

**Substance Use Disorder (SUD)
Oversight Policy Advisory Board Meeting**

June 16, 2021 ~ 4:00 p.m.

Zoom Videoconference and Teleconference

Meeting URL: <https://us02web.zoom.us/j/5624476175> Meeting ID: 5624476175

- 1) Call to Order
- 2) Roll Call
- 3) **ACTION ITEM:** Approval of the Agenda for June 16, 2021
- 4) **ACTION ITEM:** Approval of Minutes of February 17, 2021 *(Item 4)*
- 5) Public Comment
- 6) Board Chair Report
 - A. Welcome to New Board Member: Joe Murphy, Huron County
 - B. Annual Board Member Disclosure Forms *(Item 6B)*
- 7) Deputy Director Report *(Item 7A)*
- 8) Chief Financial Officer Report
 - A. FY21 PA2 Funding & Expenditures by County *(Items 8A1/8A2)*
 - B. FY21 PA2 Use of Funds by County and Provider *(Item 8B)*
 - C. FY21 SUD Financial Summary Report of April 2021 *(Item 8C)*
 - D. Block Grant Reduction Update & Projections *(Item 8D)*
- 9) **ACTION ITEM:** FY21 Substance Use Disorder PA2 Contract Listing *(Item 9)*
- 10) SUD Operating Update
 - A. FY2021 Q2 SUD County Reports *(Item 10A)*
- 11) Other Business
 - A. MSHN Strategic Planning Presentation
- 12) Public Comment
- 13) Board Member Comment
- 14) Adjournment

**MSHN SUD Oversight Policy
Advisory Board Officers**

Chair: John Hunter (Tuscola)
Vice-Chair: Deb Thalison (Ionia)
Secretary: Bruce Caswell (Hillsdale)

TO JOIN THE MEETING:

Via Videoconference (link):

<https://us02web.zoom.us/j/5624476175>

Meeting ID: 5624476175

Via Teleconference:

Call 1.312.626.6799

Meeting ID: 5624476175

This meeting of the Mid-State Health Network SUD Oversight Policy Board is being held virtually under 2020 PA 254, Section 3a.(1) (b) which permits an electronic meeting of a public body due to a local state of emergency declared for the area which the public body usually holds its meetings in order to protect the health and safety of the board, staff and members of the public that participate in this meeting of this public body. MSHN offices are located in Ingham County, and this is the "usual meeting location" for Oversight Policy Board meetings. On May 25, 2021, the Ingham County Board of Commissioners continued its declaration of a county-wide state of emergency through June 30, 2021. The videoconferencing technology used for this meeting is intended to permit two-way communication for all meeting participants. If special accommodations are needed, please contact MSHN administration at 517.253.7525 as soon as possible.

**UPCOMING FY21
SUD OVERSIGHT POLICY
ADVISORY BOARD MEETINGS**
Meeting Locations to Be Determined

August 18, 2021

MSHN Board Approved Policies
May be Found at:

<http://www.midstatehealthnetwork.org/policies/>

Substance Use Disorder (SUD) Oversight Policy Advisory Board

02.17.2021

Mid-State Health Network SUD Oversight Policy Advisory Board

Wednesday, February 17, 2021, 4:00 p.m.

Zoom Meeting

Meeting Minutes

1. Call to Order

Chairperson Debbie Thalison called the MSHN SUD Regional Oversight Policy Board (OPB) of Directors Organizational Meeting to order at 4:02 p.m.

Board Member(s) Present: Jim Anderson (Bay), Nichole Badour (Gratiot), Bruce Caswell (Hillsdale), Steve Glaser (Midland), John Hunter (Tuscola), Bryan Kolk (Newaygo), Robert Luce (Arenac), Jim Moreno (Isabella), Vicky Schultz (Shiawassee), Todd Tennis (Ingham), Deb Thalison (Ionia), Kim Thalison (Eaton), David Turner (Osceola), Dwight Washington (Clinton) and Ed Woods (Jackson)

Board Member(s) Absent: John Bodis (Huron), Susan Guernsey (Mecosta), Christina Harrington (Saginaw), Tom Lindeman (Montcalm), and Leonard Strouse (Clare)

Alternate Members Present: John Kroneck (Montcalm)

Staff Members Present: Amanda Ittner (Deputy Director), Joe Sedlock (CEO), Dr. Dani Meier (Chief Clinical Officer), Leslie Thomas (Chief Financial Officer), Carolyn Tiffany (Director of Provider Network Management Systems), Dr. Trisha Thrush (Lead Treatment Specialist), Jill Worden (Lead Prevention Specialist), Michael Scott (Veterans Navigator), and Merre Ashley (Executive Assistant)

2. Roll Call

Ms. Merre Ashley provided the Roll Call for Board Attendance.

3. Approval of Agenda for February 17, 2021

Board approval was requested for the Agenda of the February 17, 2021 Regular Business Meeting, as presented.

ROPB 20-21-004 MOTION BY BRYAN KOLK, SUPPORTED BY STEVE GLASER, FOR APPROVAL OF THE FEBRUARY 17, 2021 REGULAR BUSINESS MEETING AGENDA, AS PRESENTED. MOTION CARRIED: 15-0.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

4. Approval of Minutes from the December 16, 2020 Regular Business Meeting

Board approval was requested for the draft meeting minutes of the December 16, 2020 Regular Business Meeting.

ROPB 20-21-005 MOTION BY JIM MORENO, SUPPORTED BY STEVE GLASER, FOR APPROVAL OF THE MINUTES OF THE DECEMBER 16, 2020 MEETING, AS PRESENTED. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, BRUCE CASWELL, STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 15-0.

Ms. Nichole Badour joined the meeting.

5. Public Comment

There was no public comment.

6. Board Chair Report

- Welcomed New Members:

- Jim Anderson (Bay County)
- Jim Moreno (Isabella County)
- Todd Tennis (Ingham County)
- David Turner (Osceola County)

- **Annual Organizational Meeting**

Announced opening of the 2021 Organizational Meeting's Board Officer Election, beginning with nominations for Board Chairperson:

Election of Board Chairperson:

Nomination from the Floor: Chairperson Thalison called for nomination from the floor, for the office of Chairperson:

ROPB 20-21-006 MOTION BY DEB THALISON, SUPPORTED BY BOB LUCE, TO NOMINATE JOHN HUNTER FOR THE OFFICE OF CHAIRPERSON. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, NICHOLE BADOUR, BRUCE CASWELL, STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 16-0.

ROPB 20-21-007 MOTION BY ED WOODS, SUPPORTED BY BOB LUCE, TO CLOSE NOMINATIONS AND CAST UNANIMOUS BALLOT FOR JOHN HUNTER AS BOARD CHAIRPERSON. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, NICHOLE BADOUR, BRUCE CASWELL, STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 16-0.

Mr. John Hunter invited Ms. Thalison to lead the remainder of the meeting.

Election of Board Vice-Chairperson

- Nominations from the Floor: Ms. Thalison called for nominations from the floor, for the office of Vice-Chairperson:

ROPB 20-21-008 MOTION BY BRYAN KOLK, SUPPORTED BY JOHN HUNTER TO CLOSE NOMINATIONS AND CAST UNANIMOUS BALLOT FOR DEB THALISON TO THE OFFICE OF VICE CHAIRPERSON. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, NICHOLE BADOUR, BRUCE CASWELL, STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 16-0.

Election of Board Secretary:

- Nominations from the Floor: Ms. Thalison called for nominations from the floor, for the office of Secretary.

ROPB 20-21-009 MOTION BY DEB THALISON, SUPPORTED BY JIM MORENO TO NOMINATE AND CAST UNANIMOUS BALLOT FOR BRUCE CASWELL AS BOARD SECRETARY. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, NICHOLE BADOUR, BRUCE CASWELL,

STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 16-0.

7. Deputy Director Report

Ms. Amanda Ittner provided an overview of the written report distributed separate from the meeting packet, and available on the MSHN website. Ms. Ittner reviewed additional information specific to the direct care premium pay increase, block grant reductions, and PA2 fund projections will be brought to the board in April and June.

8. Chief Financial Officer Report

Ms. Leslie Thomas provided an overview of the financial reports included in board meeting packets:

- FY2021 PA2 Funding and Expenditures by County
- FY2021 PA2 Use of Funds by County and Provider
- FY2021 Substance Use Disorder (SUD) Financial Summary Report of December 2020

9. FY21 Substance Use Disorder PA2 Contract Listing

Ms. Carolyn Tiffany provided an overview and information on the FY21 Substance Use Disorder PA2 Contract listing, recommended for board approval, as presented.

ROBP 20-21-010 MOTION BY JOHN KRONECK, SUPPORTED BY JIM MORENO, TO APPROVE THE FY21 SUBSTANCE USE DISORDER PA2 CONTRACT LISTING, AS PRESENTED. ROLL CALL VOTE: VOTING YES: JIM ANDERSON, NICHOLE BADOUR, BRUCE CASWELL, STEVE GLASER, JOHN HUNTER, BRYAN KOLK, JOHN KRONECK, ROBERT LUCE, JIM MORENO, VICKY SCHULTZ, TODD TENNIS, DAVID TURNER, DEB THALISON, KIM THALISON, DWIGHT WASHINGTON, AND ED WOODS. VOTING NO: N/A. MOTION CARRIED: 16-0.

10. Operating Update

Dr. Dani Meier provided an overview and information on the following:

- Block Grant Reductions
- SOR-2 Grant Funding

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

- SUD Strategic Planning

11. Other Business

No other business was brought forward.

12. Public Comment

Ms. Sandra Bristol announced she had been appointed by the Clare County Board of Commissioners to fill the seat vacated by Leonard Strouse. She announced official notice from Clare County would be forwarded ahead of the April meeting.

13. Board Member Comment

There were no comments.

14. Adjournment

Vice Chairperson Thalison adjourned the February 17, 2021, MSHN Substance Use Disorder Oversight Policy Advisory Board Meeting at 5:24 p.m.

*Meeting minutes submitted respectfully by:
MSHN Executive Assistant*

Annual Disclosure of Ownership, Controlling Interest, and Criminal Convictions

MSHN is contractually responsible for monitoring ownership and control interests within its provider network and disclosing criminal convictions of any staff member, director, or manager of MSHN, any individual with beneficial ownership of five percent or more, or an individual with an employment, consulting, or other arrangement with MSHN. Therefore, Board of Directors must complete an annual disclosure statement that ensures MSHNs compliance with the contractual and federal regulations to obtain, maintain, disclose, and furnish required information about ownership and control interests, business transactions, and criminal convictions.

In short order, Board Members will receive an email from Carolyn Tiffany, MSHN's Director of Provider Network Management Systems, with a request to complete and electronically sign a disclosure form (via DocuSign). The form can be completed on a smart phone or computer.

Common questions that arise when completing the form:

Question: Do I have to provide my social security number?

Answer: 42 CFR § 455.104 requires names, address, DOB, and Social Security numbers in the case of an individual.

Question: How will my information be kept confidential and secure?

Answer: MSHN maintains policies and practices that protect the confidentiality of personal information, including Social Security numbers, obtained from its providers and associates in the course of its regular business functions. MSHN is committed to protecting information about its providers and associates, especially the confidential nature of their personal information. Access to this, and other confidential documentation, is limited to MSHN staff who need to access information in order to perform their duties, relative to monitoring disclosures.

Question: What does MSHN do with the information it obtains through disclosure statements?

Answer: MSHN is required to ensure it does not have a 'relationship' with an 'excluded' individual and must search the Office of Inspector General's (OIG) exclusions database to ensure that the provider entity, and any individuals with ownership or control interests in the provider entity (direct or indirect ownership of five percent or more or a managing employee), have not been excluded from participating in federal health care programs. MSHN must search the OIG exclusions database monthly to capture exclusions and reinstatements that have occurred since the last search, or at any time new disclosure information is provided.

MSHN understands this is a new platform to obtain the information, so if you have questions about the disclosures or need assistance completing the electronic form, please feel free to reach out to Carolyn Tiffany at 517.657.3000 or via email at Carolyn.Tiffany@MidStateHealthNetwork.org.

Ownership & Controlling Interest Disclosure Statements

42 C.F.R. §455 Subpart B; 42 CFR 438.610; MDHHS Contract Section 34.0

Purpose:	<p>In order to comply with 42 CFR 438.610, the PIHP may not knowingly have a “relationship” of the type described below with any of the following:</p> <ol style="list-style-type: none"> An individual or entity that is debarred, suspended, or otherwise excluded from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549 or guidelines implementing Executive Order No. 12549; An individual or entity who is an “affiliate”, as defined in the Federal Acquisition Regulation at 48 CFR 2.101, of a person described in the immediately preceding subsection 1(a). <p>The PIHP will not have a “relationship” of the type described below (each a “prohibited relationship”) with any individual or entity that is excluded from participation in any Federal health care program under section 1128 or 1128A of the Social Security Act.</p> <p>For purposes of this section, a “relationship” means someone who the PIHP interacts with in any of the following capacities:</p> <ol style="list-style-type: none"> A director, officer, or partner of the PIHP; A subcontractor of the PIHP; A person with beneficial ownership of five (5) percent or more of the PIHP's equity; or A network provider or person with an employment, consulting or other arrangement for the provision of items and services which are significant and material to the Board’s obligations under the PIHP Contract. <p>“Excluded” individuals or entities are individuals or entities that have been excluded from participating, but not reinstated, in the Medicare, Medicaid, or any other Federal health care programs.</p>
Determining who to collect disclosures from:	<p>The MDHHS requires the PIHP to provide written disclosure in the case that any of the following is or becomes affiliated with any individual or entity that is debarred, suspended, or otherwise excluded from participating in procurement activities under the Federal Acquisition Regulation or from participating in non-procurement activities under regulations issued under Executive Order No. 12549 or guidelines implementing Executive Order No. 12549:</p> <ol style="list-style-type: none"> Any director, officer, or partner; Any subcontractor; Any person with ownership of 5% or more of the PIHPs equity; A network provider; and/or Any party to an employment, consulting, or other agreement with the PIHP for the provision of contract items or services
Frequency of Screening:	<p>MSHN collects disclosure statements during board orientation and annually thereafter.</p> <ul style="list-style-type: none"> Original disclosures may be signed on subsequent years if all information disclosed remains current and accurate. A new disclosure statement must be completed if any information has changed since the last disclosure.

Reporting:	<p>PIHPs are required to promptly notify the Division of Program Development, Consultation and Contracts, Behavioral Health and Developmental Disabilities Administration in MDHHS if:</p> <ul style="list-style-type: none"> a. Any disclosures are made by providers with regard to the ownership or control by a person that has been convicted of a criminal offense described under sections 1128(a) and 1128(b)(1), (2), or (3) of the Act, or that have had civil money penalties or assessments imposed under section 1128A of the Act. (See 42 CFR 1001.1001(a)(1): or b. Any staff member, director, or manager of the PIHP, individual with beneficial ownership of five percent or more, or an individual with an employment, consulting, or other arrangement with the PIHP has been convicted of a criminal offense described under sections 1128(a) and 1128(b)(1), (2), or (3) of the Act, or that have had civil money penalties or assessments imposed under section 1128A of the Act. (See 42 CFR 1001.1001(a)(1))
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Frequently Asked Questions

1. **Do I have to provide social security numbers?** 42 CFR § 455.104 requires names, address, DOB, and Social Security numbers in the case of an individual. MSHN maintains policies and practices that protect the confidentiality of personal information, including Social Security Numbers obtained from its providers and associates in the course of its regular business functions. MSHN is committed to protecting the
2. **What does MSHN do with the information it obtains through disclosure statements?** The PIHP is required to ensure it does not have a 'relationship' with an 'excluded' individual and must search the Office of Inspector General's (OIG) exclusions database to ensure that the provider entity, and any individuals with ownership or control interests in the provider entity (direct or indirect ownership of five percent or more or a managing employee), have not been excluded from participating in federal health care programs. The PIHP must search the OIG exclusions database monthly to capture exclusions and reinstatements that have occurred since the last search, or at any time providers submit new disclosure information.
3. **How will my information be kept confidential and secure?** MSHN maintains policies and practices that protect the confidentiality of personal information, including Social Security numbers, obtained from its providers and associates in the course of its regular business functions. MSHN is committed to protecting information about its providers and associates, especially the confidential nature of their personal information. Access to this, and other confidential documentation, is limited to MSHN staff who need to access information in order to perform their duties.

Community Mental Health
Member Authorities

Bay Arenac
Behavioral Health

CMH of
Clinton, Eaton, Ingham
Counties

CMH for Central Michigan

Gratiot Integrated Health
Network

Huron Behavioral Health

The Right Door for Hope,
Recovery and Wellness (Ionia
County)

LifeWays CMH

Montcalm Care Center

Newaygo County
Mental Health Center

Saginaw County CMH

Shiawassee Health and
Wellness

Tuscola Behavioral
Health Systems

Board Officers

Ed Woods
Chairperson

Irene O'Boyle
Vice-Chairperson

Colleen Maillette
Secretary

Kurt Peasley
Immediate Past Officer

REPORT OF THE MSHN DEPUTY DIRECTOR TO THE MSHN SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD (SUD OPB) April/May

MSHN/REGIONAL MATTERS

1. MSHN Internal Updates:

- MSHN is pleased to announce our newest team member, Sheryl Kletke. She began her employment with MSHN on June 7, 2021, as the Executive Assistant. Sherry comes to us with over 20 years of experience from Community Mental Health Authority of Clinton, Eaton and Ingham.
- MSHN staff continue to work 100% remote except for one staff person. Sheryl Kletke has been assigned to manage in-office operations, until a return-to-work plan has been finalized. Staff report being able to maintain job responsibilities and support of our network with minimal interruption/change in functions.
- MSHN's Provider Network continues to provide essential services and supports with a mix of both in-person and telehealth services.
- MSHN continues to meet weekly with MDHHS regarding COVID-19, including pandemic updates, new policies/waiver change, and provider stabilization supports. The latest updates have included directions and/or concerns regarding the vaccination roll out by health departments.
- MSHN's [COVID-19 webpage](#) provides updates regarding federal, state and regional responses to the pandemic. Included under the resources section is [COVID risk graphs](#) for our region available for use by the network.

2. Parameters for the new COVID-specific SAPT Block Grant funding

MDHHS has received federal approval of its spending proposal. MDHHS/OROSC is developing a request for information/proposals to be completed by Michigan's PIHPs consistent with federal and state guidelines, which have not yet been officially released. State matching appropriations will also be needed.

MDHHS also recently received a Notice of Award from SAMHSA for a another COVID-19 Block Grant Supplemental funded by the American Rescue Plan. The amount of funding provided to Michigan by this grant is \$45,374,413. The grant period is from September 1, 2021, to September 30, 2025. As was the case with the previous supplemental, they need to submit a spending proposal due July 2nd to SAMHSA for approval to draw down funds.

3. Mid-State Health Network Board Statement on Legislative Public Behavioral Health Systems Redesign Proposal

Recent proposals in the House and Senate fundamentally change the public behavioral health system. The Mid-State Health Network Board of Directors opposes these proposals because:

- Beneficiaries and their families, and the communities that support them, are opposed as was well documented in prior redesign efforts and would stand to lose access to

services, supports and input into the design and operation of their services and supports system. Many Michiganders are left out of the redesign proposals completely.

- Public oversight, governance, operations, and accountability would be ended.
- Current proposals for redesign are not based on performance metrics related to positive outcomes, effectiveness, and efficiency measures associated with the current public system and there is no clear statement about the problem or problems that the Senate or House are attempting to address or solve.
- These proposals incentivize and prioritize profits to private companies at the expense of the public and the beneficiaries served by the public behavioral health system.
- These proposals, if enacted, would inappropriately overlay a medical model where a social supports and service model is necessary to effectively support beneficiaries.
- These proposals seek financial integration and ignore integration where it is most meaningful and beneficial to recipients, which is at the point of service.

Instead of damaging the public behavioral health system through pursuit of these proposals, recent innovations by the public behavioral health system should be supported. The Mid-State Health Network Board of Directors supports, and asks our Legislative and Executive Branch leaders to support:

- Certified Community Behavioral Health Clinics (CCBHCs).
- Behavioral Health Homes.
- Opioid Health Homes.
- State Innovation Models.
- Local primary and behavioral health integration infrastructure and care coordination at the point of service delivery.

These innovations themselves address most access challenges and gaps of most concern to citizens and PIHPs and should be fostered, nurtured and supported by State government.

To view the full statement, see [MSHN Statement on System Redesign](#).

STATE OF MICHIGAN/STATEWIDE ACTIVITIES

4. Open Meeting Act Statute – Virtual Meetings Extended:

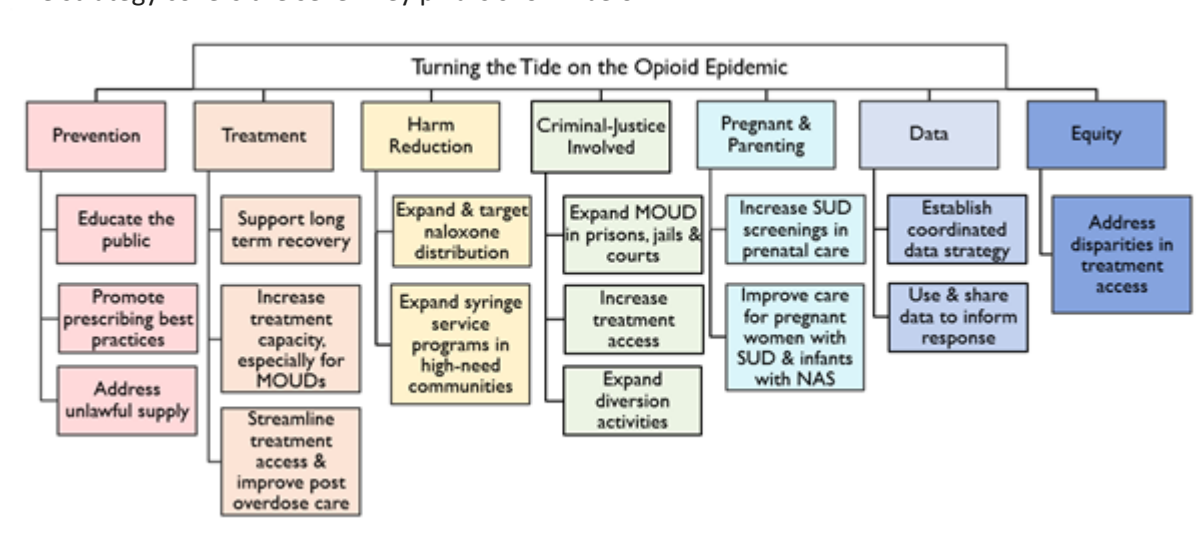
The Michigan Legislature has passed, and Governor Whitmer has signed, what is now PA 254 of 2020 which extends authorization for virtual meetings of public bodies for any reason through March 30, 2021. On and after March 31 through 12/31/21, virtual meetings are only allowed under specific circumstances, which includes if the county declares a Public Health Emergency (PHE). Ingham County declared a PHE through June 30, 2021. MSHN will monitor the declaration for extension of the due date, but anticipates the August 2021 SUD Oversight Policy Board meeting will be a hybrid of both in-person and virtual attendance.

5. Michigan Opioids Task Force Annual Report

The Michigan Opioids Task Force and Michigan Department of Health and Human Services (MDHHS) have released the 2020 annual report that highlights the state's efforts to respond to the opioid crisis. Highlighted initiatives include launching a statewide naloxone portal that has distributed over 100,000 kits containing the lifesaving overdose reversal medication. Another is starting a public media campaign focused on elevating the voices of Michiganders who have lived experiences to share the effect of opioids and increase awareness of harm reduction services. That campaign has gained national attention.

MDHHS also worked closely with the Michigan Opioid Project in 2020 to launch programs based in 17 hospital emergency departments to treat opioid use disorder with plans to expand statewide in 2021. The 2020 Michigan Opioids Task Force Annual Report, which can be found on the [Michigan Opioids Resource website](#), outlines progress by the group, which was appointed by Gov. Gretchen Whitmer as part of a goal to reduce opioid overdose deaths in Michigan in half from 2020 to 2025.

The strategy covers the seven key pillars shown below:



6. MDHHS Suicide Prevention Commission Releases Initial Report

The MDHHS Suicide Prevention Commission has worked diligently on the report over the past several months to address suicide in Michigan. The Suicide Prevention Commission meetings are open to the public. More information on meetings and past meeting minutes can be found on the [MDHHS - Michigan Suicide Prevention Commission website](#). The initial report is also posted there. Over the next few months this report will be reviewed all over the state and plans will be made to implement these recommendations.

FEDERAL/NATIONAL ACTIVITIES

7. Medicaid Delivery System Reforms for Substance Use Disorder

The Milbank Memorial Fund has released two documents addressing Medicaid Delivery System Reforms for Substance Use Disorder. “As the nation’s largest payer for SUD treatment and recovery services, Medicaid plays a significant role in shaping their delivery and reimbursement. The document by Academy Health’s Medicaid Outcomes Distributed Research Network examines the policy levers available to state Medicaid programs to improved SUD treatment—and offers examples of SUD care delivery innovations. First is a primer that outlines how state Medicaid programs can use their roles a payer and contractor, collaborator, evaluator, and educator, and as regulator, monitor and enforcer to improve SUD treatment—and offers examples of SUD delivery treatment. A new issue brief describes two important opioid use disorder delivery innovations: 1) health homes, and 2) warm handoffs and care transitions.” The primer is available at [Primer on State Medicaid Programs](#), while the issue brief is available at [Issue Brief on Medicaid Programs](#).

The Milbank Memorial Fund has released a blog post entitled *The Need to Expand Buprenorphine Prescribing to Treat Opioid Use Disorder*. The post notes that “despite overwhelming research showing that three approved medications to treat opioid use disorder (OUD) are effective, too few of the estimated 1.6 million US residents with the disease can access these medications. In particular, buprenorphine has been shown to reduce mortality and illicit opioid use and increase treatment retention. Yet in 2019, only 18.1% of people with OUD received buprenorphine or one of the other approved drugs. One important reason for the low rate of buprenorphine use is that too few medical professionals prescribe this clinically effective treatment.”

The entire blog post is available at [Milbank Blog Post](#)

8. One Year into the Pandemic: Implications of COVID-19 for Social Determinants of Health

The Kaiser Family Foundation has released a briefing entitled *One Year into the Pandemic: Implications of COVID-19 for Social Determinants of Health*. The paper notes that “Even as the COVID-19 vaccine roll-out is accelerating across the country, the public health and economic effects of the pandemic continue to affect the well-being of many Americans. The American Rescue Plan includes additional funding not only to address the public health crisis of the pandemic, but also to provide economic support to many low-income people struggling to make ends meet. Millions have lost jobs or income in the past year, making it difficult to pay expenses including basic needs like food and housing. These challenges will ultimately affect people’s health and well-being, as they influence social determinants of health. This brief provides an overview of social determinants of health and a look at how adults are faring across an array of measures one year into the pandemic. Addressing the question of ‘How are adults faring across a range of social determinants of health during the pandemic?’ the brief notes that:

- Across a wide range of metrics, large shares of people are experiencing hardship. Since the start of the pandemic, shares of people reporting hardship across various measures has been relatively constant, with a slight peak for the December reporting periods. For the most recent period, February 3-February 15:
 - Nearly half adults (47%) reported that they or someone in their household had experienced a loss of employment income, and one in five applied for Unemployment Insurance (UI) benefits since March 2020;
 - More than six in ten (61%) adults reported difficulty paying for usual household expenses in the past 7 days, and 27% used credit cards or loans to meet household spending needs;
 - More than 7% of adults had no confidence in their ability to make next month’s housing payment (across renters and owners), and 11% reported food insufficiency in their household;
 - Three in ten (30%) adults reported delaying medical care in the last four weeks due to the pandemic and 39% reported symptoms of depression or anxiety.
- Black and Hispanic adults fare worse than White adults across nearly all measures, with large differences in some measures. For example, just over 75% of Black and Hispanic adults reported difficulty paying household expenditures compared to 53% of White adults; about 13% of Black and Hispanic adults reported no confidence in their ability to make next month’s housing payment compared to 5% of White adults, and 20% of Black adults and 18% of Hispanic adults reported food insufficiency in the household compared to 8% of White adults.
- While variation across age and gender was not as stark, in general younger adults (ages 18 to 44) and women fared worse on most measures compared to older adults and men. For example, higher shares of younger adults and women reported symptoms of anxiety and depression as well as difficulty paying for usual household expenses. Higher shares of younger adults reported food insufficiency in their household and higher shares of women reported delaying medical care in the last four weeks due to the pandemic. As with race/ethnicity, some of these differences in social determinants were present even before the

pandemic but understanding them in the context of heightened levels of need over the past year highlights these differences and who may benefit most from assistance.

- Across most measures, adults with children in their household fared worse compared to overall adults. For example, 53% of adults with children in the household experienced loss of employment income in the household compared to 47% of adults overall, and just over two-thirds of adults with children in the household reported difficulty paying for household expenses compared to the overall population of 61%. Notably, adults in households with children were more likely to report food insufficiency than the general population.”

The entire brief is available at <https://www.kff.org/coronavirus-covid-19/issue-brief/one-year-into-the-pandemic-implications-of-covid-19-for-social-determinants-of-health/>.

9. Biden-Harris Administration Announces First-Year Drug Policy Priorities

The [Biden-Harris Administration’s Statement of Drug Policy Priorities](#) lays out the urgent, first-year steps that must be taken to address the Nation’s overdose and addiction epidemic. The implementation of these priorities will complement both President Biden’s tireless efforts to give American families the tools they need to build back better and implement the American Rescue Plan, which includes an investment of nearly \$4 billion in behavioral health services.

As we strive to face a unique set of challenges in addressing the COVID-19 pandemic in our Nation, we must simultaneously address the worsening addiction and overdose epidemic. These actions are critical at a moment when the latest provisional data from the Centers for Disease Control and Prevention shows that 88,000 people died of an overdose in the 12-month period ending in August 2020, a 26.8% increase, year-over-year. Similarly, overdose rates are also increasing in certain communities of color, underscoring historic racial inequities.

That is why the Biden-Harris Administration is taking a focused, whole-of-government approach to reducing overdoses and saving lives. In the next year, the Office of National Drug Control Policy (ONDCP) will work across the government to implement the following seven priorities:

- Expanding access to evidence-based treatment
- Advancing racial equity in our approach to drug policy
- Enhancing evidence-based harm reduction efforts
- Supporting evidence-based prevention efforts to reduce youth substance use
- Reducing the supply of illicit substances
- Advancing recovery-ready workplaces and expanding the addiction workforce
- Expanding access to recovery support services

Submitted by:



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Finalized: 6/8/2021

**Mid-State Health Network
FY2021 PA2 Funding Summary by County**

County	Beginning PA2 Fund Balance	Payment Amount	Date Received	Payment Amount	Date Received	Payment Amount	Date Received	Total Amount Anticipated	Total Amount Received	Beginning PA2 Fund Balance and Receipts
Arenac	76,431	15,112	05.14.21					34,960	15,112	91,543
Bay	1,007,790							205,048	-	1,007,790
Clare	207,257							51,253	-	207,257
Clinton	449,115							124,880	-	449,115
Eaton	599,531							228,509	-	599,531
Gladwin	78,312							38,510	-	78,312
Gratiot	111,762							50,780	-	111,762
Hillsdale	121,230	22,950	05.07.21					49,079	22,950	144,180
Huron	191,125							63,982	-	191,125
Ingham	806,542							678,015	-	806,542
Ionia	451,620							76,540	-	451,620
Isabella	676,608							135,120	-	676,608
Jackson	626,551							323,618	-	626,551
Mecosta	395,797							91,312	-	395,797
Midland	462,247							153,648	-	462,247
Montcalm	330,585							104,489	-	330,585
Newaygo	109,449							87,981	-	109,449
Osceola	150,367							32,877	-	150,367
Saginaw	2,000,969							475,526	-	2,000,969
Shiawassee	552,362							96,419	-	552,362
Tuscola	250,351							56,919	-	250,351
	<u>\$ 9,656,000</u>	<u>\$ 38,062</u>		<u>\$ -</u>		<u>\$ -</u>		<u>\$ 3,159,460</u>	<u>\$ 38,062</u>	<u>\$ 9,694,062</u>

Mid-State Health Network
FY2021 PA2 Expenditure Summary by County

County	Beginning PA2 Fund Balance and Receipts	County Code	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	YTD Payments	Ending PA2 Fund Balance
Arenac	91,543	06	1,452	2,859	966	2,689	2,448	2,734	1,967						15,115	\$ 76,428
Bay	1,007,790	09	10,312	29,425	22,371	22,030	17,431	16,493	19,305						137,367	\$ 870,423
Clare	207,257	18	6,610	7,439	7,191	7,357	7,041	6,704	7,088						49,430	\$ 157,827
Clinton	449,115	19	11,861	7,169	11,761	7,226	7,328	7,584	8,311						61,238	\$ 387,877
Eaton	599,531	23	18,539	16,144	24,054	16,570	16,046	16,387	16,489						124,228	\$ 475,302
Gladwin	78,312	26	2,363	2,450	2,878	2,241	1,987	1,735	1,916						15,570	\$ 62,742
Gratiot	111,762	29	5,028	4,599	5,901	4,766	5,287	3,834	5,713						35,129	\$ 76,633
Hillsdale	144,180	30	524	2,165	-	2,390	1,396	823	-						7,298	\$ 136,882
Huron	191,125	32	4,173	4,123	2,777	3,339	5,300	5,066	4,271						29,049	\$ 162,076
Ingham	806,542	33	55,727	40,671	52,568	42,584	37,158	39,529	43,403						311,641	\$ 494,901
Ionia	451,620	34	4,423	13,629	5,867	6,533	5,706	15,958	12,463						64,579	\$ 387,041
Isabella	676,608	37	14,905	15,493	18,133	19,450	14,049	17,513	18,389						117,932	\$ 558,676
Jackson	626,551	38	8,485	32,945	20,516	21,003	32,426	5,490	16,893						137,757	\$ 488,794
Mecosta	395,797	54	12,352	13,926	13,278	14,600	13,407	14,338	14,075						95,976	\$ 299,821
Midland	462,247	56	9,016	9,943	6,893	6,750	10,459	18,953	26,290						88,304	\$ 373,943
Montcalm	330,585	59	2,040	2,121	2,071	2,142	2,104	50,785	1,820						63,084	\$ 267,501
Newaygo	109,449	62	3,439	2,861	2,426	2,734	2,630	2,944	8,859						25,892	\$ 83,557
Osceola	150,367	67	5,064	5,204	5,271	6,095	5,367	5,837	5,882						38,720	\$ 111,647
Saginaw	2,000,969	73	43,801	54,200	54,950	71,839	67,575	64,563	51,567						408,493	\$ 1,592,476
Shiawassee	552,362	78	19,053	17,089	26,729	21,747	8,914	17,959	17,602						129,093	\$ 423,269
Tuscola	250,351	79	5,228	5,858	3,480	4,184	6,700	6,348	5,351						37,149	\$ 213,202
<u>\$ 9,694,062</u>			<u>\$ 244,393</u>	<u>\$ 290,315</u>	<u>\$ 290,080</u>	<u>\$ 288,267</u>	<u>\$ 270,758</u>	<u>\$ 321,577</u>	<u>\$ 287,654</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>1,993,045</u>	<u>\$ 7,701,017</u>

Mid-State Health Network
 Summary of PA2 Use of Funds by County and Provider
 October 1, 2020 through April 30, 2021

County and Provider	Case Management	Early Intervention	Prevention	Recovery Support	Grand Total
Arenac					
Peer 360 Recovery				10,105	10,105
Sterling Area Health Center			5,010		5,010
Arenac Total			5,010	10,105	15,115
Bay					
Boys and Girls Club Bay Region			21,945		21,945
Neighborhood Resource Center			38,235		38,235
Peer 360 Recovery				19,452	19,452
Sacred Heart Rehabilitation			6,257		6,257
Sterling Area Health Center			3,628		3,628
Ten Sixteen Recovery		11,358		36,493	47,851
Bay Total		11,358	70,064	55,945	137,367
Clare					
Ten Sixteen Recovery		9,284	25,965	14,181	49,430
Clare Total		9,284	25,965	14,181	49,430
Clinton					
Eaton Regional Education Service Agency			55,861		55,861
St. John's Police Department			376		376
State of Michigan MRS	5,000				5,000
Clinton Total	5,000		56,238		61,238
Eaton					
Barry Eaton District Health			6,705		6,705
Eaton Regional Education Service Agency			60,299		60,299
Prevention Network			8,159		8,159
State of Michigan MRS	5,000				5,000
Wellness, InX		44,065			44,065
Eaton Total	5,000	44,065	75,164		124,228
Gladwin					
Ten Sixteen Recovery		4,996	5,626	4,948	15,570
Gladwin Total		4,996	5,626	4,948	15,570
Gratiot					
Gratiot County Child Advocacy Association			27,044		27,044
Ten Sixteen Recovery		8,085			8,085
Gratiot Total		8,085	27,044		35,129
Hillsdale					
McCullough, Vargas, and Associates		2,257	5,041		7,298
Hillsdale Total		2,257	5,041		7,298
Huron					
Peer 360 Recovery				29,049	29,049
Huron Total				29,049	29,049

Mid-State Health Network
Summary of PA2 Use of Funds by County and Provider
October 1, 2020 through April 30, 2021

County and Provider	Case Management	Early Intervention	Prevention	Recovery Support	Grand Total
Ingham					
Child and Family Charities			18,755		18,755
Cristo Rey Community Center		46,015	6,854		52,869
Eaton Regional Education Service Agency			10,446		10,446
Ingham County Health Department			8,678		8,678
State of Michigan MRS	15,000				15,000
Wellness, InX		88,442		117,451	205,893
Ingham Total	15,000	134,457	44,732	117,451	311,641
Ionia					
County of Ionia			43,183		43,183
Wedgwood Christian Services				21,396	21,396
Ionia Total			43,183	21,396	64,579
Isabella					
Addiction Solutions Counseling Center			2,148		2,148
Peer 360 Recovery				273	273
Ten Sixteen Recovery		8,027	30,735	76,749	115,511
Isabella Total		8,027	32,883	77,022	117,932
Jackson					
Family Service and Childrens Aid (Born Free)			62,036		62,036
Henry Ford Allegiance			4,459		4,459
Home of New Vision		11,646		59,616	71,262
Jackson Total		11,646	66,495	59,616	137,757
Mecosta					
Ten Sixteen Recovery		15,327	22,751	57,898	95,976
Mecosta Total		15,327	22,751	57,898	95,976
Midland					
Peer 360 Recovery				36,010	36,010
Ten Sixteen Recovery		21,071		5,134	26,205
The Legacy Center for Community Success			26,089		26,089
Midland Total		21,071	26,089	41,144	88,304
Montcalm					
Mid-Michigan District Health Department			33,347	15,456	48,803
Wedgwood Christian Services		14,281			14,281
Montcalm Total		14,281	33,347	15,456	63,084
Newaygo					
Arbor Circle			19,727		19,727
Newaygo County RESA			6,165		6,165
Newaygo Total			25,892		25,892
Osceola					
Ten Sixteen Recovery		12,181	26,539		38,720
Osceola Total		12,181	26,539		38,720

Mid-State Health Network
Summary of PA2 Use of Funds by County and Provider
October 1, 2020 through April 30, 2021

County and Provider	Case Management	Early Intervention	Prevention	Recovery Support	Grand Total
Saginaw					
First Ward Community Service			124,244		124,244
Great Lakes Bay Health Center			23,039		23,039
Parishioners on Patrol			5,000		5,000
Peer 360 Recovery				50,009	50,009
Sacred Heart Rehabilitation			20,730		20,730
Saginaw County Youth Protection Council			104,164		104,164
Saginaw Police Department			12,686		12,686
Ten Sixteen Recovery		11,390		57,231	68,621
Saginaw Total		11,390	289,863	107,240	408,493
Shiawassee					
Catholic Charities of Shiawassee and Genesee			73,633		73,633
Peer 360 Recovery				870	870
Prevention Network			43,515		43,515
Shiawassee County			6,075		6,075
State of Michigan MRS	5,000				5,000
Shiawassee Total	5,000		123,223	870	129,093
Tuscola					
List Psychological Services			751		751
Peer 360 Recovery				36,398	36,398
Tuscola Total			751	36,398	37,149
Grand Total	30,000	308,425	1,005,900	648,719	1,993,045

Mid-State Health Network
Summary of SUD Revenue and Expenses as of April 2021 (58.3% of budget)

	Year to Date Actual	Full Year Budget	Remaining Budget	% to Budget
Revenue				
Block Grant	5,111,937.26	14,979,809.00	9,867,871.74	34.13%
SOR Grants	543,209.48	1,666,979.00	1,123,769.52	32.59%
Medicaid	8,567,538.18	13,411,761.00	4,844,222.82	63.88%
Healthy Michigan	17,465,126.00	23,362,573.00	5,897,447.00	74.76%
PA2	1,993,044.60	4,603,141.00	2,610,096.40	43.30%
Totals	33,680,855.52	58,024,263.00	24,343,407.48	58.05%
Direct Expenses				
Block Grant	5,111,937.26	13,280,058.00	8,168,120.74	38.49%
SOR Grants	543,209.48	1,543,742.00	1,000,532.52	35.19%
Medicaid	5,908,137.53	12,300,000.00	6,391,862.47	48.03%
Healthy Michigan	12,592,697.58	21,900,000.00	9,307,302.42	57.50%
PA2	1,993,044.60	4,603,141.00	2,610,096.40	43.30%
Totals	26,149,026.45	53,626,941.00	27,477,914.55	48.76%
Surplus / (Deficit)	7,531,829.07			
Surplus / (Deficit) by Funding Source				
Block Grant	-			
SOR Grants	-			
Medicaid	2,659,400.65			
Healthy Michigan	4,872,428.42			
PA2	-			
Totals	7,531,829.07			

Actual revenue greater than budgeted revenue

Actual expenses greater than budgeted expenses

Block Grant Update

Federal Substance Abuse Prevention & Treatment Block Grant (SAPTBG) Funds are available to pay the cost of services for individuals who have no insurance or are underinsured. These dollars may also be used to fund discretionary services that are not funded by Medicaid or HMP (examples: transportation assistance, recovery housing). Beginning January 1, 2021, MSHN implemented a number of Block Grant Spending Reductions strategies to align actual expenses with a nearly 37% decrease in MDHHS funding. The summary of changes includes benefit plan modifications such as authorization adjustments and reduced service episodes. In addition, some services were impacted by implementing lower reimbursement rates and applying higher consumer copays.

Please Note: MSHN committed that individuals already in treatment prior to January 1, 2021 would not be subject to the new Block Grant benefit limits. As such, the Utilization Management team continued to authorize accordingly at previous levels. As we move throughout the remainder of Fiscal Year 2021, we anticipate a more noticeable reduction in costs as those individuals phase out of treatment. Persons who entered treatment on or after January 1, 2021 are subject to benefit limits.

The strategies implemented are helping MSHN see lower overall trends in paid amounts, cases, and units since January 2021. The attached document displays spending from July 2020 through April 2021. The Analytical Summary box on page two (2) examines the average for July - December 2020 as compared to January and then the next month February is compared to the prior one and so on. The analysis highlights that we are moving in the right direction to achieve the goal of bringing actual expenses closer to available Block Grant Revenue. A few items to note regarding the analysis:

- April 2021 data is not included as claims for this month are incomplete (claims lag). In addition, report totals for months included in the attached analysis may vary as more claims trickle in but significant changes are not anticipated.
- Case count decreases should be primarily related to Block Grant changes.
- Unit decreases result from Block Grant changes and shifting multiple services into one bundled reimbursement.

This report format will be used to keep you updated for the remainder of this fiscal year-end (9.30.2021).

Mid-State Health Network
Summary of Block Grant Funded Claims for Dates of Service July 1, 2020 through April 30, 2021

Service Code	2020 July	August	September	October	November	December	2021 January	February	March	April	Reduction Strategy
90791 - Psychiatric Evaluation											Benefit Plan Change
Sum of PAID AMOUNT	\$ 225.00				\$ 112.50						
Sum of ALLOWED UNITS	2				1						
Distinct Count of CASE #	2				1						
90832 - Individual Therapy											Benefit Plan Change
Sum of PAID AMOUNT	\$ 16,044.40	\$ 10,101.34	\$ 9,259.86	\$ 8,486.99	\$ 5,494.28	\$ 4,400.07	\$ 4,682.00	\$ 5,750.00	\$ 4,677.00	\$ 2,863.00	
Sum of ALLOWED UNITS	303	196	181	167	112	91	89	109	87	52	
Distinct Count of CASE #	150	130	119	113	81	67	69	72	62	34	
90834 - Individual Therapy											Benefit Plan Change
Sum of PAID AMOUNT	\$ 9,188.50	\$ 17,205.39	\$ 18,556.19	\$ 16,484.63	\$ 9,817.54	\$ 9,879.00	\$ 10,825.66	\$ 11,488.97	\$ 5,153.52	\$ 4,203.58	
Sum of ALLOWED UNITS	125	218	232	211	133	136	138	143	64	55	
Distinct Count of CASE #	83	149	143	126	97	92	95	102	52	44	
90837 - Individual Therapy											Benefit Plan Change
Sum of PAID AMOUNT	\$ 22,627.92	\$ 23,298.30	\$ 26,252.38	\$ 24,187.22	\$ 14,059.15	\$ 13,661.31	\$ 10,696.31	\$ 11,559.22	\$ 17,829.95	\$ 14,422.50	
Sum of ALLOWED UNITS	233	233	268	246	148	146	109	119	170	133	
Distinct Count of CASE #	109	134	137	119	88	71	65	69	78	64	
90853 - Group Therapy											Benefit Plan Change
Sum of PAID AMOUNT	\$ 3,973.50	\$ 5,418.40	\$ 6,623.52	\$ 17,583.52	\$ 7,737.04	\$ 5,928.50	\$ 3,592.63	\$ 2,243.00	\$ 9,368.77	\$ 3,144.50	
Sum of ALLOWED UNITS	57	74	89	207	105	86	53	34	109	41	
Distinct Count of CASE #	22	32	39	78	52	36	27	17	38	21	
96372 - Medication Administration											Benefit Plan Change
Sum of PAID AMOUNT										\$ 29.00	
Sum of ALLOWED UNITS										1	
Distinct Count of CASE #										1	
99202 - E&M - New Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 552.00	\$ 472.54	\$ 837.42	\$ 920.00	\$ 368.00	\$ 276.00	\$ 261.00	\$ 348.00	\$ 92.00	\$ 92.00	
Sum of ALLOWED UNITS	6	6	10	10	4	3	3	4	1	1	
Distinct Count of CASE #	6	6	10	10	4	3	3	4	1	1	
99203 - E&M - New Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT									\$ 271.00	\$ 77.25	
Sum of ALLOWED UNITS									2	1	
Distinct Count of CASE #									2	1	
99212 - E&M - Existing Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT							\$ 36.41				
Sum of ALLOWED UNITS							1				
Distinct Count of CASE #							1				
99213 - E&M - Existing Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 4,514.18	\$ 4,888.11	\$ 5,303.73	\$ 4,664.11	\$ 4,610.31	\$ 3,865.35	\$ 2,846.81	\$ 2,462.55	\$ 1,695.05	\$ 1,096.05	
Sum of ALLOWED UNITS	54	60	67	61	59	50	36	32	21	14	
Distinct Count of CASE #	47	55	60	52	55	41	35	30	20	14	
99214 - E&M - Existing Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT										\$ 92.84	
Sum of ALLOWED UNITS										1	
Distinct Count of CASE #										1	
99215 - E&M - Existing Consumer											Benefit Plan and Copay Changes
Sum of PAID AMOUNT										\$ 41.06	
Sum of ALLOWED UNITS										1	
Distinct Count of CASE #										1	
A0110 - Transportation - Bus Token											Benefit Plan Change
Sum of PAID AMOUNT	\$ 481.96	\$ 414.00	\$ 645.98	\$ 549.96	\$ 576.99	\$ 601.99	\$ 12.50	\$ 56.97	\$ 151.96	\$ 45.49	
Sum of ALLOWED UNITS	23	23	36	31	32	27	2	3	7	3	
Distinct Count of CASE #	21	23	34	29	32	27	2	3	7	3	
G2067 - Methadone Weekly Bundle											Benefit Plan Change
Sum of PAID AMOUNT	\$ 400.00	\$ 300.00	\$ 180.00	\$ 80.00	\$ 100.00		\$ 322.25				
Sum of ALLOWED UNITS	10	12	8	4	5		4				
Distinct Count of CASE #	4	4	3	1	1		2				
G2078 - Methadone Take Home Supply											Benefit Plan Change
Sum of PAID AMOUNT	\$ 14.12	\$ 21.18	\$ 14.12								
Sum of ALLOWED UNITS	2	3	2								
Distinct Count of CASE #	1	1	2								
H0001 - Assessment											Benefit Plan Change
Sum of PAID AMOUNT	\$ 9,832.73	\$ 10,487.56	\$ 11,415.27	\$ 9,920.62	\$ 6,920.58	\$ 5,737.50	\$ 6,619.54	\$ 6,502.50	\$ 5,407.81	\$ 4,207.50	
Sum of ALLOWED UNITS	78	82	87	73	56	45	53	51	43	33	
Distinct Count of CASE #	78	82	87	73	56	45	53	51	43	33	
H0003 - Drug Screen											Benefit Plan Change
Sum of PAID AMOUNT	\$ 255.00	\$ 127.50	\$ 51.00	\$ 76.50	\$ 127.50	\$ 76.50	\$ 51.00	\$ 51.00			
Sum of ALLOWED UNITS	10	5	2	3	5	3	2	2			
Distinct Count of CASE #	7	4	2	2	4	2	2	2			
H0004 - Individual Counseling											Benefit Plan Change
Sum of PAID AMOUNT	\$ 7,987.50	\$ 7,218.50	\$ 6,788.00	\$ 7,230.00	\$ 6,791.00	\$ 7,549.00	\$ 6,667.00	\$ 4,479.00	\$ 3,702.00	\$ 1,444.50	
Sum of ALLOWED UNITS	367	345	324	348	316	364	311	218	173	69	
Distinct Count of CASE #	60	64	64	69	68	62	66	45	37	14	
H0005 - Group Counseling											Benefit Plan Change
Sum of PAID AMOUNT	\$ 748.00	\$ 1,767.00	\$ 1,260.00	\$ 2,178.00	\$ 1,476.00	\$ 2,019.00	\$ 1,476.00	\$ 738.00	\$ 492.00	\$ 861.00	
Sum of ALLOWED UNITS	18	42	30	53	36	49	36	18	12	21	
Distinct Count of CASE #	11	13	12	16	17	18	15	7	5	6	
H0006 - Case Management											Benefit Plan Change
Sum of PAID AMOUNT	\$ 14,131.00	\$ 14,399.00	\$ 15,081.00	\$ 17,172.00	\$ 13,587.50	\$ 15,940.00	\$ 14,065.50	\$ 9,774.00	\$ 10,780.00	\$ 6,923.50	
Sum of ALLOWED UNITS	342	347	365	407	328	384	339	236	261	169	
Distinct Count of CASE #	226	240	239	266	229	236	229	172	164	122	
H0010 - Withdrawal Management											Benefit Plan Change
Sum of PAID AMOUNT	\$ 8,970.00	\$ 3,450.00	\$ 4,485.00	\$ 8,300.00	\$ 3,450.00	\$ 4,830.00	\$ 3,105.00	\$ 6,900.00	\$ 6,210.00	\$ 5,175.00	
Sum of ALLOWED UNITS	26	10	13	24	10	14	9	20	18	15	
Distinct Count of CASE #	9	3	6	7	3	5	3	6	5	4	
H0012 - Withdrawal Management											Benefit Plan Change
Sum of PAID AMOUNT	\$ 1,875.00	\$ 937.50	\$ 1,290.00	\$ 1,562.50	\$ 937.50			\$ 625.00	\$ 4,415.00		
Sum of ALLOWED UNITS	6	3	4	5	3			2	14		
Distinct Count of CASE #	2	1	2	2	1			1	4		
H0018 - Residential Treatment											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 2,123.50	\$ 890.50		\$ 68.50				\$ 598.50	\$ 399.00		

Mid-State Health Network
Summary of Block Grant Funded Claims for Dates of Service July 1, 2020 through April 30, 2021

Service Code	2020					2021					Reduction Strategy
	July	August	September	October	November	December	January	February	March	April	
Sum of ALLOWED UNITS	31	13		1				9	6		
Distinct Count of CASE #	1	1		1				1	2		
H0019 - Residential Treatment											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 29,109.50	\$ 29,032.00	\$ 28,519.00	\$ 29,257.50	\$ 27,401.00	\$ 28,633.50	\$ 36,053.50	\$ 26,424.00	\$ 19,709.00	\$ 19,028.50	
Sum of ALLOWED UNITS	190	191	187	191	180	189	246	186	137	124	
Distinct Count of CASE #	16	14	16	14	16	15	15	18	11	10	
H0020 - Methadone Dosing											Benefit Plan Change
Sum of PAID AMOUNT	\$ 29,960.00	\$ 28,448.00	\$ 26,688.00	\$ 26,520.00	\$ 23,392.00	\$ 22,160.00	\$ 19,096.00	\$ 13,712.00	\$ 11,080.00	\$ 5,800.00	
Sum of ALLOWED UNITS	3,745	3,556	3,336	3,315	2,924	2,770	2,387	1,714	1,385	725	
Distinct Count of CASE #	131	122	124	119	103	95	87	72	57	37	
H0038 - Peer Recovery Supports											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 37,553.30	\$ 50,190.50	\$ 47,739.00	\$ 54,705.24	\$ 51,227.00	\$ 42,126.50	\$ 28,540.50	\$ 22,613.25	\$ 18,449.50	\$ 1,186.50	
Sum of ALLOWED UNITS	2,711	3,675	3,555	4,031	3,915	3,115	2,289	1,696	1,732	199	
Distinct Count of CASE #	127	118	144	169	160	153	135	108	104	23	
H0048 - Drug Screen											Benefit Plan Change
Sum of PAID AMOUNT	\$ 1,756.00	\$ 2,144.70	\$ 2,186.30	\$ 2,326.10	\$ 1,927.10	\$ 2,013.60	\$ 2,154.89	\$ 2,390.50	\$ 2,067.50	\$ 1,848.00	
Sum of ALLOWED UNITS	143	176	180	189	157	164	175	193	167	149	
Distinct Count of CASE #	107	115	116	122	120	109	128	139	124	118	
H0050 - Brief Intervention											Benefit Plan Change
Sum of PAID AMOUNT					\$ 15.50						
Sum of ALLOWED UNITS					1						
Distinct Count of CASE #					1						
H2027 - Didactic Services											Benefit Plan Change
Sum of PAID AMOUNT	\$ 385.00	\$ 1,040.00	\$ 622.50	\$ 1,391.00	\$ 489.00	\$ 456.00	\$ 198.00			\$ 209.00	
Sum of ALLOWED UNITS	68	188	107	248	90	90	36			38	
Distinct Count of CASE #	6	6	7	9	6	4	2			1	
H2034 - Recovery Housing											Benefit Plan Change and Rate Reduction
Sum of PAID AMOUNT	\$ 116,409.36	\$ 119,863.85	\$ 118,633.72	\$ 121,537.66	\$ 132,164.91	\$ 147,844.97	\$ 102,667.90	\$ 81,525.25	\$ 74,381.50	\$ 56,649.00	
Sum of ALLOWED UNITS	5,033	5,156	5,137	5,262	5,740	6,028	5,540	4,403	4,176	2,864	
Distinct Count of CASE #	233	236	229	243	247	253	238	209	178	153	
S0215 - Transportation - Per Mile											Benefit Plan Change
Sum of PAID AMOUNT	\$ 1,371.26	\$ 1,835.04	\$ 1,258.38	\$ 2,084.16	\$ 1,394.61	\$ 459.76	\$ 534.80	\$ 280.00	\$ 92.40	\$ 30.80	
Sum of ALLOWED UNITS	2,447	3,246	2,193	3,636	2,427	793	955	500	165	55	
Distinct Count of CASE #	29	37	28	34	30	9	10	5	3	1	
S9976 - Residential Room and Board											Benefit Plan Change and Rate Reduction
Sum of PAID AMOUNT	\$ 174,316.75	\$ 177,454.50	\$ 195,182.25	\$ 205,885.00	\$ 183,094.00	\$ 183,723.00	\$ 137,225.00	\$ 135,408.00	\$ 147,084.00	\$ 128,247.00	
Sum of ALLOWED UNITS	6,240	6,353	6,984	7,363	6,552	6,579	6,550	6,449	7,021	6,111	
Distinct Count of CASE #	413	436	445	461	417	396	423	450	440	384	
T1009 - Childcare Services											Benefit Plan Change
Sum of PAID AMOUNT	\$ 5,247.00	\$ 7,587.00	\$ 6,854.00	\$ 5,904.00	\$ 3,707.00	\$ 5,519.00	\$ 5,535.00	\$ 5,100.00	\$ 5,952.00	\$ 5,660.00	
Sum of ALLOWED UNITS	82	109	114	91	58	69	83	55	85	72	
Distinct Count of CASE #	6	7	10	7	7	6	7	3	8	5	
T1012 - Peer Recovery Supports											Benefit Plan and Copay Changes
Sum of PAID AMOUNT	\$ 9,334.00	\$ 8,567.00	\$ 11,619.00	\$ 13,783.00	\$ 20,850.00	\$ 21,576.00	\$ 9,412.00	\$ 7,813.00	\$ 5,828.00	\$ 259.00	
Sum of ALLOWED UNITS	326	314	430	443	611	649	295	231	175	7	
Distinct Count of CASE #	63	60	74	82	80	81	62	45	36	3	
Total Sum of PAID AMOUNT	\$ 509,386.48	\$ 527,559.41	\$ 547,345.62	\$ 582,858.21	\$ 521,828.01	\$ 529,276.55	\$ 406,677.20	\$ 358,842.71	\$ 355,288.96	\$ 263,636.57	
Total Sum of ALLOWED UNITS	22,678	24,636	23,941	26,620	24,008	21,844	19,741	16,427	16,031	10,954	
Total Distinct Count of CASE #	1,362	1,399	1,400	1,434	1,318	1,238	1,244	1,217	1,096	914	

ANALYTICAL SUMMARY				
	July_Dec Avg	January	February	March
Total Sum of PAID AMOUNT	536,375.71	406,677.20	358,842.71	355,288.96
Total Sum of ALLOWED UNITS	21,844.00	19,741.00	16,427.00	16,031.00
Total Distinct Count of CASE #	1,238.00	1,244.00	1,217.00	1,096.00
Change in PAID AMOUNT		(129,698.51)	(47,834.49)	(3,553.75)
% Change in PAID AMOUNT		-24.18%	-11.76%	-0.99%
Change in ALLOWED UNITS		(2,103)	(3,314)	(396)
% Change in ALLOWED UNITS		-9.63%	-16.79%	-2.41%
Change in CASES		6.00	(27.00)	(121.00)
% Change in CASES		0.48%	-2.17%	-9.94%

Mid-State Health Network
FY2021 PA2 Funding Recommendations by Provider
June 2021 Oversight Policy Board

Item 9

Provider	PA2 County	PA2 Amount Recommended	*New Provider / Renewal Contract
Peer 360 Recovery	Isabella	9,750	New
Peer 360 Recovery	Midland	(6,750)	Renewal
Peer 360 Recovery	Saginaw	(3,000)	Renewal
GRAND TOTAL		-	

*New Provider / Renewal Contract:

New Provider could also indicate that provider did not receive PA2 funds from the identified county in FY2020

Mid-State Health Network
FY2021 PA2 Funding Recommendations by County

County	Projected Beginning FY2021 Reserve Balance	Projected FY2021 Treasury Revenue	OPB Approved PA2 Provider Funding	MSHN Funding Recommendation(s) - June	5% Reserve	Projected Ending Reserve Balance
Arenac	76,431	34,960	35,676	-	3,786	71,929
Bay	1,007,790	205,048	360,479	-	42,618	809,741
Clare	207,257	51,253	93,200	-	8,265	157,044
Clinton	449,115	124,880	131,385	-	22,131	420,480
Eaton	599,531	228,509	231,569	-	29,824	566,647
Gladwin	78,312	38,510	35,000	-	4,091	77,730
Gratiot	111,762	50,780	65,157	-	4,869	92,515
Hillsdale	121,230	49,079	43,950	-	6,318	120,041
Huron	191,125	63,982	98,539	-	7,828	148,739
Ingham	806,542	678,015	534,194	-	47,518	902,845
Ionia	451,620	76,540	153,164	-	19,282	355,713
Isabella	676,608	135,120	263,070	9,750	27,433	511,475
Jackson	626,551	323,618	350,560	-	29,980	569,628
Mecosta	395,797	91,312	191,800	-	14,765	280,543
Midland	462,247	153,648	240,171	(6,750)	18,786	363,688
Montcalm	330,585	104,489	224,058	-	10,551	200,464
Newaygo	109,449	87,981	63,104	-	6,716	127,609
Osceola	150,367	32,877	69,000	-	5,712	108,532
Saginaw	2,000,969	475,526	933,651	(3,000)	77,142	1,468,702
Shiawassee	552,362	96,419	222,379	-	21,320	405,082
Tuscola	250,351	56,919	113,884	-	9,669	183,717
Total	\$ 9,656,000	\$ 3,159,460	\$ 4,453,990	\$ -	\$ 418,606	\$ 7,942,864

Mid-State Health Network
Comparison of FY2020 and FY2021 PA2 by County and Provider

Item 9

County	Provider	FY2020 OPB Approved PA2 Provider Funding	OPB Approved PA2 Provider Funding	MSHN Funding Recommendation(s) - June	Detail of Services Provided for FY2021 Requests
Isabella					
	Peer 360 Recovery				Community Recovery Supports: Stigma reduction efforts; sober social activities; peer-led facilitation groups; CCAR training; recovery coach training; community outreach; emergency transportation.
		PA2	-	750	9,750
		Block Grant	-	-	-
		Total	-	750	9,750
	County Total	338,320	273,070	9,750	
Midland					
	Peer 360 Recovery				Community Recovery Supports: Stigma reduction efforts; sober social activities; peer-led facilitation groups; CCAR training; recovery coach training; community outreach; emergency transportation.
		PA2	98,253	99,060	(6,750)
		Block Grant	-	-	-
		Total	98,253	99,060	(6,750)
	County Total	348,364	323,871	(6,750)	
Saginaw					
	Peer 360 Recovery				Community Recovery Supports: Stigma reduction efforts; sober social activities; peer-led facilitation groups; CCAR training; recovery coach training; community outreach; emergency transportation.
		PA2	140,270	137,580	(3,000)
		Block Grant	-	-	-
		Total	140,270	137,580	(3,000)
	County Total	1,474,582	1,063,851	(3,000)	
	PA2 Subtotal	5,293,903	4,453,990	-	
	Block Grant Subtotal	2,648,906	2,658,839	-	
	Grand Total	7,942,809	7,112,829	-	



**Region 5 Quarterly Reports
FY21 Quarter # 2 (Jan.- Mar.)**

PREVENTION GOALS	RESULTS & PROGRESS
Reduce Underage Drinking	Working with youth continues to be challenging amid the COVID pandemic. MSHN Prevention Specialists offer in-person; virtual; or hybrid curriculum/classes in efforts to reach youth during school or after school sessions. The same is true for community. Parenting classes are being held – using variety of in-person, virtual or hybrid techniques. Examples of evidence- based education classes addressing alcohol issues include Too Good for Drugs; Teen Intervene; Above the Influence; Jump; Break-Out; Stepping UP Together; Smart Moves; etc.). Some MSHN Prevention Specialists participate in the Michigan Coalition to Reduce Underage Drinking (MCRUD); sharing information with coalition and community – one effort being worked on by coalitions to educate legislators on the inappropriateness of allowing alcohol sales to 4 a.m. Some Prevention Specialists conducted education with vendors on alcohol products and conducted TIPs training (server training for on-premise and off-premise sites) and one group is working on Alcohol Policy Issues (both local and state levels).
Reduce prescription and over-the-counter drug abuse, including opiates	Education/awareness presentations continue to be conducted with variety of community groups regarding opioid misuse/ over-the-counter abuse; etc. Prescription drug presentations; prescription drug committees; drug action teams are examples of committees working in almost all MSHN counties. SOR grant funds (plus SOR-NCE Supplemental funds) has allowed purchase of supplies such as lock-boxes; syringe take-

	back containers; medication disposal bags to be distributed in communities expressing need and communities are prioritizing need for expenses this year. Coalitions continue to deliver Narcan kits and resources in communities all around MSHN region. FAN (Families Against Narcotics) and Project Hope continue to meet in multiple communities across the 21-county region. Project Assert continues to be successful under SOR funding. An anti-stigma campaign 'Chances Are' is being conducted across several counties also.
Reduce youth access to tobacco	The Master Retailer List of Tobacco Vendors /was updated by DYTyr/Prevention Specialists in each county and was submitted to the State timely. This information is used for vendor education and in the formal SYNAR process conducted later this year. Some vendor education and non-formal SYNAR checks occurred during this quarter. "Vaping" by teens continues to be key focus of concern for multiple counties. Examples of education for youth and families/communities includes the Quit Juuling program; E-Cigarette education; Vaping Intervention; etc. Many coalition have sub-committees dedicated to reducing tobacco/vaping use by youth. Some examples include the Breathewell Committee and Tobacco Free 21.

TREATMENT GOALS	RESULTS & PROGRESS
Increase women's specialty service programs	There has been no addition or expansion of Women's Specialty service programs during this quarter. One provider has expressed interest in adding these services as well as one provider that has expressed an interest in expanding, however, with the pandemic still upon us those initiative have been put on hold. Most recently, Catholic Charities of Owosso has discontinued their WSS programming due to insufficient staffing.
Increase array of medication assisted treatment programs	The MSHN Action In Motion (AIM) Mobile Care Unit has partnered for a pilot project with Recovery Pathways and Great Lakes Bay Health (FQHC) to offer comprehensive services in Midland County at two locations. They will be offering MAT services, SUD treatment and supports, physical healthcare,

	<p>psychiatric care, mental healthcare, as well as dental services. Pending a six month evaluation of this project, a determination will be made whether to expand this effort to other counties.</p> <p>Jail-based MAT services began February 1, 2021 at the Newaygo County Jail offered through Arbor Circle of Newaygo. These services provide treatment as well as buprenorphine to incarcerated adults, with continuation of care occurring at Arbor Circle upon release from incarceration.</p>
Increase engagement, retention & completion of treatment	Please see chart below.
Increase inter-agency collaboration of service delivery	As described above, a new collaboration of service delivery is occurring between Recovery Pathways, MSHN, and GLBHC. Jail-based services throughout the region also have been an increase of collaboration of service delivery.

FY 21 Quarter 2					
	COP	% COP	Continuing Treatment Transfer	%Continuing Treatment Transfer	Total Discharges
Outpatient	1550	25.4%	906	14.9%	6093
Withdrawal Management	170	38.5%	112	25.3%	442
Residential	418	28.9%	391	27.0%	1446

The figures above focus on two out of eleven discharge reason codes; Completion of Treatment (COP) and Continuing in Treatment/Transfer.

FY 2021 2nd Quarter Report

County:

Arenac

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 5 Served: 27
Residential:	Admissions: 11 Served: 12
Withdrawal Management:	Admissions: 3 Served: 5
Medication Assisted Treatment:	Admissions: 10 Served: 10
Women's Specialty Services:	Admissions: 3 Served: 3

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	670	111
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Bay

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 128 Served: 596
Residential:	Admissions: 38 Served: 51
Withdrawal Management:	Admissions: 42 Served: 47
Medication Assisted Treatment:	Admissions: 92 Served: 147
Women's Specialty Services:	Admissions: 20 Served: 20

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	5,685	697
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Clare

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 42 Served: 144
Residential:	Admissions: 9 Served: 18
Withdrawal Management:	Admissions: 9 Served: 10
Medication Assisted Treatment:	Admissions: 13 Served: 31
Women's Specialty Services:	Admissions: 1 Served: 2

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	272	149
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Clinton

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 33 Served: 115
Residential:	Admissions: 10 Served: 13
Withdrawal Management:	Admissions: 11 Served: 11
Medication Assisted Treatment:	Admissions: 20 Served: 52
Women's Specialty Services:	Admissions: 1 Served: 7

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	489	92
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Eaton

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 74 Served: 248
Residential:	Admissions: 22 Served: 31
Withdrawal Management:	Admissions: 21 Served: 28
Medication Assisted Treatment:	Admissions: 19 Served: 106
Women's Specialty Services:	Admissions: 6 Served: 6

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,693	328
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Gladwin

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 29 Served: 96
Residential:	Admissions: 9 Served: 11
Withdrawal Management:	Admissions: 5 Served: 6
Medication Assisted Treatment:	Admissions: 14 Served: 14
Women's Specialty Services:	Admissions: 5 Served: 5

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	5	4
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Gratiot

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 29 Served: 125
Residential:	Admissions: 18 Served: 23
Withdrawal Management:	Admissions: 8 Served: 9
Medication Assisted Treatment:	Admissions: 21 Served: 46
Women's Specialty Services:	Admissions: 6 Served: 9

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,481	196
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Hillsdale

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 38 Served: 106
Residential:	Admissions: 19 Served: 27
Withdrawal Management:	Admissions: 6 Served: 6
Medication Assisted Treatment:	Admissions: 7 Served: 20
Women's Specialty Services:	Admissions: 12 Served: 23

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	131	21
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Huron

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 14 Served: 94
Residential:	Admissions: 5 Served: 7
Withdrawal Management:	Admissions: 10 Served: 13
Medication Assisted Treatment:	Admissions: 12 Served: 12
Women's Specialty Services:	Admissions: 2 Served: 10

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,289	157
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Ingham

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 419 Served: 1466
Residential:	Admissions: 118 Served: 165
Withdrawal Management:	Admissions: 155 Served: 168
Medication Assisted Treatment:	Admissions: 200 Served: 550
Women's Specialty Services:	Admissions: 28 Served: 28

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	2,210	326
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Ionia

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 25 Served: 159
Residential:	Admissions: 11 Served: 19
Withdrawal Management:	Admissions: 4 Served: 4
Medication Assisted Treatment:	Admissions: 19 Served: 28
Women's Specialty Services:	Admissions: 6 Served: 19

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	571	52
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Isabella

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 49 Served: 276
Residential:	Admissions: 22 Served: 31
Withdrawal Management:	Admissions: 8 Served: 10
Medication Assisted Treatment:	Admissions: 29 Served: 129
Women's Specialty Services:	Admissions: 7 Served: 20

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	653	139
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Jackson

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 215 Served: 821
Residential:	Admissions: 82 Served: 121
Withdrawal Management:	Admissions: 27 Served: 37
Medication Assisted Treatment:	Admissions: 90 Served: 325
Women's Specialty Services:	Admissions: 18 Served: 36

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	6,057	740
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Mecosta

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 64 Served: 218
Residential:	Admissions: 16 Served: 18
Withdrawal Management:	Admissions: 5 Served: 5
Medication Assisted Treatment:	Admissions: 23 Served: 33
Women's Specialty Services:	Admissions: 7 Served: 9

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	480	36
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Midland

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 61 Served: 253
Residential:	Admissions: 25 Served: 37
Withdrawal Management:	Admissions: 20 Served: 23
Medication Assisted Treatment:	Admissions: 47 Served: 52
Women's Specialty Services:	Admissions: 5 Served: 19

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	2,065	154
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Montcalm

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 87 Served: 300
Residential:	Admissions: 27 Served: 44
Withdrawal Management:	Admissions: 8 Served: 12
Medication Assisted Treatment:	Admissions: 30 Served: 60
Women's Specialty Services:	Admissions: 7 Served: 16

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	4,375	172
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Newaygo

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 38 Served: 173
Residential:	Admissions: 10 Served: 15
Withdrawal Management:	Admissions: 7 Served: 10
Medication Assisted Treatment:	Admissions: 19 Served: 34
Women's Specialty Services:	Admissions: 6 Served: 23

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	689	125
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Osceola

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 19 Served: 76
Residential:	Admissions: 8 Served: 18
Withdrawal Management:	Admissions: 6 Served: 6
Medication Assisted Treatment:	Admissions: 7 Served: 12
Women's Specialty Services:	Admissions: 4 Served: 4

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	651	35
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Saginaw

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 229 Served: 866
Residential:	Admissions: 55 Served: 77
Withdrawal Management:	Admissions: 95 Served: 106
Medication Assisted Treatment:	Admissions: 118 Served: 250
Women's Specialty Services:	Admissions: 23 Served: 108

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	5,375	583
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Shiawassee

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 70 Served: 272
Residential:	Admissions: 21 Served: 33
Withdrawal Management:	Admissions: 26 Served: 26
Medication Assisted Treatment:	Admissions: 26 Served: 46
Women's Specialty Services:	Admissions: 8 Served: 12

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	2,712	626
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.

County:

Tuscola

TREATMENT SERVICE	# of People Served
Outpatient:	Admissions: 38 Served: 194
Residential:	Admissions: 9 Served: 11
Withdrawal Management:	Admissions: 5 Served: 7
Medication Assisted Treatment:	Admissions: 15 Served: 21
Women's Specialty Services:	Admissions: 3 Served: 34

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	3,069	476
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	Master Retailer List (used for SYNAR later in the year) submitted. Some vendor education completed.