Region 5 - Regional Medical Directors Meeting
Friday, May15, 2026, 1:00pm-3:00pm
Meeting Materials: 05-15-2026 Regional Medical Director's Meeting | Powered by Box
Zoom Link: https://us02web.zoom.us/j/82291897541?pwd=SnN3ZGs1RXpyRkg1Ynl3Mms0Q3hKQT09

FY 2026 Meeting Calendar

November 21, 2025	**January 16, 2026**	**March 20, 2026**
May 15, 2026	**July 17, 2026**	**September 17, 2026**

Attendees:

MSHN: Dr. Zakia Alavi, Dr. Todd Lewicki, Skye Pletcher
Bay: Dr. Roderick Smith - Present
CEI: Dr. Stanley - Present
Central: Dr. Janssen
Gratiot: Dr. Rangwani - Present
Huron: Dr. Jason Meints - Present
Lifeways: Dr. Drumm, Allison Singer - Present
Montcalm: Dr. Brian Smith, Melissa MacLaren - Present
Newaygo: Dr. Baker
Saginaw: Dr. Ibrahim, Jen Kreiner - Present
Shiawassee: Dr. Hashimoto
Right Door: Dr. Sanchez - Present
Tuscola: Dr. Movva - Present

Guests:

KEY DISCUSSION TOPICS

1. Welcome & Roll Call/New Member, welcome to Dr. Meints (HBH)
2. Review and Approve March minutes, Additions to Agenda. FY26 meeting dates above
3. Announcements (as appropriate)
4. Procurement Update
5. Credentialing Discussion Carryforward
6. MHEF Predictive Model Overview and Care Pathways
7. Mental Health Framework Feedback
8. Youth Crisis Residential Follow-Up
9. FY26 Balanced Scorecard
10. Roundtable

Distribution list updates to be requested.

Parking Lot:

1. Justice Department Launches Disability Rights Investigation into Unnecessary Institutionalization in Michigan's State Psychiatric Hospitals-recent article Office of Public Affairs | Justice Department Launches Disability Rights Investigation into Unnecessary Institutionalization in Michigan's State Psychiatric Hospitals | United States Department of Justice

Agenda Item	Action Required				
3- Announcements	Introductions and welcome to Dr. Meints from Huron Behavioral Health				
	N/A	By Who	N/A	By When	N/A
4-MDHHS Procurement Ruling	MDHHS filed a motion for summary disposition of the cases Judge Yates ruled on in January that resulted in the state rescinding the RFP. MDHHS contended that since there was no longer an RFP, there is no case. Judge Yates ruled that the case was rendered moot (dismissed) without prejudice. This means that the PIHPs/CMHSPs can appeal. The Michigan House took an important step last week to protect Michigan's public mental health system by including key boilerplate language in the FY27 Omnibus Budget (House Bill 5619) that would prevent the Michigan Department of Health and Human Services (MDHHS) from advancing costly and harmful restructuring proposals during the final months of the Whitmer administration. This is a temporary (FY27) control, a check on restructuring, and a strategic pause. But it is not permanent protection, a long-term solution, or a guarantee past FY27. This reset offers a chance for systems, legislation, executive/future branch, advocates, PIHPs, CMHSPs, etc. to engage meaningfully. However, it still has to pass the senate and governor, and it could be changed by then through negotiations. Next, expect negotiations between the House, Senate, and Governor through June. Late June, there will be a vote on the final negotiated budget. Then, sometime between July 1 and September 30, a budget will be enacted (*should*). Heading into an election year may mean that the sentiment will be to make no major changes in FY27 with an option to revisit in FY28.				
	No action needed; MSHN will continue to provide updates as more information is learned.	By Who	N/A	By When	N/A
5- Credentialing Follow-Up	Carrying discussion forward to May 2026 RMD Committee meeting when Dr. Janssen is present for the discussion. Tracking whether there is any additional conversation to clarify the process. CMHCM (Dr. Janssen) raised questions via email about the role of the CMHSP medical director in credentialing professional staff and provider organizations. MSHN provided the regional Credentialing - Individual Practitioner Procedure which provides an option for "clean" credentialing files to be reviewed and signed by the agency medical director in lieu of being reviewed by a full credentialing committee. The regional procedure provides flexibilities for CMHSPs to determine their local process/procedure. Discussion in the meeting about the different roles of credentialing vs peer review which serve very different purposes.				
	Topic skipped as Dr. Janssen was not in attendance for discussion of this item.	By Who	N/A	By When	N/A
6-MHEF Predictive Model Overview and Care Pathways	Todd provided an overview of the Mental Health Endowment Fund grant and predictive modeling project. MSHN received approval from the CEOs to advance the predictive modeling project and we are seeking input from RMD Committee regarding potential interventions/pathways for individuals identified to be at-risk of hospitalization or developing a behavioral health condition (depression, anxiety, SUD). Dr. Alavi emphasized the importance of respecting the autonomy of individuals and being sensitive in the way individuals are approached through any interventions. RMD Committee supports the concept and the interventions pathways as drafted. Additional feedback from the RMD committee was incorporated into the draft document during the meeting.				

	The draft intervention pathways document will be shared with Clinical Leadership Committee, UM Committee, and QI Committee later this month for additional review/feedback.	By Who	N/A	By When	N/A
7- Mental Health Framework Feedback	Update on Mental Health Framework feedback sent in. Reviewed the document containing feedback from the MSHN region. Clarified that MSHN supports CMHAM and our member CMHSP participants in their opposition to the MHF. Medical directors expressed support and appreciation for MSHN's advocacy on behalf of the region.				
	N/A	By Who	N/A	By When	N/A
8-Youth Crisis Residential	The FY25 MSHN Network Adequacy Assessment showed that the region needs youth crisis residential and CLC recommended that this be pursued at the PIHP level. Todd and Skye will bring regional utilization data to the May RMD meeting to inform the discussion. MSHN is working with TBD Solutions to get the data together. This process is underway but not yet available.				
	Todd will share this report once it is complete.	By Who	Todd	By When	July (estimated)
9- Balanced Scorecard FY26	HBD-AD was requested to be tracked. The HEDIS measure GSD-AD (Glycemic Status Assessment for Patients with Diabetes (Adults)) replaced the older HBD-AD measure (HbA1c Control for Patients with Diabetes) and will be tracked. Current regional performance for In Control status is 66.2% compared to the median national value of 52.1%. RMD Committee is in support.				
	Move forward with GSD-AD tracking	By Who	N/A	By When	N/A
10- Roundtable	Offering opportunity for additional discussion.				
		By Who	N/A	By When	N/A