

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

February 16, 2024, 9:00 a.m. St. Clair CMH 3111 Electric Ave., Port Huron, MI 48060

Board Members Present: Lori Curtiss, Dr. Niketa Dani (virtual-arrival 9:20 a.m.), John Groustra, Ted Hammon, (arrival 9:08 a.m.), Joyce Johnson, Gary Jones (virtual), Ken Lemons, Chad Polmanteer, Ed Priemer, Nancy Thomson, Rex Ziebarth

Board Members Absent: Ron Barnard, DeElla Johnson, Bob Kozfkay, Bobbie Umbreit,

Staff Present: Region 10 PIHP Staff: Jim Johnson, Chief Executive Officer; Kelly VanWormer, Chief Operations Officer; Richard Carpenter, Chief Financial Officer (virtual); Carrie Benacquisto, Finance Director; Lauren Campbell, Quality Manager; Robin Kalbfleisch, Recording Secretary

CMH Staff: Wil Morris, Sanilac CMH (virtual); Brooke Sankiewicz, Lapeer CMH; Dan Russell, GHS

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 asked to add two items to the agenda after the Directors Report: Executive Committee Meeting and creation of Subcommittee. It was moved by Ms. Joyce Johnson, seconded by Mr. Priemer, to approve the revised agenda as presented. **MOTION CARRIED**

4. Approval of Previous Meeting Minutes (Action Item)

It was moved by Mr. Priemer, seconded by Mr. Hammon, to approve the January 19, 2024, meeting minutes as presented. **MOTION CARRIED**

5. Finance

A. Monthly Finance Report - December 2023 (Action Item)

Mr. Carpenter presented the December 2023 Report. He noted that a correction for pages 5 & 6 is included in the handouts. DAB, TANF, and Healthy Michigan have dropped significantly across all four counties. A decrease in eligibles was not unexpected, but it is



dropping faster than anticipated. He has been working with the other PIHP CFOs across the state to compile a list of all the eligible trends statewide that will be shared with MDHHS in order to show that a mid-year rate adjustment is needed. Region 10 is in a good financial position because of the ISF and Savings. Verbal conversations with MDHHS have indicated if the trend is below anticipated, they will review the rates.

Healthy Michigan revenue was expected to be lower, but we did not expect the DAB revenue to fall so quickly. He will keep an eye on the revenue trend. There was additional discussion on the decrease in DAB revenue, which may be related to the DAB population re-enrollments going to Healthy Michigan and the new Medicaid eligibility program "Plan First".

Traditional Medicaid has a surplus of about \$11.3 million. Healthy Michigan has a surplus of about \$1.4 million. CCBHC redirects for all four CMHSPs are now included in the report. If the downward revenue trend continues, it will start reducing the surplus for both Traditional Medicaid and Healthy Michigan.

Mr. Carpenter reviewed the CCBHC funding and stated that there was about \$12 million in revenue generated, with expenses of about \$13 million. He noted it will take about six months for the new CCBHCs to ramp up their programs. He stated the CCBHC programs are benefiting the PIHP by bringing additional funding into the region and covering a significant number of Medicaid eligible recipients.

It was moved by Ms. Thomson, seconded by Mr. Lemons, to approve the Monthly Finance report for December 2023 as presented. **MOTION CARRIED**

B. Monthly Payment Report - December 2023 (Action Item)

Mr. Carpenter presented the December 2023 report.

It was moved by Ms. Joyce Johnson, seconded by Ms. Thomson, to approve the Monthly Payment report for December 2023 as presented. **MOTION CARRIED**

6. Quality Management

A. FY2023 Performance Indicator Report - 4th Quarter (Action Item)

Ms. Campbell presented the report for the 4th Quarter and reviewed the indicators. She reported starting in the first quarter of 2024, there will be set benchmarks for indicators under #2.a., #2.b., and #3 as discussed at last month's meeting. Ms. Thomson wanted to confirm if the percentile scoring was determined by region, not by agency. Ms. Campbell responded that the state looks at PIHP performance, but Region 10 will be looking at provider level performance using the established benchmarks. Ms. Campbell noted that St. Clair CMH and the PIHP did not meet the performance standard for #4.a.1. and the PIHP did not meet the standard for 4.b. Under indicators #8, #9, #13, and #14, FY2022 data is still included as FY2023 data is not yet available from MDHHS. Sanilac CMH and St. Clair CMH did not meet indicator #10.a. Indicator #11 will be removed for 2024 reporting.

Ms. Campbell reviewed the Root Cause Analyses/Corrective Action Plans reported by Sanilac CMH, St. Clair CMH, and the Region 10 SUD system. In addition, she reviewed the Root Cause Analyses/Plans of Improvement for all CMHs and the PIHP SUD system for the indicators without established benchmarks at this time.



Mr. Priemer inquired about the St. Clair CMH Plan of Correction stating they will ensure the collection of accurate contact information; however, it does not provide details of how this will be ensured. Ms. Campbell responded that the PIHP is looking at a more formal process to be implemented for obtaining clarification or more detail on the responses as needed."

It was moved by Ms. Thomson, seconded by Mr. Lemons, to approve FY2023 Performance Indicator Report – 4th Quarter as presented. **MOTION CARRIED**

7. Substance Use Disorder

A. Meeting Minutes (1.2.24)

Mr. Johnson presented the minutes and referenced the presentation on Opvee and the submission of a proposal for the Recovery Incentives Pilot.

8. Director's Report

<u>SOR Funding:</u> Mr. Johnson reported that the PIHP has been alerted by the state that there were services provided and paid for by the State Opioid Response (SOR) grant where not all of the conditions of SOR had been met. Specific conditions not met were regarding the completion of the required GPRA (Government Performance and Results Act) survey by treatment providers at intake. Mr. Johnson emphasized that we have not authorized or paid for unnecessary services, or services that we would not have authorized anyway. The issue is that we now have to use a different funding source for these services for FY2023 and FY2024 to date because we cannot associate a GPRA survey with the initiation of those services. We may have to reassign up to \$1.7 million for FY2023 to other sources, which may include PA2. We are still evaluating FY2024. We are in the process of developing strategies to bring Region 10 into compliance in this area. The impact will be seen on future financial reports. This will also likely lead to audit findings on future audits.

Performance Bonus Incentive: We have received a consultative draft regarding our "earnings" relative to the Performance Bonus Incentive Pool (PBIP) for FY2023. According to the draft, Region 10 earned 100% on the PIHP only metrics (the larger pool) and 97.2% on the Medicaid Health Plan Joint Metrics measures. Our overall total is approximately 99.2%, which equates to over \$2,367,000. As with past years, our performance may entitle us to a share of the statewide unearned revenues so the final amount received could actually end up greater than the amount withheld. We will have our official final numbers by March 15th.

<u>Deceased Recovery</u>: The federal government discovered years ago that many Medicaid capitation payments were being sent out for individuals who were no longer alive. The state has put procedures in place to catch that sooner, however those funds will need to be paid back. MDHHS has reached an agreement with CMS to recover the federal share of the capitation payments in two recoupment payments: \$18 million in March and \$6 million in June. We will receive information on the PIHP share of those numbers soon.

<u>Conflict Free Access and Planning (CFAP)</u>: We had been informed by CMHA that CCBHCs would not be subject to CFAP, but the state has said that is not necessarily the case. The PIHPs met with the Department a couple of weeks ago and were informed that there will be communication in February regarding the new state guidelines and parameters related to CFAP. We have not been given a timeline for PIHP plan



development required by the new guidelines but implementation of whatever is required continues to be slated for 10/1/2024.

<u>State Budget:</u> The Governor's budget proposal was released in early February. The Senate and House will convene and provide responses to her budget and there should be a budget by June. A special election will occur at the end of April, with Democrats expected to remain in the two House seats that were vacated earlier this year. Items in the Governor's budget include an increase in funding for Medicaid-Mental Health and SUD, increase in funding for autism, decrease in Healthy Michigan behavioral health funding, and a big increase in the CCBHC funding. There is also \$8.3 million for Medicaid SUD peer services in hospital settings.

<u>Other:</u> There was a question about the GPRA survey and whether Region 10 has seen any information showing the usefulness of it. Mr. Johnson stated he could bring back a report from Wayne State that shows this information.

13. Any Other Business to Properly Come Before the Board

Chairperson Curtiss asked that the Executive Board meet within the next month to discuss Board attendance and other things.

Chairperson Curtiss appointed a subcommittee to discuss managed care functions, such as CFAP. Mr. Johnson said it would be helpful to have a more in-depth discussion with Board members and then be able to bring back information to the full Board. Subcommittee members are Ms. Thomson, Mr. Polmanteer, Mr. Hammon, and Mr. Kozfkay. Meeting frequency may be monthly to start, and then possibly move to quarterly or as needed and may take place virtually.

14. Citizens Wishing to Address the Board

None

15. Adjournment (Action Item)

Moved by Mr. Hammon to adjourn. With no further business to discuss, Chairperson Curtiss adjourned the meeting at 10:13 a.m.

Respectfully submitted,

Reviewed and approved,

Robin Kalbfleisch, Recording Secretary Region 10 PIHP Board Secretary / Designee