



# 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

April 19, 2024, 9:00 a.m.

Region 10 PIHP

2186 Water Street, Port Huron, MI 48060

---

**Board Members Present:** Lori Curtiss, Dr. Niketa Dani (virtual), John Groustra, Ted Hammon, Joyce Johnson, Gary Jones (virtual), Bob Kozfkay, Chad Polmanteer, Ed Priemer, Nancy Thomson, Bobbie Umbreit, Rex Ziebarth

**Board Members Absent:** DeElla Johnson, Ken Lemons

**Staff Present:** *Region 10 PIHP Staff:* Jim Johnson, Chief Executive Officer; Kelly VanWormer, Chief Operations Officer; Richard Carpenter, Chief Financial Officer (arrived at 9:24 a.m.); Carrie Benacquisto, Finance Director; Lauren Campbell, Quality Manager; Robin Kalbfleisch, Recording Secretary

**CMH Staff:** Wil Morris, Sanilac CMH (arrived at 9:27 a.m.); Dan Russell, GHS

**Guests:** Victoria Ferres of Fletcher Fealko Shoudy & Francis, P.C.

---

**1. Call to Order:**

Called to order at 9:00 a.m. by Chairperson Curtiss. Roll call was conducted by Recording Secretary.

**2. Citizens Wishing to Address the Board**

None

**3. Agenda Changes (Action Item)**

Chairperson Curtiss moved agenda item 5 *Finance* until later in the meeting. It was moved by Ms. Joyce Johnson, seconded by Mr. Priemer, to approve the agenda as presented. **MOTION CARRIED**

**4. Approval of Previous Meeting Minutes (Action Item)**

It was moved by Ms. Thomson, seconded by Mr. Hammon, to approve the March 15, 2024, meeting minutes as presented. **MOTION CARRIED**

**5. Finance**

A. Monthly Finance Report – February 2024 (Action Item)

Mr. Carpenter stated that eligibles continue to decline faster than anticipated. A meeting was held with the state in March and there was a rate adjustment rolled out



effective April 1st, which will adjust additional overtime related to the Direct Care Wage (DCW). We are waiting for guidance on that before we make any changes for payments to providers. The other part of the adjustment is approximately \$110 million statewide for eligibles that are below the original estimation. Total statewide dollars are \$116 million, and Region 10 anticipates receiving a proportionate amount of about 10%. In addition to the approximate \$10 million that Region 10 will receive and the impact from the CCBHCs, Region 10 is in a strong position. Mr. Carpenter expects Region 10 to be in a surplus position for 2024. There was additional discussion about DAB enrollment, which is an issue that the PIHP CEOs actively discuss with MDHHS.

Mr. Carpenter reviewed Traditional Medicaid, which shows an approximate \$7 million redirect into CCBHC and an approximate \$17 million surplus. Healthy Michigan shows about \$1.5 million for the CCBHC redirect and an approximate \$1.5 million surplus. Mr. Carpenter noted that the Medicaid and Healthy Michigan ISF has been funded with "extra funding" based on our interpretation of the contract language. This topic has come back up for discussion recently, and the Department is looking to clarify the language in the contract and limit how the ISF is used. He wanted to make the Board aware as there may be changes for FY2025.

A question was asked if the extra funds in the ISF are invested. Mr. Carpenter responded that the funds are kept liquid, and additional discussion occurred regarding investment of funds and the current ISF balance of about \$58 million.

Mr. Carpenter reviewed the CCBHC summary and noted that there is about \$14 million additional supplemental that has been brought in and about \$21 million in costs covered that would go through Medicaid and Healthy Michigan if we did not have the CCBHC program.

Mr. Carpenter noted the PA2 funds shows a deficit of about \$300,000 as this comes in delayed from the counties.

It was moved by Mr. Kozfkay, seconded by Mr. Hammon, to approve the Monthly Finance report for February 2024 as presented. **MOTION CARRIED**

#### B. Monthly Payment Report – February 2024 (Action Item)

Mr. Carpenter presented the report and stated the HRA payments are not in this report as MDHHS was waiting for approval from CMS. Approval has been received and payments were made in April.

It was moved by Ms. Umbreit, seconded by Mr. Hammon, to approve the Monthly Payment report for February 2024 as presented. **MOTION CARRIED**

## 6. **Region 10 Board By-Laws**

Mr. Johnson presented a draft of the Region 10 Board By-Laws which includes proposed changes from the Executive Committee. He reviewed the changes, which included removal and replacement of "coordinating agency" with "Community Mental Health Entity" in Article 1; updates to board meeting attendance to align with the recently amended Open Meetings Act as well as language changes regarding missed meetings; removal of the reference to "executive sessions"; updates to the section on voting; and adding descriptions to the required committees. Chairperson Curtiss stated this was a draft that she would like everyone to review, and it will be



voted on at the May meeting. She asked that any suggested changes should be directed to Mr. Johnson or Ms. VanWormer.

## 7. Quality Management

- A. FY2024 Q2 Quality Improvement Workplan (Action Item)
  - i. FY2024 Q2 QI Plan Summary

Ms. Campbell presented the workplan for 2<sup>nd</sup> Quarter FY2024 and reviewed in detail the summary page showing the status of the goals. A question was raised about the new performance indicators and if all reasons for missing appointments are counted. Ms. Campbell responded that all reasons are counted and there are no exceptions as there were in the past. A question was asked if the cases that are pulled for an External Quality Review are selected randomly. Ms. Campbell responded that the Encounter Data Validation (EDV) activity will have a record review but she is unsure at this time how the 411 selected cases will be distributed across the network. There will be more information provided in the month of May. For the Performance Measure Validation (PMV) review, the auditors select five cases per indicator per CMH and from the PIHP for SUD cases. There was a question asking to explain biopsychosocial, and Mr. Johnson answered.

It was moved by Ms. Thomson, seconded by Mr. Priemer, to approve the FY2024 Q2 Quality Improvement Workplan as presented. **MOTION CARRIED**

- B. FY2024 1<sup>st</sup> Qtr. MMB Performance Indicator Report (Action Item)

Ms. Campbell presented the report and reviewed each indicator in detail. She noted the standard updates for indicators # 2 and # 3. There was discussion about the 14 days starting at the first point of contact at the Access Center. Ms. Campbell noted that GHS, St. Clair CMH, and the PIHP did not meeting performance indicator # 4. Indicators # 5 and # 6 now show the FY2023 fourth quarter data from MDHHS. Indicators # 8, # 9, # 13, and # 14 are still reporting FY2022 data as FY2023 has not yet been published to the state's website.

Ms. Campbell reviewed the narrative, root cause analyses (RCAs) and corrective action plans (CAPs). She noted that all CMHs were asked to provide RCAs and Plans of Improvement for indicators # 2 and # 3 regardless of performance. This will help us determine what is working so that information can be shared across the region. Ms. Campbell also noted there is a new process for RCAs and Plans of Improvement, and the PIHP is now asking for quarterly updates to the initial plans of improvement.

It was moved by Ms. Joyce Johnson, seconded by Ms. Thomson, to approve the FY2024 1<sup>st</sup> Qtr. MMB Performance Indicator Report as presented. **MOTION CARRIED**

Ms. Thomson thanked Ms. Campbell for attending the St. Clair CMH Board meeting to present on performance indicators.

- C. SFY2023 Encounter Data Validation Aggregate Report

Ms. Campbell summarized the aggregate report, which is a shortened version of the full report. The full report can be found on the Board section of the website. She reported this was an activity that the state opted to participate in for FY2023 to assess the completeness and accuracy of encounter data submitted by managed care entities



across the state. This report is specific to PIHPs. This activity was conducted using two approaches: information systems review and the administrative profile.

Ms. Campbell summarized the findings, noting that there were two areas of improvement for Region 10. The first is that Region 10 was one of five PIHPs that did not submit over 95% of hospital encounters within 90 days of payment. Ms. VanWormer noted that this is an issue mainly when there are multiple payers. Ms. Campbell stated she would look into which hospitals had a delay and the information could be provided to the CMH CFOs. Another finding for Region 10 was related to enrollment data not matching 100% with the encounter data. All PIHPs had some level of discrepancy with their data.

It was noted that Region 10 does very well on several items, including conducting multiple data quality checks, submitting most service encounter information timely, and doing medical record review checks. Ms. Campbell and the Data Manager have reviewed the report and set up an internal tracking template and will revisit the recommendations each month.

A question was raised about tracking hospital data to discover potential liabilities to be able to follow up with them after 30 days. Ms. VanWormer recommended that we follow up to review where the delay is coming from as it may be just one hospital that is non-compliant. Mr. Carpenter noted that the CMHs should be looking into this. This level of detail is not really discussed during the CFO meetings, but it is something that can be discussed if a particular hospital appears to be contributing more than others to the delay. There was additional discussion about not having the authority to leverage payments to hospitals.

## 8. Director's Report

CFAP: Mr. Johnson reported that a meeting took place with the PIHPs at the end of March regarding the framework for the CFAP requirements. Subsequent to that meeting, MDHHS met with CMHSP Directors and advocates and are still planning to meet with groups of people served and non-CMHSP providers. He noted that the PIHPs' requirement to submit a plan to the Department in May will be delayed until likely mid-summer. Contract language is still outstanding, so it is difficult to put together a plan to submit to the Department without additional direction.

The Department is still expecting implementation of the CFAP guidelines by October 1, 2024. The state said they will likely offer exceptions to that timeline as long as the exception requests are accompanied by good faith efforts to meet the October implementation date. The next scheduled meeting with the Department is at the beginning of May. A question was raised on why there is such urgency to implement CFAP by October 1<sup>st</sup>. Mr. Johnson responded that the Department states they have guidance from CMS that they must be in compliance by October 1<sup>st</sup>. They have had this guidance for over 18 months. They claim there must be a structural separation between the planning function and the actual provision of service.

Public Health Emergency: The end of the first year of continuous enrollment has been reached. We are hoping to see more stability in Medicaid enrollments over time moving forward.

Performance Bonus Incentive Pool (PBIP): The state withheld \$2,387,765.40 of Medicaid revenues and we earned back \$2,473,125.30 (a little over 103.5% of our original



withhold). Extra distribution aside, Region 10 earned back approximately 99.2% of the original withhold.

State Level: Mr. Johnson provided a brief update of the recent special election, state budget, and potential Open Meeting Act changes.

**9. Closed Session**

It was moved by Mr. Priemer, seconded by Mr. Hammond, to go into closed session to discuss an opinion letter from our attorney. **MOTION CARRIED** and closed session started at 10:47 a.m.

Reconvened from closed session at 11:24 a.m.

A motion was made by Mr. Groustra, seconded by Mr. Ziebarth, to authorize Ms. Victoria Ferres to negotiate with the attorney on a proposed settlement for a former employee, subject to the Region 10 PIHP Board's approval, and to appoint Chairperson Curtiss to communicate with Ms. Ferres on those negotiations. **MOTION CARRIED**

**10. Any Other Business to Properly Come Before the Board**

It was noted that the May Region 10 Board meeting location will be changed from Sandusky to Port Huron.

Chairperson Curtiss asked Ms. Kalbfleisch to send out a poll to determine if a change should be made to the day of the week that the Board meetings occur. It was determined that the meetings will still take place the third week of each month.

**11. Citizens Wishing to Address the Board**

None

**12. Adjournment (Action Item)**

With no further business to discuss, Chairperson Curtiss adjourned the meeting at 11:30 a.m.

Respectfully submitted,

Robin Kalbfleisch,  
Recording Secretary

Reviewed and approved,

Ken Lemons  
Secretary