

Southwest Michigan

BEHAVIORAL HEALTH

Substance Use Disorder Oversight Policy Board (SUDOPB)

5250 Lovers Lane, Suite 200, Portage, MI 49002

or

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Access Code: 250-012-069

Monday, November 15, 2021

4:00-5:30

Draft: 11/10/21

1. **Welcome and Introductions (Randall Hazelbaker)**
2. **Public Comment**
3. **Agenda Review and Adoption (Randall Hazelbaker) (d) (pg.1)**
4. **Financial Interest Disclosure and Conflict of Interest Handling**
 - a) Joanna McAfee, Kalamazoo County
 - b) Jared Hoffmaster, St. Joseph County
5. **Consent Agenda (Randall Hazelbaker)**
 - September 13, 2021 Meeting Minutes (d) (pg.3)
6. **Board Education**
 - a) Fiscal Year 20/21 YTD Financials (G. Guidry) (d) pg.5
 - b) PA2 Utilization Fiscal Year 21 YTD (G. Guidry) (d) pg.6
 - c) PA2 Year End Outcomes Report (A. Miliadi) (d) pg.7
 - d) American Rescue Plan Act Proposal (J. Smith) (d) pg.14
7. **Board Actions to be Considered (Randall Hazelbaker)**
 - a) 2022 Meetings and Open Meetings Act
 - b) Amendment Request: Substance Abuse Council – Calhoun (d) Pg.18
 - c) Amendment Request: Substance Abuse Prevention Services – Calhoun (d) pg.29
8. **Board Actions**
 - 2022 SUDOPB Meetings (R. Hazelbaker) (d) pg.36
9. **Communication and Counsel**
 - a) Legislative and Policy Updates (B. Casemore) (d) pg.37
 - b) 2021 SWMBH Successes and Accomplishments (B. Casemore) (d) pg.39
 - c) January 2022 Board Elections (Chair and Vice Chair)
 - d) SUDOPB Attendance Report and contact information (M. Jacobs) (d) pg.57
10. **Public Comment**
11. **Adjourn**

The meeting will be held in compliance with the Open Meetings Act, 1976 PA 267, MCL 15.261 to 15.275

Southwest Michigan

BEHAVIORAL HEALTH

Substance Use Disorder Oversight Policy Board (SUDOPB) Meeting Minutes September 13, 2021 3:00 – 5:30 pm Draft: 9/14/21

Members Present: Randall Hazelbaker (Branch County); Richard Godfrey (Van Buren County); Michael Majerek (Berrien County); Jared Hoffmaster (St. Joseph County); Kathy-Sue Vette (Calhoun County); Joanna McAfee (Kalamazoo County); Paul Schincariol (Van Buren County); Rochelle Hatcher (Calhoun County)

Members Absent: Don Meeks, (Berrien County); Jeremiah Jones (Cass County); Ben Geiger (Barry County)

Staff and Guests Present:

Brad Casemore, Executive Officer, SWMBH; Joel Smith, Substance Use Treatment and Prevention Director, SWMBH; Mila Todd, Chief Compliance Officer, SWMBH; Michelle Jacobs, Senior Operations Specialist and Rights Advisor, SWMBH; Garyl Guidry, Senior Financial Analyst, SWMBH; Achilles Malta, Regional Coordinator for SUD Prevention Services, SWMBH; Anastasia Miliadi, SUD Treatment Specialist, SWMBH; Emily Flory, Opioid Health Homes Coordinator, SWMBH; Cathy Hart, Clinical Projects and Grants Specialist, SWMBH; Megan Banning, Chris Dale, Marletta Seats, Terra Ballista, Hailey Richards, Shay Pounds, Kari Johnson, Jeanne Holton, Jessica Singer, Hollywood Watkins, Kendall Kasey, Samantha Rantz, Ashley Kipp, Stefanie Belote

Welcome and Introductions

Randall Hazelbaker called the meeting to order at 3:03 pm. Introductions were made.

Public Comment

None

Agenda Review and Adoption

Motion	Paul Schincariol moved to approve the agenda.
Second	Richard Godfrey
Motion carried	

Financial Interest Disclosure Handling

Mila Todd stated that Financial Interest Disclosure and Conflict of Interest forms were sent to Joanna McAfee, Kalamazoo County, and Jared Hoffmaster, St. Joseph County for completion. The completed forms have not been received and Mila Todd asked that this agenda topic be added to the November Board Meeting.

Public Act 2 Dollars

SWMBH Fiscal Year 2022 PA2 Budget Summary

Garyl Guidry reported as documented

Board Questions and Answers

None

Public Comment

Several providers and clients shared stories of the impact that the PA dollars have had on services, included lives changed and saved due to SWMBH SUD treatment services.

Consent Agenda

Motion	Richard Godfrey moved to accept the July 19, 2021 meeting minutes as presented.
Second	Paul Schincariol
Motion carried	

Board Actions to be Considered

Conflict of Interest Management Memo

Mila Todd reported as documented and questioned the Board if any Board Members or their immediate family had any financial interests, or if anyone otherwise felt they could not act in the best interests of SWMBH, in considering and voting on the PA2 budgets. All Board members in attendance disclosed none.

Board Actions

Fiscal Year 2022 PA2 Budget

Randall Hazelbaker asked for a motion regarding the fiscal year 2022 PA2 budget.

Motion	Kathy-Sue Vette moved to adopt the appropriations act for Southwest Michigan Behavioral Health's Fiscal Year 2022, 1986 Public Act 2 (MCL 211.24e[11]) funds for the treatment and/or prevention of substance use disorders.
Second	Paul Schincariol
Upon a roll call vote, the following members of the Board voted yes:	Michael Majerek, Randall Hazelbaker, Kathy-Sue Vette, Joanna McAfee, Jared Hoffmaster, Richard Godfrey, Paul Schincariol
The following voted no:	None
Motion Carried	

Board Education

Fiscal Year 20/21 YTD Financials

Garyl Guidry reported as documented, highlighting numbers for Medicaid, Healthy Michigan, MI Child, Block Grant, and PA2. Discussion followed.

PA2 Utilization FY20 YTD

Garyl Guidry reported as documented.

International Overdose Awareness Day

Achilles Malta reported as documented, noting SWMBH's support of the August 31, 2021, International Overdose Awareness Day by providing Narcan to regional local pharmacies.

Opioid Health Home Update

Emily Flory reported as documented.

SOR 2 Grant and COVID Supplemental Funding

Joel Smith reported as documented.

Orientation for New Members

Joel Smith asked for input from new Members on Orientation needed. Brief discussion followed and Michelle Jacobs will reach out to new members to schedule an orientation before the November meeting.

Opioid Settlement Funding Update

Joel Smith stated that opioid settlement lawsuits are final, and dollars awarded will go directly to local governments and townships with probably parameters on spending.

Communication and Counsel

Legislative Updates

Brad Casemore shared the following updates:

- 6th Annual Healthcare Policy Forum scheduled for October 1, 2021 at the Four Points Sheraton in Kalamazoo
- Recent Behavioral Health transformation proposals from Rep. Mike Shirkey and Rep. Mary Whiteford
- 9/14/21 streaming session initiated by Senator Shirkey – link to listen will be sent out to Board members

6th Annual Healthcare Forum Event

Brad Casemore reported as documented and encouraged Board members to invite constituents to attend the event as well.

Provider Network Stability Report

Mila Todd reported as documented.

SUDOPB Attendance Report

Michelle Jacobs reported as documented noting that the attendance report will be sent to County Commissioner Board Chairs at the end of the year.

November 15, 2021, SUDOPB meeting and luncheon

Brad Casemore asked the Board members if they would like to meet in person on November 15th for a luncheon and then regular meeting. Board members agreed to meet in person. Details and location to be determined and communicated soon.

Adjourn

Motion	Kathy-Sue Vette moved to adjourn.
Second	Richard Godfrey
Motion carried	

Meeting was adjourned at 5:00pm.



	A	D	E	F	G	H	I	J	K
1	Substance Use Disorders Revenue & Expense Analysis Fiscal Year 2021								
2	For the Fiscal YTD Period Ended 9/30/2021								
4		MEDICAID				Healthy MI			
5		Budgeted	Actual	YTD	Fav	Budgeted	Actual	YTD	Fav
6		YTD Revenue	YTD Revenue	Expense	(Unfav)	YTD Revenue	YTD Revenue	Expense	(Unfav)
7	Barry	2,273,881	189,490	97,117	92,373	1,244,449	446,020	103,704	342,316
8	Berrien	8,811,403	734,284	376,387	357,897	9,244,476	1,791,933	770,373	1,021,560
9	Branch	2,401,742	200,145	57,814	142,331	1,171,496	416,865	97,625	319,241
10	Calhoun	9,405,258	783,772	448,591	335,180	10,695,701	1,662,442	891,308	771,133
11	Cass	2,682,968	223,581	141,833	81,748	6,708,073	526,700	559,006	(32,306)
12	Kazoo	12,176,103	1,014,675	394,857	619,818	8,893,346	2,611,614	741,112	1,870,502
13	St. Joe	3,449,638	287,470	129,435	158,035	5,073,807	691,652	422,817	268,835
14	Van Buren	4,584,766	382,064	150,600	231,464	3,633,036	855,293	302,753	552,540
15	DRM	2,817,328	2,951,816	3,079,874	(128,058)	5,675,202	6,374,899	5,782,071	592,828
16	Admin/Access	0	0	0	0	0	0	0	0
17	Grand Total	48,603,087	6,767,296	4,876,508	1,890,788	52,339,586	15,377,418	9,670,770	5,706,648
19		BLOCK GRANT				BLOCK GRANT BY COUNTY			
20	EGRAMS	Budgeted	Actual	YTD	Fav	Budgeted	Actual	YTD	Fav
21	SUD Block Grant	YTD Revenue	YTD Revenue	Expense	(Unfav)	YTD Revenue	YTD Revenue	Expense	(Unfav)
22	Community Grant	3,283,604	2,307,060	2,307,060	0	Barry	223,980	223,980	0
23	WSS	250,000	153,942	153,942	0	Berrien	242,909	242,909	0
24	Prevention	1,204,535	1,169,346	1,169,346	0	Branch	99,241	99,241	0
25	Admin/Access	80,000	80,000	80,000	0	Calhoun	391,945	391,945	0
26	Partnership for Success*	126,000	70,633	70,633	0	Cass	152,657	152,657	0
27	Gambling Prevention*	188,684	170,384	170,384	0	Kazoo	605,973	605,973	0
28	State's Opioid Response NCE	1,460,996	1,319,982	1,319,982	0	St. Joe	89,423	89,423	0
29	State's Opioid Response 2	1,385,000	919,339	919,339	0	Van Buren	174,757	174,757	0
30	State Disability Assistance	128,219	97,551	97,551	0	DRM	1,649,463	1,649,463	0
31	COVID Community Grant Treat	673,868	135,839	135,839	0	Admin/Access	238,277	238,277	0
32	COVID Prevention	324,468	292,746	292,746	0				
33	COVID SUD Admin	50,000	50,000	50,000	0				
34	COVID WSS	249,537	0	0	0				
36	Mental Health Block Grant								
37	Transitional Navigators	298,880	103,029	103,029	0				
38	Clubhouse Engagement*	100,000	13,013	13,013	0				
39	Veterans Navigator*	100,000	100,000	100,000	0				
40	Crisis Transportation	101,120	21,417	21,417	0				
41	MHBG Childrens Covid-19	366,000	6,837	6,837	0				
42	MHBG Adult Covid-19	291,000	10,750	10,750	0				
43	Admin/Access	0	0	10,304	(10,304)				
44									
50	Grand Total	10,661,911	7,021,868	7,032,172	(10,304)		3,868,624	3,868,624	0
52		PA2				PA2 Carryforward			
53		Budgeted	Actual	YTD	Fav		Current	Prior Year	Projected
54		YTD Revenue	YTD Revenue	Expense	(Unfav)		Utilization	Balance	Year End Balance
55	Barry	78,897	79,701	22,110	57,591	Barry	57,591	515,148	572,739
56	Berrien	366,086	359,136	262,527	96,609	Berrien	96,609	503,772	600,381
57	Branch	65,295	64,200	8,827	55,374	Branch	55,374	364,424	419,798
58	Calhoun	68,978	344,270	386,097	(41,828)	Calhoun	(41,828)	357,654	315,826
59	Cass	339,439	63,962	21,861	42,101	Cass	42,101	385,399	427,499
60	Kazoo	677,841	676,650	606,527	70,123	Kazoo	70,123	1,784,112	1,854,235
61	St. Joe	101,609	100,863	59,797	41,066	St. Joe	41,066	267,606	308,673
62	Van Buren	149,862	145,037	96,386	48,651	Van Buren	48,651	290,493	339,144
63	Grand Total	1,848,005	1,833,819	1,464,133	369,687		369,687	4,468,607	4,838,294
64	* Quarterly Financial Status Reporting								
65									

Program	FY21 Approved	Utilization FY 21		YTD
	Budget	Oct-Sep	PA2 Remaining	Utilization
Barry	54,500.00	22,110	32,390	41%
BCCMHA - Outpatient Services	54,500	22,110	32,390	41%
BCCMHA - Prevention Services	78,614	-	78,614	0%
Berrien	383,033.82	257,313	125,721	67%
Abundant Life - Healthy Start	74,000	74,000	-	100%
Berrien County - Drug Treatment Court	15,000	497	14,503	3%
Berrien County - Trial courts	48,610	43,659	4,951	90%
Berrien MHA - Riverwood Jail Based Assessment	18,058	860	17,198	5%
CHC - Niles Family & Friends	5,739	-	5,739	0%
CHC - Wellness Grp	9,328	567	8,761	6%
CHC - Women's Recovery House	37,730	37,730	-	100%
Sacred Heart - Juvenile and Detention Ctr	74,569	-	74,569	0%
Berrien County Health Department - Prevention Ser	100,000	100,000	-	100%
Branch	36,430.00	8,827	27,604	24%
Pines BHS - Outpatient Treatment	34,430	8,827	25,604	26%
Pines BHS - WSS	2,000	-	2,000	0%
Calhoun	393,699.17	382,873	10,826	97%
Calhoun County 10th Dist Drug Sobriety Court	124,929	124,403	526	100%
Calhoun County 10th Dist Veteran's Court	6,450	4,208	2,242	65%
Calhoun County 37th Circuit Drug Treatment Court	175,225	175,225	0	100%
Haven of Rest	37,095	37,095	-	100%
Michigan Rehabilitation Services - Calhoun	25,000	25,000	-	100%
Summit Pointe - Juvenile Home	25,000	16,941	8,059	68%
Cass	82,500.00	21,861	60,639	26%
Woodlands - Meth Treatment and Drug Court Outp	82,500	21,861	60,639	26%
Woodlands - Prevention Services	38,416	-	38,416	0%
Kalamazoo	949,541.50	614,965	334,577	65%
8th District Probation Court	8,500	5,141	3,359	60%
8th District Sobriety Court	26,500	12,884	13,616	49%
8th District Young Adult Diversion Court	5,000	4,906	94	98%
9th Circuit Drug Court	60,000	56,139	3,861	94%
CHC - Adolescent Services	19,619	18,682	936	95%
CHC - Bethany House	27,200	-	27,200	0%
CHC - New Beginnings	77,627	75,175	2,452	97%
CHC - Healing House	19,476	-	19,476	0%
Gryphon Gatekeeper - Suicide Prevention	20,000	20,000	-	100%
Gryphon Helpline/Crisis Response	36,000	36,000	-	100%
Interact - IDDT	26,600	9,145	17,455	34%
KCHCS Healthy Babies	87,000	81,920	5,080	94%
ISK - EMH	56,400	56,400	-	100%
ISK - FUSE	25,000	25,000	-	100%
ISK - Mental Health Court	65,000	65,000	-	100%
ISK - Oakland Drive Shelter	34,000	34,000	-	100%
KPEP Social Detox	20,000	-	20,000	0%
Michigan Rehabilitation Services - Kalamazoo	17,250	17,250	-	100%
Prevention Works - Task Force	80,000	50,000	30,000	63%
Prevention Works - ATOD	120,000	-	120,000	0%
Recovery Institute - Recovery Coach	60,623	42,745	17,878	71%
WMU - BHS SBIRT	51,747	-	51,747	0%
WMU - BHS Text Messaging	6,000	4,578	1,422	76%
St. Joseph	83,040.00	59,797	23,243	72%
3B District - Sobriety Courts	2,200	770	1,430	35%
3B District - Drug/Alcohol Testing	16,640	15,725	915	95%
CHC - Hope House	21,000	20,433	567	97%
CMH - Court Ordered Drug Testing	43,200	22,869	20,331	53%
Van Buren	134,359.10	96,385	37,974	72%
Van Buren CMHA	94,359	62,050	32,309	66%
Van Buren County Drug Treatment Court	40,000	34,335	5,665	86%
Totals	2,234,134	1,464,131	770,002	66%



END OF THE YEAR PA2 FUNDED OUTCOMES REPORT

REPORTING PERIOD 10/1/20 TO 09/30/21



Brief History

- **Each County determines use of local PA2 SUD dollars.**
- **Each provider must submit their own outcome measures.**
- **SWMBH works with providers to make measures specific, measurable, attainable, and time limited.**
- **SWMBH works with providers to help determine the effectiveness of their programs.**

OVERVIEW OF PA2 FUNDED PROGRAMS: END OF THE YEAR FY21

26 providers

53 Programs

167
Outcome
measures

MID YEAR MEASUREMENT DEFINITIONS

Met: Clearly meets or exceeds outcome.

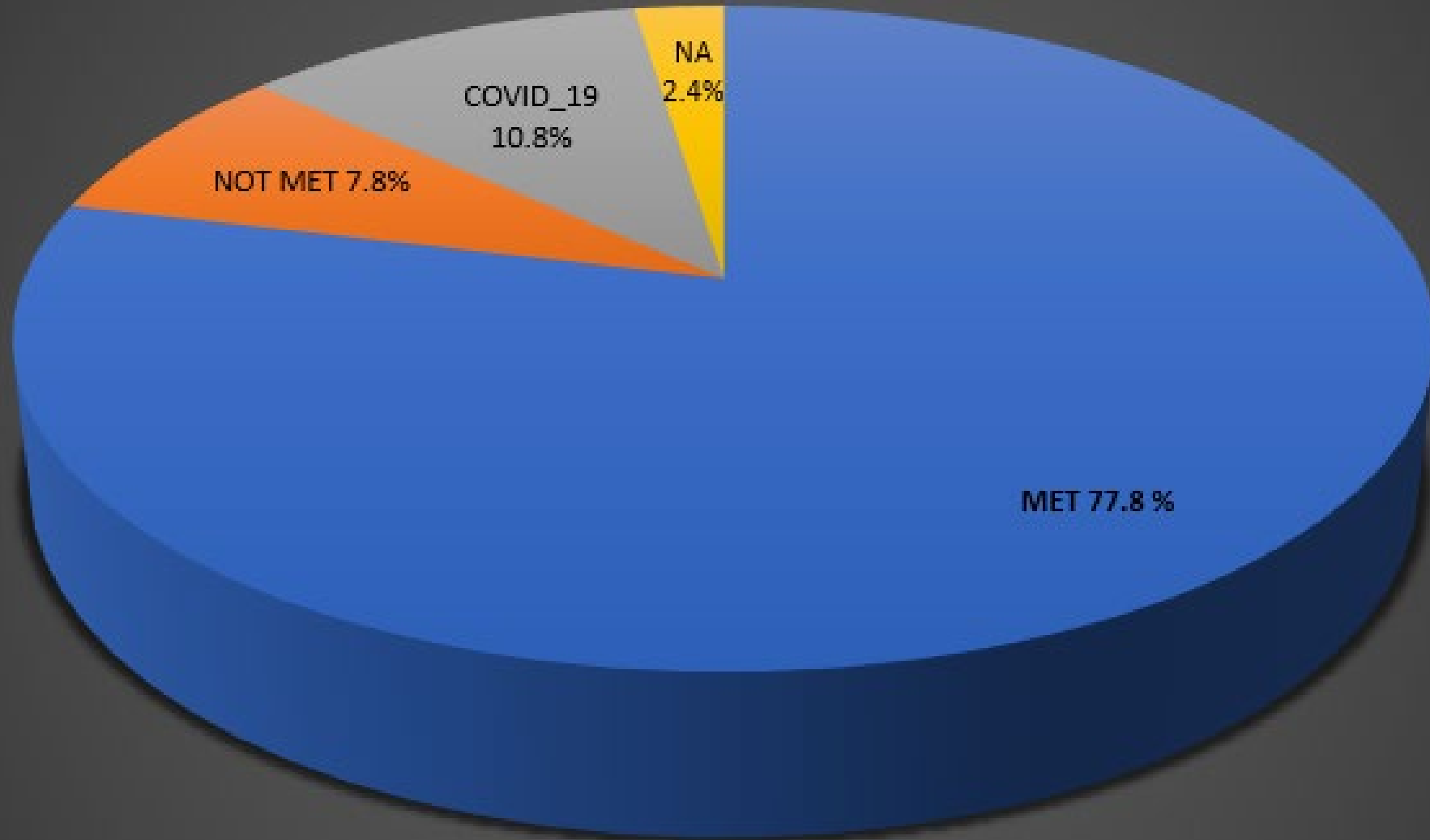
Not Met: Not meeting outcome.

Not Met due to the Pandemic:
COVID-19 affected services

Outcome Not Applicable: Services are still in progress (ex: completion of specialty court, completion of services, etc.).



End of the Year PA2 Report



County	Total Outcome Measures	Met	Not Met	Not met due to Covid	NA
Barry	4	4	0	0	0
Berrien	26	18	4	2	2
Branch	13	10	0	2	1
Cass	3	2	0	1	0
Calhoun	26	23	3	0	0
Kalamazoo	79	63	5	10	1
St Joe	8	4	4	0	0
Van Buren	8	2	0	5	1
	167	126	16	20	5

- The pandemic has disrupted services worldwide. Delivering services in jails continues to be challenging due to **COVID-19** restrictions.
- Despite the pandemic, **Specialty courts** (drug treatment court, sobriety court, veteran's court, etc.) continue to experience significant demand for services.
- **100% goals** are difficult to meet.
- **Meeting goals based on percentages** is difficult when customer counts are low.
- **Follow through with services** after an intervention continues to be a challenge.
- **SWMBH** continues to work closely with providers to create measures that are specific, measurable, timely, and simple and continues to review utilization of the programs.



SABG Supplemental – **Southwest Michigan Behavioral Health – Region 4**

PIHP Project Proposal(s):

Prevention	Activity	Budget available per PIHP/year	Region 4 Response
	Student Assistance Programming- Alternatives to suspension for substance use (PFL 420, Teen Intervene and etc.)	\$100,000	SWMBH has various prevention providers working with schools in this capacity. This would allow for further expansion of the services in at least four counties. Funding would primarily be used for staffing expenses and other related supplies. Expansion/implementation could occur as early as January, 2022.
	<p>Evidence-Based Program/Practice provision to include program training/fidelity for diverse priority areas and populations determined by community needs assessment, including:</p> <ul style="list-style-type: none"> ○ Marijuana awareness and prevention ○ Underage alcohol use awareness and prevention ○ Youth tobacco/ENDS use prevention. ○ Prescription drug misuse prevention ○ Focus on older adult population - Workforce trainings to ensure staff have the knowledge, skills, and abilities to address behavioral health among older adults. Educational programs such as WISE, Chronic Pain PATH, Chronic Disease PATH. Peer support model to include older adults. 	\$119,060	SWMBH has various prevention providers working in this capacity. This would allow for further expansion of the services in at least six of our counties. Funding would primarily be used for staffing expenses and other related supplies. Expansion/implementation could occur as early as January, 2022.
Treatment	Staffing support: same day appointments for OTP, WM, Residential	\$50,000	SWMBH maintains access oversight for all higher levels of care including OTP, WM, and Residential.

			SWMBH will develop a process and procedure to incentivize providers to provide same day appointments for the above-mentioned levels of care. Incentivized rates will be determined by LOC and provided to a select number of providers when clients receive same day admission (request for service and admission date are the same).
	SUD Health Home maintenance	\$10,000	<p>SWMBH will utilize this funding to help support training needs for our three Opioid Health Home partner agencies. Specifically, on-going training for community health worker certification is needed. Implementation of training will be based on availability of training resources and staff needs.</p> <p>For future funding periods, SWMBH would like to utilize these funds to provide OHH services to those customers that live outside of the two OHH counties.</p>
	Accessing Behavioral Health for African American and other disparate populations – utilizing anchor institutions for connections to provider services.	Defer	The Michigan Health Endowment Fund has funded a SWMBH partner agency that is examining possible solutions to health care disparities for African Americans. SWMBH is partnering with Synergy Center as part of this grant. Therefore, SWMBH will defer requesting grant funding until FY23 once recommendations from the MIHEF grant are completed.
	Telehealth Technology – provider updates to make telehealth more accessible – year 1 only	\$75,000	SWMBH will utilize the funding to help SUD providers with equipment needs and subscription expenses for telehealth platforms.
	Telehealth Hubs in the community – allow individuals without reliable access a community space to participate in telehealth sessions.	\$50,000	SWMBH will utilize funding for the Recovery Institute of SW MI to allocate private space and

			technology/equipment for individuals to participate in telehealth sessions.
Recovery	Prosocial Activities for youth in recovery or misusing substances	NA	Not interested.
	Youth Community Centers – funding for 2 available each year	NA	Not interested.
	Individualized Placement and Support	NA	Not interested.
	Collegiate Recovery Programs – support for peer recovery services, training, development of additional programs (up to 10 programs in total)	Defer	In reviewing CRPs, it appears the SWMBH region does not have a CRP despite having various colleges and universities. SWMBH will explore interest/need at colleges and will defer any request of funding until future years.
	Recovery Community Organization development	Up to 4 organizations/year - \$150,000	Recovery Institute of SW MI is interested in becoming an RCO. They have a long history of providing recovery services to both SMI and more recently, SUD customers. Funding would assist with ARCO certification, staffing for project management, technical assistance/consultant expenses, technology upgrades, community events, and training expenses.
	Recovery Support Services to special populations: older adults, WSS, youth, incarcerated	Defer	SWMBH will explore needs this year and will defer any request of funding until future years. The ability to hire staff continues to be a significant barrier for providers to expand programming and SWMBH will explore the feasibility of adding additional recovery supports next year which may include recovery supports for individuals being released from prison.
	Recovery Housing	\$100,000	Funding will be used to expand the availability of recovery house beds within the region. Funding would allow for MARR certification, staffing, and room and board days if needed.

DIRECTIONS TO COMPLETE BUDGET FORMS

Budget Summary Report - Form required to complete net cost contract.

1. Population - Check the appropriate box(s) for expected populations to be served by this budget.
2. Program - Select from the pull down menu (up to 3 programs per template).
3. CFDA # - If Federally funded a CFDA # will populate once a program is selected.
4. Date Prepared - Enter date the budget summary was completed.
5. Contractor Name - Enter agency name.
6. Budget Period - Date range the budget submitted pertains to.
7. Mailing Address - Enter address of agency.
8. Budget Agreement:
 - A. Original - first time submitting budget request.
 - B. Amendment - corrected data submitted for previously submitted budget.
 - C. Enter the number of Amendment, example 1,2 etc.
9. Detail 1, 2, & 3 - DO NOT ENTER DATA. All data is pulled from the Budget Detail.
10. Source of Funds - Enter total amount funded in appropriate funding category.
11. Section 2.3 & 2.4 - Check appropriate response.

Budget Detail Report(s) - Form required to complete net cost contract.

1. Budget period, date prepared, name and Amendment number are pulled from the budget summary.
2. Budget Agreement - select original or amendment.
3. Salaries and Wages:
 - A. Position Description - Job title and/or brief description.
 - B. Comments - use if explanation is needed, example, position is 40 hours a year.
 - C. FTE Required - total FTE to be funded through this contract.
 - D. Total Salary - Amount needed to fund the position.
4. Fringe Benefits - Check boxes that the fringe rate includes. Put fringe rate in composite rate cell. Fringe will automatically calculate based on composite rate.
5. Travel, Supplies & Materials, Equipment, Utilities, Insurance, Repairs and Maintenance, Rental/Lease and Other expenses - Enter brief description and annual amount.
6. Contractual - Enter contractors name, address and/or brief description, and annual amount.

If this is a Prevention budget and you have contracted Direct service workers you must either enter number of hours worked per week/month or FTE.
7. Indirect Costs - Put indirect rate in indirect rate cell. Indirect amount is automatically calculated based on rate.

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET SUMMARY**

POPULATION(S): ☐ MIA ☐ SED ☐ DDA ☐ DDC ☐ SA

PROGRAM:		PROGRAM	CFDA	DATE PREPARED:
Drug Prevention Services		COMMUNITY BLOCK GRANT	93.959	11/10/2021
		COVID - PREVENTION	93.959	BUDGET PERIOD:
		PUBLIC ACT 2 - PA2	N/A	From: 10/1/2021
CONTRACTOR NAME:				
Substance Abuse Council		To: 9/30/2022		
MAILING ADDRESS (Number and Street):		BUDGET AGREEMENT:		
315 W. Green St.		<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT		
CITY:	STATE:	ZIP CODE:	AMENDMENT NO:	FEDERAL TAX ID:
Marshall	MI	49068		38-2699513

EXPENDITURE CATEGORY	0	0	0	TOTAL BUDGET
1. SALARIES AND WAGES	177,000.00	-	-	177,000.00
2. FRINGE BENEFITS	14,160.00	-	-	14,160.00
3. TRAVEL	3,000.00	-	-	3,000.00
4. SUPPLIES AND MATERIALS	9,000.00	-	-	9,000.00
5. CONTRACTUAL	16,250.00	-	-	16,250.00
6. EQUIPMENT	2,000.00	-	-	2,000.00
7. UTILITIES	4,000.00	-	-	4,000.00
8. INSURANCE	1,400.00	-	-	1,400.00
9. REPAIRS AND MAINTENANCE	-	-	-	-
10. RENTAL/ LEASE	4,300.00	-	-	4,300.00
11. OTHER EXPENSES	1,000.00	-	-	1,000.00
12. TOTAL DIRECT EXPENDITURES (Sum of Lines 1-11)	\$ 232,110.00	\$ -	\$ -	\$ 232,110.00
13. INDIRECT COSTS Rate %	-	-	-	-
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13)	\$ 232,110.00	\$ -	\$ -	\$ 232,110.00
SOURCE OF FUNDS				
15. FEES AND COLLECTIONS	-	-	-	-
16. SWMBH	-	-	-	-
17. LOCAL/MATCH	-	-	-	-
18.- 20. SWMBH FUNDING SOURCE	-	-	-	-
COMMUNITY BLOCK GRANT - PREVENTION	102,053.29	-	-	102,053.29
COVID - PREVENTION II	71,807.34	-	-	71,807.34
PUBLIC ACT 2 - PA2	58,249.37	-	-	58,249.37
21. OTHERS	-	-	-	-
22. TOTAL FUNDING	\$ 232,110.00	\$ -	\$ -	\$ 232,110.00

SECTION 2.3.: ABILITY TO PAY DETERMINATION

☐ YES

☐ NO

SECTION 2.4: COORDINATION OF BENEFITS

☐ YES

☐ NO

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM:	BUDGET PERIOD:	DATE PREPARED:
	From: 10/01/21 To: 09/30/22	11/10/21
CONTRACTOR NAME:	BUDGET AGREEMENT:	AMENDMENT NO:
Substance Abuse Council	<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
Staff 1			64,000.00
Staff 2			55,000.00
Staff 3			26,000.00
Decoys			2,000.00
Staff 4			30,000.00
1. TOTAL SALARIES AND WAGES		0.000	\$ 177,000.00

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	8.00%
<input checked="" type="checkbox"/> FICA <input checked="" type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> RETIREMENT	<input type="checkbox"/> HEALTH INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> VISION INS	<input type="checkbox"/> HEARING INS <input type="checkbox"/> DENTAL INS <input checked="" type="checkbox"/> WORK COMP
	<input type="checkbox"/> SHORT TERM DISB <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> OTHER: specify	14,160.00
2. TOTAL FRINGE BENEFITS		\$ 14,160.00

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)	
mileage	500.00
trainings	2,500.00
3. TOTAL TRAVEL	\$ 3,000.00

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures)	
Program	3,500.00
Office	2,500.00
Recovery Walk/Volunteer Recognition	3,000.00
4. TOTAL SUPPLIES AND MATERIALS	\$ 9,000.00

5. CONTRACTUAL (Subcontracts)		
Name	Address	Amount
Audit		1,750.00
Accountant		4,000.00
Payroll fees		500.00
Marketing (website & social media campaigns)		10,000.00
5. TOTAL CONTRACTUAL		\$ 16,250.00

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)	<u>Amount</u>
Laptop for new employee	2,000.00
6. TOTAL EQUIPMENT	\$ 2,000.00
7. UTILITIES (Specify)	4,000.00
7. TOTAL UTILITIES	\$ 4,000.00
8. INSURANCE (Specify)	-
	1,400.00
8. TOTAL INSURANCE	\$ 1,400.00
9. REPAIRS AND MAINTENANCE (Specify)	-
9. TOTAL REPAIRS AND MAINTENANCE	\$ -
10. RENTAL/LEASE (Specify)	4,300.00
10. TOTAL RENTAL/LEASE	\$ 4,300.00
11. OTHER EXPENSES (Specify)	<u>Amount</u>
Memberships	1,000.00
11. TOTAL OTHER EXPENSES	\$ 1,000.00
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)	\$ 232,110.00
13. INDIRECT COSTS	
INDIRECT RATE	0.00%
13. TOTAL INDIRECT COSTS	\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ²⁰	\$ 232,110.00

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM:	BUDGET PERIOD: From: 10/01/21 To: 09/30/22	DATE PREPARED: 11/10/21
CONTRACTOR NAME: Substance Abuse Council	BUDGET AGREEMENT: <input type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	AMENDMENT NO: 0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
1. TOTAL SALARIES AND WAGES		0.000	\$ -

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	
<input type="checkbox"/> FICA <input type="checkbox"/> HEALTH INS <input type="checkbox"/> HEARING INS <input type="checkbox"/> SHORT TERM DISB <input type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> DENTAL INS <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> RETIREMENT <input type="checkbox"/> VISION INS <input type="checkbox"/> WORK COMP <input type="checkbox"/> OTHER: specify		-
2. TOTAL FRINGE BENEFITS		\$ -

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)	
3. TOTAL TRAVEL	\$ -

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures)	
4. TOTAL SUPPLIES AND MATERIALS	\$ -

5. CONTRACTUAL (Subcontracts)		Amount
<u>Name</u>	<u>Address</u>	
5. TOTAL CONTRACTUAL	21	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)	<u>Amount</u>
6. TOTAL EQUIPMENT	\$ -
7. UTILITIES (Specify)	
7. TOTAL UTILITIES	\$ -
8. INSURANCE (Specify)	
8. TOTAL INSURANCE	\$ -
9. REPAIRS AND MAINTENANCE (Specify)	
9. TOTAL REPAIRS AND MAINTENANCE	\$ -
10. RENTAL/LEASE (Specify)	
10. TOTAL RENTAL/LEASE	\$ -
11. OTHER EXPENSES (Specify)	<u>Amount</u>
11. TOTAL OTHER EXPENSES	\$ -
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)	\$ -
13. INDIRECT COSTS	
INDIRECT RATE	-
13. TOTAL INDIRECT COSTS	\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ²²	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM:	BUDGET PERIOD: From: 10/01/21 To: 09/30/22	DATE PREPARED: 11/10/21
CONTRACTOR NAME: Substance Abuse Council	BUDGET AGREEMENT: <input type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	AMENDMENT NO: 0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
1. TOTAL SALARIES AND WAGES		0.000	\$ -

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	
<input type="checkbox"/> FICA <input type="checkbox"/> HEALTH INS <input type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> RETIREMENT <input type="checkbox"/> VISION INS	<input type="checkbox"/> HEARING INS <input type="checkbox"/> SHORT TERM DISB <input type="checkbox"/> DENTAL INS <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> WORK COMP <input type="checkbox"/> OTHER: specify	-
2. TOTAL FRINGE BENEFITS		\$ -

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)	
3. TOTAL TRAVEL	\$ -

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures)	
4. TOTAL SUPPLIES AND MATERIALS	\$ -

5. CONTRACTUAL (Subcontracts)		
<u>Name</u>	<u>Address</u>	<u>Amount</u>
5. TOTAL CONTRACTUAL	23	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)	<u>Amount</u>
6. TOTAL EQUIPMENT	-
7. UTILITIES (Specify)	
7. TOTAL UTILITIES	\$ -
8. INSURANCE (Specify)	
8. TOTAL INSURANCE	\$ -
9. REPAIRS AND MAINTENANCE (Specify)	
9. TOTAL REPAIRS AND MAINTENANCE	\$ -
10. RENTAL/LEASE (Specify)	
10. TOTAL RENTAL/LEASE	\$ -
11. OTHER EXPENSES (Specify)	<u>Amount</u>
11. TOTAL OTHER EXPENSES	\$ -
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)	\$ -
13. INDIRECT COSTS	
INDIRECT RATE	-
13. TOTAL INDIRECT COSTS	\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ²⁴	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
ALCOHOL TAX PLAN - FY22**

	Approved Budget FY 21 Oct - Sep	Approved Budget FY 22 Oct - Sep	Amended Budget FY 22 Oct - Sep	Inc/(Dec) over approved FY 22 Budget
Revenue:				
Prior Year(s) Carryover	4,751,340	4,894,188	4,894,188	-
PA2 Revenue	1,827,172	2,180,407	2,180,407	-
Total Revenue	6,578,512	7,074,595	7,074,595	-
Expenses:				
RESIDENTIAL TREATMENT SERVICES	179,303	132,627	132,627	-
OUTPATIENT TREATMENT SERVICES	1,581,800	1,809,548	1,809,548	-
PREVENTION SERVICES	473,030	206,000	302,795	96,795
Total Expenses	2,234,134	2,148,175	2,244,970	96,795
Total Carryover	4,344,378	4,926,420	4,829,625	(96,795)

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
ALCOHOL TAX PLAN - FY22**

	Approved Budget FY 21 Oct - Sep	Approved Budget FY 22 Oct - Sep	Amended Budget FY 22 Oct - Sep	Inc/(Dec) over approved FY 22 Budget
Barry				
OUTPATIENT TREATMENT SERVICES	54,500.00	76,880.00	76,880.00	-
PREVENTION SERVICES	78,614.33	-	-	-
Total	133,114.33	76,880.00	76,880.00	-
Berrien				
OUTPATIENT TREATMENT SERVICES	283,033.60	327,528.52	327,528.52	-
PREVENTION SERVICES	100,000.00	100,000.00	100,000.00	-
Total	383,033.60	427,528.52	427,528.52	-
Branch				
OUTPATIENT TREATMENT SERVICES	36,430.00	80,190.00	80,190.00	-
PREVENTION SERVICES	-	-	-	-
Total	36,430.00	80,190.00	80,190.00	-
Calhoun				
OUTPATIENT TREATMENT SERVICES	393,699.17	517,859.73	517,859.73	-
PREVENTION SERVICES	-	-	96,795.38	96,795.38
Total	393,699.17	517,859.73	614,655.11	96,795.38
Cass				
OUTPATIENT TREATMENT SERVICES	82,500.00	82,500.00	82,500.00	-
PREVENTION SERVICES	38,415.85	-	-	-
Total	120,915.85	82,500.00	82,500.00	-
Kalamazoo				
RESIDENTIAL TREATMENT SERVICES	158,303.00	111,627.00	111,627.00	-
OUTPATIENT TREATMENT SERVICES	535,238.50	517,549.42	517,549.42	-
PREVENTION SERVICES	256,000.00	106,000.00	106,000.00	-
Total	949,541.50	735,176.42	735,176.42	-
St Joseph				
RESIDENTIAL TREATMENT SERVICES	21,000.00	21,000.00	21,000.00	-
OUTPATIENT TREATMENT SERVICES	62,040.00	62,040.00	62,040.00	-
PREVENTION SERVICES	-	-	-	-
Total	83,040.00	83,040.00	83,040.00	-
Van Buren				
OUTPATIENT TREATMENT SERVICES	134,359.10	145,000.00	145,000.00	-
PREVENTION SERVICES	-	-	-	-
Total	134,359.10	145,000.00	145,000.00	-
All Counties				
RESIDENTIAL TREATMENT SERVICES	179,303	132,627	132,627.00	-
OUTPATIENT TREATMENT SERVICES	1,581,800	1,809,548	1,809,547.67	-
PREVENTION SERVICES	473,030	206,000	302,795.38	96,795.38
Total	2,234,134	2,148,175	2,244,970.05	96,795.38

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
CALHOUN COUNTY
ALCOHOL TAX PLAN - FY22**

	Approved Budget FY 21 Oct - Sep	Approved Budget FY 22 Oct - Sep	Amended FY 22 Oct - Sep	Inc/(Dec) over approved FY 22 Budget	Estimate FY23 Oct - Sep	Estimate FY24 Oct - Sep	Estimate FY25 Oct - Sep
Revenue:							
Prior Year(s) Carryover	346,538	314,835	314,835	-	372,619	358,390	344,160
PA2 Revenue	332,415	672,439	672,439	-	339,439	339,439	339,439
Total Revenue	678,953	987,274	987,274	-	712,058	697,829	683,599
Expense:							
OUTPATIENT TREATMENT SERVICES							
10th Dist Drug Sobriety Court	124,929	171,582	171,582	-	99,943	99,943	99,943
10th Dist Veteran's Court	6,450	6,950	6,950	-	6,450	6,450	6,450
37th Circuit Drug Treatment Court	175,225	232,233	232,233	-	140,180	140,180	140,180
Haven of Rest	37,095	37,095	37,095	-	37,095	37,095	37,095
MRS	25,000	25,000	25,000	-	25,000	25,000	25,000
Summit Pointe - Court Liaison	-	-	-	-	-	-	-
Summit Pointe - Jail	-	20,000	20,000	-	20,000	20,000	20,000
Summit Pointe - Juvenile Home	25,000	25,000	25,000	-	25,000	25,000	25,000
PREVENTION SERVICES							
Substance Abuse Council	-	-	58,249	58,249	-	-	-
Substance Abuse Prevention Services	-	-	38,546	38,546	-	-	-
Total Expenses	393,699	517,860	614,655	96,795	353,668	353,668	353,668
Total Carryover	285,253	469,414	372,619	(96,795)	358,390	344,160	329,931

Note(s)

PREVENTION SERVICES							
Substance Abuse Council	204,574	232,110	232,110	-	232,110	232,110	
Substance Abuse Prevention Services	160,436	153,597	153,597	-	153,597	153,597	
Total Expenses	365,009	385,707	385,707	-	385,707	385,707	

Prevention services are funded through block grant

Notes:

*Calhoun County has appropriated \$333,000 of additional funding to the the fund balance for fiscal year 22
In the absence of Calhoun County's designation of future general fund appropriations to PA2 programs.
Calhoun County's PA2 expenditures will be reviewed/reduced to align with actual revenue apportionments.
FY23 - FY25 estimates for PA2 expenditures are based on a reduced spending plan.*

DIRECTIONS TO COMPLETE BUDGET FORMS

Budget Summary Report - Form required to complete net cost contract.

1. Population - Check the appropriate box(s) for expected populations to be served by this budget.
2. Program - Select from the pull down menu (up to 3 programs per template).
3. CFDA # - If Federally funded a CFDA # will populate once a program is selected.
4. Date Prepared - Enter date the budget summary was completed.
5. Contractor Name - Enter agency name.
6. Budget Period - Date range the budget submitted pertains to.
7. Mailing Address - Enter address of agency.
8. Budget Agreement:
 - A. Original - first time submitting budget request.
 - B. Amendment - corrected data submitted for previously submitted budget.
 - C. Enter the number of Amendment, example 1,2 etc.
9. Detail 1, 2, & 3 - DO NOT ENTER DATA. All data is pulled from the Budget Detail.
10. Source of Funds - Enter total amount funded in appropriate funding category.
11. Section 2.3 & 2.4 - Check appropriate response.

Budget Detail Report(s) - Form required to complete net cost contract.

1. Budget period, date prepared, name and Amendment number are pulled from the budget summary.
2. Budget Agreement - select original or amendment.
3. Salaries and Wages:
 - A. Position Description - Job title and/or brief description.
 - B. Comments - use if explanation is needed, example, position is 40 hours a year.
 - C. FTE Required - total FTE to be funded through this contract.
 - D. Total Salary - Amount needed to fund the position.
4. Fringe Benefits - Check boxes that the fringe rate includes. Put fringe rate in composite rate cell. Fringe will automatically calculate based on composite rate.
5. Travel, Supplies & Materials, Equipment, Utilities, Insurance, Repairs and Maintenance, Rental/Lease and Other expenses - Enter brief description and annual amount.
6. Contractual - Enter contractors name, address and/or brief description, and annual amount.

If this is a Prevention budget and you have contracted Direct service workers you must either enter number of hours worked per week/month or FTE.
7. Indirect Costs - Put indirect rate in indirect rate cell. Indirect amount is automatically calculated based on rate.

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET SUMMARY**

POPULATION(S): ☐ MIA ☐ SED ☐ DDA ☐ DDC ☒ SA

PROGRAM:		PROGRAM	CFDA	DATE PREPARED:
Prevention		COMMUNITY BLOCK GRANT - PREVENTION	93.959	11/10/2021
		COVID - PREVENTION	93.959	BUDGET PERIOD:
		PUBLIC ACT 2 - PA2	N/A	From: 10/1/2021
CONTRACTOR NAME:				
Substance Abuse Prevention Services (SAPS)		To: 9/30/2022		
MAILING ADDRESS (Number and Street):		BUDGET AGREEMENT:		
600 East Michigan Avenue		<input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT		
CITY:	STATE:	ZIP CODE:	AMENDMENT NO:	FEDERAL TAX ID:
Albion	MI	49224		38-2872584

EXPENDITURE CATEGORY	Prevention	0	0	TOTAL BUDGET
1. SALARIES AND WAGES	63,650.00	-	-	63,650.00
2. FRINGE BENEFITS	6,046.75	-	-	6,046.75
3. TRAVEL	1,500.00	-	-	1,500.00
4. SUPPLIES AND MATERIALS	2,000.00	-	-	2,000.00
5. CONTRACTUAL	61,700.00	-	-	61,700.00
6. EQUIPMENT	-	-	-	-
7. UTILITIES	-	-	-	-
8. INSURANCE	1,100.00	-	-	1,100.00
9. REPAIRS AND MAINTENANCE	-	-	-	-
10. RENTAL/ LEASE	5,743.00	-	-	5,743.00
11. OTHER EXPENSES	11,857.00	-	-	11,857.00
12. TOTAL DIRECT EXPENDITURES (Sum of Lines 1-11)	\$ 153,596.75	\$ -	\$ -	\$ 153,596.75
13. INDIRECT COSTS Rate %	-	-	-	-
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13)	\$ 153,596.75	\$ -	\$ -	\$ 153,596.75
SOURCE OF FUNDS				
15. FEES AND COLLECTIONS	-	-	-	-
16. SWMBH	-	-	-	-
17. LOCAL/MATCH	-	-	-	-
18.- 20. SWMBH FUNDING SOURCE	-	-	-	-
COMMUNITY BLOCK GRANT - PREVENTION	67,532.87	-	-	67,532.87
COVID - PREVENTION II	47,517.87	-	-	47,517.87
PUBLIC ACT 2 - PA2	38,546.01	-	-	38,546.01
21. OTHERS	-	-	-	-
22. TOTAL FUNDING	\$ 153,596.75	\$ -	\$ -	\$ 153,596.75

SECTION 2.3.: ABILITY TO PAY DETERMINATION

☐ YES

☐ NO

SECTION 2.4: COORDINATION OF BENEFITS

☐ YES

☐ NO

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM: Prevention	BUDGET PERIOD: From: 10/01/21 To: 09/30/22	DATE PREPARED: 11/10/21
CONTRACTOR NAME: Substance Abuse Prevention Services (SAPS)	BUDGET AGREEMENT: <input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	AMENDMENT NO: 0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
Harry J. Bonner, Sr.	50% direct prevention, 50% admin	1.000	63,650.00
1. TOTAL SALARIES AND WAGES		1.000	\$ 63,650.00

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	9.50%
<input checked="" type="checkbox"/> FICA <input type="checkbox"/> HEALTH INS <input type="checkbox"/> HEARING INS <input type="checkbox"/> SHORT TERM DISB <input checked="" type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> DENTAL INS <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> RETIREMENT <input type="checkbox"/> VISION INS <input checked="" type="checkbox"/> WORK COMP <input type="checkbox"/> OTHER: specify		6,046.75
2. TOTAL FRINGE BENEFITS		\$ 6,046.75

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures) Travel expenses and mileage reimbursement	1,500.00
3. TOTAL TRAVEL	\$ 1,500.00

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures) General office and project supplies Across Ages Mentoring Program	2,000.00
4. TOTAL SUPPLIES AND MATERIALS	\$ 2,000.00

5. CONTRACTUAL (Subcontracts)		Amount
Name	Address	
Foote and Lloyd, CPAs	Two West Michigan, Ste 210, Battle Creek, MI 49017	10,000.00
Darrel Chris Farmer, Prevention Consultant	904 North Superior St. Albion, MI 49224	30,000.00
Aisha Ridley-Melton, Consultant/Administrator	1305 Hillside Road, Albion, MI 49224	5,000.00
Elijah Armstrong Jr, Consultant/Administrator	906 Boyd Drive, Apt 1, Albion, MI 49224	5,000.00
TBD by Provider		11,700.00
5. TOTAL CONTRACTUAL	30	\$ 61,700.00

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)	<u>Amount</u>
6. TOTAL EQUIPMENT	\$ -
7. UTILITIES (Specify)	
7. TOTAL UTILITIES	\$ -
8. INSURANCE (Specify)	
Liability, bond, rental and lease insurance	1,100.00
8. TOTAL INSURANCE	\$ 1,100.00
9. REPAIRS AND MAINTENANCE (Specify)	
9. TOTAL REPAIRS AND MAINTENANCE	\$ -
10. RENTAL/LEASE (Specify)	
Copier Lease	1,633.00
Office Rent	3,600.00
Storage	510.00
10. TOTAL RENTAL/LEASE	\$ 5,743.00
11. OTHER EXPENSES (Specify)	<u>Amount</u>
Communications and Web Services	1,550.00
	9,517.00
	790.00
11. TOTAL OTHER EXPENSES	\$ 11,857.00
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)	\$ 153,596.75
13. INDIRECT COSTS	
INDIRECT RATE	0.00%
13. TOTAL INDIRECT COSTS	\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ³¹	\$ 153,596.75

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM:	BUDGET PERIOD: From: 10/01/21 To: 09/30/22	DATE PREPARED: 11/10/21
CONTRACTOR NAME: Substance Abuse Prevention Services (SAPS)	BUDGET AGREEMENT: <input type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	AMENDMENT NO: 0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
1. TOTAL SALARIES AND WAGES		0.000	\$ -

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	
<input type="checkbox"/> FICA <input type="checkbox"/> HEALTH INS <input type="checkbox"/> HEARING INS <input type="checkbox"/> SHORT TERM DISB <input type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> DENTAL INS <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> RETIREMENT <input type="checkbox"/> VISION INS <input type="checkbox"/> WORK COMP <input type="checkbox"/> OTHER: specify		-
2. TOTAL FRINGE BENEFITS		\$ -

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)	
3. TOTAL TRAVEL	\$ -

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures)	
4. TOTAL SUPPLIES AND MATERIALS	\$ -

5. CONTRACTUAL (Subcontracts)		Amount
<u>Name</u>	<u>Address</u>	
5. TOTAL CONTRACTUAL	32	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)		<u>Amount</u>
6. TOTAL EQUIPMENT		\$ -
7. UTILITIES (Specify)		
7. TOTAL UTILITIES		\$ -
8. INSURANCE (Specify)		
8. TOTAL INSURANCE		\$ -
9. REPAIRS AND MAINTENANCE (Specify)		
9. TOTAL REPAIRS AND MAINTENANCE		\$ -
10. RENTAL/LEASE (Specify)		
10. TOTAL RENTAL/LEASE		\$ -
11. OTHER EXPENSES (Specify)		<u>Amount</u>
11. TOTAL OTHER EXPENSES		\$ -
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)		\$ -
13. INDIRECT COSTS		
INDIRECT RATE		-
13. TOTAL INDIRECT COSTS		\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ³³		\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

PROGRAM:	BUDGET PERIOD: From: 10/01/21 To: 09/30/22	DATE PREPARED: 11/10/21
CONTRACTOR NAME: Substance Abuse Prevention Services (SAPS)	BUDGET AGREEMENT: <input type="checkbox"/> ORIGINAL <input type="checkbox"/> AMENDMENT	AMENDMENT NO: 0

1. SALARIES AND WAGES POSITION DESCRIPTION	COMMENTS	FTE REQUIRED	TOTAL SALARY
1. TOTAL SALARIES AND WAGES		0.000	\$ -

2. FRINGE BENEFITS (SPECIFY)	COMPOSITE RATE %	
<input type="checkbox"/> FICA <input type="checkbox"/> HEALTH INS <input type="checkbox"/> HEARING INS <input type="checkbox"/> SHORT TERM DISB <input type="checkbox"/> UNEMPLOY INS <input type="checkbox"/> LIFE INS <input type="checkbox"/> DENTAL INS <input type="checkbox"/> LONG TERM DISB <input type="checkbox"/> RETIREMENT <input type="checkbox"/> VISION INS <input type="checkbox"/> WORK COMP <input type="checkbox"/> OTHER: specify		-
2. TOTAL FRINGE BENEFITS		\$ -

3. TRAVEL (Specify if category exceeds 10% of Total Expenditures)	
3. TOTAL TRAVEL	\$ -

4. SUPPLIES AND MATERIALS (Specify if category exceeds 10% of Total Expenditures)	
4. TOTAL SUPPLIES AND MATERIALS	\$ -

5. CONTRACTUAL (Subcontracts)		
<u>Name</u>	<u>Address</u>	<u>Amount</u>
5. TOTAL CONTRACTUAL	34	\$ -

**SOUTHWEST MICHIGAN BEHAVIORAL HEALTH
PROGRAM BUDGET - COST DETAIL**

6. EQUIPMENT (Specify)	<u>Amount</u>
6. TOTAL EQUIPMENT	-
7. UTILITIES (Specify)	
7. TOTAL UTILITIES	\$ -
8. INSURANCE (Specify)	
8. TOTAL INSURANCE	\$ -
9. REPAIRS AND MAINTENANCE (Specify)	
9. TOTAL REPAIRS AND MAINTENANCE	\$ -
10. RENTAL/LEASE (Specify)	
10. TOTAL RENTAL/LEASE	\$ -
11. OTHER EXPENSES (Specify)	<u>Amount</u>
11. TOTAL OTHER EXPENSES	\$ -
12. TOTAL DIRECT EXPENDITURES (Sum of Totals 1-11)	\$ -
13. INDIRECT COSTS	
INDIRECT RATE	-
13. TOTAL INDIRECT COSTS	\$ -
14. TOTAL EXPENDITURES FUNDED (Sum of Lines 12-13) ³⁵	\$ -



Southwest Michigan Behavioral Health Substance Use Disorder Oversight Policy Board Meetings 2022

January 17, 2022 4:00-5:30pm

March 21, 2022 4:00-5:30pm

May 16, 2022 4:00-5:30pm

July 18, 2022 4:00-5:30pm

September 19, 2022 3:00-5:30pm

November 21, 2022 4:00-5:30pm

All scheduled meetings take place at the Principal Office, unless otherwise communicated

Principal Office Located at 5250 Lovers Lane, Suite 200, Portage, MI, 49002

SWMBH adheres to all applicable laws, rules, and regulations in the operation of its public meetings, including the Michigan Open Meetings Act, MCL 15.261 – 15.275

SWMBH does not limit or restrict the rights of the press or other news media.

Discussions and deliberations at an open meeting must be able to be heard by the general public participating in the meeting. Board members must avoid using email, texting, instant messaging, and other forms of electronic communication to make a decision or deliberate toward a decision and must avoid “round-the-horn” decision-making in a manner not accessible to the public at an open meeting.

Mental Health Listening Tour

Mission: To facilitate a guided discussion among local mental health stakeholders and constituents around the state in order to create legislation and recommendations. Recommendations could include revising departmental policies, establishing new programs, or continuing discussions through workgroups.

Structure: The listening tour will take place throughout October and November, with recommendations and legislation being produced by late November. Interested stakeholders and consumers will be invited to a roundtable discussion on the current state of our mental health system in Michigan, existing barriers, and ideas for improvement. All regions will use the same questions to guide the discussion, with the questions provided to all panelists prior to the discussion. Given rising cases of COVID and the tight timeframe, the tours will be a mix of in-person and virtual depending on the preference of the Representative hosting. Once the tour is complete, the recommendations and data will be used to pursue legislation.

Duration: Each stop will be for 90 minutes, with the last 15 minutes open for public comment. All attendees will be sent a follow-up survey to capture any comments not mentioned because of time constraints.

Potential Participants:

- Representative Brabec (moderator)
- District State Representative
- District State Senator
- Regional FQHC
- Regional CMH
- Regional PIHP
- Regional CCBHC (if applicable)
- Regional representative from MHA
- Regional representative from Health Plans
- Consumer or secondary consumer
- Other interested stakeholders

Regions:

- Oakland
- Wayne
- Macomb
- Detroit
- Grand Rapids
- Kalamazoo
- Battle Creek
- Flint/Saginaw
- Marquette
- Ingham
- Washtenaw

Guided Questions

A series of guided questions will be created prior to the listening tour. The questions will be workshopped to ensure we can capture all the information we need given the time constraints.

Tentative Schedule

Region	Date	Location	Time
Wayne	Mon. Oct. 4th	Virtual	5:00- 6:30 PM
Battle Creek	Thurs. Oct. 7th	in-person; Location TBD	5:00-6:30
Marquette	Mon. Oct 11th	Virtual	5:00 - 6:30 PM
Oakland	Thurs. Oct. 14th	Virtual	5:00-6:30 PM
Kalamazoo	Mon. Oct. 18th	In-person; Location TBD	5:00-6:30 PM
Grand Rapids	Thurs. Oct. 21st	TBD	5:00 - 6:30 PM
Detroit	Mon. Oct. 25th	Virtual	5:00 - 6:30 PM
Macomb	Thurs. Oct. 28th	Virtual	6:00-7:30 PM
Saginaw/Flint	Mon. Nov. 1st	In-person; Location TBD	5:00-6:30 PM
Ingham	Thurs. Nov. 4th	In-person; Location TBD	5:00 – 6:30 PM

* These are the tentative dates of the listening tour. An email will be sent out with the final dates and locations. If you are interested in participating in a certain region, please reach out to Brooke in my office (bhansen@house.mi.gov) and we will make sure you are added to the participant list.

2021 Southwest Michigan Behavioral Health Successes and Accomplishments

Covid-19 Response Efforts:

- SWMBH continued to revise and train on our Covid-19 Response Plan.
- Infection control trainings, policy, and procedures were provided to staff, and attestations were required for staff completion.
- SWMBH actively engaged and participated in Local, State, and Federal Covid-19 workgroups and calls.
- Acted as regional distribution site for PPE distribution from State of Michigan for our CMHSP's and network providers.
- Successfully reopened the SWMBH offices full time in June with a hybrid work model.
- Encouraged and advocated for staff vaccination resulting in current 89% vaccination rate among SWMBH staff.
- Implemented electronic daily screens and measurement of staff comfort level within office safety.
- SWMBH has published multiple Member and Staff Newsletters, featuring guidance on emotional support, member access options, and the latest updates and trends on Covid-19 upstream guidance.
- SWMBH acted as a critical source of guidance for our External Stakeholder partners, supporting telehealth services, distributing personal protective equipment, and implementing new technology to provide consistent and improved communications.

Executive Officer Memberships, Engagements, and Accomplishments:

- Provided nearly 5 million in Provider Network Stability Payments.
- Executive Officer serves as Board Member of the Michigan Consortium of Healthcare Excellence (MCHE)
- Executive Officer is a Voting Delegate/SWMBH representative for the Community Mental Health Association of Michigan (CMHAM).
- Continued to develop Public Policy/Legislative Initiatives committee as a shared structure and process to improve SWMBH's & CMHSP's interaction, relations with, and value to state and federal elected officials and their senior staff.
- Organized the 6th Annual Regional Healthcare Policy Forum on October 1, 2021, comprised of state, and local presenters.
- Participated/Joined/Attended various State and Community Behavioral Health Transformation/Redesign meetings/hearings/tours.
- Governor's appointment as member of the Mental Health Diversion Council.

Finance:

- FY 20 Financial Audit issued with Clean Opinion.
- FY20 Compliance and Single Audits issued without findings.

FY 2021 Public Policy and Legislative Initiatives:

Date	Event Name	Attendees
10/16/2020	5th Annual Regional Healthcare Policy Forum	104 Registrants from Region 4, State of Michigan, and Washington D.C.
11/12/2020	CA vs TX: Breaking Down the SCOTUS Argument- Webinar	National attendance
2/3/2021	Public Policy Committee	Committee Members
2/11/2021	2021 Governor's Budget	State-wide attendees--B. Casemore
2/17/2021	House Appropriations Standing Committee	Full Committee - M.A. Bush
2/17/2021	Appropriations Subcommittee on HHS	Full Committee - M.A. Bush
2/17/2021	Senate Committee on Appropriations	Full Committee - M.A. Bush
2/18/2021	ACAP Fly-In Conference	ACAP Members
2/23/2021	ACAP Elected Officials Visits	ACAP Members
2/23/2021	NACBHDD	Annual Conference Attendees
2/25/2021	NACBHDD	Annual Conference Attendees
3/2/2021	NACBHDD	NACBHDD Conference Attendees
3/2/2021	NACBHDD	NACBHDD Conference Attendees
3/4/2021	NACBHDD	NACBHDD Conference Attendees
3/11/2021	NACBHDD	NACBHDD Conference Attendees
3/18/2021	NACBHDD	NACBHDD Conference Attendees
3/23/2021	NACBHDD	NACBHDD Conference Attendees
3/25/2021	NACBHDD	NACBHDD Conference Attendees
3/31/2021	MAHP	Meeting with Dominic Pallone, CEO
4/13/2021	Senate Appropriations Committee Meeting	Health and Human Services Hearing
4/13/2021	Senate Appropriations Committee Meeting	Health and Human Services Hearing
4/13/2021	2021 Michigan Mental Health Diversion Council	Governor Appointment
5/5/2021	Public Policy Committee	Committee Members
5/6/2021	Phone Conference	Brad Casemore, Sarah Ameter, Sherri Boyd
5/6/2021	Advocacy Meeting	Brad Casemore, Sherri Boyd
5/7/2021	Phone Conference	Brad Casemore, Rep. Haadsma, Paul Egnatuk
5/14/2021	Capitoline Call	PIHPs and Brian Thiel
5/20/2021	NAMI Call	Brad Casemore and Kevin Fisher
6/8/2021	2021 Michigan Mental Health Diversion Council	Governor Appointment
7/9/2021	Capitoline Call	PIHPs and Brian Thiel
7/14/2021	Public Policy Committee	Committee Members
7/27/2021	Battle Creek Police Department Fusion Center Concept	Invitees
8/13/2021	Capitoline Call	PIHPs and Brian Thiel
9/1/2021	Public Policy Committee	Committee Members
9/10/2021	Capitoline Call	PIHPs and Brian Thiel
9/14/2021	2021 Michigan Mental Health Diversion Council	Governor Appointment
9/17/2021	Legislative Breakfast	Coalition
9/20/2021	Healthcare Forum discussion	Brad Casemore and Rep. Mary Whiteford
9/21/2021	Senator Shirkey Hearing	Brad Casmore
9/28/2021	Senate Committee on Government Operations	Committee Members
various	Behavioral Health Transformation/Redesign	various meetings and calls throughout the reporting year

Operations

- Developed and implemented COVID 19 work plan.
- Successfully maintained business functions via remote work and reduced office hours until full reopening June 1st.
- Review and continue work on improving the office space to be more conducive to the hybrid work model and encourage collaboration.
- Conducted two Cultural Insights Pulse surveys and ongoing work aimed at improving retention and employee engagement. Employee engagement and satisfaction scores continue to be overall positive, but we continue work in this area given the current environment.
- Completed salary market analysis for all SWMBH positions.
- Processed 12,560 Michigan Health Link mental health claims.
- Processed 410,224 SUD claims from all funding sources.

Veteran Navigator:

- Conducted meetings with 62 new Veterans or Veteran family members (VFM).
- Worked with a total of 96 Veterans or VMF's.
- Contacted over 150 veterans through 2 live events and in person cold contacting.
- Enrolled 18 veterans with VA healthcare.
- Assisted 12 Veterans with first time VA disability claims or increased claims.
- Established a connection with the Battle Creek VA office of Compensated Work Therapy to provide one on one assistance with veteran issues.
- Served as the region 8 VCAT president for the year.
- Participated in 45 virtual meetings for Veterans and 4 live Veteran meetings.

Certified Community Behavioral Health Clinics (CCBHC):

- Developed and carried out a regional steering committee, along with three subgroups, to implement a regional CCBHC work plan.
- Participated in MDHHS's CCBHC training and technical assistance series.
- Provided feedback and questions to MDHHS to help shape the development of the CCBHC Demonstration Handbook.
- Served as a liaison for CCBHC for the region in communicating requirements from MDHHS to the CCBHCs as well as communicating needs from the CCBHCs to MDHHS.
- Designed and developed regional CCBHC workflows related to encounter reporting and payment; WSA enrollment and disenrollment; access, screening, and authorization; and joint care coordination.
- Provided education on CCBHC to the Recovery Oriented Systems of Care Committee.
- Processed over 300 enrollment recommendations from regional CCBHCs in the WSA.
- Designed and developed CCBHC marketing materials for both consumers and providers.

Information Technology

Audits:

- Contributed to the HSAG Performance Measure Verification audit.
- Completed 2020 Aetna security audit and corrective action plan.
- Completed SWMBH Risk Assessment.
- Completed audit of software licenses and Active Directory user accounts.

Reports:

- Recreated Milliman Member Level Risk Data Reports and Prevalence Reports for CMHs and reviewed ISK concerns with MDHHS and Milliman.
- Revised Hospital Follow-up report's data source with 2021 diagnosis codes.
- Modified SmartCare Report – Missing Discharges with no Service Activity.
- Reported Sacred Heart active clients and BHTEDS SUD Admissions.
- Created File Exchange Dashboard - CMH File Processing History.
- Created New Affiliate Batch version of bubble dashboard.
- Created Encounter Analysis Dashboard to see the impact of COVID on service delivery.
- Evaluated SUD OHH Case Rate - Need to report just one encounter per month for S0280 with modifiers.
- Created MIHealthlink ICO Report for QAPI.
- Improved SUD Encounter Error report and with debugging of issues reduced errors by 90%.

State Reporting:

- Completed FY2020 Encounter Data Quality Reports.
- Created EQI Enrollment dataset.
- Assisted Quality department with MMBPIS 2E measure calculations and reporting.
- Pulled data for new MDHHS quarterly reports concerning Member Appeals, Member Grievances, Provider Credentialing, and Service Authorization Denials.
- Completed IDD BHTEDS questionnaire.
- Provided Community Living Supports data to BHDDA.

Development:

- Completed version 1.5 of a new Provider Network tracking application.
- Created Veteran Navigator Database and Report.
- Wrote custom application interface between Microsoft Azure and Airtable.
- Moved Azure Service Bus to new Subscription and moved Azure DevOps to SWMBH instance.
- Rebuilt 820 and 834 Load and Dataset.
- Built new Electronic Data Interchange application and sunset leased EDI program.
- Provided 820/834 files to Summit Pointe in EDI format.
- Created CCBHC Roster Extract File.
- Created ETL (Extract, Transform Load) to load ADT data into SWMBH SQL.
- Worked on Provider Directory to meet OIG specifications.
- Resolved bugs in data exchange handler codes.
- Volunteered to participate in e-consent pilot project with Midstate and Detroit Wayne.

Implementations:

- Completed implementation of Relias Population Performance tool.
- Replaced Moses Walker Community room Audio Visual equipment with new monitor, speakers, and microphone to enhance hybrid meetings. Moved old Click Share equipment to Garden Room.
- Completed implementation of MCG Parity program.
- Purchased and Tested Meeting Owl Pro device for use in conference rooms.
- Prepared office for soft and official re-openings.
- Created new Tableau Server instance for testing.
- Implemented Mobile Device Management on SWMBH owned cell phones.
- Activated Data Loss Prevention tools to prevent staff from e-mailing Protected Health Information.
- Implemented Task Fire application to integrate with Aunalytics Help Desk software.
- Implemented Phish ER tool for cleaning up infected e-mail.
- Worked with Streamline to complete BHTEDS dual entry project application.
- Implemented new Behavioral Health Encounter Edits.

Support:

- Assisted with Aetna and Meridian rate settlements for 2019 and 2020.
- Developed a responsibility Matrix for Aunalytics and SWMBH IT.
- Helped negotiate Relias contract renewal.
- Pulled list of Interact clients for ISK.
- Configured VanBuren, Cass and Branch file extracts and FTP folders for PCE conversion.
- Replaced e-mail of large files with secure FTP process.
- Replaced 20 older Laptops with new HP models.
- Researched encounter errors for Promedica. All failed encounters have been accepted by MDHHS.
- Assisted with moving Utilization Management and Customer Service offices to the second floor.
- Moved Cisco Expressway Edge application to Aunalytics data center which improved Call Center connectivity.
- Researched and trialed multifactor authentication products.
- Analyzed HRA Inpatient Encounters for incorrect NPI numbers and notified CMHSPs.

Security:

- Provided quarterly Phishing simulations and education to all SWMBH staff. Achieved 100% training compliance.
- Completed the 2021 network penetration test with no high or critical vulnerabilities.
- Removed Adobe Flash Player from all laptops.
- Strengthened the waivers request and approval process.

BHTEDS:

- Cleared CMHSP persistent BHTEDs errors.
- Reviewed lengthy open SUD BHTEDS episodes.
- Completed BHTEDS and Encounter year-end reporting.
- Developed BH TEDS - New Tableau quality check dashboard.

- Developed Missing BHTEDS SmartCare Report for Sub Capitated CMHs

Staffing:

- Welcomed two new team members to IT as Clinical Data Analyst.

Clinical Quality

Clinical Trainings:

- Provided clinical training at 9 events, training 334 attendees on the following topics: Ethical Considerations for Coaches, Medical Necessity Guidelines for Applied Behavior Analysis, LGBTQ+ Diversity, Clinical Supervision, and Charting the Life Course tools for Person-Centered Planning.
- 99 individuals took part in the Living Works Start a suicide prevention training.

Levels of Care:

- Developed Level of Care monitoring reports for adults with I/DD and persons with Substance Use Disorders (SUD).
- Continued upkeep, maintenance, and distribution of Adults with Serious Mental Illness (SMI) and Youth with Severe Emotional Disturbances (SED) Level of Care reports.
- Monitored I/DD, SMI, SED, and SUD populations' utilization in the Regional Utilization Management Committee using Level of Care Reports.
- Assisted CMHs with transitions of care, case consultation, and follow up regarding challenging cases.

Home and Community-Based Services (HCBS) Rule:

- Partnered with local Community Mental Health Services Providers attending relevant meetings for education and technical assistance for Home and Community-Based Services.
- Participated in monthly state meetings and quarterly Implementation Advisory Group meetings to enhance communications and coordination of consumer care.
- Ensured that 322 corrective action plans for HCBS compliance for those receiving Michigan's Medicaid Specialty Supports and Services Plan (aka - B3 services include: Skill building, Supported Employment, and Community Living Supports) were fully implemented.
- Approved 45 new provider sites through the provisional approval process.
- Ensured individual CMHSP partners were in line with service provision, medical necessity criteria and reduce waste.
- Implemented a Board-Certified Behavior Analyst (BCBA) consultation process to assist CMHSPs when making authorization decisions where service requests did not align with utilization management review standards.
- Assisted with MDHHS driven guidance and coordination to assist families receiving ABA services or working to begin services during COVID-19 pandemic without delays or interruptions to services.
- Completed first-year audits and provided feedback for improvement to 4 new ABA providers within our region.

Clinical Data Analytics:

- Expanded the MHL population report to address utilization trends for SMI and IDD services among LOCUS and SIS recipients, respectively.
- Expanded the Medicaid/Healthy MI service utilization tool to address SMI service utilization

among individuals with overdue or missing LOCUS scores.

- Updated and calculated HEDIS metrics SSD, IET, and SAA for the MHL population for CY 2020.
- Calculated CY 2020 Medicaid/Healthy MI performance for SSD PIP; submitted 2021 PIP update documentation.
- Generated regular mailing lists for individuals on antipsychotics in need of a glucose or hbA1c screening.
- Stratified Region 4 metric performance by race/ethnicity for HEDIS measures FUA, IET-14, IET-34, and SSD (in addition to FUH-A, FUH-C, and PCR), and evaluated for the presence of racial disparities between white, African American, and Hispanic/Latino populations in measure performance.
- Developed tool for determining ideal candidates for available HAB waiver slots based on support needs (assessed via SIS) and service utilization.

Clinical Quality Reviews:

- Clinical and SUD Quality teams completed reviews for 42 different service providers across 5 different service lines (General CMHSP Clinical and SUD Quality, Psychiatric Inpatient, Applied Behavior Analysis, and Crisis Residential).
- Reviewed 345 individual case files and provided feedback on ways to meet higher clinical standards.
- Managed, reviewed, and accepted 268 unique Corrective Action Plans implemented as a result of audit results.

Supports Intensity Scale (SIS) Assessments:

- Regional assessors continue to meet twice a month (Regional meetings and informal SIS talk) to discuss administrative updates, assessor accomplishments, productivity, QA activities, and SIS content and training exercises to avoid drift within the region.
- Quarterly in-services are held to orient CMH staff/any interested party about the SIS-A interview.
- SIS declines are uploaded at the beginning of each month to SIS online. The State has been working on how the decline data can help reflect overall SIS data and completion rates across the state.
- Working with CMH's to follow the steps in the SIS decline process and complete the SIS decline form, being specific on the conversations that led up to the decline and the reasons the SIS is being declined. This will assist in gathering data for the state.
- Assessors worked with compliance dept to modify the SIS scheduling form and document consent for virtual SIS assessments on the SIS profile form, SIS scheduling form, and in SmartCare.
- Still experiencing ups and down in productivity due to cancellations, respondent no shows, lack of tech for telehealth, supports coordinator turnover, AFC home being short staffed.
- Assessors are being creative to boost productivity offering to assist with scheduling.
- Starting to see an increase in bookings for initial SIS assessments for youth 16-17 age group.

Habilitation Support Waiver (HSW):

- SWMBH has filled 99.84% of (710) available Habilitation Waiver slots provided by the State from October 1, 2020 through September 30, 2021.
- SWMBH has achieved the Board Ends Metric goal of 'keeping 98% of HSW slots full throughout

the year' for the past 4 years.

- SWMBH has continued to have the best HSW slot utilization rate throughout the State of Michigan over the past 4 years.
- SWMBH has met the State's HSW recertification compliance goal for the 14 consecutive quarters.
- SWMBH has facilitated an annual residential living arrangement project, geared towards supporting documentation and Behavioral Health Treatment Episode Data Set (BH TEDs) for 80 individuals to ensure proper payment rates and ensure the quality of data reporting.

Applied Behavior Analysis (ABA) – Autism Benefits/Services:

- Continued implementation of our monthly performance monitoring system, which significantly decreased the total number of out of compliance cases (for time to ABA treatment, Individual Plan of Service (IPOS) completion, and evaluation updates) across the region.
- Maintained 668 Autism Client Cases (up from 527 in 2020) and worked with CMHSP partners to close out cases that had been left open unnecessarily to reflect proper enrollment numbers within the region.
- Completed ABA audits for 17 providers within the region, totaling 108 clinical case files and managing 26 corrective action plans.
- Continued implementation of a new utilization management review processes alongside individual CMHSP partners to ensure service provision is in line with medical necessity and reduce waste.
- Continued implementation of a BCBA consultation process to assist CMHSPs when making authorization decisions where service requests did not align with utilization management review standards.
- Assisted with MDHHS driven guidance and coordination to assist families receiving ABA services or working to begin services during COVID-19 pandemic without delays or interruptions to services.
- Completed first-year audits and provided feedback for improvement to 4 new ABA providers within our region.

Compliance

- FY21 Q1-Q3 Medicaid Services Verification Review results 95% so far (1,395 claims reviewed, 69 of those being invalid).
- Received a PASS on all contractually required quarterly reports submitted to the MI OIG, which outline Regional compliance activities.

Provider Network/SUD/Operations

- Implemented FY22 code/modifier changes based on newly released MDHHS code sets for FY22 contracts.
- FY21 CMH Site review process was modified to recognize areas where CMHs performed well the previous year and monitor areas where corrective action plans were previously required. File review sessions were held on a single day via a virtual platform so reviewers and CMH subject matter experts could discuss the files as they were being reviewed.

Utilization Management

- Completed 1,142 MI Health Link Level of Care Utilization System (LOCUS) Assessments.
- Completed 2,142 MI Health Link Care Coordination Plans.
- Completed 34,992 total authorizations for service.
- Completed 19,525 Prospective Review SUD events (American Society of Addiction Medicine (ASAMs) are in a portion of these).
- Completed 2,208 concurrent reviews for psychiatric hospitalizations and crisis residential stays.
- Handled 16,752 incoming Substance Use Disorder (SUD) calls with an average phone queue time of 7 seconds.
- Handled 3,395 incoming Michigan Health Link (MHL) calls with an average phone queue time of 8 seconds.
- Completed 5,986 American Society of Addiction Medicine (ASAM) assessments for clients diagnosed with a Substance Use Disorder (SUD).
- Successfully integrated Indicia into SWMBH's Streamline SmartCare MCIS to utilize MCG medical necessity criteria for behavioral health treatment services as part of Michigan's parity project.

Member Services

- Updates to the Medicaid Customer Handbook per contract updated language.
 - Maintained 7 SWMBH brochures.
 - Published 2 Member newsletters.
 - Participated in Walk A Mile, Recovery Institute's Recovery Fair and Growlers games to promote Substance Use Disorder, Prevention, Gambling, and our Veteran Navigator programs.
 - Made over 809 follow up calls to members discharged from Substance Use Disorder residential settings.
 - For non-MHL Funding Sources October 2020 - June 2021*
 - Completed 6 State Fair Hearings throughout the region.
 - Completed 91 Grievances throughout the region.
 - Completed 40 Local Level Appeals throughout the region.
 - For MHL Funding first 3 Quarters (January 2021-September 2021)
 - Completed 0 State Fair Hearings region wide.
 - Completed 7 Grievances throughout the region.
 - Completed 3 Local Level Appeals throughout the region.
 - Initiated the Building Better Lives project focusing on improving members lives through Self Determination, Person Centered Planning, Independent Facilitation, Grievance and Appeals, and Advance Directives.
 - Maintained the Customer Advisory Committee virtually
 - Increased stipend and differentiated between in-person rate/participation and virtual.
 - Supported CAC members to participate in local and state level events.
- *QTR 4 has not been reported by CMHs yet*

Outreach:

- Created SWMBH Facebook page to provide resources and guidance to anyone seeking additional information on key Behavioral Health, Mental Health, Substance Use Treatment and Gambling Addiction resources.

- 55 posts made through SWMBH Facebook page, providing resources through MyStrength for consumers.
- 31 Gambling Awareness posts provided through the SWMBH Facebook page, providing guidance and resources.
- 114,256 SWMBH Facebook page reach (up 787.6%).
- Created a partnership with the Kalamazoo Growlers to outreach on three different prevention programs for Problem Gambling, Substance Use Disorder and Veteran Navigator Program.

Michigan Health Link and Integrated Care Programs:

- Coordinated and facilitated ongoing SWMBH Integrated Care Team monthly meetings with each of the seven Medicaid Health Plans in the region with goals to reduce ED utilization and inpatient admissions for individuals opened to Integrated Care Teams during FY20.
- There was a 43.9 % reduction in ER claims and 73.3% reduction in inpatient episodes, for the six months prior to ICT involvement versus six months post ICT involvement. Overall, there were less ED claims this year than in years prior (65.1% decrease). It is speculated that this could have been affected by COVID and that people were less likely to use the ED until they were severely ill.
- Participated in 84 Integrated Care Team meetings with MHPs to coordinate care, follow up on care post- hospitalization, and work toward providing resources and support to encourage appropriate utilization of health services.
- Developed and Implemented Transition Navigator supports, a Mental Health Block Grant. The position assists members from discharge to engagement with outpatient services who have a behavioral health inpatient stay or SUD residential stay. This short-term care management modeled program assists with member provider advocacy, transportation to appointments, disease education, an integrated care focus and more. 127 members have engaged in Transition Navigation. Of those 127, 59 were from a behavioral health inpatient stay and 68 were from a residential SUD/detox setting. We have begun to see decrease in recidivism but are just now beginning to have enough information to formulate data and a report, so additional reporting will come in FY22.
- We have supported the PIHP/MHP Joint Workgroup monthly by minute-taking as well as joining in on subgroups. We have supported upgrades to CC360 related to risk stratification criteria. We were integral in the conversation of CC360 providing SUD diagnoses on ED ADTs, which was granted, and a report created. We believe this will greatly affect our ability to affect measure such as FUA and IET.
- Implemented Performance Improvement Plan (PIP) targeting diabetes screening measure for individuals meeting criteria who are mutually served by PIHP and MHP not engaged with CMH services. Initiatives encompassed outreach to Medicaid Health Plan (MHP) regarding performance outcome goals and objectives and seeking opportunities to leverage MHP provider and member notification to encourage members to get diabetes screening to improve performance measurements. We send 2 rounds of engagement letters to members who had not yet met the criteria and have some feedback from members that because of the letter they were going to ask their doctor about the need to be screened for diabetes.
- Received 2 new Private Duty Nursing (PDN) members in our region and completed initial assessment process. Completed redetermination assessment review for 4 members in region to

ensure medical necessity was documented and supported for care. Provided PDN authorizations for this member. This required collaboration and extra supports due to COVID as well as staffing needs, and the Integrated Care Team worked extensively with our CMHs to meet the needs of the members.

- Participated in monthly joint coordination meetings with a Medicaid Health Plan (MHP) (Aetna) and FQHC reviewing members who are high Emergency Department (ED)/Inpatient (IP) utilizers. The goal of coordination is to address barriers to care, social determinants of health and other issues that would lead to a decrease of unnecessary utilization of services.
- Participated in monthly joint coordination meetings with hospital system (Lakeland Health Network) to further enhance integrated care services in the patient population of high ED utilizers. Collaborative goal is to improve patient outcomes and reduce barriers to proper healthcare by improving outpatient utilization management and social support infrastructure. Meetings result in increased collaboration, members being connected to needed community resources, and emergency department staff being notified of behavioral health services upon admission to the emergency department which helps to guide their treatment plans.
- Followed workflow process for Complex Case Management. We outreached members who met the eligibility of having complex medical needs and frequent IP or ED visits. Outreach was extremely challenging due to the COVID19 pandemic and SWMBH staffing needs which are now filled. Population analysis was completed, feedback received from the NCQA accreditation process and the program eligibility criteria and processes are being assessed and updated accordingly.
- Expanded and documented the process for ensuring support and resources during care transitions for MI Health Link members in collaboration with ICOs. Provided education to ICO care coordinators about the PIHP system and SWMBH to continue to help improve integration, coordination and partnerships.
- Established guidelines to coordinate on members through discharge, until follow up is complete 30 days post-discharge. This process has resulted in members receiving after care, being educated about the importance of after care and resolution of access issues.
- Provided continuous collaborative member oversight and clinical reviews for CMHs and providers to ensure quality care.
- Participated in monthly Statewide PIHPs and MHPs collaborative process improvement workgroup meetings to improve systems effectiveness and health outcomes for the beneficiaries mutually served. A key strategic area of process development and implementation is the creation of the Statewide follow-up after hospitalization (FUH) reporting structure. Through this initiative we provide weekly data extractions and uploads to the Michigan Department of Health and Human Services (MDHHS) computer information system for PIHP, MHPs and CMH's access to improve the beneficiary post-discharge process.
- The Integrated Care team collaborated with IT to develop a report to automate the process and utilize the EHR at a higher functionality. This project was started in FY20, but we continued to collaborate and refine the program throughout FY21. It is now a part of weekly processes and functions well.
- Actively participated in program development of Kalamazoo Defenders serving on 4 committees of a Kalamazoo County non-profit organization that serves adults who allegedly have committed a crime and are struggling with underlying causes and conditions. SWMBHs Integrated Care

department maintains a distance presence as a resource and partner.

- Ongoing assessment of health disparities related to FUA and FUH. Integrated Care is working to identify gaps and possible resolutions to closing disparate gaps in care and access to care. This year, Integrated Care worked extensively with each Medicaid Health Plan to establish barriers, gaps, ways to partner, and more. We met frequently with health plans to discuss current efforts to reduce health disparities and collaborate where needed. We partnered with one health plan, Meridian, in February 2021 to share social media posts educating members, attempting to break stigma and encourage healthcare and follow-up care for minority members. We also partnered with Meridian to create a follow-up after hospitalization flyer that we sent to providers (hospitals) and put in the SWMBH provider network newsletter. Meridian also shared that flyer with their providers. We continue the ongoing work of breaking down barriers to health inequities and disparities.
- Collaborated with other departments within SWMBH to effectively meet NCQA and other requirements.
- Participated with 3 other PIHPs in development of a proposal for MDHHS for care management of members unenrolled in a health plan who have complex medical needs. This proposal was delivered to MDHHS in May 2021.

Substance Use Disorder (SUD) Interventions

Naloxone/Narcan Program:

- Trained community members in overdose education and naloxone distribution (2,694 kits distributed).
 - Over 120 overdose reversals were reported by community members.
 - Partnered with 92 first responder agencies (law enforcement agencies and fire departments) distributing over 1,174 naloxone kits region wide.
 - 137 overdose reversals were reported by first responder agencies
- Completed year two of the State Opioid Response (SOR2) grant which:
 - Provided \$1,385,000 of additional funding.
 - Expanded prevention programming to youth community centers and disparate populations.
 - Allow for the continuation of various overdose education and naloxone distribution activities.
 - Provided funding for Recovery Home staffing for 6 houses.
 - Funded Recovery Coach outreach services in Kalamazoo and Berrien counties.
 - Maintained the utilization of recovery coaches in emergency departments using.
 - Project ASSERT (Alcohol & Substance abuse Services, Education and Referral to Treatment) in Kalamazoo, Calhoun, and Berrien counties.
 - Initiated Recovery Coach services in Van Buren county.
 - Added SUD specific case management positions in Berrien, Branch, St. Joe, and Cass counties.
 - Expanded SUD services in the St. Joe county jail.
- Completed State Opioid Response No Cost Extension (SOR) grant of \$1,460,996. Programming for this grant included:
 - Medication-assisted treatment (methadone) in the Kalamazoo County jail.
 - Expanding youth and family prevention programming the evidence-based practices:
 - Guiding Good Choices, Prime for Life, Life Skills Training and Project Towards No Drug Abuse.

- Implementing SBIRT in two Federally Qualified Health Clinics (FQHC) by utilizing recovery coaches in St. Joe and Kalamazoo counties; implemented contingency management at one FQHC.
- Supported the staffing at recovery centers in Berrien County and Calhoun County.
- Supported the Opioid Overdose Response Program (OORP) in Kalamazoo County.
- Staffing support for the development and implementation of a safe syringe/harm reduction program in Kalamazoo County, including outreach to homeless encampments which served over 200 customers.
- Outreach Recovery Coach in Kalamazoo county.
- Applied for and received \$1,297,873 of COVID19 Supplemental funding. Programming for FY21 included:
 - Expanding prevention services
 - Additional staff support for the Recovery Center in Berrien county.
 - Additional training for prevention providers
 - Unspent funding can be carried over
- Completed Partnership for Success (PFS) Grant in St. Joe and Van Buren counties. Focus of the PFS Grant:
 - Services for persons who are already using but, who do not yet meet criteria for addiction diagnosis (early intervention)
 - Services for the Hispanic Community (identified as the local group most affected by healthcare disparity): SWMBH developed a Prime-for-Life Program service in Spanish Language provided on-line for the two PFS counties; SWMBH plans to expand the offer to the other counties in the region in FY'22.
- Implemented ASAM Continuum assessment:
 - Trained over 150 clinicians
 - Interface with SWMBH's MCIS was completed and functional by 10/1/21 meeting MDHHS deadline.
- Wrote and submitted 3-year SUD Strategic Plan to MDHHS.
- Provided SUD treatment services to almost 5,000 customers.
- Provided PA2 funding and oversight to 53 treatment programs.
- Gambling Disorder Prevention Program:
 - Completed two prevention campaigns that included a focused campaign on sports betting.
 - Participated in National Problem Gambler Awareness Month by implementing social media messaging and conducting gambling screenings at SUD providers.
 - Implemented standardized gambling screening for all SWMBH SUD calls.
 - Maintained WinThemBack.org where individuals are re-directed to the SWMBH.org website to access problem gambling symptoms, warning signs, and risk factors.
- Maintained the addition of an Addictionologist for consultation and integration of substance use disorders and medical care.
- Despite significant school and site closures and disruptions brought about by the COVID-19 health crisis, SUD prevention providers were able to make necessary adjustments in order to meet the challenge of serving youth, families, adults and other community partners through education/curriculum-based programs in every single county, through in-person programming

and virtual facilitation of groups. Altogether, providers were able to start and complete 175 education-based groups (with multiple sessions), serving a total of 2,979 persons.

- Collected over 12,000 pounds of unused and expired medication through year-round efforts maintained by local programs (Pharmacy collection program is not counted in this number).
- Synar tobacco retailer compliance measure: Score of 91.7% compliance level (Synar is named after Mike Synar, who was the Congressman who sponsored the Bill).
- All ten SUD prevention providers surpassed the required minimum performance rating of 85%.
- Assisted and trained providers in entering accurate, timely, and complete BH TEDS admissions to meet/exceed MDHHS standard of 95% matching admission to encounters.
- Implemented Opioid Health Home in two counties (Kalamazoo and Calhoun).
- Successful implementation of Opioid Health Home.
- Enrolled almost 500 unique customers.
- Enrollment averages about 340 customers.
- Provided over 6,200 OHH services
- Facilitated training opportunities to community health outreach workers.
- Partnered with Health Management Associates to identify clinical standards of care
- Provided technical assistance to OHH partners
- Assisted and supported both prevention and treatment providers with the transition to telehealth/telephonic services during the COVID-19 pandemic.
- Continued sustainability assistance for providers.

Grants:

- Transition Navigator Grant to assist adults with SMI or Co-Occurring Disorders in inpatient psychiatric hospitals or other residential settings to transition home or to a safe environment for further recovery. - \$298, 880.
- Transportation to and return from Crisis Housing in Kalamazoo or Grand Rapids. 101,120
- Veterans Navigator Grant for \$100,000
- Clubhouse Spend-down Grant for \$100,000 to cover services for those with Medicaid spend downs in Clubhouse.
- Under COVID 19 Mental Health Block grants issued in summer of FY21 we received two different grants both seeking the workforce development of peers or persons with lived experience as Outreach workers and designed to help people with the effects of the Covid pandemic.
 - Family Warmline and Family Outreach workers for children and families with SED children as well as the Gatekeeper program for suicide awareness and prevention for Middle schools and High school students through Gryphon Place. Each CMH will have \$100,000 per year to employ outreach workers who have lived experience. \$366,000 for FY21
 - \$291,000 was received and distributed for Crisis Training and Outreach workers, for Adults with Mental Illness and Co-occurring disorders throughout the pandemic and for assistance in managing symptoms through Outreach workers with lived experience and/or training as Community Health outreach workers.

Quality Assurance and Key Performance Metrics

- Updated all Quality policies and procedures to meet current NCQA accreditation standards, as well as State and Federal contractual obligations.
- Organized, distributed, and completed analysis on Regional Survey projects, such as; The annual consumer satisfaction survey, the Person in Recovery Survey, Utilization Management Access Survey, and the Physical Health/Behavioral Health Communications Survey.
- Collected information for the annual Performance Bonus Incentive Project (PBIP) Narrative Report, which represents a collection of Regional achievement in the areas of: Comprehensive Care, Patient-Centered Medical Homes, Coordination of Care, Accessibility to Services and Quality and Safety of Care.
- Achieved 100% Compliance Score on the 2020 Performance Bonus Incentive Program (PBIP) Narrative report, translating into \$1,765,032.62 in achieved bonus award from MDHHS.
- Achieved National Committee for Quality Assurance (NCQA) Managed Behavioral Health Care Organization Reaccreditation for the Medicare Business Line.
- Achieved 100% of possible 2020 Meridian Health Plan Quality Withhold measures, which allowed SWMBH to capture/retain all bonus dollars.
- Achieved 90% of possible 2020 Aetna Health Plan Quality Withhold Measures, which allowed SWMBH to capture/retain all bonus dollars.
- Met 100% of MI Health Link contractual obligations and completed 11 monthly core reports, 4 quarterly reports, and many Adhoc reports reflecting access measures and analysis.
- Improved MI Health Link Level II Assessment follow-up rates: (follow-up with patients released from an inpatient facility with 15 days or less).
 - o 2019 – 99.11% 2020 - 99.44% 2021 – 99.63%
- Achieved a (+1.72%) improvement in the ‘Improved Functioning’ category in our 2020 Customer Satisfaction Survey Scores (Adult Survey – MHSIP).
- Achieved a (1.74%) improvement in the ‘Improved Outcomes’ category in our 2020 Customer Satisfaction Survey Scores (Youth Survey – YSS).
- Achieved a (+0.14 point) Overall improvement in our 2020 Self Recovery (SUD) Survey Scores over the previous year’s results:
 - o 2017 – 4.18 2018 – 4.13 2019 – 4.22 2020 – 4.36
- Improved analysis and reports developed in Tableau Data Analytics tool around Functional Assessment tools, including Level of Care Utilization System; Supports Intensity Scale, American Society of Addiction Medicine, and Child and Adolescent Functional Assessments Scale.
- Helped to organize and facilitate 11 annual audits/reviews by various oversight agencies, including (HSAG, MDHHS, NCQA, Aetna, and Meridian).
- Led and facilitated the formulation of the 2021-2022 Board Ends Metrics in collaboration with all SWMBH functional areas and Regional Committees.
- Helped to facilitate Regional response efforts regarding the MDHHS 2021-2022 Strategic Pillars.
- Formulated monthly MHL analysis reports on key metric areas, which allowed SWMBH to identify areas of improvement.
- Facilitated Regional Quality Management Committee and MI Health Link Committee Meetings, along with identification of Regional Improvement efforts and Performance Improvement Projects.

Board Ends Metrics Achieved during FY 2021 (October 1, 2020 – September 30, 2021)

Board Ends Metric	Metric Result	Board Approved Date
2020 PBIP Narrative Report Achieve 95% of Performance Based Incentive Program monetary award based on MDHHS specifications.	Metric Achieved Notice provided by MDHHS on 1/29/2021 SWMBH submitted required report on 11/13/2020 100% of metrics achieved and 100% of bonus earned (\$2,894,028.48)	Board Presentation and Approval on: 3/9/21
2020 PBIP Metrics Reports Achieve the following Joint expectations for the MHP's and SWMBH. There are 100 points possible for this bonus metric in CY20	Metric Achieved Notice provided by MDHHS on 1/29/2021 SWMBH submitted required report on 11/13/2020 100% of metrics achieved and 100% of bonus earned (\$2,894,028.48)	Board Presentation and Approval on: 3/9/21
2020 Customer Satisfaction Surveys collected by SWMBH are at or above the SWMBH 2019 results for the following categories: Mental Health Statistic Improvement Project Survey (MHSIP) tool. (Improved Functioning) Youth Satisfaction Survey (YSS) tools. (Improved Outcomes)	Metric Achieved The Annual Satisfaction Survey Project was completed on 2/5/2021. The MHSIP (adult) 'Improved Functioning' category observed an improvement of +1.72% (86.82%) over the previous year's result (85.1%). The YSS (youth) 'Improved Outcomes' category observed an improvement of +1.74% (83.04%) over the previous year's result (81.30%).	Board Presentation and Approval on: 3/9/21
2020 Health Service Advisory Group (HSAG) External Quality Compliance Review (90% of Sections evaluated receiving a score of "Met").	Metric Achieved On December 18, 2020 SWMBH was notified by HSAG that is received a score of 99% on the 2020 audit cycle. This score makes SWMBH the highest scoring PIHP for the 2nd consecutive year.	Board Presentation and Approval on: 3/9/21

Each quarter, at least 53% of parents/or caregivers of youth and young adults who are receiving applied behavior analysis (ABA) for Autism will receive Family Behavior Treatment Guidance. This service supports families in implementing procedures to teach new skills and reduce challenging behaviors.	<p>Metric Achieved</p> <p>Q1: 65.2% Q2: 62.7% Q3: 68.2% Q4: 58.8%</p> <p>895/1405 = 63.72% average</p>	Board Presentation and Approval on: 3/9/21
Achieve a 4-percentage point improvement in the rate of Diabetes screenings for consumers with schizophrenia or Bipolar Disorder who are using Antipsychotic Medications.	<p>Metric Achieved</p> <p>Target: 76% Current Status: 80%</p>	Board Presentation and Approval on: 6/11/21
SWMBH will achieve 90% of available monetary bonus award for achievement of quality withhold performance measures identified in the (2020-2021) MHL Integrated Care Organization (ICO) contracts.	<p>Metric Achieved</p> <p>Meridian = 100% Aetna = 89%</p> <p>Total Percentage Achieved: 94.5%</p>	Board Presentation and Approval on: 4/9/21
48/56 or 85% of State Measured MMBPIS Indicators will be at or above the State benchmark for 4 quarters for FY20	<p>Metric Achieved</p> <p>Current Status: Q1:15/16 Q2: 8/8 Q3: 6/7 Q4: 6/7</p> <p>Total Percentage Achieved 35/38 = 92.1%</p>	Board Presentation and Approval on: 4/9/21
SWMBH will achieve Recertification of National Committee for Quality Assurance (NCQA) – Managed Behavioral Healthcare Organization Medicare Service Line.	<p>Metric Achieved</p> <p>SWMBH was awarded a 1-year reaccreditation by NCQA on March 25, 2021.</p> <p>SWMBH's Current Accreditation is through June 25, 2022</p>	Board Presentation and Approval on: 4/9/21
Regional Habilitation Supports (HSW) Waiver slots are full at 98% throughout the year. (10/1/20 – 9/30/21)	<p>Metric Achieved</p> <p>99.9% of HSW slots have been filed in FY 21, per the MDHHS status report.</p>	Board Presentation and Approval on:10/8/2021

	*SWMBH has been the best performing PIHP in the State for 4 consecutive years.	
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Audits and Accreditations:

- Successfully achieved National Committee for Quality Assurance (NCQA), Managed Behavioral Health Organization (MBHO) Reaccreditation for the SWMBH Medicare Business Line, which is good until June 25, 2022.
- Created comprehensive NCQA worksheets to assist SWMBH departments toward earning 3-year accreditation in 2022; complete with NCQA language, requirements, scores, workplan, and assignment of duties with bi-weekly meetings to monitor progress.
- Coordinated NCQA gap analysis to include data collection from ICOs, MiHIN, MHL Members, MHL Providers, MDHHS and SWMBH leadership.
- Successful Financial Compliance Audit with no findings.
- Successful Completion of the 2020 Health Service Advisory Group (HSAG) – Performance Measure Validation Audit; with 37 out of 37 total elements evaluated, receiving a designation score of “Met,” “Reportable” or “Accepted,” which represents 100% compliance.
- Achieved a 99% Compliance rate on our 2020 Health Service Advisory Group (HSAG) External Quality Review meeting 267/269 elements evaluated. (*Best amongst all Michigan PIHP’s)
- 100% Compliance on 2021 Aetna Annual Delegation Audit, which includes reviews of: Case Management, Customer Service, Grievance and Appeals and Utilization Management.
- 100% Compliance on 2021 Aetna (Medicare) Compliance Program Effectiveness Audit.
- 100% Compliance on 2021 Aetna Claims Audit.
- 100% Compliance on 2021 Meridian Health Plan Delegated Credentialing Audit.
- Participated and achieved full compliance during the 2021 Meridian Center for Medicare/Medicaid Service. (CMS) Service Authorization Requests, Appeals and Grievances (SARAG) Delegation Audit.
- Participated and achieved full compliance during the Aetna CMS SARAG Delegation Audit.
- Achieved 100% compliance on 2021 MDHHS Substance Use Disorder (SUD) Administrative Audit.
- Worked with IT to automate a very time-consuming step of the monthly SARAG data pull, resulting in a significantly quicker process with reduced manual labor every month.
- Researched new 2022 CMS SARAG regulations and coordinated meetings with ICOs and SWMBH point persons so that SWMBH is ready to implement the necessary changes on January 1, 2022.
- Improved working relationships and trust between SWMBH and ICOs through ongoing collaboration and partnership around JOCs and SARAG deliverables.



Southwest Michigan Behavioral Health (SWMBH)

Substance Use Disorder Oversight Policy Board (SUDOPB) Attendance

Name	Jan	March	Ma	July	September	Novembe
Ben Geiger (Barry)						
Michael Majerek (Berrien)						
Don Meeks (Berrien)						
Randall Hazelbaker (Branch)						
Gary Tompkins (Calhoun)						
Kathy-Sue Vette (Calhoun)						
Rochelle Hatcher (Calhoun)						
Jeremiah Jones (Cass)						
Skip Dyes (Cass)						
Joanna McAfee (Kalamazoo)						
Tami Rey (Kalamazoo)						
Daniel Doerhman (Kalamazoo)						
Lisa White (Kalamazoo)						
Jared Hoffmaster (St.Joe)						
Paul Schincariol (Van Buren)						
Richard Godfrey (Van Buren)						

Green = present Red = absent

Black = not a member

as of 9/13/21