



# MONROE COMMUNITY MENTAL HEALTH AUTHORITY

## BOARD MEETING

June 24, 2026 – 6:00 p.m. / Aspen Room

Draft 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.

	<b><u>GUIDE</u></b>
<b>I. CALL TO ORDER</b>	<b>01 min</b>
<b>II. ROLL CALL</b>	<b>02 min</b>
<b>III. PLEDGE OF ALLEGIANCE</b>	<b>02 min</b>
<b>IV. CONSIDERATION TO ADOPT THE AGENDA AS PRESENTED</b>	<b>02 min</b>
<b>V. CONSIDERATION TO APPROVE THE MINUTES FROM THE MAY 27, 2026 BOARD MEETING AND WAIVE THE READING THEREOF</b>	<b>02 min</b>
<b>VI. PUBLIC COMMENTS</b>	<b>03 min/Person</b>
<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>	
<b>VII. ITEMS FROM THE BOARD CHAIR</b>	<b>10 min</b>
a. Executive Committee	
b. Correspondence	
c. Board Committee Sign Up	
d. Questions during presentations should be relevant and not jumping ahead	
<b>VIII. ITEMS FROM THE CHIEF EXECUTIVE OFFICER</b>	<b>10 min</b>
a. Chief Executive Officer’s Report – Crystal Palmer	
<b>IX. RELATIONSHIP WITH THE REGION, COUNTY, AND OTHERS</b>	<b>05 min</b>
a. Regional PIHP Board Meeting Minutes – June 10, 2026	
b. CMHAM Policy and Legislation Committee Report – Rebecca Pasko	

<b>X.</b>	<b>BOARD COMMITTEE MINUTES</b>	<b>02 min</b>
	a. Business Operations	
	b. Bylaws & Policy	
	c. Community Relations	
	d. Performance Evaluation	
<b>XI.</b>	<b>PRESENTATIONS</b>	<b>40 min</b>
	a. FY2026 2 <sup>nd</sup> Quarter Human Resource Report – Jim Brown	
	b. Finance Report – Amy Rottman	
<b>XII.</b>	<b>UNFINISHED BUSINESS</b>	<b>00 min</b>
	a. No unfinished business for May	
<b>XIII.</b>	<b>NEW BUSINESS</b>	<b>10 min</b>
	a. Service Contracts – Alicia Riggs	
	i. <b>Consideration to Approve the Service Contracts as Presented</b>	
	b. Administrative Contracts – Alicia Riggs	
	i. <b>Consideration to Approve the Administrative Contracts as Presented</b>	
	c. Regional Policy Executive Summary	
	i. <b>Consideration to Adopt the Regional Policies as Presented</b>	
<b>XIV.</b>	<b>PUBLIC COMMENTS</b>	<b>03 min/person</b>
<b>XV.</b>	<b>BOARD MEMBER ANNOUNCEMENTS</b>	<b>03 min/person</b>
<b>XVI.</b>	<b>ADJOURNMENT</b>	<b>01 min</b>

The next regularly scheduled meeting for the Monroe Community Mental Health Authority Board of Directors is **Wednesday, July 22, 2026** beginning at 6:00pm in the Aspen Room located at Monroe Community Mental Health Authority.

LG/dp, 2:18pm



**BOARD OF DIRECTORS REGULAR MEETING MINUTES  
May 27, 2026**

- Present:** Rebecca Pasko, Chairperson; John Burkardt, Vice Chairperson; Becca Curley, Secretary; John Cullen; Rob Calhoun; Reda Biniecki; Henry Lievens; Juanita Roscoe; LaMar Frederick; Doug Stevens; and Joan Canning
- Excused:** N/A
- Absent:** N/A
- Staff:** Lisa Graham
- Guests:** 4 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.

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

The items in the Board Packet were as presented on the amended agenda. Rebecca Pasko asked if there were any objections to the amended agenda. Hearing no objections, the amended agenda was approved by unanimous consent.

**V. CONSIDERATION TO APPROVE THE MINUTES FROM THE APRIL 22, 2026 BOARD MEETING AND WAIVE THE READING THEREOF**

The April 22, 2026 Board Meeting minutes were as presented in the Board Packet. Rebecca Pasko asked if there were any changes to minutes. Hearing no changes, the April 22, 2026 Board Meeting minutes were approved by unanimous consent.

**VI. PUBLIC COMMENTS**

There were no public comments.

**VII. OFFICER ELECTIONS FOR MCMHA BOARD**

The Nominating Committee announced that all board members were contacted regarding their interest in running for the office of Board Chairperson, Board Vice-Chairperson, and/or Board Secretary. The Nominating Committee acknowledged nominations for Rebecca Pasko in having interest as Board Chairperson; John Burkardt and Becca Curley in having interest as Board Vice-Chairperson; and Reda Biniecki in having interest as Board Secretary.

If one board member is running for an elected office, they shall be elected by acclimation.

Reda Biniecki moved; Henry Lievens supported. No debate followed. Rebecca Pasko asked if there were any objections for an election by acclimation. Hearing no objections, the Board adopted the election by acclimation if only one board member is running for office by a unanimous vote.

If two board members are running for an elected office, there will be a vote and board members can only vote once.

Rebecca Pasko, Board Chairperson, began the election of officers.

a. Board Chairperson

The Nominating Committee nominated Rebecca Pasko for Board Chairperson.

Rebecca Pasko accepted the nomination.

Rebecca Pasko asked if there were any nominations from the floor for Board Chairperson. Hearing no further nominations, nominations were closed.

The Board Chairperson declared Rebecca Pasko to be elected by acclimation as Board Chairperson.

Congratulations to Rebecca Pasko for being elected as Board Chairperson through May 2027.

b. Board Vice-Chairperson

The Nominating Committee nominated John Burkardt for Board Vice-Chairperson.

John Burkardt accepted the nomination.

The Nominating Committee nominated Becca Curley for Board Vice-Chairperson.

Becca Curley accepted the nomination.

Rebecca Pasko asked if there were any nominations from the floor for Board Vice-Chairperson. Hearing no further nominations, nominations were closed.

All in favor of electing John Burkardt as Board Vice-Chairperson. All in favor: Burkardt.

All in favor of electing Becca Curley as Board Vice-Chairperson. All in favor: Cullen, Calhoon, Biniecki, Lievens, Curley, Roscoe, Frederick, Stevens, and Canning.

The Board Chairperson declared Becca Curley as Board Vice-Chairperson.

Congratulations to Becca Curley for being elected as Board Vice-Chairperson through May 2027.

c. Board Secretary

The Nominating Committee nominated Reda Biniecki for Board Secretary.

Reda Biniecki accepted the nomination.

Rebecca Pasko asked if there were any nominations from the floor for Board Secretary. Hearing no further nominations, nominations were closed.

The Board Chairperson declared Reda Biniecki to be elected by acclamation as Board Secretary.

Congratulations to Reda Biniecki for being elected as Board Secretary through May 2027.

**VIII. RECOMMENDATION TO CMHPSM BOARD**

a. **Consideration to Recommend Appointment of Rebecca Pasko to the Community Mental Health Partnership of Southeast Michigan (CMHPSM) Board of Directors for the Term Beginning July 1, 2026 through June 30, 2029**

John Cullen moved; Reda Biniecki supported. No debate followed. Rebecca Pasko asked if there were any reasons not to recommend appointment. Hearing no objections, the Board recommended appointment of Rebecca Pasko to the Community Mental Health Partnership of Southeast Michigan (CMHPSM) Board of Directors for the Term beginning July 1, 2026 through June 30, 2029 by a unanimous vote.

**IX. ITEMS FROM THE BOARD CHAIR**

a. Executive Committee

- i. Becca Curley, Secretary, commented that the Executive Committee minutes were included in the Board Packet and asked if there were any questions. There were questions from the Board.

b. Correspondence

- i. Naomi Stoner resigned from the Board as of May 7, 2026.
- ii. The Monroe County Commissioners were alerted to begin the process of advertising for a vacant seat. The deadline for submitting a Board Application was May 22, 2027 and an appointment of a new board member will occur at their next regular meeting. The new board member will begin attending meetings in June.

c. Board Meeting Evaluation

- i. Requested for board members to begin leaving a comment on what it means if scoring a 3 or below in order to help address any concerns.

d. Appointments

- i. Appointment of Juanita Roscoe and Doug Stevens to the Community Relations Committee
- ii. Appointed Rob Calhoun to the Business Operations and Bylaws & Policy Committees

e. Presentations

- i. Board members that ask questions during presentations should be relevant and not jumping ahead.

**X. ITEMS FROM THE CHIEF EXECUTIVE OFFICER**

- a. Lisa Graham presented the Years of Service Awards and recognized the following staff for their commitments to the agency: Michelle Rangel, Crystal Palmer, and Brandon Meinhart for 5 years of service; Josh Hotaling, and Jane Morin for 10 years of service; and Ben Potts for 20 years of service. Their longevity, dedication, and commitment to Monroe CMH Authority is very appreciated. Lisa requested the Board to join her in celebrating their years of service. Board members thanked staff for their dedication.

- i. Lisa Graham added that Josh Hotaling was recently nominated by Sheriff Goodnough as “Clinician of the Year” through NAMI Michigan.
- b. Lisa Graham presented the CEO Report highlighting: RFP Update; Federal/State Medicaid Changes; Veterans Fair; and Upcoming events: CEO Coffee Hour, Tim Hortons in Lambertville 10-11am on May 28<sup>th</sup>; Mental Health Fun Day at 2/42 Community Church from 11-2pm on May 30<sup>th</sup>. The CEO Report was included in the packet for review.

**XI. RELATIONSHIP WITH THE REGION, COUNTY, AND OTHERS**

- a. Regional PIHP Board Meeting Minutes – Did not meet in May.
- b. CMHAM Policy and Legislation Committee Report – Did not meet in May.

**XII. BOARD COMMITTEES MINUTES**

Rebecca Pasko commented that this section of the agenda will be different this evening and moving forward to align with our governance policy. The expectation is for board members to read the minutes and have the opportunity to ask questions.

Rebecca Pasko asked if there were any questions for the following Board Committees:

- a. Business Operations
- b. Bylaws & Policy
- c. Community Relations
- d. Ends

There were no questions from the Board.

Reda Biniecki commented that she is excited to Chair the Community Relations Committee. It is a great way to share all the good things we do at Monroe CMH Authority. Reda welcomed board member ideas.

John Cullen commented that the committee completed the Ends Policies and recommended them to the Bylaws & Policy Committee. If there are any further changes the Ends Committee may need to meet again.

**XIII. PRESENTATIONS**

- a. **FY2026 2<sup>nd</sup> Quarter Clinical Report** – The Clinical Report was provided in the Board Packet for review. Lisa Graham presented an overview of the Clinical Executive Summary highlighting priorities under the Strategic Plan.
  - i. MCMHA continues to recruit and hire staff for current vacancies, which is 12. Some of these positions are being filled internally.
  - ii. There were 102 universal referrals made in Q1 and Q2. 69% received some type of follow-up, authorized services, etc. 0% declined any further intervention, and 31% MCMHA didn't have enough information for follow-up or received no response.
  - iii. Certified Peer Support Specialists (CPSS) continue to provide support at the ALCC. The CPSS did engage in four (4) programs/activities and zero (0) 1:1 meeting during February through April.
  - iv. Crisis Mobile was deployed 312 times in the first two quarters, which averaged 0.71 hours of face-to-face interaction time.
  - v. The average response time for Crisis Mobile was approximately 20.67 minutes, which is likely due to 57% of the calls from the 48161 and 48162 zip codes.
  - vi. There were multiple referral sources for Crisis Mobile; 72% were from the Monroe County Sheriff's Department and Monroe City Police; 18% were from Access Dept/CMH, and 7% were self-referral and 3% were from a school.

- vii. Enrollment for the CCBHC has increased by 19 members since last reported in February. This is a 0.98% increase in enrollment.
- viii. The Behavioral Health Urgent Care (BHUC) served 309 unique guests in the first two quarters of the fiscal year.
- ix. MCMHA has remained in compliance with priority population screening timeframe requirements with 87% of screenings over the past six months.
- x. MCMHA currently has 58 enrollees in the Behavioral Health Home program.
- xi. The data for incoming calls being answered is 97% for FY26, which meets MCMHA's goal of 98%.
- xii. Same Day Access has improved the average time to initial evaluation by 88% and improved 61% for average time to initial clinical services.
- xiii. MCMHA unanimously voted as "Supporter of the Year" by MCCC.

**b. FY2026 1<sup>st</sup> Quarter CCBHC Quality Metrics** – Sabrina Bergman provided a brief overview of the 1<sup>st</sup> Quarter CCBHC Quality Metrics. The metrics follow a calendar year, not a fiscal year. Four measures have improved. Sabrina highlighted: the SRA-C, Suicide Metric for Children, has increased over 50%; and two metrics within the I-SERV that we have struggled with has had significant improvement. The time from request of service to a BPS is now at 2.3 days. The time to get their first service is now 11.6 days. All the efforts that we put in place this last year are coming to fruition. Overall, we are doing well and are meeting our timeliness standards.

CCBHC Quality Performance Comparison – Sabrina provided a handout to provide comparisons on how MCMHA is doing against other CCBHCs in the state of Michigan. Even though this is old information, the biggest takeaway is that we were successful in 2024 with the 7 quality metrics and received a quality metric bonus.

Rebecca Pasko thanked Sabrina and commented "excellent improvement".

**c. Finance Report**

- i. Amy Rottman presented the March Financial Report and provided monthly highlights:
  - 1. Statement of Position: Cash in the bank is \$20,296,023.
  - 2. Estimated surplus (due back to the PIHP) is \$1,786,003.
  - 3. Estimated surplus from CCBHC Medicaid Operations is \$1,755,910.
  - 4. Estimated deficit from CCBHC non-Medicaid operations \$1,394,649.
  - 5. Estimated deficit from other General Fund spend is \$471,612.
  - 6. Total estimated fund balance addition is \$66,316.
- ii. There are quality bonus payments that are related to the CCBHC metrics. Those come in the summer, and they are not reflected in tonight's finance report. We typically get those payments in June/July, which will help offset the costs.
- iii. Overall, we are doing very well in delivering the required services and managing within budget.

**XIV. UNFINISHED BUSINESS**

- a. No unfinished business for April.

**XIII. NEW BUSINESS**

- a. Board Action Request: JPMorgan Chase Bank – When Rehmann took over, bank accounts were set up with Richard Carpenter, Chief Financial Officer, and Lisa Graham, Chief Executive Officer as Authorized Representatives. Ken Melvin, Deputy Chief Financial Officer oversees the day-to-day operations, and the request is for Ken Melvin to be an additional Authorized Representative for new and existing accounts.
  - i. **Consideration to Approve Ken Melvin, Deputy Chief Financial Officer as an Authorized Representative for all Existing and New Accounts through JPMorgan Chase Bank Effective May 27, 2026**

Becca Curley moved; Juanita Roscoe supported. Debate followed. Rebecca Pasko asked if there were any objections to approve Ken Melvin as an Authorized Representative. Hearing no objections, the Board approved Ken Melvin, Deputy Chief Financial Officer as an Authorized Representative for all existing and new accounts through JPMorgan Chase Bank effective May 27, 2026 by a unanimous vote.

b. Regional Policy Executive Summary – Included in the Board Packet for review.

**i. Consideration to Adopt the Regional Policies as Presented**

Becca Curley moved; Rob Calhoon supported. No debate followed. Rebecca Pasko asked if there were any objections to adopt the regional policies. Hearing no objections, the Board adopted the regional policies as presented by a unanimous vote.

**XIV. PUBLIC COMMENTS**

There were no public comments.

**XV. BOARD MEMBER ANNOUNCEMENTS**

Reda Biniacki commented on the 2026 News and Updates newsletter that had articles for May as Mental Health Month and on staff that work at MCMHA. It was really nice.

Dr. Jackson provided a handout on ranking motions to board members. There are 13 ranking motions. It is a handy, simple guide, that hopefully the Board will find useful.

Rebecca Pasko thanked everyone for attending the meeting and reminded the Board that tomorrow Lisa Graham will be at Tim Horton's for the CEO Coffee Hour and Saturday is Mental Health Fun Day. It is a nice time to see our consumers and community partners and encouraged board members to attend. The next meeting is Wednesday, June 24, 2026 at 6pm and on Wednesday, June 17, 2026 there is a CMH Financing 101 Workshop at 6pm. Ken Melvin will be providing the training and will continue to help us understand the financial reports.

**XVI. ADJOURNMENT**

John Burkardt adjourned the meeting at 7:16pm.

Submitted by,

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Becca Curley, Secretary

LG/dp  
5/28/26

# CEO REPORT

June 24, 2026

## LOCAL/REGIONAL/STATE UPDATES

**RFP Updates:** No updates on MDHHS' intention to release a new RFP.

**MiPLAN:** Board meeting held 6/18/26 to discuss future scenarios/planning. Next meeting scheduled 9/2/26. No updates.

**Strategic Planning/Budgeting:** MCMHA is in the process of developing the FY27-29 Strategic Plan and FY27 budget. Both documents will be finalized by the end of this fiscal year (9/30).

**Regional Update:** At the June meeting of the Community Mental Health Partnership of Southeast Michigan (CMHSPM/Region 6), the Board approved the distribution of Performance Based Incentive Program (PBIP) funding, after the completion of the region's Compliance Audit. MCMHA's share of the funding is approximately \$911,000.

**St. Joe's Center of Hope:** After considerable review and discussion with Catholic Charities leadership, MCMHA has made the decision to exercise our option to end our leased staff agreement with staff at St. Joe's Center of Hope, effective July 31, 2026. The Engagement Center is not producing the volume of services that allow MCMHA to break even on our costs. MCMHA has posted for two Peer Recovery Coach positions that will be direct hires. This means that Peer Recovery services will continue to be provided in Monroe County. MCMHA and Catholic Charities leadership are in ongoing conversation to assure a smooth transition and a plan to communicate this information to stakeholders. Catholic Charities has other grant funded programs that MCMHA is looking into assuming. I will keep the Board updated.

**Behavioral Health Urgent Care (BHUC):** MCMHA has hired a Nurse Practitioner to work full-time at our BHUC beginning mid-July. Up to this point, our Medical Director, Dr. Sadah, has provided psychiatric services on an as-needed basis. This position improves timeliness of response, coordination, and customer satisfaction.

## COMMUNITY PARTNERSHIPS/COMMUNITY AWARENESS

**Mental Health Fun Day:** MCMHA's 4<sup>th</sup> Annual Mental Health Fun Day was a success! Held at 2/42 Community Church, the event featured carnival style games, local human service agencies providing resources, a hot dog lunch, and prizes/donated gift baskets. Approximately 140 guests attended the event.

**Upcoming Community Events:** St. Mary's Park; CEO Coffee Hour, Tim Hortons in Monroe (Monroe St.), 10-11 on July 23.

Respectfully Submitted,



Lisa Graham, CEO

**COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEAST MICHIGAN  
REGULAR BOARD MEETING MINUTES  
June 10, 2026**

**Members Present for In-Person Quorum:** Judy Ackley, Rebecca Curley, LaMar Frederick, Bob King, Molly Welch Marahar, Rebecca Pasko, Mary Serio, Holly Terrill

**Members Not Present For In-Person Quorum:** Mary Pizzimenti, Alfreda Rooks, Annie Somerville, Ralph Tillotson, Andy Yurkanin

**Staff Present:**  
**PIHP staff:** Stephannie Weary, HR and Regional Coordinator; James Colaianne, Chief Executive Officer; Matt Berg, Chief Financial Officer; Callie Finzel, Quality Manager; Joelen Kersten, Substance Use services Clinical Director; CJ Witherow, Chief Operating Officer; Michelle Sucharski, Chief Information Officer; Stacy Pijawnoski, Regional Administrative Assistant  
**Regional staff:** Connie Conklin, Livingston CMHA Executive Director; Lisa Graham Monroe CMH Executive Director; Kathryn Szewczuk, Lenawee CMHA Executive Director; Trish Cortes, Washtenaw CMH Executive Director

**Guests Present:** Derek Miller, Roslund, Prestage & Company, P.C.

- I. Call to Order  
Meeting called to order at 6:06 p.m. by Board Vice-Chair J. Ackley.
- II. Roll Call
  - Quorum confirmed.
- III. Consideration to Adopt the Agenda as Presented  
**Motion by M. Welch Marahar, supported by H. Terrill, to approve the agenda  
Motion carried unanimously**
- IV. Consideration to Approve the Minutes of the April 8, 2026 Meeting and Waive the Reading Thereof  
**Motion by M. Welch Marahar, supported by M. Serio, to approve the minutes of the April 8, 2026 meeting and waive the reading thereof  
Motion carried unanimously**
- V. Audience Participation  
None
- VI. Audit Presentation  
Information: CMHPSM FY2025 Financial Audit Presentation
  - D. Miller shared the independent auditors report. The audit produced a clean opinion, which is the highest level of assurance Roslund Prestage is able to provide.
  - L. Frederick's questions:
    - Was sufficient research done to issue the clean opinion? D. Miller responded yes.
    - Did the auditors experience any challenges or issues while working with the finance department? D. Miller responded no.
  - D. Miller noted that CMHPSM does not have an IT disaster recovery plan in place and recommended that one be established.

**CMHPSM Mission Statement**

*Through effective partnerships, the CMHPSM shall ensure and support the provision of quality integrated care that focuses on improving the health and wellness of people living in our region.*

- J. Colaianne advised of the various plans that are in place individually but aren't currently contained in one global plan, including: the health record disaster plan and the GP Dynamic Financials disaster plan, both hosted off-site by vendors. CMHPSM's MMRMA insurance policy includes cyber insurance. A cohesive, global plan will be created.
- D. Miller suggested a binder that includes everything that needs to be done in case of an emergency.

VII. Old Business

- a. Board Information: CMHPSM Finance Reports
- M. Berg presented. Discussion followed.

VIII. New Business

- a. Action (Roll Call): Performance Based Incentive Program (PBIP) Distribution
- The Regional Operations Committee (ROC) and Regional Finance Committee agreed on a model for distribution.
  - The final numbers will be confirmed once the compliance audit is done.
  - The PBIP funds will act as local dollars for the CMHs and the PIHP.
  - Note about the table included in the Board Action Request:
    - The 'Total' column includes CCBHC dollars that are not included in the finalized totals.

**Motion by L. Frederick, supported by M. Welch Marahar, to authorize the CMHPSM CEO to distribute the FY2025 PBIP funds utilizing the methodology presented utilizing the final data from the FY2025 compliance audit when it is complete**  
**Motion carried unanimously**

Roll Call Vote

Yes: J. Ackley, R. Curley, L. Frederick, B. King, M. Welch Marahar R. Pasko, M. Serio, H. Terrill,

No:

Not present for in-person vote: M. Pizzimenti, A. Rooks, A. Somerville, R. Tillotson, A. Yurkanin

- b. Action: FY2026 MDHHS-PIHP Contract

- J. Colaianne noted that there has been discussion among some of the PIHPs regarding signing the FY2026 contract. A small amount of language was changed from the FY2025 contract. J. Colaianne recommends signing it.

**Motion by R. Curley, supported by M. Serio, to authorize the CMHPSM CEO to execute the MDHHS-PIHP FY2026 revenue contract**  
**Motion carried unanimously**

Roll Call Vote

Yes: J. Ackley, R. Curley, L. Frederick, B. King, M. Welch Marahar R. Pasko, M. Serio, H. Terrill,

No:

Not present for in-person vote: M. Pizzimenti, A. Rooks, A. Somerville, R. Tillotson, A. Yurkanin

- c. Information: Quality Assessment Performance Improvement Program (QAPIP) FY2026 Status Update

- The most significant change is the state's overhaul of the quality program. CMHPSM is data gathering and validation in preparation for the new measure.

**CMHPSM Mission Statement**

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- The Access measure remains. This measure documents the amount of time it takes for people seeking services to be seen initially and to access treatment.
- The state's plan is to move to national measures, such as HEDIS measures.
- L. Frederick questioned why the state changes the measures so often. C. Witherow advised that the state is moving toward national measures but have to do something in the interim.
- C. Finzel noted that the PIHP Quality program has an internal workgroup that examines all the measures that the state is putting out to gain an understanding and to prepare for the transformation that the state is making.
- R. Pasko reported that Monroe is doing really well the intake numbers, going from a very low number to 100% compliance.

d. Action (Roll Call): Oversight Policy Board (OPB) Bylaws Revision

- The OPB has been struggling to reach meeting quorums. The proposed revisions as presented:
  1. Remove language that requires at least 1 member from each county to be present to constitute a meeting quorum.
  2. Add language to Article IX – Financial Policies indicating that there will be no approved expenditures of PA2 funds without representation from the county in discussion.
- The OPB recommends OPB bylaws changes, and the Regional Board approves them.
- Then PIHP will send out the updated bylaws to each county.

**Motion by M. Serio, supported by M. Welch Marahar, to approve the CMHPSM Oversight Policy Board bylaws revisions as presented and to direct CMHPSM staff to notify the Board of Commissioners in each partner county as required in Article VII Section C.**

**Motion carried unanimously**

Roll Call Vote

Yes: J. Ackley, R. Curley, L. Frederick, B. King, M. Welch Marahar R. Pasko, M. Serio, H. Terrill,

No:

Not present for in-person vote: M. Pizzimenti, A. Rooks, A. Somerville, R. Tillotson, A. Yurkanin

IX. Reports to the CMHPSM Board

a. Information: CEO Report to the Board

- There was a FY27 rate-setting meeting this morning, but nothing of note as of yet. There was also some discussion about FY26 rate revisions, but there has been no movement as of yet.
- The annual employee engagement survey will be conducted in July. All data will be sent to board. Summary data will come to August board meeting.
- The Mental Health Framework that was going to move some mild to moderate cases to the Medicaid health plans has been pulled back, won't be implemented on 10/1/26.
- There are no updates on the RFP.
- The 3<sup>rd</sup> of 4 employee incentive payments will go out at the end of June.

Waskul Lawsuit Settlement

- Regarding the Waskul lawsuit settlement, CMHPSM received a corrected action plan (CAP) related to some ad hoc Washtenaw CMH reports that the state requested. The PIHP had submitted four reports with no feedback and then received the CAP. After meeting with the state to discuss the CAP, the state pulled back the initial CAP. The PIHP then received a revised CAP that clarified expectations. Washtenaw has worked

**CMHPSM Mission Statement**

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very hard to meet the new CAP requirements. There have been two submissions for the revised CAP; no feedback yet from the state.

- No other PIHPs have received a CAP related to Waskul settlement when this settlement is supposed to be statewide policy.

b. Information: SUD payment Oversight Policy Board

- The OPB discussed the bylaws changes that were recommended to the Regional Board, approved a PA2 request from Livingston CMH and received updates from staff.

X. Adjournment

**Motion by M. Welch Marahar, supported by M. Serio, to adjourn the meeting**

**Motion carried**

- The meeting was adjourned at 7:22 pm.

XI. Supplemental Materials

- a. Appendix A: FY2025 Financial Audit
- b. Appendix B: Board Attendance Tracking Sheet

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Mary Serio, CMHPSM Board Secretary

DRAFT



**BOARD BUSINESS OPERATIONS COMMITTEE**  
**Wednesday, June 3, 2026**  
**5:00pm**

**MAJOR COMMITTEE RESPONSIBILITIES**

- Review and monitor the Strategic Plan of the Authority as it relates to Business Operations and Administrative Support including Finances, Contracts, Facilities, Technology Infrastructure, and Customer Service.
- Review and make recommendations to the full Board regarding changes in Services, Contracts, and Budget.
- Monitor the organization's finances and strategies for managing overages and shortfalls.

**COMMITTEE MEMBERS**

LaMar Frederick, Chair; Rob Calhoon; John Cullen; Rebecca Curley; Reda Biniecki; and Rebecca Pasko (Ex-Officio)

**DRAFT MINUTES**

**I. CALL TO ORDER**

LaMar Frederick called the meeting to order at 5:00pm. LaMar Frederick, Reda Biniecki, Rob Calhoon, John Cullen, Becca Curley, Rebecca Pasko, and Lisa Graham were present.

**II. BUSINESS OPERATIONS**

a. Board Governance Policy Manual / Financial Policies

- i. The committee reviewed and amended Policy 2.3 Compensation and Benefits.
- ii. The committee reviewed and amended Policy 2.4 Financial Conditions and Activities.
  1. Lisa Graham will request feedback from Richard Carpenter on the following policies and report back to the committee:
    - a. 2.4.1.1. Allow the ratio of total asset over total liability to be less than 1.05:1 over a quarterly basis and for the year end projection within the current year.
    - b. 2.4.5. Allow tax payments or other government ordered payments of filings to be overdue or inaccurately filed.
  - iii. John Cullen recommended reporting a monthly metric in the finance report for months of operation in risk reserve.
  - iv. The committee will review all amended financial policies at their next meeting and make a recommendation to the Bylaws and Policy Committee.

b. Committee Schedule – July 1, 2026

- i. The committee did not discuss this topic. Due to the availability of committee membership, Lisa Graham will contact LaMar Frederick, committee chair, to discuss considering a rescheduled date in July or to cancel and resume the regular schedule beginning August 5, 2026.

**II. NEXT AGENDA**

- a. Review of all amended financial policies.

**III. PARKING LOT**

- a. Researching Millage and Additional Support from the County
- b. Chief Financial Officer
- c. Cash Flow with CCBHC and MDHHS

**IV. ADJOURNMENT**

The meeting adjourned at 6:07pm.

The next Business Operations Committee Meeting is scheduled for **Wednesday, July 1, 2026** beginning at 5:00pm in the Aspen Room.

Respectfully submitted,

*LaMar Frederick (fp)*

LaMar Frederick  
Committee Chair

6/4/26



**BOARD BYLAWS & POLICY COMMITTEE**  
**Wednesday, June 3, 2026**  
**6:00pm**

**MAJOR COMMITTEE RESPONSIBILITIES**

1. Monitor and maintain the Board Bylaws and Board Governance Policy Manual
2. Review Authority and Regional Policy, Procedures, and Exhibits
3. Make recommendations to the full Board

**COMMITTEE MEMBERS**

Becca Curley, Chair; John Burkardt, Rob Calhoun, John Cullen, Reda Biniecki, and Rebecca Pasko (Ex-Officio)

**DRAFT MINUTES**

**I. CALL TO ORDER**

Becca Curley called the meeting to order at 6:11pm. Becca Curley, Reda Biniecki, John Burkardt, Rob Calhoun, John Cullen, Rebecca Pasko, and Lisa Graham were present. Dr. Frances Jackson, Parliamentarian attended as a guest.

**II. COMMITTEE BUSINESS**

a. Regional Policies

<b>Policies:</b>	POC7084	Crisis Prevention Planning and Safety Planning
	FCM3030	Credentialing for Licensed Independent Providers Policy
	FCM3031	Employee Competency and Credentialing Policy
	FCM3039	Organizational Credentialing, Re-credentialing, and Monitoring Policy

The committee recommends the regional policies for adoption at the June 24, 2026 Board Meeting.

b. Committee Schedule – July 1, 2026

- i. The committee agreed by consensus to cancel the July 1, 2026 meeting due to availability of membership. The committee will resume its regular schedule beginning August 5, 2026.

**III. REVIEW OF BOARD BYLAWS AND GOVERNANCE POLICY MANUAL**

- a. The committee reviewed the location of the disciplinary process in the Board Governance Policy Manual.
  - i. Item 2.b.i.h. Offenses that Occur Outside a Meeting: for purposes of imposing discipline or hearing evidence against a member of the Board who is accused of behavior outside of a meeting, can the Board go into Closed Session and not violate the Open Meetings Act, and if so, does the accused have the right to say they want a Closed Session? Depending on written opinion, item 2.b.i.i. may need to be amended.
    - o Lisa Graham will follow up with Dykema and report back to the committee.
- b. The committee began the review of ARTICLE VII: Committees.
  - i. Dr. Jackson will provide information on how to add and remove committee members.

**IV. NEXT STEPS**

- a. Continue review of ARTICLE VII: Committees.
- b. Review legal written opinion on electronic meetings, once received.
- c. Continue review of Bylaws and Governance Policy Manual.

**V. PARKING LOT**

- a. Review of Board Bylaws
- b. Review of Board Governance Policy Manual

**VI. AJOURNMENT**

The meeting adjourned at 7:35pm.

**VII. NEXT MEETING**

The Next Meeting of the Board Bylaws & Policy Committee is scheduled for **Wednesday, August 5, 2026** at 6:00pm.

Respectfully submitted,

*Becca Curley (dp)*

Becca Curley  
Committee Chair

6/4/26



**BOARD COMMUNITY RELATIONS COMMITTEE**  
Wednesday, June 17, 2026  
5:00pm

**MAJOR COMMITTEE RESPONSIBILITIES**

1. To foster a trusting relationship between MCMHA and the community it serves.

**COMMITTEE MEMBERS**

Reda Biniiecki, Chair; Juanita Roscoe; Doug Stevens; Vacancy; Vacancy; and Rebecca Pasko (Ex-Officio)

**DRAFT MINUTES**

**I. CALL TO ORDER**

Reda Biniiecki called the meeting to order at 5:04pm. Reda Biniiecki, Doug Stevens, Rebecca Pasko, and Lisa Graham were present. Juanita Roscoe was excused.

**II. REVEL MARKETING / ADVERTISING**

- a. Website Ideas – Reda Biniiecki commented on the agency website feeling similar to government websites and that you have to read everything to figure out where to go. The information on the website is great and that wouldn't need to change but suggested considering something a little more interactive, different colors that has more of an eye appeal and for a way to find your way around the website easier for those that cannot read very well.
- b. Marketing / Budget – Lisa Graham provided a brief overview of Revel Marketing to the new members of the committee. CMH worked with Revel to refresh the agency website approximately 1.5 years ago, they have created one-page flyers, posters, rack cards, a new logo, and we did some rebranding as well. Revel came out and filmed our staff teams, created videos for our agency website and Facebook page for Community Coalition, Clubhouse, Crisis Mobile, and board members. Revel also developed the commercial that is currently running at the Phoenix Theatres promoting Behavioral Health Urgent Care (BHUC). We work with Revel on different things that continue to promote our agency and services in the community. This year, in the development of the Strategic Plan, Lisa Graham would like to set aside a marketing budget for advertising and phase 2 of the agency website. Phase 2 would allow people to schedule their appointments online, pay bills online, and have more interactive items. Also, now that we are a CCBHC, we want to promote the BHUC and consider a campaign specifically around the BHUC to make sure that people in the community are aware of this program.
  - i. Lisa Graham will contact Revel Marketing about presenting at a future Board Meeting on the impact the refreshed agency website, campaigns, and Facebook page have made since we have worked with them.

**III. COMMUNITY COALITION**

- a. The Community Coalition meets quarterly, and the next meeting is scheduled for July. Multiple human service organizations sit on the Community Coalition and give updates on what is happening in the community and in addition, CMH presents data for crisis mobile. The Community Coalition is a great opportunity for furthering community partnerships, collaboration, and sharing resources.
  - i. Lisa Graham will put together a list of all the community committees and work groups that CMH has a seat at the table.

**IV. MONROE COUNTY FAIR BOOTH THEME**

- a. Amber Ellerman, Customer Services, created a theme for this year's fair booth. The theme is "Stars and Stripes and Country Nights". At our booth, we will ask people what mental health means to them or for words of encouragement and write that onto the cut-out stars. The stars will then be collected and made into a collage that will be displayed in the agency lobby after the fair. That is one way to engage with the community. We are also considering a raffle where you would enter your name and email address to win a big prize. The email addresses would help CMH to engage with the community by connecting them to our agency website, CMH Newsletter, and Facebook page. Details will be finalized at the July meeting.

**V. TOWN HALL IN BEDFORD**

- a. Lisa Graham commented that we have not had a Town Hall in the Bedford area. We have discussed and considered having one in Bedford to gather more information from South County. Lisa will discuss with the Executive Leadership Team and the timing of the event.
  - i. Rebecca Pasko suggested advertising in the Bedford Press. Consider splitting consumer and community partner awards between the two Town Halls to draw more attendance.

**VI. WHAT'S UP?**

- a. July Events - CEO Coffee Hour is scheduled for July 23, 2026 from 10am-11am at Tim Hortons on Monroe Street; Auditors will present the FY2025 Year End financial statements at the July 22, 2026 Board Meeting; the Community Coalition meets July, 24, 2026; and CMH is currently working to get a booth to participate in the Pride Festival at St. Mary's Park at the end of July.
- b. September Events – Suicide Awareness Month; and there is an annual vigil in September. Lisa will provide more information when it becomes available.

- c. Rebecca Pasko suggested looking into the Mayfly Festival, Maybe Days, and Holiday Lights in Ida, to see if there could be participation at these events. Lisa Graham will work on preparing a list of the big events that happen in other communities and how CMH can get involved.
- d. October Events – CMH hosts a Town Hall and a Mental Health Summit. CMH is hoping to book the speaker from the recent NAMI Conference as the key-note speaker for the Mental Health Summit.
- e. Veterans Liaison - Lisa Graham and Rob Calhoon have been in contact with Wayne Blank and are working together on an event.
- f. Community Perception and Response Survey – Lisa Graham has been in contract with John Selleck regarding the community survey. At this time, the Board is not moving forward with a millage, however, the Board is interested in a community survey to see where CMH is strong, where we are weak, and that will help us on where to target future campaigns. Lisa would like to move forward with the community survey as that will help us with our Strategic Planning and target the amount of spending in the community. It can also help us to know if the community would benefit with additional access locations in Bedford and/or Newport.
  - i. Rebecca Pasko asked if it would be a conflict of interest in utilizing office space a few days a week where her office is located on Lewis Ave for an additional access location. Lisa Graham will look into this further.
- g. Raisinville Building – Lisa Graham commented that during the development of the bike path in front of the agency building, the large sign that contained information on all of the businesses next to us was taken down. Lisa asked the county if they would consider replacing a sign out front and if they'd considered an electronic sign. That would get people's attention and could advertise events, etc. We have always shared the sign with the other businesses next to us but we had a meeting and the only business that would like to consider using the electronic sign at times for advertising would be the MSU Extension. This is still in the discussion stage.
- h. Monroe Radio Spot – Reda Biniecki commented on getting information regarding a radio spot for CMH and will have more information at the July meeting.
- i. Policy – Reda Biniecki recently attended a Farm Bureau Board Meeting and questioned what they have in place for farmers and skill trades that struggle with mental health. In their policies they have a section that says they are in support of mental health awareness campaigns and training for first responders. We may want to consider having something similar in the Board Governance Policy Manual.

#### **VII. NEXT AGENDA**

- a. Finalization for Monroe County Fair Booth
- b. Community Perception and Response Survey Update
- c. Community Committees and Workgroups with CMH Presence
- d. Monroe Radio Spot Update

#### **VIII. PARKING LOT**

- a. Strategic Planning / Community Awareness Budget
- b. Community Perception and Response Survey
- c. Community Festivals / Participation
- d. Veterans Event
- e. Farmer and Skilled Trade Suicide Prevention
- f. Town Hall in Bedford
- g. Revel Marketing Impact Presentation at Board Meeting

#### **IX. AJOURNMENT**

The meeting adjourned at 5:56pm.

#### **X. NEXT MEETING**

The Next Meeting of the Community Relations Committee is scheduled for **Wednesday, July 15, 2026** at 5:00pm in the Aspen Room.

Respectfully submitted,

*Reda Biniecki (dp)*

Reda Biniecki  
Committee Chair

6/18/26



## BOARD PERFORMANCE EVALUATION COMMITTEE

Wednesday, June 3, 2026

4:00pm

### MAJOR COMMITTEE RESPONSIBILITIES

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

### COMMITTEE MEMBERS

Board Chair  
Board Vice-Chair  
Board Secretary  
Business Operations Chair  
Bylaws & Policy Chair  
Community Relations Chair

### DRAFT MINUTES

#### I. CALL TO ORDER

The meeting was called to order by Rebecca Pasko at 4:05pm. Rebecca Pasko, Becca Curley, Reda Biniecki, LaMar Frederick, and Lisa Graham were present.

#### II. FY2026 2<sup>nd</sup> Quarter Performance Evaluation of Chief Executive Officer (CEO)

- a. Lisa Graham presented an overview of 2<sup>nd</sup> quarter.
- b. Committee members provided feedback against the Strategic Plan for 2<sup>nd</sup> quarter.
- c. Overall summary: The committee met with Lisa Graham and provided a review of 2<sup>nd</sup> quarter against the Strategic Plan. The evaluation was favorable. The committee noted that Indicator #2 had significant improvement and are very pleased with 2<sup>nd</sup> quarter results. The committee recommends continuation of south county assessment.
  - i. LaMar Frederick recommended talking with the Senior Center in Bedford as part of the south county assessment. The Senior Center may have a space available and could solve two issues at once, outreach and services to south county.

#### III. NEXT STEPS

- a. The committee will meet in September for the evaluation of 3<sup>rd</sup> quarter, review of the CEO Contract, and bonus indicators for year two.

#### IV. PARKING LOT

- a. Sep – Review of CEO Contract
- b. Sep – Bonus Indicators for Year Two

#### V. ADJOURNMENT

The meeting adjourned at 5:03pm.

The next meeting of the Performance Evaluation Committee is scheduled for Wednesday, September 2, 2026 at 4:00pm in the Aspen Room.

Respectfully submitted,

*Rebecca Pasko (dp)*

Rebecca Pasko  
Performance Evaluation Committee Chair

6/4/26

# HUMAN RESOURCES REPORT

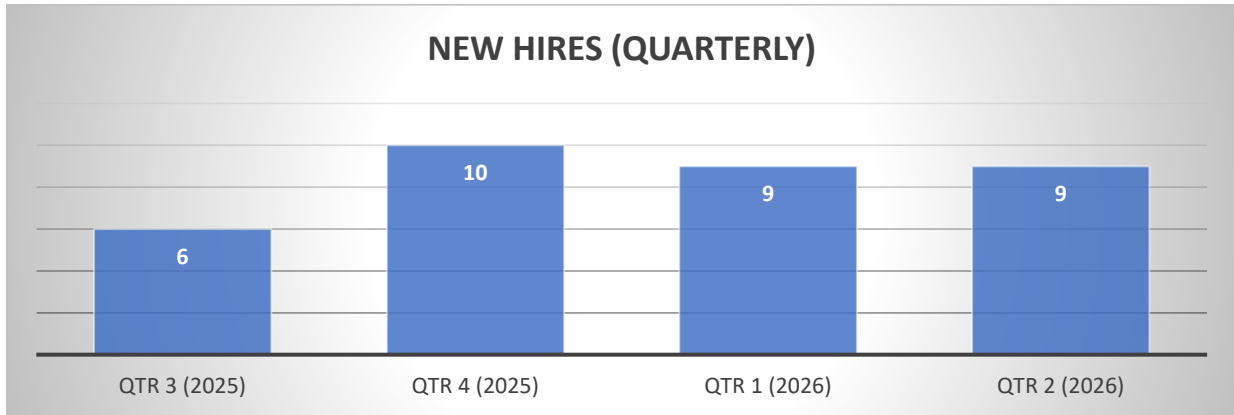
FY2026 2<sup>nd</sup> Quarter (Jan- Mar)

## STAFF

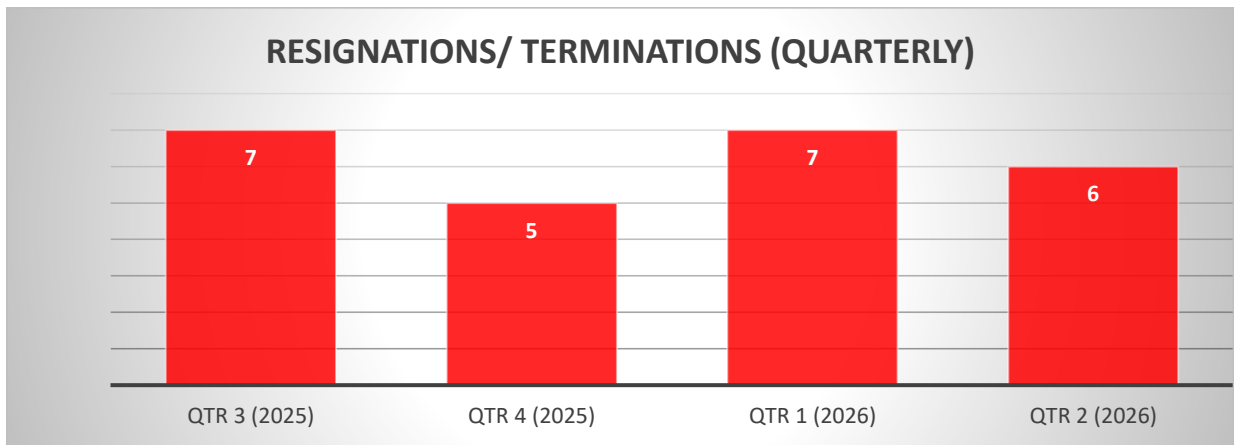
**Strategic Plan: Goal 1**

*Recruit and Retain Qualified Staff and Competent Provider Staffing that Meets the Needs of our Community*

### Hires



### Resignations/Terminations



### CURRENT VACANCIES (as of 06-12-26)

Position	Department	# Openings
Eval & Admission Specialist	Access	1
Youth Peer Support Specialist (PT)	Child & Family	1
Peer Support Specialist (PT)	MI Adult	2
SUD Jail Div Peer Support Specialist	Adult MI	1
Intensive Case Manager / Children's Therapist	Child & Family	1
Crisis Care Clinician	Access/ Crisis	1
Client Servies Manager	Adult MI	1
Peer Recovery Coach	Adult MI	1

## GRIEVANCES

Grievances Received (Q2)	0	Status: N/A
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## EXIT INTERVIEWS

Enterprise Results	Q1	Q2
Requested:	7	5
Completed:	5	3
Participation Rate: 74%		

## CORPORATE TRAINING

### 2<sup>nd</sup> Quarter Training Goals

Strengthening clinical competencies is essential to ensuring the delivery of high-quality care to the individuals we serve. Priority areas for development are determined through established MDHHS standards and other funding-source requirements, findings from peer-reviewed audits, and the ongoing identification of skill domains that warrant continued enhancement.

Continue to train all new staff and interns in the basic documentation, and clinical skills required as a clinician of MCMHA. This training is supportive with ensuring staff provide quality of care, feel confident in their roles at the agency, and ultimately improve our overall retention rates at the agency.

Clinical Specialty Trainings:

- Completion of Motivational Interview (MI) training that was started in Q1.
- V.A. SAVE training for clinicians
- CSSR-S (Columbia-Suicide Severity Rating Scale) Assessment training

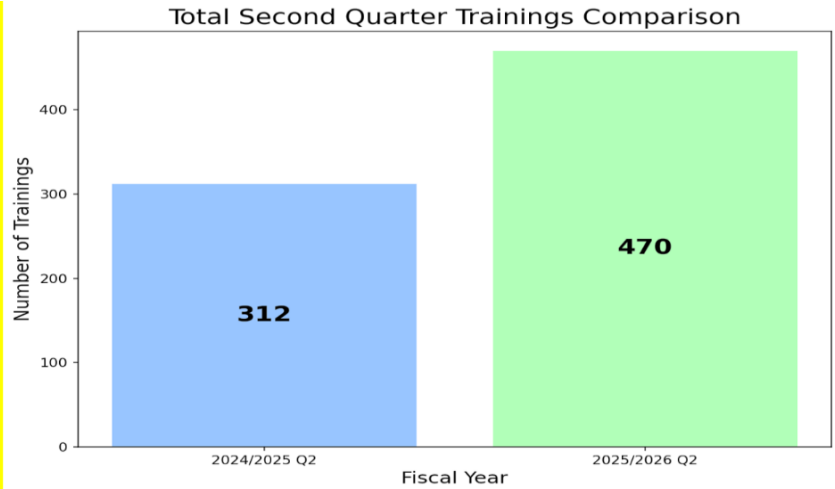
### Strategic Plan: Goal 3

*Serve as a Responsive and Reliable Community Partner*

## OTHER CLINICAL TRAININGS Q2

COURSE /TRAINING	INTERNAL STAFF	COMMUNITY MEMBERS
Mental Health First Aid	N/A	8
BPS	23	
CPI (certified)	39	64
CPI Booster (re-certified)	4	
QPR	19	
Engagement Workshop	6	
LOCUS II	N/A	
Overdose Prevention & Naloxone	33	
CAFAS Booster	1	
Clinical Department Training	271	
PECFAS	1	
PECFAS Booster	4	

## TOTAL Q2 TRAININGS COMPARISON:



## OVERALL, HOW SATISFIED ARE YOU WITH THE TRAINING YOU RECEIVED TODAY? 2025/2026 1<sup>ST</sup> & 2<sup>ND</sup> QTR

Very Satisfied	56.25%	<div style="width: 56.25%;"></div>	9
Somewhat Satisfied	25.00%	<div style="width: 25.00%;"></div>	4
Neutral	18.75%	<div style="width: 18.75%;"></div>	3
Somewhat Dissatisfied	0.00%	<div style="width: 0.00%;"></div>	0
Dissatisfied	0.00%	<div style="width: 0.00%;"></div>	0
Total Responses			16

## 3<sup>RD</sup> QUARTER PREVIEW

The Training Department continues to play a critical role in organizational success by increasing the number of employees trained and enhancing workforce capabilities. Sustained growth in participation highlights both the value of training programs and the department's ability to scale effectively.

Goals for the next quarter include support of our Zero-Suicide model with CALM (Counseling on Access to Lethal Means) training. Increased assessment through education on Psycho -Social Development, and improving compliance with focus on the Person -Centered Planning process refresher. Lastly, clinical supervisors will have a training that supports them in staff development through an adult learning model.

**Department Barriers:** Growth and development has exceeded manpower.

## COMPLIANCE DEPARTMENT

### 2<sup>ND</sup> Quarter:

- Continuation of the 2025 MDHHS 1915 (c) Waiver and BH 1915 (i) SPA site review required by the MDHHS contract.
- Continuation of the 2025 PIHP monitoring of delegated functions and contractual requirements per state and federal regulations.
- Completion of the 2025 MDHHS Annual Submission Report required by the Michigan Mental Health Code.
- Commencement of the MDHHS CMH Recertification process required by the Michigan Mental Health Code every three years.
- Completion of MDHHS MMBPIS performance indicator and BH Quality Transformation Metrics data cleaning, reporting, and analysis to evaluate clinical compliance and identify trends in performance.
- Commencement of weekly AI Implementation Workgroup to build prompts and test Clinically AI and Comply platforms.
- Completion of investigating and reporting suspected Medicaid fraud to the Office of Inspector General (OIG) and PIHP.
- Completion of critical incident and sentinel event reporting.
- Completion of mortality reviews of all consumer deaths.
- Completion of Medicaid and non-Medicaid service appeals (local) and hearings (state-level).
- Monitoring of Medicaid and non-Medicaid Adverse Benefit Determination (ABD) notices and CCBHC Negative Action Determination (NAD) notices.
- Completion of quarterly initial Utilization Management Utilization Review (UM/UR) and Grievance and Appeals for new staff.
- Monitoring of the clinical peer review program (a qualitative data analysis to evaluate clinical compliance and identify trends in performance).
- Monitoring and review of all subpoenas, court orders, and records requests to ensure compliance with HIPAA and 42 CFR Part 2 (SUD).
- Completion of retrospective review appeals for inpatient hospitalization.
- Regional representation of MCMHA on the Compliance Committee, Utilization Review Committee, Clinical Performance Team Committee, Credentialing Committee, and Behavioral Health Quality Transformation Workgroup.

# Health Insurance: Healia Health Presentation

Monroe CMHA began its partnership with Healia Health in August of 2023.

Healia Health is a benefits solution that helps employers significantly reduce healthcare costs by offering a specialized Health Reimbursement Arrangement (HRA) called the Total Care Option (TCO). The TCO allows employers to reimburse employees, spouses, and dependents for premiums and out-of-pocket medical expenses when they enroll in a spouse's employer-sponsored health plan instead of the employer's plan. This strategy lowers employer healthcare spending while often increasing the employee's total coverage.

## **What Healia Health Provides**

**Total Care Option (TCO):** A spousal HRA that reimburses premiums, deductibles, copays, coinsurance, and other eligible medical expenses for employees and dependents who choose a spouse's plan.

**AI-Powered Decision Support Tool:** Compares both spouses' plan options and identifies the lowest-cost, highest-value household coverage in under two minutes.

**Full Claims & Reimbursement Administration:** Healia manages plan documents, claims review, reimbursements, and employee support, reducing HR workload.

**Employee Financial Relief:** Families may receive up to 100% coverage and as much as \$26,000 in additional annual cost relief, depending on plan design and household needs.

## **How Healia Health Saves Employers Money**

**Removes High-Cost Family Enrollments:** Spouses and dependents are often the largest drivers of claims. Shifting them to a spouse's plan reduces employer exposure.

**Reduces Claims and Renewal Increases:** Fewer enrolled dependents lead to lower claims volume and more favorable annual premium renewals.

**Predictable, Capped Costs:** Employers replace unpredictable claims risk with a defined HRA reimbursement budget.

**High ROI:** Healia reports employers achieving up to 76% reduction in healthcare spending and 4x return on investment.

**Improved Employee Satisfaction:** Employees receive richer coverage with fewer out-of-pocket expenses, supporting retention and recruitment.

## **Why Employers Adopt the TCO**

Rising healthcare costs and high-cost dependent claims

Dual-income households with access to multiple employer plans

Need for predictable budgeting and compliance-friendly cost control

Desire to offer a competitive, high-value benefit without increasing premiums

## **Summary:**

Healia Health provides a cost-efficient, employee-friendly alternative to traditional dependent coverage.

By shifting eligible families to a spouse's plan and reimbursing their expenses through the TCO, employers can dramatically reduce healthcare spending while offering employees a more comprehensive and financially supportive benefit.

# Employee Impact vs. Employer Savings

Monroe CMHA + Healia Health (2025 Results)

## 1. Plan Decision-Making & Enrollment Optimization

Employee Impact	Employer Savings Impact
100% of employees who used the Decision Support Tool (DST) received a personalized recommendation.	Better plan alignment reduces unnecessary premium spend and dependent claims exposure.
Employees received recommendations in under 2.5 minutes, making it easy to choose the most affordable plan.	High DST engagement ensures employees select the lowest-cost plan for the organization as well.
When spouse plans were uploaded, 75% of employees saved money by choosing the spouse’s plan + TCO.	Shifting dependents to spouse plans reduces Monroe CMHA’s premium liability and claims risk.

“17 users... with 17 finishing the questionnaire and receiving a recommendation (100% completion rate).”

## 2. Out-of-Pocket Cost Relief for Employees

Employee Impact	Employer Savings Impact
Employees enrolled in the TCO receive reimbursements for premiums, deductibles, copays, and coinsurance.	Monroe CMHA replaces unpredictable claims with predictable, capped reimbursements.
Families experience significantly lower out-of-pocket costs throughout the year.	Lower dependent enrollment reduces annual premium increases and FIE exposure.
Fast, simple reimbursement process improves financial stability for families.	Efficient administration reduces HR workload and benefits-related support time.

Monroe CMHA paid **\$48,000** in reimbursements + fees to support employees’ medical expenses.

## 3. Financial Outcomes

Employee Impact	Employer Savings Impact
Employees avoid overpaying for coverage and receive direct financial support through the TCO.	Monroe CMHA avoided <b>\$256,600</b> in premiums/FIE in 2025.
Families benefit from optimized plan selection and reduced household healthcare costs.	Net rolling 12-month savings totaled <b>\$208,600</b> .
Employees gain access to richer, more predictable coverage options.	Monroe CMHA achieved a <b>10.6× ROI</b> on its investment in Healia.

“Rolling 12Mo Savings – \$208.6K” “ROI – 10.6”

## 4. Long-Term Program Momentum

Employee Impact	Employer Savings Impact
Growing trust and adoption—14 families enrolled in the TCO for 2026.	Increased participation amplifies savings year over year.
Employees gain confidence in the benefits program and feel supported in managing healthcare costs.	Projected 2026 savings: <b>\$221,612 net</b> , with <b>\$283,040</b> in avoided premiums.

“Monroe CMHA had 14 families enroll in the Total Care Option for plan year 2026.”

### Bottom Line

Employees save money through better plan choices, lower out-of-pocket costs, and direct reimbursements. The organization saves money through avoided premiums, reduced claims exposure, and predictable reimbursement costs.

The partnership with Healia Health delivers a **dual win: ✓ High-value, financially protective benefits for employees ✓ Substantial, measurable cost savings for Monroe CMHA**



healialia

Making healthcare more affordable

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# Employee usage

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# Decision Support Tool Conversion

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## Key takeaway:

During Open Enrollment, 17 users signed up for or returned to the Healia Decision Support Tool with 17 finishing the questionnaire and receiving a recommendation (100% completion rate).

Using Healia was quick and easy for Monroe CMHA's employees. Most new employees were able to receive a recommendation in under 2.5 minutes, which helped create high usage and strong conversion.

## DST Completion Rate

**100%** of Users got a recommendation

## Time from signup to recommendation

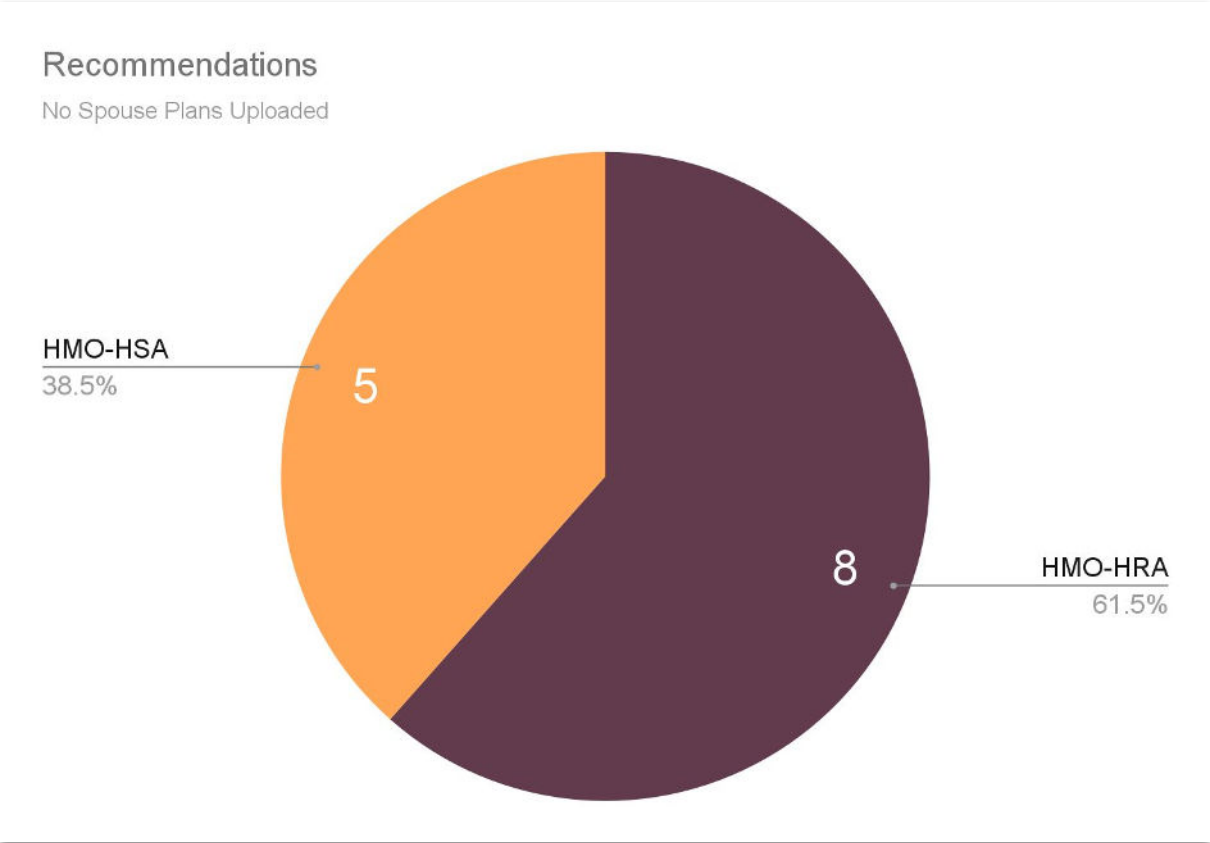
**100%** < 2.5 minutes

**100%** < 10 minutes

# Breakdown of recommendations

## Key takeaway:

When employees did not upload a spouse's plan, the HMO-HRA was the most affordable option in 62% of instances.\*

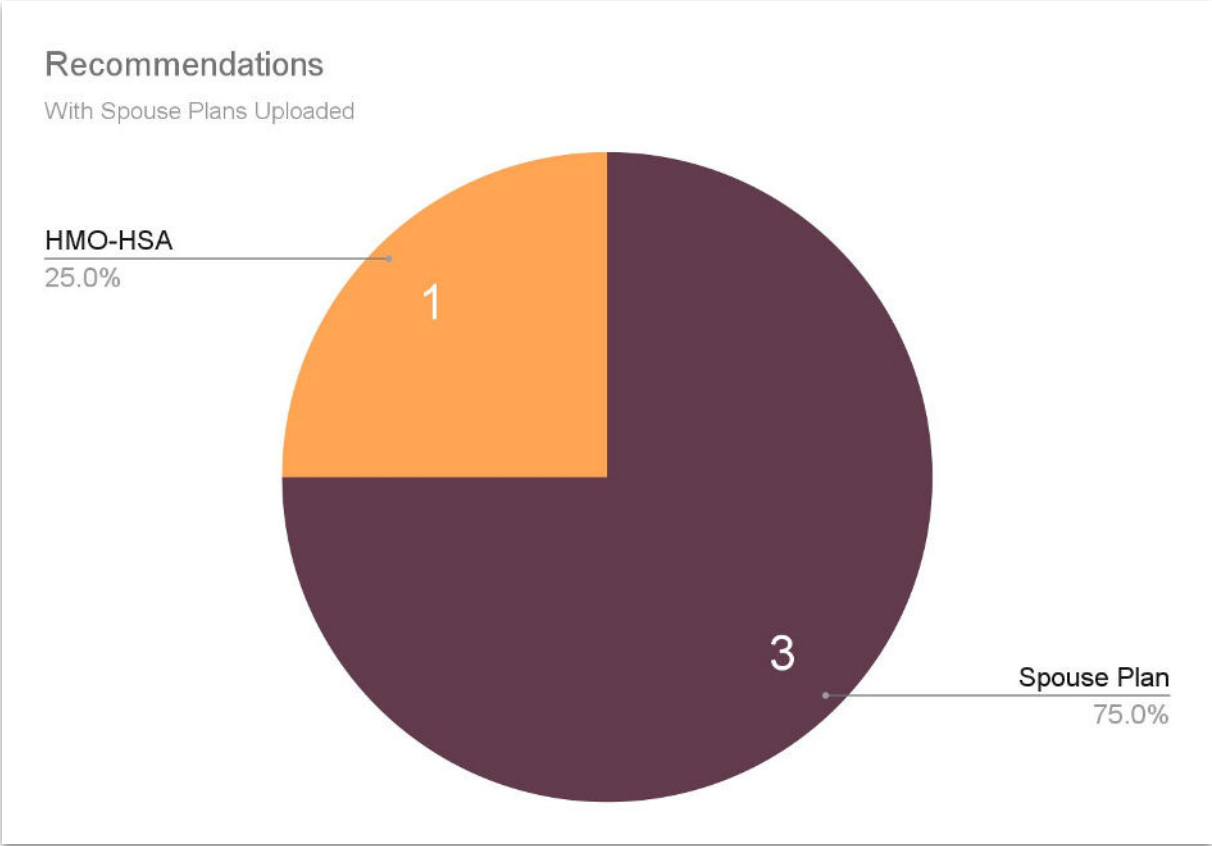


\*Data based on last recommendation generated by User. Users can generate multiple recommendations based on their projected usage.

# Breakdown of recommendations

## Key takeaway:

Notably, when employees did upload a spouse's plan, the spouse's plan combined with the TCO proved to be the optimal choice in 75% of instances.\*



\*Data based on last recommendation generated by User. Users can generate multiple recommendations based on their projected usage.

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# Savings + ROI

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# 2025 Results

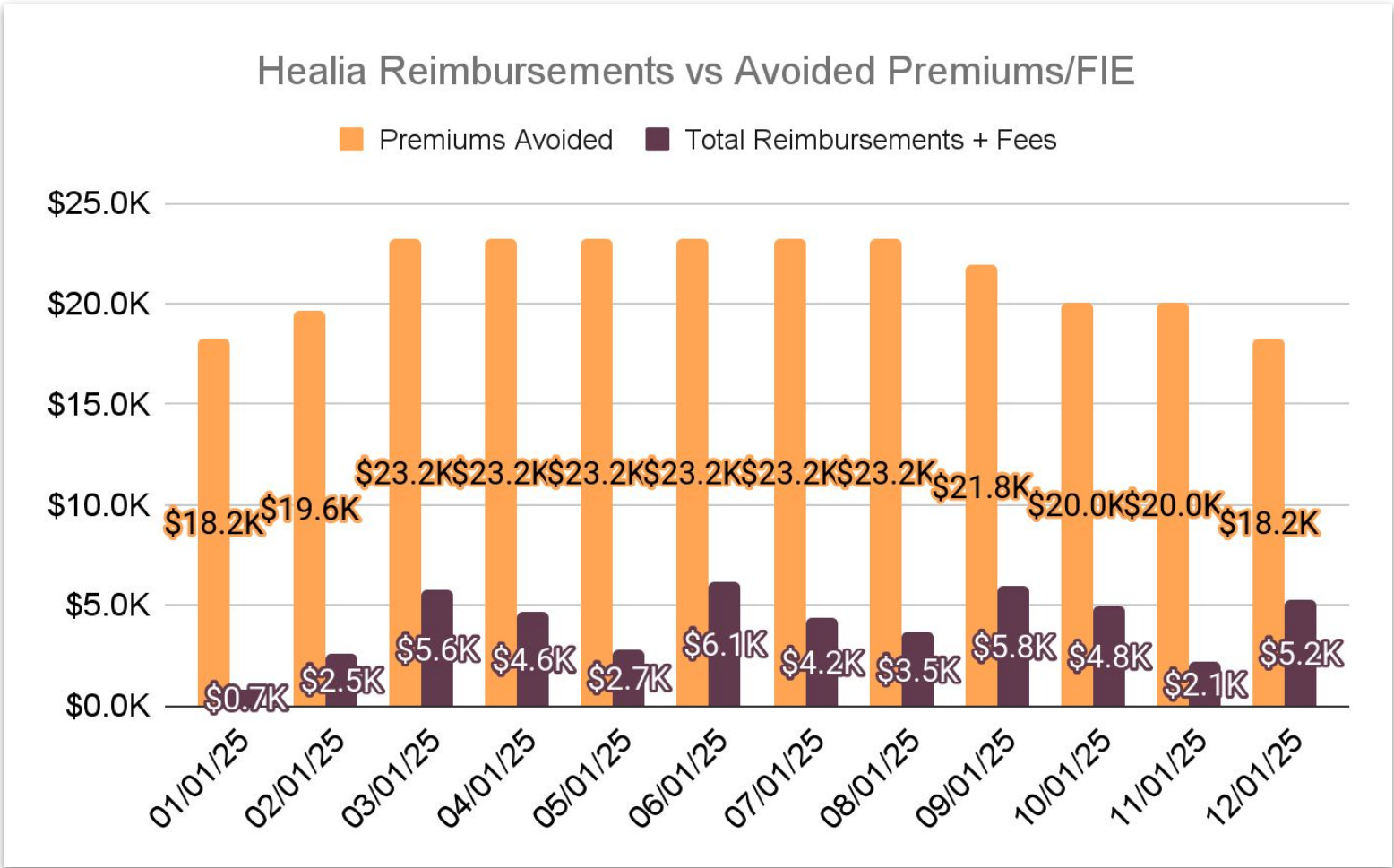
**Avoided Premiums/FIE** **\$256.6K**

**Total Reimbursements + Fees** **-\$48.0K**

**Rolling 12Mo Savings** **\$208.6K**

**Admin Fees** **\$19.6K**

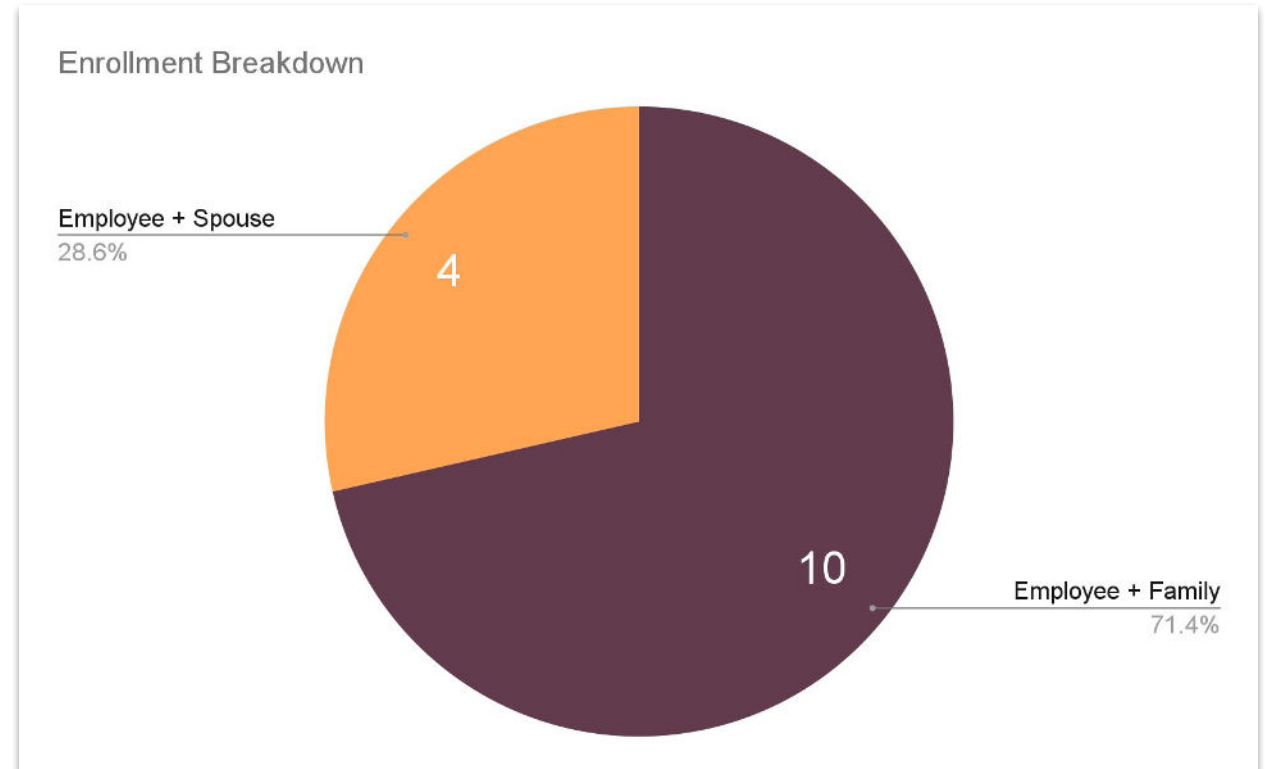
<b>ROI</b>	<b>10.6</b>
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# 2026 TCO Enrollment

## Key takeaway:

Monroe CMHA had 14 families enroll in the Total Care Option for plan year 2026. This shows continued momentum moving into year two.

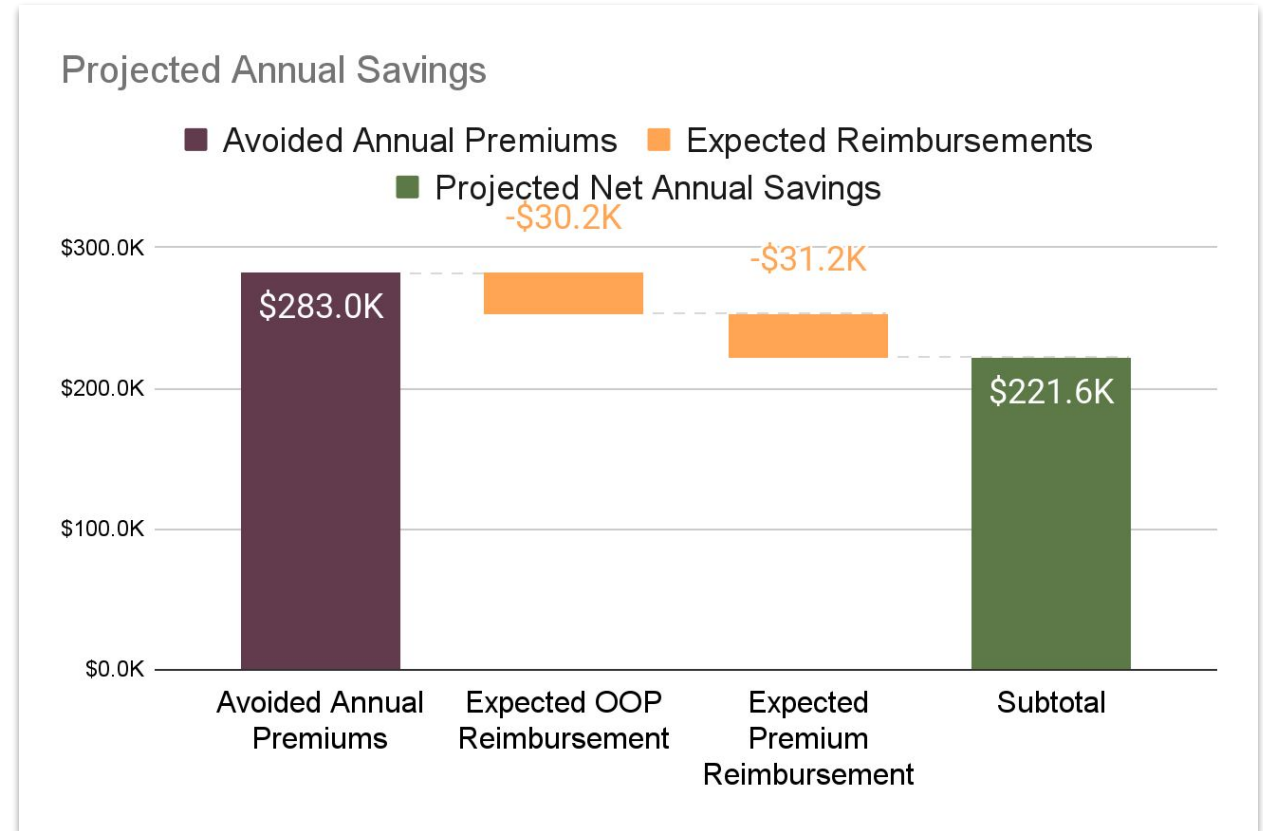


# TCO Company Savings

## Key takeaway:

The TCO is projected to help Monroe CMHA avoid \$283,040 in premiums for 2026. Monroe CMHA is projected to pay out \$61,428 in claims and premium reimbursements for a net savings of \$221,612.

This represents a 10.6x return on Monroe CMHA's investment in Healia (\$21,000 in annual admin fees).





MONROE  
COMMUNITY  
MENTAL  
HEALTH

April 2026

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

# MONROE CMH

April 2026

## Monthly Highlights

- Statement of Position - Cash in the bank is \$19,915,916.
- Estimated surplus (due back to PIHP) is \$2,505,795.
- Estimated surplus from CCBHC Medicaid operations is \$2,193,272.
- Estimated deficit from CCBHC non-Medicaid operations is \$1,490,962.
- Estimated deficit from other General Fund spend is \$579,548.
- Total estimated fund balance addition is \$280,165.

## **BASIC FINANCIAL STATEMENTS**

For internal use only. These financial statements have not been audited, and no assurance is provided.

# MONROE CMH

## Statement of Position

October 1, 2025 through April 30, 2026

	April 30 Balance	Balance September 30 2025	Over (Under)
<b>ASSETS &amp; DEFERRED OUTFLOWS</b>			
Current:			
Cash and cash equivalents	\$ 19,915,916	\$ 17,085,383	\$ 2,830,533
Accounts receivable, net	2,888,757	624,002	2,264,755
Due from PIHP	3,875,565	5,309,685	(1,434,120)
Due from State of Michigan	39,077	132,810	(93,733)
Due from other governmental units	39,522	296,723	(257,201)
Prepaid items	307,042	442,258	(135,216)
<b>Total current</b>	<b>27,065,879</b>	<b>23,890,860</b>	<b>3,175,019</b>
Noncurrent:			
Capital assets not being depreciated	47,000	47,000	-
Capital assets being depreciated, net	2,971,174	2,922,208	48,966
Deferred outflows - Pension & OPEB	1,390,554	1,390,554	0
<b>Total noncurrent</b>	<b>4,408,728</b>	<b>4,359,762</b>	<b>48,966</b>
<b>Total assets and deferred outflows</b>	<b>31,474,607</b>	<b>28,250,622</b>	<b>3,223,985</b>
<b>LIABILITIES &amp; DEFERRED INFLOWS</b>			
Current			
Accounts payable	4,251,162	6,106,655	(1,855,493)
Accrued liabilities	2,701,504	6,142,365	(3,440,861)
Due to State of Michigan	12,420,190	4,182,573	8,237,617
Unearned revenue	-	0	(0)
Long-term debt, due within one year	-	-	-
Compensated absences, due within one year	49,458	49,458	-
<b>Total current liabilities</b>	<b>19,422,314</b>	<b>16,481,051</b>	<b>2,941,263</b>
Noncurrent			
Long-term debt, due beyond one year	569,781	569,781	(0)
Compensated absences, due beyond one year	427,876	427,876	(0)
Lease liability	1,336,526	1,336,526	0
Net pension liability	2,696,347	2,696,347	-
Net OPEB liability (asset)	(4,717,393)	(4,717,393)	(0)
Deferred inflows - leases	108,815	108,815	0
Deferred inflows - Pension/OPEB	3,779,005	3,779,005	(0)
<b>Total noncurrent liabilities</b>	<b>4,200,957</b>	<b>4,200,957</b>	<b>(0)</b>
<b>Total liabilities and deferred inflows</b>	<b>23,623,271</b>	<b>20,682,009</b>	<b>2,941,263</b>
<b>NET POSITION</b>			
Net investment in capital assets	1,572,833	1,523,868	(48,965)
Unrestricted	6,278,503	5,818,527	(459,976)
<b>Total net position</b>	<b>\$ 7,851,336</b>	<b>\$ 7,342,395</b>	<b>\$ 508,941</b>

For internal use only. These financial statements have not been audited, and no assurance is provided.

# MONROE CMH

## Statement of Activities

October 1, 2025 through April 30, 2026

	Mental Health YTD	Projected Annual Activities	Prior Year Total Activities	Over (Under)
<b>Operating revenue</b>				
Capitation:				
Medicaid	\$ 26,002,582	\$ 44,575,855	\$ 46,931,913	\$ (2,356,058)
Medicaid - Settlement	(2,618,038)	(4,488,065)	(5,731,822)	1,243,757
Healthy Michigan	1,579,251	2,707,287	3,675,123	(967,836)
Healthy Michigan - Settlement	112,243	192,417	-	192,417
CCBHC	10,048,075	17,225,271	11,825,695	5,399,576
CCBHC - Settlement	-	-	-	-
Behavior Health Home	105,761	181,305	221,263	(39,959)
State General Funds	1,009,158	1,729,985	1,539,237	190,748
State General Funds - Carryover	-	-	-	-
County appropriations	582,052	997,803	997,803	0
Charges for services	302,941	519,327	311,039	208,289
Other grants	565,904	970,121	1,749,598	(779,477)
Other revenue	323,297	554,223	2,235,413	(1,681,190)
<b>Total operating revenue</b>	<b>38,013,226</b>	<b>65,165,530</b>	<b>63,755,262</b>	<b>1,410,268</b>
<b>Operating expenses</b>				
Administration				
Salaries	1,322,512	2,267,163	2,212,960	54,203
Benefits	799,280	1,370,194	2,904,325	(1,534,131)
Other	1,521,207	2,607,783	2,881,611	(273,827)
Internal Services				
Salaries	4,536,557	7,776,955	7,591,964	184,991
Benefits	2,228,427	3,820,161	3,820,161	-
Other	2,004,705	3,436,637	2,833,873	602,764
Provider Network Services	23,904,938	40,979,894	36,465,357	4,514,537
Facility costs	426,141	730,527	870,405	(139,878)
Vehicle costs	37,405	64,123	137,968	(73,845)
Grant expenses	656,090	1,124,726	1,215,749	(91,023)
Room & Board	274,047	469,795	399,131	70,664
GASB 68 & 75 Adjustment	-	-	(4,984,520)	4,984,520
<b>Total operating expenses</b>	<b>37,711,309</b>	<b>64,647,958</b>	<b>56,348,983</b>	<b>8,298,975</b>
Change in net position	301,917	517,572	7,406,279	\$ (6,888,707)
<b>Net position, beginning of year</b>	<b>7,549,419</b>	<b>7,549,419</b>	<b>(63,884)</b>	
<b>Net position, end of year</b>	<b>\$ 7,851,336</b>	<b>\$ 8,066,991</b>	<b>\$ 7,342,395</b>	

For internal use only. These financial statements have not been audited, and no assurance is provided.

# MONROE CMH

## Statement of Activities

Mental Health - Budget to Actual

October 1, 2025 through April 30, 2026

	Annual Budget	YTD Budget	YTD Actual	Over (Under) YTD Budget
<b>Operating revenue</b>				
Capitation:				
Medicaid	\$ 43,747,009	\$ 25,519,089	\$ 26,002,582	\$ 483,493
Medicaid - Settlement	(5,143,474)	(3,000,360)	(2,618,038)	382,322
Healthy Michigan	2,707,287	1,579,251	1,579,251	0
Healthy Michigan - Settlement	1,970,947	1,149,719	112,243	(1,037,476)
CCBHC	17,098,879	9,974,346	10,048,075	73,729
CCBHC - Settlement	-	-	-	-
Behavior Health Home	222,283	129,665	105,761	(23,904)
State General Funds	1,539,237	897,888	1,009,158	111,270
County appropriations	997,803	582,052	582,052	0
Charges for services	671,106	391,478	302,941	(88,537)
Other grants	1,481,957	864,475	565,904	(298,571)
Other revenue	553,551	322,905	323,297	392
<b>Total operating revenue</b>	<b>65,846,585</b>	<b>38,410,508</b>	<b>38,013,226</b>	<b>(397,282)</b>
<b>Operating expenses</b>				
Administration				
Salaries	2,479,811	1,446,556	1,322,512	(124,044)
Benefits	881,112	513,982	799,280	285,298
Other	3,015,951	1,759,305	1,521,207	(238,098)
Internal Services				
Salaries	9,698,628	5,657,533	4,536,557	(1,120,976)
Benefits	3,100,986	1,808,908	2,228,427	419,519
Other	3,495,052	2,038,780	2,004,705	(34,075)
Provider Network Services	40,082,573	23,381,501	23,904,938	523,437
Facility costs	1,241,616	724,276	426,141	(298,135)
Vehicle costs	126,648	73,878	37,405	(36,473)
Grant expenses	1,223,618	713,777	656,090	(57,687)
Other expenses	400,797	233,798	-	(233,798)
Room & Board	-	-	274,047	274,047
<b>Total operating expenses</b>	<b>65,746,792</b>	<b>38,352,296</b>	<b>37,711,309</b>	<b>(640,987)</b>
Change in net position	99,793	58,212	301,917	243,705
Net position, beginning of year	7,549,419	7,549,419	7,549,419	-
Net position, end of year	\$ 7,649,212	\$ 7,607,631	\$ 7,851,336	\$ 243,705

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## **INCOME STATEMENT BY FUND SOURCE**

For internal use only. These financial statements have not been audited, and no assurance is provided.

# MONROE CMH

## Fiscal 2026 Revenues and Expenses by Fund Source

October 2024 through April 2026

Medicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 43,747,009	\$ 25,519,089	\$ 26,002,582	\$ 483,493
PIHP Redirect to CCBHC	-	-	-	-
1st/3rd Party Revenue	3,704	2,160	-	(2,160)
Expense	\$ 38,607,239	22,520,889	23,384,544	863,655
<b>Revenue over/(under) expenses</b>	<b>\$ 5,143,474</b>	<b>\$ 3,000,360</b>	<b>\$ 2,618,038</b>	<b>\$ (382,322)</b>

Healthy Michigan	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 2,707,287	\$ 1,579,251	\$ 1,579,251	\$ 0
PIHP Redirect to CCBHC	-	-	-	-
1st/3rd Party Revenue	-	-	-	-
Expense	\$ 4,678,234	2,728,970	1,691,494	(1,037,476)
<b>Revenue over/(under) expenses</b>	<b>\$ (1,970,947)</b>	<b>\$ (1,149,719)</b>	<b>\$ (112,243)</b>	<b>\$ 1,037,476</b>

Total PIHP Sources	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Revenue	\$ 46,454,296	\$ 27,098,339	\$ 27,581,833	\$ 483,494
1st/3rd Party Revenue	3,704	2,160	-	(2,160)
Expense	43,285,473	25,249,859	25,076,038	(173,821)
Retain as local in FY 25	-	-	-	-
<b>Revenue over/(under) expenses</b>	<b>\$ 3,172,527</b>	<b>\$ 1,850,641</b>	<b>\$ 2,505,795</b>	<b>\$ 655,154</b>

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# MONROE CMH

## Fiscal 2026 Revenues and Expenses by Fund Source

October 2024 through April 2026

CCBHC Medicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Cap Revenue	\$ 14,481,285	\$ 8,447,416	\$ 8,287,238	\$ (160,178)
PIHP Supp Revenue	-	-	-	-
1st/3rd Party Revenue	1,246	727	42,227	41,500
Expense	12,683,676	7,398,811	6,415,053	(983,758)
<b>Revenue over/(under) expenses</b>	<b>\$ 1,798,855</b>	<b>\$ 1,049,332</b>	<b>\$ 1,914,412</b>	<b>\$ 865,080</b>

CCBHC Healthy Michigan	2026 Budget	YTD Budget	2026 Actual	Over (Under)
PIHP Cap Revenue	\$ 2,618,301	\$ 1,527,342	\$ 1,715,066	\$ 187,724
PIHP Supp Revenue	-	-	-	-
1st/3rd Party Revenue	-	-	3,530	3,530
Expense	3,132,588	1,827,343	1,439,736	(387,607)
<b>Revenue over/(under) expenses</b>	<b>\$ (514,287)</b>	<b>\$ (300,001)</b>	<b>\$ 278,860</b>	<b>\$ 578,861</b>

CCBHC NonMedicaid	2026 Budget	YTD Budget	2026 Actual	Over (Under)
State CCBHC Revenue	\$ 55,000	\$ 32,083	\$ -	\$ (32,083)
1st/3rd Party Revenue	-	-	18,665	18,665
Expense	2,607,096	1,520,806	1,509,627	(11,179)
Redirect from GF	2,552,096	1,488,723	1,490,962	2,239
<b>Revenue over/(under) expenses</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (0)</b>

ALL CCBHC Combined	2026 Budget	YTD Budget	2026 Actual	Over (Under)
All CCBHC Revenue	\$ 17,154,586	\$ 10,006,842	\$ 10,002,304	\$ (4,538)
1st/3rd Party Revenue	1,246	727	64,422	63,695
Expense	18,423,360	10,746,960	9,364,416	(1,382,544)
Redirect from GF	2,552,096	1,488,723	1,490,962	2,239
<b>Revenue over/(under) expenses</b>	<b>\$ 1,284,568</b>	<b>\$ 749,331</b>	<b>\$ 2,193,272</b>	<b>\$ 1,443,940</b>

# MONROE CMH

## Fiscal 2026 Revenues and Expenses by Fund Source

October 2024 through April 2026

State General Fund	2026 Budget	YTD Budget	2026 Actual	Over (Under)
Revenue	\$ 1,920,289	\$ 1,120,169	\$ 1,071,019	\$ (49,150)
Expense	2,821,975	1,646,152	1,650,567	4,415
Redirect to Other Programs	(2,552,096)	(1,488,723)	(1,772,629)	(283,906)
Redirect from Other Programs	3,453,782	2,014,706	2,352,177	337,471
<b>Revenue over/(under) expenses</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

All Other Grants/Local	2026 Budget	YTD Budget	2026 Actual	Over (Under)
Revenue	\$ 3,757,530	\$ 2,191,892	\$ 11,566,671	9,374,779
Expense	1,485,359	866,459	9,215,996	8,349,537
Redirects	(3,453,782)	(2,014,706)	(2,070,510)	(55,804)
<b>Revenue over/(under) expenses</b>	<b>\$ (1,181,612)</b>	<b>\$ (689,273)</b>	<b>\$ 280,165</b>	<b>\$ 969,438</b>

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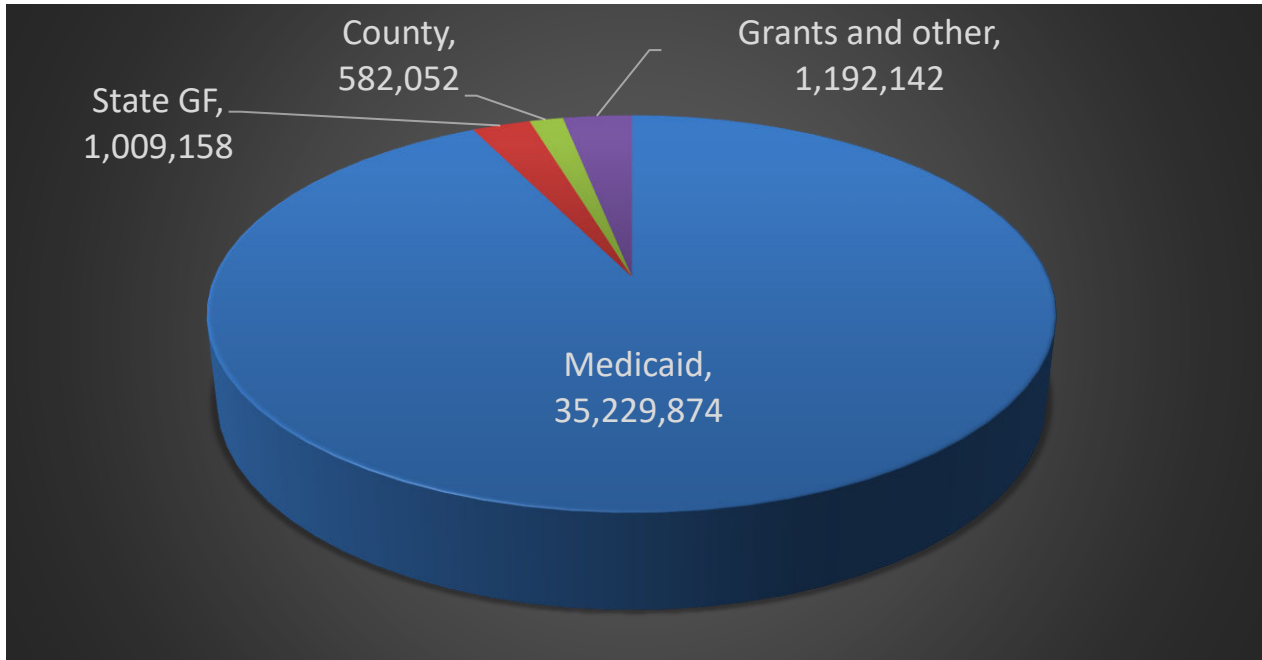
## TRENDS AND PAYMENTS

# MONROE CMH

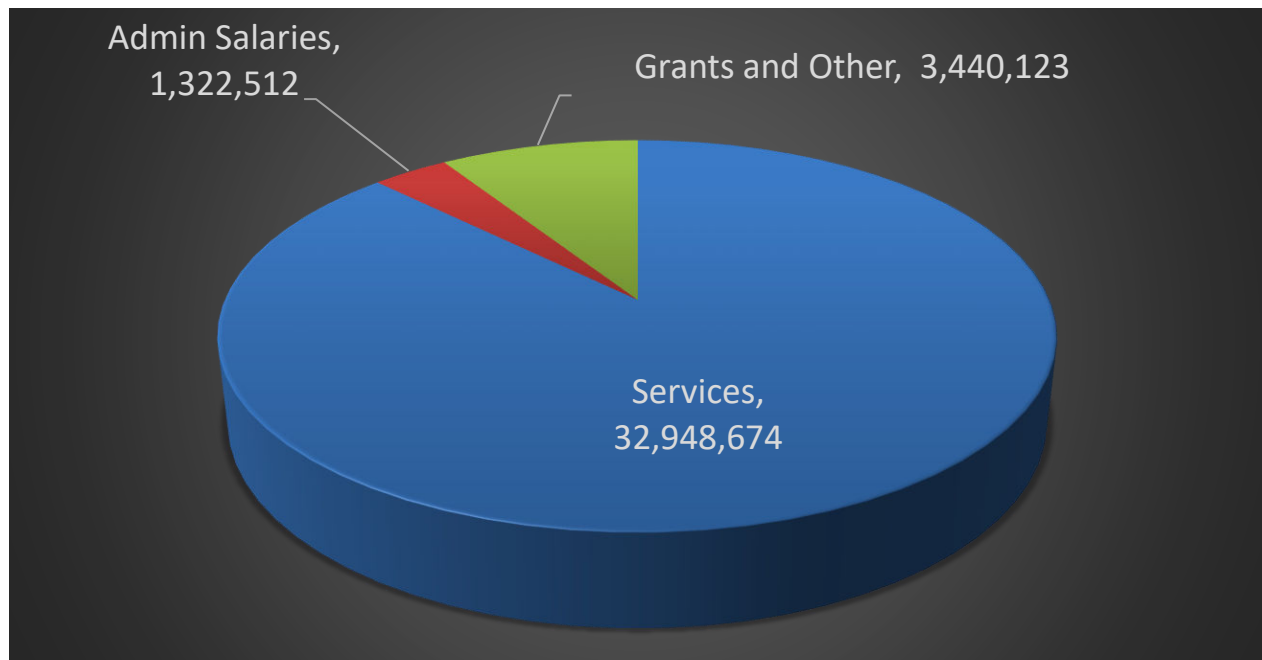
## April 2026 Trends

### Sources and Uses

#### Revenues by Source



#### Expenditures by Category



# Monroe CMHA

## Payment Summary Report

For the Month of April 2026

Amount

Vendor Name	Total
8X8 INC.	4,766
A Heart That Cares, LLC	99,632
ABA INSIGHT, LLC	59,533
ACCIDENT FUND INSURANCE COMPANY OF AMERICA	5,259
ADULT LEARNING SYSTEM, INC	41,384
ADVANCED THERAPEUTIC SOLUTIONS, LLC	617
AFLAC	2,656
AFSCME UNION / LOCAL 2529	2,348
APPLIED INNOVATION	646
ARA FAMILY HOLDINGS, LLC	2,412
ARKAY, INC	2,203
BAKER'S ACE HARDWARE	18
BBH VENTURES, LLC	5,076
BCA OF DETROIT, LLC	12,141
BEACON SPECIALIZED LIVING SERVICES, INC.	178,225
BESTCO BENEFIT PLANS, LLC	27,793
BLUEBIRD HOLDCO II LLC; BLUEBIRD MIDWEST LLC DBA BLUEBIRD FIBER	1,550
BLUENET	3,030
CATHOLIC CHARITIES OF SOUTHEAST MICHIGAN	48,000
CELLCO PARTNERSHIP	542
CENTRIA HEALTHCARE, LLC	16,511
CHARTER COMMUNICATIONS	303
CHITTER CHATTER PC	127,323
CHOICES W/SELF DETERMINATION, LLC	8,503
CHS GROUP, LLC	210,528
CINTAS CORP - 306/K11	506
CITY OF MONROE	488
CLINICAL NOTES AI, INC	28,900
COGNIZANT TRIZETTO SOFTWARE GROUP, INC.	940
COMMUNITY LIVING NETWORK	42,003
CONTRACT SERVICE GROUP	1,392

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# Monroe CMHA

## Payment Summary Report

For the Month of April 2026

Amount

Vendor Name	Total
COUNTY OF WASHTENAW, MICHIGAN	24,433
CREATIVE REFRESHMENTS, INC.	1,028
Culligan of Ida	80
DELTA DENTAL PLAN OF MICHIGAN	10,010
DIGIMATICS, INC.	81
DOMINIC BRIGANTI	25
DYKEMA GOSSETT, PLLC	6,598
EISENHOWER CENTER	172,447
ELITE AFC, LLC	11,160
ENFIELD VILLAGE CONDOMINIUM	197
ERICA MERCHANT	25
ERIE INSPECTION SERVICE, INC	550
EVEREST, INC.	49,387
EXPERT ON THE MIND LLC	42,770
FEI.COM INC DBA FEI SYSTEMS	3,627
FLATROCK MANOR, INC	717,698
FRAME'S PEST CONTROL, INC.	93
FRANCES JACKSON, LLC	978
GENOA HEALTHCARE, LLC	1,865
GOODWILL INDUSTRIES OF SE MICH, INC	83,253
GUARDIANTRAC, LLC	478,535
GUIDING LIGHT AFC LLC	26,880
GUTTERMAN, PAUL Y.	15,295
HAVENWYCK HOSPITAL	21,875
HAVENWYCK HOSPITAL-CEDAR CREEK	33,569
HELP AT HOME, LLC	11,265
HENRY FORD WYANDOTTE HOSPITAL	1,863
HFHS - ACADIA JOINT VENTURE, LLC DBA HENRY FORD HEALTH BEHAVIORAL HEAL	11,400
HILLSDALE COMMUNITY HEALTH CENTER	3,200
HOME - COMMUNITY SUPPORTED LIVING ARRANGEMENTS	39,656
ILLUMINATE ABA SERVICES LLC	10,567

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# Monroe CMHA

## Payment Summary Report

For the Month of April 2026

Amount

Vendor Name	Total
IRIS TELEHEALTH MEDICAL GROUP, PA	61,937
ISMAIL B. SENDI MD PC	15,170
IVYREHAB MICHIGAN, LLC	19,271
JACKSON AND COKER LOCUMTENEMS, LLC	24,280
JALIAN BURRIS	31
JASWANT S BAGGA	30,780
JENNIFER DURELL	76
JOAN M. CANNING	90
JOHN BURKARDT	230
JOHN M. CULLEN	194
JOSEPH BATES DBA THE ABILITY HUB LLC	81,222
KENNETH R PAPHENHAGEN	44
KIMBERLY S. SANDERLIN	750
KONICA MINOLTA BUSINESS SOLUTIONS USA INC.	351
LAMOUR PRINTING CO.	258
LANGUAGELINE SOLUTIONS	8
LANSING SENIOR PARTNERS LLC DBA BRIGHTWELL BEHAVIORAL HEALTH	1,598
LASCALA IT SOLUTIONS, INC	2,444
LEGAL SHIELD	425
LIFE ENRICHMENT ACADEMY, INC.	25,835
LIVINGSTON COUNTY COMMUNITY MENTAL HEALTH AUTHORITY	32,469
LOCUMTENENS.COM	65,558
LOUIS BALOGH	1,731
LUTHERAN CHILD AND FAMILY SERVICE OF MICHIGAN, INC	6,689
MACOMB RESIDENTIAL OPPORTUNITIES, INC	367,514
MAGNET ABA THERAPY, LLC	10,591
MASTROFRANCESCO, A.F.C.	160,228
MCLAUGHLIN PROPERTIES LLC	12,527
MICHIGAN GAS UTILITIES	2,549
MONROE CENTER, LLC.	6,250
MONROE COUNTY RETIREMENT SYSTEM	110,061

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# Monroe CMHA

## Payment Summary Report

For the Month of April 2026

Amount

Vendor Name	Total
MONROE FLORIST	200
MONROE PUBLIC ACCESS TELEVISION INC	200
MUTUAL OF OMAHA	48,790
NAOMI REBECCA STONER	60
NEW DIRECTIONS PEER RECOVERY CENTER	10,700
O'REILLY AUTO PARTS	403
PANCONI'S AUTO, LLC	71
PETER CHANG ENTERPRISES DBA PCE SYSTEMS	55
PHC OF MI, INC	28,366
PHILLIP ARCHER, MD	10,485
PHOENIX PERFORMANCE PARTNERS LLC	2,750
PITNEY BOWES	877
PROGRESSIVE RESIDENTIAL SERVICES	326,014
PROMEDICA MONROE REGIONAL HOSPITAL	218,225
PURCHASE POWER / PITNEY BOWES	1,004
QUANTUMLINK COMMUNICATIONS	65
R LAMAR FREDERICK	383
REBECCA PASKO	164
REBECCA S CURLEY	470
REDA D. BINIECKI	201
REGENTS OF THE UNIVERSITY OF MICHIGAN	8,000
REHMANN LLC	207,397
REPUBLIC SERVICES #259	2,248
RESIDENTIAL OPPORTUNITIES, INC	9,493
REVEL--QONVERGE, LLC	788
ROSLUND PRESTAGE & COMPANY PC	10,313
SABRINA R. CORBIN	269,892
SIEB PLUMBING & HEATING, INC.	907
SNOW CHIU WU	4,500
ST. PIERRE ACE HARDWARE INC.	55
STATE OF MICHIGAN / MDCH	28,060

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# Monroe CMHA

## Payment Summary Report

For the Month of April 2026

Amount

Vendor Name	Total
SUPERIOR VISION SERVICES, INC.	4,494
SUSAN ELIZABETH FORTNEY	148
SVRC INDUSTRIES INC.	1,999
T MOBILE USA, INC.	3,179
TH BRANDS INC	4,131
THERAPEUTICS, LLC	24,278
TIMOTHY ALLEN LASSEY	31
UNIFIRST MANUFACTURING CORP	882
VELLOHEALTH INC	21,000
VITAL RECORDS HOLDING	95
WOLVERINE INVESTMENT PROPERTIES, LLC	7,058
YOUNG MEN'S CHRISTIAN ASSOCIATION OF MONROE MICH	1,431.12
<b>Grand Total</b>	<b>\$ 5,016,656.14</b>



# MCMHA Finance Board Action Request

Service Contract(s) and Amendments

Wednesday, June 24, 2026

**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		
<b>Hospitals</b>							
N/A							
<b>Community Living Supports (CLS) / Supported Employment / Respite</b>							
A Heart That Cares LLC, Arkay Incorporated, CHS Group LLC, Goodwill Industries of Southeastern Michigan Inc, Help at Home Michigan LLC, Life Enrichment Academy Inc, Macomb Residential Opportunities, Mastrofrancesco Inc, Progressive Residential Services Inc.	7/1/26-9/30/26	Respite	\$4.80 \$2.40 \$1.61 \$1.21 \$.97 \$.80	Per 15 minutes      	\$5.42 \$2.71 \$1.81 \$1.36 \$1.09 \$.91	Per 15 minutes      	Rate increase to ensure staff are able to meet the minimum wage guidelines established by the state.
Guardain Trac	7/1/26-9/30/26	Respite	\$4.67 \$2.34 \$1.56 \$1.17 \$.94 \$.78	Per 15 minutes      	\$5.42 \$2.71 \$1.81 \$1.36 \$1.09 \$.91	Per 15 minutes      	Rate increase to ensure staff are able to meet the minimum wage guidelines established by the state.
<b>Autism / Waiver Services</b>							
N/A							



**MCMHA Finance Board Action Request**  
*Administrative Contract(s)*

Wednesday, June 24, 2026

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

CONTRACTOR	CONTRACT TERM	DEPARTMENT	SERVICE DESCRIPTION	BUDGET	ADDITIONAL INFORMATION
Frances Jackson LLC	7/1/26-12/31/26		Parliamentarian consultation for the MCMHA Board of Directors.	\$75/hour Mileage for travel to and from meetings to be paid at the current IRS approved rate.	The agreement is for a 6 month period with an option to extend an additional 6 months.



## REVIEW AND ADOPT / June 24, 2026 Regional (CMHPSM) Policies

### Executive Summary:

- There are five regional policies for adoption.
- This document serves as an Executive Summary of the regional policies for review and approval at the June 24, 2026 Board Meeting.

<u>REGIONAL POLICIES:</u>	<u>REASON FOR REVISION:</u>	<u>SUMMARY:</u>
<p>POC7084 Crisis Prevention Planning and Safety Planning</p>	<ul style="list-style-type: none"> <li>• Clarifying and updating requirements.</li> </ul>	<p><b><u>PURPOSE:</u></b> To ensure a crisis prevention plan and/or a safety plan is developed in accordance with the preferences and needs of consumers/individuals served/families, and that meets relevant requirements.</p> <p><b><u>POLICY:</u></b> Crisis prevention planning and safety planning shall be offered to all consumers/individuals served/families receiving services from their local Community Mental Health Service Provider (CMHSP). A safety plan is completed when an individual is discharged from a hospital, is identified as high risk on the Columbia Suicide Severity Rating Scale, when diverted from an acute level of care (e.g., inpatient hospitalization) or when the individual is in a psychiatric crisis and is at risk of hurting themselves or others.</p> <p><b><u>ALIGNS WITH GOVERNANCE POLICIES:</u></b> Yes</p>
<p>FCM3030 Credentialing for Licensed Independent Providers Policy</p>	<ul style="list-style-type: none"> <li>• Policy updates to meet HSAG EQR findings from FY25 Compliance review.</li> </ul>	<p><b><u>PURPOSE:</u></b> To outline the processes and guidelines for the Community Mental Health Partnership of Southeast Michigan (CMHPSM) partners' review of credentials, competence, assessment, and delineation of duties and responsibilities for independent providers who are licensed independent providers (LIP).</p> <p><b><u>POLICY:</u></b> The CMHPSM ensures the following:</p> <ul style="list-style-type: none"> <li>• The provision of high-quality, cost-effective mental health and substance use disorder services to CMHPSM consumers/individuals served.</li> <li>• Consumer/individual served access to a timely, geographically convenient, and</li> </ul>

		<p>specialized array of mental health and substance use disorder treatment and support services.</p> <ul style="list-style-type: none"> <li>• LIPs meet and/or exceed the accreditation and regulatory standards for practicing and delivering services independently.</li> <li>• The decision to enter into a contractual relationship with any LIP credentialed by the CMHPSM under this policy is left to each CMHSP based on the needs of their board and community.</li> </ul> <p><b><u>ALIGNS WITH GOVERNANCE POLICIES:</u></b> Yes</p>
FCM3031 Employee Competency and Credentialing Policy	<ul style="list-style-type: none"> <li>• Revisions related to HSAG EQR FY25 CAP.</li> </ul>	<p><b><u>PURPOSE:</u></b> To ensure that staff competencies are at a high level through ongoing assessment of their capacity to provide safe, effective, high-quality mental health and substance use disorder (SUD) care to Community Mental Health Partnership of Southeast Michigan (CMHPSM) consumers/individuals served.</p> <p><b><u>POLICY:</u></b> All employees will be competent to perform the responsibilities and duties assigned to them.</p> <p><b><u>ALIGNS WITH GOVERNANCE POLICIES:</u></b> Yes</p>
FCM3039 Organizational Credentialing, Re-Credentialing, and Monitoring Policy	<ul style="list-style-type: none"> <li>• Policy updates to meet HSAG EQR findings from FY25 Compliance review.</li> </ul>	<p><b><u>PURPOSE:</u></b> To establish guidelines that ensure all organizational contractors who provide behavioral health and/or substance use disorder services to consumers of the Community Mental Health Partnership of Southeast Michigan (CMHPSM), meet the minimum standards as described in this policy.</p> <p><b><u>POLICY:</u></b> The CMHPSM will ensure that all organizations providing behavioral health and/or substance use disorder services to consumers in the CMHPSM continuously meet the standards set forth in this policy.</p> <p><b><u>ALIGNS WITH GOVERNANCE POLICIES:</u></b> Yes</p>
IM5027 Artificial/Augmented Intelligence Policy	<ul style="list-style-type: none"> <li>• New</li> </ul>	<p><b><u>PURPOSE:</u></b> To establish policy and standards around the utilization of artificial intelligence systems and tools for the Community Mental Health Partnership of Southeast Michigan (CMHPSM) and its regional partners.</p>

		<p><b><u>POLICY:</u></b> The use of AI within our organization, particularly in clinical behavioral health environments, must be conducted in a safe, ethical, and responsible manner. AI tools shall support—rather than replace—professional clinical judgment and must be implemented in ways that protect consumer/individual served privacy, ensure data security, mitigate bias, promote fairness, and comply with all applicable healthcare laws, regulations, and professional standards. Artificial Intelligence (AI) is utilized in various ways in our organization. AI can be used to enhance administrative and productivity tools for operations use as well as be used in a clinical setting. For this policy, both AI and Augmented Intelligence (Aul) will be treated interchangeably unless otherwise specified.</p> <p><b><u>ALIGNS WITH GOVERNANCE POLICIES:</u></b> Bylaws &amp; Policy Committee is currently reviewing/amending governance policies.</p>
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