



MONROE COMMUNITY MENTAL HEALTH AUTHORITY

BOARD MEETING

February 19, 2025 – 6:00 p.m. / Aspen Room

Draft Amended Agenda

BOARD GUIDING PRINCIPLES:

- 1.1 Monroe Community Mental Health Authority (“Authority”) exists to help individuals with mental illnesses and/or intellectual/developmental disabilities so they can live, work, and play in their communities to their fullest potential. As a Certified Community Behavior Clinic (CCBHC), the Authority will provide mental health and/or substance use care/services, regardless of ability to pay, place of residence, or age, including developmentally appropriate care for children and youth.
- 1.2 Monroe Community Mental Health Authority strives to be the provider of choice for Monroe County by offering the highest quality of treatment with positive measurable outcomes, while maintaining competitive service rates with the State.
- 1.3 Monroe Community Mental Health Authority establishes and sustains a culture that values each staff member; holds staff to high standards; is fair and respectful; values creativity, and promotes collaborative thinking.
- 1.4 Monroe Community Mental Health Authority continues to establish collaborative community relationships that enable MCMHA to provide quality service to consumers.

BOARD RULES OF CONDUCT:

- a. Speak only after being acknowledged by the Chair and only to the Chair.
- b. Keep deliberation focused on the issue and don’t make it personal.
- c. Divulge all pertinent information related to agenda items before action is taken.
- d. Seek to understand before becoming understood.
- e. Seek to do no harm.

CITIZEN RULES OF CONDUCT:

- a. In order for our Board to move efficiently through the meeting agenda, we ask that everyone present conduct themselves respectfully and with decorum. Anyone who chooses not to comply with this will be asked to leave the building.

MISSION STATEMENT: Enrich lives and promote wellness.

VISION STATEMENT: To be a valued/active partner in an integrated System of Care that improves the health and wellness of our community.

CORE VALUES: Compassion, Authenticity, Trust, and Accountability.

	<u>Guide</u>
I. Call to Order	01 min
II. Roll Call	02 min
III. Pledge of Allegiance	02 min
IV. Motion to Adopt the Agenda as Presented	02 min
V. Motion to Approve the Minutes from the January 29, 2025 Board Meeting and waive the Reading Thereof	02 min
VI. Board Committee Reports	02 min
a. Committee Chair Reports	
i. Performance Evaluation	
b. Motion to Place on File All Written Committee Reports	02 min
VII. Board Meeting Evaluation Report (handout)	02 min
VIII. Public Comments	03 min/person
<i>“The Board will listen respectfully to public comments but will not respond directly during the meeting. You can expect a follow up contact from the Chief Executive Officer or representative within 24 hours if your comment is about a specific problem or complaint. Comments shall be limited to 3 minutes”.</i>	
IX. Presentations, Recognition, and Celebrations	20 min
a. Office of Recipient Rights Annual Report	
b. FY2024 CMHSP Annual Submission (handout)	

X.	Items for Board Consideration	05 min
	a. Service Contracts	
XI.	Finance Report	15 min
	a. Fiscal Finance Report	
	i. Monthly Highlights	
	i. Trends	
	ii. Comparative Charts	
	b. Income Statement by Fund Source	
	i. Fiscal Revenues and Expenses by Fund Source	
	c. Basic Financial Statements	
	i. Statement of Position	
	ii. Statement of Activities	
	d. Statement of Activities – Budget to Actual	
XII.	Items for Board Action	15 min
	a. Motion to Continue the Pilot of Two Board Meetings Per Month Beginning March 2025	
	b. Motion to Accept the Recommendations from the Recipient Rights Advisory Committee for FY2024-2025	
	c. Motion to Accept the FY2024 CMHSP Annual Submission	
	d. Motion to Approve the Purchase of Property Located at 3785 Swartz Road, LaSalle, MI 48145 in the Amount of \$235,000 with the Option to Finance at a Later Date	
	e. Motion to Accept the Performance Evaluation Committee’s Recommendation of Lisa Graham to Receive a Rating of “Satisfactory” for the Chief Executive Officer’s Performance Evaluation Summary for 2024	
	f. Motion to Approve the Consent Agenda Less Item _____	
	i. Service Contracts as Presented	
XIII.	Authority and Regional Policy Review/Approval (<i>Executive Summary in Packet</i>)	02 min
	a. Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented	
	i. Policy: HR4021 Nepotism Policy	
	ii. Procedure: HR4021-P1 Nepotism Procedure	
	iii. Exhibit: N/A	
	iv. Brochure: N/A	
	v. Rescind: N/A	
	vi. Relocate: N/A	
	b. Motion to Approve the Regional Policies as Presented	02 min
	i. Policy: N/A	
	ii. Exhibit: N/A	
XI.	Relationship with the Region, County, and Others	10 min
	a. Regional PIHP Board Meeting Minutes – Available in March	
	b. CMHAM Policy and Legislation Committee Report – Rebecca Pasko	
XII.	Items from the Chief Executive Officer	05 min
	a. Chief Executive Officer’s Report – Lisa Graham	
XIV.	New Business	00 min
XV.	Public Comments	03 min/person

XVI. Board Member Announcements

03 min/person

XVII. Adjournment

01 min

The next regular scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is to be determined.

LG/dp 3:49 p.m.



BOARD OF DIRECTORS REGULAR MEETING MINUTES
January 29, 2025

Present: Michael Humphries, Chairperson; Susan Fortney, Vice Chairperson; Catherine Bernhold, Secretary; Rebecca Pasko; John Burkardt; LaMar Frederick; Becca Curley; Dawn Asper; Naomi Stoner; and Ken Papenhagen

Excused: Deb Staelgraeve and Pam Ray

Absent:

Staff: Lisa Graham

Guests: 6 guests were present

I. CALL TO ORDER

The Board Chair, Mike Humphries, called the meeting to order at 6:02 p.m.

II. ROLL CALL

Roll Call confirmed a quorum existed.

III. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Mike Humphries.

IV. CONSIDERATION TO ADOPT THE DRAFT AMENDED AGENDA AS PRESENTED

Ken Papenhagen moved to adopt the draft amended agenda as presented. Catherine Bernhold supported. Motion carried unanimously.

V. CONSIDERATION TO APPROVE THE MINUTES FROM THE JANUARY 15, 2025 BOARD MEETING AND WAIVE THE READING THEREOF

John Burkardt moved to approve the minutes for the January 15, 2025 Board Meeting and waive the reading thereof. Naomi Stoner supported. Motion carried unanimously.

VI. BOARD MEETING EVALUATION REPORT

Susan Fortney encouraged board members to fill out the evaluation prior to the workshop. There were only 4 that responded and would like to see the numbers increase.

VII. PUBLIC COMMENTS

There were no citizen comments.

VIII. PRESENTATIONS, RECOGNITION, AND CELEBRATIONS

- a. Clinical Report – Crystal Palmer presented the Clinical Report Executive Summary for December:
 - i. MCMHA continues to recruit and hire staff for current vacancies, which is 14 at this time. As mentioned previously, two vacancies are newly created positions.
 - ii. The CCO and Clinical Directors provided a thank you breakfast to the entire clinical department.
 - iii. There were 26 universal referrals made in December. 50% received some type of follow-up, services authorized, etc. 31% declined any further intervention, and 19% MCMHA either didn't have enough information for follow-up or no response.
 - iv. Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did engage in two (2) programs/activities and three (3) 1:1 meeting during the month of December.
 - v. MCMHA prepared for a grant opportunity for a Quick Response Team.
 - vi. Crisis Mobile was deployed 63 times in December, which averaged 1.67 hours of face-to-face interaction time.
 - vii. The average response time for Crisis Mobile was approximately 18.35 minutes, which is likely due to 61% of the calls are from the 48161 and 48162 zip codes.
 - viii. There were multiple referral sources for Crisis Mobile; 55% were from the Monroe County Sheriff's Department and Monroe City Police; 39% were from Access Dept/CMH, and 6% were self-referral.
 - ix. Enrollment for the CCBHC has increased by 15 members over the last month. This is a 0.7% increase in enrollment from the previous report.
 - x. The data for incoming calls being answered is at 96.6% for FY25, which meets MCMHA's goal of 95%.
 - xi. There were 155 appointments scheduled for the Benesh Building in FY25 with 85% occurring in the office.
 - xii. MCMHA currently has 80 enrollees in the Behavioral Health Home program.
- b. Operations Report – Bridgitte Gates presented the Operations Report:
 - i. Revel Marketing: Community Awareness Campaign, ad campaign report, and new billboard is up on I-75. The Facebook Like Campaign, we received 35 more likes since in December and are now at 811 followers.
 - ii. Grievances: Data from December was presented.
 - iii. Pulse for Good: Kiosk data from December provided 44 total responses from all three kiosks. Comments from consumers/guardians were as follows:
 1. Nothing, it's all here and I love coming here.
 2. Met my caseworker, Summer. I have major anxiety, and she was awesome. Made me feel comfortable. I really like her.
 3. Good overall experience.
 4. Would like to see after school appointments for my child.
 - iv. River Raisin Clubhouse moved into their new location on January 15, 2025. Occupancy inspection is scheduled for January 17, 2025.

LaMar Frederick requested for MCMHA's 800 number to be included on materials. It could have been helpful on the new billboard.
- c. FY2025-2027 Strategic Plan – Lisa Graham presented the draft FY2025-2027 Strategic Plan at the January 15, 2025 Board Meeting and requested feedback. Lisa incorporated board member feedback and in addition, added the agency mission, vision, core values, and guiding definitions. The strategic goals and priorities are Quality Workforce; Trusted Community Partner; Accountable Stewards of Public Dollars; Services Promote Recover; and Consumer Voice Informs Decision Making. Each strategic goal has several objectives with measurable outcomes.

IX. BOARD COMMITTEE REPORTS

- a. Committee Chair Reports
 - i. Executive Committee – Nothing to report.

- ii. Recipient Rights Advisory Council – Susan Fortney commented that Rights Officers were so excited to be here tonight, but they couldn't with the change to scheduling. It is an honor to sit on this council. You are there for the good of consumers. The annual Recipient Rights Report will be presented in February.
- iii. Performance Evaluation – Mike Humphries commented that the committee is meeting and moving forward with the Chief Executive Officers performance evaluation process.

b. Motion to Place on File All Written Committee Reports

John Burkardt moved to place on file all written committee reports. Ken Papenhagen supported. Motion carried unanimously.

Written reports placed on file were Executive; Recipient Rights Advisory Council; and Performance Evaluation.

- c. Mike Humphries reminded board members of a Board Workshop scheduled for Wednesday, February 5, 2025 from 6pm to 8pm.

X. ITEMS FOR BOARD CONSIDERATION

- a. **Motion to Approve the Consent Agenda Less Item _____.**
 - i. Service Contracts as Presented
 - ii. Administrative Contracts as Presented

LaMar Frederick moved to approve the Service Contracts as presented. Ken Papenhagen supported. Discussion followed. Roll call: In favor: Papenhagen, Stoner, Asper, Pasko, Fortney, Humphries, Burkardt, Frederick, Curley, and Bernhold; opposed: none; motion carried unanimously.

LaMar Frederick moved to approve the Administrative Contracts as presented. Rebecca Pasko supported. Discussion followed. Roll call: In favor: Papenhagen, Stoner, Asper, Pasko, Fortney, Humphries, Burkardt, Frederick, Curley, and Bernhold; opposed: none; motion carried unanimously.

b. Motion to Accept the MCMHA FY2025-2027 Strategic Plan

Ken Papenhagen moved to accept the MCMHA FY2025-2027 Strategic Plan. John Burkardt supported. Motion carried unanimously.

- c. **Motion to Approve the Board Action Request for the Purchase of 70 Configured to Order Laptops, Including a 3-Year Depot Warranty, 20 Extra Docking Stations, and 25 New Laptop Bags from Lenovo Inc. at a Total Cost of \$78,810.00**

Rebecca Pasko moved to approve the Board Action Request for the purchase of 70 configured to order laptops, including a 3-year depot warranty, 20 extra docking stations, and 25 new laptop bags from Lenovo Inc. at a total cost of \$78,810.00. Dawn Asper supported. Roll call: In favor: Papenhagen, Stoner, Asper, Pasko, Fortney, Humphries, Burkardt, Frederick, Curley, and Bernhold; opposed: none; motion carried unanimously.

XI. AUTHORITY AND REGIONAL POLICY REVIEW/APPROVAL

- a. **Motion to Approve the Authority Policy, Procedure, and Exhibits as Presented**

- i. Policy: POC7095 Assisted Outpatient Therapy (AOT)
- ii. Procedure: POC7031-P2 Initiating a Self-Directive Service – Choice Voucher Arrangement
- POC7082-P4 Coordination of Care Letter
- POC7057-P4 How to give a SQ (Subcutaneous) Injection
- POC7057-P5 How to Give IM (Intramuscular) Injections
- POC7057-P10 Blood Pressure Readings and Responses

- iii. Exhibit:
 - POC7031-E1 MCMHA Self-Directed Services Agreement Form
 - POC7031-E2 MCMHA Employment Agreement Form
 - POC7031-E3 MCMHA Medicaid Provider Agreement Form
 - POC7095-E1 Court Liaison Flowchart
 - POC7095-E2 TX Team Flowchart
 - POC7082-E1 Coordination of Care Letter – Start Services
 - POC7082-E2 Coordination of Care Letter – End Services
 - POC7082-E3 Coordination of Care Letter – Psychiatric Admission
 - POC7082-E4 Coordination of Care Letter – Annual IPOS
 - POC7082-E5 Coordination of Care Letter – Start Medication
 - POC7082-E6 Coordination of Care Letter – End Medication
- i. Rescind:
 - POC7031-P1 Case Management of Self Determination / Choice Voucher Arrangement
 - POC7024-E7 PHS Authorization Flow – New Consumer
 - POC7024-E8 PHS Authorization Flow – Open Consumer
 - POC7077-P2 Actions for Incomplete, Unclear, Illegible Medication Orders PHS Authorization Flow – Open Consumer
- ii. Relocate: N/A

Susan Fortney moved to approve the Authority Policy, Procedure, and Exhibits as presented. Rebecca Pasko supported. Motion carried unanimously.

b. Motion to Approve the Regional Policy, Procedure, and Exhibits as Presented

- i. Policy: FCM3041 Debarment, Suspension and Exclusion
- ii. Exhibit: N/A

Catherine Bernhold moved to approve the Regional Policy, Procedure, and Exhibits as presented. LaMar Frederick supported. Motion carried unanimously.

XII. RELATIONSHIP WITH REGION, COUNTY, AND OTHERS

- a. Regional PIHP Board Meeting – Minutes from the December 11, 2024 meeting were included in the Board Packet.
- b. CMHAM Policy and Legislation Committee Report – Nothing new to report.

VIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER

- a. Chief Executive Officer's Report Included an Update on: the Medical Director position; Claims Submissions; Non-Medicaid Expenses; River Raisin Clubhouse; Quick Response Team Grant; and Benefits Specialist/MDHHS Contract.

The Mental Health Summit was held today. The theme was stigma and Sheriff Goodnough was the keynote speaker. It was a great day.

There has been a lot of chaos on the Federal Executive Order today. Today it was rescinded. There is no cause for alarm, business as usual.

After the CEO Report was published, CMH made an offer on a home in LaSalle for a five-bed group home. The purchase would be dependent on the inspection and Board approval. If the purchase is accepted, a Special Board Meeting will be scheduled.

Mike Humphries asked if claims were being submitted to the clearing house or directly to MDHHS. Lisa Graham will get further information on the process, submission frequency, and report back to the Board.

For the board members whose terms are ending March 2025, if not board members come April 2025, Lisa Graham will extend an invite to the River Raisin Clubhouse grand opening.

XIII. NEW BUSINESS

There was no new business.

XIV. PUBLIC COMMENTS

There were no citizen comments.

XV. BOARD MEMBER ANNOUNCEMENTS

John Burkardt commented he has a new cell phone number and will provide that to the Board.

Mike Humphries said see everyone next Wednesday.

XVI. ADJOURNMENT

Mike Humphries adjourned the meeting at 7:23pm.

Submitted by,

Catherine Bernhold, Secretary

LG/dp
2/6/25



BOARD PERFORMANCE EVALUATION COMMITTEE

Tuesday, February 18, 2025
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Compile quarterly performance measures for Chief Executive Officer.
2. Compile quarterly performance measures for the Board.

COMMITTEE MEMBERS

Board Chair
Business Operations Chair
Bylaws & Policy Chair
Clinical Operations Chair

DRAFT MINUTES

I. CALL TO ORDER

The meeting was called to order by Mike Humphries at 5:03pm. Mike Humphries, Susan Fortney, LaMar Frederick, Catherine Bernhold, and Lisa Graham were present.

II. REVIEW OF CEO ANNUAL EVALUATION COMPARISON TOOL RESULTS WITH CEO

- a. The committee presented the CEO Annual Evaluation Comparison Tool results along with a satisfactory rating for 2024 and the following recommendations for 2025.
 - i. Continue to strengthen positive relationships with the Board of Directors.
 - ii. Continue to seek assistance whenever necessary if any issue resides outside of the CEO's skillset.
 - iii. Continue to pursue creative partnerships as the agency ventures outside of our usual area of responsibility.
 1. Such as with Certified Community Behavioral Health Clinic (CCBHC) or Behavioral Health Home (BHH) requirements.
 2. With Behavioral Health Urgent Care (BHUC) as an example.
 - iv. Maintain awareness of financial roadblocks on the horizon. Be early in strategy development to avoid the same.
 - v. Continue to strengthen relationships with the PIHP.

III. REVIEW OVERALL PERFORMANCE EVALUATION SUMMARY WITH CEO

- a. The committee reviewed the overall written performance evaluation with the CEO.
- a. The committee recommends adding a motion to a future agenda for the full Board to accept the Performance Evaluation Committee's recommendation of Lisa Graham to receive a rating of "Satisfactory" for the Chief Executive Officers Performance Evaluation Summary of 2024. A written summary will be provided to the full Board.

IV. NEXT STEPS

- a. The committee is to submit the overall Performance Evaluation Summary to the Executive Administrative Assistant.
- b. The Executive Administrative Assistant will provide the CEO Performance Evaluation Summary to the full Board for consideration at a future Board Meeting.

V. ADJOURNMENT

The meeting adjourned at 6:24pm. The next meeting is to be determined.

Respectfully submitted,

Michael Humphries (dp)

Mike Humphries
Performance Evaluation Committee Chair

2/19/25



BOARD PERFORMANCE EVALUATION COMMITTEE

Tuesday, February 11, 2025
5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Compile quarterly performance measures for Chief Executive Officer.
2. Compile quarterly performance measures for the Board.

COMMITTEE MEMBERS

Board Chair
Business Operations Chair
Bylaws & Policy Chair
Clinical Operations Chair

DRAFT MINUTES

I. CALL TO ORDER

The meeting was called to order by Mike Humphries at 5:05pm. Mike Humphries (Zoom), Susan Fortney, LaMar Frederick, Catherine Bernhold, and Lisa Graham were present.

II. PRESENT & REVIEW RESULTS WITH CHIEF EXECUTIVE OFFICER

- a. The committee presented the results of the following performance evaluation tools to the Chief Executive Officer.
 - i. CEO Self-Evaluation
 - ii. Quarterly Performance Evaluations by Committee
 - iii. 360 Survey Feedback Results Report
 - iv. PEC Comparison Tool Results Report

III. NEXT STEPS

- a. The committee begins to write the CEO overall Performance Evaluation summary.
- b. The committee is to meet on Tuesday, February 18, 2025 with the CEO to review the overall Performance Evaluation Summary and submit to the Executive Administrative Assistant.
- c. The Executive Administrative Assistant will provide the CEO Performance Evaluation Summary to the full Board for consideration at a future Board Meeting.

IV. ADJOURNMENT

The meeting adjourned at 6:30pm. The next meeting is scheduled for Tuesday, February 18, 2025 beginning at 5:00pm.

Respectfully submitted,

Michael Humphries (dp)

Mike Humphries
Performance Evaluation Committee Chair

2/12/25



BOARD PERFORMANCE EVALUATION COMMITTEE

Tuesday, January 23, 2025

5:00pm

MAJOR COMMITTEE RESPONSIBILITIES

1. Compile quarterly performance measures for Chief Executive Officer.
2. Compile quarterly performance measures for the Board.

COMMITTEE MEMBERS

Board Chair
Business Operations Chair
Bylaws & Policy Chair
Clinical Operations Chair

DRAFT MINUTES

I. CALL TO ORDER

The meeting was called to order by Mike Humphries at 5:00pm. Mike Humphries, Susan Fortney, LaMar Frederick, and Catherine Bernhold were present. Lisa Graham was excused.

II. REVIEW RESULTS OF PERFORMANCE EVALUATION TOOLS

- a. The committee reviewed the results of the following tools:
 - i. CEO Self-Evaluation
 - ii. Quarterly Performance Evaluations by Committee
 - iii. 360 Survey Feedback Results Report
 - iv. PEC Comparison Tool Results Report

III. NEXT STEPS

- a. The committee is to meet on February 11, 2025 to review and discuss results of all performance evaluation tools with the Chief Executive Officer.
- b. The committee begins writing the CEO overall Performance Evaluation summary.
- c. The committee is to meet on February 18, 2025 with the CEO to review the overall Performance Evaluation Summary and submit to the Executive Administrative Assistant.
- d. The Executive Administrative Assistant will provide the CEO Performance Evaluation Summary to the full Board for consideration at a future Board Meeting.

IV. ADJOURNMENT

The meeting adjourned at 6:17pm. The next meeting is scheduled for Tuesday, February 11, 2025 beginning at 5:00pm.

Respectfully submitted,

Michael Humphries (dp)

Mike Humphries
Performance Evaluation Committee Chair

1/25/25

MCMHA Recipient Rights Executive Summary for FY 24

COMPLAINT DATA

	FY 24	FY 23	FY 22
Allegations Received	87	85	73
Allegations Substantiated	66	51	49

OBSERVATIONS:

- Complaints received involved multiple allegations.
- Consistent with previous years and the normal ebb and flow of complaint activity.
- Monitoring, education, consults and proactive activities by the Rights Office continue.
- Keeping perspective: Consider data in light how many consumers we serve (2,816 individuals in FY 24) and how many minutes every day they receive services and things could go wrong.

SERIOUS HARM ALLEGATIONS

Category	Received	Substantiated
Abuse Class I	0	0
Neglect Class I	0	0

OBSERVATIONS:

- No substantiations involving serious harm (death, serious injury, sexual abuse).

TOP VIOLATIONS

Category	Received	Substantiated
Neglect Class III	14	14
Dignity and Respect	12	11
Mental Health Services Suited to Condition	11	10

OBSERVATIONS:

- Top violations in prior years and consistent with trends across the region and state.
- Neglect III: Involves staff failure to follow a written standard (such as IPOS, behavior plan, doctor's order, etc) and which poses a risk of harm.
- Dignity and Respect: Involves staff being impolite or rude to consumers (such as yelling at or not allowing an individual to make choices)
- Services Suited to Condition: Involves staff failure to follow a written standard but there's no risk of harm.

TOP PROVIDER VIOLATIONS

Provider	Received	Substantiated
Macomb Residential (MRO)	23	15
MCMHA	14	13
Beacon	7	6
Self Determination Provider	7	7

OBSERVATIONS:

- MRO delivers services in multiple settings: CLS apartments and Group Homes
- MRO and Beacon are bigger providers and have challenging cases.
- No clear trends observed.

****Report reviewed in-depth by Recipient Rights Advisory Committee on 12-12-24****

Office of Recipient Rights Demographic Data

Data Report Covering
October 1, 2023 through September 30, 2024

CMH/LPH Name

Monroe CMHA

Rights Office Director Name

Coy Hernandez

Unduplicated Count of Individuals Served (CMH)

2,816

-or-

Number of Beds (LPH)

Staff Performing Recipient Rights Functions

Staff Name	Hours Per Week	Role
Coy Hernandez	40	Investigation
Shelley Koyl	40	Investigation

Summary of Complaint Data by Category

Code	Category	Total Received	Investigation	Intervention	Substantiated
7221	Abuse Class I	0	0		0
72221	Abuse Class II - Nonaccidental Act	3	3		2
72222	Abuse Class II - Unreasonable Force	8	8		3
72223	Abuse Class II - Emotional Harm	0	0		0
72224	Abuse Class II - Treating as Incompetent	0	0		0
72225	Abuse Class II - Exploitation	4	4		2
7223	Abuse Class III	9	9		5
7224	Abuse Class I - Sexual Abuse	0	0		0
72251	Neglect Class I	0	0		0
72252	Neglect Class I - Failure to Report	0	0		0
72261	Neglect Class II	0	0		0
72262	Neglect Class II - Failure to Report	2	2		2
72271	Neglect Class III	14	14		14
72272	Neglect Class III - Failure to Report	1	1		1
7550	Rights Protection System	2	2	0	2
7555	Retaliation/Harassment	0	0		0
7040	Civil Rights	0	0	0	0
7044	Religious Practice	0	0	0	0
7045	Voting	0	0	0	0
7081	Mental Health Services Suited to Condition	11	11	0	10
7082	Safe, Sanitary, and Humane Treatment Environment	9	9	0	8
7083	Least Restrictive Setting	0	0	0	0
7084	Dignity and Respect	12	12	0	11
7100	Physical and Mental Exams	0	0	0	0
7110	Family Rights	1	1	0	1
7120	Individual Written Plan of Service	0	0	0	0
7130	Choice of Physician/Mental Health Professional	0	0	0	0

Code	Category	Total Received	Investigation	Intervention	Substantiated
7140	Notice of Clinical Status/Progress	0	0	0	0
7150	Services of a Mental Health Professional	0	0	0	0
7160	Surgery	0	0	0	0
7170	Electroconvulsive Therapy	0	0	0	0
7180	Psychotropic Drugs	0	0	0	0
7190	Medication Side Effects	0	0	0	0
7240	Fingerprints, Photographs, Audio Recordings, and Use of One-Way Glass	0	0	0	0
7249	Video Surveillance	0	0	0	0
7261	Communications - Visits	0	0	0	0
7262	Communications - Telephone	0	0	0	0
7263	Communications - Mail	0	0	0	0
7281	Personal Property - Possession and Use	1	1	0	1
7286	Personal Property - Limitations	0	0	0	0
7300	Safeguarding Money (State Hospitals Only)	0	0	0	0
7360	Labor and Compensation	0	0	0	0
7440	Freedom of Movement	0	0	0	0
7400	Restraint	0	0	0	0
7420	Seclusion	0	0	0	0
7460	Complete Record	0	0	0	0
7480	Disclosure of Confidential Information	5	5	0	4
7481	Withholding Confidential Information/Access Denial to Records	0	0	0	0
7490	Correction of Record	0	0	0	0
7500	Privileged Communication	0	0	0	0
0000	No Right Involved	4			
0001	Outside ORR Jurisdiction	1			

Substantiated Rights Violations and Remedial Action Taken

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Abuse Class III	Contracted	Written Reprimand	Suspension		0	0
Safe, Sanitary, and Humane Treatment Environment	Contracted	Written Reprimand	Suspension		0	0
Safe, Sanitary, and Humane Treatment Environment	Contracted	Written Reprimand	Training		0	0
Rights Protection System	Contracted	Written Reprimand	Training		0	0
Neglect Class III	Contracted	Contract Action	Training		0	0
Mental Health Services Suited to Condition	Contracted	Employment Termination	Other		0	0
Neglect Class III	Contracted	Written Reprimand	Training		0	0
Neglect Class III - Failure to Report	Contracted	Written Reprimand	Training		0	0
Neglect Class III	Contracted	Suspension	Training		0	0
Neglect Class III	Contracted	Written Reprimand	Training		0	0
Mental Health Services Suited to Condition	Contracted	Employment Termination			0	0
Abuse Class II - Exploitation	Contracted	Employment Termination	Other		0	0
Neglect Class III	Contracted	Written Reprimand	Suspension		0	1
Dignity and Respect	Contracted	Written Reprimand	Suspension		0	1
Safe, Sanitary, and Humane Treatment Environment	Contracted	Written Reprimand	Training		0	2
Abuse Class II - Unreasonable Force	Contracted	Employment Termination	Training		0	0
Disclosure of Confidential Information	Contracted	Written Reprimand	Training		0	0
Neglect Class II - Failure to Report	Contracted	Employee left the agency, but subs	Other		0	0
Dignity and Respect	Contracted	Employment Termination			0	1
Dignity and Respect	Contracted	Written Reprimand	Training		0	1
Safe, Sanitary, and Humane Treatment Environment	Contracted	Written Reprimand	Training		0	3
Dignity and Respect	Contracted	Written Reprimand	Training		0	3

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Neglect Class III	Contracted	Written Reprimand	Suspension		0	0
Neglect Class III	Contracted	Suspension	Employment Termination		0	0
Dignity and Respect	Contracted	Verbal Counseling	Training		0	1
Mental Health Services Suited to Condition	Contracted	Verbal Counseling	Training		0	0
Neglect Class III	Contracted	Written Counseling	Training		0	0
Mental Health Services Suited to Condition	Contracted	Written Counseling	Training		0	0
Neglect Class III	Contracted	Employment Termination			0	0
Neglect Class III	Contracted	Written Reprimand	Suspension		0	0
Abuse Class II - Exploitation	Contracted	Employment Termination	Other		0	3
Safe, Sanitary, and Humane Treatment Environment	Contracted	Suspension	Training		0	3
Abuse Class II - Unreasonable Force	Contracted	Written Reprimand	Suspension		0	1
Abuse Class III	Contracted	Written Reprimand	Suspension		0	1
Dignity and Respect	Contracted	Written Reprimand	Suspension		0	1
Safe, Sanitary, and Humane Treatment Environment	Contracted	Employment Termination			0	5
Dignity and Respect	Contracted	Employment Termination			0	5
Safe, Sanitary, and Humane Treatment Environment	Contracted	Employee left the agency, but substantiated			0	6
Dignity and Respect	Contracted	Employee left the agency, but substantiated			0	6
Dignity and Respect	Contracted	Employee left the agency, but substantiated			0	1
Dignity and Respect	Contracted	Employee left the agency, but substantiated			0	1
Disclosure of Confidential Information	Agency	Verbal Counseling	Training		0	0
Neglect Class III	Agency	Employment Termination	Other		0	0
Neglect Class III	Agency	Employment Termination	Other		0	0
Mental Health Services Suited to Condition	Agency	Employment Termination	Other		0	0

Complaint Category Disclosure of Confidential Information	Provider Type	Remedial Action		Remedial Action 2 Employment Termination	SEDW	CWP	HSW
		Agency	Training				
Disclosure of Confidential Information	Agency	Agency	Employment Termination	Training	0	0	0
Rights Protection System	Agency	Agency	Training		0	0	0
Abuse Class III	Agency	Agency	Written Reprimand	Suspension	0	0	0
Neglect Class III	Agency	Agency	Written Reprimand	Suspension	0	0	0
Mental Health Services Suited to Condition	Agency	Agency	Training	Other	0	0	0
Mental Health Services Suited to Condition	Agency	Agency	Training	Other	0	0	0
Abuse Class III	Contracted		Employment Termination		0	0	0
Dignity and Respect	Contracted		Employment Termination		0	0	0
Family Rights	Contracted		Employment Termination		0	0	0
Neglect Class II - Failure to Report	Contracted		Written Reprimand	Training	0	0	6
Personal Property - Possession and Use	Contracted		Employee left the agency, but subs	Other	0	0	6
Mental Health Services Suited to Condition	Contracted		Employment Termination		0	0	1
Safe, Sanitary, and Humane Treatment Environment	Contracted		Employment Termination		0	0	1
Abuse Class II - Nonaccidental Act	Contracted		Employment Termination		0	0	1
Abuse Class II - Nonaccidental Act	Contracted		Employment Termination		0	0	1
Abuse Class II - Unreasonable Force	Contracted		Employment Termination		0	0	1
Abuse Class III	Contracted		Employment Termination		0	0	1
Mental Health Services Suited to Condition	Contracted		Employment Termination		0	0	1
Mental Health Services Suited to Condition	Agency		Employment Termination		0	0	0
Neglect Class III	Agency		Employment Termination		0	0	0

Training Received by the Office of Recipient Rights

[illegible]

Data Summary

Demographic Information	
Reporting CMH/LPH	Monroe CMHA
Recipient Rights Office Director Name	Coy Hernandez
Reporting Period	October 1, 2023 through September 30, 2024
Number of Rights Office Staff	2
Full Time Equivalents (FTEs)	2
Staff with an Investigative Role	2
FTEs for Investigation	2.00
Complaints per FTE	43.5

Complaint Data Summary		
Type	Received	
All Allegations Received	87	
Allegations Received Subject to Investigation/Intervention	82	
Allegations Received with No Right Involved or Outside Jurisdiction	5	
Investigations Completed	82	
Interventions Completed	0	
Allegations Substantiated	66	
Percent of All Allegations Substantiated	80%	
Highlighted Complaint Categories	Received	Substantiated
Abuse I, II, III	24	12
Neglect I, II, III	17	17
Dignity and Respect	12	11
MH Services Suited to Condition	11	10
Individual Written Plan of Service	0	0
Disclosure of Confidential Information	5	4

Complaint Remediation			
Remediation Type	Total	Waiver Type	Total
Verbal Counseling	3	SEDW	0
Written Counseling	2	CWP	0
Verbal Reprimand	0	HSW	65
Written Reprimand	22		
Suspension	14		
Demotion	0		
Staff Transfer	0		
Training	25		
Employment Termination	27		
Employee Left the Agency but Substantiated	6		
Contract Action	1		
Policy Revision/Development	0		
Environmental Repair/Enhancement	0		
Plan of Service Revision	0		
Recipient Transfer to Another Provider/Site	0		
Other	10		
None	0		

Training Received by the Office of Recipient Rights	
Training Categories	Hours
I - Operations	25
II - Legal Foundations	0
III - Leadership	0
IV - Augmented Training	11
Total	36

Training Provided by the Office of Recipient Rights				
	Agency	Contracted	Recipient	Other
Instructor-Led (In Person)	6	0	0	1
Instructor-Led (Virtual)	10	0	0	1
eLearning	27	367	0	0
Video	0	0	0	0
Paper	0	0	0	0
Total	43	367	0	2

Appeals	
Grounds	Total
Findings	0
Action Taken	1
Timeliness	0
Decision	Total
Denied Appeal	0
Upheld Investigative Findings	1
Returned for Reinvestigation	0
Requested External Investigation	0
Take Additional Action	0
Address Timeliness Issues	0

Desired Outcomes and Progress Toward These Outcomes

Outcomes

ORR will review and update ORR training materials as needed to ensure compliance with State training requirements.

ORR will partner with Network Management Department to review ORR training records for all contractual providers to ensure compliance with ORR training requirements.

ORR will pursue educational/outreach opportunities with recipients and/or community entities to increase awareness of the rights of individuals served by MCMHA.

Outcomes established for the Office of Recipient Rights for 2025

ORR will review and update ORR training materials as needed to ensure compliance with State training requirements.

ORR will partner with Network Management Department to review ORR training records for all contractual providers to ensure compliance with ORR training requirements.

ORR will pursue educational/outreach opportunities with recipients and/or community entities to increase awareness of the rights of individuals served by MCMHA.

Recommendations to the Governing Board

The Office of Recipient Rights and Recipient Rights Advisory Committee Recommends:

When considering service and program changes, be mindful and vigilant about protecting rights and ensuring consumer safety and well-being.

Ensure that recipients of services are aware of and receive the services to which they are entitled. This includes the sufficient staffing of mental health professionals as overall service needs continue to increase.

Ensure quality of services is considered when awarding or renewing contracts.

Continue to fund the Rights Office at it's current level & contract with Washtenaw County for the provision of rights protection.

Director Attestation

(To be completed by the CMH/LPH Director)

I attest that I have reviewed this annual report and I am submitting it as required by law.

Name (sign or type below)

Lisa Graham

DATE

12/19/2024

RECIPIENT RIGHTS DATA REPORT—NEW CATEGORY DESCRIPTIONS

ABUSE:

A non-accidental act, or provocation of another to act, which causes or contributes to:

- **Class I:** death; serious injury; sexual abuse
- **Class II:** non-serious injury; emotional harm; unreasonable force; financial harm due to treating as incompetent; exploitation of property/funds.
- **Class III:** verbal abuse or other means of communication that is degrading, threatening, or sexually harassing.

NEGLECT

An act, or lack of acting, which deprived a consumer of care or treatment required by a written standard or the plan of service, and which:

- **Class I:** caused/contributed to death, serious injury, sexual abuse; OR Failure to Report Abuse/Neglect I.
- **Class II:** caused/contributed to non-serious injury, emotional harm; OR Failure to Report Abuse/Neglect II.
- **Class III:** placed, or could have placed, consumer at risk of physical harm; OR Failure to Report Abuse/Neglect III.

RIGHTS PROTECTION SYSTEM

- **Notice/explanation of rights:** the right to be given info re: the rights of recipients of public mental health services.
- **Access to Rights System:** the right to have unimpeded access the Rights Office and Rights protection system.
- **Complaint Investigation Process:** the right that Recipient Rights Investigations be handled as required by law (ie. completion within 90 days, thorough consideration of facts, conclusions based on preponderance of evidence, etc).
- **Appeals Process:** the right to be informed & upon request assisted to appeal a completed Rights Investigation on the following grounds: findings inconsistent with facts/law; action taken doesn't provide an adequate remedy; or investigation not initiated/completed in a timely manner.

CIVIL RIGHTS

- **Discrimination/Accessibility/Accommodation:** the right not to be discriminated against (ie. age, gender, race, etc) and be provided reasonable accessibility/accommodation for a disability.
- **Presumption of Competency:** the right to be presumed competent until or unless a court determines otherwise.
- **Search/Seizure:** the right to privacy and not be subjected to unreasonable search/seizure of person, home, or personal property.

RELIGIOUS PRACTICE: The right to practice, or not practice, a religion of one's choice, and not be discriminated against due to religious beliefs.

VOTING: The right to vote as desired and to receive assistance when requested.

MENTAL HEALTH SERVICES SUITED TO CONDITION (includes Chapter 4 violations for hospitals)

- **Informed Consent:** the right to make *voluntary* decisions based on the *knowledge and understanding* of the risks, benefits, and available alternatives.
- **Information on Family Planning:** the right to be informed of the availability of family planning referral services.
- **Treatment by spiritual means:** the right to receive treatment by spiritual means, unless harmful or illegal.
- **Mental Health Services Suited to Condition:** the right to receive mental health treatment suited to one's condition, based on a comprehensive needs assessment, and in compliance with written standards (ie. consumer's treatment plan, doctor's orders, guidelines/policies, etc).
- **Second Opinion-Denial of Hospitalization:** the right to have a second opinion if denied inpatient hospitalization.

- **Independent Clinical Evaluation:** the right to secure an independent evaluation to determine if one requires treatment, hospitalization or other services, and whether one is of legal capacity.
- **Second Opinion-Denial of Services:** the right to have a second opinion if denied mental health services.

SAFE, SANITARY, HUMANE TREATMENT ENVIRONMENT

- **Safe:** The right to receive services in a setting that is free from hazards to health/safety.
- **Sanitary:** the right to receive services in a setting that is clean and sanitary.
- **Humane:** the right to receive services in a setting that is professional, considerate and free from unnecessary disruptions (ie. arguing/fighting/profanity between staff in a consumer's presence)

LEAST RESTRICTIVE SETTING: The right to receive services that are clinically appropriate in the least restrictive setting possible.

DIGNITY/RESPECT: The right to be treated with politeness, esteem and consideration.

PHYSICAL and MENTAL EXAMS: *only applies to inpatient hospitals.*

FAMILY RIGHTS

- **Family Dignity and Respect:** families' right to be treated with dignity and respect.
- **Receipt of General Education Information:** families' right to be given general info about the array of mental health conditions, treatment, and community resources.
- **Opportunity to Provide Information:** families' right to be given the chance to provide info to the treating professionals.

INDIVIDUAL PLAN OF SERVICE / PERSON CENTERED PROCESS

- **Person Centered Process:** the right to be engaged in planning one's own treatment; having one's strengths and preferences honored; and a treatment plan devised that clearly identifies the amount, scope and duration of treatment to be provided and by whom.
- **Timely Development:** the right to have the person-centered plan completed in a timely manner, as required by law or agency policy.
- **Request for review:** the right to request a review of the treatment plan at any time, and for the review to be completed within 30 days.
- **Participation by individual(s) of choice:** the right to choose who participates in the planning process (exclusions permitted only if the treatment team determines a person poses a safety risk or would greatly disrupt the planning process).
- **Assessment of needs:** the right to receive a comprehensive needs assessment, which is then incorporated into the treatment plan (includes food, shelter, clothing, health care, employment & educational opportunities, legal services, transportation, recreation and health/safety needs).

CHOICE OF PHYSICIAN/MENTAL HEALTH PROFESSIONAL: the right to a choice of physician or other mental health professional within the limits of a available resources.

NOTICE OF CLINICAL STATUS/PROGRESS: the right to be informed of one's progress at reasonable intervals and in a manner that is appropriate to one's condition.

SERVICES OF MENTAL HEALTH PROFESSIONAL: the right to obtain services from a mental health professional and to see that professional at reasonable intervals.

SURGERY: *only applies to inpatient hospitals.*

ELECTROCONVULSIVE THERAPY (ECT): *only applies to inpatient hospitals.*

PSYCHOTROPIC DRUGS: *only applies to inpatient hospitals.*

MEDICATION SIDE EFFECTS: the right to be given an explanation and written summary of the specific risks and most common side effects before initiating drug therapy.

FINGERPRINTS, PHOTOGRAPHS, AUDIO-RECORDINGS, ONE-WAY GLASS

- **Prior Consent:** the right to give written permission prior to being photographed, fingerprinted, taped, or viewed through a one-way glass for educational, informational, social or treatment purposes.
- **Identification:** the right to have photographs or audio/videotapes sent to an individual or another agency only when necessary to help identify a consumer, as permitted by law or agency policy.

- **Objection:** the right to refuse to be photographed, fingerprinted, taped, or viewed through one-way glass.
- **Release to others/return:** the right for any photograph or audio/videotape to be returned, along with any copies, after its use for identification purposes.
- **Storage/Destruction:** the right to have photographs and audio/videotapes secured in a confidential manner and returned/destroyed upon discharge or as required by agency policy.

VIDEO SURVEILLANCE: *only applies to inpatient hospitals.*

COMMUNICATION-VISITS

- **Access to visitors:** the right to see or have visitors.
- **Contact with Attorneys about legal matters:** the right to communicate privately with one's attorney.

COMMUNICATION-TELEPHONE

- **Access to telephone:** the right to use the telephone to communicate with others.
- **Funds for telephone usage:** the right to be provided with a reasonable amount of funds for telephone use.

COMMUNICATION-MAIL

- **Access to mail:** the right to use the mail to communicate with others.
- **Funds for mail usage:** the right to be provided with a reasonable amount of stamps and stationery.
- **Written and posted limitations:** the right for limits to communication to be in writing and clearly posted.
- **Uncensored Mail:** the right to send and receive mail privately and without interference/censorship.

PERSONAL PROPERTY – POSSESSION & USE

- **Access to entertainment materials, information, news:** the right to watch TV, go to the movies, read newspapers, magazines/books, etc as desired.
- **Possession and Use:** the right to have and use one's personal belongings as desired.
- **Storage Space:** the right to a reasonable amount of storage space for personal property, inc. clothes.
- **Inspection at Reasonable Times:** the right to access one's personal property at reasonable times.
- **Exclusions:** the right to have any exclusions of personal property clearly listed and publicly posted at a Program or Group Home (including weapons, drugs, etc)
- **Receipt to Recipient and Designated Individual:** the right to be given a receipt for any personal property held for safekeeping and have property returned when leaving the program.
- **Waiver:** the right to waive safekeeping of one's own personal property by a licensed home/facility.
- **Protection:** the right for one's personal property to be protected from theft or loss.

PERSONAL PROPERTY-LIMITATIONS: the right to have any limitation of personal property addressed in the treatment plan and based only on preventing harm, theft, loss or destruction.

SAFEGUARDING MONEY: *only applies to a state facility.*

LABOR and COMPENSATION: the right to be compensated for work that the program/facility would normally pay someone to perform. (Not include personal housekeeping tasks/chores related to living in a small group setting.)

FREEDOM OF MOVEMENT: the right to move freely without restriction/limitation, unless approved in the treatment plan or necessary to ensure immediate health/safety.

RESTRAINT: the right not to have physical restraints used to restrict one's movement (*permitted only in inpatient hospitals*).

SECLUSION: the right not to be placed in a room alone where one's ability to leave is prevented (*permitted only in inpatient hospitals*).

COMPLETE RECORD: the right to have a complete and current record of services.

DISCLOSURE OF CONFIDENTIAL INFORMATION: the right to have all mental health treatment info, including one's consumer status, kept private, unless disclosure permitted or required by signed consent, court order or law.

WITHHOLDING INFORMATION:

- **Withholding:** the right not to be withheld access to one's treatment record, including viewing or obtaining a copy, or authorizing others to view/receive a copy.
- **Access by DRM to record:** the right of Disability Rights Michigan (previously called Michigan Protection & Advocacy/MP&A) to have unimpeded access to consumer info/records, under specific circumstances specified in agency policy.

CORRECTION OF RECORD: the right to place a statement in the treatment record to correct/amend info perceived to be inaccurate/incorrect.

PRIVILEGED COMMUNICATION: the right for info obtained by a psychiatrist/psychologist, in connection to examination/diagnosis/treatment, to be kept private unless disclosure permitted by signed consent, court order or law.

NO RIGHT INVOLVED: a problem or issue that does not involve a right protected under the Mental Health Code.

OUTSIDE PROVIDER JURISDICTION: a problem or issue that falls outside the jurisdiction of the Rights Office (ie. conduct of friends, family, or agencies/providers not under contract.)

Reporting Period: October 1, 2023 to September 30, 2024

Waiting List Report

Program Type	MI Adult	DD	SED	Total
Targeted CSM/Supports Coordination				
<i>Specify all HCPCS and CPT Codes included in this category here:</i>	T1017			
Number on waiting list as of date above	0	0	0	0
Added during the time period covered	1	1	0	2
Removed during the time period covered- service provided	0	0	0	0
Removed during time period covered - all other reasons	1	1	0	2
Number left at the end of the time period covered	0	0	0	0
Intensive Interventions/Intensive Community Services				
<i>Specify all HCPCS and CPT Codes included in this category here:</i>	H0036, H2022, H2021, H0038			
Number on waiting list as of date above	0	0	0	0
Added during the time period covered	0	0	18	18
Removed during the time period covered- service provided	0	0	10	10
Removed during time period covered - all other reasons	0	0	8	8
Number left at the end of the time period covered	0	0	0	0
Clinic Services				
<i>Specify all HCPCS and CPT Codes included in this category here:</i>	H0002,90791, 9083x, 90837, 90846, 90847, 97151, 97153, 97155, 97156, S9482, S5111, 992xx			
Number on waiting list as of date above	1	3	6	10
Added during the time period covered	36	10	74	120
Removed during the time period covered- service provided	10	6	40	56
Removed during time period covered - all other reasons	18	1	19	38
Number left at the end of the time period covered	9	6	21	36
Supports for Residential Living				
<i>Specify all HCPCS and CPT Codes included in this category here:</i>	H0016, T1020			
Number on waiting list as of date above	0	0	0	0
Added during the time period covered	1	2	0	3
Removed during the time period covered- service provided	0	2	0	2
Removed during time period covered - all other reasons	1	0	0	1
Number left at the end of the time period covered	0	0	0	0
Supports for Community Living				
<i>Specify all HCPCS and CPT Codes included in this category here:</i>	H0045, H2014, H2015, H2020, T1005, T1020, T1999			
Number on waiting list as of date above	0	5	1	6
Added during the time period covered	4	8	4	16
Removed during the time period covered- service provided	3	3	1	7
Removed during time period covered - all other reasons	1	3	3	7
Number left at the end of the time period covered	0	1	1	2
NARRATIVE: How do you assure that service needs are met at an individual level as well as from a program capacity level?				
<p>Monroe Community Mental Health Authority has implemented and followed policies and procedures to ensure access to medically necessary services for those served. This is closely monitored, by clinical supervisors in each program as well as the compliance manager and leadership team. Quality assurance processes are in place to address any barriers that may arise. Current barriers are similar to those faced across the state including chronic direct care staffing shortages and limited clinical workforce. A large majority of the clinical services were delayed during the first quarter due to staffing shortages. Most of these have been able to access services in the months following. We continue to work with local agencies, community stakeholders and the state through collaborative meetings and workgroups to address these issues. We have expanded our efforts and reach to area university's to attract interns, continually examine our resources to offer "sign on bonus's", and have expanded our utilization and compliance team to ensure medical necessity and service needs are met.</p>				

Report on the Requests for Services and Disposition of Requests

Row	CMHSP Point of Entry-Screening	DD	MI Adult	SED	Unknown / All Others	Total
1	Total # of all people who telephoned or walked in with any request	758	7591	1786	2144	12279
2	Of the # in Row 1 (all people who telephoned or walked in), total # of people referred out due to non-mental health needs	469	5396	1177	1957	8999
3	Of the # in Row 1 (all people who telephoned or walked in) total # of people who requested services the CMHSP provides, irrespective of eligibility	289	2195	609	187	3280
4	Of the # in Row 3 (People requested services the CMHSP provides), total # of people who did not meet eligibility through phone or other screening	101	693	110	148	1052
5	Of the # in Row 3 (People requested services the CMHSP provides), total # of people who were scheduled for assessment	145	924	353	16	1438
6	Of the # in Row 3 (People requested services the CMHSP provides), total # of people with other circumstance - Describe below on line 32	43	578	146	23	790
7	Is Row 1 (all people who telephoned or walked in) an unduplicated count in each category? Answer Yes or No for each category	No	No	No	No	N/A

Row	CMHSP ASSESSMENT	DD	MI Adult	SED	Unknown / All Others	Total
8	Of the # in Row 5 (Scheduled for intake/biopsychosocial Assessment) - total # of people who did not receive intake/biopsychosocial assessment (dropped out, no show, etc.)	18	250	68	13	349
9	Of the # in Row 5 (Scheduled for intake/biopsychosocial Assessment) - total # of people who were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	1	0	0	1
10	Of the # in Row 5 (Scheduled for intake/biopsychosocial Assessment) - total # of people who were not served because they were MA HP enrolled and referred out to MA health plan	0	7	0	2	9
11	Of the # in Row 5 (Scheduled for intake/biopsychosocial Assessment) - total # of people who otherwise did not meet CMHSP non-entitlement intake/assessment criteria.	0	0	0	0	0
11a	Of the # in Row 11 (did not meet CMHSP non-entitlement intake/assessment criteria) - total # of people who were referred out to other mental health providers	0	0	0	0	0
11b	Of the # in Row 11 (did not meet CMHSP non-entitlement intake/assessment criteria) - total # of people who were not referred out to other mental health providers	0	0	0	0	0
12	Of the # in Row 5 (Scheduled for intake/biopsychosocial Assessment) - total # of people who met the CMHSP intake criteria	125	666	285	3	1079
13	Of the # in Row 12 (Met CMHSP intake criteria) - total # of people who met emergency/urgent/priority conditions criteria	0	1	0	0	1
14	Of the # in Row 12 (Met CMHSP intake criteria) - total # of people who met regular/routine/usual admission criteria	125	665	285	3	1078
15	Of the # in Row 12 (Met CMHSP eligibility criteria) - total # of people who were put on a waiting list	0	0	0	0	0
15a	Of the # in Row 15 (Put on a waiting list) - total # of people who received some CMHSP services, but wait listed for other CMHSP services	0	0	0	0	0
15b	Of the # in Row 15 (Put on a waiting list) - total # of people who were waitlisted for all CMHSP services	0	0	0	0	0
16	Other Requests for Service and Disposition of Requests - Report total # of people in each category and describe on Line 32.	0	0	0	0	0

Row 6 - Of the # in Row 3 (People requested services the CMHSP provides), total # of people with other circumstance - Describe here
and/or **Row 16 - Other Requests, total # of people - Describe here**

Included in Row 6 are any screenings that were marked with dispositions of crisis resolved, outpatient support, etc.

NARRATIVE: Provide a brief description of how the CMHSP collects and maintains the data reported on this form.

Utilizing the 1017a report, documents are filtered out for the fiscal year and sorted according to the data points requested and sifted by dispositions and populations to gain the totals for the data points.

NARRATIVE: Briefly describe the process by which the CMHSP determines eligibility [e.g., per use of assessment instrument (ID name), per telephone screen, or face-to-face assessment or combination, etc.].

After a service is requested by an individual, an Access screening or pre-screening is performed to determine eligibility based on the Mental Health Code and Medicaid Manual criteria. These assessments are done in a combination of ways using both in-person or virtual appointments based on the consumer's choice.

NARRATIVE: Provide a brief but easily understood and clear narrative describing noticeable trends and what the CMHSP response is to these trends. If trends represent an increased demand for services, explain how the CMHSP plans to manage this increased demand moving forward. If changes in eligibility rules result in termination of services to current enrollees, include this information.

There is a fairly significant increase of Access activity in FY24 as compared to FY23 as was to be expected based on FY24 being the first year of CCBHC for Monroe. Thankfully the Monroe Access team is now fully staffed and keeping up with the increased demands isn't expected to be a problem.

Community Needs Assessment																
Community Data Sets																
CMHSP name:		Monroe Community Mental Health Authority														
Contact person and e-mail address:		Meagan Schinella - mschinella@monroecmha.org														
ROW 1	Population (Census)-- As of September -- by county	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
County 1	Monroe	152021	152300	152579	152858	153137	153416	153695	153974	154253	154532	154809	154809	154809	154809	154809
County 2																
County 3																
County 4																
County 5																
County 6																
	Total CMHSP Population		152300	152579	152858	153137	153416	153695	153974	154253	154532	154809	154809	154809	154809	154809
	Change from Prior Year		152300	279	279	279	279	279	279	279	279	277	0	0	0	0
	% change from Prior Year		#DIV/0!	0.18%	0.18%	0.18%	0.18%	0.0018	0.0018	0.0018	0.0018	0.0018	0	0	0	0
	Cumulative Change since 2009		152300	152579	152858	153137	153416	153695	153974	154253	2232	2230	1951	1672	1393	1114
	% cumulative change since 2009		#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.0147	0.0146	0.0128	0.0109	0.0091	0.0072
	Source:	US Census Bureau from 2019 Estimates for 2020 information														
	This will provide you numbers for 2020	https://www.census.gov/library/stories/state-by-state/michigan-population-change-between-census-decade.html														
	Use data from previous reports for years before 2019 or reference this website for previous years	https://datacenter.kidscount.org/data/tables/1698-total-population?loc=24&loct=5#detailed/5/3744-3826/false/1729,37,871,870,573,869,36,868,867,133/any/3603														
ROW 2	Medicaid Enrollment - Average Enrollment for September:	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
County 1	Monroe	23403	24112	23119	23166	26021	27934	19027	20270	20864	20439	23406	25898	26940	26514	21165
County 2																
County 3																
County 4																
County 5																
County 6																
	Total CMHSP Medicaid Enrollment	23403	24112	23119	23166	26021	27934	19027	20270	20864	20439	23406	25898	26940	26514	21165
	Change from Prior Year		709	-993	47	2855	1913	-8907	1243	594	-425	2967	2492	1042	-426	-5349
	% change from Prior Year		0.0303	-0.0412	0.002	0.1232	0.0735	-0.3189	0.0653	0.0293	-0.0204	0.1452	0.1065	0.0402	-0.0158	-0.2017
	Cumulative Change since 2009		709	-284	-237	2618	4531	-4376	-3133	-2539	-2964	-706	2779	3774	493	-6769
	% cumulative change since 2009		0.0303	-0.0121	-0.0101	0.1119	0.1936	-0.187	-0.1339	-0.1085	-0.1267	-0.0293	0.1202	0.1629	0.0189	-0.2423
	Source:	https://www.michigan.gov/mdhhs/0,5885,7-339-71547_4860-15064--,00.html														
ROW 3	Number of Children in Out of Home Care	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Children Ages Birth-17 in Out of Home Care-Abuse or Neglect (Number)	83	76	117	146	142	196	164	185	194	145	110	92	89	94	NA
	Children ages Birth-8 in out of home care - abuse or neglect (Number)	54	51	75	103	103	145	124	131	132	108	87	70	63	66	NA
	Children Ages Birth-5 in out of home care - abuse or neglect (Number)	39	41	62	78	77	111	94	98	100	83	70	57	47	53	NA
Source:	http://datacenter.kidscount.org/data/bystate/Default.aspx?state=MI															
	**Some information may not be available for every year.															
	Total CMHSP	176	168	254	327	322	452	382	414	426	336	267	219	199	213	0
	Change from Prior Year		-8	86	73	-5	130	-70	32	12	-90	-69	-48	-20	14	-213
	% change from Prior Year		-4.55%	51.19%	28.74%	-1.53%	40.37%	-0.1549	0.0838	0.029	-0.2113	-0.2054	-0.1798	-0.0913	0.0704	-1
	Cumulative Change since 2009		-8	78	151	146	276	206	238	250	168	13	-108	-123	-239	-382
	% cumulative change since 2009		-4.55%	44.32%	85.80%	82.95%	#####	1.1705	1.3523	1.4205	1	0.0512	-0.3303	-0.382	-0.5288	-1

Community Needs Assessment																
Community Data Sets																
CMHSP name:			Monroe Community Mental Health Authority													
Contact person and e-mail address:			Meagan Schinella - mschinella@monroecmha.org													
ROW 4	Number of Licensed Foster Care Beds in Catchment Area			2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Adults - Enter the Total Number of Bed Capacity			402	413	401	391	391	401	426	428	495	616	653	641	735
Source	http://www.michigan.gov/dhs/0,1607,7-124-5455_27716_27717-82231--,00.html															
	Kids - Enter the Total Number of Licensed Facilities			NA	NA	NA	NA	NA	NA	NA	NA	110	45	45	45	45
Source	http://www.michigan.gov/dhs/0,1607,7-124-5455_27716_27719-82293--,00.html															
	*This data is also provided by MDHHS on the website under "Provided Information".															
5	Prevalence Proxy Data															
5-A	Adults with Serious Mental Illness (Kessler Methodology)															
	Trend - Kessler Prevalence Data															
	*Provided by MDHHS in 2012															
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 5B	Children at risk for Serious Emotional Disturbance 100% below poverty	7099	6921	5526	5545	4364	4827	3566	5601	4857	5351	4684	3716	3269	4461	NA
Source	https://data.census.gov/cedsci/?intcmp=aff_cedsci_banner_															
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 5C	Persons with Developmental Disabilities: Formula Populated	0	761.5	762.9	764.29	765.69	767.08	768.48	769.87	771.27	772.66	774.05	774.05	774.05	774.05	774.05
ROW 6	Community Homelessness- catchment area	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 6A	Local Continuum of Care Bi-ennial Homeless Count	140	121	113	139	182	185	176	193	209	167	184	103	111	127	NA
	Change from Prior Time Period		-19	-8	26	43	3	-9	17	16	-42	17	-81	8	16	#####
ROW 6B	# served from CMHSP data- of persons that are homeless	5	6	10	11	26	74	96	107	116	111	81	97	110	153	184
	Change from Prior Time Period		1	4	1	15	48	22	11	9	-5	-30	16	13	43	31
	Link to Homeless count report for some Michigan regions/counties-Source HUD.GOV	2022 AHAR: Part 1 - PIT Estimates of Homelessness in the U.S. HUD USER														
ROW 6C	Community Employment	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
County 1	Monroe	66410	66967	68341	69635	71410	73035	72848	72402	72948	71902	68334	67564	71592	74781	76000
County 2																
County 3																
County 4																
County 5																
County 6																
	Total CMHSP	66410	66967	68341	69635	71410	73035	72848	72402	72948	71902	68334	67564	71592	74781	76000
	Change from Prior Year		557	1374	1294	1775	1625	-187	-446	546	-1046	-3568	-770	4028	3189	1219
	% change from Prior Year		0.84%	2.05%	1.89%	2.55%	2.28%	-0.0026	-0.0061	0.0075	-0.0143	-0.0496	-0.0113	0.0596	0.0445	0.0163
	Cumulative Change since 2008		557	1931	3225	5000	6625	6438	5992	6538	5492	1367	-777	1957	3371	2965
	% cumulative change since 2008		0.84%	2.91%	4.86%	7.53%	9.98%	0.0969	0.0902	0.0984	0.0827	0.0204	-0.0114	0.0281	0.0472	0.0406
	Source:	State of Michigan Labor Market Information														
		https://milmi.org/DataSearch/LAUS														
ROW 7	Justice System	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 7A	Jail diversions	10	27	3	13	NA	27	40	66	96	168	156	307	324	319	378
	Source: MCMHA Jail Diversion Data															

Community Needs Assessment																
Community Data Sets																
CMHSP name:				Monroe Community Mental Health Authority												
Contact person and e-mail address:				Meagan Schinella - mschinella@monroecmha.org												
ROW 7B	Prison discharges-number of people expected to meet SMI Criteria				2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Source: Betsy Hardwick, Re-Entry Project for Offenders with Special Needs (RPOSN)				7	8	11	NA	26	32	7	4	5	8	7	7
ROW 8	Education System	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 8A	Number of students aging out or graduating special education	NA	NA	NA	NA	NA	NA	34	192	214	197	41	145	135	127	169
ROW 9	Graduation and Dropout Rate	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
County 1	Monroe	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
County 2																
County 3																
County 4																
County 5																
County 6																
	CMHSP Total:	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ROW 9A	% graduated	80.10%	78.90%	82.30%	82.10%	83.70%	83.60%	85.40%	85.20%	89.10%	89.10%	90.20%	85.60%	89.20%	88.30%	NA
ROW 9B	% dropped out	9.70%	9.50%	7.30%	7.60%	7.60%	7.30%	6.70%	6.90%	5.70%	5.40%	5.40%	6.40%	6.20%	7.40%	NA
	Source: The Annie E. Casey Foundation-Kids Data Count Center	http://datacenter.kidscount.org/data/bystate/Default.aspx?state=MI														
		DATE														
	For primary health items, identify point in time being reported	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
ROW 10	Primary Health															
ROW 10A	% of CMHSP consumers with an identified Primary Care Physican	NA	NA	83%	85%	87%	85%	81%	77%	89%	NA	66%	63%	58%	57%	65.56%
10B	CMHSP Medicaid recipients with primary care service/encounter															
10C	# with primary care plus emergency room															
10D	# with emergency room no primary care															
	MDHHS does not have this data (10B, 10C, 10D) available at this time.															
ROW 11	Optional Information			2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Private Providers and Public SUD Providers															
ROW 11A	Number of Existing Private Providers in Community			4	13	14	15	16	17	18	10	11	NA	9	NA	NA
ROW 11B	Number of providers that utilize a sliding fee scale			4	10	10	10	11	11	12	1	5	NA	NA	NA	NA
ROW 11C	Number of providers that are accepting new clients			3	10	10	11	12	13	13	2	9	NA	NA	NA	NA
2024v.1																



MCMHA Finance Board Action Request
Service Contract(s) and Amendments

Wednesday, February 19, 2025

Action Requested : Consideration to approve Mental Health Service Contract(s) / Amendments as presented:

PROVIDER	CONTRACT TERM	SERVICE DESCRIPTION	FY2022-2024 RATE / UNIT		FY2024-2026 RATE / UNIT		ADDITIONAL INFORMATION
Hospitals							
Trinity Health	10/1/24-9/30/26	Inpatient hospitalization Partial hospitalization Electroconvulsive therapy	\$896.48 \$357.65 \$938.08	per diem per diem encounter	\$923.37 \$357.65 \$938.08	per diem per diem encounter	3% increase on inpatient rate only
Pinerest	3/1/25-9/30/26	Inpatient Hospitalization - Child Inpatient Hospitalization - Adult			\$1,393.00 \$1,269.00	per diem per diem	
Community Health Center of Branch County	12/1/24-9/30/26	Inpatient Hospitalization	\$975.00	per diem	\$994.50 \$1,014.39	per diem - Year 1 per diem - Year 2	2% increase in year 2
Community Living Supports (CLS) / Supported Employment / Respite							
Turning Leaf Rehabilitation Services, Inc	2/1/25-9/30/26	Comprehensive Community Support/ Overnight Health and Safety Licensed Residential - Birch I & II cottage Licensed Residential - Cedar, Dogwood & Elm cottage Licensed Residential - Eastwood I & II cottage Licensed Residential - Northridge Licensed Residential - Blue Spruce cottage Licensed Residential - Kentwood cottage Licensed Residential - Silver Maple cottage Licensed Residential - White Oak cottage	\$11.90 \$5.80 \$4.73 \$3.70 \$2.65 \$394.11 \$366.06 \$252.11 \$252.11 \$252.11 \$252.11 \$252.11 \$252.11 \$252.11	15 min 15 min 15 min 15 min 15 min per diem per diem per diem per diem per diem per diem per diem per diem per diem	\$12.12 \$5.87 \$4.79 \$3.74 \$2.69 \$434.69 \$407.00 \$292.49 \$291.70 \$290.77 \$291.73 \$283.56 \$291.96	15 min 15 min 15 min 15 min 15 min per diem per diem per diem per diem per diem per diem per diem per diem per diem	
Autism / Waiver Services							
Magnet ABA Therapy, LLC	3/1/25-9/30/26	ABA Behavior Identification Assessment ABA Adaptive Behavior Follow-up Assessment ABA Adaptive Behavior Treatment ABA Group Adaptive Behavior Treatment ABA Clinical Observation and Direction of Adaptive Behavior Treatment ABA Family Behavior Treatment Guidance ABA Multiple Family Behavior Treatment Guidance ABA Adaptive Behavior Treatment Group ABA Exposure Adaptive Behavior Treatment	\$38/\$38/\$38 \$30/\$30/\$21.25 \$13.75/\$13.75/\$13.75/\$12.50 \$4.25/\$4.25/\$4.25/\$3.93 \$30.00/\$30.00/\$21.25 \$30.00/\$30.00/\$21.25 \$12.00/\$12.00/\$8.00 \$8.57/\$8.57/\$6.07 \$30.00/\$30.00/\$30.00 \$25.00	15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min	\$38/\$38/\$38 \$30/\$30/\$21.25 \$14.81/\$14.81/\$14.81/\$13.56 \$4.79/\$4.79/\$4.79/\$4.47 \$30.00/\$30.00/\$21.25 \$30.00/\$30.00/\$21.25 \$12.00/\$12.00/\$8.00 \$8.57/\$8.57/\$6.07 \$31.06/\$31.06/\$31.06 \$26.06	15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min	
Ivyrehab Michigan LLC	3/1/25-9/30/26	ABA Behavior Identification Assessment ABA Adaptive Behavior Follow-up Assessment ABA Adaptive Behavior Treatment ABA Group Adaptive Behavior Treatment ABA Clinical Observation and Direction of Adaptive Behavior Treatment ABA Family Behavior Treatment Guidance ABA Multiple Family Behavior Treatment Guidance ABA Adaptive Behavior Treatment Group ABA Exposure Adaptive Behavior Treatment			\$38/\$38/\$38 \$30/\$30/\$21.25 \$14.81/\$14.81/\$14.81/\$13.56 \$4.79/\$4.79/\$4.79/\$4.47 \$30.00/\$30.00/\$21.25 \$30.00/\$30.00/\$21.25 \$12.00/\$12.00/\$8.00 \$8.57/\$8.57/\$6.07 \$31.06/\$31.06/\$31.06 \$26.06	15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min 15 min	



MONROE COMMUNITY MENTAL HEALTH

December 2024

Board Report

Table of Acronyms

<u>Acronym</u>	<u>Full Description</u>
DAB	Disabled, Aged, & Blind
HMP	Healthy Michigan Plan
HSW	Habilitation Supports Waiver
TANF	Temporary Assistance for Needy Families
CWP	Child Waiver Program
SEDW	Severe Emotional Disturbance Waiver
HHBH	Health Home - Behavioral Health
CMHSP	Community Mental Health Services Program
PIHP	Prepaid Inpatient Health Plan
CCBHC	Certified Community Behavioral Health Clinic

Monthly Highlights

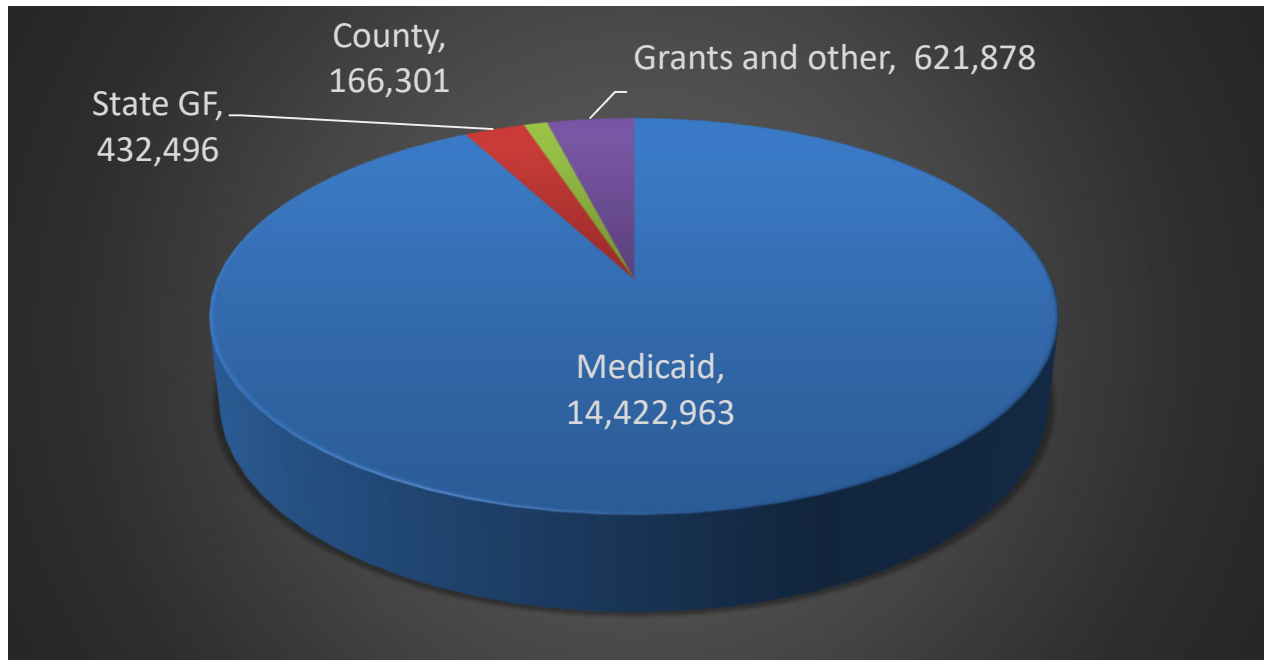
- Eligibility has mostly leveled off during August of 2024. Rate adjustments are now in effect and are reflected in the charts to show increased dollars since April. Additionally, the State has indicated \$41 million in funding to be distributed state-wide sometime in 2025 for the 2024 fiscal year.
- Cash and Investments are up from prior year primarily from collection of receivables from the PIHP.
- Liabilities are also up from prior year primarily related to estimated claims incurred but not reported.
- Net income is projected to be down compared to prior year primarily due to GASB 68 & 75 adjustments that are currently unknown and will be available in early 2025 from the actuaries.
- Revenue received from the PIHP was less than expenses by \$189,008 this month. Our CCBHC supplemental payment is not sufficient to cover expenditures due to the State allocation. This will be made whole through a settlement with the PIHP/MDHHS.
- The CCBHC program is showing a surplus of \$480,152 through this reporting period. We continue to work with the PIHP to accelerate the reporting of T1040s which will bring in more revenue. As we continue to look at generating more T-1040s on the revenue side, primary focus shifts to expenses. The change from the prior year's deficit is largely related to the increase in T-1040s related to our DCO relationship.
- State General Fund is showing a deficit of \$519,840, primarily related to spenddowns, individuals falling off Medicaid and CCBHC non-Medicaid. This deficit is covered by local funds.

MONROE CMH

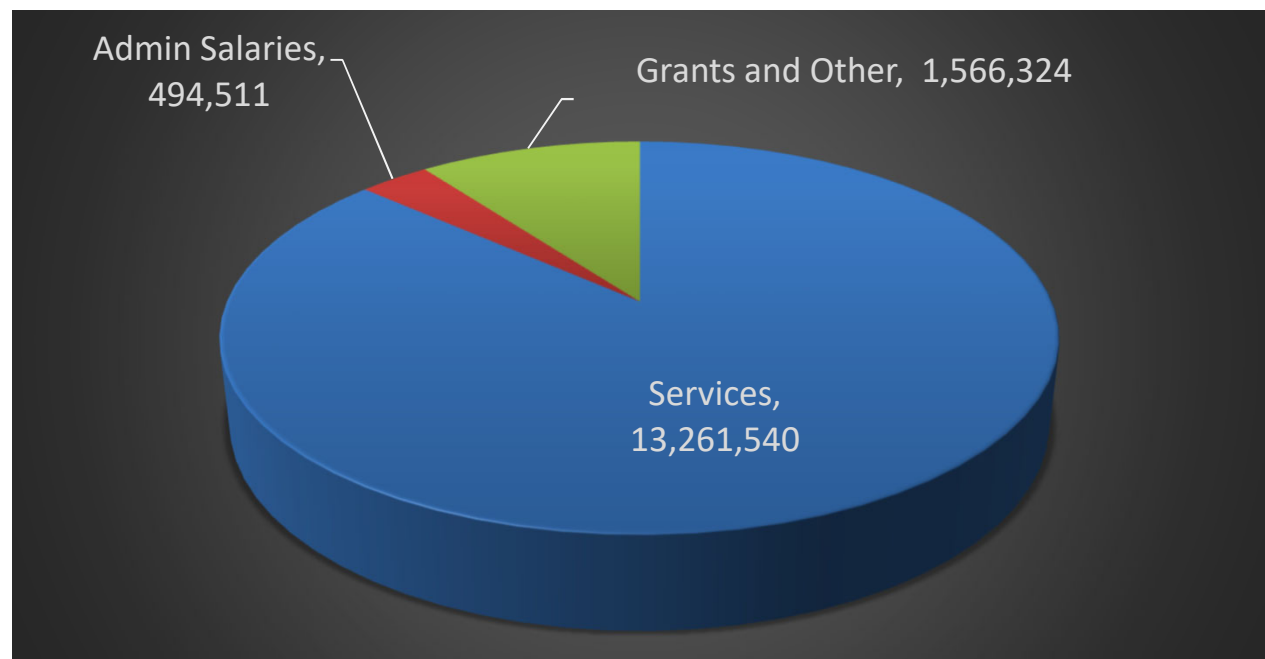
December 2024 Trends

Sources and Uses

Revenues by Source



Expenditures by Category



INCOME STATEMENT BY FUND SOURCE

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2024 through December 2024

Medicaid	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Revenue	\$ 44,657,457	\$ 11,164,364	\$ 11,184,839	\$ 20,475
PIHP Redirect to CCBHC	(5,577,300)	(1,394,325)	(1,250,128)	144,197
1st/3rd Party Revenue	-	-	-	-
Expense	\$ 37,772,544	9,443,136	9,670,895	227,759
Revenue over/(under) expenses	\$ 1,307,613	\$ 326,903	\$ 263,816	\$ (63,087)
Healthy Michigan	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Revenue	\$ 3,659,040	\$ 914,760	\$ 914,760	\$ -
PIHP Redirect to CCBHC	(1,171,834)	(292,958)	(204,519)	88,439
1st/3rd Party Revenue	-	-	-	-
Expense	\$ 2,305,531	576,383	650,953	74,570
Revenue over/(under) expenses	\$ 181,675	\$ 45,419	\$ 59,288	\$ 13,869
CCBHC Medicaid	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Cap Revenue	\$ 5,070,273	\$ 1,267,568	\$ 1,250,128	\$ (17,440)
PIHP Supp Revenue	7,109,531	1,777,383	2,069,153	291,770
1st/3rd Party Revenue	42,396	10,599	10,502	(97)
Expense	12,273,772	3,068,443	2,878,544	(189,899)
Retain as local	1,780,966	445,241	529,926	84,685
Revenue over/(under) expenses	\$ (1,832,538)	\$ (458,135)	\$ (78,687)	\$ 379,448
CCBHC Healthy Michigan	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Cap Revenue	\$ 1,065,304	\$ 266,326	\$ 204,519	\$ (61,806)
PIHP Supp Revenue	1,514,469	378,617	-	(378,617)
1st/3rd Party Revenue	-	-	-	-
Expense	2,641,224	660,306	687,718	27,412
Retain as local	311,785	77,946	(49,774)	(127,720)
Revenue over/(under) expenses	\$ (373,237)	\$ (93,309)	\$ (433,425)	\$ (340,116)
Total PIHP Sources	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Revenue	\$ 56,326,939	\$ 14,235,124	\$ 14,168,752	\$ (66,372)
1st/3rd Party Revenue	42,396	10,599	10,502	(97)
Expense	54,993,071	13,748,268	13,888,110	139,842
Retain as local in FY 25	2,092,751	523,188	480,152	(43,035)
Revenue over/(under) expenses	\$ (716,487)	\$ (25,732)	\$ (189,008)	\$ (163,276)

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2024 through December 2024

CCBHC Medicaid	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Cap Revenue	\$ 5,070,273	\$ 1,267,568	\$ 1,250,128	\$ (17,440)
PIHP Supp Revenue	8,942,069	2,235,517	2,147,840	(87,677)
1st/3rd Party Revenue	42,396	10,599	10,502	(97)
Expense	12,273,772	3,068,443	2,878,544	(189,899)
Revenue over/(under) expenses	\$ 1,780,966	\$ 445,241	\$ 529,926	\$ 84,685
CCBHC Healthy Michigan	2025 Budget	YTD Budget	2025 Actual	Over (Under)
PIHP Cap Revenue	\$ 1,065,304	\$ 266,326	\$ 204,519	\$ (61,806)
PIHP Supp Revenue	1,887,706	471,926	433,425	(38,501)
1st/3rd Party Revenue	-	-	-	-
Expense	2,641,224	660,306	687,718	27,412
Revenue over/(under) expenses	\$ 311,785	\$ 77,946	\$ (49,774)	\$ (127,720)
CCBHC NonMedicaid	2025 Budget	YTD Budget	2025 Actual	Over (Under)
State CCBHC Revenue	\$ -	\$ -	\$ -	\$ -
1st/3rd Party Revenue	-	-	-	-
Expense	1,858,972	464,743	520,956	56,213
Redirect from GF	1,858,972	464,743	520,956	56,213
Revenue over/(under) expenses	\$ -	\$ -	\$ -	\$ -
ALL CCBHC Combined	2025 Budget	YTD Budget	2025 Actual	Over (Under)
All CCBHC Revenue	\$ 16,965,351	\$ 4,241,338	\$ 4,035,912	\$ (205,425)
1st/3rd Party Revenue	42,396	10,599	10,502	(97)
Expense	16,773,968	4,193,492	4,087,218	(106,274)
Redirect from GF	1,858,972	464,743	520,956	56,213
Revenue over/(under) expenses	\$ 2,092,751	\$ 523,188	\$ 480,152	\$ (43,035)

MONROE CMH

Fiscal 2024 Revenues and Expenses by Fund Source

October 2024 through December 2024

State General Fund	2025 Budget	YTD Budget	2025 Actual	Over (Under)
Revenue	\$ 1,634,610	\$ 408,653	\$ 432,496	\$ 23,844
Expense	3,747,623	936,906	431,380	(505,526)
Redirect to Other Programs	(1,858,972)	(464,743)	(520,956)	(56,213)
Redirect from Other Programs	3,971,985	992,996	519,840	(473,156)
Revenue over/(under) expenses	\$ -	\$ -	\$ -	\$ -
All Other Grants/Local	2025 Budget	YTD Budget	2025 Actual	Over (Under)
Revenue	\$ 4,133,744	\$ 1,033,436	\$ 741,599	(291,837)
Expense	2,017,302	504,326	345,676	(158,650)
Redirects	(3,971,985)	(992,996.25)	(519,840)	473,156
Revenue over/(under) expenses	\$ (1,855,543)	\$ (463,886)	\$ (123,917)	\$ 339,969
Total Non PIHP Sources	2025 Budget	YTD Budget	2025 Actual	Over (Under)
Revenue	\$ 5,768,354	\$ 1,442,089	\$ 1,174,095	\$ (267,994)
Expense	7,623,897	1,905,974	1,298,012	(607,962)
CCBHC Retain as local	2,092,751	523,188	480,152	(43,035)
Revenue over/(under) expenses	\$ 237,208	\$ 59,302	\$ 356,235	\$ 296,933

BASIC FINANCIAL STATEMENTS

MONROE CMH

Statement of Position

October 1, 2024 through December 31, 2024

	December 31 Balance	Balance September 30 2024	Over (Under)
ASSETS & DEFERRED OUTFLOWS			
Current:			
Cash and cash equivalents	\$ 10,081,298	\$ 5,602,890	\$ 4,478,408
Accounts receivable, net	691,827	739,020	(47,193)
Due from PIHP	3,398,871	6,107,748	(2,708,877)
Due from State of Michigan	218,873	150,602	68,271
Due from other governmental units	63,664	327,297	(263,633)
Prepaid items	274,514	268,264	6,250
Total current	14,729,047	13,195,821	1,533,226
Noncurrent:			
Capital assets not being depreciated	47,000	47,000	-
Capital assets being depreciated, net	1,846,693	1,795,086	51,607
Deferred outflows - Pension & OPEB	2,069,826	2,069,826	-
Total noncurrent	3,963,519	3,911,912	51,607
Total assets and deferred outflows	18,692,566	17,107,734	1,584,832
LIABILITIES & DEFERRED INFLOWS			
Current			
Accounts payable	4,109,082	5,622,038	(1,512,956)
Accrued liabilities	3,150,735	373,821	2,776,914
Due to State of Michigan	450,627	450,627	-
Unearned revenue	-	0	(0)
Long-term debt, due within one year	-	-	-
Compensated absences, due within one year	49,458	49,458	-
Total current liabilities	7,759,902	6,495,944	1,263,958
Noncurrent			
Long-term debt, due beyond one year	839,117	839,117	0
Compensated absences, due beyond one year	312,600	312,600	(0)
Lease liability	155,837	155,837	0
Net pension liability	4,065,865	4,065,865	-
Net OPEB liability	(960,893)	(960,893)	-
Deferred inflows - leases	27,586	27,586	(0)
Deferred inflows - Pension/OPEB	3,780,722	3,780,722	(0)
Total noncurrent liabilities	8,220,834	8,220,835	(1)
Total liabilities and deferred inflows	15,980,736	14,716,779	1,263,957
NET POSITION			
Net investment in capital assets	1,710,270	1,658,664	(51,606)
Unrestricted	1,001,560	921,833	(79,727)
Total net position	\$ 2,711,830	\$ 2,580,497	\$ 131,333

MONROE CMH

Statement of Activities

October 1, 2024 through December 31, 2024

	Mental Health YTD	Projected Annual Activities	Prior Year Total Activities	Over (Under)
Operating revenue				
Capitation:				
Medicaid	\$ 11,184,839	\$ 44,739,356	\$ 41,723,255	\$ 3,016,101
Medicaid - Settlement	(263,816)	(1,055,264)	-	(1,055,264)
Healthy Michigan	914,760	3,659,040	2,860,301	798,739
Healthy Michigan - Settlement	(59,288)	(237,152)	-	(237,152)
CCBHC	2,069,153	8,276,612	7,655,612	621,000
CCBHC - Settlement	512,112	2,048,448	-	2,048,448
Behavior Health Home	65,203	260,812	304,177	(43,365)
State General Funds	432,496	1,729,984	1,625,736	104,248
State General Funds - Carryover	-	-	-	-
County appropriations	166,301	665,204	997,803	(332,599)
Charges for services	11,671	46,684	174,511	(127,827)
Other grants	273,534	1,094,136	1,339,557	(245,421)
Other revenue	336,673	1,346,692	556,807	789,885
Total operating revenue	15,643,638	62,574,552	57,237,758	5,336,794
Operating expenses				
Administration				
Salaries	494,511	1,978,044	2,090,165	(112,121)
Benefits	381,718	1,526,872	1,789,006	(262,134)
Other	532,310	2,129,240	2,789,826	(660,586)
Internal Services				
Salaries	1,505,020	6,020,080	6,326,157	(306,077)
Benefits	1,261,026	5,044,104	5,044,104	-
Other	507,009	2,028,036	2,175,324	(147,288)
Provider Network Services	9,885,339	39,541,356	32,493,556	7,047,800
Facility costs	176,998	707,992	727,183	(19,191)
Vehicle costs	21,464	85,856	116,021	(30,165)
Grant expenses	453,834	1,815,336	1,666,693	148,643
Room & Board	103,146	412,584	158,472	254,112
GASB 68 & 75 Adjustment	-	-	(6,521,945)	6,521,945
Total operating expenses	15,322,375	61,289,500	48,854,562	12,434,938
Change in net position	321,263	1,285,052	8,383,195	\$ (7,098,143)
Net position, beginning of year	2,390,567	2,390,567	(5,802,698)	
Net position, end of year	\$ 2,711,830	\$ 3,675,619	\$ 2,580,497	

MONROE CMH

Statement of Activities

Mental Health - Budget to Actual

October 1, 2024 through December 31, 2024

	Annual Budget	YTD Budget	YTD Actual	Over (Under) YTD Budget
Operating revenue				
Capitation:				
Medicaid	\$ 44,657,457	\$ 11,164,364	\$ 11,184,839	\$ 20,475
Medicaid - Settlement	-	-	(263,816)	(263,816)
Healthy Michigan	3,659,040	914,760	914,760	-
Healthy Michigan - Settlement	-	-	(59,288)	(59,288)
CCBHC	8,624,000	2,156,000	2,069,153	(86,847)
CCBHC - Settlement	-	-	512,112	512,112
Behavior Health Home	376,937	94,234	65,203	(29,031)
State General Funds	1,634,610	408,653	432,496	23,844
State General Funds - Carryover	-	-	-	-
County appropriations	997,803	249,451	166,301	(83,150)
Charges for services	47,247	11,812	11,671	(141)
Other grants	1,540,594	385,149	273,534	(111,615)
Other revenue	194,312	48,578	336,673	288,095
Total operating revenue	61,732,000	15,433,000	15,643,638	210,638
Operating expenses				
Administration				
Salaries	2,304,421	576,105	494,511	(81,594)
Benefits	4,511,186	1,127,797	381,718	(746,079)
Other	2,696,140	674,035	532,310	(141,725)
Internal Services				
Salaries	8,550,222	2,137,556	1,505,020	(632,536)
Benefits	3,107,517	776,879	1,261,026	484,147
Other	1,796,182	449,046	507,009	57,963
Provider Network Services	35,738,574	8,934,644	9,885,339	950,695
Facility costs	1,248,821	312,205	176,998	(135,207)
Vehicle costs	54,322	13,580	21,464	7,884
Grant expenses	1,984,628	496,157	453,834	(42,323)
Other expenses	-	-	-	-
Room & Board	776,755	194,189	103,146	(91,043)
Total operating expenses	62,768,767	15,692,192	15,322,375	(369,817)
Change in net position	(1,036,768)	(259,192)	321,263	580,455
Net position, beginning of year	2,390,567	2,390,567	2,390,567	-
Net position, end of year	\$ 1,353,799	\$ 2,131,375	\$ 2,711,830	\$ 580,455



REVIEW AND APPROVAL / February 19, 2025

Local (MCMHA) and Regional (CMHPSM) Policy, Procedure, and Exhibits

Executive Summary:

- There is one local policy, and one procedure. There are no regional policies.
- This document serves as an Executive Summary of the policies for review and approval at the February 19, 2025 Board Meeting.

LOCAL: Policy, Procedure, and Exhibits	Reason for Revision	Summary
HR4021 Nepotism Policy	3-Year Review	<p><u>Purpose:</u> The purpose of this policy is to establish procedures regarding the employment of relatives at Monroe Community Mental Health Authority.</p> <p><u>Policy:</u> A. Monroe Community Mental Health Authority permits the employment of a qualified relative of an employee, provided neither person is employed in a capacity or circumstance such that one person's terms and conditions of employment (e.g. work responsibility, salary, career progress, etc.) can be influenced by the other person. In employing relatives, the Authority also reserves the right to prohibit relatives from working together in the same or overlapping departments where it deems that such a situation may present a conflict of interest (e.g. a requirement to report a rights violation on a relative).</p> <p>B. The circumstances involved in the employment or anticipated employment of a relative of an employee must be reviewed and approved, in writing, by the Chief Executive Officer. This review and approval must occur prior to the employment of the relative for new hires. If employees become relatives after the employees have already been hired, then the review and approval must occur within thirty (30) days of Monroe Community Mental Health Authority learning that the employees are, in fact, relatives. Thereafter, all changes in the employment of a relatives must be similarly reviewed and approved, in writing, prior to the change becoming effective.</p> <p><u>Significant Changes:</u> Revised the definition of relative, extending it to aunt, uncle, niece, and nephew.</p>
HR4021-P1 Nepotism Procedure	3-Year Review	<p><u>Significant Changes:</u> Language change from Executive Director to Chief Executive Officer.</p>

CEO REPORT

February 19, 2025

QUALITY WORKFORCE

Medical Director: MCMHA hosted a candidate for Medical Director at our building on 2/14, where she also participated in a second interview with PHS staff.

Finance: MCMHA's Claims and Billing Specialist position is currently vacant and being temporarily filled by an employee of Rehmann at an additional cost of approximately \$3000/month. MCMHA continues to advertise for this position.

Staff Education: An All-Staff meeting was held earlier this month to roll out the FY2025-2027 Strategic Plan and the Non-Medicaid initiative.

SERVICES PROMOTE RECOVERY

SUD Screening & Referral Services: MCMHA's Access Team met regional compliance standards for Priority Populations for the month of January.

Behavioral Health Urgent Care: MCMHA leadership continues planning for BHUC, which will open no later than 10/1/25. At this point, ProMedica and Catholic Charities are our primary partners.

Request for Information (RFI): MCMHA is seeking providers who are interested in developing a five-bed group home. The RFI will be posted in March.

CONSUMER VOICE INFORMS DECISION MAKING

Consumer Advisory Council (CAC): CAC has been asked to review and provide feedback on a consumer satisfaction survey tool used with SUD populations.

Performance Improvement Committees: MCMHA leadership is seeking consumers to serve on internal PI committees.

COMMUNITY AWARENESS/PARTNERSHIPS

Veterans' Services: MCMHA is partnering with local veterans' organizations to promote and host a Suicide Awareness, with Special Emphasis on Veterans, which will be held on Saturday, March 15, 12-4.

Bedford Business Fair: MCMHA will have a table at the Bedford Business Fair on Saturday, March 15. We are still in need of volunteers for this event.

Crisis Mobile: When co-responding with law enforcement, MCMHA Crisis Mobile team will begin wearing vests that identify them as MCMHA staff. This change in policy is a result of feedback from law enforcement/public safety partners.

Respectfully Submitted,



Lisa Graham, CEO