



**Northern Lakes
Community Mental
Health Authority**

Board of Directors Packet

March 20, 2025



The Northern Lakes Community Mental Health Authority Board will meet on March 20, 2025
 105 Hall St. Traverse City, MI 49684 & Virtually: [+1 810-258-9588](tel:+18102589588), 877 408 48#

AGENDA

Time	Item #	
1:00 p.m.	1	Opening: <ul style="list-style-type: none"> • Confirm Quorum and Pledge of Allegiance • Approval of Agenda • Conflict of Interest • Consent Agenda (Minutes)* • Appointment of Timekeeper
1:05 p.m.	2	Public Comment (May be limited to three minutes by Board Chair)
1:10 p.m.	3	Celebrate Northern Lakes
1:20 p.m.	4	Report of Officers: <ul style="list-style-type: none"> • Recipient Rights Director Report <ul style="list-style-type: none"> ○ Brian Newcomb Office of Recipient Rights • Chief Executive Officer Report <ul style="list-style-type: none"> ○ Brian Martinus, Interim Chief Executive Officer • Chief Financial Officer Report <ul style="list-style-type: none"> ○ Kevin Hartley • FY 2024 Northern Lakes CMHA Quality Assurance and Improvement, Regulatory Compliance, and Customer Services Report <ul style="list-style-type: none"> ○ Kari Barker
2:00 p.m.	5	Committee Reports (Please keep reports less than 5 minutes): <ul style="list-style-type: none"> • NMRE Update <ul style="list-style-type: none"> ○ Ruth Pilon • Ad Hoc CEO Search <ul style="list-style-type: none"> ○ Tom Bratton • Executive <ul style="list-style-type: none"> ○ Greg McMorrow • Finance <ul style="list-style-type: none"> ○ Al Cambridge • Policy • Community Engagement and Services <ul style="list-style-type: none"> ○ Christal Frost Anderson • Personnel
2:40 p.m.	6	Unfinished Business: <ul style="list-style-type: none"> ○ Possible Committee Appointments ○ Accommodations ○ New Board member Orientation ○ Slate of Officers- Process Discussion
2:50 p.m.	7	Public Comment
2:55 p.m.	8	Announcements/Board Comments/Presentations

3:00 p.m. 9 Adjourn NEXT MEETING: April 17, 2025 – Traverse City

* Action Items

NOTICE: If any person with a disability needs accommodations, please call 231-942-7372 three days prior to the posted meeting date.

Board of Directors Meeting Minutes

February 20, 2025

1:00 p.m.

Board Members Present: Kim Morley, Dave Freedman, Mark Nyman, Dean Smallegan, Lynn Pope, Penny Morris, Tom Bratton, Mary Marois, Al Cambridge, Greg McMorrow.

Absent: Ty Wessell, Tony Lentych, Ruth Pilon, Christal Frost Anderson, Shawn Kraycs

Others Present: Vickie McDonald, Brian Martinus, Neil Rojas, Kevin Hartley, Mark Crane, Kim Silbor, Allie Coon, Brian Newcomb, Jeremiah Williams, Melissa Trout, 2 unknown guests.

Others Virtual: Daniel Mauk, Ann Ketchum, Terri Henderson, Mats Andtbacka, Dean Baldwin, Darryl Washington, Aimee Horton Johnson, Becky Brown, Erica Smith, Caleb Gomez, Melissa Bentgen, Joseph Barkman, Josette Hoch, Amanda Richie, Mark Draeger, Erin Brotherton, Lori Stendel, Somer Quinlan, Jordan Byington, Erin Barbus, Amy Kotulski, Curtis Cummins, Laura Argyle, Rachel Plum, Jim Coffia, Jillian Smithingell, Tiffany Fewins, Kellee Hoag, Peter Kobs, Kristine Rigling, Kristin Page, Jessica Williams, April Weinrick, Cindy Evans, Rob Palmer, Lisa Jones, Trapper Merz, Dave Simpson, Jess Riddle, 14 Unknown.

Call to Order: Greg McMorrow called the meeting to order at 1:00 p.m.

Confirm Quorum: Confirmed.

Conflict of Interest: None.

Approval of Agenda:

Amendment:

- Secondary closed session for discussion about current litigation.

MOTION:	Approve the agenda with amendment
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	D. Smallegan
SECONDER:	D. Freedman

Amendment to Minutes: None.

MOTION: Approve the Consent Agenda (Minutes) with amendment

RESULT: ADOPTED [UNANIMOUS]

MOVER: M. Marois

SECONDER: M. Nyman

Consent agenda included the January 16, 2025, minutes which were approved.

Appointment of Timekeeper: Penny Morris

Public Comment:

Ben Townsend, Former Board Member; Wexford County: Ben thanks the board for 6 years of service. He appreciates where the board is now and what direction it is headed in. Ben thanks everyone for their kindness and friendship. Ben thanks staff members. He says that we should always lift up the staff because they are the key to the whole operation. Ben thanks Brian for his patience and for appointing Mr. McMorrow as the board chair. He added blessings to Stacy and thanks Heider. Ben thanks Mr. Cambridge for his guidance. Ben mentioned that he grew so much being a part of this board, more than any board he has ever been on. Mr. McMorrow praises Ben Townsend for his service on the Board.

Patricia Fuller, Given Hope AFC: Expressed frustration with the Board. She is a small business owner of an AFC home. She spoke of a review in early 2024 where there were many discrepancies found. She was only allowed to view part of the report and would like to see all the discrepancies and the full report. She cannot get in touch with anyone to resolve this issue. The small business closed. She mentioned that there are signatures that were not accepted and would like to know why. She admits that some progress notes were missing. She would like to know why we would take \$8,000 away from a small business.

Celebrate Northern Lakes: Erica Longstreet presents Melissa Trout a certificate for 22 years of excellent service. Melissa started here right out of school as a home-based therapist. She worked her way through outpatient, clinical, supervisory and managerial roles. She looks forward to the next 22 years and has learned so much. Mary Marois spoke about how much of a pleasure it was working with Melissa; out of all the people she worked with, she was the star. Melissa always had ideas and a plan. Melissa gave a warm shout out to her hard-working team.

***Current Board Member seat vacancy allows 10 votes to move this forward**

MOTION: Closed Session

RESULT: ADOPTED

MOVER: G. McMorrow

SECONDER: P. Morris

Closed Session, Roll Call Vote:

In Favor – K. Morley, D. Freedman, M. Nyman, D. Smallegan, L. Pope, P. Morris, T. Bratton, M. Marois, A. Cambridge, G. McMorrow

Opposed: none

Result: Closed Session was approved

MOTION: Secondary Closed Session

RESULT: ADOPTED. (ADDED TO AGENDA)

MOVER: G. McMorrow

SECONDER: L. Pope

Secondary Closed Session, Roll Call Vote:

In Favor – K. Morley, D. Freedman, M. Nyman, D. Smallegan, L. Pope, P. Morris, T. Bratton, M. Marois, A. Cambridge, G. McMorrow

Opposed: none

Result: Secondary Closed Session was approved and added to the agenda

Report of Officers:

Recipient Rights Report: Brian Newcomb, Director of the Office of Recipient Rights, updated the board with recent data from the ORR department. We are still compliant. From the standard report we have had a total of 195 complaints, 65 are currently open. From the annual report we have had 596 total allegations. Neglect 3 is one of the highest complaints we receive, this typically stems from staff falling asleep. Seven individuals were let go due to recipient rights actions. 51.75 hours of training was received, this number was lower due to sickness. We are right in line with the state in our substantiation rate. This year is our Triennial Review. There were no questions for Brian.

RRAC Update: Al Cambridge spoke in the place of Tony Lentych. The team does a great job of finding coverage for each other. They feel supported and protected by the board. The committee meets every other month on the first Thursday in Cadillac.

Interim Chief Executive Officer's Report: Brian Martinus shared that Dr. Darryl Washington has published his second book and that it is available on Amazon for purchase. Brian will be in Liberia, Africa, March 21-

30. Darryl Washington and Dr. Curtis Cummins will be in charge while he is away. This follows the protocol set in place by the Board of Directors previously.

Chief Financial Officer's Report: Kevin Hartley, Chief Financial Officer, went over the finance report with the Board. The full report was included in the desk packet. Balance Sheet amounts presented represent the amounts rolled forward from FY 24. However, neither a financial close nor audit has been conducted at this time. Therefore, amounts should be considered preliminary and subject to adjustment. Cash and investments on the balance sheet show a -\$10.8 million decrease from the prior year and liquid cash remains stable. Medicaid Capitation - Estimated Medicaid expenses are approximately \$1.6M MORE than the capitated payments received from NMRE resulting in a current OVERSPEND. Medicaid capitation was about \$750k lower than expected through December. Estimated Healthy Michigan expenses are approximately \$787k GREATER than the capitated payments received from NMRE resulting in an OVERSPEND. Healthy Michigan capitation was about \$200k higher than expected through December. General Fund Capitation estimated expenses are approximately \$800k MORE than the capitated payments received resulting in an OVERSPEND. Grant revenues and expenses are tracking as expected. Salaries, wages and fringes: Salaries and fringes are approximately \$1M under budget. Total directly operated expenses are about \$1M under budget through December. CMH Provider Network Contractual Services are about \$1.2M over budget through December, mostly driven by residential contracts.

Committee Reports:

Finance Committee: Mr. Cambridge gave an update on the most recent finance committee meeting. The financial audit for 2023 is in progress, the 2024 audit is ready to start soon after. They want to finalize the 2023 audit first. We should be back on schedule with our audits by April or May of this year. The finance committee is requesting to temporarily hold off sharing our balance sheet until we have settled with the NMRE; this was accepted. There will be a proposal with a list of firms sent out in May to choose which company we use for our 2025, 2026, and 2027 audits. As we move into our 2025 audit, we will be looking for an additional procedure to implement to make sure that our cost allocation is in line with state regulations.

NMRE: Mary Marois spoke in Ruth Pilon's absence. There was a discussion about providers being paid a higher rate in Oakland County, DHHS and the NMRE are in conflict regarding some issues, and Grand Traverse County and Leelanau County have been reclassified as urban. These counties are no longer considered rural. We will need to discuss what changes this may bring.

Ad Hoc CEO Search: Tom Bratton spoke about the CEO search. The committee met last week. One of the committee members was Ben Townsend who is no longer on the board, they will seek a replacement for him. The committee worked with Deb Freed on marketing. One proposal was able to be reviewed, and they are expecting three more proposals by their next meeting. The next board packet should include the top company with which the committee would like to work. They would like to invite the firm to give a 10-minute overview and receive a recommendation from the board. It should be decided in the next board meeting if we want to move forward with said firm.

Executive: Met to put the BOD Agenda together.

Policy: Ms. Marois spoke about the policy committee. The magnitude of the work for the policy committee has shown that they need to meet more often. There will be an all-day meeting in April. The committee would like all finance and personnel policies to be passed through the committee to review them. These policies will not be changed by the committees, only reviewed.

Community Engagement and Services: This committee will be meeting next week.

Personnel: No members of this committee were present.

Unfinished Business: Committee Assignments - Mark Nyman will be emailed a list of committees he may join. There are spots open that need to be filled.

Public Comment: Peter Kobs, a reporter for the *Traverse City Record-Eagle*. What is the justification for going into closed session #2 this afternoon to discuss the recent Rehmann report? What is the exact exception to the Michigan Open Meetings Act that would justify this second closed session? Finally, will this closed session include discussions of the Rehmann report that would normally be held in open session?

Announcements/ Board comments/ Presentations:

Ms. Marois would like to address the grievance of the woman who spoke today during public comment.

Mr. McMorrow will put together a new board member orientation.

Ms. Morris shared that we should reiterate that board members are not allowed to individually comment (answer emails); it is against our process. The correspondence must be attached to the board member packet. There should be a report by the CEO or Board Chair.

MOTION: To Adjourn

RESULT: ADOPTED [UNANIMOUS]

MOVER: M. Morris

SECONDER: L. Pope

Next Meeting: March 20, 2025, 105 Hall Street, Traverse City 49684

Adjournment: The meeting adjourned at 4:13 p.m.

Respectfully submitted,

Alexandra Coon, Deputy Administrative Assistant

Victoria McDonald, Administrative Specialist

Greg McMorrow, Chairperson

Lynn Pope, Secretary

Office of Recipient Rights Director's Report
March 2025

Dates represented	10/01/22-03/11/23	10/1/23-03/11/24	10/1/24-03/11/25
Complaints	154	239	213
OJ, No Right Inv.	19	39	29
Interventions	3	22	22
Investigations	132	179	152
Investigations Comp	132	179	121
Investigations open	0	0	31
Inv > 90 days	0	0	0
Inv < 90 days	132/132(100%)	179/179(100%)	121/121(100%)
Summary Report Avg	135/135(100%)	181/181(100%)	119/119(100%)
NLCMHA staff alleg.	26	72	58
NLCMHA Staff W/I 1 yr	12	7	8

Complaint Source

Complaint Source	Count
Anonymous	7
Community/General Public	5
Guardian/Family	11
ORR	68
Recipient	22
Staff	100
Total	213

5-year Trends of Abuse/Neglect Cases

	Abuse I & II	Abuse III	Neglect I & II	Neglect III	Services Suited to Condition	Total
FY2021	23	32	17	80	74	226
FY2022	44	46	25	152	151	418
FY2023	39	17	21	144	2	223
FY2024	29	26	4	98	0	157
FY2025	10	4	0	43	0	57

Complaints Per Provider:

October 1, 2024- March 11, 2025

See attached chart.

Notes:

Respectfully submitted,

Brian Newcomb

Director of Recipient Rights

Provider Report October 1, 2024- March 11, 2025

Program	Substantiated	Pending	Not Substantiated	NA
Access	0	1	0	0
Assertive Community Treatment	0	2	1	1
Beacon Anchor Point North	0	4	0	0
Beacon Home at Cogswell	1	1	0	0
Beacon Home At Ludington	7	0	4	0
Beacon Home at Trolley Center	1	2	1	0
Beacon Home at Washburn	7	1	0	0
Beacon Home at Woodland	0	0	2	0
Beacon Mission Point	3	1	1	0
Beacon Silverview	3	1	0	1
Beacon Specialized Living Services, Inc.	2	0	0	0
Benton AFC	0	0	1	0
Brightside Living - Lake Shore	0	0	1	0
Cadillac Office/Wexford County	1	1	1	0
Cedar Valley AFC	2	1	0	0
ComForCare	0	0	3	0
Crisis Services	1	0	0	1
Danes AFC	3	0	1	0
Elmwood AFC	10	1	3	0
Grand Traverse Industries, Inc.	0	0	1	0
Grayling Office/Crawford County	0	0	2	0
Great lakes Center for Autism	1	0	0	0
Hickory Hill AFC LLC	0	0	1	0
Hillcrest AFC	0	5	0	0
Hope Network Gardner Home	1	0	1	0
Hope Network Neo Bristol	4	0	1	0
Hope Network Neo Wyoming	2	1	0	0
Hope Network Westlake VIII	3	0	0	0
IDD Adult Case Management	10	1	4	0

IDD Children's Case Management	0	0	2	0
J. Cole Enterprises, LLC	0	0	0	1
Jones Lake AFC Home	2	1	0	0
Lake Shore AFC	0	0	1	0
Lincoln House LC	1	0	3	0
Magnolia Care AFC West	1	0	0	0
Mama T's AFC	0	2	0	0
MI Independent Living, LLC	1	1	1	0
MIA Case Management	0	0	1	0
Mid-Michigan Specialized Residential	0	0	1	0
Montclair Specialized Residential Services	0	0	1	0
Northern Lakes CMH Authority	27	4	11	0
Oakridge Specialized Residential	1	0	0	0
Ohana AFC	0	0	1	0
Outpatient Services	0	0	1	1
Packard Specialized Residential	1	0	1	0
Pearl Street Home	3	1	1	0
Peer Support	0	0	1	0
R.O.O.C., Inc.	1	0	0	0
Seasons of Life AFC Home, LLC	0	0	4	0
Seneca Place Home	4	1	0	0
Serenity AFC	0	0	4	0
Specialized Personal Recovery Services, LLC	1	0	0	0
Summerfield AFC	1	1	0	0
Sunrise AFC Home	0	1	0	0
TC Office/Grand Traverse County	7	0	2	0
Woodland AFC Home	1	0	0	0
Wright Street AFC Home	2	0	1	0
Wright's AFC Home, LLC	0	3	0	1

Interim Chief Executive Officer's

Report to the Board

March 20, 2025

Citizen Comment:

Ms. Fuller has been sent correspondence with an answer to her questions addressed at the last board meeting.

Grants of Significant Value: No new grants of significant value.

NMRE Financial Oversight: NMRE will put NLCMHA under a cost containment plan with the other five CMHs within the NMRE network. This was voted on at the last NMRE meeting.

Dashboard Report: The Board has requested a monthly Dashboard Report. See attached.

Community Connections/Meetings:

- March 3rd, NMRE SUD Oversight Committee Meeting
- March 4th, GTCMW Team Meeting
- March 12th, NMRE Finance Committee Meeting
- March 18th, NMRE Operations Committee Meeting
- March 20th, NLCMHA Board Meeting
- March 21-29th, Liberia Africa – Military Orders
- April 3rd, RRAC
- April 9th, NMRE Finance Committee Meeting
- April 15th, NMRE Operations Committee Meeting
- April 17th, NLCMHA Board Meeting
- April 18th, NLCMHA Closed for Holiday
- April 23rd, NMRE Board Meeting

NLCMHA NOW Newsletter Email Blast: In our most recent email blast we shared information on the following topics:

- Staff anniversaries and changes
- Welcome new hires
- EAP Program information
- Upcoming office and Board meetings
- Mental Health First Aid training classes
- "Think Less, Listen More" – article by Dr. Darryl Washington
- RCA Spotlight
- CARF Update

Media Coverage: There were some articles in the last month. I am attaching a Word document of that article to this report, and links are included below should you want to access them yourselves:

https://www.record-eagle.com/news/at-issue-medicaid-debunking-commonassumptions-about-this-health-insurance/article_903463c8-f0be-11ef-963b-77651c8799b1.html

<https://www.upnorthvoice.com/business/roscommon-business/2025/03/roscommonseeks-authority-board-member/>

Respectfully submitted,

Brian Martinus, Interim CEO

	FY2025 Monthly Access Timeliness, Request to Assessment							
	October	November	December	January	February	March	April	
Within 14 days	51	58	45	70				
Outside 14 days	18	8	10	12				
Consumer Cancelled/Rescheduled	9	10	5	10				
Consumer Requested outside 14 days	9	3	6	0				
Consumer No Showed	35	19	17	23				
Consumer Chose to Not Pursue Svcs	0	0	0	0				
Other (denial, no follow up)	15	11	24	15				
	FY2025 Monthly Access Timeliness, Assessment to Service							
	October	November	December	January	February	March	April	
Within 14 days	55	45	42	53				
Outside 14 days	3	3	3	3				
Consumer Cancelled/Rescheduled	1	2	3	6				
Consumer Requested outside 14 days	3	3	4	1				
Consumer No Showed	13	17	9	11				
Consumer Chose to Not Pursue Svcs	0	0	2	2				
Other (denial, no follow up)	7	6	9	0				
Monthly % seen in 14 Days	94.8%	93.8%	93.3%	94.6%	#DIV/0!	#DIV/0!	#DIV/0!	
	Referrals for Denied Initial Clinical Assessments, FY25							
	October	November	December	January	February	March	April	May
External Mental Health Provider	7	2	6	3				
External SUD Provider	3	1	2	6				
No Referral	3	3	1	0				
Other Community Services	4	5	3	5				
	October	November	December	January	February	March	April	May
30 Minutes or Less	10	14	6	11	13			
31 Minutes to 1 Hour	7	1	6	3	2			
Over 1 Hour	8	3	3	6	2			

	FY2025 Inpatient Readmission Rate							
	Admissions	Admits in 30 Days	% Readmitted					
October	73	7	10%					
November	60	5	8%					
December	48	2	4%					
January	62	7	11%					
February			#DIV/0!					
March			#DIV/0!					
April			#DIV/0!					
May			#DIV/0!					
June			#DIV/0!					
July			#DIV/0!					
August			#DIV/0!					
September			#DIV/0!					
TOTAL			9%					

	FY2025 Monthly Team Efficiency								
	Expected	October	November	December	January	February	March	April	May
ACT	35%	17.71%	19.02%	17.74%	14.45%				
CPSS	30%	20.76%	19.14%	18.59%	20.57%				
ES	30%	5.37%	4.33%	4.70%	4.73%				
IDD Adult	30%	10.99%	12.38%	13.73%	12.11%				
IDD Child	30%	16.65%	26.22%	15.00%	22.57%				
MIA CSM	30%	19.30%	21.98%	22.95%	24.96%				
MIA OP	50%	38.64%	41.43%	35.68%	37.52%				
SED HB	30%	19.22%	18.66%	18.30%	19.97%				
SED OP CSM	35%	28.11%	29.48%	23.12%	25.87%				
SED PTP	30%	20.76%	20.33%	17.32%	19.48%				

FY2025 Service Information For Grand Traverse County						
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, Clubhouse and Nu	\$ 140,903.77	\$ 132,223.29	\$ 123,848.02	\$ 140,679.10		
Autism Services	\$ 147,070.09	\$ 126,109.19	\$ 132,250.11	\$ 155,517.82		
Case Management, ACT and Treatment Planning	\$ 217,808.40	\$ 195,902.92	\$ 173,765.62	\$ 213,112.05		
Community Living Supports	\$ 1,305,484.01	\$1,207,755.78	\$ 1,235,945.09	\$1,271,530.12		
Crisis Services, Assessments and Testing	\$ 124,003.00	\$ 120,831.40	\$ 95,948.40	\$ 145,074.25		
Evaluation and Management Physician Level	\$ 89,911.37	\$ 89,549.83	\$ 82,044.91	\$ 61,351.65		
Psychiatric Inpatient	\$ 266,120.04	\$ 173,602.37	\$ 141,761.14	\$ 118,358.98		
Psychotherapy and Outpatient Services	\$ 148,350.71	\$ 122,098.39	\$ 102,580.38	\$ 102,327.10		
Vocational & Skills Building, Family and Health Services	\$ 67,030.81	\$ 57,307.51	\$ 50,039.84	\$ 68,698.20		
Other	\$ 12,561.68	\$ 9,081.16	\$ 8,669.05	\$ 9,058.44		
Total	\$ 2,519,243.88	\$2,234,461.84	\$2,146,852.56	\$2,285,707.71	\$ -	\$ -
Number of Registered People Receiving Services	932	946	880	911	-	-
Average Cost per Registered Person Served	\$ 2,703.05	\$ 2,362.01	\$ 2,439.61	\$ 2,509.01	#DIV/0!	#DIV/0!
Service Transactions Provided	112,186	101,272	98,114	93,785		
Average Cost per Transaction	\$ 22	\$ 22	\$ 22	\$ 24	#DIV/0!	#DIV/0!
Count of Adult IDD	257	267	253	262		
Count of Child IDD	65	71	66	65		
Count of Adult SMI	499	498	455	464		
Count of Child SED	111	110	106	120		
Total	932	946	880	911	-	-
IDD Adult Cost	\$ 1,175,398.04	\$1,083,441.67	\$ 1,073,004.52	\$1,105,514.88		
IDD Child Cost	\$ 238,884.14	\$ 215,457.03	\$ 223,821.94	\$ 237,919.88		
Adult SMI Cost	\$ 916,865.89	\$ 784,958.73	\$ 707,963.26	\$ 766,688.12		
Child SED Cost	\$ 188,095.81	\$ 150,604.41	\$ 142,062.84	\$ 175,584.83		
Total	\$ 2,519,243.88	\$2,234,461.84	\$2,146,852.56	\$2,285,707.71	\$ -	\$ -
Adult IDD Cost per consumer	\$ 4,573.53	\$ 4,057.83	\$ 4,241.12	\$ 4,219.52	#DIV/0!	#DIV/0!
Child IDD Cost per consumer	\$ 3,675.14	\$ 3,034.61	\$ 3,391.24	\$ 3,660.31	#DIV/0!	#DIV/0!
Adult SMI Cost per consumer	\$ 1,837.41	\$ 1,576.22	\$ 1,555.96	\$ 1,652.35	#DIV/0!	#DIV/0!
Child SED Cost per consumer	\$ 1,694.56	\$ 1,369.13	\$ 1,340.22	\$ 1,463.21	#DIV/0!	#DIV/0!
Total	\$ 2,703.05	\$ 2,362.01	\$ 2,439.61	\$ 2,509.01	#DIV/0!	#DIV/0!

	FY2025 Monthly Service Information for Crawford County					
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, Clubhouse and Nur	\$ 21,277.25	\$ 20,778.19	\$ 22,469.55	\$ 26,763.17		
Autism Services	\$ 34,638.86	\$ 27,822.31	\$ 24,087.33	\$ 22,331.00		
Case Management, ACT and Treatment Planning	\$ 50,730.48	\$ 44,744.55	\$ 36,445.82	\$ 48,038.00		
Community Living Supports	\$ 339,671.53	\$ 334,981.98	\$ 337,209.61	\$ 288,330.19		
Crisis Services, Assessments and Testing	\$ 16,524.00	\$ 18,663.00	\$ 14,376.00	\$ 20,991.20		
Evaluation and Management Physician Level	\$ 23,618.50	\$ 22,624.87	\$ 18,743.58	\$ 17,606.60		
Psychiatric Inpatient	\$ 36,281.20	\$ 45,282.24	\$ 59,727.66	\$ 24,314.18		
Psychotherapy and Outpatient Services	\$ 23,542.00	\$ 20,281.40	\$ 14,407.36	\$ 18,956.00		
Vocational & Skills Building, Family and Health Services	\$ 3,036.69	\$ 2,454.29	\$ 1,972.52	\$ 2,858.61		
Other	\$ 1,248.00	\$ 1,404.00	\$ 936.00	\$ 624.00		
Total	\$ 550,568.51	\$ 539,036.83	\$ 530,375.43	\$ 470,812.95	\$ -	\$ -
Number of Registered People Receiving Services	172	189	172	158	-	-
Average Cost per Registered Person Served	\$ 3,200.98	\$ 2,852.05	\$ 3,083.58	\$ 2,979.83	#DIV/0!	#DIV/0!
Service Transactions Provided	27,144	25,690	23,608	11,245		
Average Cost per Transaction	\$ 20	\$ 21	\$ 22	\$ 42	#DIV/0!	#DIV/0!
Count of Adult IDD	41	41	42	30		
Count of Child IDD	9	9	10	11		
Count of Adult SMI	101	112	95	94		
Count of Child SED	21	27	25	23		
Total	172	189	172	158	-	-
IDD Adult Cost	\$ 285,323.08	\$ 266,022.58	\$ 255,937.50	\$ 197,299.19		
IDD Child Cost	\$ 68,864.60	\$ 58,278.45	\$ 62,195.55	\$ 67,680.36		
Adult SMI Cost	\$ 166,644.83	\$ 187,415.80	\$ 179,629.38	\$ 174,033.40		
Child SED Cost	\$ 29,736.00	\$ 27,320.00	\$ 32,613.00	\$ 31,800.00		
Total	\$ 550,568.51	\$ 539,036.83	\$ 530,375.43	\$ 470,812.95	\$ -	\$ -
Adult IDD Cost per consumer	\$ 6,959.10	\$ 6,488.36	\$ 6,093.75	\$ 6,576.64	#DIV/0!	#DIV/0!
Child IDD Cost per consumer	\$ 7,651.62	\$ 6,475.38	\$ 6,219.56	\$ 6,152.76	#DIV/0!	#DIV/0!
Adult SMI Cost per consumer	\$ 1,649.95	\$ 1,673.36	\$ 1,890.84	\$ 1,851.42	#DIV/0!	#DIV/0!
Child SED Cost per consumer	\$ 1,416.00	\$ 1,011.85	\$ 1,304.52	\$ 1,382.61	#DIV/0!	#DIV/0!
Total	\$ 3,200.98	\$ 2,852.05	\$ 3,083.58	\$ 2,979.83	#DIV/0!	#DIV/0!

FY2025 Service Information For Leelanau County						
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, Clubhouse and Nursing)	\$ 13,649.72	\$ 14,725.45	\$ 10,882.83	\$ 15,868.42		
Autism Services	\$ 5,093.32	\$ 4,977.24	\$ 5,410.92	\$ 7,800.83		
Case Management, ACT and Treatment Planning	\$ 24,035.42	\$ 22,144.25	\$ 19,078.00	\$ 17,379.88		
Community Living Supports	\$ 156,067.92	\$ 147,071.80	\$ 147,824.39	\$ 148,388.46		
Crisis Services, Assessments and Testing	\$ 14,998.00	\$ 15,414.00	\$ 6,073.00	\$ 4,528.00		
Evaluation and Management Physician Level	\$ 5,572.44	\$ 9,088.18	\$ 5,770.54	\$ 3,524.25		
Psychiatric Inpatient	\$ 12,567.15	\$ 43,581.35	\$ 14,110.32	\$ 17,912.00		
Psychotherapy and Outpatient Services	\$ 11,307.02	\$ 6,786.74	\$ 9,301.18	\$ 4,746.00		
Vocational & Skills Building, Family and Health Services	\$ 7,943.79	\$ 5,873.15	\$ 4,915.89	\$ 8,823.35		
Total	\$ 251,234.78	\$ 269,662.16	\$ 223,367.07	\$ 228,971.19	\$ -	\$ -
Number of Registered People Receiving Services	94	102	92	81	0	0
Average Cost per Registered Person Served	\$ 2,672.71	\$ 2,643.75	\$ 2,427.90	\$ 2,826.80	#DIV/0!	#DIV/0!
Service Transactions Provided	11,861	10,202	10,316	9,944		
Average Cost per Transaction	\$ 21	\$ 26	\$ 22	\$ 23	#DIV/0!	#DIV/0!
Count of Adult IDD	40	37	37	38		
Count of Child IDD	3	4	4	3		
Count of Adult SMI	39	47	40	31		
Count of Child SED	12	14	11	9		
Total	94	102	92	81	0	0
IDD Adult Cost	\$ 172,762.43	\$ 159,874.59	\$ 156,623.35	\$ 158,579.34		
IDD Child Cost	\$ 7,729.32	\$ 23,658.24	\$ 6,814.92	\$ 8,724.83		
Adult SMI Cost	\$ 56,562.03	\$ 74,862.61	\$ 49,284.62	\$ 42,074.02		
Child SED Cost	\$ 14,181.00	\$ 11,266.72	\$ 10,644.18	\$ 19,593.00		
Total	\$ 251,234.78	\$ 269,662.16	\$ 223,367.07	\$ 228,971.19	\$ -	\$ -
Adult IDD Cost per consumer	\$ 4,319.06	\$ 4,320.93	\$ 4,233.06	\$ 4,173.14	#DIV/0!	#DIV/0!
Child IDD Cost per consumer	\$ 2,576.44	\$ 5,914.56	\$ 1,703.73	\$ 2,908.28	#DIV/0!	#DIV/0!
Adult SMI Cost per consumer	\$ 1,450.31	\$ 1,592.82	\$ 1,232.12	\$ 1,357.23	#DIV/0!	#DIV/0!
Child SED Cost per consumer	\$ 1,181.75	\$ 804.77	\$ 967.65	\$ 2,177.00	#DIV/0!	#DIV/0!
Total	\$ 2,672.71	\$ 2,643.75	\$ 2,427.90	\$ 2,826.80	#DIV/0!	#DIV/0!

FY2025 Service Information For Missaukee County						
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, Clubhouse and Nursi	\$ 23,179.01	\$ 20,895.68	\$ 18,121.01	\$ 24,346.45		
Autism Services	\$ 15,587.10	\$ 10,275.49	\$ 9,894.07	\$ 18,687.52		
Case Management, ACT and Treatment Planning	\$ 27,298.67	\$ 22,117.63	\$ 22,281.39	\$ 22,616.38		
Community Living Supports	\$ 421,478.16	\$401,597.57	\$ 408,184.03	\$ 417,576.85		
Crisis Services, Assessments and Testing	\$ 11,419.00	\$ 10,984.00	\$ 14,725.20	\$ 3,775.00		
Evaluation and Management Physician Level	\$ 11,762.71	\$ 11,931.29	\$ 11,464.90	\$ 7,891.00		
Psychiatric Inpatient	\$ 9,124.20	\$ 33,352.00	\$ 23,110.32	\$ 13,745.35		
Psychotherapy and Outpatient Services	\$ 17,152.90	\$ 11,207.68	\$ 10,704.28	\$ 15,374.00		
Vocational & Skills Building, Family and Health Services	\$ 17,968.16	\$ 16,115.51	\$ 13,025.94	\$ 17,921.68		
Other	\$ 3,567.33	\$ 2,141.64	\$ 1,950.00	\$ 2,853.11		
Total	\$ 558,537.24	\$540,618.49	\$ 533,461.14	\$ 544,787.34	\$ -	\$ -
Number of Registered People Receiving Services	126	128	124	106	-	-
Average Cost per Registered Person Served	\$ 4,432.84	\$ 4,223.58	\$ 4,302.11	\$ 5,139.50	#DIV/0!	#DIV/0!
Service Transactions Provided	27,267	24,312	24,003	25,135		
Average Cost per Transaction	\$ 20	\$ 22	\$ 22	\$ 22	#DIV/0!	#DIV/0!
Count of Adult IDD	46	45	43	44		
Count of Child IDD	14	11	10	11		
Count of Adult SMI	45	53	56	31		
Count of Child SED	21	19	15	20		
Total	126	128	124	106	-	-
IDD Adult Cost	\$ 394,361.50	\$368,320.08	\$ 368,366.35	\$ 386,373.08		
IDD Child Cost	\$ 29,612.64	\$ 18,357.02	\$ 17,663.21	\$ 24,346.50		
Adult SMI Cost	\$ 110,835.10	\$130,193.89	\$ 132,519.58	\$ 109,522.76		
Child SED Cost	\$ 23,728.00	\$ 23,747.50	\$ 14,912.00	\$ 24,545.00		
Total	\$ 558,537.24	\$540,618.49	\$ 533,461.14	\$ 544,787.34	\$ -	\$ -
Adult IDD Cost per consumer	\$ 8,573.08	\$ 8,184.89	\$ 8,566.66	\$ 8,781.21	#DIV/0!	#DIV/0!
Child IDD Cost per consumer	\$ 2,115.19	\$ 1,668.82	\$ 1,766.32	\$ 2,213.32	#DIV/0!	#DIV/0!
Adult SMI Cost per consumer	\$ 2,463.00	\$ 2,456.49	\$ 2,366.42	\$ 3,532.99	#DIV/0!	#DIV/0!
Child SED Cost per consumer	\$ 1,129.90	\$ 1,249.87	\$ 994.13	\$ 1,227.25	#DIV/0!	#DIV/0!
Total	\$ 4,432.84	\$ 4,223.58	\$ 4,302.11	\$ 5,139.50	#DIV/0!	#DIV/0!

FY2025 Service Information for Roscommon County						
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, C	\$ 40,150.08	\$ 38,283.68	\$ 42,613.50	\$ 39,219.35		
Autism Services	\$ 6,402.63	\$ 11,071.40	\$ 21,208.57	\$ 23,361.72		
Case Management, ACT and Treatment Planning	\$ 69,558.61	\$ 68,771.84	\$ 59,085.27	\$ 70,464.84		
Community Living Supports	\$450,609.17	\$455,030.70	\$457,750.23	\$430,093.44		
Crisis Services, Assessments and Testing	\$ 33,226.44	\$ 21,118.20	\$ 18,550.00	\$ 9,897.00		
Evaluation and Management Physician Level	\$ 41,446.15	\$ 38,638.96	\$ 33,706.28	\$ 27,499.83		
Psychiatric Inpatient	\$140,370.07	\$ 80,982.40	\$ 32,076.81	\$ 17,540.90		
Psychotherapy and Outpatient Services	\$ 62,859.30	\$ 63,618.00	\$ 52,034.40	\$ 65,080.84		
Vocational & Skills Building, Family and Health Services	\$ 12,406.31	\$ 10,296.30	\$ 7,278.28	\$ 9,223.65		
Other	\$ 1,301.10	\$ 1,875.30	\$ 1,146.99	\$ 3,432.00		
Total	\$858,329.86	\$789,686.78	\$725,450.33	\$695,813.57	\$ -	\$ -
Number of Registered People Receiving Services	304	308	304	268	-	-
Average Cost per Registered Person Served	\$ 2,823.45	\$ 2,563.92	\$ 2,386.35	\$ 2,596.32	#####	#####
Service Transactions Provided	23,700	22,032	21,200	15,382		
Average Cost per Transaction	\$ 36	\$ 36	\$ 34	\$ 45	#####	#####
Count of Adult IDD	68	69	70	56		
Count of Child IDD	22	24	19	19		
Count of Adult SMI	159	159	167	139		
Count of Child SED	55	56	48	54		
Total	304	308	304	268	-	-
IDD Adult Cost	\$383,986.91	\$361,711.15	\$357,059.24	\$329,575.25		
IDD Child Cost	\$ 55,693.35	\$ 30,871.62	\$ 37,708.41	\$ 45,182.32		
Adult SMI Cost	\$334,730.82	\$296,893.37	\$277,386.98	\$253,694.00		
Child SED Cost	\$ 83,918.78	\$100,210.64	\$ 53,295.70	\$ 67,362.00		
Total	\$858,329.86	\$789,686.78	\$725,450.33	\$695,813.57	\$ -	\$ -
Adult IDD Cost per consumer	\$ 5,646.87	\$ 5,242.19	\$ 5,100.85	\$ 5,885.27	#####	#####
Child IDD Cost per consumer	\$ 2,531.52	\$ 1,286.32	\$ 1,984.65	\$ 2,378.02	#####	#####
Adult SMI Cost per consumer	\$ 2,105.23	\$ 1,867.25	\$ 1,661.00	\$ 1,825.14	#####	#####
Child SED Cost per consumer	\$ 1,525.80	\$ 1,789.48	\$ 1,110.33	\$ 1,247.44	#####	#####
Total	\$ 2,823.45	\$ 2,563.92	\$ 2,386.35	\$ 2,596.32	#####	#####

	FY2025 Service Information for Wexford County					
Area of Service	October	November	December	January	February	March
Additional Supports (Homebased, Respite, Residential, Club)	\$ 138,522.89	\$ 120,547.63	\$ 97,581.37	\$ 102,556.26		
Autism Services	\$ 78,788.42	\$ 74,650.73	\$ 61,525.90	\$ 72,967.53		
Case Management, ACT and Treatment Planning	\$ 131,357.41	\$ 116,788.32	\$ 102,313.02	\$ 119,657.58		
Community Living Supports	\$ 818,399.34	\$ 782,364.37	\$ 808,671.68	\$ 791,071.69		
Crisis Services, Assessments and Testing	\$ 43,319.57	\$ 52,106.20	\$ 35,645.00	\$ 40,302.28		
Evaluation and Management Physician Level	\$ 74,095.03	\$ 59,678.56	\$ 51,384.57	\$ 44,052.00		
Psychiatric Inpatient	\$ 146,856.67	\$ 147,434.44	\$ 97,420.55	\$ 60,259.85		
Psychotherapy and Outpatient Services	\$ 98,354.70	\$ 76,304.99	\$ 63,905.14	\$ 98,486.00		
Vocational & Skills Building, Family and Health Services	\$ 63,121.41	\$ 53,676.43	\$ 48,048.71	\$ 64,903.60		
Other	\$ 10,239.60	\$ 8,257.93	\$ 6,156.61	\$ 7,609.29		
Total	\$1,603,055.04	\$ 1,491,809.60	\$1,372,652.55	\$1,401,866.08	\$ -	\$ -
Number of Registered People Receiving Services	555	548	495	504	-	-
Average Cost per Registered Person Served	\$ 2,888.39	\$ 2,722.28	\$ 2,773.04	\$ 2,781.48	#DIV/0!	#####
Service Transactions Provided	58,629	51,520	50,732	52,763		
Average Cost per Transaction	\$ 27	\$ 29	\$ 27	\$ 27	#DIV/0!	#####
Count of Adult IDD	124	122	119	122		
Count of Child IDD	55	59	51	54		
Count of Adult SMI	272	253	229	227		
Count of Child SED	104	114	96	101		
Total	555	548	495	504	-	-
IDD Adult Cost	\$ 760,274.72	\$ 717,230.02	\$ 733,954.15	\$ 732,878.11		
IDD Child Cost	\$ 121,412.24	\$ 148,838.64	\$ 101,127.14	\$ 110,031.19		
Adult SMI Cost	\$ 568,699.21	\$ 505,234.60	\$ 466,603.18	\$ 429,690.53		
Child SED Cost	\$ 152,668.87	\$ 120,506.34	\$ 70,968.08	\$ 129,266.25		
Total	\$1,603,055.04	\$ 1,491,809.60	\$1,372,652.55	\$1,401,866.08	\$ -	\$ -
Adult IDD Cost per consumer	\$ 6,131.25	\$ 5,878.93	\$ 6,167.68	\$ 6,007.20	#DIV/0!	#####
Child IDD Cost per consumer	\$ 2,207.50	\$ 2,522.69	\$ 1,982.89	\$ 2,037.61	#DIV/0!	#####
Adult SMI Cost per consumer	\$ 2,090.81	\$ 1,996.97	\$ 2,037.57	\$ 1,892.91	#DIV/0!	#####
Child SED Cost per consumer	\$ 1,467.97	\$ 1,057.07	\$ 739.25	\$ 1,279.86	#DIV/0!	#####
Total	\$ 2,888.39	\$ 2,722.28	\$ 2,773.04	\$ 2,781.48	#DIV/0!	#####

https://www.record-eagle.com/news/at-issue-medicaid-debunking-common-assumptions-about-this-health-insurance/article_903463c8-f0be-11ef-963b-77651c8799b1.html

AT ISSUE: MEDICAID — Debunking common assumptions about this health insurance

- By Kate Dahlstrom
- Feb 23, 2025

People need to understand what Medicaid is: First and foremost, it is health insurance for very low-income adults and children.

In Michigan, 2 out of every 5 children receive health care, thanks to Medicaid. In 2024, 2.6 million Michiganders were covered, with 36% of them youth from ages 0-18.

It is a jointly funded federal and state program administered by states within broad federal guidelines. No two states are alike in what, who, and how much they cover.

The federal match rate for most Medicaid enrollees is at least 50%, but can be up to 90%, with a higher federal match rate for states with lower per capita income. Within the Michigan Health and Human Services (MDHHS) budget, the Medicaid program totals approximately \$24 billion. Of this, about \$18.5 billion is covered by the federal government, and \$5.5 billion is state funding.

Even though most adult Medicaid enrollees are working, many of those working do not have employer-sponsored health insurance coverage, or it is not affordable. (Maybe something should be done so that employers provide insurance to more employees and/or make it more affordable.)

Medicaid also covers long-term care, including nursing home care and community-based services for very low-income senior citizens and disabled persons who cannot attend to their own basic needs. These folks account for one in five enrollees, but account for more than half of Medicaid spending, reflecting high health-care needs. Think about this: Many of these elderly likely worked their entire life, but were unable to save for the enormous expense of long-term elder care. Farmers are in this group.

Here's what Medicaid is not – and this is where many folks get it wrong: Medicaid is not a living allowance to be used for food, housing, entertainment or other expenses. It is not a monetary stipend or like collecting unemployment, Social Security or disability benefits. It is primarily health (and now dental) insurance.

Some legislators want to impose a work requirement as part of Medicaid. The Congressional Budget Office disclosed in a recent study that programs with a work requirement would have no impact on work. Undoubtedly that's because most Medicaid beneficiaries are already working or exempt for other reasons (either caring for a family member, in school, seriously mentally ill or disabled, etc.) or they are typically in jobs that don't provide health benefits. Mostly what these programs do is force beneficiaries to go through lots of red tape to prove they are working or are exempt. Add that to the need for the state to hire staff to review the endless red tape.

As far as fraud, it is apparent that significant fraud occurs at the "provider" level for Medicaid, rather than the recipient level. Government sources say, for Medicaid and Medicare, the "estimated annual fraud tops \$100 billion, but investigators say it's likely much higher." A common type of Medicaid or health care fraud scheme is billing for a treatment or procedure never provided – such as X-rays, laboratory tests, or drugs that were never dispensed. Fraudulent providers also "upcode" various medical procedures.

If the federal government cuts Medicaid, states will suffer. Much of the lost federal funding will likely result in cuts to state programs. Without health and dental care, work absences will likely increase. The uninsured will wait until they're really sick and show up in hospital emergency rooms, so hospitals will be impacted. The number of persons with untreated mental illness and substance use disorder will likely increase. Overall, we can expect to see a less healthy population.

If you have evidence of Medicare or Medicaid fraud, report that information to the government. In return, the government will pay you a reward of between 15% and 30% of the amount of money it recovers. And advocate for going after the provider fraud while continuing the federal and state funding.

Phone calls and email can help make a difference.

Kate Dahlstrom is a retired CPA, environmental steward and active parent-advocate for better mental health services and facilities for Northern Michigan, in particular. She serves as the current president of the board of NAMI-GT (National Alliance on Mental Illness) and on the board of Before, During and After Incarceration (BDAI).

<https://www.upnorthvoice.com/business/roscommon-business/2025/03/roscommon-seeks-authority-board-member/>

Roscommon seeks authority board member

By [Mark Constance](#) March 4, 2025

ROSCOMMON COUNTY – Roscommon County is searching for a primary consumers or family member of a primary consumer of services provided by Northern Lakes Community Mental Health to serve as an Authority Board Member on behalf of the county.

If you or your family member are or have been a consumer of services from this organization, we would encourage you to apply!

Special Requirements

MUST be a primary consumers or family member of a primary consumer of services provided by Northern Lakes Community Mental Health

Miscellaneous Information

Interested parties may contact Administrator/Controller Jodi Valentino at valentinoj@roscommoncounty.net or via telephone at 989-275-7861 for more information and application instructions.

Application deadline is prior to 4:30 p.m. Thursday, March 20.

#

Northern Lakes CMH

January 2025

Preliminary
Board Report

Northern Lakes CMH

Summary of Variances and Fluctuations

October 1, 2024 through January 31, 2025

II. Operating revenue

- **Medicaid Capitation** - Estimated Medicaid expenses are approximately **\$2.2M MORE** than the capitated payments received from NMRE resulting in a current **OVERSPEND**.
- **Healthy Michigan Capitation** - Estimated Healthy Michigan expenses are approximately **\$1.2M GREATER** than the capitated payments received from NMRE resulting in an **OVERSPEND**.
- **General Fund Capitation** - Estimated expenses are approximately **\$965k MORE** than the capitated payments received resulting in an **OVERSPEND**.
- **Grant Revenues** - Grant revenues and expenses are tracking as expected.

IV. Operating expenses

- **Salaries, wages and fringes** - Salaries and fringes are approximately \$700k under budget. Total directly operated expenses are about \$800k under budget through January.
- **CMH Provider Network Contractual Services** - are about \$1.7M over budget through January. Mostly driven by residential contracts.

Northern Lakes CMH

Statement of Revenues, Expenses compared to Budget

October 1, 2024 through January 31, 2025

	(Unaudited) 1/31 2025	YTD Budget 1/31 2025	Favorable (Unfavorable)
Revenues			
Medicaid Sources			
Medicaid	\$ 20,940,303	\$ 21,591,647	\$ (651,344)
Medicaid - Settlement	2,257,432	-	2,257,432
	<u>23,197,735</u>	<u>21,591,647</u>	<u>1,606,088</u>
Healthy Michigan	1,690,249	1,369,028	321,221
Healthy Michigan - Settlement	1,221,480	-	1,221,480
	<u>2,911,729</u>	<u>1,369,028</u>	<u>1,542,701</u>
State General Fund	968,496	968,496	0
Grants	297,619	748,885	(451,266)
County appropriations	342,247	342,247	0
Northern Healthcare Management	22,852	-	22,852
Other revenue	674,652	1,075,148	(400,496)
Total operating revenue	<u>28,415,330</u>	<u>26,095,450</u>	<u>2,319,880</u>
Employed Workforce and Agency Expenditures			
Personnel	9,221,641	9,998,336	(776,695)
Admin Contracts	517,110	524,053	(6,943)
Direct Operations	1,059,368	1,071,246	(11,879)
Contractual Services	395,185	319,231	75,954
Transportation	172,212	347,218	(175,006)
Occupied Space	538,937	472,502	66,436
Total Directly Provided & Agency Oversight	<u>11,904,453</u>	<u>12,732,586</u>	<u>(828,133)</u>
Contracted Provider Expenditures			
Autism Services Providers	1,145,877	1,352,751	(206,874)
Clinical Contract Providers	782,066	767,479	14,587
Daytime Activities Contract Providers	2,396,992	1,997,858	399,135
FI Provided Self Determination	589,594	655,092	(65,498)
Inpatient Services	2,302,385	2,385,333	(82,948)
Therapeutic Contract Providers	102,737	143,089	(40,351)
Residential Contracts	8,697,477	7,032,656	1,664,821
CLS Providers	1,077,372	1,082,430	(5,058)
Northern Health Care Mgt Services	(17,103)	11,302	(28,405)
Northern Health Care Mgt Respite	-	-	-
Client Transportation Providers	313,489	213,675	99,814
Total Contracted Provider Expenditure	<u>17,390,887</u>	<u>15,641,665</u>	<u>1,749,222</u>
Total operating expenses	29,295,339	28,374,251	921,088
Change in net position	<u>(880,009)</u>	<u>(2,278,801)</u>	<u>1,398,792</u>

This financial report is for internal use only. It has not been audited, and no assurance is provided

Northern Lakes CMH

Summary of Provider Network Contract Activity

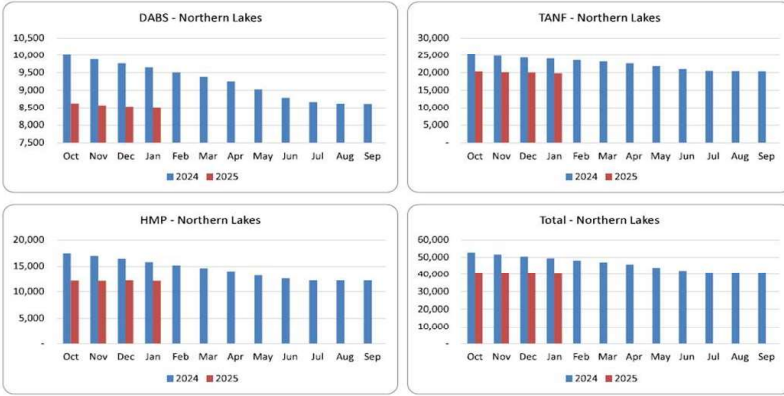
October 1, 2024 through January 31, 2025

Provider Network Category	YTD Budget 1/31/2025	YTD 1/31/2025	Budget to Actual Inc/(Dec)	YTD 1/31/2024	Variance from PY Inc/(Dec)	% Change
Houghton Lake Drop In - Drop In Centers	\$ -	\$ -	\$ -	\$ 36,000	\$ (36,000)	(100.00)%
Kandu Island - Drop In Centers	\$ 63,667	\$ 63,667	\$ -	\$ 48,141	\$ 15,526	32.25 %
Contracted Clinical Services - OBRA Screening	\$ -	\$ -	\$ -	\$ 36,455	\$ (36,455)	(100.00)%
Contracted Clinical Services - Behavior Treatment	\$ 73,188	\$ 73,188	\$ -	\$ 52,325	\$ 20,863	39.87 %
Client Specific Contract - Partial Day	\$ 72,577	\$ 72,577	\$ -	\$ 49,136	\$ 23,441	47.71 %
Client Specific Contract - Residential	\$ 61,863	\$ 61,863	\$ -	\$ 81,447	\$ (19,584)	(24.05)%
Client Specific Contract - MCTT & ACT Teams	\$ 15,782	\$ 15,782	\$ -	\$ 10,892	\$ 4,890	44.89 %
Client Specific Contract - Emgcy Serv/Outpatient	\$ 446	\$ 446	\$ -	\$ 4,659	\$ (4,213)	(90.42)%
Client Specific Contract - DD CSM Team	\$ 208	\$ 208	\$ -	\$ 3,857	\$ (3,649)	(94.62)%
Client Specific Contract - Managed Care	\$ -	\$ -	\$ -	\$ 88	\$ (88)	100.00 %
Client Specific Contract - Club Cadillac	\$ 109	\$ 109	\$ -	\$ 17,010	\$ (16,901)	100.00 %
Contr Psych's - Med Clinic	\$ 767,479	\$ 377,194	\$ -	\$ 287,716	\$ 89,478	31.10 %
Client Transportation - Partial Day	\$ 213,675	\$ 224,341	\$ -	\$ 188,291	\$ 36,050	19.15 %
Total Clinical Contract Providers (less grant activity)	\$ 981,155	\$ 889,374	\$ (91,781)	\$ 816,017	\$ 73,357	8.99 %
Autism Services - Partial Day	\$ 1,013,930	\$ 1,013,930	\$ -	\$ 996,067	\$ 17,863	1.79 %
Autism Services - Residential	\$ 119,469	\$ 119,469	\$ -	\$ 87,747	\$ 31,722	36.15 %
Autism Services - Emgcy Serv/Outpatient	\$ 1,326	\$ 1,326	\$ -	\$ 3,580	\$ (2,254)	(62.96)%
Autism Services - DD CSM Team	\$ 11,152	\$ 11,152	\$ -	\$ 22,248	\$ (11,096)	(49.87)%
Total Autism Providers	\$ 1,352,751	\$ 1,145,877	\$ (206,874)	\$ 1,109,642	\$ 36,235	(74.89)%
Hope Network - Partial Day	\$ 276,318	\$ 276,318	\$ -	\$ 268,195	\$ 8,122	3.03 %
Hope Network - Residential	\$ 779,894	\$ 779,894	\$ -	\$ 791,788	\$ (11,895)	(1.50)%
Hope Network - MCTT & ACT Teams	\$ 4,533	\$ 4,533	\$ -	\$ 3,894	\$ 639	16.41 %
Hope Network - Emgcy Serv/Outpatient	\$ 974	\$ 974	\$ -	\$ 1,088	\$ (113)	(10.42)%
Hope Network - DD CSM Team	\$ 384	\$ 384	\$ -	\$ 415	\$ (30)	100.00 %
Hope Network - PT/OT/ST Only	\$ 318	\$ 318	\$ -	\$ 303	\$ 15	100.00 %
R.O.O.C. Inc - Partial Day	\$ 8,949	\$ 8,949	\$ -	\$ 11,450	\$ (2,501)	(21.84)%
R.O.O.C. Inc - Residential	\$ 137,816	\$ 137,816	\$ -	\$ 153,420	\$ (15,604)	(10.17)%
Grand Traverse Industries - Partial Day	\$ 233,338	\$ 233,338	\$ -	\$ 236,129	\$ (2,792)	(1.18)%
Grand Traverse Industries - Residential	\$ 954,468	\$ 954,468	\$ -	\$ 431,104	\$ 523,365	121.40 %
Total Daytime Providers	\$ 1,997,858	\$ 2,396,992	\$ 399,135	\$ 1,897,786	\$ 499,206	88.21 %
Community Inpatient Hospital - Inpatient	\$ 2,097,814	\$ 2,097,814	\$ -	\$ 1,725,019	\$ 372,795	21.61 %
Crisis Residential - Residential	\$ 64,515	\$ 64,515	\$ -	\$ (125,934)	\$ 190,450	(151.23)%
County - State Fac - Inpatient - State	\$ 104,989	\$ 104,989	\$ -	\$ 91,817	\$ 13,171	14.34 %
County - Forensic Ctr - Inpatient - State	\$ 35,067	\$ 35,067	\$ -	\$ 2,000	\$ 33,067	1,653.34 %
Total Inpatient Providers / State Hospital Inpatient	\$ 2,385,333	\$ 2,302,385	\$ (82,948)	\$ 1,692,902	\$ 609,483	1,538.07 %
Self Determination - Residential	\$ 567,787	\$ 567,787	\$ -	\$ 431,965	\$ 135,822	31.44 %
Self Determination - DD CSM Team	\$ 21,807	\$ 21,807	\$ -	\$ 19,713	\$ 2,094	10.62 %
Total Fiscal Intermediary Providers	\$ 655,092	\$ 589,594	\$ (65,498)	\$ 451,677	\$ 137,916	1,580.13 %
Child and Family Services - MIC Client Support Service	\$ 20,511	\$ 20,511	\$ -	\$ 76,851	\$ (56,340)	(73.31)%
Child and Family Services - Residential	\$ 2,368	\$ 2,368	\$ -	\$ 296	\$ 2,072	100.00 %
Child and Family Services - Mobile Crisis	\$ 79,858	\$ 79,858	\$ -	\$ 60,405	\$ 19,453	32.20 %
Total Fiscal Intermediary Providers	\$ 143,089	\$ 102,737	\$ (40,351)	\$ 137,552	\$ (34,815)	58.89 %
M.I. Residential Contracts - Residential	\$ 366,270	\$ 366,270	\$ -	\$ 365,726	\$ 544	0.15 %
Residential Contracts - Residential	\$ 5,660,877	\$ 5,660,877	\$ -	\$ 2,649,499	\$ 3,011,378	113.66 %
Beacon Specialized Living Center - Residential	\$ 1,494,433	\$ 1,494,433	\$ -	\$ 878,054	\$ 616,379	70.20 %
Beacon Specialized Living Center - MCTT & ACT Teams	\$ -	\$ -	\$ -	\$ 3,024	\$ (3,024)	(100.00)%
Beacon Specialized Living Center - Emgcy Serv/Outpatient	\$ 230	\$ 230	\$ -	\$ 1,555	\$ (1,325)	(85.21)%
Beacon Specialized Living Center - Behavior Treatment	\$ -	\$ -	\$ -	\$ 270	\$ (270)	(100.00)%
Lake Shore - Residential	\$ 49,340	\$ 49,340	\$ -	\$ 164,110	\$ (114,771)	(69.94)%
Summerfield - Residential	\$ 148,302	\$ 148,302	\$ -	\$ 145,669	\$ 2,633	1.81 %
East Bay - Residential	\$ 117,279	\$ 117,279	\$ -	\$ 105,142	\$ 12,138	11.54 %
Lincoln House - Residential	\$ 100,068	\$ 100,068	\$ -	\$ 106,907	\$ (6,839)	(6.40)%
Fort Road - Residential	\$ 89,698	\$ 89,698	\$ -	\$ 86,682	\$ 3,016	3.48 %
New Horizons - Residential	\$ 117,687	\$ 117,687	\$ -	\$ 143,589	\$ (25,903)	(18.04)%
Elmwood - Residential	\$ 125,274	\$ 125,274	\$ -	\$ 120,078	\$ 5,196	4.33 %
Cedar Valley Home - Residential	\$ 85,467	\$ 85,467	\$ -	\$ 78,332	\$ 7,135	9.11 %
Hab Waiver Supports - Residential	\$ 299,344	\$ 299,344	\$ -	\$ 275,172	\$ 24,173	8.78 %
Hab Waiver Supports - SIP Homes	\$ 42,804	\$ 42,804	\$ -	\$ 32,016	\$ 10,788	33.70 %
Total Residential Providers	\$ 7,032,656	\$ 8,697,072	\$ 1,664,416	\$ 5,155,824	\$ 3,541,248	68.68 %
Community Living Supports - Partial Day	\$ 13,647	\$ 13,647	\$ -	\$ 20,633	\$ (6,986)	(33.86)%
Community Living Supports - Residential	\$ 677,532	\$ 677,532	\$ -	\$ 385,855	\$ 291,677	75.59 %
Community Living Supports - MCTT & ACT Teams	\$ -	\$ -	\$ -	\$ 405	\$ (405)	(100.00)%
MI Independent SIP - SIP Homes	\$ 46,218	\$ 46,218	\$ -	\$ 40,927	\$ 5,291	12.93 %
MI Independent SIP - SIP Homes	\$ 69,064	\$ 69,064	\$ -	\$ 38,872	\$ 30,192	77.67 %
MI Independent SIP - SIP Homes	\$ 47,415	\$ 47,415	\$ -	\$ 22,781	\$ 24,634	108.13 %
Spectrum SIP - SIP Homes	\$ 76,696	\$ 76,696	\$ -	\$ 48,990	\$ 27,705	56.55 %
Spectrum SIP - SIP Homes	\$ 74,385	\$ 74,385	\$ -	\$ 52,646	\$ 21,739	41.29 %
Spectrum SIP - SIP Homes	\$ 29,611	\$ 29,611	\$ -	\$ 51,632	\$ (22,022)	(42.65)%
Woodland TC Home - SIP Homes	\$ 42,804	\$ 42,804	\$ -	\$ 36,076	\$ 6,728	18.65 %
Brickways - Residential	\$ -	\$ -	\$ -	\$ 49,289	\$ (49,289)	(100.00)%
Total CLS Providers	\$ 1,082,430	\$ 1,077,372	\$ (5,058)	\$ 748,108	\$ 44,979	6.01 %
	\$ 15,630,363	\$ 17,201,403	\$ 1,571,040	\$ 12,009,509	\$ 4,907,609	40.86 %

Prior year figures do not include accrual for unreported services

This financial report is for internal use only. It has not been audited, and no assurance is provided.

Northern Lakes Eligible Members Trending - based on payment files



QI & Compliance Highlights Board Meeting 3/20/25

Quality Improvement

- iSPA Waiver enrollments/re-enrollments continue to be complete. This is a mandated waiver for all who are eligible.
- CARF review August 2024 was conducted, we received a one year accreditation and are in preparation for our August 2025 review. The agency purchased Risk mgt software that will allow us to fully integrate Risk, compliance, and UM across the agency which was a CARF recommendation.

Compliance

- All Exclusionary reporting has been concluded with no negative results.
- The Medicaid Encounter Verification audit has been successful each quarter.
- Staff credentialing has been completed according to standards. We are about to begin credentialing in the MDHHS mandated CRM website.

Customer Service

- Of the 129 grievances received, 121 were requests for change of providers, that weren't necessarily negative in nature.
- An increase in requests for disclosure of information have been received and reception is keeping up and getting them out on time.
- There were 132 attempts made to contact individuals post-discharge for feedback, only 4 were reached and were willing to provide feedback.

Below you will find the entire review for Quality, Compliance, and Customer Service.

Performance Measurement & Improvement Annual Report 2024

Preface: During our August 2024 CARF Review, we were made aware that our Annual Agency plans were not meeting requirements because they did not cover the entire agency in an integrated format. Since that review, we have acquired new software that will allow us to have fully integrated PM&PI, Risk Mgt, Quality, and UM plans. This will go live 4/1/25, so for now we continue to reflect our PM&PI in the format below.

Accomplishment of the Board of Director's Ends will be promoted by having services grounded on accessible and culturally competent services, evidenced-based practices, consumer choice, a commitment to recovery and reintegration, resilience, empowerment, and independence. A cornerstone is our commitment to excellence in person/family centered planning and services. We will utilize the most objective data available and a variety of methods to measure the degree of achievement of our Ends and will do so consistent with the MDHHS Quality Improvement Performance Indicators (measures), satisfaction surveys, third party perspectives regarding our performance such as audits and Medicaid Encounter Verification, and other locally adopted measures.

Accomplishments-Quality Improvement:

Performance improvement committees: Our focus on specific areas of agency function with a smaller group (Quality Comm., Risk Comm., UM Comm., Compliance Comm.) has been more beneficial in engaging staff other than executive Leadership. Each of the groups are meeting every 4 months and are drilling down on areas of service for the purpose of identifying needed changes and then acting on improvement efforts. This year the UM group began reviewing high cost authorizations for medical necessity.

HSW (Home & Community Based Waiver) SEDW (Serious Emotional Disturbance Waiver) and CWP (Child Waiver Program): The annual MDHHS Waiver reviews were conducted in the spring of 2023, receiving feedback about the strengths of several areas such as assessment, person-centeredness, family involvement, as well as recommendations that were addressed in a corrective action plan (CAP). Credentialing of staff, given the continual changes in requirements, have been challenging as well as the Financial Mgt groups assisting with self-determination requiring attestations only for proof of training. We contacted those groups and reinforced the need for proof of training completion.

CARF: We began preparing for our CARF survey May of 2024. The system to collection documentation was set up and organized, manuals were provided to appropriate teams, meetings were facilitated and assignments given. Application for the survey was made

on 11/30/23. We received a one year accreditation, based on consistency issues as well as the lack of an agency-wide integrated Risk management plan. Concerns that we've been granted 3 yr accreditations with the same processes in place apparently due to CARF surveyor's lack of knowledge in previous reviews. We have however worked diligently to ensure that we now have an integrated plan that we're really excited about.

NMRE Quality Indicators:

Telehealth's effect on No-Shows: There was a significant (11%) decrease the no-show rate for psychiatric services with the use of telehealth services during and after the Public Health Emergency. This trend continues and most consumers now prefer to participate in virtual services. This choice and justification for services are being documented in the client record.

Decrease in Hospitalization due to BHH: Behavioral Health Home saw a significant reduction of the number of Emergency Room visits and Hospital admissions due to medical conditions in individuals that were receiving BHH(CHAT) services. They also report instances in which serious medical conditions were identified and addressed due to the BHH intervention. The BHH continues to expand and providing support services to individuals with co-morbidities.

Works in Progress-Quality Improvement

QI Campaign: An additional FTE on the QI and Compliance team will allow us to invest time in planning a week-long campaign to celebrate and reinforce quality, in the services delivered and the work that supports it. The Quality and Compliance newsletter is allowing us the opportunity to continue to reach staff and reinforce those standards as we continue to strive to build a culture of integrity. As of 2024 we are also adding a CARF section to the monthly NOW employee newsletter in an effort to engage staff in continuous exposure to CARF standards.

Satisfaction: In the Spring of 2024, the NMRE conducted their annual satisfaction survey, and for the first time it included individuals with IDD and their families, so we discontinued the phone survey that was being utilized in the absence of another measure. Effective fall of 2024, we embedded a 3 question satisfaction survey in the IPOS/treatment plan. This mandatory field will assure that we receive continuous feedback from all individuals receiving services.

Crisis Residential Unit: Munson Medical Center and Northern Lakes have partnered together and launched a CRU in Traverse City, this unit will serve both adults and children, provide residential beds as well as walk in crisis service, and screens for inpatient hospitalization. This will be a boost to the local community and hopefully

reduce the number of individuals that have waited in the ED for an extended time without an available placement.

iSPA Waiver: Annual iSPA re-enrollments and some disenrollments of individuals no longer eligible are taking place routinely. This “waiver” requires all eligible individuals to be enrolled, there is no consent for participation and there is no additional funds attached, we are now enrolling children as well.

Accomplishments-Compliance:

MEV: Medicaid Encounter Verification (MEV) audits have been conducted for the by a third party during the last fiscal year and were met requirements.

Virtual Compliance & Ethics training: Is being conducted quarterly, with good turnout. This training is in addition to the annual mandatory Relias Compliance training modules and is part of our ongoing efforts towards a Culture of Integrity. In January of 2024, we will began offering 2CEUs for SW Ethics.

Agency Plans: All written agency plans (Quality, Regulatory Compliance, UM, Management, Risk Management, Accessibility, Cultural Diversity were reviewed and updated as required for FY2024.

Newsletter: The Quality & Compliance Newsletter is a quarterly one-page publication that highlights the things that are going well and reinforces areas that need attention in an engaging way. Its purpose is to highlight our shared responsibility to guard against fraud, waste and abuse of Medicaid funds and the improvement of services.

Performance Indicators: We have struggled getting children with SED in for 1st appointment within 14 days and recidivism is up a bit as well. Post-pandemic we’ve found ourselves challenged with the 7day post-discharge from hospital Indicator as staff have continued to utilized phone calls, we are re-training that face-to-face contacts are now required again.

The Clinical Record Review: Due to external demands on the QI team, our clinical record review was not completed in 4th quarter this year. There is a plan in place for improvement and meeting the requirement.

Professional Credentialing: All new hires are credentialed at the time of hire and all individuals who were due, have been re-credentialed. We follow the same process for unlicensed individuals such as peers and QIDP, QMHP qualified staff members. MDHHS is now requiring that credentialing be completed in there CRM online platform, so we will be running both processes until we see good results in the CRM. Credentialing of

Professional staff allows them to bill for services being provided, it is a mandated requirement with time limits, so it is critical to the agency's good standing.

Exclusionary Reporting: All monthly checks have been clear, with no employees or contract providers having Medicaid sanctions.

Additional Staffing: Additional positions have been added to the team as part of our ability to meet the needs of the agency, a full time compliance specialist who will focus on Medicaid verification across our provider network and an audit coordinator who will serve as point person and facilitator for the many audits and data submission we complete.

Accomplishments - Customer Service:

- There were 26 Second Opinions requested, with 25 being completed and 1 being withdrawn. Of those 25, the initial decision was upheld 21 times (84%) and overturned 7 times (50%).
- There were 30 Local Appeals requested with 26 being completed and 4 being withdrawn. Of those 26, the initial action was upheld 19 times (73%) and overturned 6 times (32%).
- There were 0 Administrative/Fair Hearing decisions.
- 50 Customer Service Inquiries were received and resolved.
- 129 Grievances were received. Of those, 121 (94%) were requests for a Change of Provider.
- Accommodations were requested and provided 976 times.
- Review of documentation to ensure accurate, updated, and relevant information presented to persons served, including guidelines for Mediation.
- Attempted 132 Consumer Discharge Surveys and completed 4, with overall satisfaction post-discharge being a 3.4.
- IDD Satisfaction Surveys are now sent out by the NMRE

Customer Service/Reception

Accomplishments:

- 1) Continue to quickly and effectively adapt to changing procedures while maintaining our expected levels of service and care.

- 2) Demonstrate a caring, welcoming attitude to individuals presenting to the office as their first point of contact.
- 3) Support Clinical Services by scheduling appointments, processing electronic information, and triaging incoming and outgoing information.
- 4) Collaborate with Psychiatric Services to assist in on boarding Doctors and developing Resident workflow.
- 5) Working collaboratively to manage increased requests in Document Disclosure Queue.
- 6) Continue to adapt to changes with Microsoft Teams as our new phone system has moved to central access.
- 7) In collaboration with Psychiatric Services, implemented a uniform procedure across all four offices for entering doctor's schedule availability.
- 8) Scanning Identification Cards to be uploaded into PCE for the purpose of increased safety and security.
- 9) Continue to work with the Safety Committee in developing and refining the emergency procedure(s) while conducting agency wide safety trainings and drills.
- 10) Continue facilitating the Safety Committee.

NORTHERN LAKES COMMUNITY MENTAL HEALTH AUTHORITY COMMITTEE ASSIGNMENTS 2024 - 2025

NAME	COMMITTEES								
	EXECUTIVE COMMITTEE (Board officers)	RECIPIENT RIGHTS & ADVISORY COMMITTEE* (RRAC) (2)	RECIPIENT RIGHTS & APPEALS COMMITTEE	FINANCE COMMITTEE	POLICY COMMITTEE	COMMUNITY ENGAGEMENT AND SERVICES COMMITTEE	PERSONNEL COMMITTEE***	NMRE BOARD REPS (3)	AD HOC CEO SEARCH COMMITTEE (1 PER COUNTY)
CRAWFORD CTY									
Ruth Pilon							X	X	X
Shawn Kraycs				X					
GRAND TRAV CTY									
Dave Freedman				X	X				
Penny Morris	X – V. Chair					X			
Tom Bratton				X				X	X - Chair
Mary Marois **					X	X		X	
Christal Frost Anderson						X - Chair	X		
Tony Lentych**		X- Chair	X						
LEELANAU CTY									
Ty Wessell				X	X				
Greg McMorrow	X - Chair								X
MISSAUKEE CTY									
Lynn Pope	X – Sec.								
Dean Smallegan				X					X
ROSCOMMON CTY									
Al Cambridge **		X		X - Chair					X
Kim Morey							X		
WEXFORD CTY									
Mark Nyman									
Kathy Adams									

*RRAC also has community members: Charles Corwin, Marleen Cassidy, Rose Denny, Rudy Wright, Vacant

** Term ending

*** Additional member to be determined