

PROGRAM DEVELOPMENT COMMITTEE

September 15, 2008 – 6:00 p.m.
Michigan High School Athletic Association
1661 Ramblewood Drive
East Lansing, Michigan

MINUTES

Members Present: Lynn Mason, Chair; Dale Barr; Jan Bunting; Shirley Carter; Dale Copedge; Jean Golden; Cliff Herl; Deb Smith

Members Absent: Jerry Michalowicz; Jim VanDoren

Staff: Mary Kronquist, Treatment & Program Development Manager; Jeanne Diver, Care Coordination Manger; Lori Griffin, Executive Secretary; Lisa Larson, Utilization Coordinator; Patti Tygre, Utilization Coordinator; Ben Langman, Utilization Coordinator; Luann LeVeck, Care Coordination Secretary

Guests: Ericanne Spence, CEI-CMHA Substance Abuse Services; Gail Cooper, CEI-CMHA Substance Abuse Services; Judith Cates, CEI-CMHA Substance Abuse Services; Michael Hetzman, Gratiot CMH; Lisa McCafferty, Ionia County Substance Abuse Initiative; Gregory T. Pula, Sparrow Health Systems

CALL TO ORDER

Ms. Mason called the meeting to order at 6:00 p.m.

APPROVAL OF THE MINUTES OF JUNE 16, 2008

Mr. Herl moved approval of the minutes of June 16, 2008 as presented. Mr. Barr supported the motion.

Ms. Mason asked for a correction on page 5, paragraph 5, change the first sentence to read: “Ms. Mason asked if AG opinion says that the actions taken are *illegal*, what would happen then. The original sentence had the word “*legal*”. Ms. Bunting requested that there be a correction made regarding who directed to her clarification on a point. (At the end of the meeting, Ms. Bunting requested this request be rescinded as she had realized she made a mistake).

Vote called on the motion to approve with the correction. Motion carried with Mr. Copedge voting no.

ADDITIONS TO THE AGENDA

There were no additions offered.

PUBLIC COMMENT

There was no public comment.

NEW BUSINESS

A. Care Coordination Staff

Ms. Diver introduced new staff members for the Care Coordination Center. She stated the three utilization coordinators will conduct screenings and utilization review for reauthorization requests. She indicated there have been trainings with Dr. Baker and a screening tool for CareNet has been developed, in addition to a toxicology page. The initial and reauthorization pages have also been revamped. Ms. Diver handed out brochures that will be sent to referral agencies and providers. Members asked suggested it also be printed in Spanish.

B. Continuum of Care

a. Detox Services

Ms. Kronquist stated this item is presented as a result of discussion at last month's Board Retreat. CEI recently reopened Birchtree Cottage to provide detox services for the region. She noted that detox services are both difficult to provide, and expensive, as the reimbursement rate usually does not cover costs. She further reported that to-date, from May 10 through September 12 CEI has been reimbursed at a cost per bed day of \$278, or \$1,390 totally. Ms. Kronquist reported there have been staffing issues at Birchtree, but that Mid-South will continue to work with the program on them. She also stated Mid-South is considering a medically managed detox rate of \$265 per day and clinically managed rate of \$200 per day.

Discussion turned to Allegiance Recovery Center (formerly known as Washington Way) and their desire to be a "Jackson only" provider. Ms. Kronquist reported that to-date, a total of 151 distinct clients from Jackson have received detox services, which \$1,300 is reimbursed so far, which may mean a \$162,000 reduction in funding.

Ms. Judith Cates spoke to the Committee about her program, noting her appreciation for the performance based agreement they have, and stated that when looking across the state, their dilemma is not uncommon. She added that the

program 1016 in the NMSAS region has had 81 admissions in the first four months of operation. She reported Birchtree has physician coverage ten hours per week, nursing 40 hours per week, and have medication dispensing whereas the taking of meds is supervised. She also noted they are seeing more opiate dependent clients, and a higher level of addiction severity, with younger clients.

Ms. Cates also reported she had received a federal contract for a minimum of \$15,000 per year, and also have secured contracts with Venture Behavioral Health and the Riverhaven CA. It was noted that when other contracts are received, those do not bump Mid-South clients from priority.

Ms. Mason asked whether Mid-South needs to mend the relationship with Turning Point, and if we would use them in the future. Ms. Kronquist replied the relationship was not broken, Mid-South decided the rate they asked for was too high. Ms. Mason also asked if there was a way to make the Allegiance issue work so we don't lose money. Ms. Kronquist replied that Allegiance Health (Foote Hospital) has viewed its mission to be a local hospital rather than a regional provider. Since what Mid-South reimburses Allegiance for services does not cover most of their costs, the hospital ends up taking a loss. She continued by stating that as a local hospital, they have expressed to Mid-South in the past that they would rather focus on Jackson County residents with this loss versus all of Mid-South's regional clients. However, this has been discussed in the past and once everyone involved realizes the financial impact, this decision has been changed. Mid-South will continue talking with Allegiance on this issue as the contract discussions continue.

b. Co-Occurring Services

Ms. Kronquist reported the State desires to have more co-occurring services available as there are more clients presenting with these issues. This requires treatment providers to have policies and procedures in place for appropriate referrals and staff appropriately trained, which is an additional cost to be incurred by providers. The staff would like to research co-occurring opportunities for clinical staff of our contracted providers and bring forth a training plan to the Program Development Committee.

Ms. Mason asked for an update on what is happening with regards to integration of mental health and substance abuse services. Ms. Kronquist replied there is no longer the push from the State for merger but rather to provide skills and work

collaboratively. She added it is more of what the local agencies wish to do, they should do it. Ms. Golden asked for this item to be on the agenda for a future Executive Committee meeting.

c. Unbundling of Services

Ms. Kronquist reported staff wishes to unbundle IOP services in order to custom design individual treatment plans, to allow providers to create treatment plans to meet the intensity, scope, and duration the clients need rather than fit them into a program that doesn't always meet their needs. There may be some additional costs to the system.

d. Recovery Oriented System of Care

Ms. Kronquist reported the State is focusing on this, so it will be an agenda item at a future meeting.

C. Best Practice Guidelines

Ms. Kronquist reported that with the assistance of Dr. Baker, work has been ongoing to have these in place for the upcoming fiscal year. They will be disseminated to all of our contracted providers, and also used by our Care Coordination staff for utilization determinations. Their purpose is to ensure consistency of understanding and common language between provider staff and Care Coordination Center staff. Provided for information only at this time.

PUBLIC COMMENT

Ms. Bunting apologized for comments made earlier in the meeting with regard to the June meeting minutes and comments she attributed to Mr. David Stoker.

ADJOURNMENT

The meeting adjourned at 7:37 p.m.