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## **PROGRAM DEVELOPMENT COMMITTEE**

September 21, 2009 – 6:00 p.m.  
Michigan High School Athletic Association  
1661 Ramblewood Drive  
East Lansing, Michigan

### **MINUTES**

**Members Present:** Deborah Smith, Chair; Dale Barr; Dale Copedge; Jean Golden; Cliff Herl; Lynn Mason; Jim VanDoren

**Members Absent:** Jan Bunting; Shirley Carter; Pam DeVaney-Bozinoff

**Staff:** Gary VanNorman, Executive Director; Mary Kronquist, Treatment Manager; Jeanne Diver, Quality Assurance Manager; Joel Hoepfner, Prevention Manager; Lori Coe, Executive Secretary

**Guest:** Lisa McCafferty, Ionia Public Health Department

### **CALL TO ORDER**

Ms. Smith called the meeting to order at 6:04 p.m.

### **APPROVAL OF THE MINUTES OF AUGUST 17, 2009**

**Mr. Herl moved approval of the minutes of August 17, 2009 as presented. Ms. Golden supported.** Ms. Mason noted she was absent from the meeting and it was not noted. Ms. Coe noted the minutes would be corrected.

**Vote called on the motion. The minutes were approved with the correction.**

### **ADDITIONS TO THE AGENDA**

Ms. Mason inquired as to the status of the state budget. Mr. VanDoren noted most discussions are held in secret. Ms. Mason then asked about the issue of CAs being folded into

PIHP's. Mr. VanNorman responded that is still on the table, and any decisions may be made behind closed doors. There were no other additions.

**Ms. Golden moved to approve the agenda as presented. Mr. Barr supported the motion. The motion carried.**

## **NEW BUSINESS**

### **A. Provider QI Workgroup Agenda and Minutes**

The agenda and minutes from the last meeting were provided. Members discussed case management and how it is currently done. Ms. Kronquist reported the work group is discussing how to incorporate case management into treatment planning; providing their input into the auto authorization process; and discussing recidivism, retention of clients in treatment, and possible rationing of care for clients who have multiple treatment admissions. This committee may be part of that discussion at some future time. Also discussed were the new service categories. Ms. Kronquist stated the state released a technical advisory for early intervention, which MASACA has asked to be recalled and reworked through their work group. The importance of peer supports/recovery supports was also discussed. Brief discussion took place regarding care management. Ms. Golden stated she will be looking for ways to inject peer supports beyond prevention.

### **B. CCC Baseline/Evolution of Functions**

Ms. Diver noted the CCC has been in operation for almost one year, and reported on potential changes that will help take some burden off of the providers. She noted criteria have been established for auto authorizations. The CCC staff is accepting requests for authorizations as they are submitted unless there is reason to not accept it, at which point the provider is contacted and it is discussed. Staff is also accepting end dates as requested. Ms. Diver also noted staff will work with the QI work group on the monitoring tool that will be used when retrospective reviews begin. Ms. Kronquist reported a meeting was held with representatives of the 55<sup>th</sup> District Court due to some concerns regarding Court assessments. A MOU (Memorandum of Understanding) is being developed for use with this and other courts region-wide. Staff is also working with the courts to review assessment tools to assure they meet standards.

### **C. Prevention Implementation Plans**

Mr. Hoepfner presented a draft of the new prevention Implementation Plan. He noted all of our counties have submitted plans and are involved in the five steps in some fashion. He

noted all fiduciary agencies holding prevention subcontracts need to present agency action plans (work plans).

**D. State SUD Conference update on ROSC**

Mr. VanNorman stated an entire track at the conference was focused on ROSC and many providers, state personnel, and feds attended. He noted it was beneficial to hear from those in Connecticut and Philadelphia who have moved to this model. He added the challenge is to work with our providers to assure an understanding of what it is. Ms. Smith shared her viewpoint of the conference.

**E. Brainstorming Exercise**

Ms. Smith asked members and staff to break into small groups to come up with ideas on how to answer the following question.

Based on recidivism information presented at the Board retreat—52 individuals representing 199 episodes of treatment at different times from early 2000 through June 2009, using a recovery oriented system of care, what things could have been done to learn more about these clients' needs.

After about 5 minutes, members shared their ideas.

**OLD BUSINESS**

There was no old business brought before the Committee.

**PUBLIC COMMENT**

There was no public comment.

**ADJOURNMENT**

The meeting adjourned at 7:37 p.m.