



**BOARD OF DIRECTORS REGULAR MEETING MINUTES**  
**July 16, 2025**

**Present:** Rebecca Pasko, Chairperson; John Burkardt, Vice Chairperson; Susan Fortney, Secretary; Mike Humphries; Deb Staelgraeve; Ken Papenhagen; Dawn Asper; LaMar Frederick; Reda Biniecki; and Becca Curley

**Excused:** Joan Canning and Naomi Stoner

**Absent:**

**Staff:** Lisa Graham, Ken Melvin, and Debi Andrews

**Guests:** Dr. Frances Jackson, Parliamentarian; and 6 guests were present

**I. CALL TO ORDER**

The Board Chair, Rebecca Pasko, called the meeting to order at 6:00 p.m.

**II. ROLL CALL**

Roll Call confirmed a quorum existed.

**III. PLEDGE OF ALLEGIANCE**

The Pledge of Allegiance was led by Rebecca Pasko.

**V. CONSIDERATION TO ADOPT THE DRAFT AMENDED AGENDA AS PRESENTED**

Rebecca Pasko commented the agenda and Board Packet have been amended. Items IX d and X a were added to the agenda along with a Board Action Request in the Board Packet.

Dawn Asper moved to adopt the draft amended agenda as presented. Susan Fortney supported. Motion carried unanimously.

**VI. CONSIDERATION TO APPROVE THE MINUTES FROM THE JUNE 25, 2025 BOARD MEETING AND WAIVE THE READING THEREOF**

John Burkardt moved to approve the minutes for the June 25, 2025 Board Meeting and waive the reading thereof. Becca Curley supported. Motion carried unanimously.

**VII. BOARD MEETING EVALUATION REPORT**

The Board Meeting Evaluation Report from the June 25, 2025 Board Meeting was reviewed.

**VIII. PUBLIC COMMENTS**

There were no public comments.

**IX. PRESENTATIONS**

- a. VelloHealth – Jim Brown introduced Nathaniel Weiss, founder and CEO of VelloHealth, a company that's innovating how technology supports community-based behavioral health. As many board members know, our outreach teams navigate complex environments each day to deliver client-centered care. The tools we give them must be just as dynamic. VelloHealth's proprietary mobile application is purpose-built to enhance service delivery in the field: providing smart routing, secure communication, and real-time access to client information. More importantly, it seamlessly integrates with our current electronic health record system, eliminating redundant data entry and strengthening care coordination.

Our proposed six-month pilot project with VelloHealth will allow us to evaluate how this platform supports key functions across ACT, Case Management, and Mobile Crisis teams. We're particularly interested in how it may streamline documentation, strengthen crisis response logistics, and elevate the safety and effectiveness of staff interactions with clients.

Lisa Graham commented that she feels good about the presentation the board is about to see. This will strengthen our Strategic Plan. It speaks to staff retention, improving clinical outcomes, and impacts budget as documentation can be done quicker.

Nathaniel Weiss provided an overview of who VelloHealth is, described the proposed pilot between Monroe and VelloHealth, what VelloHealth does, successes with other agencies, and what a partnership could look like in action. Mr. Weiss answered board member questions.

Lisa Graham thanked Mr. Weiss for presentation and thanked the Board for hearing the presentation. It is an interesting and exciting solution for us. VelloHealth will be up for consideration at the July 23, 2025 Board Meeting.

- b. Operations Report – Bridgitte Gates presented the Operations Report, highlighting updates from Revel Marketing, Monroe County Fair, Community Presence, Customer Services, 3<sup>rd</sup> Quarter Grievances, and Kiosk data.
  - i. Working with Revel on the Behavioral Health Urgent Care marketing plan.
  - ii. MCMHA will have a booth at the Monroe County Fair. Staff have volunteered their time.
  - iii. MCMHA continues to provide a presence in the community – booths, educational events.
  - iv. Grievances: Data from June was presented.
  - v. Pulse for Good: Kiosk data from provided 27 total responses from the lobby and prescriber kiosks only.
    1. Comments made where low stars were received:
      - a. Office appointments are not available when I am available
      - b. After school appointments are not available
      - c. My appointment was cancelled/rescheduled, and I wasn't notified
      - d. My worker was working from home.
      - e. Staff met with not friendly
      - f. Building is hard to find

**X. ITEMS FOR BOARD CONSIDERATION**

- a. Board Action Request: VelloHealth – A presentation was provided by Nathaniel Weiss, founder and CEO of VelloHealth. A Board Action Request with detailed information was also included in the Board Packet for review. Consideration for VelloHealth will occur at the July 23, 2025 Board Meeting.
- b. Service Contracts - Alicia Riggs presented the Service Contracts for Board consideration.
- c. Administrative Contracts – Alicia Riggs presented the Administrative Contracts for Board consideration.

- d. **Board Action Request: Behavioral Health Urgent Care Lease** – We have been working with ProMedica on a lease agreement for Behavioral Health Urgent Care. We have come to an agreement and Chris Greenwade, ProMedica, Eun Lim and Daniel Schairbaum, Dykema are here to review the high points of the lease agreement and answer questions. Lisa Graham commented that a Board Action Request is included in the Board Packet and that normally we like to give the Board a week before consideration, however, due to its timely nature, Lisa is requesting the Board to consider approving this evening.

Chris Greenwade worked with Alicia Riggs, MCMHA and Eun Lim, Dykema to develop a lease agreement. Mr. Lim presented the high points of the lease, covering that there are 8 units at 1000 square feet that were condominiums that have changed to office space. The lease is for three (3) years and after three years it will renew automatically. Either party has a right to terminate the lease by providing 180-day notice to the other party. Rent cost is \$1 annually. The Monroe tenant will maintain the premise interior and the landlord will maintain the exterior. The plan is to do an inspection before the delivery date. If the premise is not acceptable, the lease allows for termination within 90 days. Zoning for a Behavioral Health Urgent Care is permitted for this location.

Chris Greenwade, Eun Lim, and Daniel Schairbaum answered board member questions.

Mike Humphries commented that this is something we have been working on for a long period of time and knew this is where it was going to end up. Mike appreciated the lease agreement that ProMedica has offered MCMHA. Even if we do an inspection and find something catastrophic, we can get out of the lease within 90 days. The utilities should not be much of an issue. That is a low risk and should move forward.

Lisa Graham thanked Chris Greenwade, Eun Lim, and Daniel Schairbaum for their time this evening.

## **XI. ITEMS FOR BOARD ACTION**

- a. **Motion to Approve a 3-Year Lease Agreement Between Monroe Community Mental Health Authority and ProMedica Monroe Regional Hospital for the Property Located at 316 Colonial Court, Monroe, MI 48162 for Purposes of Establishing a Behavioral Health Urgent Care**

Mike Humphries moved to approve a 3-year lease agreement between Monroe Community Mental Health Authority and ProMedica Monroe Regional Hospital for the property located at 316 Colonial Court, Monroe, MI 48162 for purposes of establishing a Behavioral Health Urgent Care Clinic with the option to terminate within 90 days if the premise is not acceptable. Susan Fortney supported. Roll call: In favor: Humphries, Staelgraeve, Papenhagen, Asper, Fortney, Burkardt, Pasko, Frederick, Biniecki, and Curley; Opposed: none. Motion adopted unanimously.

## **XII. FISCAL FINANCE REPORT**

Ken Melvin introduced Debi Andrews from Rehmann Finance Team. We continue to bring Rehmann resources on board to help in different ways. Debi is assisting with CCBHC and shared a little about herself with the Board. Debi has been in the behavioral health field for 15 years and has been at Rehmann for 10 months. Debi commented she is happy to be back in the CMH system.

- a. **Fiscal Finance Report:** Ken Melvin presented the May financials, highlighting:
- Statement of Activities:**
    1. Revenue is trending/projected higher than last year, as expected. This is due to budgetary, and rate increases from the PIHP capitation and CCBHC.
    2. Spending is largely in line with the prior year with the exception of provider network. We expect to have increased costs as we pushed out DCW increases and targeted specialized residential rates. We also have a conservative IBNR estimate to account for other potential increases and ABA rate changes.
    3. Expecting to contribute \$319,665 to the fund balance primarily driven by ongoing efforts to reduce non-Medicaid spending and increase service delivery to Medicaid individuals.

ii. Statement of Activities – Mental Health Budget-to-Actual:

1. Revenue is trending/projected higher than budget for Medicaid as we see slight increases for waiver payments. CCBHC revenue is lower than expected as we have lags with T-1040 reporting. County appropriation revenue is lower than budgeted due to timing. We expect to receive the full budget. Other revenue is trending high due to a provider refund received.
2. Salary and benefit expense are trending lower than budget in total. Mostly due to lower than anticipated benefit costs in addition to vacancies of staff positions.
3. Provider network expense is higher than anticipated as mentioned in the bullet above.

iii. FY2025 Revenue and Expenses by Fund Source:

1. The CCBHC Medicaid program is showing a surplus of \$823,070 through this reporting period. However, CCBHC non-Medicaid is trending over budget.
2. Traditional State General Fund spending is lower than budgeted. This is a result of efforts around Medicaid enrollment and tracking of deductibles.

LaMar Frederick asked if Ken Melvin has heard anything about a potential impact to Health Michigan. Ken commented that he believes there will be an impact. There are some directed payments that may impact hospitals and how our rates interact with that. They are anticipating an analysis for the State of Michigan and Ken has not received that information yet.

b. Other Comments:

- i. Work Requirements: We are funded on all Medicaid eligibles in the County. If they fall off Medicaid it will also impact us. We are keeping a pulse on this and if we receive a report, will bring back to the board with some recommendations.
- ii. CCBHC Direct Pay: This is where MDHHS wants to bypass the PIHP and pay the CMHs directly. There isn't a plan on how this will work yet and they want to implement by 10/1/25.
- iii. Rate Adjustments: Rates came out and we may get another one before the end of the year and anticipating this will be a positive boost for us.
- iv. Audits: The auditors were not able to present this evening due to a conflict. We have this on our radar and would like to have them present at a future meeting.
- v. Budget Planning for FY26: Bringing the Fiscal Year 2026 budget to the Board in September for review and approval.

**XIII. NEW BUSINESS**

There was no new business.

**XIV. PUBLIC COMMENTS**

There were no public comments.

Mike Humphries commented that a month ago there was a lot of items on the agenda for CMS. Ken Melvin commented that we have two paths we can go down. Path one, we can change our name with the IRS which there are varying times on how long that may take, and our legal team felt this could take up to 12 months. Path two has challenges in which we will have to update our NPI and navigating that process is a question mark. It could be simple, or it may not be. We also have to update our title for banking information. Both paths have challenges. Our bankers will weigh in on this and will bring this back next week if needed.

Mike Humphries commented that if NPI is the issue, get a new one as you can have more than 1 for a business.

Dr. Frances Jackson commented that when the Board postpones a matter and does not take it up at the next Board Meeting, the matter falls to the ground. There will need to be a new motion added to the agenda.

Dr. Frances Jackson explained the difference between a motion to table a matter versus a motion to postpone a matter.

The motion regarding the legal name change that was postponed has fell to the ground. A new motion will be brought back to the Board next week if one is needed.

**XV. BOARD MEMBER ANNOUNCEMENTS**

Mike Humphries requested clarification from the Chair on what a board working committee is and elaborate what that work is in comparison to the work the Board is doing. Mike also asked if signing up for committees was first come first serve?

Rebecca Pasko provided an example using the Business Operations Committee. The work on the committee would be project based such as Medicaid changes, the PIHP Procurement, and a Millage. Committee members would be participating, researching, and understanding. Administration is not part of committee meetings unless necessary, this is a time to meet, to share with the committee what they have learned and then sharing that with the Board. For first come first serve, we followed the same process as past practice.

Ken Papenhagen will not be in attendance for the July 23, 2025 Board Meeting.

Dawn Asper commented that she is happy to hear that people already volunteered for the fair.

Susan Fortney is thrilled that we are going to do a Behavioral Health Urgent Care.

John Burkardt commented on the agencies Transportation Policy and waiting to hear further information on whether insurance will allow board members to use the agency van.

**XVI. ADJOURNMENT**

Rebecca Pasko thanked everyone and adjourned the meeting at 8:00pm.

Submitted by,

  
Susan Fortney, Secretary

LG/dp  
7/19/25