

REGIONAL OPERATIONS COUNCIL/CEO MEETING

Key Decisions and Required Action

Date: 02/27/2023

Members Present: Lindsey Hull; Maribeth Leonard; Carol Mills; Tracey Dore; Tammy Warner; Michelle Stillwagon; Bryan Krogman; Sandy Lindsey; Sara Lurie
Members Absent: Chris Pinter; Sharon Beals; Kerry Possehn
MSHN Staff Present: Joseph Sedlock; Amanda Ittner;

Agenda Item		Action Required			
CONSENT AGENDA	PIHP/MDHHS minutes, pg. 13: Hope not handcuffs received a \$5m allocation to stand up in Macomb County. MiCAL update, pg 24: Question related to MiCAL and training. MSHN UM staff trained, CMH report not being trained yet.				
	No further discussion noted Consent agenda considered and approved.	By Who	N/A	By When	N/A
FY23 Savings Estimates through December 2022	L. Thomas reviewed the FY23 Savings Estimates through Q1. Discussion regarding the discontinuation of Medicaid Continuous Enrollment and affects on projected Medicaid Revenue for FY23 and FY24				
	Discussion Only	By Who	N/A	By When	N/A
Provider Staffing Crisis Stabilization Program Extension	J. Sedlock presented the proposal drafted for MSHN Board approval in their March meeting to extend the provider staffing crisis stabilization funds through FY23.				
	Informational Only; Operations Council supports.	By Who	N/A	By When	N/A
Improving Access for Children in Child Welfare	MSHN and Southwest Michigan Behavioral Health (SWMBH) are collaborating in an approach to MDHHS to assist with improving access to specialty behavioral health services for children served by the Child Welfare System. MSHN and SWMBH have a meeting set with MDHHS leaders end of March to discussion options and support MDHHS to present a public option. CMHs reported state reaching out to them to discuss coordination with Child welfare and the association also having discussion with MDHHS. Noted concern as well with placement and services for children of color. MDHHS response to this approach has been overwhelmingly positive. Meeting is schedule near the end of March. MSHN will keep the Operations Council posted.				
	Ops Council supported continued dialog with MDHHS	By Who	N/A	By When	N/A
MSU Shooting – CEI Involvement	S. Laurie thanked all in the region for their support and others outside the region. Lifeways and Central support virtual services. CEI will beginning more individual and group briefings. Overall MSU has a large number of resources and mobilized quickly with private providers as well. Noted lack of connection to the higher-ups at MSU to connect services.				

Agenda Item		Action Required			
	Discussion Only	By Who	N/A	By When	N/A
April In-Person meeting	J. Sedlock recommended to change the April meeting from virtual to in-person to support strategic planning. Operations Council supported				
	MSHN to send out a revised invite when confirmed location	By Who	J. Sedlock	By When	4.1.23
Crisis Stabilization Units	T. Warner reported local hospitals showing interest in developing a CSU proposal. CSUs provide 24 hours service for up to 72 hours; most have their crisis stabilized within several hours or be referred to more intensive crisis stabilization services, such as a crisis residential or a psychiatric hospital.				
	Discussion Only	By Who	N/A	By When	N/A
Self-Determination Services	B. Krogman reporting individuals receiving SD services have been advocating for ancillary community services. Concern regarding Medical Necessity requirements and how they are being addressed in the IPOS. CMHCM’s position includes that if the budget is underspend, it doesn’t correlate to being allowed to spend the dollars on other expense such as memberships, etc. Concerns regarding allowability to Medicaid.				
	MSHN will follow up on our guidance to the field.	By Who	J. Sedlock	By When	3.15.23
Hospital Payment Group	PIHPs and MHPs have been discussing the payment for boarding in Med Surg hospitals with a Psychiatric diagnosis. The proposal now is the public system be responsible for the cost. PIHPs response is that they are not funded for this cost. MDHHS indicating then they should fund the PIHPs for this but there is no experience rating to develop funding rate. Right now, the MHPs pay a DRG rate. On the med surg they are not paying, and the hospitals are absorbing the cost. Discussion is in process and more information to follow. Another meeting is occurring next week.				
	Informational only	By Who	N/A	By When	N/A
HIDE/FIDE	B. Krogman brought up the communication from the association regarding their support for the HIDE for dual eligibles. My Health link was complicated. Not enough information yet to determine.				
	Informational Only	By Who	N/A	By When	N/A