

**Substance Use Disorder (SUD)
Oversight Policy Advisory Board Meeting
December 15, 2021 ~ 4:00 p.m.**

This meeting will be held at a physical location with appropriate social distancing and/or masking requirements

*Community Mental Health Association of Michigan
426 S. Walnut
Lansing, MI 48933*

Members of the public and others unable to attend in person can participate in this meeting via Zoom Videoconference

*Meeting URL: <https://us02web.zoom.us/j/5624476175>
and Teleconference*

Call 1.312.626.6799 Meeting ID: 5624476175#

- 1) Call to Order
- 2) Roll Call
- 3) **ACTION ITEM:** Approval of the Agenda for December 15, 2021
- 4) **ACTION ITEM:** Approval of Minutes
 - A. Minutes of June 16, 2021 Meeting (Page 4)
 - B. Minutes of October 20, 2021 Meeting (Page 8)
- 5) Public Comment
- 6) Board Chair Report
 - A. **ACTION ITEM:** Approval of FY22 Board Calendar (Page 12)
 - B. SUD Oversight Policy Board Annual Report (Page 13)
 - C. Reminder of Annual Organization Meeting in February
- 7) Deputy Director Report (Page 15)
- 8) Chief Financial Officer Report
 - A. FY21 PA2 Funding & Expenditures by County (Page 29)
 - B. FY21 PA2 Use of Funds by County and Provider (Page 31)
 - C. FY21 SUD Financial Summary Report of September 2021 (Page 33)
 - D. Block Grant Reduction Update & Projections (Page 34)
- 9) **ACTION ITEM:** FY22 Substance Use Disorder PA2 Contract Listing (Page 37)

*Please direct questions and/or concerns pertaining to MSHN's SUD Oversight Policy Advisory Board to Sherry Kletke, Executive Assistant, at 517.253.8203
Mid-State Health Network | 530 W. Ionia Street | Lansing, MI 48933*

MSHN SUD Oversight Policy

Advisory Board Officers

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

MEETING LOCATION:

Community Mental Health
Association of Michigan
(CMHAM)
426 S. Walnut, Lansing

VIDEOCONFERENCE:

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

Meeting ID: 5624476175

TELECONFERENCE:

Call 1.312.626.6799

Meeting ID: 5624476175#

Should special accommodations be necessary to allow participation, please contact MSHN Executive Assistant, Sherry Kletke, at 517.253.8203 as soon as possible.

UPCOMING FY22

**SUD OVERSIGHT POLICY
ADVISORY BOARD MEETINGS
PENDING BOARD APPROVAL**

February 16, 2022

April 20, 2022

June 15, 2022

August 17, 2022

All meetings will be held from 4:00-5:30 p.m. at CMHAM unless noted otherwise.

MSHN Board Approved Policies
May be Found at:

<https://midstatehealthnetwork.org/provider-network-resources/provider-requirements/policies-procedures/policies>

- 10) SUD Operating Update (*Page 46*)
 - A. Rising Meth Overdose Rates Presentation
- 11) Other Business
- 12) Public Comment
- 13) Board Member Comment
- 14) Adjournment

FY22 MSHN SUD Oversight Policy Board Roster

Last Name	First Name	Email 1	Phone 1	Phone 2	County	Term Expiration
Anderson	Jim	jdeweya@yahoo.com	989.667.1313	989.327.0734	Bay	2022
Ashley	Lisa	ashleyl@clareco.net	989.630.5256		Gladwin	2022
Badour	Nichole	nbadour@gihn-mi.org	989.264.5045	989.466.4124	Gratiot	2022
Bristol	Sandra	toadhall2@hotmail.com	989.339.7841		Clare	2024
Caswell	Bruce	bcaswell@frontier.com	517.425.5230	517.523.3067	Hillsdale	2022
Glaser	Steve	sglaser@co.midland.mi.us	989.264.4933		Midland	2024
Guernsey	Susan	sguernsey@co.mecosta.mi.us	231.592.9252		Mecosta	2024
Harrington	Christina	charrington@saginawcounty.com	989.758.3818		Saginaw	2022
Hunter	John	hunterjohn74@gmail.com	989.673.8223	989.551.2077	Tuscola	2022
Kolk	Bryan	bryank@co.newaygo.mi.us	616.780.5751		Newaygo	2024
Luce	Robert	rluce850@gmail.com	989.654.5700		Arenac	2023
Moreno	Jim	j.moreno@frontier.com	989.954.5144		Isabella	2021
Murphy	Joe	jmurphy0504@comcast.net	989.670.1057		Huron	2023
Painter	Scott	spainter@montcalm.us	517.444.1556		Montcalm	2024
Schultz	Vicky	vschultz@ccsgc.org	810.232.9950 x.118		Shiawassee	2023
Tennis	Todd	commissionertennis@gmail.com	517.202.2303		Ingham	2023
Thalison	Deb	dthalison@ioniacounty.org	517.647.1783	616.902.5608	Ionia	2022
Thalison	Kimberly	kthalison@eatonresa.org	517.541.8711		Eaton	2022
Turner	David	davidturner49665@gmail.com	231.908.0501		Osceola	2024
Washington	Dwight	washindwi@gmail.com	517.974.1658		Clinton	2023
Woods	Ed	ejw1755@yahoo.com	517.796.4501	517.392.8457	Jackson	2023

Alternates:

Kroneck	John	jkroneck@mmdhd.org	989.831.3659	616.302.6009	Montcalm - Alternate
Jaloszynski	Jerry	jjaloszynski@isabellacounty.org	989.330.4890		Isabella - Alternate
Whittum	Jeremy	jwhittum@eatoncounty.org	517.243.5692		Eaton-Alternate
Mitchell	Ken	kmitchellcc@gmail.com	517.899.5334		Clinton-Alternate

Mid-State Health Network SUD Oversight Policy Advisory Board

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

Zoom Meeting

Meeting Minutes

1. Call to Order

Chairperson John Hunter called the MSHN SUD Regional Oversight Policy Board (OPB) of Directors Organizational Meeting to order at 4:03 p.m.

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

Board Member(s) Absent: Lisa Ashley (Gladwin), Christina Harrington (Saginaw), Tom Lindeman (Montcalm), Jim Moreno (Isabella), Leonard Strouse (Clare)

Alternate Members Present: John Kroneck (Montcalm)

Staff Members Present: Amanda Ittner (Deputy Director), Joe Sedlock (Chief Executive Officer), Sherry Kletke (Executive Assistant), Dr. Trisha Thrush (Lead Treatment Specialist), Carolyn Tiffany (Director of Provider Network Management Systems), Dr. Dani Meier (Chief Clinical Officer), Kim Zimmerman (Director of Compliance, Quality & Customer Services), Leslie Thomas (Chief Financial Officer), Michael Scott (Veterans Navigator), Kari Gulvas (Prevention Specialist)

2. Roll Call

Ms. Amanda Ittner provided the Roll Call for Board Attendance.

3. Approval of Agenda for June 16, 2021

Board approval was requested for the Agenda of the June 16, 2021 Regular Business Meeting, as presented.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

MOTION BY STEVE GLASER, SUPPORTED BY BRYAN KOLK, FOR APPROVAL OF THE JUNE 16, 2021 REGULAR BUSINESS MEETING AGENDA, AS PRESENTED. MOTION CARRIED: 16-0.

4. Approval of Minutes from the February 17, 2021 Regular Business Meeting

Board approval was requested for the draft meeting minutes of the February 17, 2021 Regular Business Meeting.

MOTION BY STEVE GLASER, SUPPORTED BY DEB THALISON, FOR APPROVAL OF THE MINUTES OF THE FEBRUARY 17, 2021 MEETING, AS PRESENTED. ROLL CALL VOTE: VOTING YES: VOTING NO: N/A. MOTION CARRIED: 16-0.

5. Public Comment

There was no public comment.

6. Board Chair Report

- Welcomed New Member:
 - Joe Murphy (Huron County)
- Annual Board Member Disclosure Forms: Board members were reminded of the requirement to fill out the annual disclosure form which will be distributed electronically this year via DocuSign.

Ms. Nicole Badour joined the meeting at 4:15pm.

7. Deputy Director Report

Ms. Amanda Ittner provided an overview of the written report available in the meeting packet that included; MSHN internal updates, COVID supplemental block grant funding, MSHN Statement on System Redesign, Open Meetings Act, Michigan Opioids Task Force Annual Report, and the Suicide Prevention Commission Report. . Mr. Todd Tennis updated the Board that the Ingham County Board of Commissions are not expecting to extend the Public Health Emergency and will let it expire on June 30, 2021..

8. Chief Financial Officer Report

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

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 April 2021
- Block Grant Reduction Update & Projections

Ms. Kim Thalison left the meeting at 4:30pm.

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.

MOTION BY DWIGHT WASHINGTON, SUPPORTED BY TODD TENNIS, TO APPROVE THE FY21 SUBSTANCE USE DISORDER PA2 CONTRACT LISTING, AS PRESENTED. ROLL CALL VOTE: VOTING YES: VOTING NO: N/A. MOTION CARRIED: 16-0.

10. SUD Operating Update

Dr. Dani Meier provided an overview and update on SUD Operations including information on the following:

- FY2021 Q2 SUD County Reports

11. Other Business

- MSHN Strategic Planning Presentation: MSHN Leadership presented an overview of the draft FY2022-2023 Strategic Plan, including the five Board Priorities; Better Health, Better Equity, Better Care, Better Value and the new priority of Betty Equity.
 - Mr. Todd Tennis inquired about advocacy efforts for SAPTR providers. MSHN has been supporting SAPTR providers and their inclusion in related advocacy efforts.
 - Mr. Dwight Washington inquired about the system redesign concept from Senator Shirkey. The system redesign legislation introduced in the House by Representative Whiteford would eliminate the PIHPs and dismantle the current managed care system at a time when provider and service stabilization is a priority, especially as it relates to the effects of COVID-19.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

- Mr. John Kroneck states that Michigan Psychiatric Association is available to support advocacy efforts.

Ms. Vicky Schultz left meeting at 5:26 p.m.

Mr. Bruce Caswell left meeting at 5:37 p.m.

12. Public Comment

There was no public comment.

13. Board Member Comment

Mr. Bryan Kolk inquired about the intergovernmental agreements asking if the final executed agreement has been distributed to all counties. Ms. Amanda Ittner mentioned that determining the status of the executed agreement was on our project list along with Ms. Sherry Kletke. The intergovernmental agreement is a three-year agreement which started in 2019 and a new agreement will be due for 2022. MSHN will review for any updates to be brought to the board and distribute to the counties for signature.

14. Adjournment

MOTION BY STEVE GLASER, SUPPORTED BY DEB THALISON TO ADJOURN THE JUNE 16, 2021, SUBSTANCE USE DISORDER OVERSIGHT POLICY ADVISORY BOARD MEETING AT 5:46 P.M.

*Meeting minutes submitted respectfully by:
MSHN Executive Assistant*

Mid-State Health Network SUD Oversight Policy Advisory Board

Wednesday, October 20, 2021, 4:00 p.m.

CMH Association of Michigan (CMHAM)

Meeting Minutes

1. Call to Order

Chairperson John Hunter called the MSHN SUD Regional Oversight Policy Board (OPB) of Directors Organizational Meeting to order at 4:06 p.m.

Chairperson Hunter asked the OPB members their preference regarding meeting packet material contents since the packet is only emailed to members. Members agreed that they would prefer to have the meeting packet displayed on a screen for viewing at future meetings. MSHN staff will make arrangements to have future meeting packet contents displayed on a screen in the meeting room.

Board Member(s) Present: Jim Anderson (Bay), Nichole Badour (Gratiot), Sandra Bristol (Clare), Bruce Caswell (Hillsdale), Steve Glaser (Midland) – joined at 4:38 p.m., Susan Guernsey (Mecosta)-left at 5:00 p.m., Christina Harrington (Saginaw), John Hunter (Tuscola), Bryan Kolk (Newaygo), Robert Luce (Arenac), Jim Moreno (Isabella), Vicky Schultz (Shiawassee), Todd Tennis (Ingham), Deb Thalison (Ionia), Kim Thalison (Eaton), Dwight Washington (Clinton), Ed Woods (Jackson)

Board Member(s) Absent: Lisa Ashley (Gladwin), Joe Murphy (Huron), Scott Painter (Montcalm), David Turner (Osceola)

Alternate Members Present: John Kroneck (Montcalm)

Staff Members Present: Amanda Ittner (Deputy Director), Joseph Sedlock (Chief Executive Officer), Sherry Kletke (Executive Assistant), Leslie Thomas (Chief Financial Officer), Dr. Dani Meier (Chief Clinical Officer)

2. Roll Call

Secretary Bruce Caswell provided the Roll Call for Board Attendance. Only 10 members were present in-person which does not meet the minimum requirement for a quorum, so no action was taken on action items noted below. Items requiring action will be added to the agenda for the next meeting on December 15, 2021.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

3. Approval of Agenda for October 20, 2021

No quorum was present to take action to approve the Agenda of the October 20, 2021 Regular Business Meeting, as presented.

4. Approval of Minutes from the June 16, 2021 Regular Business Meeting

No quorum was present to take action to approve the minutes of the June 16, 2021 Regular Business Meeting and will be scheduled for approval at the next meeting on December 15, 2021.

5. Public Comment

There was no public comment.

6. Board Chair Report

No quorum was present to take action to approve the draft FY2022 Board Calendar and will be scheduled for approval at the next meeting on December 15, 2021.

7. Deputy Director Report

Ms. Amanda Ittner provided an overview of the written report included in the board meeting packet, and available on the MSHN website highlighting:

- FY2022-2023 Strategic Plan
- COVID Updates
- COVID-Specific SAPT Block Grant funding approved
- Intergovernmental Agreement

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 August 2021
- Block Grant Reduction Update & Projections
- FY2022 Budget Overview

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

Ms. Deb Thalison asked why Ionia County's allocation for PA2 increased and the Block Grant allocation decreased. MSHN staff will check into this and provide information back to Deb. Discussion took place regarding the allowance to roll over PA2 Prevention Coalition funds to the next fiscal year, if unspent. Per MSHN funding requirements, coalitions are reimbursed as funds are expended. Coalitions may request more than the \$5,000 allocation during the annual planning time frame.

9. FY22 Substance Use Disorder PA2 Contract Listing

Ms. Amanda Ittner provided an overview and information on the FY22 Substance Use Disorder (SUD) PA2 Contract listing as provided in the packet.

No quorum was present to take action to approve the FY22 SUD PA2 Contract listing and will be scheduled for approval at the next meeting on December 15, 2021.

10. SUD Operating Update

Dr. Dani Meier began by sharing that MSHN's Lead Prevention Specialist, Jill Worden had passed away. She was a loved and respected leader on the SUD Clinical team and a leader for SUD prevention in the region and the state during her 30+ year career. The Bay County Prevention Network is establishing a Jill Worden Founders Award that will first be presented on November 1. Sarah Andreotti has stepped into the Lead Prevention Specialist role and interviews are under way to bring the Prevention Team back to full strength. Dr. Meier provided an overview of the written SUD Operations report as included in the board meeting packet.

Discussion of the previous week's Cocaine, Meth and Stimulant Summit and the rising rate of stimulant-related overdose deaths, led to OPB Board members requesting a presentation at the December 2021 meeting regarding Evidence Based Practice (EBP) tools and strategies in relation to the growing phenyl-2-propanone (P2P) methamphetamine and fentanyl trends.

11. Other Business

12. Public Comment

13. Board Member Comment

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

14. Adjournment

Chairperson John Hunter adjourned the MSHN SUD Oversight Policy Advisory Board Meeting at 5:24 p.m.

*Meeting minutes submitted respectfully by:
MSHN Executive Assistant*

DRAFT

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED



TENTATIVE

FY22 MID-STATE HEALTH NETWORK

SUBSTANCE USE DISORDER (SUD)

OVERSIGHT POLICY ADVISORY BOARD OF DIRECTORS

(All meetings are scheduled to convene at 4:00 p.m. unless otherwise noted)

Meeting Date	Meeting Location
October 20, 2021	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)
December 15, 2021	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)
February 16, 2022	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)
April 20, 2022	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)
June 15, 2022	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)
August 17, 2022	CMH Association of Michigan 426 S. Walnut, Lansing (Meeting room to be determined)

Calendar is tentative until Board approved

Mid-State Health Network | 530 W. Ionia Street, Suite F | Lansing, MI 48933 | 517.253.7525

www.midstatehealthnetwork.org

Please contact Sherry Kletke, Executive Assistant, with questions related to the MSHN Board of Directors at sheryl.kletke@midstatehealthnetwork.org

ANNUAL REPORT

TEAM NAME: SUD Oversight Policy Board

TEAM LEADER: Chairman John Hunter, SUD Board Member

REPORT PERIOD COVERED: 10.1.20 – 9.30.21

Purpose of the Board: The Mid-State Health Network (MSHN) Substance Use Disorder (SUD) Oversight Policy Board (OPB) was developed in accordance with Public Act 500 of 2012, Section 287 (5). This law obliged MSHN to “establish a substance use disorder oversight policy board through a contractual agreement between [MSHN] and each of the counties served by the community mental health services program.” MSHN/s twenty-one (21) counties each have representation on the OPB, with a designee chosen from that county. The primary decision-making role for the OPB is as follows:

- Approval of any portion of MSHN’s budget containing local funding for SUD treatment or prevention, i.e. PA2 funds
- Has an advisory role in making recommendations regarding SUD treatment and prevention in their respective counties when funded with non-PA2 dollars.

Annual Evaluation Process:

a. Past Year’s Accomplishments:

- Received updates and presentations on the following:
 - MSHN SUD Strategic Plan
 - MSHN SUD Prevention & Treatment Services
- Approval of Public Act 2 Funding for FY20 & related contracts
- Approved use of PA2 funds for prevention and treatment services in each county
- Received presentation on FY21 Budget Overview
- Received PA2 Funding reports – receipts & expenditures by County
- Received Quarterly Reports on Prevention and Treatment Goals and Progress
- Received Financial Status Reports on all funding sources of SUD Revenue and Expenses
- Provided advisory input to the MSHN Board of Directors regarding the overall agency strategic plan and SUD budget
- Executed new three-year SUD Intergovernmental Agreement
- Received new written updates from Deputy Director including state and federal activities related to SUD
- Received updates on MDHHS proposed future of Behavioral Health
- Provided input and received information/updates on Block Grant Reduction Strategies
- Received updates on MDHHS State Opioid Response Site Visit Results
- Received information on COVID-19 and Provider Status
- Shared prevention and treatment strategies within region

b. Upcoming Goals for FY22 ending, September 30, 2022:

- Approve use of PA2 funds for prevention and treatment services in each county

- Improve communications with MSHN Leadership, Board Members and local coalitions
- Orient new SUD OPB members as reappointments occur
- Receive information and education on opioid settlement and strategies
- Provide input into COVID related funding specific to Substance Use Disorder Treatment and prevention
- Monitor SUD spending to ensure it occurs consistent with PA 500.

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 &
Wellness (Ionia County)



LifeWays CMH



Montcalm Care Center



Newaygo County
Mental Health Center



Saginaw County CMH



Shiawassee
Health & Wellness



Tuscola Behavioral
Health Systems

Board Officers

Edward Woods
Chairperson

Irene O'Boyle
Vice-Chairperson

Kurt Peasley
Secretary

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

October/November

MSHN/REGIONAL MATTERS

1. Open Meetings Act Modified: Require Change to SUD OPB Bylaws:

The Michigan Legislature enacted and the Governor signed Senate Bill 1246 as 2020 Public Act 254, which modified the Open Meetings Act, 1976 PA 267 (OMA), effective last December 23, 2020. These revisions were made to address the continuation of remote attendance to meetings open to the public.

Specifically, public bodies were allowed to hold wholly or partly electronic meetings by telephonic or video conferencing through December 31, 2021, to accommodate members of the public body absent due to (a) military duty, (b) a medical condition, or (c) a statewide or local state of emergency or state of disaster declared pursuant to law or charter or local ordinance by the governor or a local official, governing body, or chief administrative officer that would put the personal health and/or safety of the public body or members of the public at risk if held in person.

However, effective January 1, 2022, the only legal basis for a member of a public body to participate in a meeting via telephonic or video conferencing as a member of the public body (i.e., to vote, to be counted toward a quorum, or to deliberate toward a decision), is if that member is absent due to military duty. This amendment to the OMA eliminates the previously permissive practice of a public body allowing its members to participate and vote remotely if a physical quorum was present. (A public meeting could still have a partial "hybrid" remote component at the public body's option to allow members of the public and/or staff to attend and participate remotely if they can be heard by all persons attending the meeting. However, during such a hybrid meeting, board members must be present to be counted as part of the quorum, to vote, and to otherwise participate in a meeting as a member of the public body.)

This change to the Open Meetings Act may require an amendment to the MSHN SUD Oversight Policy Board Bylaws, specifically in Section 4.6.2 which states: "If a quorum is physically present, Board members who participate by telephone or other similar communication equipment satisfying this Article are eligible to vote in and otherwise participate in the business of the meeting."

Mid-State Health Network is consulting with our attorney on this matter and if a change to the bylaws is required, MSHN will present an amendment to the SUD OPB prior to the February OPB meeting in accordance with Section 7.2 as follows: "These bylaws may be amended by the members of the Board acting in accordance with the voting requirements set forth in Section 4.8. The agenda of the meeting shall set forth a summary of the proposed amendment(s) at **least fourteen (14) days prior to the date of the meeting. An affirmative vote to amend the Bylaws must be approved by**

the Board of Directors of MSHN. Any amendment of these bylaws must be consistent with the Michigan law, the Code, and the Intergovernmental Contract.

2. Opioid Settlement:

The Michigan Association of Counties conducted a webinar on November 19, 2021, presented by legal experts on the Opioid Settlement. The anticipated settlement amount for Michigan is \$776 million. States must have an agreement related to the settlement. The Michigan Agreement as of the webinar, includes:

Michigan State-Specific Agreement

- Instead of 15% to Local Governments, proceeds will be split **50%** to Local Governments, **50%** to the State of Michigan
- From the 50% that is allocated to Local Governments, **deductions** for:
 - Special Circumstance Fund (5%)
 - Administrative Expenses (0.3%)
 - Attorneys Fees (no more than 15%; **likely about 8%** with remainder paid by National Fee Fund)
- Litigation Adjustments

The funds must be used to abate the opioid epidemic that may include the following: Address needs of pregnant women, infants, and parents; Prevention; First Responder Support; Leadership Planning; Training; and Research. Assuming steps move forward with the settlement and local government participation, counties may begin receiving payments as early as April 2022.

For more information on the national settlement visit: <https://nationalopioidsettlement.com/>

3. Michigan Crisis and Access Line (MiCAL)

Michigan Crisis and Access Line (MiCAL) was established by MDHHS to support Michiganders with behavioral health and substance use disorder needs. MiCAL is a 24/7 centralized statewide crisis line available to all Michiganders via phone, text, or chat – regardless of insurance coverage. MiCAL is supported by a Customer Relationship Management (CRM) system that monitors, tracks, and reports on MiCAL operations and also has a Partner Portal system that provides CMHSP/PIHP staff visibility into Michigander interactions with MiCAL.

MDHHS intends to use the Partner Portal to manage a number of different functions including:

- Sharing of information with PIHPs/CMHSPs about consumer contacts with the MiCAL hotline
- Communication about customer service inquiries that are received through MDHHS
- Notification of potential contractual compliance issues
- CCBHC Certification
- American Society of Addiction Medicine (ASAM) Level of Care Certification

MSHN staff have participated in trainings and webinars to support statewide implementation for Customer Inquiries and Contractual Compliance business processes, effective October 1, 2021. PIHPs will be responsible to coordinate and follow up on Corrective Action Plans (CAP) within the CRM, noncompliance issues and respond to BHDDA with information required to assist Michiganders.

Starting in January 2022, MiCAL will rollout statewide, one region at a time, providing coverage for 988 and crisis and distress support through the MiCAL number. The MSHN region is scheduled for an April 2022 implementation date.

STATE OF MICHIGAN/STATEWIDE ACTIVITIES

MDHHS Issues RFP for Substance Use Services for Federally Recognized Tribes

The Michigan Department of Health and Human Services (MDHHS) has issued a Request for Proposals (RFP) for federally recognized tribes to provide substance use services. The purpose of the Substance Use Services for Federally Recognized Tribes program is to support substance use prevention, treatment, and disorder initiatives through federally recognized tribal entities in Michigan. The RFP seeks competitive plans for local projects that will expand services, prioritizing evidence-based interventions in the area of prevention, treatment, and recovery services.

Funded applicants will receive ongoing technical assistance from the MDHHS project coordinator which include help with program start-up, reporting requirements, and barriers to program implementation. The initial award period begins March 1, 2022 and ends Sept. 30, 2022. MDHHS expects to award approximately \$1,050,000, with a maximum of \$150,000 per applicant. Successful applicants may receive funding from Oct. 1, 2022, to March 14, 2023, subject to availability of funding and acceptable performance.

Grant applications must be submitted electronically through the EGrAMS program by 3 p.m. on Jan. 7, 2022. For more information or to apply, visit the [EGrAMS website](#) and select "About EGrAMS" link in the left panel to access the "Competitive Application Instructions" training manual. The complete RFP can be accessed under the 'Current Grants' section under the "Behavioral Hlth and Dev Dis Adm Standard" link and selecting the "SUFRT-2022" grant program.

MDHHS Issues RFP for Opioid Recovery Support Services

The Michigan Department of Health and Human Services (MDHHS) has issued a Request for Proposals (RFP) for registered Recovery Community Organizations (RCOs) to provide recovery support services. The purpose of the Recovery Support Services competitive 2022 program is to expand recovery support center services or recovery community center services at RCOs for individuals seeking long-term recovery from substance use disorders. RCOs are independent, non-profit organizations led and governed by representatives of local communities of recovery. To be eligible to apply for this funding, applicant agencies must be registered with the Association of Recovery Community Organizations at Faces and Voices of Recovery.

The RFP seeks competitive plans for local projects that will expand services as described above -- prioritizing recovery support navigation, recovery outreach education, and recovery activities and events. Funded applicants will receive ongoing technical assistance from the MDHHS project coordinator which include help with program start-up, reporting requirements, and barriers to program implementation. The eight-month award period begins Feb. 1, 2022 and ends Sept. 30, 2022. MDHHS expects to award approximately \$1,200,000, with a maximum of \$150,000 for a single applicant.

Grant applications must be submitted electronically through the EGrAMS program by 3 p.m. on Dec. 12, 2021. For more information or to apply, visit the [EGrAMS website](#) and select "About EGrAMS" link in the left panel to access the "Competitive Application Instructions" training manual. The complete RFP can be accessed under the 'Current Grants' section under the "Behavioral Hlth and Dev Dis Adm Standard" link and selecting the "RSSC-2022" grant program.

FEDERAL/NATIONAL ACTIVITIES

Substance Abuse and Mental Health Systems Administration (SAMHSA)

SAMHSA is “extending the methadone take-home flexibilities for one year, effective upon the eventual expiration of the COVID-19 Public Health Emergency. This exemption is a continuation of the take-home medication flexibilities that SAMHSA put in place in March 2020 and is in keeping with the newly announced HHS Overdose Prevention Strategy. SAMHSA is also considering mechanisms to make this flexibility permanent. The March 2020 exemption was issued to protect public health by reducing the risk of COVID-19 infections among patients and health care providers. While the take-home flexibility achieved that goal, it also proved to have other benefits for patients in Opioid Treatment Programs (OTP). SAMHSA allowed Opioid Treatment Programs to dispense 28 days of take-home methadone doses to stable patients for the treatment of opioid use disorder, and up to 14 doses of take-home methadone for less stable patients, who the OTP determines can safely handle this level of take-home medication.” Additional information is available at <https://www.samhsa.gov/newsroom/press-announcement>.

OSHA Suspends Vaccination Mandate

“On November 12, 2021, the U.S. Court of Appeals for the Fifth Circuit granted a motion to stay OSHA's COVID-19 Vaccination and Testing Emergency Temporary Standard, published on November 5, 2021 (86 Fed. Reg. 61402) (“ETS”). The court ordered that OSHA “take no steps to implement or enforce” the ETS “until further court order.” While OSHA remains confident in its authority to protect workers in emergencies, OSHA has suspended activities related to the implementation and enforcement of the ETS pending future developments in the litigation.” The suspension is documented at <https://www.osha.gov/coronavirus/ets2>.

Policy Strategies for Improving Access to Medication for Opioid Use Disorder During and After the COVID-19 Pandemic

The Milbank Memorial Fund has released an issue brief entitled *Policy Strategies for Improving Access to Medication for Opioid Use Disorder During and After the COVID-19 Pandemic*. The brief notes that “a number of federal and state policy changes have been put in place to improve access to medications for opioid use disorder (MOUD) during the COVID-19 pandemic by modifying the treatment and reimbursement landscape. These changes have addressed service delivery, medication-prescribing authority, dispensing rules, prescriptions and refill parameters, counseling requirements, and drug-screening rules. The number and speed of these changes is unprecedented. The need to expand access to MOUD will not end with the COVID-19 emergency, as the number of individuals in need of treatment far exceeds the capacity of MOUD providers and facilities. Some of the policy changes that have made MOUD more accessible during the pandemic have already been made permanent at the state level (e.g., expanding the definition of “telehealth”). The continuation of other changes will require ongoing support from state and national policymakers. We recommend continued efforts around three regulatory strategies in particular:

1. Moving forward, national and state policymakers should encourage the continuation of federal policies allowing buprenorphine initiation via telemedicine and the removal of state-level restrictions that go beyond federal requirements. This would promote equity for individuals with SUD living in areas with insufficient numbers of waived providers as well as for individuals facing transportation barriers and other obstacles to receiving treatment in person.
2. National and state policymakers should also promote the continuation of federal policies allowing OTPs to dispense more doses of methadone and the removal of any additional state-level methadone dispensing restrictions that exist. Allowing patients to take home more doses reduces the burden on them to travel to and spend time at the OTP in order to maintain treatment. OTP experiences during the

pandemic indicate that allowing patients to have more take-home doses has gone well, with few diversion and overdose problems.^{54,55}

3. Policymakers should work to prohibit Medicaid prior authorization requirements for MOUD and to make permanent any temporary suspensions of prior authorization requirements for these medications that were implemented during the COVID-19 emergency.

Although there are other policy avenues for expanding access to MOUD, these three areas are particularly relevant for reducing logistical barriers to treatment.” The entire issue brief is available at [Issue Brief](#).

Health and Human Services (HHS) Updates

HHS has released a new overdose prevention strategy featuring federal action around the following:

- Primary prevention
- Harm reduction
- Evidence-based treatment
- Recovery support

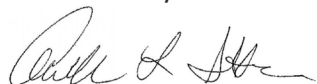
The strategy is available at [HHS Overdose Prevention](#)

HHS has also announced the release of the HHS Health Workforce Strategic Plan which “provides a forward-looking framework for health workforce improvements, focused on four key goals:

1. Expanding supply,
2. Ensuring equitable distribution,
3. Improving quality, and
4. Enhancing the use of data and evidence to improve program outcomes.”

The Plan is available at <https://bhw.hrsa.gov>.

Submitted by:



Amanda L. Ittner

Finalized: 12.3.21

Attachments:

SUD OPB BYLAWS

BYLAWS OF
MID-STATE HEALTH NETWORK
SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD

ARTICLE I
NAME AND FORMATION

1.1 NAME

The name of the entity is the Mid-State Health Network Substance Use Disorder Oversight Policy Board, referred to as the "Board" in these bylaws.

1.2 LEGAL BASIS FOR FORMATION

1.2.1 Mid-State Health Network ("MSHN") is a community mental health regional entity formed under Section 204 the Michigan Mental Health Code (Public Act 258 of 1974, as amended the "Code") which serves the following twenty-one (21) counties commonly referred to collectively as Region 5 by the Michigan Department of Community Health (MDCH): Arenac County, Bay County, Clare County, Clinton County, Eaton County, Gladwin County, Gratiot County, Hillsdale County, Huron County, Ingham County, Ionia County, Isabella County, Jackson County, Mecosta County, Midland County, Montcalm County, Newaygo County, Osceola County, Saginaw County, Shiawassee County and Tuscola County (referred to individually as a "County," and collectively as the "Counties").

1.2.2 MSHN has qualified for status as a MDCH-designated community mental health entity authorized to coordinate the provision of substance use disorder services in Region 5.

1.2.3. The Board is formed pursuant to Section 287(5) of the Code which requires "A department-designated community mental health entity (designated as a Pre-Paid Inpatient Health Plan or PIHP) shall establish a Substance Use Disorder Oversight Policy Board through a contractual agreement between the department-designated community mental health entity and each of the counties served by the community mental health services program under 1967 (Ex Sess) PA 8, MCL 124.531 to 124.536, or other appropriate state law." 1.2.4. As a designated community mental health entity, the Code requires MSHN to establish a substance use disorder oversight policy board through a written contractual agreement with the Counties

1.2.5. MSHN and the Counties entered into a written Intergovernmental Contract to establish the Board effective as indicated on the referenced documents (the "Intergovernmental Contract").

1.2.6. These Bylaws were adopted by the SUD Oversight Policy Board and approved by the MSHN Board in accordance with the provisions of the Code and the Intergovernmental Contract.

ARTICLE II PURPOSES

2.1 PURPOSES

In accordance with the Code and the Intergovernmental Contract, the purposes of the Board are as follows:

2.1.1 Approval of any portion of MSHN's budget that contains 1986 PA 2 (MCL 211.24e(11)) funds ("PA 2 Funds") or other local funds for the treatment or prevention of substance use disorders which shall be used only for substance use disorder treatment, intervention and prevention in the Counties from which the PA 2 Funds or other local funds originated;

2.1.2. Advise and make recommendations regarding MSHN's budgets for substance use disorder treatment or prevention using non-PA 2 Funds or other non-local funding sources; and

2.1.3 Advise and make recommendations regarding contracts with substance use disorder treatment or prevention providers.

2.1.4 Advise and make recommendations regarding any other matters as agreed to by the Counties and MSHN, and assigned to the Board by MSHN.

ARTICLE III BOARD MEMBERSHIP

3.1 NUMBER AND SELECTION OF MEMBERS

3.1.1 The Board shall consist of twenty-one (21) members. The Board of Commissioners of each County shall appoint one (1) person to serve as a member of the Board. Each County Board of Commissioners may appoint a county commissioner or others, as allowed by Michigan law, that it deems best represents the interests of the County. While the appointment decision is vested within the sole authority of the each County Board of Commissioners, the Board encourages appointments which represent the diversity and cultural diversity of the MSHN service area, appointments of persons in recovery from a substance use disorder, underserved population and other related constituencies such as education, health, and social services agencies; advocacy organizations; public or private substance abuse prevention, treatment or recovery providers; or, members of the general public, including civic organizations and the business community.

3.1.2 Each Board member shall have the right to assign a designated alternate to appear on his or her behalf at Board meetings, and such alternate shall carry the right to vote on behalf of the Board member. To exercise this option, the appointing County Board of Commissioner's must advise the Board's Chairperson in writing of the alternate's appointment. Unless such a written notification of appointment is on file with the Board, the Chairperson will not recognize the standing of the alternate at a Board meeting.

3.2 TERM, REMOVAL, AND RESIGANATION

3.2.1 The members of the Board shall serve at the pleasure of the appointing Board for a term of membership of three (3) years, from September 1 of the year of appointment. Members may be reappointed to additional or successive terms in the discretion of the respective appointing Board of Commissioners.

3.2.1.1 For purposes of initial Board appointment, members shall establish a process to stagger terms to assure no more than one-third (1/3) of the members terms expire in any given year.

3.2.2 Each Board member may be removed from the Board, with or without cause, by a majority vote of the appointing County Board of Commissioners. The removal shall become effective upon receipt by the Board of a duly adopted written resolution of the appointing County. The Board Chairperson is responsible for informing the appointing County of any lack of participation or attendance by the County's appointed Board member(s).

3.2.3 A Board member may resign at any time by providing notification to the appointing County of Commissioners and the Board. The resignation will become effective upon receipt of notice by the appointing County Board of Commissioners or at a later time designated in the notice.

3.3 VACANCIES

A vacancy on the Board may occur through death, removal or resignation of a Board member. A vacancy shall be filled for the unexpired term by the appointing County in the same manner as the original appointment. The County may notify the Board of its intent not to fill the vacant position.

ARTICLE IV BOARD ACTION

4.1 PLACE OF MEETINGS

All meetings of the Board shall be held at the principal office of MSHN or at such other place as shall be determined by the Board members and stated in the notice of meeting.

4.2 ORGANIZATIONAL MEETING

The first meeting in each calendar year shall be the organizational meeting. At each such meeting, the previous Board Chairperson if he or she is still a member of the Board or another member if there is no former Chair shall initially preside ("Presiding Chair"). The organizational meeting shall be held within sixty (60) days of New Year's Day, at the call of the Presiding Chair. The first item of business shall be election of the Board Chairperson. The Presiding Chair shall call for nominations for the office of Chairperson and when nominations are closed by majority vote or no other nominations are forthcoming, the Presiding Chair shall call for a roll call vote. When one nominee receives a majority of the votes of the members elected and serving, the nominee shall be declared Board Chairperson. The newly elected Chairperson shall assume the role of Chairperson and proceed with the election to the Vice-chairperson and Secretary, which shall be conducted by roll call vote.

4.3 ANNUAL MEETING

The annual meeting of the Board for purposes of reviewing and approving the portions of the MSHN budget that contain PA 2 Funds, and such other business as may be come before the meeting, shall be held during the month of August each year after MSHN has prepared its budget.

4.4 SPECIAL MEETINGS

The Board may hold special meetings as needed in order to fulfill the purposes listed in Section 2.1. Special meetings of the Board may be called by the Chairperson, and shall be called by the Chairperson at the written request of two or more Board members. Notice shall be given as provided in Section 4.5 of these Bylaws.

4.5 NOTICE OF BOARD MEETINGS

Written notice of the time, place and purposes of each meeting of the members of the Board shall be given to each Board member and the public in accordance with the Michigan Open Meetings Act, 1976 PA 267, as amended. The attendance of a Board member at a Board meeting shall constitute a waiver of notice of the meeting, except for where a Board member attends the meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully convened. In addition, a Board member may submit a signed waiver of notice that shall constitute waiver of notice of the meeting.

4.6 QUORUM AND MEETING BY REMOTE COMMUNICATION

4.6.1 A majority of members of the Board, appointed and serving shall constitute a quorum for the transaction of ordinary business of the Board. In the event the Board shall meet and a quorum is not present, the Board, with the approval of those present, may adjourn the meeting to a later day and time provided that proper notice to members and the public is given

4.6.2 A Board member may participate in a meeting by conference telephone or any other similar communication equipment through which all persons participating in the meeting can hear each other and can be heard by and hear the public; provided that a quorum exists as defined in Section 4.6.1 of Board members who are physically present at the meeting. Unless permitted by law, Board members who participate by remote communication will not be considered in determining the existence of a quorum. If a quorum is physically present, Board members who participate by telephone or other similar communication equipment satisfying this Article are eligible to vote in and otherwise participate in the business of the meeting.

4.7 COMPENSATION AND EXPENSES

Board members will be eligible for a per diem and mileage expenses as fixed by the MSHN Board. However, Board members will not be eligible for reimbursement of mileage expenses if employed by a public entity and to the extent the Board member receives reimbursement of mileage expenses from the Board member's employer. A Board member may not receive more than one per diem per day regardless of the number of meetings scheduled for the Board on that day.

4.8 VOTING

The Board members shall be entitled to one vote each. No member present shall abstain from voting yes or no unless he or she has received the unanimous permission of the Board members in attendance.

Approval of any portion of MSHN's budget that contains PA 2 Funds or matters of a non-advisory nature shall be decided by a majority of the members appointed and serving, not just those attending at any meeting. Procedural matters or advisory matters are decided by an affirmative vote of the majority of Board members present at a meeting where a quorum is present.

4.9 AGENDA FOR MEETINGS

The Board Chairperson, after first reviewing pending matters and requests, shall prepare a draft of the agenda of business for all Board meetings. Matters on the agenda and not yet acted upon at the time of adjournment will be placed on the agenda of the next regular meeting or special meeting if one is called. The Chairperson of the Board shall review and add or delete items, as he or she considers proper. Unanticipated agenda items that require discussion or decisions may be covered under the Other Business agenda reference. It is each Board members responsibility to attend the meeting to understand other business items that may be covered. Upon completion of the agenda for a regular Board meeting, the Board Chairperson shall have distributed to Board members copies of the agenda, together with copies of reports, explanations, etc. which shall relate to matters of business contained within the agenda. Unless extenuating circumstances arise, the agenda and related materials shall be sent to each Board member at the address each has provided, at least five (5) calendar days prior to any regular meeting.

4.10 Order of Business

Generally, Board meetings should adhere to the following order of business, although the Board may deviate from this order if approved by a majority of the members attending a meeting:

- a. Call to Order
- b. Roll Call
- c. Approval of Agenda
- d. Approval of Previous Meeting Minutes
- e. Public Comment
- f. Board Chair Report
- g. Chief Executive Officer Report
- h. Action Items
- i. Adjournment

4.11. CONDUCT OF MEETINGS

4.11.1. Chairperson. The person elected Chairperson in the first meeting each year of the Board shall preside at all meetings of the Board. In the absence of the Chairperson, the person elected Vice-chairperson shall preside. If neither the Chairperson nor the Vice-chairperson is present, the Board members present shall elect a member to preside during the absence of the Chairperson or Vice-chairperson.

4.11.2 Minutes Requirements. All meetings shall be open to the public, with the exception of closed meetings as provided by the Open Meetings Act, 1976 PA 267. Minutes shall be kept on file in the office of MSHN.

4.11.3 Order of Precedence of Motions. When a motion is seconded and before the Board, or a Committee of the Board, no other motion shall be received except the following:

- a. To fix the time to which to adjourn
- b. To adjourn
- c. For the previous question
- d. To lay on the table
- e. To postpone indefinitely
- f. To postpone to a date certain
- g. To refer
- h. To amend

These motions shall have precedence in the order as above named.

4.11.4 Motions to Adjourn. A motion to adjourn shall always be in order except while a vote is being taken on any other motion already before the Committee or Board, or when a member has the floor; provided, that there shall be other intervening business or a change in the circumstances between the two motions to adjourn.

4.11.5 Motions to Reconsider. A motion for the reconsideration of any question shall be in order if made on the same day or at the Committee or Board meeting next succeeding that on which the decision proposed to be reconsidered was made; providing, however, that a second reconsideration of any question or a reconsideration at a later date may be had with the consent of two-thirds (2/3) of the members elected and serving, but in such event the moving member shall file written notice of his/her intention to move for a reconsideration in the office of the Executive Director of MSHN at least one day before making such a motion.

4.11.5 Reports and Motions Requiring Signatures. Reports of Committees shall be in writing and the names of the members of such Committees concurring in such reports shall be noted thereon. Every written resolution or motion shall have noted the name of the member or members introducing the same.

4.11.6 Division of Question. Upon request by any member, any question before the Committee or Board may be divided and separated into more than one question; provided, however, that such may be done only when the original is of such a nature that upon division, each of the resulting questions is a complete question permitting independent consideration and action.

4.11.7 Motion To Clear The Floor. If, in the judgment of the Chairperson, there is a confusion of parliamentary procedure existing, the Chairperson shall have the right to request a

"motion to clear the floor" which motion, if made and seconded, shall be undebatable, shall take precedence over all other motions, shall be forthwith put by the Chairperson, and, if carried, shall clear the floor completely and with the same effect as if all matters on the floor were withdrawn. The motion to clear the floor shall not be reconsidered; but its passage shall not limit the right of any member to move the reconsideration of any other matter in the same manner as, but for the passage of the motion to clear the floor, would be in accordance with these Rules.

4.11.8 Appeal From A Decision Of Chairperson. When an appeal is taken from the decision of the Chairperson, the member taking the appeal shall be allowed to state his/her reason for doing so. The question shall be then immediately put in the following form: "Shall the ruling of the Chairperson be sustained?" The question shall be determined by a majority vote of the members present, except the Chairperson, upon the request of any member, shall not preside over such a vote.

4.11.9 Public Comment. A public comment period will be provided at every Board meeting. The length of comment during this period will be limited to three (3) minutes per person, unless the Board authorizes additional time

4.11.11 Procedures to Address the Board. Any person who addresses the Board shall state their name for the record. When there are many people who desire to address the Board, the Chairperson may implement other reasonable rules for public participation.

4.11.12 Parliamentary Authority. Robert's Rules of Order (Newly Revised) shall govern all questions of procedure not otherwise provided by these Bylaws, the Intergovernmental Contract, or by state law.

4.11.13 Temporary Suspension of the Rules. The Board's parliamentary rules may be suspended temporarily at any time by vote of two-thirds (2/3's) of the members elected.

4.12. RECORD OF MEETINGS

MSHN shall provide clerical support to take minutes as required by the Open Meetings Act, MCL 15.261, et seq. The Chairperson shall verify that such clerical support will be available prior to each meeting, and may appoint a member to prepare such minutes in the absence of such support being available. The minutes shall include all the actions and decisions of the Board. The minutes shall include the names of the movant and second on all motions and resolutions and the vote of the members thereon. The record shall also state whether the vote was by voice or by roll call; when by roll call, and the names of persons addressing the Board. Copies of each resolution or other matter acted upon by the Board, as well as the official minutes, shall be maintained in a location designated by the Board. Copies of the approved, affirmed minutes shall be provided to each County. The minutes shall not be required to include a written record or summary of the discussion or comments of the Board members, nor of the comments made by members of the public.

4.13 COMPLIANCE WITH LAWS

The Board and its members shall fully comply with all applicable laws, regulations and rules applicable to its operation, including without limitation 1976 PA 267 (the "Open Meetings

Act”), 1976 PA 422 (the “Freedom of Information Act”), 2012 PA 500, 2012 PA 501 and 1986 PA 2.

4.14 CONFLICT OF INTEREST

The Board shall adopt and adhere to a conflict of interest policy. Each member of the Board shall disclose any conflicts of interest while serving on the Board.

ARTICLE V OFFICERS

5.1 OFFICERS

The officers shall be a Chairperson, Vice Chairperson and Secretary. Only Board members may serve as an officer.

5.2 ELECTION AND TERM OF OFFICE

Officers shall be elected from among the Board members for a term of one (2) year (or until their successors have been elected) by the Board at its annual meeting.

5.3 REMOVAL OF BOARD OFFICERS

Any officer of the Board may be removed from office with or without cause by the vote of a majority of the Board members elected and serving during a regular or special meeting of the Board.

5.4 VACANCIES

In the event of the death, resignation, removal or other inability to serve of any officer, the Board shall elect a successor who shall serve until the expiration of the normal term of such officer or until his or her successor has been elected.

ARTICLE VI COMMITTEES

6.1 COMMITTEES

The Board may establish and define the responsibilities of such standing or special committees from time to time as it shall deem appropriate to fulfill the purposes of the Board set out in Section 2.1. The Chairperson shall, in consultation with the Board, select membership of any committee formed. Only Board members may serve as committee members.

VII CONSTRUCTION AND AMENDMENTS

7.1. Interpretation

Wherever possible, these Bylaws shall be construed in a manner consistent with Michigan law, the Code and the Intergovernmental Contract. Where there is a conflict with Michigan law, the Code or the Intergovernmental Contract, the conflicting terms of these Bylaws shall be null and void and considered severed from the remaining portions, which shall continue in full force and effect.

7.2 Amendment

These bylaws may be amended by the members of the Board acting in accordance with the voting requirements set forth in Section 4.8. The agenda of the meeting shall set forth a summary of the proposed amendment(s) at least fourteen (14) days prior to the date of the meeting. An affirmative vote to amend the Bylaws must be approved by the Board of Directors of MSHN. Any amendment of these bylaws must be consistent with the Michigan law, the Code and the Intergovernmental Contract

ATTESTATION

These Bylaws were revised by the Mid-State Health Network Substance Use Disorder Oversight Policy Board at a regularly scheduled meeting held on February 17, 2016.


Chairperson of Mid-State Health Network
Substance Use Disorder Oversight Policy Board

2.17, 2016

These Bylaws were approved as revised by the Mid-State Health Network Board of Directors at a regularly scheduled meeting held on May 3, 2016.


Chairperson of Mid-State Health Network
Board of Directors

5.3, 2016

**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	Interest	Beginning PA2 Fund Balance and Receipts
Arenac	76,431	15,112	05.14.21	14,980	08.19.21	3,608	11.05.21	34,960	33,700	41	110,172
Bay	1,007,790	88,606	05.20.21	87,834	09.09.21	21,158	11.12.21	205,048	197,597	460	1,205,847
Clare	207,257	23,047	07.02.21	22,846	09.16.21	5,503		51,253	51,396	88	258,740
Clinton	449,115	56,523	06.25.21	56,031	09.24.21	13,497	11.10.21	124,880	126,050	231	575,396
Eaton	599,531	103,445	07.27.21	102,544	10.27.21	24,701		228,509	230,690	308	830,529
Gladwin	78,312	16,668	07.16.21	16,523	10.19.21	3,980		38,510	37,171	42	115,524
Gratiot	111,762	21,471	06.11.21	21,313	09.03.21	5,134	11.12.21	50,780	47,918	49	159,729
Hillsdale	121,230	22,950	05.07.21	22,750	08.10.21	5,480		49,079	51,179	79	172,488
Huron	191,125	28,772	06.14.21	28,521	09.08.21	6,870	11.09.21	63,982	64,162	98	255,385
Ingham	806,542	297,423	10.13.21	294,833	10.13.21	71,020	11.19.21	678,015	663,275	466	1,470,282
Ionia	451,620	33,779	06.29.21	33,484	09.20.21	8,066	11.16.21	76,540	75,328	211	527,159
Isabella	676,608	58,510	06.29.21	58,000	09.20.21	13,971		135,120	130,480	299	807,387
Jackson	626,551	146,654	06.22.21	145,377	09.16.21	35,019	11.19.21	323,618	327,050	350	953,950
Mecosta	395,797	39,034	06.21.21	38,694	09.20.21	9,320	11.09.21	91,312	87,047	161	483,005
Midland	462,247	66,561	06.18.21	65,981	09.10.21	15,893	11.19.21	153,648	148,435	219	610,901
Montcalm	330,585	46,255	09.16.21	45,852	09.16.21	11,045		104,489	103,152	157	433,894
Newaygo	109,449	36,458	07.21.21	36,141	10.19.21	8,706		87,981	81,305	66	190,819
Osceola	150,367	14,540	06.21.21	14,414	09.20.21	3,472	11.19.21	32,877	32,425	59	182,852
Saginaw	2,000,969	224,191	07.07.21	222,239	09.16.21	53,533		475,526	499,963	913	2,501,846
Shiawassee	552,362	42,190	06.10.21	41,822	09.08.21	10,074	11.09.21	96,419	94,086	223	646,671
Tuscola	250,351	25,055	06.15.21	24,837	09.14.21	5,983	11.10.21	56,919	55,875	118	306,345
	\$ 9,656,000	\$ 1,407,238		\$ 1,395,013		\$ 336,033		\$ 3,159,460	\$ 3,138,284	\$ 4,636	\$ 12,798,921

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	Final 2021	YTD Payments	Ending PA2 Fund Balance
Arenac	110,172	06	1,452	2,859	966	2,689	2,448	2,734	1,967	4,246	800	1,649	2,500	7,527	-	31,837	\$ 78,336
Bay	1,205,847	09	10,312	29,425	22,371	22,030	17,431	16,493	19,305	28,622	24,559	31,019	45,967	51,333	922	319,788	\$ 886,059
Clare	258,740	18	6,610	7,439	7,191	7,357	7,041	6,704	7,088	7,690	6,319	6,910	7,567	8,535	-	86,451	\$ 172,289
Clinton	575,396	19	11,861	7,169	11,761	7,226	7,328	7,584	8,311	7,226	7,682	12,073	12,238	7,743	(125)	108,074	\$ 467,322
Eaton	830,529	23	18,539	16,144	24,054	16,570	16,046	16,387	16,489	15,892	15,333	21,944	14,468	19,109	1,628	212,603	\$ 617,925
Gladwin	115,524	26	2,363	2,450	2,878	2,241	1,987	1,735	1,916	1,836	2,849	4,571	2,958	3,818	276	31,878	\$ 83,646
Gratiot	159,729	29	5,028	4,599	5,901	4,766	5,287	3,834	5,713	3,463	4,764	7,364	5,699	5,789	-	62,208	\$ 97,521
Hillsdale	172,488	30	524	2,165	-	2,390	1,396	823	-	947	(290)	1,166	937	668	-	10,727	\$ 161,762
Huron	255,385	32	4,173	4,123	2,777	3,339	5,300	5,066	4,271	12,000	2,778	4,741	5,312	8,000	6,145	68,025	\$ 187,359
Ingham	1,470,282	33	55,727	40,671	52,568	42,584	37,158	39,529	43,403	38,489	44,366	41,655	33,531	51,894	1,092	522,667	\$ 947,615
Ionia	527,159	34	4,423	13,629	5,867	6,533	5,706	15,958	12,463	7,650	10,161	7,012	8,151	15,165	3,337	116,055	\$ 411,104
Isabella	807,387	37	14,905	15,493	18,133	19,450	14,049	17,513	18,389	14,442	26,229	21,534	17,486	24,073	4,228	225,924	\$ 581,463
Jackson	953,950	38	8,485	32,945	20,516	21,003	32,426	5,490	16,893	21,334	23,343	19,641	19,632	20,505	21,521	263,732	\$ 690,218
Mecosta	483,005	54	12,352	13,926	13,278	14,600	13,407	14,338	14,075	14,861	16,553	14,648	9,943	10,469	764	163,214	\$ 319,791
Midland	610,901	56	9,016	9,943	6,893	6,750	10,459	18,953	26,290	19,687	5,094	23,819	21,162	16,862	79	175,007	\$ 435,893
Montcalm	433,894	59	2,040	2,121	2,071	2,142	2,104	50,785	1,820	2,118	1,822	1,860	41,536	1,884	(132)	112,173	\$ 321,720
Newaygo	190,819	62	3,439	2,861	2,426	2,734	2,630	2,944	8,859	7,099	8,163	4,550	5,442	9,401	(2,854)	57,692	\$ 133,127
Osceola	182,852	67	5,064	5,204	5,271	6,095	5,367	5,837	5,882	5,650	5,912	4,980	5,608	5,293	737	66,900	\$ 115,952
Saginaw	2,501,846	73	43,801	54,200	54,950	71,839	67,575	64,563	51,567	67,258	29,280	89,492	32,550	28,597	17,962	673,633	\$ 1,828,212
Shiawassee	646,671	78	19,053	17,089	26,729	21,747	8,914	17,959	17,602	23,572	15,991	15,345	8,666	10,541	-	203,209	\$ 443,461
Tuscola	306,345	79	5,228	5,858	3,480	4,184	6,700	6,348	5,351	8,193	4,000	6,074	9,466	22,651	-	87,534	\$ 218,811
<u>\$ 12,798,921</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>\$ 312,274</u>	<u>\$ 255,709</u>	<u>\$ 342,048</u>	<u>\$ 310,819</u>	<u>\$ 329,857</u>	<u>\$ 55,581</u>	<u>3,599,333</u>	<u>\$ 9,199,588</u>

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

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Arenac						
Peer 360 Recovery					24,054	24,054
Sterling Area Health Center				7,783		7,783
Arenac Total				7,783	24,054	31,837
Bay						
Boys and Girls Club Bay Region				72,073		72,073
Neighborhood Resource Center				82,346		82,346
Peer 360 Recovery					44,626	44,626
Sacred Heart Rehabilitation				12,938		12,938
Sterling Area Health Center				29,871		29,871
Ten Sixteen Recovery		11,358			66,576	77,934
Bay Total		11,358		197,228	111,202	319,788
Clare						
Ten Sixteen Recovery		13,558		50,000	22,893	86,451
Clare Total		13,558		50,000	22,893	86,451
Clinton						
Eaton Regional Education Service Agency				98,034		98,034
St. John's Police Department				5,013		5,013
State of Michigan MRS	5,000					5,000
Ten Sixteen Recovery					27	27
Clinton Total	5,000			103,047	27	108,074
Eaton						
Barry Eaton District Health				7,062		7,062
Eaton Regional Education Service Agency				109,935		109,935
Prevention Network				12,000		12,000
State of Michigan MRS	5,000					5,000
Wellness, InX		78,607				78,607
Eaton Total	5,000	78,607		128,997		212,603
Gladwin						
Ten Sixteen Recovery		8,922		14,316	8,640	31,878
Gladwin Total		8,922		14,316	8,640	31,878
Gratiot						
Gratiot County Child Advocacy Association				46,157		46,157
Ten Sixteen Recovery		16,051				16,051
Gratiot Total		16,051		46,157		62,208
Hillsdale						
McCullough, Vargas, and Associates		4,819		5,908		10,727
Hillsdale Total		4,819		5,908		10,727
Huron						
Huron County Health Department				6,145		6,145
Peer 360 Recovery					61,880	61,880
Huron Total				6,145	61,880	68,025
Ingham						
Child and Family Charities				25,315		25,315
Cristo Rey Community Center		57,920		12,650		70,570
Eaton Regional Education Service Agency				17,451		17,451
Ingham County Health Department				15,656		15,656
State of Michigan MRS	15,000					15,000
Wellness, InX		157,591			221,084	378,675
Ingham Total	15,000	215,511		71,072	221,084	522,667
Ionia						
County of Ionia				78,935		78,935
Wedgwood Christian Services					37,120	37,120
Ionia Total				78,935	37,120	116,055
Isabella						
Addiction Solutions Counseling Center				10,268		10,268
Peer 360 Recovery					10,500	10,500
Ten Sixteen Recovery		14,951		62,318	127,887	205,156
Isabella Total		14,951		72,586	138,387	225,924

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

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Jackson						
Big Brothers Big Sisters of Jackson County, Inc				16,404		16,404
Family Service and Childrens Aid (Born Free)				116,050		116,050
Henry Ford Allegiance				9,632		9,632
Home of New Vision		11,646			110,000	121,646
Jackson Total		11,646		142,086	110,000	263,732
Mecosta						
Ten Sixteen Recovery		31,433		40,172	91,609	163,214
Mecosta Total		31,433		40,172	91,609	163,214
Midland						
Peer 360 Recovery					58,322	58,322
Ten Sixteen Recovery		29,947			9,949	39,896
The Legacy Center for Community Success				76,789		76,789
Midland Total		29,947		76,789	68,271	175,007
Montcalm						
Mid-Michigan District Health Department				73,944	16,396	90,340
Wedgwood Christian Services		21,834				21,834
Montcalm Total		21,834		73,944	16,396	112,173
Newaygo						
Arbor Circle				46,104		46,104
Newaygo County RESA				11,588		11,588
Newaygo Total				57,692		57,692
Osceola						
Ten Sixteen Recovery		22,024		44,876		66,900
Osceola Total		22,024		44,876		66,900
Saginaw						
First Ward Community Service				168,647		168,647
Great Lakes Bay Health Center				75,000		75,000
Parishioners on Patrol				5,000		5,000
Peer 360 Recovery					83,017	83,017
Sacred Heart Rehabilitation				36,275		36,275
Saginaw County Department of Public Health			14,999			14,999
Saginaw County Youth Protection Council				159,155		159,155
Saginaw Police Department				16,496		16,496
Ten Sixteen Recovery		11,390			103,655	115,045
Saginaw Total		11,390	14,999	460,572	186,672	673,633
Shiawassee						
Catholic Charities of Shiawassee and Genesee				120,747		120,747
Peer 360 Recovery					2,393	2,393
Prevention Network				64,000		64,000
Shiawassee County				11,069		11,069
State of Michigan MRS	5,000					5,000
Shiawassee Total	5,000			195,816	2,393	203,209
Tuscola						
List Psychological Services				10,608		10,608
Peer 360 Recovery					76,926	76,926
Tuscola Total				10,608	76,926	87,534
Grand Total	30,000	492,050	14,999	1,884,729	1,177,555	3,599,333

Mid-State Health Network
Summary of SUD Revenue and Expenses as of September 2021

	<u>Year to Date Actual</u>	<u>Full Year Budget</u>	<u>Remaining Budget</u>	<u>% to Budget</u>
Revenue				
Block Grant	8,100,907.75	9,899,381.00	1,798,473.25	81.83%
SOR Grants	1,321,832.54	2,963,194.00	1,641,361.46	44.61%
Medicaid	14,989,779.38	14,375,672.00	(614,107.38)	104.27%
Healthy Michigan	31,215,014.32	27,267,312.00	(3,947,702.32)	114.48%
PA2	3,599,333.02	4,872,596.00	1,273,262.98	73.87%
Totals	<u>59,226,867.01</u>	<u>59,378,155.00</u>	<u>151,287.99</u>	<u>99.75%</u>
Direct Expenses				
Block Grant	8,100,907.75	8,842,150.00	741,242.25	91.62%
SOR Grants	1,321,832.54	2,839,958.00	1,518,125.46	46.54%
Medicaid	10,612,989.28	10,800,000.00	187,010.72	98.27%
Healthy Michigan	21,771,152.10	20,900,000.00	(871,152.10)	104.17%
PA2	3,599,333.02	4,872,596.00	1,273,262.98	73.87%
Totals	<u>45,406,214.69</u>	<u>48,254,704.00</u>	<u>2,848,489.31</u>	<u>94.10%</u>
Surplus / (Deficit)	<u>13,820,652.32</u>			
Surplus / (Deficit) by Funding Source				
Block Grant	-			
SOR Grants	-			
Medicaid	4,376,790.10			
Healthy Michigan	9,443,862.22			
PA2	-			
Totals	<u><u>13,820,652.32</u></u>			

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 numerous 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 September 2021. The Analytical Summary box on page two 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:

- 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.

Through September 2021, MSHN used approximately \$8.1 M in Block Grant Funds. The updated budget amount is \$9.9 M which leaves a balance of \$1.8 M for the remainder of Fiscal Year 2021. The \$1.8 balance reflects all Block Grant categories such as Treatment, Women's Specialty, Prevention, Administration, and other miscellaneous grants (Gambling Disorder). Unspent funds in one category may not be used to cover cost overruns in another. Preliminary review of the Treatment Services category indicates the margin of revenue compared to expenses will be close. Although we do not anticipate a request for use of PA2 funds to offset regional Block Grant spending we are unable to definitively state this. If a request is needed, MSHN will provide sufficient detail for OPB action.

This report format will be used to keep you updated for the remainder of this fiscal year-end (9.30.2021). In addition, MSHN will closely monitor FY 22 Block Grant Revenue and Expenditure activity to ensure any requests needed for PA2 dollars are submitted to OPB in a timely manner.

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

	2020 October	November	December	2021 January	February	March	April	May	June	July	August	September	Reduction Strategy
90791 - Psychiatric Evaluation													Benefit Plan Change
Sum of PAID AMOUNT		112.50			112.50		112.50	135.00	337.50	450.00			
Sum of ALLOWED UNITS		1			1		1	2	3	4			
Distinct Count of CASE #		1			1		1	2	3	4			
90832 - Individual Therapy													Benefit Plan Change
Sum of PAID AMOUNT	8,401.99	5,839.78	4,424.55	4,955.23	5,745.25	4,951.52	3,069.00	2,088.91	2,514.00	1,989.20	1,542.00	1,959.00	
Sum of ALLOWED UNITS	167	119	92	95	110	93	57	40	46	37	28	36	
Distinct Count of CASE #	113	84	65	72	73	66	39	30	28	22	22	29	
90834 - Individual Therapy													Benefit Plan Change
Sum of PAID AMOUNT	16,579.13	9,904.54	9,812.15	11,275.77	11,851.14	5,414.73	4,977.74	5,836.48	8,991.90	7,582.69	8,977.38	6,102.95	
Sum of ALLOWED UNITS	212	134	136	144	150	71	69	73	107	91	108	77	
Distinct Count of CASE #	126	98	92	100	106	56	50	56	66	69	72	63	
90837 - Individual Therapy													Benefit Plan Change
Sum of PAID AMOUNT	24,084.72	14,396.65	13,689.15	11,153.66	12,698.93	19,423.10	16,222.13	14,034.84	14,609.99	12,457.35	14,407.48	15,284.94	
Sum of ALLOWED UNITS	245	151	148	116	135	196	162	135	137	131	144	147	
Distinct Count of CASE #	118	89	73	70	75	89	74	67	74	70	77	91	
90853 - Group Therapy													Benefit Plan Change
Sum of PAID AMOUNT	17,726.52	7,737.04	5,835.50	3,921.45	2,807.91	9,940.77	3,208.68	8,654.54	10,517.97	10,964.00	14,692.30	14,035.50	
Sum of ALLOWED UNITS	209	105	85	59	42	117	43	103	121	123	162	151	
Distinct Count of CASE #	78	52	36	29	21	41	23	36	44	53	57	65	
96372 - Medication Administration													Benefit Plan Change
Sum of PAID AMOUNT							58.00	29.00	58.00	29.00	58.00		
Sum of ALLOWED UNITS							2	1	2	1	2		
Distinct Count of CASE #							2	1	1	1	2		
99202 - E&M - New Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	920.00	460.00	368.00	261.00	348.00	92.00	184.00	363.00	87.00	184.00	184.00		
Sum of ALLOWED UNITS	10	5	4	3	4	1	2	4	1	2	2		
Distinct Count of CASE #	10	5	4	3	4	1	2	4	1	2	2		
99203 - E&M - New Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT						271.00	77.25	547.00		271.00	271.00	271.00	
Sum of ALLOWED UNITS						2	1	4		2	2	2	
Distinct Count of CASE #						2	1	4		2	2	2	
99205 - E&M - New Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT							174.53						
Sum of ALLOWED UNITS							1						
Distinct Count of CASE #							1						
99211 - E&M - Existing Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT										29.00			
Sum of ALLOWED UNITS										1			
Distinct Count of CASE #										1			
99212 - E&M - Existing Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT				36.41					106.00	159.00	159.00	164.00	
Sum of ALLOWED UNITS				1					2	3	3	3	
Distinct Count of CASE #				1					2	3	3	3	
99213 - E&M - Existing Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	4,849.64	4,697.31	4,039.35	3,010.81	2,365.55	1,859.05	1,271.24	1,460.24	1,019.05	609.05	1,111.05	681.05	
Sum of ALLOWED UNITS	64	60	52	38	31	23	17	19	13	8	14	9	
Distinct Count of CASE #	54	55	42	37	29	22	17	18	12	8	13	8	
99214 - E&M - Existing Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT							92.84	227.81	32.09	737.06	298.53	280.00	
Sum of ALLOWED UNITS							1	2	2	7	3	2	
Distinct Count of CASE #							1	1	1	3	2	1	
99215 - E&M - Existing Consumer													Benefit Plan and Copay Changes
Sum of PAID AMOUNT							41.06		227.00	227.00			
Sum of ALLOWED UNITS							1		1	1			
Distinct Count of CASE #							1		1	1			
A0110 - Transportation - Bus Token													Benefit Plan Change
Sum of PAID AMOUNT	549.96	576.99	601.99	12.50	56.97	151.96	46.99	61.99	394.45	178.95	417.94	65.50	
Sum of ALLOWED UNITS	31	32	27	2	3	7	4	3	9	8	12	2	
Distinct Count of CASE #	29	32	27	2	3	7	4	3	9	8	12	2	
G2067 - Methadone Weekly Bundle													Benefit Plan Change
Sum of PAID AMOUNT	80.00	100.00		521.74			24.00	24.00		12.00	120.00		
Sum of ALLOWED UNITS	4	5		5			2	2		1	3		
Distinct Count of CASE #	1	1		3			1	1		1	1		
G2078 - Methadone Take Home Supply													Benefit Plan Change
Sum of PAID AMOUNT				3.26									
Sum of ALLOWED UNITS				1									
Distinct Count of CASE #				1									
H0001 - Assessment													Benefit Plan Change
Sum of PAID AMOUNT	10,048.12	6,941.97	5,482.50	7,002.04	7,012.50	5,917.81	3,973.05	6,247.50	7,012.50	5,355.00	6,035.20	7,161.35	
Sum of ALLOWED UNITS	74	57	43	56	55	47	32	49	55	42	49	57	
Distinct Count of CASE #	74	57	43	56	55	47	32	49	55	42	49	57	
H0003 - Drug Screen													Benefit Plan Change
Sum of PAID AMOUNT	76.50	127.50	76.50	51.00	51.00	25.50		25.50		51.00	25.50	25.50	
Sum of ALLOWED UNITS	3	5	3	2	2	1		1		2	1	1	
Distinct Count of CASE #	2	4	2	2	2	1		1		2	1	1	
H0004 - Individual Counseling													Benefit Plan Change
Sum of PAID AMOUNT	7,234.00	6,729.50	7,487.50	6,767.00	4,702.00	4,130.00	1,898.00	1,085.00	1,442.50	1,245.00	1,119.50	1,793.50	
Sum of ALLOWED UNITS	348	313	361	319	232	197	91	52	70	60	54	87	
Distinct Count of CASE #	69	67	61	67	47	42	17	15	14	10	10	12	
H0005 - Group Counseling													Benefit Plan Change
Sum of PAID AMOUNT	2,178.00	1,476.00	2,019.00	1,563.00	784.00	492.00	820.00	656.00	697.00	328.00	451.00	123.00	
Sum of ALLOWED UNITS	53	36	49	38	19	12	20	16	17	8	11	3	
Distinct Count of CASE #	16	17	18	15	8	5	6	5	6	5	2	1	
H0006 - Case Management													Benefit Plan Change
Sum of PAID AMOUNT	17,459.00	13,751.50	16,432.00	14,766.50	11,422.00	13,399.00	10,660.50	8,867.00	10,672.00	9,360.50	11,412.50	12,405.50	
Sum of ALLOWED UNITS	414	332	396	356	276	324	259	212	253	216	258	282	
Distinct Count of CASE #	270	232	245	243	198	201	172	153	173	140	168	158	
H0010 - Withdrawal Management													Benefit Plan Change
Sum of PAID AMOUNT	7,590.00	3,450.00	4,830.00	2,415.00	6,900.00	3,795.00	3,105.00	2,415.00	4,830.00	6,900.00	5,520.00	2,070.00	
Sum of ALLOWED UNITS	22	10	14	7	20	11	9	7	14	20	16	6	
Distinct Count of CASE #	6	3	5	2	6	3	2	3	5	5	5	2	
H0012 - Withdrawal Management													Benefit Plan Change
Sum of PAID AMOUNT	1,562.50	937.50			625.00	3,125.00	1,250.00			625.00		2,187.50	
Sum of ALLOWED UNITS	5	3			2	10	4			2		7	
Distinct Count of CASE #	2	1			1	3	1			1		3	
H0018 - Residential Treatment													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	68.50				598.50	399.00	66.50	1,944.00			2,443.50		
Sum of ALLOWED UNITS	1				9	6	1	28			28		
Distinct Count of CASE #	1				1	2	1	2			2		

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

	2020 October	November	December	2021 January	February	March	April	May	June	July	August	September	Reduction Strategy
H0019 - Residential Treatment													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	29,257.50	23,117.00	28,327.50	33,537.50	25,832.00	18,066.00	17,844.50	10,647.00	23,888.00	19,536.00	20,010.00	31,706.00	
Sum of ALLOWED UNITS	191	152	187	229	182	126	118	70	161	132	128	207	
Distinct Count of CASE #	14	15	14	14	17	9	10	8	11	12	13	16	
H0020 - Methadone Dosing													Benefit Plan Change
Sum of PAID AMOUNT	26,488.00	23,384.00	22,176.00	19,512.00	14,168.00	11,896.00	7,688.00	6,952.00	4,896.00	3,224.00	2,744.00	2,224.00	
Sum of ALLOWED UNITS	3,311	2,923	2,772	2,439	1,771	1,487	961	869	612	403	343	278	
Distinct Count of CASE #	119	103	95	88	73	59	40	35	27	18	14	11	
H0038 - Peer Recovery Supports													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	54,802.74	51,611.00	43,667.00	31,332.50	25,266.75	20,986.50	5,953.50	8,440.00	12,519.50	14,055.70	14,166.00	15,129.50	
Sum of ALLOWED UNITS	4,042	3,979	3,436	2,841	2,099	2,038	619	980	1,523	1,380	1,716	1,999	
Distinct Count of CASE #	170	165	173	161	148	143	73	90	95	85	105	129	
H0048 - Drug Screen													Benefit Plan Change
Sum of PAID AMOUNT	2,388.60	1,952.10	2,063.60	2,217.39	2,465.50	2,192.50	1,984.00	1,943.50	2,703.57	2,612.76	2,730.57	2,919.50	
Sum of ALLOWED UNITS	194	159	168	180	199	177	160	157	219	211	220	235	
Distinct Count of CASE #	124	122	111	129	143	129	126	118	146	146	153	151	
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	1,490.00	555.00	456.00	198.00			341.00	165.00		104.00	104.00		
Sum of ALLOWED UNITS	266	102	90	36			62	30		16	16		
Distinct Count of CASE #	10	7	4	2			2	2		1	1		
H2034 - Recovery Housing													Benefit Plan Change and Rate Reduction
Sum of PAID AMOUNT	121,582.66	132,299.91	148,104.97	103,245.90	82,205.25	75,469.50	60,134.00	44,022.50	36,949.00	36,919.00	43,126.50	37,292.00	
Sum of ALLOWED UNITS	5,264	5,746	6,040	5,574	4,443	4,240	3,069	2,374	2,100	2,081	2,387	2,017	
Distinct Count of CASE #	243	248	253	240	211	184	161	119	117	102	112	108	
S0215 - Transportation - Per Mile													Benefit Plan Change
Sum of PAID AMOUNT	2,084.16	1,394.61	459.76	590.80	731.92	712.32	789.60	1,038.80	590.80	341.60	952.00	1,012.48	
Sum of ALLOWED UNITS	3,636	2,427	793	1,055	1,307	1,272	1,410	1,855	1,055	610	1,700	1,808	
Distinct Count of CASE #	34	30	9	11	14	15	15	19	11	7	17	19	
S9976 - Residential Room and Board													Benefit Plan Change and Rate Reduction
Sum of PAID AMOUNT	205,493.00	183,094.00	184,115.00	137,897.00	135,933.00	147,798.00	132,090.00	129,618.00	131,124.00	148,911.00	159,971.00	152,545.00	
Sum of ALLOWED UNITS	7,349	6,552	6,593	6,582	6,474	7,055	6,294	6,175	6,244	7,092	7,623	7,266	
Distinct Count of CASE #	460	417	397	425	451	444	399	419	430	466	474	478	
T1009 - Childcare Services													Benefit Plan Change
Sum of PAID AMOUNT	5,904.00	3,707.00	5,723.00	6,402.00	6,477.00	5,952.00	5,660.00	2,856.00	800.00	1,169.00	2,081.00	2,066.00	
Sum of ALLOWED UNITS	91	58	70	88	70	85	72	30	14	23	41	31	
Distinct Count of CASE #	7	7	7	8	4	8	5	5	4	3	3	4	
T1012 - Peer Recovery Supports													Benefit Plan and Copay Changes
Sum of PAID AMOUNT	13,578.00	20,768.00	21,576.00	9,412.00	7,813.00	5,824.00	349.00	541.00	466.00	249.00	694.00	302.00	
Sum of ALLOWED UNITS	438	609	649	295	231	175	10	22	16	9	30	11	
Distinct Count of CASE #	81	79	81	62	45	36	6	6	7	6	9	6	
Total Sum of PAID AMOUNT	582,477.24	519,136.90	531,767.02	412,061.46	368,973.67	362,284.26	284,166.61	260,926.61	277,485.82	286,865.86	315,824.95	309,806.77	
Total Sum of ALLOWED UNITS	26,644	24,076	22,208	20,561	17,867	17,773	13,552	13,315	12,797	12,727	15,104	14,724	
Total Distinct Count of CASE #	1,433	1,325	1,245	1,268	1,247	1,152	986	941	979	965	1,013	1,007	

SUMMARY												
	Prior Monthly											
	Average	January	February	March	April	May	June	July	August	September		
Total Sum of PAID AMOUNT	544,460.39	412,061.46	368,973.67	362,284.26	284,166.61	260,926.61	277,485.82	286,865.86	315,824.95	309,806.77		
Total Sum of ALLOWED UNITS	24,309	20,561	17,867	17,773	13,552	13,315	12,797	12,727	15,104	14,724		
Total Distinct Count of CASE #	1,334	1,268	1,247	1,152	986	941	979	965	1,013	1,007		
Change in PAID AMOUNT	(132,398.93)	(43,087.79)	(6,689.41)	(78,117.65)	(23,240.00)	16,559.21	9,380.04	28,959.09	(6,018.18)	(257,594.53)		
% Change in PAID AMOUNT	-24.32%	-10.46%	-1.81%	-21.56%	-8.18%	6.35%	3.38%	10.09%	-1.91%			
Change in ALLOWED UNITS	(3,748)	(2,694)	(94)	(4,221)	(237)	(518)	(70)	2,377	(380)			
% Change in ALLOWED UNITS	-15.42%	-13.10%	-0.53%	-23.75%	-1.75%	-3.89%	-0.55%	18.68%	-2.52%			
Change in CASES	(66)	(21)	(95)	(166)	(45)	38	(14)	48	(6)			
% Change in CASES	-4.95%	-1.66%	-7.62%	-14.41%	-4.56%	4.04%	-1.43%	4.97%	-0.59%			

Mid-State Health Network
FY2022 PA2 Funding Recommendations by Provider
December 2021 Oversight Policy Board

Provider	PA2 County	PA2 Amount Recommended	*New Provider / Renewal Contract
Addiction Solutions Counseling Center	Isabella	29,320	Renewal
Arbor Circle	Newaygo	46,104	Renewal
Barry Eaton Health Department	Eaton	9,772	Renewal
Big Brothers Big Sisters of Jackson	Jackson	19,485	Renewal
Boys and Girls Club of Bay County	Bay	109,823	Renewal
Catholic Charities of Shiawassee and Genesee Counties	Shiawassee	134,384	Renewal
Child Advocacy Center	Gratiot	31,165	Renewal
Child and Family Charities	Ingham	27,125	Renewal
Cristo Rey Community Center	Ingham	17,873	Renewal
Eaton Regional Education Service Agency (RESA)	Clinton	123,505	Renewal
Eaton Regional Education Service Agency (RESA)	Eaton	139,078	Renewal
Eaton Regional Education Service Agency (RESA)	Ingham	27,013	Renewal
Family Services and Children's Aid	Jackson	216,532	Renewal
First Ward Community Center	Saginaw	168,377	Renewal
Great Lakes Bay Health Centers	Saginaw	75,000	Renewal
Henry Ford Allegiance Health	Jackson	23,524	Renewal
Home of New Vision	Jackson	114,000	Renewal
Huron County Health Department	Huron	13,619	Renewal
Ingham County Health Department	Ingham	15,656	Renewal
Ionia County Health Department	Ionia	128,000	Renewal
Lifeways Community Mental Health Authority	Hillsdale	39,336	Renewal
List Psychological Services	Tuscola	47,751	Renewal
McLaren Bay Region (Neighborhood Resource Center)	Bay	117,095	Renewal
Michigan Rehabilitation Services	Clinton	5,000	Renewal
Michigan Rehabilitation Services	Eaton	5,000	Renewal
Michigan Rehabilitation Services	Ingham	15,000	Renewal
Michigan Rehabilitation Services	Shiawassee	5,000	Renewal
Michigan Therapeutic Consultants	Eaton	2,000	Renewal
Michigan Therapeutic Consultants	Ingham	5,000	Renewal
Mid-Michigan District Health Department	Montcalm	96,136	Renewal
Newaygo Regional Education Service Agency (RESA)	Newaygo	17,500	Renewal
Parishioners on Patrol	Saginaw	5,000	Renewal
Peer 360 Recovery	Arenac	12,800	Renewal
Peer 360 Recovery	Bay	104,450	Renewal
Peer 360 Recovery	Huron	86,000	Renewal
Peer 360 Recovery	Isabella	52,000	Renewal
Peer 360 Recovery	Midland	100,000	Renewal
Peer 360 Recovery	Saginaw	150,000	Renewal
Peer 360 Recovery	Shiawassee	2,000	Renewal
Peer 360 Recovery	Tuscola	85,000	Renewal
Prevention Network	Eaton	25,000	Renewal
Prevention Network	Ingham	25,000	New
Prevention Network	Shiawassee	30,000	Renewal
Punks With Lunch - Lansing Syringe Services	Ingham	5,000	New

Mid-State Health Network
FY2022 PA2 Funding Recommendations by Provider
December 2021 Oversight Policy Board

Provider	PA2 County	PA2 Amount Recommended	*New Provider / Renewal Contract
Sacred Heart Rehabilitation Center	Bay	30,000	Renewal
Sacred Heart Rehabilitation Center	Saginaw	47,168	Renewal
Saginaw City Police	Saginaw	45,705	Renewal
Saginaw County Health Department	Saginaw	15,000	Renewal
Saginaw Youth Protection Council	Saginaw	216,922	Renewal
Shiawassee County Court	Shiawassee	16,620	Renewal
St. Johns Police Department	Clinton	6,671	Renewal
Sterling Area Health Center	Arenac	10,054	Renewal
Sterling Area Health Center	Bay	48,957	Renewal
Ten Sixteen Recovery Network	Arenac	28,000	New
Ten Sixteen Recovery Network	Bay	87,000	Renewal
Ten Sixteen Recovery Network	Clare	120,738	Renewal
Ten Sixteen Recovery Network	Gladwin	47,210	Renewal
Ten Sixteen Recovery Network	Gratiot	19,000	Renewal
Ten Sixteen Recovery Network	Isabella	250,000	Renewal
Ten Sixteen Recovery Network	Mecosta	202,485	Renewal
Ten Sixteen Recovery Network	Midland	64,000	Renewal
Ten Sixteen Recovery Network	Osceola	83,000	Renewal
Ten Sixteen Recovery Network	Saginaw	128,000	Renewal
The Legacy Center	Midland	67,811	Renewal
Victory Clinical Services - Lansing	Eaton	2,000	Renewal
Victory Clinical Services - Lansing	Ingham	5,000	Renewal
Wedgwood Christian Services	Ionia	46,538	Renewal
Wedgwood Christian Services	Montcalm	27,142	Renewal
Wellness, Inx	Eaton	194,793	Renewal
Wellness, InX	Ingham	297,982	Renewal
Women of Colors	Saginaw	102,840	Renewal
GRAND TOTAL		4,717,059	

*New Provider / Renewal Contract:

New Provider could also indicate that provider did not receive PA2 funds from the identified county in FY2021

**Mid-State Health Network
FY2022 PA2 Funding Recommendations by County**

County	Projected Beginning Reserve Balance	Projected FY2022 Treasury Revenue*	OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Projected Ending Reserve Balance
Arenac	71,929	38,721	-	50,854	59,796
Bay	809,741	189,737	-	497,325	502,153
Clare	157,044	51,428	-	120,738	87,734
Clinton	420,480	121,375	-	135,176	406,679
Eaton	566,647	222,938	-	377,643	411,942
Gladwin	77,730	40,014	-	47,210	70,534
Gratiot	92,515	42,938	-	50,165	85,288
Hillsdale	120,041	50,828	-	39,336	131,533
Huron	148,739	68,510	-	99,619	117,630
Ingham	902,845	643,890	-	440,649	1,106,086
Ionia	355,713	70,234	-	174,538	251,409
Isabella	511,475	119,105	-	331,320	299,260
Jackson	569,628	339,281	-	373,541	535,368
Mecosta	280,543	81,503	-	202,485	159,561
Midland	363,688	174,016	-	231,811	305,893
Montcalm	200,464	97,070	-	123,278	174,256
Newaygo	127,609	81,492	-	63,604	145,497
Osceola	108,532	33,294	-	83,000	58,826
Saginaw	1,468,702	531,538	-	954,012	1,046,228
Shiawassee	405,082	93,104	-	188,004	310,182
Tuscola	183,717	53,489	-	132,751	104,455
Total	\$ 7,942,864	\$ 3,144,505	\$ -	\$ 4,717,059	\$ 6,370,310

*FY2022 projected distributions to counties from MDHHS made available 10.22.21

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
Arenac				
	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	27,800	12,800	
	Block Grant	22,915	40,200	
	Total	50,715	53,000	
	Sterling Area Health Center			Prevention: Host coalition activities, \$5,000 in coalition discretionary funding; PALS Program; Student Assistance Program; School based prevention education - Too Good for Drugs; DYTUR/Synar activities; Suicide Prevention efforts.
	PA2	7,876	10,054	
	Block Grant	84,500	80,000	
	Total	92,376	90,054	
	Ten Sixteen Recovery Network			Recovery Supports: Project ASSERT.
	PA2	-	28,000	
	Block Grant	-	40,000	
	Total	-	68,000	
	County Total	143,091	211,054	
Bay				
	Boys and Girls Club of Bay County			Prevention: Programs are conducted at the Bay City, Essexville and Pinconning sites: Smart Moves; Smart Kids; Street Smart, Be-Fit, An Apple a Day, Too Good for Drugs and Violence, Torch Club, National Photography Program along with community prevention coalition involvement.
	PA2	72,073	109,823	
	Block Grant	42,750	5,000	
	Total	114,823	114,823	
	McLaren Bay Region (Neighborhood Resource Center)			Prevention: Prime for Life; school programming (multiple); juvenile home groups; host coalition (BCPN) activities, \$5,000 in coalition discretionary funding; Lead agency for - Safe Journeys Group, Teen Advocating Prevention Group, Project HOPE (Opiate) task force, Family Fun Club Group, Marijuana Awareness Team; Juvenile Court Day Treatment Program Education; SFP Parent Education; Suicide Prevention, Great Start Collaboration.
	PA2	83,065	117,095	
	Block Grant	39,030	5,000	
	Total	122,095	122,095	
	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	53,514	104,450	
	Block Grant	63,654	-	
	Total	117,168	104,450	
	Sacred Heart Rehabilitation Center			Prevention: NOT Tobacco education; Tobacco school; E-Cigarette school; STOP Education Group; local coalition activities (BCPN, CAAPT, Safe Journeys MCRUD) ; DYTUR/SYNAR activities; social norms campaigns for underage drinking and vaping activities.
	PA2	17,692	30,000	
	Block Grant	10,000	5,000	
	Total	27,692	35,000	
	Sterling Area Health Center			Prevention: PALS; peer mentor activities, classroom education; Student Assistance Program.
	PA2	30,135	48,957	
	Block Grant	16,500	-	
	Total	46,635	48,957	
	Ten Sixteen Recovery Network			Recovery Supports: Peers in FQHC.
	PA2	104,000	87,000	
	Block Grant	-	-	
	Total	104,000	87,000	
	County Total	532,413	512,325	
Clare				
	Ten Sixteen Recovery Network			Prevention: \$5,000 in coalition discretionary funding - lead coalition agency; School Education Programs - Botvin's Life skills, Teen Intervene, Prime for Life 420; Rx Drug Prevention Initiative; Prime for Life; Active Parenting; Student Assistance Programs; MiPhy Data Collection Assistance; DYTUR/SYNAR activities. Community Recovery Services: MMU CREW Project. Recovery Supports: Project Assert, Drop-In Center.
	PA2	93,200	120,738	
	Block Grant	50,800	65,000	
	Total	144,000	185,738	
	County Total	144,000	185,738	
Clinton				
	Eaton Regional Education Service Agency (RESA)			Prevention: \$5,000 in coalition discretionary funding, in-school probation, MiPhy data analysis and technical assistance, prevention education, behavioral health resource guide development, prescription drug disposal, community outreach, Alcohol Vendor Education DYTUR/Synar Activities, Clinton Youth Engagement (ECHO); PALS Program.
	PA2	117,829	123,505	
	Block Grant	10,700	5,000	
	Total	128,529	128,505	
	Michigan Rehabilitation Services			Treatment: Vocational rehabilitation services.
	PA2	5,000	5,000	
	Block Grant	-	-	
	Total	5,000	5,000	
	St. Johns Police Department			Prevention: DYTUR/SYNAR activities, Alcohol Vendor Education and Compliance Checks.
	PA2	8,556	6,671	
	Block Grant	-	-	
	Total	8,556	6,671	
	County Total	142,085	140,176	
Eaton				
	Barry Eaton Health Department			Prevention: DYTUR/SYNAR activities.
	PA2	7,062	9,772	
	Block Grant	-	-	
	Total	7,062	9,772	

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
	Eaton Regional Education Service Agency (RESA)			Prevention: \$5,000 in coalition discretionary funding, CHOICES, in-school probation, Front Line Worker training, behavioral health resource guide development, prevention education, prescription drug disposal, community outreach, Capital Counties Commit, MiPHY; Michigan Model Curriculums for the schools; PALS Program; Parenting Program/Resources; School Consultation; Opioid Prevention Community Presentations, PALS Program.
	PA2	128,871	139,078	
	Block Grant	164,994	160,000	
	Total	293,865	299,078	
	Michigan Rehabilitation Services			Treatment: Vocational rehabilitation services.
	PA2	5,000	5,000	
	Block Grant	-	-	
	Total	5,000	5,000	
	Michigan Therapeutic Consultants			Treatment: Methadone delivery to county jails
	PA2	667	2,000	
	Block Grant	-	-	
	Total	667	2,000	
	Prevention Network			Prevention: Provide trainings for Regional Prevention Staff on how to conduct Teacher in-services; Provide trainings and technical assistance to Regional Prevention Coalitions; Implement SMART Recovery Groups; Organize and Host Recovery Month Activities; Convene Capital Area VOX Meetings and build memberships.
	PA2	12,000	25,000	
	Block Grant	-	-	
	Total	12,000	25,000	
	Victory Clinical Services - Lansing			Treatment: Methadone delivery to county jails
	PA2	667	2,000	
	Block Grant	-	-	
	Total	667	2,000	
	Wellness, Inx			Recovery Supports: Peer-led facilitation groups; CCAR; recovery coach training; community outreach; Peer Recovery mentoring, Chronic Pain Path Program; Project ASSERT.
	PA2	78,636	194,793	
	Block Grant	-	-	
	Total	78,636	194,793	
County Total		397,897	537,643	
Gladwin				
	Ten Sixteen Recovery Network			Prevention: \$5,000 in coalition discretionary funding - lead coalition agency; School Education Programs - Botvin's Life skills, Teen Intervene, Prime for Life 420; Rx Drug Prevention Initiative; Prime for Life; Active Parenting; Student Assistance Programs; MiPHY Data Collection Assistance; DYTUR/SYNAR activities. Recovery Supports: Project ASSERT; Drop-In Center.
	PA2	35,000	47,210	
	Block Grant	103,000	95,000	
	Total	138,000	142,210	
County Total		138,000	142,210	
Gratiot				
	Child Advocacy Center			Prevention: It's All about Teens (multiple schools); host coalition activities, \$5,000 in coalition discretionary funding; TIPS training; DYTUR/SYNAR activities; Positive Action; Live Well Gratiot; Early ID Referral; Suicide Prevention; Coalition Community Presentations.
	PA2	46,157	31,165	
	Block Grant	120,000	140,000	
	Total	166,157	171,165	
	Ten Sixteen Recovery Network			Recovery Supports: Project ASSERT.
	PA2	19,000	19,000	
	Block Grant	-	-	
	Total	19,000	19,000	
County Total		185,157	190,165	
Hillsdale				
	Lifeways Community Mental Health Authority			Prevention: Prime for Life; Youth Engaged in Prevention (YEP); Nurturing Parenting; Botvin's Life Skills; DYTUR/SYNAR activities; Alcohol Vendor Education; TIPS Training; Marijuana Messaging; Develop Needs Assessments; Community Coalition/Committee meetings (Early Childhood, Trauma Focused Community Committee, Recovery Oriented Systems of Care, Suicide Prevention). Fiduciary responsibilities for Hillsdale Prevention Coalition.
	PA2	5,650	39,336	
	Block Grant	-	85,000	
	Total	5,650	124,336	
County Total		5,650	124,336	
Huron				
	Huron County Health Department			Prevention: School Prevention -Project Alert, Too Good for Drugs, E-Cigs and Vaping, Life Skills; Teen Intervene; host coalition activities, \$5,000 in coalition discretionary funding for Huron Prevention and Recovery Roundtable and E4P youth group; DYTUR/SYNAR activities; Alcohol Vendor Education; Community Coalition/Committee Group Involvement (FAN, ROSC, Suicide, MCCRUD); Opioid Prevention Presentations; Health Fairs; Naloxone Project; Rx Take Back Events; Chances Are Anti-Stigma campaign; MiPHY collection.
	PA2	18,619	13,619	
	Block Grant	145,000	150,000	
	Total	163,619	163,619	
	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	79,920	86,000	
	Block Grant	12,731	20,000	
	Total	92,651	106,000	
County Total		256,270	269,619	
Ingham				
	Child and Family Charities			Prevention: Teen Court, TEAM Attendance; Too Good for Drugs; Family Education; Community Outreach.
	PA2	27,125	27,125	
	Block Grant	117,000	117,000	
	Total	144,125	144,125	

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
	Cristo Rey Community Center			Prevention: Roots & Wings, Nurturing Parenting; Community Coalition/Committee attendance (ISAP, ROSC); Community Presentations.
	PA2	75,982	17,873	
	Block Grant	157,960	81,000	
	Total	233,942	98,873	
	Eaton Regional Education Service Agency (RESA)			Prevention: \$5,000 in coalition discretionary funding, community outreach, Capital Counties Commit, refugee outreach, behavioral health resource guide development, prevention education, MiPHY; Ingham PALS Program; Coalition Outreach and Development; School Consultation; Rx drug disposal; Family Matters; Front line Worker Training; Opioid Awareness Prevention; Parenting Education; Marijuana Summit; Community Coalition and Committee Group involvement, PALS Program .
	PA2	21,578	27,013	
	Block Grant	139,574	135,000	
	Total	161,152	162,013	
	Ingham County Health Department			Prevention: DYTUR/SYNAR information; Vendor education; coalition participation.
	PA2	15,656	15,656	
	Block Grant	81,000	81,000	
	Total	96,656	96,656	
	Michigan Rehabilitation Services			Treatment: Vocational rehabilitation services.
	PA2	15,000	15,000	
	Block Grant	-	-	
	Total	15,000	15,000	
	Michigan Therapeutic Consultants			Treatment: Methadone delivery to county jails
	PA2	1,667	5,000	
	Block Grant	-	-	
	Total	1,667	5,000	
	Prevention Network			Prevention: Provide trainings for Regional Prevention Staff on how to conduct Teacher in-services; Provide trainings and technical assistance to Regional Prevention Coalitions; Implement SMART Recovery Groups; Organize and Host Recovery Month Activities; Convene Capital Area VOX Meetings and build memberships.
	PA2	-	25,000	
	Block Grant	-	-	
	Total	-	25,000	
	Punks with Lunch			Lansing Syringe Services - Supplies and Materials
	PA2	-	5,000	
	Block Grant	-	-	
	Total	-	5,000	
	Victory Clinical Services - Lansing			Treatment: Methadone delivery to county jails
	PA2	1,667	5,000	
	Block Grant	-	-	
	Total	1,667	5,000	
	Wellness, InX			Recovery Supports: Peer-led facilitation groups; CCAR; recovery coach training; community outreach; Peer Recovery mentoring, Chronic Pain Path Program; Project ASSERT.
	PA2	378,853	297,982	
	Block Grant	63,000	65,000	
	Total	441,853	362,982	
County Total		1,096,062	919,649	
Ionia				
	Ionia County Health Department			Prevention: Too Good for Drugs; Teen Intervene; TIPS Training; Alcohol Vendor Education; host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; Driver Education Prevention Education; MiPHY data collection; Opioid Community Prevention Presentations; Community Events.
	PA2	106,980	128,000	
	Block Grant	36,000	15,000	
	Total	142,980	143,000	
	Wedgwood Christian Services			Recovery Supports: Drop-in Center.
	PA2	46,184	46,538	
	Block Grant	-	-	
	Total	46,184	46,538	
County Total		189,164	189,538	
Isabella				
	Addiction Solutions Counseling Center			Prevention: Prime for Life.
	PA2	14,320	29,320	
	Block Grant	-	-	
	Total	14,320	29,320	
	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	10,500	52,000	
	Block Grant	-	-	
	Total	10,500	52,000	
	Ten Sixteen Recovery Network			Prevention: Active Parenting; Life Skills Training; Teen Intervene Program; Prime for Life 420 Program; Prime for Life Program; Rx Drug Prevention Presentations; Rx Drug Disposal; Student Assistance Program; Host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities. Community Recovery Services: CMU CREW Project. Recovery Supports: Project ASSERT.
	PA2	248,000	250,000	
	Block Grant	10,000	10,000	
	Total	258,000	260,000	
County Total		282,820	341,320	
Jackson				
	Big Brothers Big Sisters of Jackson			Prevention: Mentoring services, monthly group wellness activities; Monthly learning events; Opioid Community Prevention Presentations; Classroom to Classroom program; Most Teens Don't: Teen Pregnancy Prevention Initiate; Community Coalition involvement.
	PA2	19,985	19,485	
	Block Grant	29,500	30,000	
	Total	49,485	49,485	
	Family Services and Children's Aid			Prevention: Breakout, JUMP, Nurturing Parenting.

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
	PA2	140,851	216,532	
	Block Grant	242,681	167,000	
	Total	383,532	383,532	
	Henry Ford Allegiance Health			Prevention: \$5,000 in coalition discretionary funding, lead agency for JCSPPC; Community outreach; ATOD Free events; Community prevention education; MiPHY; DYTUR/SYNAR activities; Drug Summit; School prevention presentations; Coalition leadership training; Various community coalition/committee attendance.
	PA2	23,524	23,524	
	Block Grant	100,000	90,000	
	Total	123,524	113,524	
	Home of New Vision			Community Recovery Services: Community Recovery Events; Peer Trainings; Peer Recruitment; CCAR Training; Peer Advisory Committee; Peer Coach Drop In hours; Speaker Bureau; Advocacy Trainings; Quarterly publications; Recovery Facebook page. Recovery Supports: Project ASSERT
	PA2	166,200	114,000	
	Block Grant	154,000	150,000	
	Total	320,200	264,000	
County Total		876,741	810,541	
Mecosta				
	Ten Sixteen Recovery Network			Prevention: Active Parenting; Life Skills Training; Teen Intervene Program; Prime for Life 420 Program; Prime for Life Program; Rx Drug Prevention Presentations; Rx Drug Disposal; Student Assistance Program; Host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities. Community Recovery Services: FSU CREW Project. Recovery Supports: Project ASSERT, Drop-in Center.
	PA2	191,800	202,485	
	Block Grant	90,200	90,000	
	Total	282,000	292,485	
County Total		282,000	292,485	
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	92,310	100,000	
	Block Grant	-	-	
	Total	92,310	100,000	
	Ten Sixteen Recovery Network			Recovery Supports: Project ASSERT, Drop-in Center.
	PA2	54,000	64,000	
	Block Grant	20,000	10,000	
	Total	74,000	74,000	
	The Legacy Center			Prevention: Too Good For Drugs (multiple schools); Multiple School, Community, Legislative and Civic group education sessions on marijuana, opioids, alcohol, tobacco and vaping; host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; Community Narcan Trainings; Strategic Planning.
	PA2	87,111	67,811	
	Block Grant	63,700	83,000	
	Total	150,811	150,811	
County Total		317,121	324,811	
Montcalm				
	Mid-Michigan District Health Department			Prevention and Recovery Supports: Project Success; HSLT leadership groups; recovery supports programming; host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; Integrated Wellness Initiative; Rx Drug Presentations; Community Coalition/Committee Involvement (Drug Tx Court, FAN, ROSC, RISC, Montcalm Prevention Coalition, SAP, HSC, Healthy Montcalm, Trauma Champions, MPA, MCBAP, Community of Care).
	PA2	195,421	96,136	
	Block Grant	66,950	145,000	
	Total	262,371	241,136	
	Wedgwood Christian Services			Recovery Supports: Project ASSERT.
	PA2	28,637	27,142	
	Block Grant	-	-	
	Total	28,637	27,142	
County Total		291,008	268,278	
Newaygo				
	Arbor Circle			Prevention: Vaping and Tobacco Education; Botvin's Life Skills Youth Education; Total Trek Quest Program; Prime for Life; Coalition involvement.
	PA2	46,104	46,104	
	Block Grant	96,000	101,000	
	Total	142,104	147,104	
	Newaygo Regional Education Service Agency (RESA)			Prevention: Summer Magic (multiple); TIPS training; ; host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; Rx take back projects; Community Expos, MiPHY support; Alcohol Vendor Education; Coalition Capacity Building; Opioid prevention community presentations; Teen Leadership Groups; Coalition/community group involvement (Headway, Rx Drug Action Team, Breathe Well Coalition, Trauma work group, Suicide Prevention Work group, Newaygo Community Collaborative, Youth Prevention Coalition, FAN, Domestic Violence Sexual Assault task force, and Marijuana Action Team).
	PA2	17,000	17,500	
	Block Grant	76,500	76,000	
	Total	93,500	93,500	
County Total		235,604	240,604	
Osceola				
	Ten Sixteen Recovery Network			Prevention: Active Parenting; Botvin's Life Skills Training; Prime for Life 420 Program; Prime for Life Program; Rx Drug Prevention Presentations; Rx Drug Disposal; Student Assistance Program; Host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; MiPHY support. Recovery Supports: Project ASSERT.
	PA2	69,000	83,000	
	Block Grant	44,000	30,000	
	Total	113,000	113,000	
County Total		113,000	113,000	

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
Saginaw	First Ward Community Center			Prevention: Botvin's Life Skills; Rx Drug Prevention Presentations; Saginaw Prevention Coalition involvement; Art in the Park, LEXIA computerized reading; Wise Owl's Drug Safety Kit; Wise Owl Bully Stopper Kit; Bully Proof Kit; Young Male Prevention Program; Rural Girls Prevention Program; Senior Citizens Wellness Program; Recovery Coaching.
		PA2	175,158	168,377
		Block Grant	-	100,000
		Total	175,158	268,377
	Great Lakes Bay Health Centers			Early Intervention: Saginaw County jail program; programming provided to youth and adults in SUD facilities.
		PA2	75,000	75,000
		Block Grant	18,000	18,000
		Total	93,000	93,000
	Parishioners on Patrol			Prevention: Community outreach activity.
		PA2	5,000	5,000
		Block Grant	-	-
		Total	5,000	5,000
	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	134,580	150,000
		Block Grant	-	-
		Total	134,580	150,000
	Sacred Heart Rehabilitation Center			Prevention: School Programs, Juvenile Home, Wolverine Center, high risk adult programs, utilizing the following curriculums: Life Skills Training, Catch My Breath, Building Skills, Too Good For Drugs; Drivers Education Prevention Education; Community Presentations; Marijuana Presentations; Health Fairs; Rx drug presentations.
		PA2	47,168	47,168
		Block Grant	15,000	15,000
		Total	62,168	62,168
	Saginaw City Police			Prevention: Youth/Adult Mentoring; Saginaw Prevention Coalition involvement.
		PA2	65,029	45,705
		Block Grant	-	10,000
		Total	65,029	55,705
	Saginaw County Health Department			Treatment: Syringe Services Program.
		PA2	15,000	15,000
		Block Grant	-	-
		Total	15,000	15,000
	Saginaw Youth Protection Council			Prevention: Second Step pre-school; Active Parenting; Too Good for Drugs; Too Good for Drugs and Violence; Too Good for Violence; Project Alert; Real Talk; Nurturing Parenting; A Second Look; Towards No Drug Abuse; MARC - Cyber Skills; Alcohol Vendor Education; Community Health Improvement Plan; Coalition Engagement, Recruitment and Retention; Community Outreach Efforts; Community and School Presentations; Social and Emotional Learning Project; Community Coalition/Committee Group Involvement (Saginaw Prevention Coalition, School Based Health Center Collaborative, FAN, Great Start, Early 0-3 developmental delay coalition); DYTUR/Synar Activities.
		PA2	243,776	216,922
		Block Grant	77,800	85,000
		Total	321,576	301,922
	Ten Sixteen Recovery Network			Recovery Supports: Davenport Project.
		PA2	123,600	128,000
		Block Grant	19,400	-
		Total	143,000	128,000
	Women of Colors			Prevention: Botvin's Life Skills Program at the juvenile home, Learn to Earn Academy, The Next Generation. Expansion of Youth SUD Prevention; Community Forums; host coalition activities, \$5,000 in coalition discretionary funding; Providing Women, Men and Youth community forums in Saginaw County.
		PA2	46,340	102,840
		Block Grant	-	-
		Total	46,340	102,840
	County Total		1,060,851	1,182,012
Shiawassee	Catholic Charities of Shiawassee and Genesee Counties			Prevention: STEP parenting classes; FAST Program; Anger management groups; School Education Groups; host coalition activities, \$5,000 in coalition discretionary funding; DYTUR/SYNAR activities; Adult Rx Drug Prevention presentations; Michigan Model Youth Programming; PEARLS Program; Community and Environmental efforts; Community Presentations; Nurturing Fathers Parenting Program.
		PA2	134,384	134,384
		Block Grant	-	-
		Total	134,384	134,384
	Michigan Rehabilitation Services			Treatment: Vocational rehabilitation services.
		PA2	5,000	5,000
		Block Grant	-	-
		Total	5,000	5,000
	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	2,393	2,000
		Block Grant	-	-
		Total	2,393	2,000
	Prevention Network			Prevention: Provide trainings for Regional Prevention Staff on how to conduct Teacher in-services; Provide trainings and technical assistance to Regional Prevention Coalitions; Attend and participate in local prevention coalition.
		PA2	64,000	30,000
		Block Grant	-	-
		Total	64,000	30,000

Mid-State Health Network
Comparison of FY2021 and FY2022 PA2 by County and Provider

County	Provider	FY2021 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations December	Detail of Services Provided for FY2022 Requests
	Shiawassee County Court			Prevention: Juvenile diversion programming for court-ordered youth.
	PA2	16,602	16,620	
	Block Grant	-	-	
	Total	16,602	16,620	
	County Total	222,379	188,004	
Tuscola	List Psychological Services			Prevention: Positive Action school groups, parent groups and deferral groups; Host coalition activities, \$5,000 in coalition discretionary funding; Youth/Adult mentoring activities; DYTUR/Synar activities; Community Presentations; Vaping Prevention; Community Narcan Training; Suicide Prevention; Trauma Awareness and Wellness activities; anti-stigma campaign.
	PA2	13,751	47,751	
	Block Grant	54,000	20,000	
	Total	67,751	67,751	
	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	100,133	85,000	
	Block Grant	-	-	
	Total	100,133	85,000	
	County Total	167,884	152,751	
	PA2 Subtotal	4,420,358	4,717,059	
	Block Grant Subtotal	2,658,839	2,619,200	
Grand Total		7,079,197	7,336,259	

SUD Clinical Team Operational Summary December 2021

General Updates:

1. Ongoing implementation of MSHN FY22-23 Strategic Plan and FY21-23 SUD Strategic Plan
2. Michigan's Licensing and Regulatory Agency (LARA) has been revising the administrative rules in a staged process that started under the Snyder administration. Another round is forthcoming with webinars in which LARA walks attendees through the proposed changes. MSHN and the other SUD Directors have met to distill questions and concerns regarding the proposed changes. We have posted the [LARA Administrative Rules Proposed Changes](#) to our website.
3. MSHN is pleased to announce the addition of two new staff who have filled vacant positions:
 - *Veteran Navigator, Tammy Foster*: Tammy served for 10 years in the MI National Guard and worked at the VFW National Home for Children with veterans and military families for 20 years until May of this year. She will be reaching out to meet providers and to introduce herself as a resource to veterans and to providers with military cultural competency trainings. Started on 11/8.
 - *Prevention Specialist, Sarah Surna*: Sarah comes to us from Barry-Eaton District Health Department where she was involved in Prevention work. Sarah will be the main contact for the southern part of Region 5. You'll see her attending coalition meetings in the coming months. Started on 11/18.

Treatment Activities:

1. Contingency Management (CM) is an evidence-based practice that offers small incentives for individuals in SUD recovery to encourage their participation in recovery activities like attending groups, counseling sessions, etc. MSHN will be participating in a pilot using CM in Recovery Housing.
2. ASAM Continuum & GAIN Assessment Regional and Statewide implementations
3. Special Grants Activities:
 - a. SOR 2
 - i. Approval for Fentanyl Test strips. Evaluating distribution with MAT providers and Syringe Services programs.
 - b. COVID Block Grant
 - i. Lisa Najavits "Seeking Safety" Training – March 8 & 9, 2022
 - ii. Hazelden EBP materials for Treatment and Recovery Providers
 - c. American Recovery Plan (ARP)
 - i. Still in planning stages
4. Evaluating implementation of an Opioid Health Home for FY23 instead of FY24
5. QAPI Site Reviews
 - a. Catholic Charities Jackson, RISE, Victory Clinical Services, Arbor Circle, MMRS, Family and Children Services of Mid-Michigan, Recovery Pathways.

6. Gambling Disorder Training & Reimbursement - A rise in the prevalence of gambling disorder (GD) during the pandemic has fueled a MSHN goal to build clinical capacity to support individuals with GD that's often co-occurring with SUD. MDHHS has partnered with the Gambling Treatment Program to support the 30-hour Gambling Training. This training covers the basics of gambling and gambling disorder, gambling disorder among special populations, the new and ever-changing world of online gambling and gaming, and basic treatment methods to work with gamblers. The training includes 9 modules reviewed by a trained GD clinician. - MSHN is targeting 10 clinicians from region to attend the GD 30-hour training.

Prevention Activities:

- In the past quarter, the Prevention Team (at 2/3 strength) completed review of FY21 MPDS data and corrected all 20,244 lines of data reflecting activities in the past year and ensuring accuracy.
- Onboarding new Prevention Specialist started on 11/18.
- Reallocating resources and job assignments with prevention team being back at full strength
- A new problem-gambling prevention web-based media campaign just kicked off on December 1 and will run through September 2022. All funding for this comes from the gambling grant.

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(he/him/his)

