Development of self-management goals/plans
- Assist consumer in finding group classes, or lead group classes on topic such as:
 - Tobacco cessation, exercise, healthy eating, diabetes management, etc.
- Age-appropriate screening and immunizations:
 - Annual physical, seasonal flu shot, dental exam, mammograms, etc.

CHAT Core Services

Comprehensive Transition of Care

- Comprehensive transition of care including follow-up from inpatient and other setting to community
 - Medication reconciliation
 - Review of admissions and follow up as necessary
 - Follow up with outside support services- internal and external

CHAT Core Services

Consumer and Family Support

- Identify community resources
- Advocate for consumers and families
- Assist with obtaining medication and other treatment supplies
- Discuss caregiver role

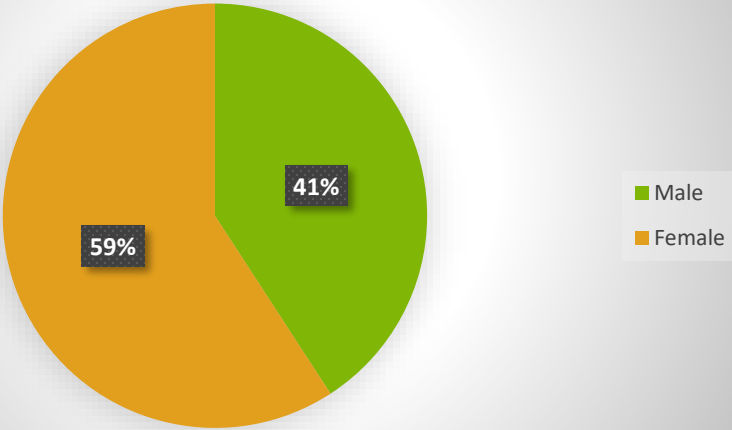
CHAT Core Services

Referral to Community and Support Services

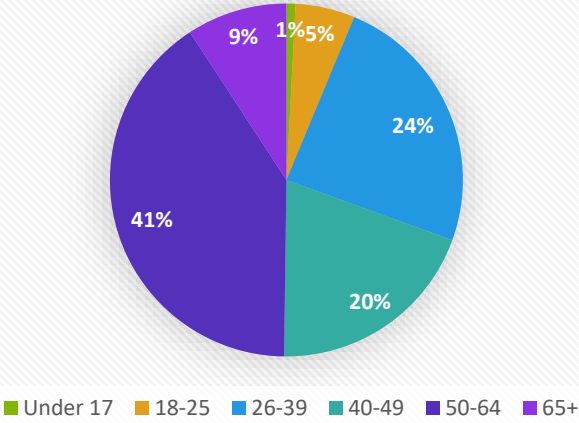
- Assist with setting up home health visits, durable medical equipment, medication, and treatment supplies.
- Assist with paperwork for housing, healthcare coverage (Medicaid/Medicare), SNAP benefits, WIC, etc.
- Work on barriers that are preventing access or follow through such as transportation, housing, food insecurities, etc.

CHAT by the Numbers

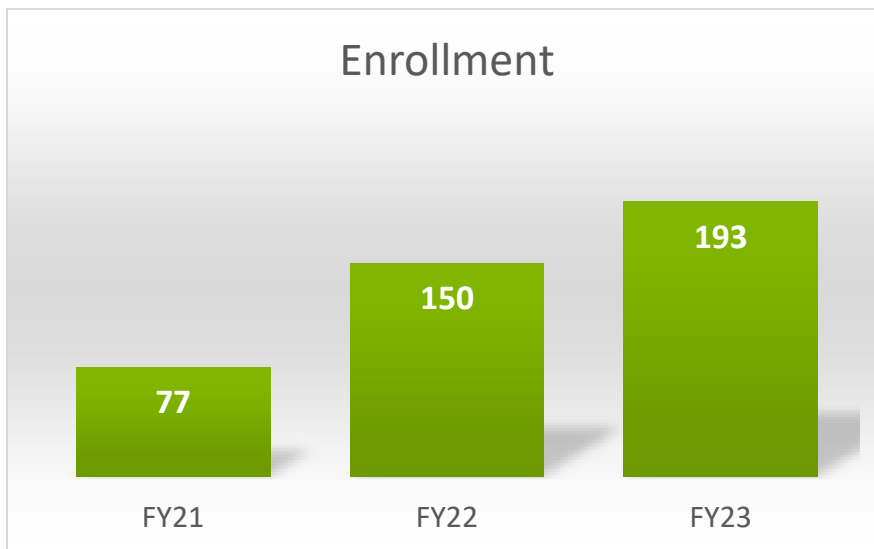
Male vs Female



Age Breakdown

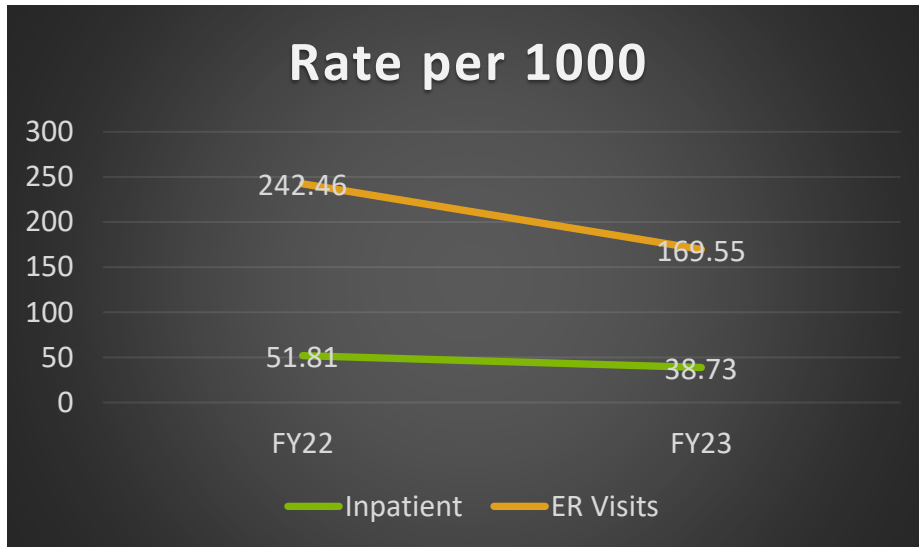


CHAT by the Numbers



- CHAT has seen 150% growth since the end of FY21 to June 30, 2023
- Growth in FY23 is 28.7% compared to FY22.
- Anticipate growth to continue in FY23 Q4

CHAT by the Numbers



- ER visits have decreased by 30.1% in FY23 compared to FY22
- Inpatient (medical/psych) have decreased 25.3% in FY23 compared to FY22
- Also, seeing an increase in Urgent Care visits as education is provided on where to get care.

CHAT by the Numbers

NLCMHA compared to other NMRE region BHH

- CHAT has the most actively enrolled individuals in BHH
- CHAT holds 32.8% of all active Behavioral Health Home cases in the region.
- CHAT accounts for 32.3% of all new enrollments in the region for FY23.

CHAT by the Numbers

Northern Lakes Community Mental Health Authority		
CHAT Program Income Statement		
Fiscal Year Ended 9/30/2022		
Revenues:		Balance
	MDHHS Block Grant	\$ 374,697
	Behavioral Health Home Capitation	\$ 484,690
	Performance Based Incentive Payment	\$ 9,446
	Total Revenues	\$ 868,833
Expenses:		
	Personnel	\$ 513,587
	Operations	\$ 68,311
	Transportation	\$ 20,511
	Facility	\$ 23,047
	Total Expenses	\$ 625,456
	Surplus (Deficit)	\$ 243,377

CHAT by the Numbers

FY 2023 Capitation Received Per Month

	Oct-22	\$ 43,871
	Nov-22	\$ 52,818
	Dec-22	\$ 66,684
	Jan-23	\$ 56,857
	Feb-23	\$ 54,400
	Mar-23	\$ 57,559
	Apr-23	\$ 57,559
	May-23	\$ 55,804
		\$ 445,554

- Statistics:
 - 1,381 service units paid in FY22
 - One Service per month is paid although all service units are reported.
 - The per member per month unit rate is \$350.97

Moving Forward

- Adding Opiate Health Home
- Fully integrate BHH/OHH into Integrated Health Clinic
- Expand health education programming and offerings to increase health outcomes
- Increase community referrals