

Region 10
Genesee • Lapeer • Sanilac • St. Clair Counties

DRAFT

GROUP MEETING: Region 10 PIHP Board
 PLACE: Region 10 PIHP
 Virtual Meeting via MS Teams
 DATE: April 10, 2020
 TIME: 9:00 a.m.
 PRESIDING: Lori Curtiss, Chairperson

PRESENT: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson

ABSENT: Terry Bankert, Gary Jones, Bobbie Umbreit

ALSO PRESENT: *Region 10 PIHP Staff:* Jim Johnson, CEO; Richard Carpenter, Danielle Walsh, SUD Network Manager; Robin Kalbfleisch, Recording Secretary

CMH Staff: Lauren Emmons, Lapeer CMH; Dan Russell, GHS

GUESTS: None

I. CALL TO ORDER

The meeting was called to order at 9:00 a.m. by Chairperson Curtiss. Roll call conducted by Recording Secretary.

II. CITIZENS WISHING TO ADDRESS THE BOARD

None

III. AGENDA CHANGES

It was moved by Ms. Mills, seconded by Ms. Keller, to approve the meeting agenda as presented. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nays: None.

IV. APPROVAL OF PREVIOUS MEETING MINUTES (*Action*)

It was moved by Ms. Keller, seconded by Ms. Thomson, to approve the February 21, 2020 meeting minutes as presented. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nays: None.

V. FINANCE

A. FY2020 Budget

1. Monthly Finance Report – February 2020 (*Action*)

Presented by Mr. Carpenter. In February there was a slight downturn in the number of DAB eligibles for February and he will keep an eye on this. He noted that we are getting more revenue than last year in all categories. There is currently a Medicaid surplus of \$7 million, which projects to a \$14 million surplus at year end. The final FY19 figures are Medicaid ISF \$18.6 million and Medicaid Savings \$10.1 million with no lapse of funds.

Healthy Michigan is currently at a deficit of about \$200,000. Last year there was a deficit at year end of about \$5 million, so this shows the State is starting to fund as it should be. Medicaid surplus funds can be used to cover this deficit.

It was moved by Mr. Kozfkay, seconded by Ms. Mills, to approve the Monthly Finance Report for February 2020 as presented. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nays: None.

2. Monthly Payment Report – February 2020 (*Action*)

Presented by Mr. Carpenter. This report includes the quarterly HRA payments.

It was moved by Ms. Joyce Johnson, seconded by Ms. Mills, to approve the Monthly Payment Report for February 2020 as presented. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nays: None.

There was discussion about the potential effects of COVID-19 on the region's finances, such as a possible uptick in the Medicaid eligible population, possible reductions in certain services resulting in less expenses for a short period of time, and other services being utilized in place of those services resulting in increased costs. There will need to be a review related to the PIHP SUD networks and CMH provider networks to determine if the rates we are paying are adequate for the rest of the year.

B. Financial Staffing Issue

No update at this time.

VI. POLICY

A. SUD Provider Advance Policy # 04.03.04 (*Action*)

Presented by Mr. Carpenter. Due to COVID-19, providers may experience potential reduction in services in the next couple of months and additional expenditures related to PPE and other COVID-19 accommodations. These circumstances may cause a negative impact on cash flow and cash availability for the providers. The purpose of this policy is to provide a mechanism for the PIHP to be able to

ensure our provider network has the working capital necessary to make sure their critical functions and expenses are covered. This policy will allow the PIHP to provide advances to our SUD providers, which is a similar process to the current CMH advance policy already in place. Mr. Carpenter noted that the advance provided to each provider would be up to one month of the average of three past months of services. Also, the total advances provided to the network would be limited to not more than 10% of the combined total balances of the Risk Reserve and Performance Based Incentive funds, which is currently equal to \$1.8 million.

The policy highlights the procedures for the advance process on page two. Mr. Carpenter noted that the SUD provider must provide specific documentation to request an advance, which includes verification of alternative actions taken to address their cash flow need before requesting an advance through the PIHP.

There will be an ongoing review of the process so that we may build and support rates that account for the added expenses to the providers due to COVID-19 and that will put them in a position to pay us back. Mr. Johnson stated that Region 10 recognizes that it is critical for the people and communities we serve that we maintain a robust network of viable service providers. He believes this is the most effective, efficient, and accurate way to bolster this network to reasonably account for the unavoidable impact of COVID-19 on their ability to provide services, and to help them sustain and keep their workforce in place during and after the crisis time period.

We are hopeful that the advances will not need to be continued past September; however, the policy will remain in place for other unforeseen circumstances that may occur in the future.

It was requested that an ongoing list of providers who have obtained advances be provided to this Board so we can monitor the progress and Mr. Carpenter stated he will be able to provide that.

It was moved by Ms. Mills, seconded by Mr. Priemer, to approve SUD Provider Advance Policy # 04.03.04 as presented. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nayes: None; Abstaining: Robert Kozfkay

Richard Carpenter left the meeting at 9:46 a.m.

VII. DIRECTOR'S REPORT

- Mr. Johnson reported that the Governor extended the Stay Home, Stay Safe Executive Order yesterday until April 30th and also added some additional restrictions for gatherings, travel, operation of stores, etc. The majority of PIHP staff are working from home, and some staff come into the office to do critical, time sensitive essential functions that cannot be done from home as we need them to. The Region 10 Directors and Supervisors are ensuring a maximum level of social distancing when coordinating staff to come into the office.
- The Department is holding calls with the PIHP and CMH Directors twice each week that are focused on system management during the COVID crisis. The Department has submitted proposals to CMS requesting to utilize emergency Medicaid authorities under the Section 1135 Waiver and Appendix K to the 1915 (c) Waiver.
- Additional authority under Appendix K would allow things such as home delivered meals to enrollees in any of the (c) Waiver programs; allow enrollees in (c) Waivers that are

hospitalized to receive CLS staff support in the hospital setting; allow responsible individuals to provide CLS and overnight health and safety support services; allow us to provide retainer payments for personal care assistance when an enrollee is hospitalized for a period of not more than 30 days; and allow an enrollee's IPOS to be continued beyond a year; as well as extending or delaying other things like HAB Support Waiver level of care determinations, etc.

- The 1135 Waiver allows for many of the same authorities but is broader in scope as it applies to the physical health area as well as behavioral health. It would allow enrollees to proceed directly to State Fair Hearings, bypassing local hearing requirements; extend reporting and performance deadlines related to the 1115 Waiver; make temporarily available some psychiatric residential treatment facility services that are currently not available; permit payment for specialty behavioral health services rendered by family care givers or legally responsible individuals; allow retainer payments for personal care assistance when an enrollee is hospitalized; expand qualified CMHs and PIHPs to become entities determined by the state to be eligible to make presumptive Medicaid eligibility determinations for people recovering from serious mental illness, SED, etc. CMS has approved the 1135 Waiver; Michigan was the 45th state and the 46th 1135 waiver request to be approved (the District of Columbia also had a request approved). We are still waiting for the Department to issue their summary of the approval and a more definitive explanation of the relief and expectations for our system.
- Appendix K should be submitted to CMS today. The State is requesting a \$2/hr. increase for Direct Care workers who work with individuals enrolled under the (c) Waiver that will be considered hazard pay and will be maintained during the emergency timeframes. The increase is also dependent on the authority from the State Legislature to draw down funds, as it was not included in the original supplemental and is considered a new request.
- The Federal Families First Act was approved recently. This will provide Michigan with an increase of 6.2 percentage points to the current Federal Medicaid Assistance Percentage. (FMAP) Current FMAP is around 64% (State provides approximately 36%). There are conditions the State must meet to get the additional FMAP, including maintaining eligibility standards for Medicaid that are no higher than they were in January 1st of this year and maintaining premium levels that are no higher than they were in January 1st of this year. The State cannot terminate anyone from Medicaid or Healthy Michigan if they were enrolled or become enrolled during the emergency declaration timeframes (from March 1, 2020 forward). This includes people who meet their Medicaid spenddown – they will remain enrolled until the emergency declaration ends. This is a very significant benefit for the enrollees and for us. The only way the state will close Medicaid enrollments right now is at the request of the enrollee, if the enrollee moves out of state, or the death of the enrollee.
- The Department has determined they will catch up Medicaid payments for the first five months of the year with the April payment. The rates should be more accurate going forward.
- We have asked the Department for guidance regarding providers who have staff who have been impacted by COVID-19. Providers are asking to provide services in an alternate and potentially unlicensed setting to more safely separate, monitor, and treat people who may have been exposed to COVID-19 without negatively impacting their status as a provider. Region 10 does not have the authority to grant this but should be receiving guidance soon, possibly through the 1135 Waiver or Appendix K.

- The Department has been approached by a number of hotels who are willing to provide rooms/space due to the COVID-19 crisis. This could be for people who have to be quarantined or to get away from people in their household who have potentially been exposed. We should be receiving a list of hotels in our region who have signed on for this.
- The Department is working to address some of the concerns of residential providers regarding grocery restrictions, such as limits on number of items they can purchase.
- The State Budget Office has stated there is an additional \$5 million in general funds from the supplemental budget going to the CMHs to help with COVID-19 efforts and needs. The Department is working on a formula to disseminate it. One of the key factors that will be considered is the prevalence and impact on certain communities. Currently, as of yesterday's data, Genesee County is the fourth hardest hit county in Michigan, with 3.5% of the total statewide cases. Wayne, Oakland, and Macomb counties account for about 80% of the statewide cases identified to date.
- The Department is also working with the Federal government to find different avenues of funding for providers that will help keep them in business during this emergency, outside of what is included in the 1135 Waiver and Appendix K. We are waiting to hear more details.
- There was discussion regarding the restricted access to residential housing. There are waitlists and some are not accepting anyone due to the fear of COVID-19. There have also been issues with staff being exposed and not being able to come to work. The hotel rooms opening up may help with this issue.
- The Board expressed their appreciation to staff for working during this time and asked that there is something done to show their appreciation. Mr. Johnson stated he will discuss options with the management staff.

VIII. ANY OTHER BUSINESS TO PROPERTY COME BEFORE THE BOARD

A. Region 10 Board Meetings During Stay-At-Home Executive Order

Chairperson Curtiss asked the Board members thoughts on having the May 15th meeting in the same virtual format if needed.

It was moved by Ms. Joyce Johnson, seconded by Ms. Cole, that the Region 10 PIHP Board continue to conduct Board meetings electronically as long as the Executive Order continues to allow Boards to operate in this manner. **MOTION CARRIED** by roll call vote: Ayes: Ronald Barnard, Wanda Cole, Lori Curtiss, Dr. Niketa Dani, DeElla Johnson, Joyce Johnson, Linda Keller, Robert Kozfkay, Elva Mills, Ed Priemer, Wayne Strandberg, Nancy Thomson; Nays: None.

XIII. CITIZENS WISHING TO ADDRESS THE BOARD

None

XIV. ADJOURNMENT

It was moved by Ms. Mills to adjourn the meeting. With no further business to discuss, Chairperson Curtiss adjourned the meeting at 10:21 a.m.

Respectfully submitted,

Robin Kalbfleisch
Recording Secretary

Reviewed and approved,

Wanda Cole
Region 10 Board Secretary/Designee