



PREPAID INPATIENT HEALTH PLAN

Our Mission: Promoting opportunities for Recovery, Discovery, Health and Independence for individuals receiving services through ease of access, high quality of care and best value.

Region 10 PIHP Board Meeting Minutes Revised

December 15, 2023, 9:00 a.m.

Region 10 PIHP

2186 Water Street, Port Huron, MI 48060

Board Members Present: Ron Barnard, Lori Curtiss, Dr. Niketa Dani, John Groustra, Ted Hammon, Joyce Johnson, Bob Kozfkay, Ken Lemons, Chad Polmanteer, Ed Priemer, Nancy Thomson, Bobbie Umbreit,

Board Members Absent: DeElla Johnson, Gary Jones, Rex Ziebarth

Staff Present: *Region 10 PIHP Staff:* Jim Johnson, Chief Executive Officer; Carrie Benacquisto, Finance Director; Kristen Potthoff, Corporate Compliance Officer; Lauren Campbell, Quality Manager (virtual); Robin Kalbfleisch, Recording Secretary

CMH Staff: Wil Morris, Sanilac CMH; Lauren Emmons, Lapeer CMH

Guests: None

1. Call to Order:

Called to order at 9:00 a.m. and roll call was conducted by Recording Secretary.

2. Citizens Wishing to Address the Board

None

3. Agenda Changes (Action Item)

Chairperson Curtiss requested that item 6.C Staff Increases be added to the agenda. It was moved by Ms. Joyce Johnson, seconded by Mr. Hammon, to approve the revised meeting agenda as presented. **MOTION CARRIED**

4. Approval of Previous Meeting Minutes (Action Item)

It was moved by Ms. Thomson, seconded by Mr. Lemons, to approve the October 2023, meeting minutes as presented. **MOTION CARRIED**

5. Finance

A. Monthly Payment Report – September 2023 (Action Item)

Ms. Benacquisto stated the November Finance Reports will be brought to the January Board meeting. She presented the September 2023 payment report.



B. Monthly Payment Report – October 2023 (Action Item)

Ms. Benacquisto presented the October 2023 report.

It was moved by Ms. Thomson, seconded by Dr. Dani, to approve the Monthly Payment Reports for September 2023 and October 2023 as presented. **MOTION CARRIED**

C. SUD Max Service Rates (Action Item)

Ms. Benacquisto presented the updated max rate grid which included additions of physician evaluation and management codes in the Outpatient section. The codes are for the jail-based program at Sacred Heart.

It was moved by Ms. Thomson, seconded by Mr. Priemer, to approve the SUD Max Service Rates as presented. **MOTION CARRIED**

6. Executive Committee Report

A. Meeting Minutes (12.6.23)

Chairperson Curtiss presented the minutes from the recent Executive Committee meeting and a summary of the results of the evaluations. She stated she has had a discussion with Mr. Johnson regarding the results of the evaluations.

B. CEO Contract Amendment (Action Item)

Chairperson Curtiss stated that the Executive Committee recommends continuing Mr. Johnson's contract and providing a 2% step increase plus an additional 1.5% discretionary increase effective January 1, 2024.

It was moved by Mr. Kozfkay, seconded by Ms. Joyce Johnson, to approve the continuation of Mr. Johnson's contract and to approve the CEO Contract Amendment with a total 3.5% increase effective January 1, 2024. **MOTION CARRIED**

C. Staff Increases (Action Item)

Chairperson Curtiss stated the Executive Board had a discussion regarding a potential increase to the step increase for Region 10 employees. The recommendation is to increase the step increase from 2% to 3% for 2024 only. If approved, this would also be reflected in Mr. Johnson's increase, making his total increase 4.5%.

It was moved by Ms. Thomson, seconded by Mr. Kozfkay, to approve a 1% increase to the standard 2% step increase for a total 3% step increase for Region 10 staff in 2024. **MOTION CARRIED**

7. Contract Management

A. FY2024 MDHHS / PIHP Contract Amendment No. 1 (Action Item)

Ms. Potthoff presented the summary showing changes to the contract that mainly consist of technical corrections throughout and modification of required reports, which



includes the addition of two new reports by the OIG. The amendment also includes the addition of the FY2024 rate schedule.

It was moved by Mr. Hammon, seconded by Mr. Lemons, to approve FY2024 MDHHS / PIHP Contract Amendment No. 1 as presented. **MOTION CARRIED**

B. FY2024 PIHP – CMH Contract (Action Item)

Ms. Potthoff noted that earlier this year, this contract had been extended to the end of the calendar year due to the timing of the receipt of the FY2024 MDHHS-PIHP contract. She presented two summaries showing the changes to the contract due to the number of changes. The first handout is in table form and shows a snapshot of contract changes. The second handout shows specific revision details showing language that was removed, added, or modified. The majority of changes were the result of state or federal rule changes.

C. FY2024 PIHP – SUD Treatment Contract Amendment (Action Item)

Ms. Potthoff presented the Treatment, Recovery Housing, and Prevention contract amendments together. Most of the changes are the same as the changes made at the state level and also pertain to the FY2024 CMH Contract. There were also a few technical revisions that were detailed by Ms. Potthoff.

D. FY2024 PIHP – SUD Recovery Housing Contract Amendment (Action Item)

Ms. Potthoff presented the amendment together with the SUD Treatment Contract Amendment.

E. FY2024 PIHP – SUD Prevention Contract Amendment (Action Item)

Ms. Potthoff Presented the amendment together with the SUD Treatment Contract Amendment.

It was moved by Mr. Kozfkay, seconded by Ms. Joyce Johnson, to approve the FY2024 PIHP – CMH Contract, the FY2024 PIHP – SUD Treatment Contract Amendment, the FY2024 PIHP – SUD Recovery Housing Contract Amendment, and the FY2024 PIHP – SUD Prevention Contract Amendment as presented. **MOTION CARRIED**

8. Policy

A. Indicia Inter-Rater Reliability Policy (01.05.02) (Action Item)

Ms. Potthoff presented the new policy that was created due to a need to align our policies with the MDHHS standards. The policy addresses standards and procedures regarding a mechanism to implement, monitor and evaluate Utilization Management staff consistency in applying the Indicia system for medical necessity determinations.

It was moved by Ms. Joyce Johnson, seconded by Ms. Umbreit, to approve the Indicia Inter-Rater Reliability Policy #01.05.02 as presented. **MOTION CARRIED**

9. Quality Management

A. FY2023 Performance Indicator Report – 3rd Quarter (Action Item)

Ms. Campbell presented the third quarter report. Performance Indicator #4 was not met by GHS, Sanilac CMH, and the PIHP. Performance Indicator #11 has been discontinued and will be removed for FY2024. There were written root cause analyses and correct action plans submitted by the CMHs for this indicator. Root cause analyses and plans of improvement were included by all CMHs for Indicators 2 & 3. For Performance Indicators #2 & #3, the standard thresholds will be set based on FY2022 aggregate performance, and we will be required to reach either the 50th or 75th percentile, based on our performance in FY2022.

It was moved by Mr. Priemer, seconded by Mr. Hammon, to approve the FY2023 Performance Indicator Report – 3rd Quarter as presented. **MOTION CARRIED**

Mr. Johnson asked that Ms. Campbell bring our standards for indicators #2 & #3 to the next meeting.

B. FY2023 Customer Satisfaction Survey Report (Action Item)

Ms. Campbell presented the Customer Satisfaction Report for FY2023 which was administered to adults and children served by CMHs, and adults served by SUD providers via mail, in person, or telephone outreach. Response totals increased over the prior year, with a total of 1,647 surveys received by adults and 280 surveys received by the parents/guardians of children receiving services. She reviewed methodology, results by CMHs and the SUD network, and a longitudinal comparison from FY2017 to FY2023. She provided a summary of the findings.

There was discussion regarding the barriers to services including transportation and scheduling with staff during the school year. Ms. Campbell referenced the section on *Evaluation of Previous Year's Activities* to show how the CMHs have made efforts to improve based on past survey responses. She reviewed improvement activities, recommendations, and overall satisfaction by provider.

Chairperson Curtiss asked that this year's recommendations and the CMHs responses be included in next year's report. It was also suggested it would be helpful to show additional data, such as the total number of individuals served by each agency, total SUD admissions vs. total completions, and of the total responses, which are made by people in treatment vs. people who have completed treatment.

There was discussion about using various funds to provide transportation.

It was moved by Ms. Thomson, seconded by Mr. Lemons, to approve FY2023 Customer Satisfaction Survey Report as presented. **MOTION CARRIED**

C. SFY2023 Compliance Review Report

Ms. Campbell presented the HSAG report, which was the third year of a three-year cycle. This consisted of a review of the 28 corrective action plans for the elements in the first two years of the cycle that were not met. She noted under Health Information Systems there



were incomplete plans of correction related to API. The PIHPs are in discussions with MDHHS regarding the API requirements. The next compliance review will take place in September 2024.

10. Substance Use Disorder

A. PA2 Funding Request – GHS (Action Item)

Mr. Johnson presented a GHS PA2 request in the amount of \$17,921.80 for community wide training focused on addressing trauma and brain injuries while treating co-occurring disorders. This has been endorsed by the Region 10 Administration and has also been reviewed and endorsed by the Genesee County members of the SUD Oversight Policy Board.

It was moved by Mr. Hammon, seconded by Ms. Thomson, to approve the GHS PA2 funding request in the amount of \$17,921.80. **MOTION CARRIED**

B. PA2 Funding Request – Genesee Community Health Center (Action Item)

Mr. Johnson presented a request for PA2 funds to increase the funds for Genesee Community Health Center Peer Recovery Coaches that was approved by this Board in September 2023. The amount of the increase requested is \$2,079.00. This increase has been endorsed by the Region 10 Administration. The Genesee County representatives of the SUD Oversight Policy Board have endorsed this request.

It was moved by Mr. Kozfkay, seconded by Dr. Dani, to approve the Genesee Community Health Center Peer Recovery PA2 funding increase request in the amount of \$2,079.00. **MOTION CARRIED**

11. Corporate Compliance Training

Ms. Potthoff presented the annual corporate compliance training to the Board regarding Corporate Compliance Complaints.

12. 2024 Board Meetings

It was moved by Ms. Joyce Johnson, seconded by Dr. Dani, to approve the Calendar of 2024 Board meetings as presented. **MOTION CARRIED**

13. Director's Report

Mr. Johnson reported that a new acronym list will be provided at the next meeting.

Recovery Incentive Pilot: The Department is requesting a Request for Application (RFA) for the Recovery Incentives Pilot from interested PIHPs. This pilot will provide incentives for people receiving treatment recovery from stimulant or opioid use disorder who have a negative drug screen, or partial incentive for those with positive screens but are still in treatment. Incentives will be monetary or gift cards and will be funded through Medicaid using opioid settlement funds as the state match. The incentive funds will not be administered by the PIHPs, and it is a two-year pilot. If it is successful, it may be rolled out to the statewide network as part of the Medicaid program.



Conflict Free Access and Planning: This program is to bring the state into compliance with the Home and Community Based Services final rule. This requires implementing a system that limits financial conflict of interest, so they are looking into separating the needs assessment process, the eligibility process, and the planning process from the service provision. The use of structural mitigation is still being expressed as a requirement by MDHHS. This could mean that agencies would only be allowed to do certain functions – separating managed care, assessment and planning functions from ongoing service provision. This has delayed some of our discussions regarding access across the region as we are not sure what the state’s parameters around managed care functions will be . We have been informed that the state should have the structural parameters available for review by January 15th, or possibly the end of January. This should provide guidelines on what the PIHPs can and cannot delegate.

A survey was conducted by the Department asking for input on the current state and future state of the system. The results showed that 80% of the feedback was negative, with 60% of the results regarding the current state of the system. This indicated a significant amount of dissatisfaction across the state. We are hoping for clear guidance from the State within the next month.

Federal Government: A continuing resolution is currently in place, and they are discussing the potential to do a full year continuing resolution. Two representatives are leaving office: Representative McCarthy and Representative Johnson. Representative Santos was also expelled from the House. This has narrowed the majority margin to 219 - 213. In addition, there are 35 representatives retiring after this term, including Dan Kildee.

14. Any Other Business to Properly Come Before the Board

Chairperson Curtiss provided details of Ms. Mills memorial service and introduced her replacement, Mr. John Groustra, from the Sanilac CMH Board. She appointed him as a member of the Regulatory Compliance Committee. There will be a Regulatory Compliance Committee meeting immediately following this meeting.

15. Citizens Wishing to Address the Board

None

16. Adjournment (Action Item)

Moved by Ms. Joyce Johnson to adjourn. With no further business to discuss, Chairperson Curtiss adjourned the meeting at 11:15 a.m.

Respectfully submitted,

Robin Kalbfleisch,
Recording Secretary

Reviewed and approved,

Region 10 PIHP Board
Secretary / Designee