

**Substance Use Disorder (SUD)
Oversight Policy Advisory Board Meeting
April 19, 2023 ~ 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
507 S. Grand Ave.
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 April 19, 2023
- 4) **ACTION ITEM:** Approval of Minutes of December 21, 2022 (*Page 4*) and February 15, 2023 (*Page 7*)
- 5) Public Comment
- 6) Board Chair Report
 - A. Annual Organization Meeting (Nominations from the Floor)
 - i) **ACTION ITEM:** Election of Board Chairperson
 - ii) **ACTION ITEM:** Election of Board Vice-Chairperson
 - iii) **ACTION ITEM:** Election of Board Secretary
- 7) Deputy Director Report (*Page 10*)
- 8) Chief Financial Officer Report
 - A. FY23 PA2 Funding & Expenditures by County (*Page 28*)
 - B. FY23 PA2 Use of Funds by County and Provider (*Page 30*)
 - C. FY23 SUD Financial Summary Report of February 2023 (*Page 32*)
- 9) SUD Operating Update (*Page 33*)
- 10) Other Business
 - A. Strategic Planning Overview and Feedback

**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
507 S. Grand Ave.
Lansing, MI 48933

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 Support Specialist, Sherry Kletke, at 517.253.8203 as soon as possible.

**UPCOMING FY23
SUD OVERSIGHT POLICY
ADVISORY BOARD MEETINGS**

June 21, 2023
CMHAM
507 S. Grand Ave
Lansing, MI 48933

August 16, 2023
CMHAM
507 S. Grand Ave
Lansing, MI 48933

All meetings will be held from
4:00-5:30 p.m.

MSHN Board Approved Policies
May be Found at:
<https://midstatehealthnetwork.org/provider-network-resources/provider-requirements/policies-procedures/policies>

- 11) Public Comment
- 12) Board Member Comment
- 13) Adjournment

FY23 MSHN SUD Oversight Policy Board Roster

Last Name	First Name	Email 1	Email 2	Phone 1	Phone 2	County	Term Expiration
Ashley	Lisa	ashleyl@clareco.net		989.630.5256		Gladwin	2025
Badour	Nichole	nbadour@gihn-mi.org		989.264.5045	989.466.4124	Gratiot	2025
Caswell	Bruce	bcaswell@frontier.com		517.425.5230	517.523.3067	Hillsdale	2026
Gilmore	George	gilmoreg@clareco.net		989.329.5776		Clare	2024
Glaser	Steve	sglaser@co.midland.mi.us		989.264.4933		Midland	2024
Harrington	Christina	charrington@saginawcounty.com		989.758.3818		Saginaw	2025
Hunter	John	hunterjohn74@gmail.com		989.673.8223	989.551.2077	Tuscola	2025
Kolk	Bryan	bryank@co.newaygo.mi.us		616.780.5751		Newaygo	2024
Kroneck	John	jkronck@mmdhd.org		989.831.3659	616.302.6009	Montcalm	2024
Luce	Robert	rluce850@gmail.com		989.654.5700		Arenac	2023
Moreno	Jim	jmoreno@isabellacounty.org		989.954.5144		Isabella	2024
Murphy	Joe	jmurphy0504@comcast.net		989.670.1057		Huron	2023
Peters	Justin	comicmonkey1@outlook.com				Bay	2025
Schultz	Vicky	vickylschultz@yahoo.com	schultzv@stvcc.org	810.287.0280		Shiawassee	2023
Strong	Jerrilynn	jeristrong64@gmail.com		989.382.5452		Mecosta	2024
Tennis	Todd	commissionertennis@gmail.com		517.202.2303		Ingham	2023
Thalison	Deb	dthalison@ioniacounty.org		616.527.5341		Ionia	2025
Thalison	Kimberly	kthalison@eatonresa.org		517.541.8711		Eaton	2025
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:

Briggs	Margery	briggsmmb@sbcglobal.net		517.647.4747		Ionia-Alternate	2025
DeLaat	Ken	kdelaat1@aol.com		231.414.4173		Newaygo - Alternate	
Howard	Linda	lhoward8305@gmail.com		989.560.8305		Mecosta-Alternate	2024
Jaloszynski	Jerry	jjaloszynski@isabellacounty.org		989.330.4890		Isabella - Alternate	2022
Pohl	David	dwpohl@yahoo.com		517.927.2282	989.593.2688	Clinton - Alternate	2023
Whittum	Jeremy	jwhittum@eatoncounty.org		517.243.5692		Eaton-Alternate	

Administration:

Ittner	Amanda	amanda.ittner@midstatehealthnetwork.org		517.253.7551			
Sedlock	Joe	joseph.sedlock@midstatehealthnetwork.org		517.657.3036			
Thomas	Leslie	leslie.thomas@midstatehealthnetwork.org		517.253.7546			
Kletke	Sherry	sheryl.kletke@midstatehealthnetwork.org		517.253.8203			

Mid-State Health Network SUD Oversight Policy Advisory Board

Wednesday, December 21, 2022, 4:00 p.m.

CMH Association of Michigan (CMHAM)

507 S. Grand Ave
Lansing, MI 48933

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 4:04 p.m.

Board Member(s) Present: Bruce Caswell (Hillsdale), Steve Glaser (Midland), John Hunter (Tuscola), Bryan Kolk (Newaygo), Robert Luce (Arenac), Jim Moreno (Isabella), Justin Peters (Bay), Jerrilynn Strong (Mecosta), Kim Thalison (Eaton), Dwight Washington (Clinton)

Board Member(s) Remote: Nichole Badour (Gratiot), Sandra Bristol (Clare), Christina Harrington (Saginaw), Todd Tennis (Ingham), Deb Thalison (Ionia), Ed Woods (Jackson)

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

Alternate Members Present: John Kroneck (Montcalm), David Pohl (Clinton)

Staff Members Present: Amanda Ittner (Deputy Director), Sherry Kletke (Executive Assistant), Dr. Dani Meier (Chief Clinical Officer), Leslie Thomas (Chief Financial Officer); Sarah Surna (Prevention Specialist)

Staff Members Remote: Dr. Trisha Thrush (Director of SUD Services and Operations), Sarah Andreotti (Lead Prevention Specialist), Kari Gulvas (Prevention Specialist)

2. Roll Call

Ms. Sherry Kletke provided the Roll Call for Board Attendance and informed the Board Chair, John Hunter, that a quorum was present for Board meeting business.

3. Approval of Agenda for December 21, 2022

Board approval was requested for the Agenda of the December 21, 2022 Regular Business Meeting, as presented.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

MOTION BY STEVE GLASER, SUPPORTED BY BRYAN KOLK, FOR APPROVAL OF THE DECEMBER 21, 2022 REGULAR BUSINESS MEETING AGENDA, AS PRESENTED. MOTION CARRIED: 11-0.

4. Approval of Minutes from the October 19, 2022 Regular Business Meetings

Board approval was requested for the draft meeting minutes of the October 19, 2022 Regular Business Meeting.

MOTION BY BOB LUCE, SUPPORTED BY DWIGHT WASHINGTON, FOR APPROVAL OF THE MINUTES OF THE OCTOBER 19, 2022 MEETING, AS PRESENTED. MOTION CARRIED: 11-0.

5. Public Comment

There was no public comment.

6. Board Chair Report

Mr. John Hunter provided members with a reminder of the annual organization meeting to be held at the February 15, 2023 meeting. Officer elections will take place for the Chair, Vice-Chair and Secretary positions. Current officers are each at their term limit. If anyone would be interested in an officer position, please notify Ms. Sherry Kletke or Ms. Amanda Ittner. A slate of officers can then be presented at the February 2023 meeting.

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:

- Substance Use Disorder (SUD) Oversight Policy Board Bylaws
- MSHN Provider Network Supports
- Performance Indicator Report FY22 Q3

8. Chief Financial Officer Report

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

- FY2023 PA2 Funding and Expenditures by County
- FY2023 PA2 Use of Funds by County and Provider
- FY2023 Substance Use Disorder (SUD) Financial Summary Report as of October 2022

9. FY23 Substance Use Disorder PA2 Contract Listing

Ms. Leslie Thomas provided an overview and information on the FY23 Substance Use Disorder (SUD) PA2 Contract Listing as provided in the packet.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

MOTION BY BRUCE CASWELL, SUPPORTED BY JIM MORENO, FOR APPROVAL OF THE FY2023 SUBSTANCE USE DISORDER (SUD) PA2 CONTRACT LISTING, AS PRESENTED. MOTION CARRIED: 11-0.

10. SUD Operating Update

Dr. Dani Meier provided an overview of the written SUD Operations Report and the FY22 Quarter 4 SUD County Reports as included in the board meeting packet, highlighting:

- RFP to expand services in Montcalm and Isabella Counties were due December 16, 2022. The proposals received will be evaluated shortly after the New Year.
- Implementation of Opioid Health Home in Region 5 at Victory Clinical Services – Saginaw.

11. Other Business

Ms. Amanda Ittner introduced Ms. Sarah Surna who provided board members with an educational presentation about youth vaping and prevention programs.

12. Public Comment

There was no public comment.

13. Board Member Comment

Mr. Ed Woods thanked the Prevention Team for the work that they are doing in the field.

14. Adjournment

Chairperson John Hunter adjourned the MSHN SUD Oversight Policy Advisory Board Meeting at 4:57 p.m.

*Meeting minutes submitted respectfully by:
MSHN Executive Support Specialist*

Mid-State Health Network SUD Oversight Policy Advisory Board

Wednesday, February 15, 2023, 4:00 p.m.

CMH Association of Michigan (CMHAM)

**507 S. Grand Ave
Lansing, MI 48933**

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: Lisa Ashley (Gladwin)-joined at 4:22 p.m., Bruce Caswell (Hillsdale), Steve Glaser (Midland), John Hunter (Tuscola), Bryan Kolk (Newaygo), John Kroneck (Montcalm), Jim Moreno (Isabella), Vicky Schultz (Shiawassee), Jerrilynn Strong (Mecosta)

Board Member(s) Remote: Nichole Badour (Gratiot), George Gilmore (Clare); Robert Luce (Arenac), Deb Thalison (Ionia)

Board Member(s) Absent: Christina Harrington (Saginaw), Joe Murphy (Huron), Justin Peters (Bay), Todd Tennis (Ingham), Kim Thalison (Eaton), David Turner (Osceola); Dwight Washington (Clinton), Ed Woods (Jackson)

Alternate Members Present: David Pohl (Clinton)

Staff Members Present: Amanda Ittner (Deputy Director), Sherry Kletke (Executive Assistant), Dr. Trisha Thrush (Director of SUD Services and Operations), Leslie Thomas (Chief Financial Officer)

Staff Members Remote: Dr. Dani Meier (Chief Clinical Officer), Sarah Andreotti (Lead Prevention Specialist), Sarah Surna (Prevention Specialist)

2. Roll Call

Mr. Bruce Caswell provided the Roll Call for Board Attendance and informed the Board Chair, John Hunter, that there were only 9 members present in-person which does not meet the minimum requirement for a quorum. No action was taken on the action items noted below. Items requiring action will be added to the agenda for the next meeting on April 19, 2023.

3. Approval of Agenda for February 15, 2023

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

No quorum was present to take action to approve the Agenda of the February 15, 2023 Regular Business Meeting, as presented.

4. Approval of Minutes from the December 21, 2022 Regular Business Meetings

No quorum was present to take action to approve the draft meeting minutes of the December 21, 2022 Regular Business Meeting and will be scheduled for approval at the next meeting on April 19, 2023.

5. Public Comment

There was no public comment.

6. Board Chair Report

Mr. John Hunter announced the 2023 Organizational Meeting's Board Officer Elections will be postponed to the next meeting on April 19, 2023 due to lack of quorum.

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:

Regional Matters:

- Substance Use Disorder (SUD) Oversight Policy Board Bylaws
- MSHN Provider Network Adequacy Assessment (NAA)
- COVID-19 Update

State of Michigan/Statewide Activities:

- Liquor Tax Funding Change Means \$25 Million Boost to Counties

8. Chief Financial Officer Report

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

- FY2023 PA2 Funding and Expenditures by County
- FY2023 PA2 Use of Funds by County and Provider
- FY2023 Substance Use Disorder (SUD) Financial Summary Report as of December 2022

9. SUD Operating Update

Dr. Trisha Thrush was available to answer board member questions about the written SUD Operations Report or the FY23 Quarter 1 SUD County Reports as included in the board meeting packet.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

10. Other Business

There was no other business.

11. Public Comment

There was no public comment.

12. Board Member Comment

Members appreciated MSHN Administration added information to the quarterly SUD County Reports to include the primary substance at admission and secondary substance at admission.

13. Adjournment

Chairperson John Hunter adjourned the MSHN SUD Oversight Policy Advisory Board Meeting at 4:44 p.m.

*Meeting minutes submitted respectfully by:
MSHN Executive Support Specialist*

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)

February/March

MSHN/REGIONAL MATTERS

SUD Oversight Policy Board – Bylaws

There has been some discussion as noted below from the Michigan Association of Counties regarding the Open Meetings Act to allow for remote participation and voting.

Mid-State Health Network is still monitoring any newly proposed legislation prior to presenting any changes to the bylaws. MSHN will present an amendment to the SUD OPB 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.

MSHN is planning to present an overview of the SUD Oversight Policy Board Bylaws and review any proposed edits, now expecting to take place in the summer/fall.

MSHN SUD Site Visit Results

Michigan Department of Health and Human Services (MDHHS) conducted a virtual staff site visit with Mid-State Health Network on February 23, 2023. The site visit includes a review of MSHN policies and practices in the following areas:

- ASAM Level of Care
- Use of Evidence-Based SUD Specific Patient Placement Criteria
- Use of Nationally Recognized SUD-Specific Program Standards to Set Provider Qualifications for Residential Treatment Facilities
- Standards of Care
- Sufficient Provider Capacity at Each Level of Care Including Medication Assisted Treatment for Opioid Use Disorder (OUD)
- Implementation of Comprehensive Treatment and Prevention Strategies to Address Opioid Abuse and OUD
- Improved Care Coordination and Transitions Between Levels of Care
- SUD Health IT Plan
- Women’s Treatment Services

MSHN was found to be in substantial compliance with only one partial compliance area to develop a written procedure for media campaigns supported with MDHHS funds. Congratulations to MSHN SUD Clinical Team and Administration for an outstanding review. The MDHHS Site Review letter is attached for SUD OBP information.

Michigan Department of Health and Human Services Strategic Priorities Released

Michigan Department of Health and Human Services (MDHHS) recently shared with the Pre-Paid Inpatient Health Plans their Strategic Priorities for Fiscal Year 2023 – 2027. MSHN will utilize this information to support MDHHS priorities by developing goals and objectives in MSHN’s FY 2024 – 2025 Strategic Plan. Specifically, MDHHS included a goal to **Reduce opioid and drug related deaths with the following Key Strategies:**

- Prevent opioid misuse using primary prevention strategies, promoting the appropriate use of prescription opioids, and educating the public of the risks of opioids
- Promote screening, care coordination, and improved use of data to improve early identification of an opioid use disorder (OUD)
- Increase access to quality medication-assisted treatment (MAT) by removing barriers to treatment, expanding training for providers on MAT, and offering incentives and support for providers to appropriately use medication to treat OUD
- Increase access to naloxone and other harm reduction strategies
- Enhance data sharing, data integration, coordination of care, and MAT for justice-involved patients
- Improve services for pregnant women and new mothers by increasing provider trainings, increasing screenings for substance use, reducing out of home placements for child welfare, and increasing access to treatment services
- Reduce inequities in substance use treatment access and disparities in outcomes and mortality for Black, Indigenous, and People of Color (BIPOC) communities
- Promote recovery and increase support for recovery services
- Promote syringe service programs and other harm reduction programs to link to treatment, reduce overdose, and reduce infectious disease impacts of drug use
- Utilize High Risk Medicaid Unit within OIG to determine Opioid abuse by Medicaid beneficiaries
- Improve the timeliness and quality of data

Feel free to reach out to Sherry or myself to obtain a copy of the MDHHS Strategic Priorities document.

MSHN Offers Equity Upstream Lecture Series

SUD Oversight Policy Board members should have received an invite from Joseph Sedlock, MSHN’s Chief Executive Officer announcing a new opportunity for board members to hear more about “Reducing Overdose Death Disparities” as part of the first event in the Equity Upstream Lecture Series. MSHN is waiving the registration fee for Governing Board and OPB members.

[Registration is now open](#) for the Equity Upstream lecture with Keynote Speaker, Dr. Camara Jones on April 25 from 1-3 PM. [Dr. Camara Jones](#) is a phenomenally gifted lecturer, epidemiologist, and physician and is an internationally renowned family physician, epidemiologist, and past president of the American Public Health Association whose work focuses on naming, measuring, and addressing the impacts of racism on the health and well-being of the United States and the world. She is currently a Leverhulme Visiting Professor in Global Health and Social Medicine at King’s College, London, is a Senior Fellow at Morehouse School of Medicine and is an Adjunct Professor at Emory University’s School of Public Health. Dr. Jones has past academic appointments at the Harvard School of Public Health and the Radcliffe Institute for Advanced Study, was a Presidential Visiting Fellow at Yale University’s School of Medicine, and most recently was the 2021-2022 Presidential Chair at the University of California, San Francisco. She was a Medical Officer at the Centers for Disease Control & Prevention for 14 years and is an elected member of the National Academy of Medicine and of the American Academy of Arts and Sciences. Dr. Jones earned her BA in Molecular Biology from Wellesley College, her MD from the Stanford University School of Medicine, and both her Master of Public Health and her PhD in Epidemiology from the Johns Hopkins School of Hygiene and Public Health.

If you can't participate in the live event, this lecture will be recorded and MSHN can make it available to you after the event.

MSHN is planning three additional "equity upstream" events in the spring, and we will send along registration information when available. Please join us and hundreds of our providers for this important step in making health equity a reality in our region!

If you have questions or need assistance, please contact Dr. Dani Meier, MSHN's Chief Clinical Officer (dani.meier@midstatehealthnetwork.org; 517-914-5814).

At the MSHN Board of Directors meeting in March, Dr. Dani Meier, Chief Clinical Officer, presented overdose death data for a few counties in our region to illustrate the existence of health disparities that our regional "Equity Upstream" lecture series and learning collaborative, noted above, are designed to reduce.

Please find attached a compilation of this information for all twenty-one counties prepared by Dr. Meier. The report can be accessed via [web link here](#). There are many caveats to note about this data and its interpretation. Please contact our office if you have questions about this data or need other kinds of assistance or information.

STATE OF MICHIGAN/STATEWIDE ACTIVITIES

Michigan Department of Health and Human Services (MDHHS) Releases Plan for Initial Opioids Settlement

State and local governments in Michigan have received the initial payments of the nearly \$800 million the state will receive over 18 years as part of the \$26 billion [nationwide settlement with the three largest pharmaceutical distributors](#), as well as opioid manufacturer, Johnson and Johnson.

MDHHS has been authorized to spend \$39.2 million of the initial settlement payment to the state. MDHHS will use the funding to continue to support evidence-based programming, including for treatment providers, recovery supports, harm-reduction strategies, prevention programming and other organizations that support individuals with substance use disorders.

"In Michigan, we are using this long-term funding to address the multi-generational impact of the opioid epidemic as well as address racial disparities that exist as part of the opioids crisis," said MDHHS Director Elizabeth Hertel. "Settlement dollars will allow us to invest in supports, improvements and enhancements to further our efforts to decrease substance use disorders, improve treatment options and improve recovery success."

As part of the plan, MDHHS will use the opioids settlement dollars to expand capacity for treatment. This includes reviewing barriers that can't be addressed with federal funding, such as provider workforce capacity and expansion of treatment facility infrastructure.

Additional information regarding proposed programming efforts is provided in the [Opioids Settlement: FY2023 Spend Plan](#). MDHHS will share more detailed information as funding is allocated to programs in the near future.

According to a [joint statement](#) from Gov. Gretchen Whitmer and Attorney General Dana Nessel, 50% of the settlement amount will be sent directly to county and local governments. A breakdown of how the settlement money is to be spent on opioid treatment and prevention is available [here](#).

Additional information about the opioids settlement is available on the Department of Attorney General's [website](#).

Michigan Opioid Advisory Commission (OAC) 2023 Report Available

The Opioid Advisory Commission (OAC) was created to satisfy requirements of the national opioid settlements as the designated state entity to advise the Michigan legislature on appropriate use of opioid settlement funds. The goals of the Michigan OAC are to support Michigan with informed, intentional, and collaborative solutions for the use of funds from opioid litigation. The commission includes members with lived experience who have been personally impacted by Michigan's opioid epidemic and members whose families have been deeply impacted by the opioid epidemic. The OAC aims to support the legislature, the state and all Michigan residents with considerations for responsible planning, use and management of State opioid settlement funds, thus the following recommendations are strongly encouraged by the OAC and are being offered for legislative consideration:

- (1) Increase awareness of the Bloomberg/Hopkins Principles for Use of Funds From Opioid Litigation; support practices that help Michigan adopt the "Principles" in all settlement planning and implementation efforts (see Section 4: Strategies for Adopting the Bloomberg/Hopkins Principles, pages 29-38)
- (2) Support the OAC's FY 2023-2025 strategic plan, including adoption of all funding and policy recommendations (see Section 5: Findings and Recommendations, pages 40-46)
- (3) Encourage public transparency and governmental accountability for use of opioid settlement funds by increasing oversight capabilities of the legislature through increased reporting requirements (see Section 5: Findings and Recommendations, pages 40-44)
- (4) Improve current monitoring and authorization protocols for "State Share" opioid settlement funds, including requiring detailed spending plans and the creation of sub-funds within the Opioid Healing and Recovery Fund (see Section 5: Findings and Recommendations, pages 40-44)
- (5) Promote cross-branch partnership, information-sharing and collaborative strategic planning to support informed decision-making on use of opioid settlements funds and data-driven recommendations, by the OAC (see Section 5: Findings and Recommendations, pages 40-44)

To access the full OAC report, including current Behavioral Health Spending and County Vulnerability, see link here: <https://council.legislature.mi.gov/Content/Files/OAC/>.

Michigan Department of Health and Human Services (MDHHS) Launches OpiRescue Smartphone App

In an effort to reduce the occurrence of overdoses and help residents learn to treat an overdose, the Michigan Department of Health and Human Services (MDHHS) is launching [OpiRescue](#), a smartphone app aimed at reducing harm.

The OpiRescue app helps anyone, including first responders, prevent opioid misuse and reduce opioid overdose deaths by addressing education, prevention and tracking of overdose reversals.

"Preventing opioid deaths includes offering a variety of strategies to provide residents tools when and where they need them," said Dr. Natasha Bagdasarian, MDHHS chief medical executive. "The OpiRescue app will support those who may encounter an overdose to immediately begin life-saving treatment to an affected individual."

The OpiRescue app provides:

- Educational content to identify and reverse overdoses.
- A Naloxone finder to locate the medication nearby.
- A treatment locator.
- Information on how to report an overdose reversal.

The OpiRescue app is available statewide in Michigan on both Android and iOS platforms. It is free to use and anonymous. It can be downloaded at [Apple iOS](#) app store or through [Google Play](#).

MDHHS partners, including Prepaid Inpatient Health Plans and [Syringe Service Programs](#), actively involved in caring for members of the public experiencing opioid use disorder will have access to a dashboard for their region. The dashboard will allow those partners to view overdose reversal data in near real time and allocate additional resources as needed to areas with increased reports of overdose reversals.

For more information on Naloxone and how to obtain the medication, visit [Michigan.gov/Naloxone](https://www.michigan.gov/Naloxone).

FEDERAL/NATIONAL ACTIVITIES

Federal Drug Administration (FDA)

The FDA on March 28 “announced the approval of Narcan, 4 milligram (mg) naloxone hydrochloride nasal spray for over-the-counter (OTC), nonprescription, use – the first naloxone product approved for use without a prescription. Naloxone is a medication that rapidly reverses the effects of opioid overdose and is the standard treatment for opioid overdose. Today’s action paves the way for the life-saving medication to reverse an opioid overdose to be sold directly to consumers in places like drug stores, convenience stores, grocery stores and gas stations, as well as online. The timeline for availability and price of this OTC product is determined by the manufacturer. The FDA will work with all stakeholders to help facilitate the continued availability of naloxone nasal spray products during the time needed to implement the Narcan switch from prescription to OTC status, which may take months. Other formulations and dosages of naloxone will remain available by prescription only.”

The FDA’s announcement is available at <https://www.fda.gov/news-events/press-announcements/fda-approves-first-over-counter-naloxone-nasal-spray>.

Center for Disease Control (CDC)

CDC has announced that *Increased Use of Telehealth Services and Medications for Opioid Use Disorder During the COVID-19 Pandemic Associated with Reduced Risk for Fatal Overdose*. “The expanded availability of opioid use disorder-related telehealth services and medications during the COVID-19 pandemic was associated with a lowered likelihood of fatal drug overdose among Medicare beneficiaries, according to a new study. In this national study, researchers analyzed data among two cohorts of Medicare beneficiaries to explore receipt of opioid use disorder-related telehealth services, receipt of medications for opioid use disorder, and fatal overdoses before and during the COVID-19 pandemic. Key findings of this study include:

- Medicare beneficiaries that began a new episode of opioid use disorder-related care during the pandemic and received opioid use disorder-related telehealth services were found to have a 33% lower risk of a fatal drug overdose.
- Medicare beneficiaries who received medications for opioid use disorder from opioid treatment programs (OTP) and those who received buprenorphine, one of the medications for opioid use disorder, in office-based settings also had reduced odds of a fatal drug overdose of 59% and 38%, respectively.

- Mortality rates (classified as all-cause mortality and drug overdose mortality specifically) were higher in the pandemic cohort compared to the pre-pandemic cohort; however, the percentage of deaths due to drug overdose were similar between the two cohorts.”

The study is available at <https://jamanetwork.com/journals>.

May is Mental Health Month

Mental Health America has “announced the release of our highly anticipated 2023 *May is Mental Health Month toolkit!* “This year our theme is *Look Around, Look Within*. As humans, our overall health is significantly impacted by our natural and built environment. The places we live, work, play, and congregate all have a powerful influence on our well-being, and it's important to consider their effects on our mental health. We invite you to *Look Around, Look Within* with the free 2023 May is Mental Health Month toolkit. The toolkit provides practical resources on how to support your mental health and the health of those in your community.”

The toolkit is available at <https://mhanational.salsalabs.org/2023mentalhealthmonthtoolkitdownloadenglish>.

Substance Abuse and Mental Health Services Administration (SAMHSA) Announcements

SAMHSA has announced a webinar and conference call for prospective applicants interested in applying for fiscal year 2023 National Strategy for Suicide Prevention (SM-23-017). The webinar and conference call will be led by SAMHSA Center for Mental Health Services staff. Registration for the webinar is available at

<https://www.zoomgov.com/webinar/register/>

SAMHSA has announced that National Prevention Week is May 7 – 13 and a public education platform showcasing the work of communities and organizations across the country dedicated to raising awareness about the importance of substance misuse prevention and positive mental health. Registration for the activities and additional information are available at <https://apps1.seiservices.com/samhsa/npw/>

Submitted by:



Amanda L. Ittner

Finalized: 4.7.23

Attachments:

MDHHS Site Visit Letter
Regional Overdose Death Data



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ELIZABETH HERTEL
DIRECTOR

March 14, 2023

Joe Sedlock, CEO
Mid-State Health Network
530 W. Ionia Street
Lansing, MI 48933

Dear Mr. Sedlock:

Thank you for the cooperation extended to the Michigan Department of Health and Human Services (MDHHS) staff during the February 23, 2023, virtual site visit.

PRESENT AT THE SITE VISIT

**Mid-State
Health Network**

Joe Sedlock, CEO
Amanda Ittner, Deputy Director,
Leslie Thomas, CFO
Steve Grulke, CIO
Dani Meier, Chief Clinical Officer
Trisha Thrush, Director of SUD Services & Operations
Kim Zimmerman, Chief Compliance Officer
Sarah Andreotti, Lead Prevention Specialist
Kyle Jaskulka, Contracts Manager
Sandy Gettel, Quality Manager
Amy Dillon, Compliance Administrator

MDHHS

Angie Smith-Butterwick, SUGE Section Manager
Lisa Coleman, Departmental Prevention Specialist
Heather Rosales, Women’s Treatment Specialist
Ecole Barrow-Brooks, Analyst
Madison Watts, Site Review Analyst
Kelli Dodson, Site Review Coordinator

SITE VISIT FINDINGS

After careful consideration and review of the requirements and documentation submitted, we have determined that Mid-State Health Network is in substantial compliance with the substance use disorder, Prepaid Inpatient Health Plan (SUD/PIHP) Compliance Protocol.

Joe Sedlock, CEO
Page 2
March 14, 2023

The following area was given partial compliance:

Prevention Services

Under Media Campaigns - Provide the procedure the PIHP undertakes for media campaigns supported with MDHHS funds.

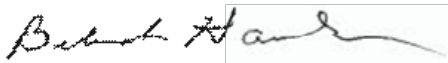
- Partial compliance. They do not have a written procedure for the PIHP, but they do have MDHHS media campaign form.

As Mid-State is already in the process of correcting the concerns noted, a Corrective Action Plan is not required. Currently, Mid-State has the necessary tools in place to manage, maintain and report data from their provider network. Their providers will screen individuals to assess their needs and provide or make referrals for interventions as needed for individuals with an SUD.

We greatly appreciate Mid-State for the site visit and their commitment to provide our staff with the necessary documentation.

If you have any further questions, please contact Kelli Dodson, Site Review Coordinator at dodsonk@michigan.gov.

Sincerely,



Belinda Hawks, MPA,
Director
Division of Adult Home and Community Based Services
Behavioral and Physical Health and Aging Services Administration

BH/kd

cc: Angie Smith-Butterwick
Kelli Dodson
Lisa Coleman
Heather Rosales
Ecole Barrow-Brooks
Madison Shutes

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
- Montcalm Care Network
- 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

Mid-State Health Network Regional Overdose Death Data, by County (Region 5 Only)

Compiled by Dr. Dani Meier, Chief Clinical Officer

As was noted in the Board discussion on May 7, there are indeed pockets of missing data. Four counties (Arenac, Gratiot, Huron and Mecosta), for example, have no overdose (OD) data listed at all on this MDHHS Michigan Overdose Data to Action (MODA) [Dashboard](#). This could be explained, in part, because every county has its own Medical Examiner (ME) each of whom may report information differently to MDHHS. There is in fact a national discussion about the lack of standardization in medical examiner processes which often makes it hard to compare apples to apples, not just between states but even between counties. In smaller counties, medical examiners might be one of the few physicians in that county with their own medical practices so they often know the individuals who've died and/or their families. This may shape how ME's frame the cause of death, selecting less stigmatized causes than drug overdose. As a result, the data MDHHS receives is often incomplete (or not fully accurate) to start with.

Then MDHHS processes the data it receives in ways that are intended to respect the confidentiality of the deceased. Please see the FAQ screen shot below from the MODA dashboard from which I shared data in my presentation. In effect, the Dashboard will only list overdoses/ED visits if the county has had 6 or more overdose events reported in that 12-month period.

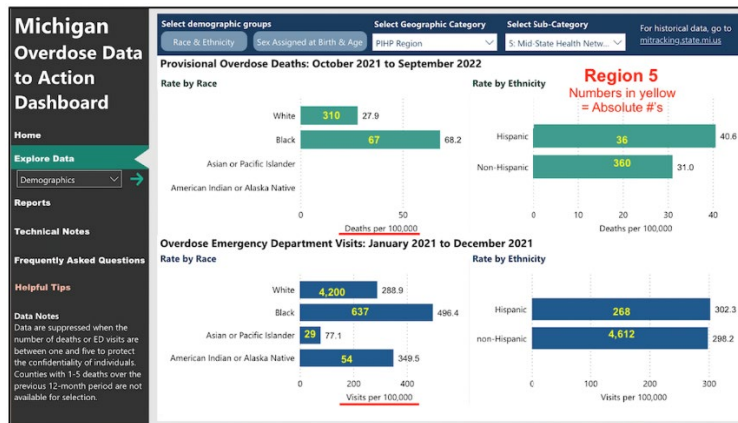
Frequently Asked Questions

Why are some data points not shown on the current trends and demographics charts?
Data are suppressed when there are between one and five events (e.g., deaths, ED visits, etc.) to protect the confidentiality of individuals.

Why can't I see demographic breakdowns for my county?
Demographic data is suppressed for counties with less than 6 overdose deaths over the 12 month period.

How are rates calculated?
Rates are calculated by dividing the number of events among people who live in the selected area by the total number of residents and multiplying the result by 100,000. Rates are often a better measure for comparing different populations because they account for differences in the underlying population size. Rates are only calculated for indicators that can be categorized by place of residence. Rates are not calculated for EMS data because a large number of records are missing information on residence. Rates are not shown when the number of events are between one and five to preserve statistical stability.

Please also note that the MDHHS graphs shown in my presentation showed *deaths per 100,000*, not absolute numbers of OD deaths. This is a mechanism epidemiologists use to demonstrate which populations are being hit hardest *proportionate to their population*. In the Region 5 screen shot below, for example, I added the absolute numbers in yellow. As you can see, Region 5 had 310 White, 67 Black, and 36 Hispanic OD deaths in this 12-month reporting period. But proportionate to the total number of African-Americans and Hispanic folks in Region 5, Black and Hispanic Region 5 residents died of ODs at a rate that's 2.4 and 1.4 times higher respectively than White Region 5 residents.



**OVERDOSE DEATHS AND EMERGENCY DEPARTMENT VISITS, 10/21 to 09/21, WITH RACE/ETHNICITY
MSHN (REGION 5) COUNTIES**

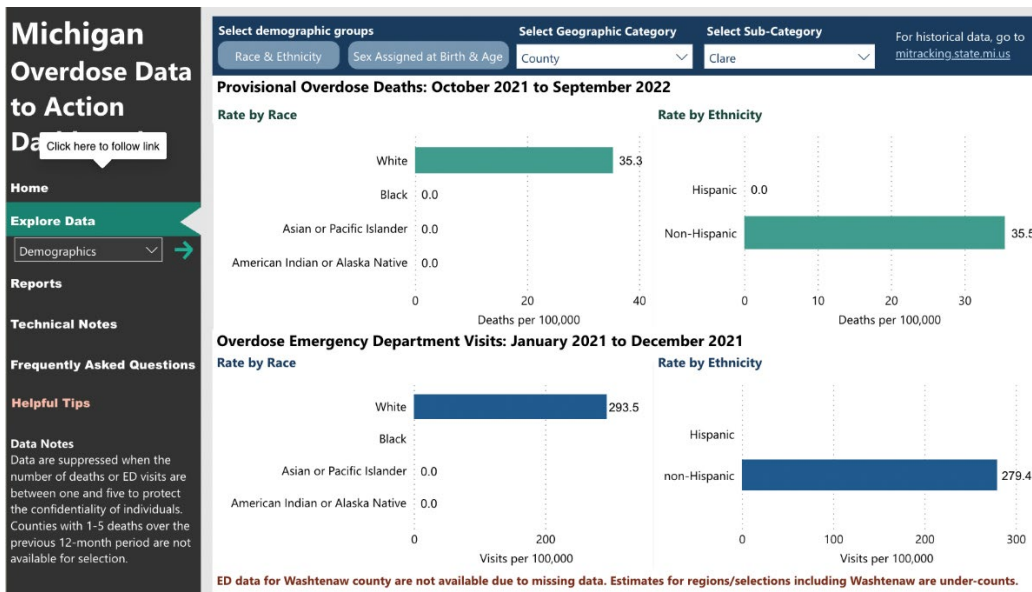
[\(MODA Dashboard\)](#)

There are multiple ways to look at the data if anyone is interested in exploring your county's data further on this Michigan Overdose Data to Action (MODA) [Data Dashboard](#). For detailed technical documentation relative to the MODA data, you can go here for detailed [technical documentation](#).

1. **Arenac:** No Data shown
2. **Bay:**



3. **Clare:**



4. Clinton:

Michigan Overdose Data to Action Dashboard

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Explore Data

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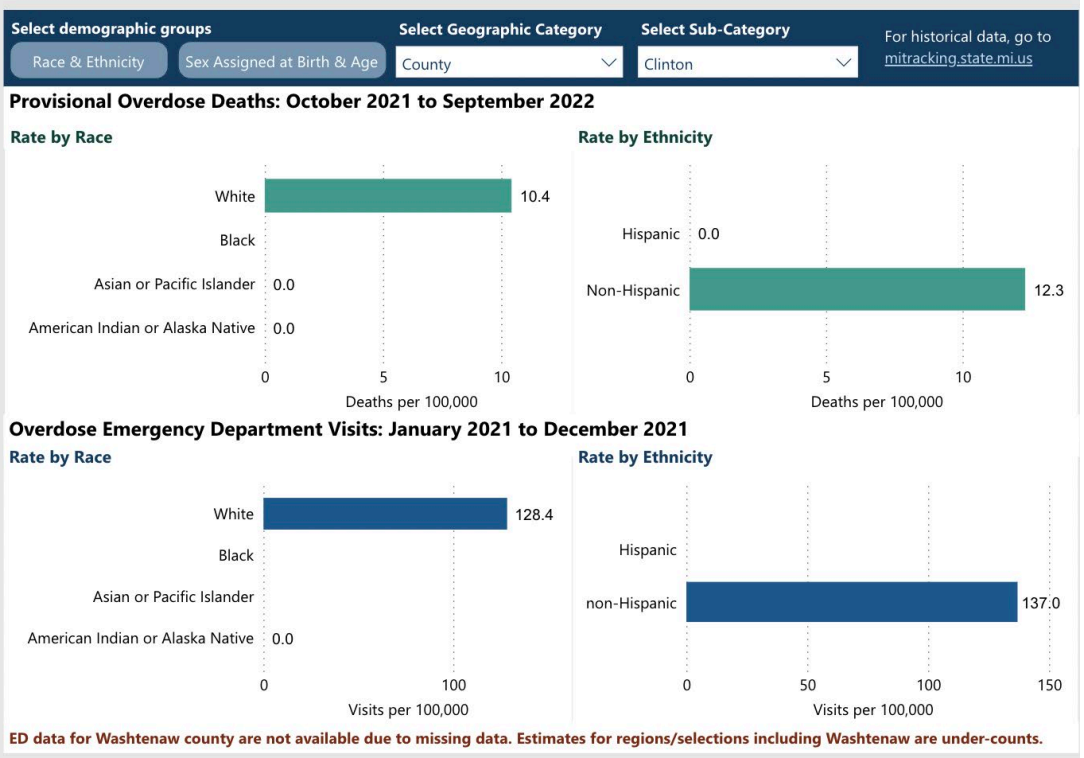
Reports

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Frequently Asked Questions

Helpful Tips

Data Notes
Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.



5. Eaton:

Michigan Overdose Data to Action Dashboard

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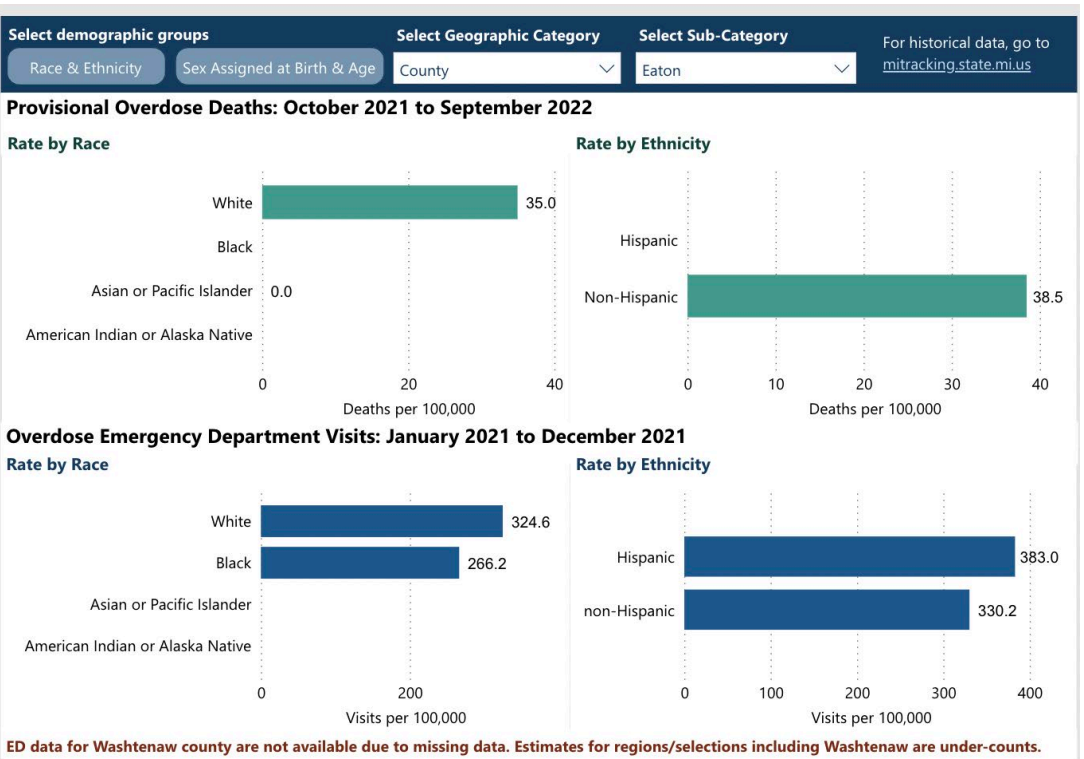
Reports

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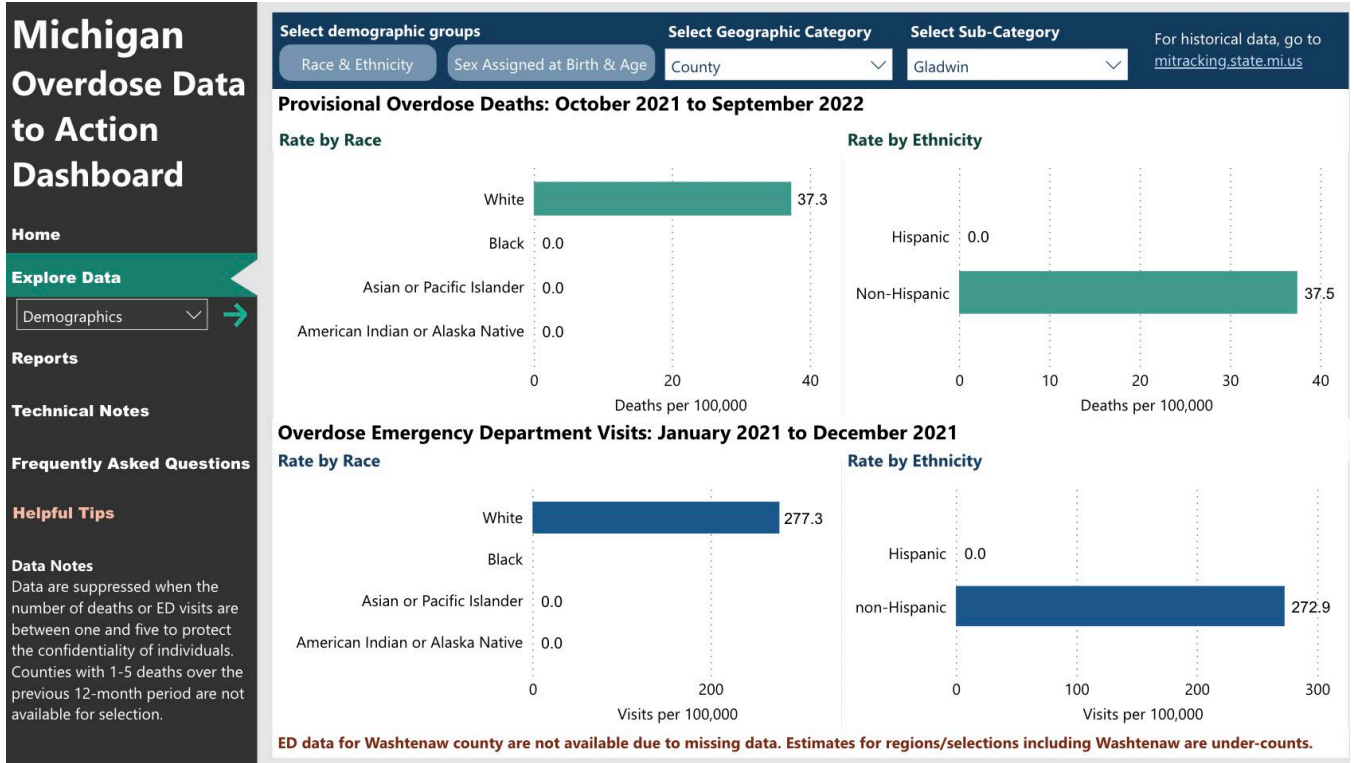
Frequently Asked Questions

Helpful Tips

Data Notes
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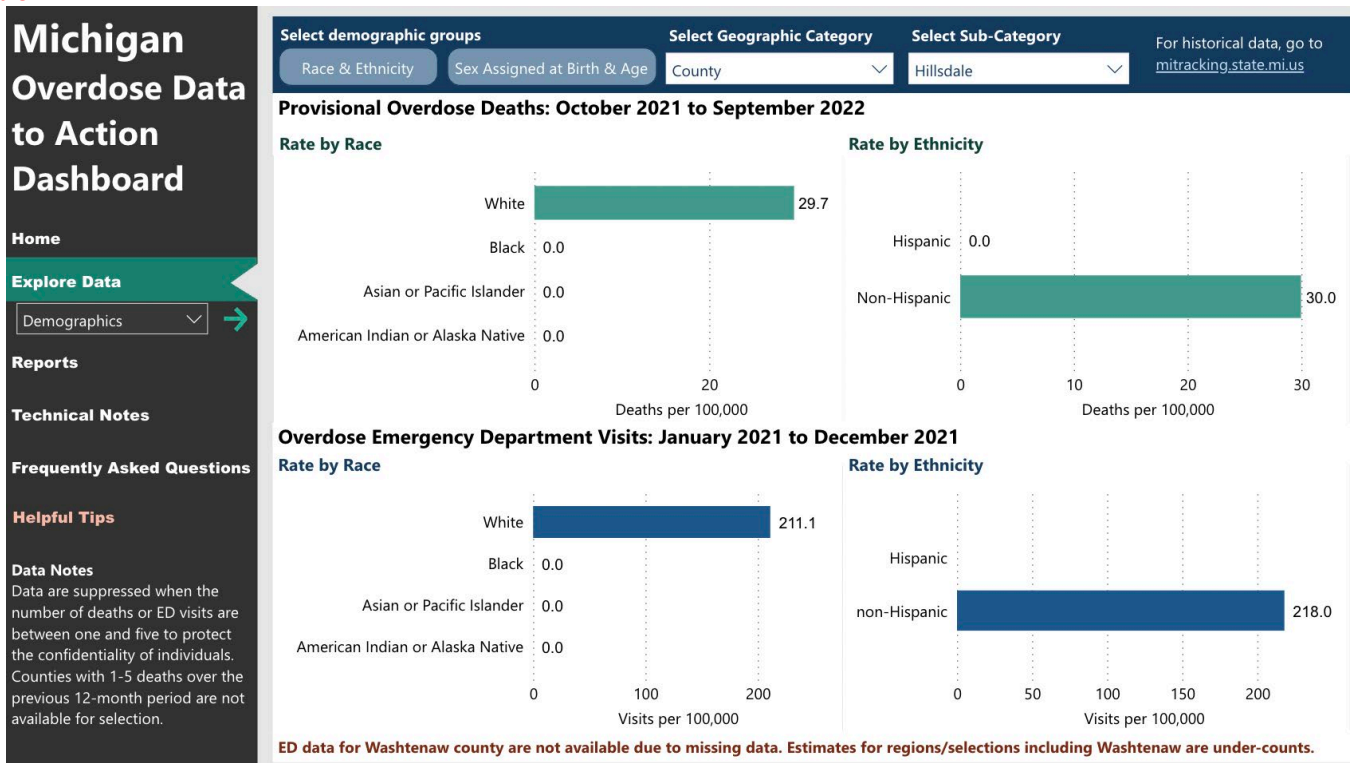


6. Gladwin:



7. Gratiot: No Data shown

8. Hillsdale:



- 9. Huron: No Data shown
- 10. Ingham:

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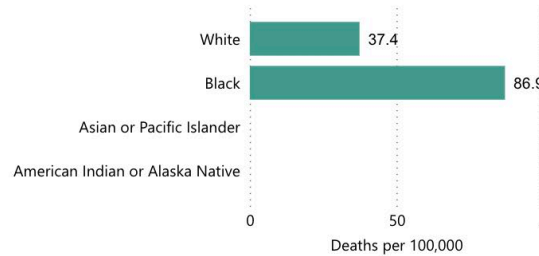
Data Notes

Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.

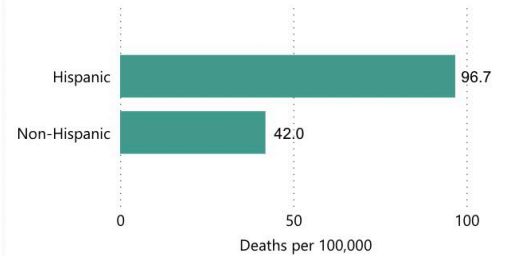
Select demographic groups: Race & Ethnicity, Sex Assigned at Birth & Age
 Select Geographic Category: County
 Select Sub-Category: Ingham
 For historical data, go to mitracking.state.mi.us

Provisional Overdose Deaths: October 2021 to September 2022

Rate by Race

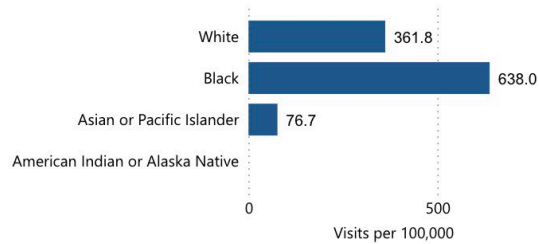


Rate by Ethnicity

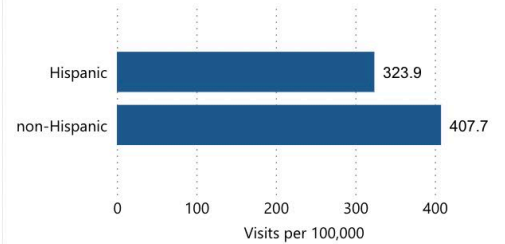


Overdose Emergency Department Visits: January 2021 to December 2021

Rate by Race



Rate by Ethnicity



ED data for Washtenaw county are not available due to missing data. Estimates for regions/selections including Washtenaw are under-counts.

- 11. Ionia:

Michigan Overdose Data to Action Dashboard

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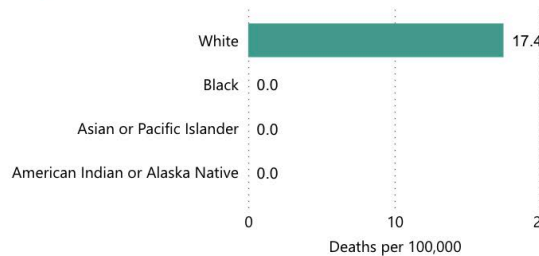
Data Notes

Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.

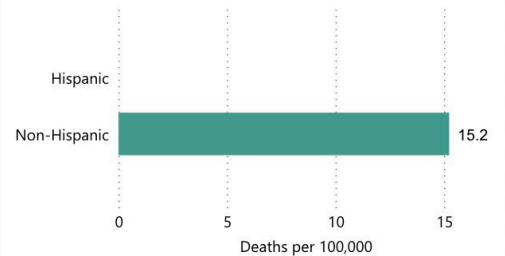
Select demographic groups: Race & Ethnicity, Sex Assigned at Birth & Age
 Select Geographic Category: County
 Select Sub-Category: Ionia
 For historical data, go to mitracking.state.mi.us

Provisional Overdose Deaths: October 2021 to September 2022

Rate by Race

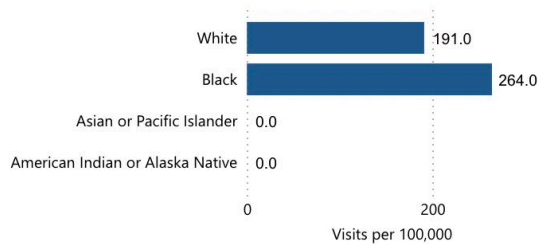


Rate by Ethnicity

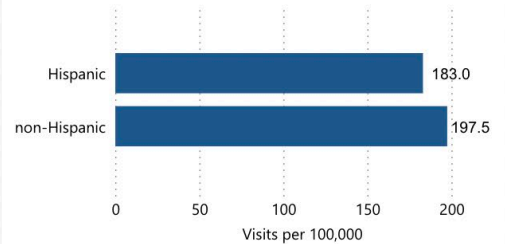


Overdose Emergency Department Visits: January 2021 to December 2021

Rate by Race

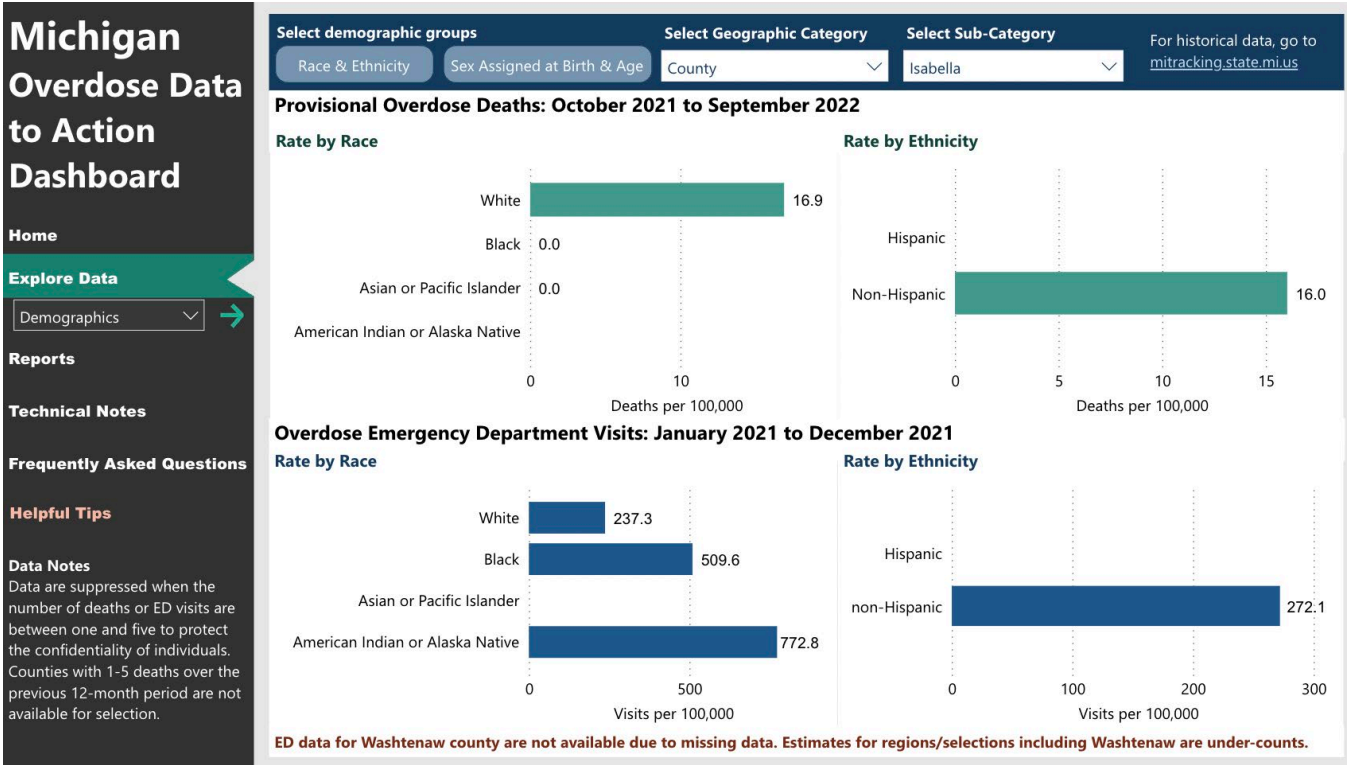


Rate by Ethnicity

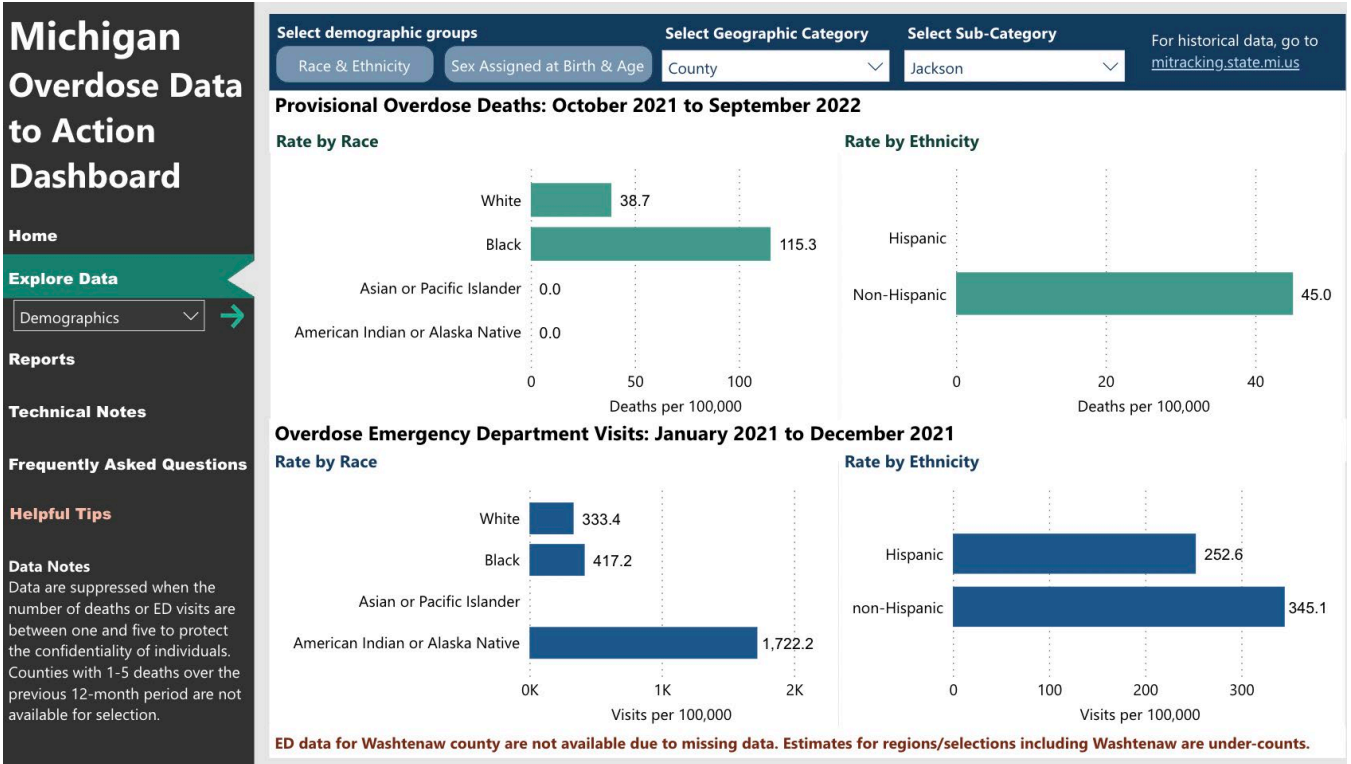


ED data for Washtenaw county are not available due to missing data. Estimates for regions/selections including Washtenaw are under-counts.

12. Isabella:



13. Jackson:



- 14. Mecosta: No Data shown
- 15. Midland:

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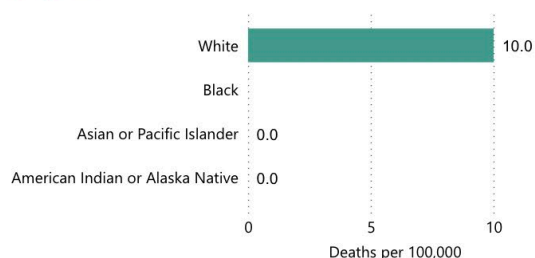
Data Notes

Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.

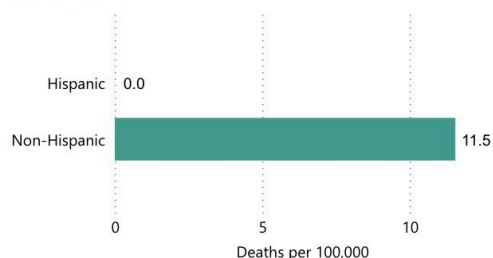
Select demographic groups: Race & Ethnicity, Sex Assigned at Birth & Age
 Select Geographic Category: County
 Select Sub-Category: Midland
 For historical data, go to mitracking.state.mi.us

Provisional Overdose Deaths: October 2021 to September 2022

Rate by Race

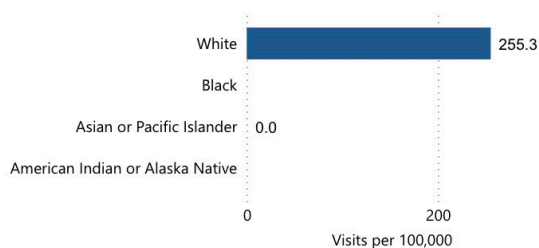


Rate by Ethnicity

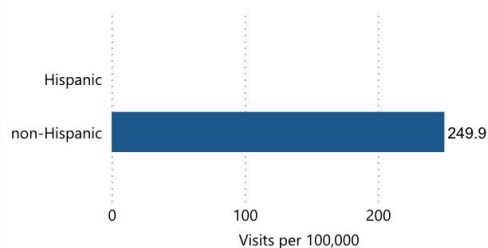


Overdose Emergency Department Visits: January 2021 to December 2021

Rate by Race



Rate by Ethnicity



ED data for Washtenaw county are not available due to missing data. Estimates for regions/selections including Washtenaw are under-counts.

- 16. Montcalm:

Michigan Overdose Data to Action Dashboard

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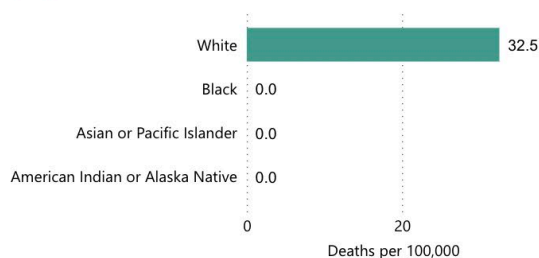
Data Notes

Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.

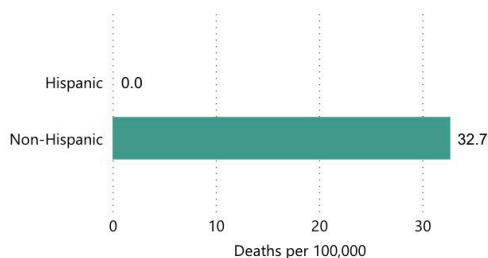
Select demographic groups: Race & Ethnicity, Sex Assigned at Birth & Age
 Select Geographic Category: County
 Select Sub-Category: Montcalm
 For historical data, go to mitracking.state.mi.us

Provisional Overdose Deaths: October 2021 to September 2022

Rate by Race

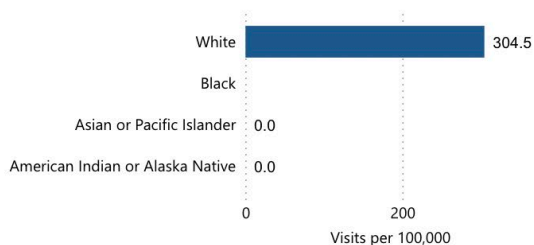


Rate by Ethnicity

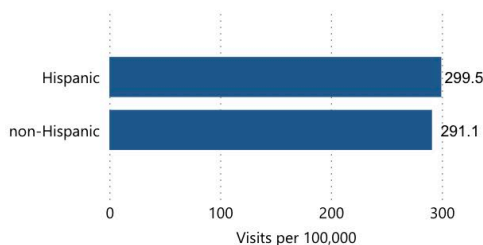


Overdose Emergency Department Visits: January 2021 to December 2021

Rate by Race



Rate by Ethnicity



ED data for Washtenaw county are not available due to missing data. Estimates for regions/selections including Washtenaw are under-counts.

17. Newaygo:

Michigan Overdose Data to Action Dashboard

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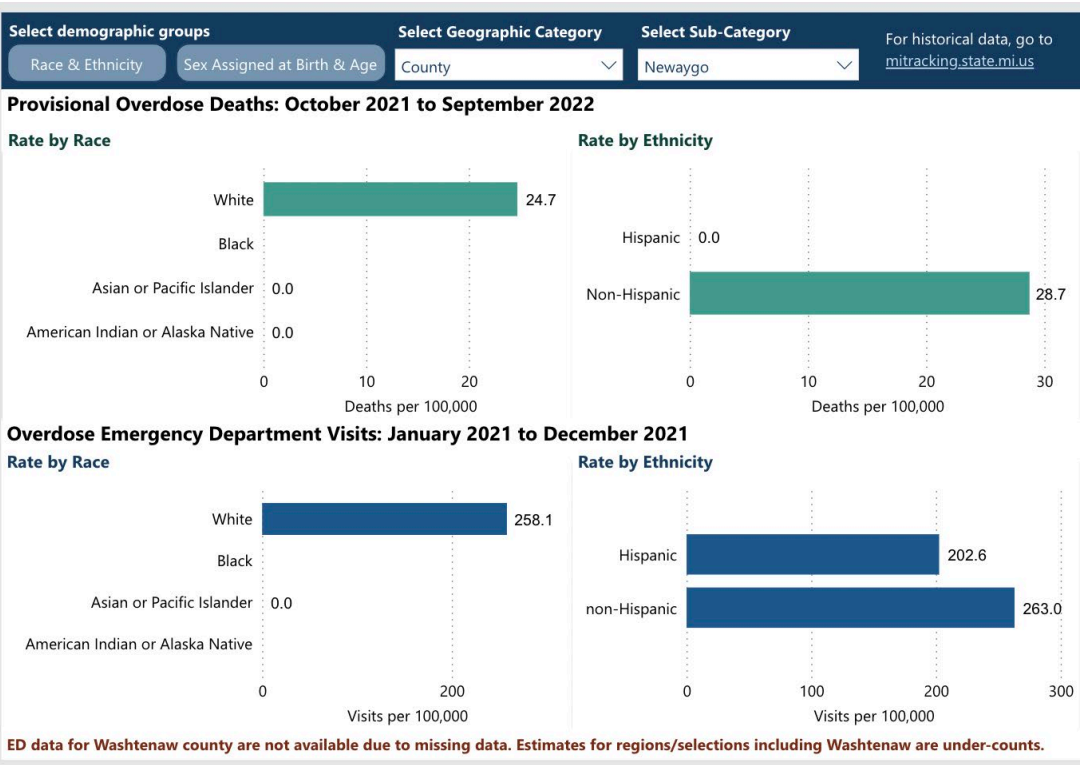
Technical Notes

Frequently Asked Questions

Helpful Tips

Data Notes

Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.



18. Osceola:

Michigan Overdose Data to Action Dashboard

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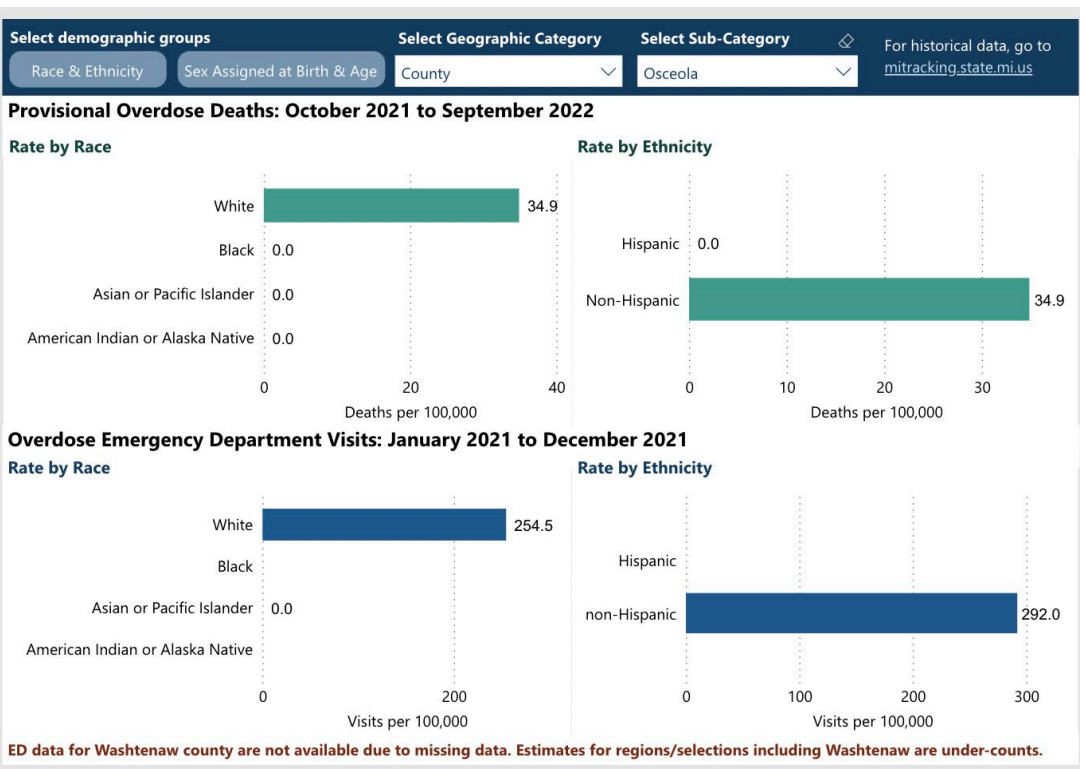
Technical Notes

Frequently Asked Questions

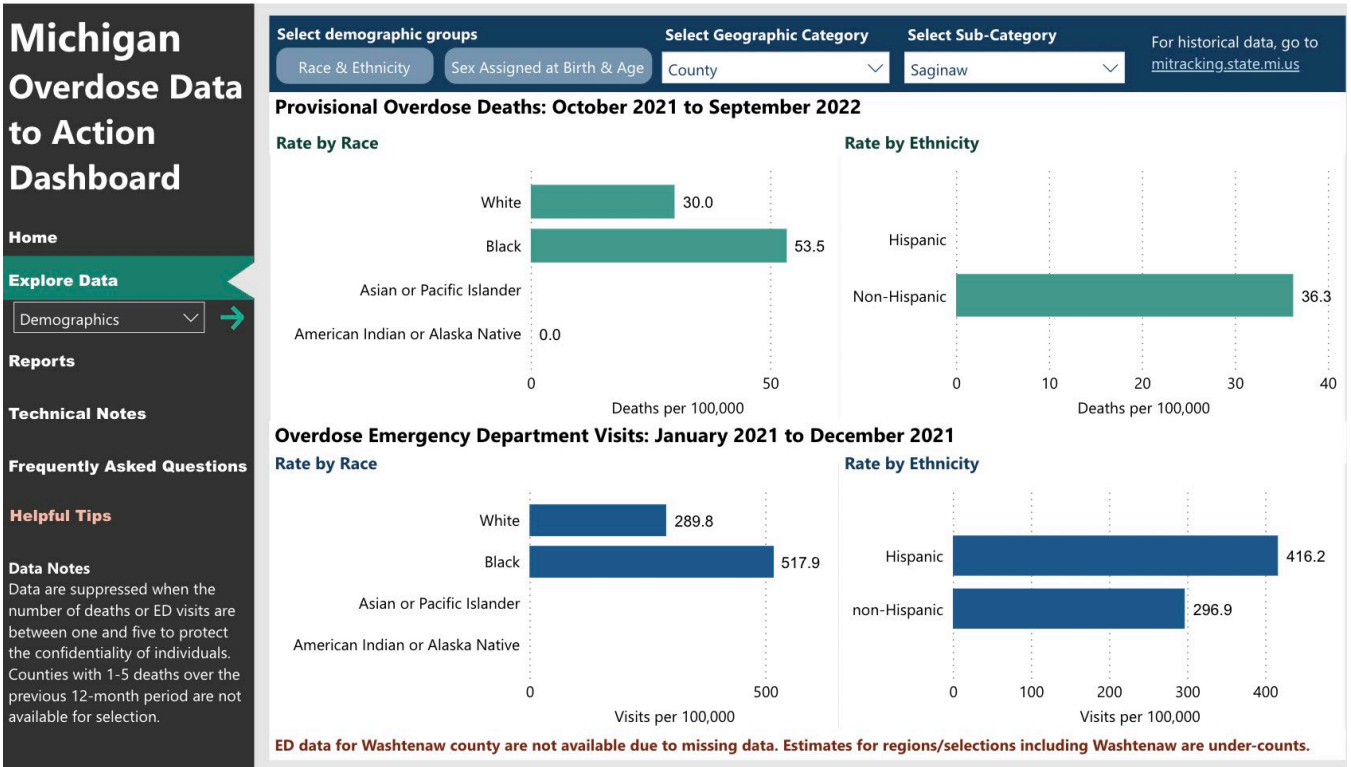
Helpful Tips

Data Notes

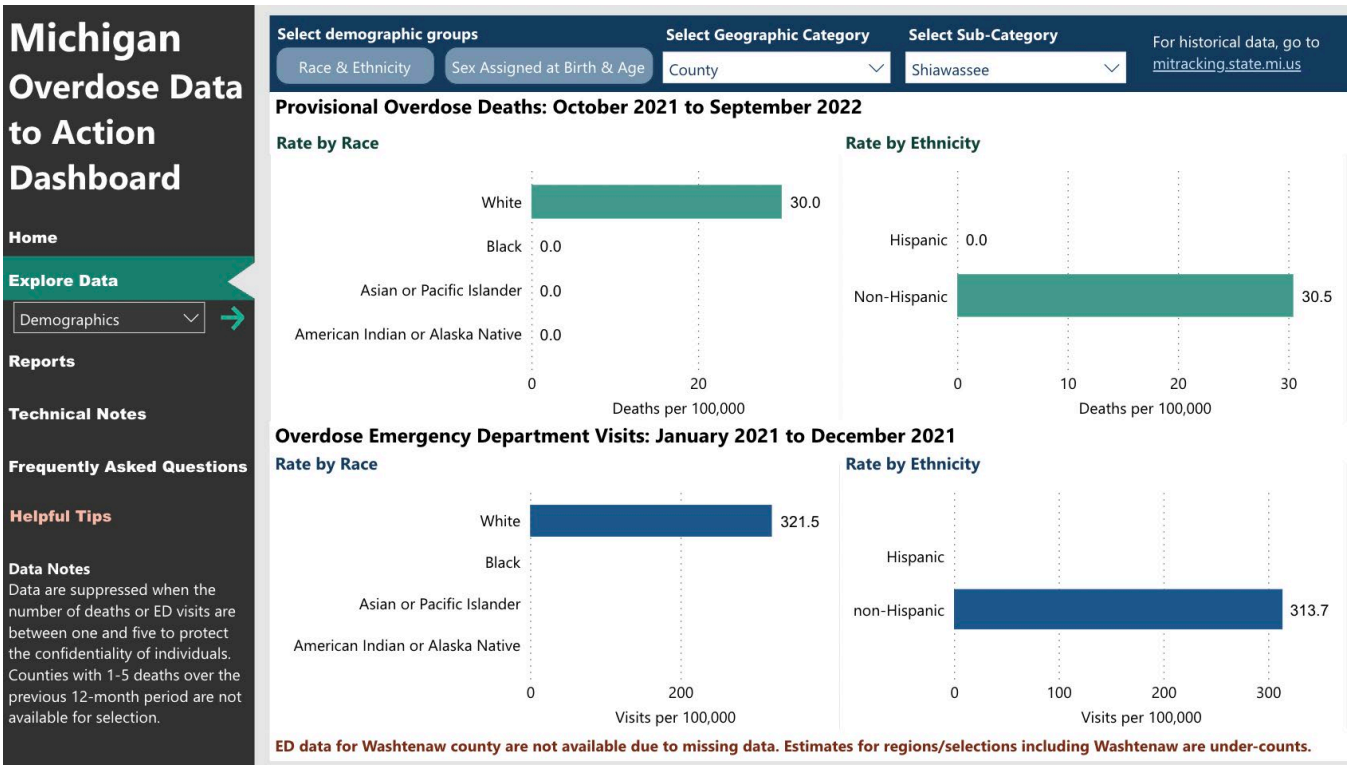
Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.



19. Saginaw:



20. Shiawassee:



21. Tuscola:

Michigan Overdose Data to Action Dashboard

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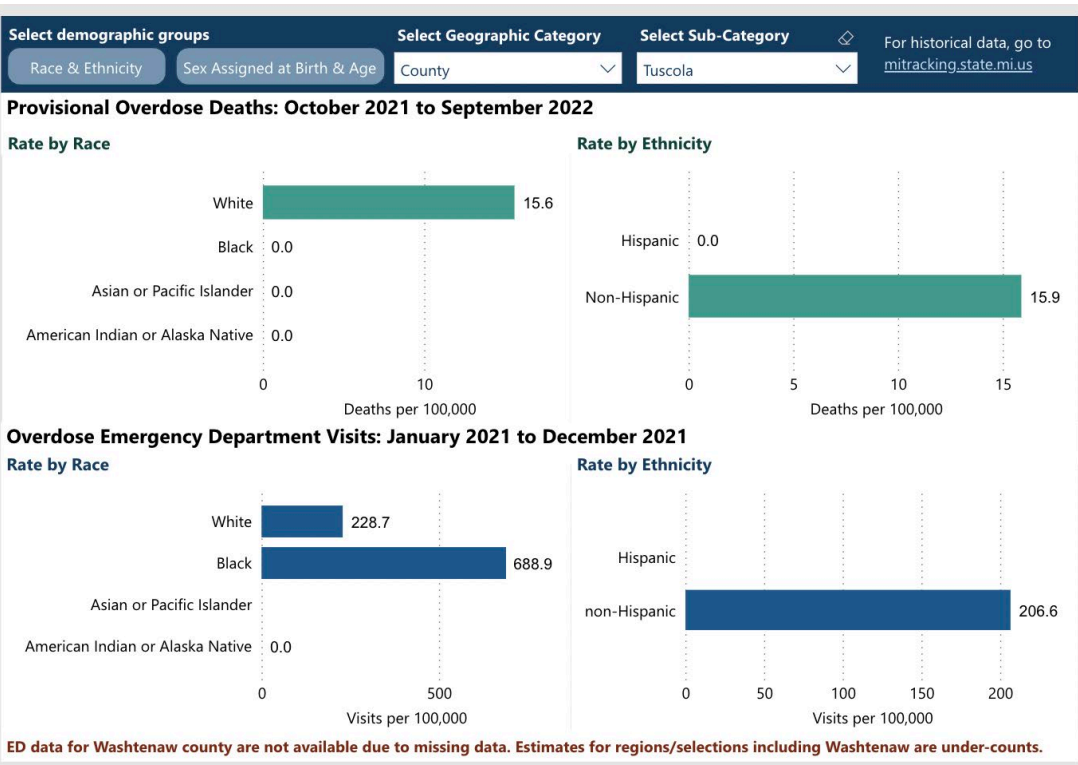
Reports

Technical Notes

Frequently Asked Questions

Helpful Tips

Data Notes
Data are suppressed when the number of deaths or ED visits are between one and five to protect the confidentiality of individuals. Counties with 1-5 deaths over the previous 12-month period are not available for selection.



**Mid-State Health Network
FY2023 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	PA2 Balance Available for Expenses
Arenac	43,079	5,372	02.06.23					39,831	5,372	48,451
Bay	618,251	30,475	02.15.23					233,547	30,475	648,725
Clare	159,599	8,059	02.13.23					60,746	8,059	167,658
Clinton	453,660	19,498	02.10.23					148,983	19,498	473,157
Eaton	473,679	34,736	02.21.23					272,660	34,736	508,415
Gladwin	79,862	5,594	03.02.23					43,933	5,594	85,455
Gratiot	59,475	6,926	02.03.23					56,647	6,926	66,401
Hillsdale	211,381	7,986	02.07.23					60,490	7,986	219,366
Huron	150,584	10,345	02.16.23					75,835	10,345	160,929
Ingham	1,140,248	108,945	02.21.23					783,947	108,945	1,249,193
Ionia	340,146	11,203	02.21.23					89,033	11,203	351,349
Isabella	365,167	20,661	02.13.23					154,219	20,661	385,828
Jackson	669,765	49,863	02.08.23					386,551	49,863	719,628
Mecosta	245,292	13,195	02.06.23					102,884	13,195	258,487
Midland	417,386	25,590	02.10.23					175,440	25,590	442,976
Montcalm	302,262	15,266	02.16.23					121,919	15,266	317,528
Newaygo	154,400	12,003	03.10.23					96,097	12,003	166,403
Osceola	67,509	5,307	03.01.23					38,324	5,307	72,815
Saginaw	1,543,606	71,915	02.09.23					590,923	71,915	1,615,520
Shiawassee	359,793	14,648	02.13.23					111,203	14,648	374,441
Tuscola	137,959	8,266	02.06.23					66,041	8,266	146,225
	<u>\$ 7,993,104</u>	<u>\$ 485,846</u>		<u>\$ -</u>		<u>\$ -</u>		<u>\$ 3,709,254</u>	<u>\$ 485,846</u>	<u>\$ 8,478,949</u>

**Mid-State Health Network
FY2023 PA2 Expenditure Summary by County**

County	PA2 Balance Available for Expenses	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	YTD Payments	Ending PA2 Fund Balance
Arenac	48,451	3,539	2,539	2,643	3,090	3,151		14,962	\$ 33,490
Bay	648,725	14,261	15,281	14,182	28,171	26,060		97,954	\$ 550,771
Clare	167,658	1,919	4,658	4,081	3,685	2,692		17,035	\$ 150,623
Clinton	473,157	15,692	9,490	11,470	9,073	9,267		54,993	\$ 418,164
Eaton	508,415	20,382	19,949	25,295	21,227	21,767		108,620	\$ 399,794
Gladwin	85,455	2,514	3,632	2,711	3,088	2,702		14,647	\$ 70,808
Gratiot	66,401	4,610	3,253	4,451	4,226	4,161		20,700	\$ 45,701
Hillsdale	219,366	6,990	-	5,024	8,173	8,246		28,433	\$ 190,934
Huron	160,929	6,640	4,547	2,882	5,721	5,689		25,479	\$ 135,450
Ingham	1,249,193	48,590	41,323	64,417	55,703	55,144		265,177	\$ 984,016
Ionia	351,349	9,145	10,504	12,760	14,783	7,942		55,133	\$ 296,215
Isabella	385,828	21,287	22,556	24,639	18,212	21,732		108,426	\$ 277,402
Jackson	719,628	33,916	32,669	32,145	31,784	27,042		157,555	\$ 562,072
Mecosta	258,487	11,151	12,334	11,220	11,757	10,164		56,626	\$ 201,861
Midland	442,976	12,241	8,433	7,285	9,030	9,264		46,253	\$ 396,723
Montcalm	317,528	2,027	2,041	2,121	7,447	2,086		15,722	\$ 301,806
Newaygo	166,403	2,643	2,834	2,748	2,207	2,106		12,539	\$ 153,864
Osceola	72,815	2,513	1,220	2,376	3,411	2,709		12,229	\$ 60,586
Saginaw	1,615,520	40,757	51,500	42,285	65,115	56,960		256,618	\$ 1,358,903
Shiawassee	374,441	24,810	18,405	14,087	18,546	20,173		96,020	\$ 278,420
Tuscola	146,225	9,137	8,878	10,408	9,539	9,797		47,760	\$ 98,465
\$ 8,478,949		\$ 294,763	\$ 276,046	\$ 299,230	\$ 333,988	\$ 308,855	\$ -	1,512,882	\$ 6,966,068

Mid-State Health Network
 Summary of PA2 Use of Funds by County and Provider
 October 1, 2022 through February 28, 2023

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Arenac						
Peer 360 Recovery					4,914	4,914
Sterling Area Health Center				2,431		2,431
Ten Sixteen Recovery		7,617				7,617
Arenac Total		7,617		2,431	4,914	14,962
Bay						
Neighborhood Resource Center				33,337		33,337
Peer 360 Recovery					24,024	24,024
Sacred Heart Rehabilitation				8,264		8,264
Sterling Area Health Center				15,805		15,805
Ten Sixteen Recovery					16,524	16,524
Bay Total				57,406	40,548	97,954
Clare						
Ten Sixteen Recovery		417		481	16,137	17,035
Clare Total		417		481	16,137	17,035
Clinton						
Eaton Regional Education Service Agency				46,954		46,954
State of Michigan MRS	5,000					5,000
Ten Sixteen Recovery					3,039	3,039
Clinton Total	5,000			46,954	3,039	54,993
Eaton						
Eaton Regional Education Service Agency				54,305		54,305
State of Michigan MRS	5,000					5,000
Wellness, InX		34,980			14,335	49,315
Eaton Total	5,000	34,980		54,305	14,335	108,620
Gladwin						
Ten Sixteen Recovery		3,311		2,741	8,595	14,647
Gladwin Total		3,311		2,741	8,595	14,647
Gratiot						
Gratiot County Child Advocacy Association				13,978		13,978
Ten Sixteen Recovery		6,722				6,722
Gratiot Total		6,722		13,978		20,700
Hillsdale						
LifeWays Community Mental Health Authority				28,433		28,433
Hillsdale Total				28,433		28,433
Huron						
Peer 360 Recovery					25,479	25,479
Huron Total					25,479	25,479
Ingham						
Child and Family Charities				7,528		7,528
Cristo Rey Community Center				9,732		9,732
Eaton Regional Education Service Agency				18,942		18,942
Ingham County Health Department				11,561		11,561
Lansing Syringe Access, Inc			31,028			31,028
Prevention Network				6,840		6,840
Punks With Lunch Lansing			3,181			3,181
State of Michigan MRS	15,000					15,000
Wellness, InX		86,105			75,260	161,365
Ingham Total	15,000	86,105	34,208	54,604	75,260	265,177
Ionia						
County of Ionia				51,900		51,900
Wedgwood Christian Services					3,234	3,234
Ionia Total				51,900	3,234	55,133
Isabella						
Peer 360 Recovery					18,381	18,381
Ten Sixteen Recovery		6,144		19,412	64,489	90,045
Isabella Total		6,144		19,412	82,870	108,426

Mid-State Health Network
 Summary of PA2 Use of Funds by County and Provider
 October 1, 2022 through February 28, 2023

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Jackson						
Big Brothers Big Sisters of Jackson County, Inc				6,564		6,564
Family Service and Childrens Aid (Born Free)				94,652		94,652
Henry Ford Allegiance				930		930
Home of New Vision					55,409	55,409
Jackson Total				102,146	55,409	157,555
Mecosta						
Ten Sixteen Recovery		10,224		8,953	37,449	56,626
Mecosta Total		10,224		8,953	37,449	56,626
Midland						
Peer 360 Recovery					25,503	25,503
Ten Sixteen Recovery		8,816			9,343	18,159
The Legacy Center for Community Success				2,591		2,591
Midland Total		8,816		2,591	34,846	46,253
Montcalm						
Mid-Michigan District Health Department					5,309	5,309
Wedgwood Christian Services		10,413				10,413
Montcalm Total		10,413			5,309	15,722
Newaygo						
Arbor Circle				12,539		12,539
Newaygo Total				12,539		12,539
Osceola						
Ten Sixteen Recovery		5,666		6,563		12,229
Osceola Total		5,666		6,563		12,229
Saginaw						
First Ward Community Service				68,930		68,930
Great Lakes Bay Health Center				15,412		15,412
Parishioners on Patrol				5,000		5,000
Peer 360 Recovery					44,168	44,168
Sacred Heart Rehabilitation				15,662		15,662
Saginaw County Youth Protection Council				60,812		60,812
Ten Sixteen Recovery					46,633	46,633
Saginaw Total				165,817	90,801	256,618
Shiawassee						
Catholic Charities of Shiawassee and Genesee				52,363		52,363
Peer 360 Recovery					34,575	34,575
Shiawassee County				4,083		4,083
State of Michigan MRS	5,000					5,000
Shiawassee Total	5,000			56,445	34,575	96,020
Tuscola						
List Psychological Services				27,974		27,974
Peer 360 Recovery					19,786	19,786
Tuscola Total				27,974	19,786	47,760
Grand Total	30,000	180,415	34,208	715,672	552,586	1,512,882

Mid-State Health Network
Summary of SUD Revenue and Expenses as of February 2023 (41.7% of budget)

	Year to Date Actual	Full Year Budget	Remaining Budget	% to Budget
Revenue				
Block Grant	3,051,609.11	8,958,377.00	5,906,767.89	34.06%
SOR and Other Grants	1,244,943.86	6,103,984.00	4,859,040.14	20.40%
Medicaid	7,991,822.98	14,871,832.00	6,880,009.02	53.74%
Healthy Michigan PA2	15,304,975.42 1,512,881.53	26,450,624.00 4,506,627.00	11,145,648.58 2,993,745.47	57.86% 33.57%
Totals	29,106,232.90	60,891,444.00	31,785,211.10	47.80%
Direct Expenses				
Block Grant	3,051,609.11	8,958,377.00	5,906,767.89	34.06%
SOR and Other Grants	1,244,943.86	6,103,984.00	4,859,040.14	20.40%
Medicaid	6,265,630.52	13,864,740.00	7,599,109.48	45.19%
Healthy Michigan PA2	11,367,198.29 1,512,881.53	25,725,000.00 4,506,627.00	14,357,801.71 2,993,745.47	44.19% 33.57%
Totals	23,442,263.31	59,158,728.00	35,716,464.69	39.63%
Surplus / (Deficit)	5,663,969.59			
Surplus / (Deficit) by Funding Source				
Block Grant	-			
SOR Grants	-			
Medicaid	1,726,192.46			
Healthy Michigan PA2	3,937,777.13 -			
Totals	5,663,969.59			

Actual revenue greater than budgeted revenue

Actual expenses greater than budgeted expenses

Surplus/(Deficit) by Funding Source - Please Note: A surplus or deficit listed above only relates to SUD. MSHN uses the amounts above in conjunction with behavioral health surpluses and deficits to determine a regional total. MSHN then applies MDHHS's set formula to calculate the portion of surplus dollars we can retain.

OPB Operational Report April 2023 Q2 January - March 2023

Several Clinical Team functions and activities are ongoing year-round while others are specific to requirements of that quarter's place in the fiscal year cycle or situation-specific demands prompted by new federal, state, or local mandates or regulations, shifts in epidemiological trends (e.g., COVID surges or rise in stimulant use), etc. The activities below are separated accordingly.

Prevention

- Supported distribution of \$400,000 in SOR-3 funds for SUD prevention coalition mini-grants for OEND and harm reduction activities and supplies
- Ongoing implementation of web-based media campaign (My Life My Quit) information for youth vaping prevention with text # for quit support
- Implemented vaping prevention streaming TV commercial campaign for month of March with MDHHS Tobacco Section funding to coincide with Take Down Tobacco Day on March 31.
- Continuation of streaming TV commercial media campaign for problem gambling
- Worked with DYTURs to verify and update over 1600 vendors on the Master Retailer List.
- Support DYTURs to begin Vendor Education to tobacco and ENDS retailers
- Began preparing for FY23 Prevention and Community Recovery provider desk audits
- Began preparing for FY24 Annual Planning
- Began preparing for SOR funding site review from MDHHS
- Hosted Chronic Pain PATH trainer information session for community recovery providers
- Completed annual Prevention Expenditure by Strategy Report for submission to MDHHS
- Ongoing planning for grant projects and spending in FY23, including QPR suicide prevention training, cannabis education, and gambling prevention media campaigns
- Continued planning for 2023 regional prevention conference on May 3-4 in Mt. Pleasant
- Hosted quarterly SUD Prevention Provider meeting
- Inter-regional coordination ongoing through Prevention Coordinators around the state
- Review of prevention providers' entries into MPDS (Michigan Prevention Data System) where prevention providers log their activities, persons served, etc.
- Provision of technical assistance and training to existing providers on best practices for prevention and on how to document those in MPDS
- Attending coalition meetings across Region 5's 21 counties.
- Continued implementation of FY21-23 SUD Strategic plan.

Treatment

- SUD Treatment Team changes: Shannon Myer has transitioned to being a QAPI manager, and Kate Flavin has transitioned from Utilization Management to become a Treatment Specialist. Welcome Kate!
- Attendance for MDHHS Social Determinants of Health Summit January 24 – 26.
- MDHHS 1115 waiver site review 2/23/2023 was completed with substantial compliance in almost all areas and partial compliance in one.
- Worked with four providers to support discussion and evaluation of a value-based pilot for Project ASSERT to be implemented beginning 4/1/2023.

- RFP completed for Montcalm and Isabella counties. Samaritas supporting Montcalm County with ASAM 1.0 LOC with MAT. Ten16 supporting Isabella County with ASAM 1.0 LOC. Bear River Health will be evaluated for supporting withdrawal management and residential levels of care for Montcalm and Isabella counties.
- Implementation of Opioid Health Home in Region 5 at Victory Clinical Services – Saginaw. Currently have 140 individuals enrolled and growing daily. MSHN evaluating expansion of Health Home Partners (HHPs) for FY24.
- SUD quarterly provider meeting held on 3/16/2023. Agenda and presentation materials are available on the MSHN website [here](#).
- Preparation and coordination of FY24 SUD Clinical Team annual plan process and documentation development.
- Planning for Project ASSERT program at Sparrow Hospital ED in Ingham County for January-March 2023.
- Narcan Vending Machines currently approved for Eaton, Ingham, Tuscola, Ionia, Jackson, Gratiot, and Ingham counties with SOR-3 grant funds.
- Planning and coordination of training opportunities for SUD provider network for spring/summer of 2023. This will include a Loss & Grief for SUD, Trauma Yoga, Cognitive Behavioral Therapy, Solution Focused Brief Intervention trainings. Training information will be released in the weekly constant contact newsletter.
- Monitoring and assisting providers with ASAM Designation process with MDHHS which is now part of the MiCAL system online.
- Monitoring of Public Health Emergency (PHE) unwind with MDHHS to support providers and individuals in services with guidance.
- Ongoing support of technical assistance needs with SUD treatment providers.
- Continued Treatment Team attendance at prevention community coalition meetings.
- Ongoing evaluation of opportunities to expand services for specialty populations of older adults, adolescents, veterans and military families.
- Ongoing monitoring of progress for FY21-23 SUD Strategic Plan
- Coordinate and facilitate regional Recovery workgroup, ROSC meetings, regional MAT workgroup meetings, regional WSS workgroup meetings, regional WM/residential workgroup, and new outpatient provider meetings

Additional Activities in January - March:

- Oversight and coordination of SUD prevention and treatment teams and all activities listed above
- Ongoing support of Project ASSERT expansion in Saginaw and Jackson
- Ongoing coordination with statewide SUDS Directors
- CCO and Director of Utilization Management & Health Integration in ongoing IDEA & REACH meetings
- Ongoing meetings with Michigan Health Endowment Fund and Saginaw's Women of Colors (WOC) on Phase II grant to reduce disparities in follow-up for treatment after an ER visit for SUD issue
- Registration open for lecture #1 of the *Equity Upstream* virtual lecture series.
- The *Equity Upstream* Learning Collaborative includes 8 MSHN-contracted providers and includes multiple levels of care (residential, outpatient, MAT/methadone providers), recovery housing, a peer-led community recovery organization and a police dept. doing post-overdose community-based outreach.
- A study published in the [*Journal of Studies on Alcohol and Drugs*](#) described a reduction in overdose deaths (ODD) through the use of community-based strategies, resulting in an estimated 1,818 opioid-related deaths prevented over two years. Community outreach will be a central component of the Learning Collaborative's work and has begun.