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VICTOR CELENTINO

VICE-CHAIRPERSON PRO-TEM  
VINCE DRAGONETTI

HUMAN SERVICES COMMITTEE  
DEB NOLAN, CHAIR  
TODD TENNIS  
ANDY SCHOR  
BRIAN McGRAIN  
DON VICKERS  
STEVE DOUGAN

## **INGHAM COUNTY BOARD OF COMMISSIONERS**

*P.O. Box 319. Mason, Michigan 48854 Telephone (517) 676-7200 Fax (517) 676-7264*

THE HUMAN SERVICES COMMITTEE WILL MEET ON MONDAY, JULY 16, 2012 AT 6:30 P.M., IN THE PERSONNEL CONFERENCE ROOM (D & E), HUMAN SERVICES BUILDING, 5303 S. CEDAR, LANSING.

### Agenda

Call to Order

Approval of the [June 18, 2012 Minutes](#)

Additions to the Agenda

Limited Public Comment

1. Health Department
  - a. Resolution to Authorize a Subcontract with [Hunt and Associates](#)
  - b. Resolution to Authorize an Amendment to the Agreement Between the Ingham County Health Department and Lansing Area Aids Network ([LAAN](#))
  - c. Resolution to Authorize an Agreement with the [Community Mental Health Authority](#) of Clinton, Eaton and Ingham Counties
  - d. Resolution to Authorize a 2012-2013 [AmeriCorps Grant](#)
  - e. Resolution to Authorize [Amendment #3](#) to the 2011-2012 Comprehensive Planning, Budgeting and Contracting Agreement with the Michigan Department of Community Health
  - f. Resolution to Authorize an Agreement with the United States Department of Health and Human Services, Division of Health Resources and Services Administration to Accept the [Healthy Start Grant](#)
  - g. Resolution Authorizing an Agreement with [Health Management Associates](#) to Provide Start Up Core Functions of the Michigan Consumers Health Care Co-Op
  - h. Resolution to Authorize an Agreement with the [Community Mental Health Authority](#) of Clinton, Eaton and Ingham Counties for the Provision of Co-Located Primary and Behavioral Health Services
  - i. Resolution Honoring [Employees](#) of the Sparrow Community Health Center
  - j. Presentation: ICHD Sparrow Health Center - Overall Services
  - k. Presentation: Michigan Primary Care Association Regarding Patient Centered Medical Home
  
2. Ingham Health Plan: Discussion - Resolution to Submit to the Electorate a Special [Millage](#) Question for Health Services for Low Income Uninsured Families and Adults Living in Ingham County

Announcements  
Public Comment  
Adjournment

**PLEASE TURN OFF CELL PHONES OR OTHER ELECTRONIC DEVICES  
OR SET TO MUTE OR VIBRATE TO AVOID  
DISRUPTION DURING THE MEETING**

The County of Ingham will provide necessary reasonable auxiliary aids and services, such as interpreters for the hearing impaired and audio tapes of printed materials being considered at the meeting for the visually impaired, for individuals with disabilities at the meeting upon five (5) working days notice to the County of Ingham. Individuals with disabilities requiring auxiliary aids or services should contact the County of Ingham in writing or by calling the following: Ingham County Board of Commissioners, P.O. Box 319, Mason, MI 48854 Phone: (517) 676-7200. A quorum of the Board of Commissioners may be in attendance at this meeting. Meeting information is also available on line at [www.ingham.org](http://www.ingham.org).

## HUMAN SERVICES COMMITTEE

June 18, 2012

Minutes

Members Present: Deb Nolan, Todd Tennis, Andy Schor, Brian McGrain, Don Vickers, and Steve Dougan

Members Absent: None

Others Present: Board Chairperson Copedge, Jared Cypher, Chuck Gray, Randy Marwede, Renée Branch Canady, Deb Brinson, Robin Reynolds, Charlyn Stratton, Cathy Fitton, Patricia Curra, Mary Pollock and others

The meeting was called to order by Chairperson Nolan at 6:32 p.m. in the Personnel Conference Room “D & E” of the Human Services Building, 5303 S. Cedar Street, Lansing.

### Approval of the June 4, 2012 Minutes

The June 4, 2012 Minutes were amended to reflect the following:

Pages 5, 8 lines down, add “following” after “the” and “removed” after “statement” and as follows: Comm. Nolan stated that she did not want any changes to be made on the Board Floor. She asked to have the **following** statement **removed**: “or help to provide assistance in obtaining such things as household utilities that are needed by families and individuals” after the word Needs” located in the THEREFORE BE IT RESOLVED.

### Additions to the Agenda

5. Substitute - Resolution Expressing Support for Access to Preventative Health Care Services, Including Contraception for All Women, and to Strongly Support Insurance Coverage of Contraception without Co-Pays and Cost Sharing
6. Late – New Grant Information

### Limited Public Comment

Mary Pollack, Michigan and Lansing NOW, stated she was in attendance to support the Ingham Health Plan and Agenda Item #5: Resolution Expressing Support for Access to Preventative Health Care Services, Including Contraception for All Women, and to Strongly Support Insurance Coverage of Contraception without Co-Pays and Cost Sharing.

Patricia Curra stated she was in attendance to support the Ingham Health Plan and Agenda #5.

MOVED BY COMM. DOUGAN, SUPPORTED BY COMM. TENNIS, TO APPROVE A CONSENT AGENDA FOR THE FOLLOWING ITEMS:

2. Department of Veteran Affairs - Resolution Accepting Donations and Scholarships for Accreditation Training for County Veteran Counselor

3. Health Department
  - b. Resolution Amending Resolution #11-235, to Except Increased Awards to Support the Continued Operations of the Health Department's Child and Adolescent Health Centers
  - c. Resolution Honoring Garry Rowe
4. Controller's Office - Resolution Approving Criteria for Ranking 2013 Applications for Community Agency Funding

MOTION CARRIED UNANIMOUSLY. Absent: Comm. Schor

MOVED BY COMM. DOUGAN, SUPPORTED BY COMM. TENNIS, TO APPROVE THE ITEMS ON THE CONSENT AGENDA.

MOTION CARRIED UNANIMOUSLY. Absent: Comm. Schor

1. Presentation - Ingham Health Plan: Millage Request Proposal

Presentation - Robin Reynolds, Executive Director of the Ingham Health Plan

Ms. Reynolds reviewed the IHP limitations and the complexity of working with providers and specialty care. She described the financial expectations of providers, hospitals and how reimbursement is distributed. She noted that some patients may have difficulty finding a provider in a timely manner and paying a facility fee can be unobtainable.

Ms. Reynolds stated the IHP is recommending that 0.61 mils be placed on the ballot in order to capture \$4 million annually through 2015. Ms. Reynolds explained how a millage could expand access, satisfy the requirements of the FQHC plus allow patients to see providers in a timelier manner thus forgoing urgent care facilities and the emergency rooms. It will also allow for an increased reimbursement rate for providers, assist with increasing provider capacity, and provide the patient with navigation and/or outreach. Ms. Reynolds reviewed the allocation which includes: increase reimbursement, capacity and navigation services, benefit adjustments, and administration.

(Comm. Schor arrived at 6:44 p.m.)

Ms. Reynolds stated that if the Affordable Care Act (ACA) is approved there will still be a number of people who can not afford health care. She explained that if the ACA is enacted then the IHP can expand its outreach.

Ms. Reynolds stated the Supreme Court should have a ruling yet this month; however, in order to move forward it is important to submit the ballot language by August 28, 2012 so that it can be placed on the November ballot. She explained the Commissioners would still have the ability to make their decision whether or not to place the question on the ballot in November. She further explained that portions of the Affordable Care Act could be alienated. She noted that smokers will pay a much higher premium on the ACA plan.

Ms. Reynolds expressed her concern that the Disproportionate Share Hospital (DSH) Payments are declining and those funds are a primary source of funding. She explained that the decline in hospital capacity directly affects the health plans funding which could end in 2013. She noted if this occurs expansion would not be the discussion instead it would be keeping the Health Plan alive. She stated this is not just a County concern this is an issue across the country.

Ms. Reynolds stated the proposed millage would increase service throughout Ingham County. She provided Ingham County Health Plan expenses related to FQHC requirements and membership served.

Dr. Branch Canady provided the history of the glide path to full enrollment including her concern that the County currently does not have the capacity to accomplish that goal. She stated the millage will position the County to serve many uncovered individuals understanding regardless of the ACA outcome there will still be a small percentage of people uninsured. Comm. Schor acknowledged the intent for full enrollment plus the economic down turn that lead to a lack of funding; on the other hand, there was difficulty finding individuals and getting them enrolled. He provided examples. He asked if this millage is passed how people will be found for enrollment. Dr. Branch Canady described the patient navigator, the history of the outreach including lessons learned. Ms. Reynolds described active and passive redetermination. She noted there is an enrollment form on the website or an individual may make a phone call.

Comm. Tennis asked if the IHP will be needed if the ACA is completely upheld. He questioned if some individuals will fall in the middle, not meet the Medicaid threshold or are not Medicaid eligible, but, can not afford health insurance from the exchange. Further questioning how the ACA will react to those IHP members. Ms. Reynolds explained there is a group that if their medical expense are greater than 8% of their annual income they will have the ability to opt-out. The other group is undocumented and they will not get a penalty or insurance. The people in the affordable range that do not enroll will be penalized. She further explained it is the hope of the IHP to offer assistance with the premium to people in the affordable range so they have the ability to be on the exchange. She noted the exchange is a better product than the IHP. Comm. Vickers asked if the assistance would be local support. Ms. Reynolds stated it would be part of the IHP and other health plans in the state are considering doing the same. Comm. Vickers expressed his concern that many people still do not have access to the internet to apply for assistance. Ms. Reynolds stated they may apply by phone.

Comm. Vickers asked if the millage would increase enrollment or is it primarily to increase provider salaries. Ms. Reynolds stated that enrollment would slightly increase. Ms. Brinson explained the benefits of FQHC reimbursement which allows the County to generate more revenue and assist those who do not have coverage.

Comm. Nolan asked why the DSH Payments are not increasing. Ms. Reynolds stated that the DSH Payment is not decreasing but what is decreasing is the hospitals ability to draw that down. She described reporting, collection and audit changes in the hospitals and as a result the hospitals are becoming more nervous of signing contracts for DSH Payment.

Comm. McGrain asked for clarification to Comm. Vickers question stating that the millage would not just add providers and patients it would also add benefits. Ms. Reynolds answered yes. Comm. Vickers asked for the minimum income to qualify for the Ingham Health Plan. Ms. Reynolds stated \$27,000 (annual) for an individual, \$55,000 (annual) for a family of four, and two people would fall between \$27,000 and \$55,000. She acknowledged the minimum to qualify is higher than some plans in the state, but, insurance can be unaffordable when it goes up 12% per year and family premiums are \$1,500.

Comm. Tennis expressed his concern that two different things could happen based on whether the Affordable Care Act is enacted in the entirety. On one hand, the County is considering expanding providers, provider payments plus adding to the population. On the other hand, assuming the ACA is enacted it appears the IHP would become an assistance program. He questioned if the IHP would change drastically if the ACA is upheld and would the use of funds change. Ms. Reynolds stated the way IHP does business would change. Comm. Tennis asked if the IHP mission would change. Ms. Reynolds answered yes. Comm. Tennis asked if the IHP would help those who do not fit into the ACA then expressed his concern for the working middle class falling between the two options. Ms. Reynolds stated the overall mission of the IHP is to provide access to medical care to the residents of Ingham County; in addition, there will always be a need for charity care. She noted that the IHP will be available to those who do not obtain Medicaid right away. Comm. Vickers asked if any Ingham County employees are on this plan. Ms. Reynolds stated she did not know; however, there are major employers in the County who have low wage earners on the plan.

Comm. Dougan asked what other Counties have a similar millage. Ms. Reynolds explained Genesee County passed a millage three years ago and they are asking for a renewal this year. Comm. Dougan asked what Genesee County is assessing. Ms. Reynolds stated they are asking one mil on their ballot this year and before it was higher.

Comm. Schor asked if the IHP partners are supportive of this millage and what other millage requests will be on the November ballot. Ms. Reynolds stated that the partners have sent her emails in support of the millage.

Chairperson Nolan asked for opinions from the Committee on placing this on the November Ballot. Comm. Schor and McGrain stated that they would like to wait for the Supreme Court decision on the ACA.

Chairperson Nolan asked the Committee to come to the July 16, 2012 meeting prepared to make a decision about placing the millage on the ballot. She noted this would be after the Affordable Care Act has been voted on. She asked to have examples of various millages and a back up plan for comparison purposes. Comm. Vickers asked that other millage requests be available at the July 16, 2012 meeting.

Chairperson Nolan asked Ms. Reynolds or Dr. Branch Canady speak with Comm. Grebner and Comm. Bahar-Cook in order to streamline the Finance Committee's consideration of a proposed resolution. She noted that most of the Finance Committee members are also part of this Committee with the exception of those two Commissioners.

3. Health Department

- a. Resolution to Provide On-Call Bonus Payments to Physician Assistants Employed in the Ingham County Health Department.

MOVED BY MCGRAIN, SUPPORTED BY TENNIS, TO APPROVE THE RESOLUTION TO PROVIDE ON-CALL BONUS PAYMENTS TO PHYSICIAN ASSISTANTS EMPLOYED IN THE INGHAM COUNTY HEALTH DEPARTMENT.

Comm. Dougan asked for the cost exposure and clarification of how the person on-call is paid. Ms. Brinson explained that all of the County's providers are required by contract to be on the "on-call" schedule. There is a rate differential when they go "on-call" regardless of how many calls. Comm. Dougan asked if the person is taking care of the call and it does not necessarily mean they are going to the care facility. Ms. Brinson stated that is correct. Ms. Brinson stated that she did not have a total cost exposure other than what is provided in the resolution. Comm. Dougan asked if there is only 1 person "on-call". Mr. Brinson stated there are 2 people and 1 person is a back up.

Comm. Nolan asked how this is being managed now. Ms. Brinson explained the Physician Assistant is a new employee classification to the managerial contract and because they were not in the contract when it was negotiated they are not entitled to be "on-call" and all providers must be "on call". Ms. Brinson asked Ms. Stratton if the differential is paid when a call is received or the 24 hours. Ms. Stratton, Ingham County Nurse Practitioner, answered 24 hours.

Mr. Cypher asked if a Physician Assistant is employed now. Ms. Brinson answered yes. Mr. Cypher asked if only 2 people (primary and back up) are "on-call" each weekend and there are no more people being added essentially this is expanding the "on-call" pool. Ms. Brinson answered yes.

Ms. Stratton, Ingham County Nurse Practitioner was given permission from the Chairperson to address the Committee. She questioned if the Physician Assistant's one assigned supervisor would be the back up. She explained that a Physician Assistant is required to have collaboration with the Physician supervisor questioning if that Physician will also be paid? Ms. Brinson stated that a physician will be the back up or the Medical Director may be available to assist. Ms. Brinson noted that is required by the NP's as well.

Comm. Dougan asked for examples of how this will affect the budget.

MOTION CARRIED UNANIMOUSLY.

6. New Grant Information

Ms. Brinson stated tomorrow she will be working on the plans for transportation to Jackson on June 27<sup>th</sup>. Comm. Nolan stated she will be attending.

Dr. Branch Canady announced the County has been awarded a Healthy Start Grant. This is a 2-year grant that will address women and infants on a broad range of health threats.

Comm. Vickers stated that he was pleased to hear about the grant for un-used household drug disposal. Dr. Branch Canady stated that was through the Environmental Health Department.

Dr. Branch Canady stated there are several small grants awarded to the County. She advised the Committee that she will be attending the Chief's meeting and discussing K2. Comm. Tennis stated that he is not in favor of these types of drugs; however, there should be caution on how and if it is regulated by the County. He suggested waiting for the State Legislature to act.

5. Board of Commissioners - Resolution Expressing Support for Access to Preventative Health Care Services, Including Contraception for All Women, and to Strongly Support Insurance Coverage of Contraception without Co-Pays and Cost Sharing

MOVED BY COMM. MCGRAIN, SUPPORTED BY COMM. TENNIS, TO APPROVE THE RESOLUTION EXPRESSING SUPPORT FOR ACCESS TO PREVENTATIVE HEALTH CARE SERVICES, INCLUDING CONTRACEPTION FOR ALL WOMEN, AND TO STRONGLY SUPPORT INSURANCE COVERAGE OF CONTRACEPTION WITHOUT CO-PAYS AND COST SHARING.

Comm. Vickers stated that he would be voting no; however, asked for clarification of new insurance plans. Comm. Tennis stated the ACA grandfathered existing insurance plans for an employer but if there are significant changes then the new criteria would take place. Comm. Vickers stated that it concerns him that it is cheaper not to provide insurance and pay a fine.

Comm. McGrain stated he is in support of the language; however, questioned the no co-pay and cost sharing. Ms. Pollock explained there is no co-pay because this is considered prevention under the ACA and consequently more people will use it to avoid unintended pregnancy. Comm. McGrain questioned if immunizations are considered prevention. Ms. Pollock answered to her knowledge but sometimes there is a doctor visit co-pay. Comm. Schor stated that the well child is considered prevention. Comm. McGrain asked if the changes in the substitute mirror federal legislation. Ms. Pollock explained that all employers regardless of their religious beliefs should not discriminate against their employees beliefs. Essentially, it is the religious beliefs of the employer versus the religious belief of the employee that is the issue. Comm. Tennis expressed his concern that the key is the definition of a religious based institution because if the religious based institution is a church he believes they should have the option to be exempt.

COMM. MCGRAIN WITHDREW HIS MOTION. COMM. TENNIS WITHDREW HIS SUPPORT OF THE MOTION.

MOVED BY COMM. MCGRAIN, SUPPORTED BY COMM. TENNIS, TO APPROVE THE ORIGINAL RESOLUTION EXPRESSING SUPPORT FOR ACCESS TO PREVENTATIVE HEALTH CARE SERVICES, INCLUDING CONTRACEPTION FOR ALL WOMEN, AND TO STRONGLY SUPPORT INSURANCE COVERAGE OF CONTRACEPTION WITHOUT CO-PAYS AND COST SHARING.

Comm. Tennis suggested clarifying religious based institution.

MOVED BY COMM. TENNIS, SUPPORTED BY COMM. MCGRAIN, TO AMEND THE RESOLUTION TO BETTER DEFINE RELIGIOUS BASED INSTITUTIONS MUCH LIKE THE AFFORDABLE CARE ACT'S LANGUAGE WHICH INCLUDES CHURCHES.

Ms. Pollock stated that the BE IT FURTHER RESOLVED, that the Board of Commissioners supports the constitutionality of religious liberty by providing exemptions for religious-based institutions is not necessary because the language regarding churches is already in the Affordable Care Act.

COMM. TENNIS WITHDREW HIS MOTION. COMM. MCGRAIN WITHDREW HIS SUPPORT OF THE MOTION.

MOTION, TO APPROVE THE ORIGINAL RESOLUTION, CARRIED with Comms. Vickers and Dougan Voting "no".

#### Announcements

Comm. Nolan congratulated Comm. Tennis for getting married this past weekend. Comm. Tennis thanked Ms. Bennett and Judge Boyd for their time this past weekend.

#### Public Comment

Charlyn Stratton, FNP, Ingham County Health Department expressed her concern that there will be additional costs when a nurse practitioner is on call because a supervisor is required. Dr. Branch Canady will get clarification to Ms. Stratton.

Dr. Branch Canady informed the Committee that tomorrow at 2:00 p.m. there will be a Community Health Assessment Report from the Hospital Partners.

The meeting adjourned at approximately 7:49 p.m.

Respectfully submitted,

Julie Buckmaster

## **JULY 16, 2012 HUMAN SERVICES AGENDA STAFF REVIEW SUMMARY**

### **ACTION ITEMS:**

**The Assistant Deputy Controller is recommending approval of the following resolutions:**

*1a. Resolution to Authorize a Subcontract with Hunt and Associates*

This resolution authorizes an agreement with Hunt and Associates utilizing grant funds from the W.K. Kellogg Foundation in the amount of \$20,000 to for the period of August 1, 2012 through December 31, 2012. Hunt and Associates will provide training to members of the community who wish to use community organizing principles and methods to pursue concrete social and environmental justice initiatives to improve the community's health.

*1b. Resolution to Authorize an Amendment to the Agreement between the Ingham County Health Department and Lansing Area Aids Network (LAAN)*

This resolution extends an existing agreement with LAAN through December 31, 2012 with an annual option to automatically renew from year to year. In this agreement, LAAN provides on-site medical case management services at the Adult Health Center for sixteen hours per week at no charge.

*1c. Resolution to Authorize an Agreement with the Community Mental Health Authority of Clinton, Eaton and Ingham Counties*

This resolution authorizes an agreement with CMH for a pilot project to provide additional behavioral health services and psychiatric consultation services within the pediatric health centers of the Health Department. Utilizing CMH Medicaid funds, CMH will provide two full-time equivalent (2.0 FTE) licensed social workers and one half-time (.50 FTE) licensed psychiatrist to provide mental health therapy from August 1, 2012 through September 30, 2013.

*1d. Resolution to Authorize a 2012-2013 AmeriCorps Grant*

This resolution authorizes an AmeriCorps grant agreement of \$145,125 for the time period of October 1, 2012 through September 30, 2013. A total of 10.79 FTE AmeriCorps members will be placed in host sites selected through an RFP process, which is currently ongoing.

**The following resolutions were submitted after the agenda deadline, giving insufficient time for proper review. Therefore there is no recommendation at this time. However, staff will continue to work with the Health Department until the date of the meeting. If at that time, staff is not comfortable recommending the resolutions, we will request they be pulled from the agenda.**

*1e. Resolution to Authorize Amendment #3 to the 2011-2012 Comprehensive Planning, Budgeting and Contracting Agreement with the Michigan Department Of Community Health*

This resolution authorizes Amendment #3 to the 2011-2012 CPBC Agreement, which will increase the budget for Comprehensive Local Health Services from \$5,268,890 to \$5,294,790, an increase of \$25,900. Please see the attached memorandum for further details.

*If. Resolution to Authorize an Agreement with the United States Department of Health and Human Services, Division of Health Resources and Services Administration to Accept the Healthy Start Grant*

This resolution accepts a Healthy Start grant to address disparities in the health of mothers and babies experienced by racial and ethnic minorities in communities that face many challenges. This is a two-year award in the amount of \$965,000. Please see the attached memorandum for further details.

*Ig. Resolution Authorizing an Agreement with Health Management Associates To Provide Start up Core Functions of The Michigan Consumers Health Care Co-Op*

This resolution authorizes a contract with Health Management Associations to assist in providing the start up core functions of the Michigan Consumers Health Care Co-Op. Please see the attached memorandum for further details

*Ih. Resolution to Authorize an Agreement with the Community Mental Health Authority of Clinton, Eaton and Ingham Counties for the Provision of Co-Located Primary and Behavioral Health Services*

This resolution authorizes an agreement with CMH to provide health care services to patients on-site at CMH. Please see the attached memorandum for further details

#### **HONORARY/PRESENTATION/DISCUSSION ITEMS:**

*Ii. Resolution Honoring Employees of the Sparrow Community Health Center*

*Ij. Presentation: ICHD Sparrow Health Center – Overall Services*

*Ik. Presentation: Michigan Primary Care Association regarding Patient Centered Medical Home*

*2. Discussion - Resolution to Submit to the Electorate A Special Millage Question for Health Services for Low Income Uninsured Families and Adults Living In Ingham County*

**MEMORANDUM**

**TO:** Human Services Committee  
Finance Committee

**FROM:** Renée Branch Canady, PhD, MPA, Health Officer

**DATE:** July 5, 2012

**RE:** Recommendation to Authorize a Subcontract Agreement with David Hunt and Associates

Since 2005, Ingham County Health Department (ICHHD) has been working to transform its practice of public health within a framework of social justice. Facilitated dialogue has been a primary methodology for doing this work. With funding from the W.K. Kellogg Foundation, the Health Department has an opportunity to provide training to members of the community who wish to use community organizing principles and methods to pursue concrete social and environmental justice initiatives to improve the community's health. In May of 2012, the Health Department, through the Purchasing Department, issued a Request for Proposals (RFP) to provide training to local organizations around community organizing principles. The RFP was sent to nationally known or locally recommended providers of community organizing workshops. Locally recommended individuals were suggested through a community organizing workshop survey administered by ICHHD in March and April 2012. Ten of the seventeen organizations and individuals that were sent the RFP are located in Michigan.

We received one response to the RFP. Health Department staff reviewed the proposal from David Hunt and Associates to enhance community organizing knowledge, skills and campaigns among community-based organizations and volunteer leaders in Ingham County. The proposal and David Hunt's qualifications fit the goals of the ICHHD Health Equity and Social Justice Project.

David Hunt's 20 years experience in the community development and citizen empowerment field gives him a special interest in working with community based organizations and community organizers. David Hunt and Associates was founded in 1996 to enhance citizen empowerment and community development. Mr. Hunt has been trained in small and large group facilitation methods which serve him well as an international speaker, facilitator, trainer, planner, and community and organization builder. Mr. Hunt has been a principal trainer with the Midwest Academy for fourteen years. Mr. Hunt's research, training, and methodology were developed during his W.K. Kellogg Foundation National Leadership Fellowship from 1995-1997.

I recommend that the Board of Commissioners authorize a subcontract with David Hunt and Associates in the amount of \$20,000 for the period of August 1, 2012 through December 31, 2012.

Introduced by the Human Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE A SUBCONTRACT WITH HUNT AND ASSOCIATES**

WHEREAS, health equity – which is the elimination of the root causes of healthy disparity is one of the core values for the Ingham County Health Department; and

WHEREAS, in 2004 and 2006 the Health Department received grant support from the W. K. Kellogg Foundation (Resolutions #04-074 and #06-015) to launch a social justice network to advance health equity; and

WHEREAS, the Health Department has been awarded additional funding by the W.K. Kellogg Foundation to expand social justice practice to community based organizations, to allow these organizations to explore the use of community organizing and community building as a vehicle for transforming public health practice within a health equity framework; and

WHEREAS, in May 2012 the County issued a Request for Proposals to Michigan and National community organizing trainers and facilitators; and

WHEREAS, the County received one response to the RFP; and

WHEREAS, the proposal from David Hunt and Associates was reviewed by Health Department staff, which fits the goals of the Health Department's Health Equity and social Justice Project; and

WHEREAS, that the Health Officer recommends that a subcontract be awarded to David Hunt and Associates in the amount of \$20,000 and the term of the subcontract shall be August 1, 2012 through December 31, 2012.

THEREFORE BE IT RESOLVED, that the Board of Commissioners authorizes a subcontract in the amount of \$20,000 with David Hunt and Associates to carry out community organizing workshops for the period August 1, 2012 and December 31, 2012.

BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign the sub contract after review by the County Attorney.

## MEMORANDUM

TO: Human Services Committee

FROM: Renée Branch Canady, PhD, MPA, Health Officer

DATE: June 27, 2012

RE: Recommendation to Authorize an Amendment to the Agreement Between the Lansing Area AIDS Network and the Ingham County Health Department

The Ingham County Health Department Community Health Center Network (ICHD CHCN) has had an existing relationship with the Lansing Area Aids Network (LAAN) for many years. In 2010, the ICHD and LAAN formalized their relationship through an Agreement, which specified the scope of services and contained a Business Associate Agreement. In this Agreement, LAAN provides on-site medical case management services at the Adult Health Center for sixteen hours per week at no charge. The current Agreement expired December 31, 2011.

I recommend that the Board of Commissioners authorize an Amendment to the Agreement and extend the term through December 31, 2012 with the option to automatically renew from year to year unless either party provides notice otherwise.

c: Debra Brinson (with attachment)  
Barb Mastin (with attachment)  
John Jacobs (with attachment)  
Jayson Welter (with attachment)  
Jonathon MacGowen (with attachment)  
Carolyn Redman (with attachment)

Introduced by the Human Services Committee of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE AN AMENDMENT TO THE AGREEMENT BETWEEN THE  
INGHAM COUNTY HEALTH DEPARTMENT AND LANSING AREA AIDS NETWORK (LAAN)**

WHEREAS, the Ingham County Health Department Community Health Center Network (ICHD CHCN) has had an existing relationship with the Lansing Area Aids Network (LAAN) for many years; and

WHEREAS, in 2010, the Health Department and LAAN formalized their relationship through an agreement, which specified the scope of services and contained the Business Associate Agreement; and

WHEREAS, the current agreement expired December 31, 2011; and

WHEREAS, LAAN provides on-site medical case management services at the Adult Health Center of the Cedar Community Health Center for sixteen hours per week at no charge to the ICHD; and

WHEREAS, the Ingham Community Health Center Board of Directors has reviewed the Amendment; and

WHEREAS, the Health Officer recommends that the Board of Commissioners authorize an Amendment to the Agreement extending the term through December 31, 2012, with the option to renew from year to year unless either party provides notice otherwise.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes the Amendment to the Agreement between the Lansing Area AIDS Network and the Ingham County Health Department Community Health Center Network to extend the term through December 31, 2012, with the option to renew from year to year unless either party provides notice otherwise.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.

## MEMORANDUM

TO: Human Services Committee

FROM: Renée Branch Canady, PhD, MPA, Health Officer

DATE: June 29, 2012

RE: Recommendation to Authorize an Agreement between the Community Mental Health Authority of Clinton, Eaton and Ingham (CMH-CEI) Counties and the Ingham County Health Department

This is a recommendation to authorize an Agreement between the Community Mental Health Authority of Clinton, Eaton and Ingham (CMH-CEI) Counties and the Ingham County Health Department (ICHHD) for the provision of mental health and psychiatric services in the community health centers.

In Resolution #11-185, the Board of Commissioners authorized an agreement between the Health Department and Community Mental Health behavioral health services and psychiatric consultation services.

CMH-CEI has a unique opportunity to provide two full-time equivalents (2.0 FTE) licensed social workers and one half-time (.50 FTE) licensed psychiatrist to provide mental health therapy, at no charge, within the pediatric health centers of the Health Department. The three positions will be funded using CMH-CEI Medicaid dollars. CMH-CEI Medicaid funds are guaranteed to fund this pilot project from August 1, 2012 through September 30, 2013. The intent of this pilot project is to determine if these positions can be self-sustaining. Recognizing the aim of ensuring sustainable funding for its co-located behavioral health care staff, both the Health Department and Community Mental Health will conduct preliminary reviews of billing revenue to provide an interim look at the factors impacting viability. Decisions regarding the continuation of this co-location effort will be made prior to the end of the agreement.

This is a one-time opportunity for the Health Department to provide much needed mental health and psychiatric services within its community health centers at no charge to the County. The Ingham Community Health Center Board of Directors is in support of the agreement.

I recommend that the Ingham County Board of Commissioners approve the attached resolution and authorize an agreement between CMH-CEI and the ICHD from August 1, 2012 through September 30, 2013.

c: Debra Brinson (with attachment)  
Barb Mastin (with attachment)  
John Jacobs (with attachment)  
Jayson Welter (with attachment)  
Jonathon MacGowen (with attachment)  
Carolyn Redman (with attachment)

Introduced by the Human Services Committee of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE AN AGREEMENT WITH THE COMMUNITY MENTAL HEALTH AUTHORITY OF CLINTON, EATON AND INGHAM COUNTIES**

WHEREAS, in Resolution #11-185, the Ingham County Health Department and the Community Mental Health Authority of Clinton, Eaton and Ingham Counties (CMH-CEI) entered into an agreement for behavioral health services and psychiatric consultation services; and

WHEREAS, CMH-CEI has a unique opportunity to provide two full-time equivalent (2.0 FTE) licensed social workers and one half-time (.50 FTE) licensed psychiatrist to provide mental health therapy, at no charge, within the pediatric health centers of the Health Department; and

WHEREAS, the three positions will be funded using CMH-CEI Medicaid dollars and will pose no cost to Ingham County; and

WHEREAS, CMH-CEI Medicaid funds are guaranteed to fund this pilot project from August 1, 2012 through September 30, 2013; and

WHEREAS, this is a one-time opportunity for the ICHD CHCN to provide much needed mental health and psychiatric services within its health centers at no charge to the County; and

WHEREAS, the Ingham Community Health Center Board of Directors supports the agreement.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes an agreement with the Community Mental Health Authority of Clinton, Eaton and Ingham Counties for a pilot project to provide additional behavioral health services and psychiatric consultation services within the pediatric health centers of the Health Department.

BE IT FURTHER RESOLVED, utilizing CMH-CEI Medicaid funds, CMH-CEI will provide two full-time equivalent (2.0 FTE) licensed social workers and one half-time (.50 FTE) licensed psychiatrist to provide mental health therapy from August 1, 2012 through September 30, 2013.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.

MEMORANDUM

TO: Human Services Committee
Finance Committee
FROM: Renée Branch Canady, Ph.D., Health Officer
DATE: July 5, 2012
RE: Resolution to Authorize a 2012-2013 AmeriCorps Grant

Following a successful Three-year funding cycle, the Michigan Department of Human Services has granted the Ingham County Health Department, on behalf of the Power of We Consortium, a new AmeriCorps Program grant of \$145,125 for the 2012-2013 fiscal year. Of this \$145,125, the Michigan Community Service Commission will withhold \$1,511 as an administrative fee. The net grant to Ingham County will be \$143,614. This is the first program year of a new Three-year funding cycle, with additional anticipated funding for the 2013-2014 and 2014-2015 program years. A total of 10.79 FTE AmeriCorps members will be placed in host sites selected through an RFP process.

The grant amount offered by DHS includes \$48,217 (salary and fringe) for the temporary, full-time coordinator; staff training/travel; and partial AmeriCorps member support.

The grant requires a match.

Table with 3 columns: Grant, Amount, Percent. Rows include Grant (145,125, 61%), Match (91,084, 39%\*), and Total (236,209).

\*Grant guidelines direct applicants to hold the DHS share at \$13,500 per member. Our match put the DHS share of our application at \$13,438 per member.

- The match is drawn from:
1) cash contributions from the external host sites totaling \$78,736;
2) existing salary and fringe used as match of \$4,795; and
3) indirect costs used as match of \$7,554.

I recommend that the Board of Commissioners adopt the attached resolution to accept this grant from the Michigan Department of Human Services for the third year of this AmeriCorps Program.

Attachment

- c: Debbie Edokpolo w/attachment
John Jacobs w/attachment
Peggy Roberts w/attachment

Introduced by the Human Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE A 2012-2013 AMERICORPS GRANT**

WHEREAS, the Power of We Consortium will soon complete a successful 3-year grant-funded AmeriCorps\*State Program, funded by the Michigan Department of Human Services, on behalf of the Michigan Community Service Commission (MCSC), and authorized by Resolutions #09-338, #10-311, and #11-256; and

WHEREAS, the Consortium has been granted a new Three-year AmeriCorps\*State Program; and

WHEREAS, on June 29, 2012, the Michigan Community Service Commission approved funding for the Ingham County Health Department, on behalf of the Consortium, in the amount of \$145,125 for the time period of October 1, 2012 through September 30, 2013. Of this \$145,125, the MSCS will withhold \$1,511 as an administrative fee. The net grant to Ingham County will be \$143,614; and

WHEREAS, a non-federal 26% local match of cash and/or in-kind contributions is required; and

WHEREAS, as a condition of this grant, the Health Department must, at a minimum, enter into agreements with each AmeriCorps host site and with each AmeriCorps member; and

WHEREAS, under this grant, AmeriCorps members will increase consumption of healthy foods and reduce food insecurity through gardening and food distribution, teach community members the importance of eating healthy foods and strategies to adopt healthy diets, and promote safe, affordable exercise options; and

WHEREAS, the Health Officer has recommended that the Board of Commissioners accept the AmeriCorps grant award.

THEREFORE BE IT RESOLVED, that the Board of Commissioners accepts an AmeriCorps grant of \$145,125 with Michigan Community Service Commission withholding \$1,511 as an administrative fee for a net grant to Ingham County of \$143,614, and authorizes a grant agreement with the Michigan Department of Human Services for the time period of October 1, 2012 through September 30, 2013.

BE IT FURTHER RESOLVED, a non-federal match of \$91,084 is authorized, cash match for 5% salary/fringe for the PWC Coordinator, and the remainder obtained through cash contributions of up to \$7,290 from each of the AmeriCorps host sites, as selected through a Request for Proposal process.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to amend the Health Department's budget.

BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign any grant award documents, and any host site and member agreements, after review by the county attorney.

## MEMORANDUM

**TO:** Human Services Committee  
Finance Committee

**FROM:** Renée Branch Canady, PhD, MPA, Health Officer

**DATE:** July 6, 2012

**RE:** CPBC Agreement Amendment #3 for 2011-2012

This is a recommendation to authorize Amendment #3 of the 2011-2012 Comprehensive Planning, Budgeting and Contracting (CPBC) Agreement with the Michigan Department of Community Health (MDCH). The CPBC Agreement is the annual process whereby the MDCH transmits State and Federal funds to Ingham County to support public health programs. The CPBC Agreement establishes the funding levels and the terms and conditions under which the funds are disbursed. The Board of Commissioners authorized the 2011-2012 Agreement in Resolution #11-283, authorized Amendment #1 in Resolution #11-395, and authorized Amendment #2 in Resolution #12-106.

The CPBC Agreement is regularly amended to adjust funding levels and clarify terms and conditions. Amendment #3 will increase the budget for Comprehensive Local Health Services from \$5,268,890 to \$5,294,790, an increase of \$25,900. The Amendment makes the following specific changes in the budget:

1. PRIME Local Learning Collaborative, an increase of \$4,000 to \$9,200.
2. Bioterrorism, an increase of \$14,400 to \$40,585.
3. Funding to Support Minority Health Month, \$7,500.

Regarding Item 3, this funding supports a contract with One Love Global, Inc., authorized in Resolution Number #12-109.

I recommend that the Board of Commissioners adopt the attached resolution.

c: John Jacobs w/attachment

Introduced by the Human Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE AMENDMENT #3 TO THE 2011-2012 COMPREHENSIVE  
PLANNING, BUDGETING AND CONTRACTING AGREEMENT WITH  
THE MICHIGAN DEPARTMENT OF COMMUNITY HEALTH**

WHEREAS, the responsibility for protecting the health of the public is a shared responsibility between the State and County governments in Michigan; and

WHEREAS, the Michigan Department of Community Health (MDCH) and local health departments enter into contracts to clarify the role and responsibility of each party in protecting public health; and

WHEREAS, the MDCH and Ingham County have entered into a 2011-2012 Agreement for the delivery of public health services under the Comprehensive Planning, Budgeting and Contracting (CPBC) process as authorized by Resolution #11-283 and amended in Resolutions #11-395 and #12-106; and

WHEREAS, the MDCH has proposed an amendment to the current Agreement to adjust grant funding levels and clarify Agreement procedures; and

WHEREAS, the Health Officer has recommended that the Board of Commissioners authorize the Amendment.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes Amendment #3 to the 2011-2012 Comprehensive Planning, Budgeting, and Contracting (CPBC) Agreement with the Michigan Department of Community Health (MDCH).

BE IT FURTHER RESOLVED, that the total amount of CPBC funding shall increase from \$5,268,890 to \$5,294,790, an increase of \$25,900.

BE IT FURTHER RESOLVED, that the increase consists of the following specific changes to program budgets:

1. PRIME Local Learning Collaborative, an increase of \$4,000 to \$9,200.
2. Bioterrorism, an increase of \$14,400 to \$40,585.
3. Funding to Support Minority Health Month, \$7,500.

BE IT FURTHER RESOLVED, that the Health Officer, Renee Branch Canady, PhD, MPA, and John Jacobs, Chief Financial Officer of the Health Department, are authorized to submit Amendment #3 of the 2011-2012 CPBC grant documents electronically through the Mi-E Grants system.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to amend the Health Department's 2012 Budget in order to implement this resolution.

**MEMORANDUM**

TO: Human Services Committee  
County Services Committee  
Finance Committee

FROM: Renee B. Canady, Ph.D., Health Officer

DATE: July 6, 2012

RE: Recommendation to Authorize Agreement with the United States Department of Health and Human Services, Division of Health Resources and Services Administration to accept a Healthy Start Grant

This is a recommendation to authorize an agreement with United States Department of Health and Human Services (HHS), Division of Health Resources and Services Administration (HRSA) to accept a Healthy Start grant. This national project addresses the significant disparities in the health of mothers and babies experienced by racial and ethnic minorities in communities that face many challenges.

The ICHD Healthy Start Project is designed to reduce infant mortality and disparities in infant mortality for African Americans living in Ingham County, Michigan. Healthy Start will address disparities in perinatal health outcomes through direct services, perinatal system coordination, and community mobilization.

Grant funds will be utilized to support two new positions – a Perinatal Systems Coordinator and a Health Educator. The Perinatal Systems Coordinator will provide overall coordination for the project, including outreach and connection within the broader community. The Health Educator position will provide weekly educational sessions at Lansing Housing Commission sites, and will refer eligible women to case management services. Grant funds will support the work of an existing ICHD Public Health Advocate, and .50 of an existing ICHD full-time Public Health Nurse to provide enhanced case management.

The project proposes two subcontracts to ensure successful implementation. The first, Lansing Housing Commission, provides support to assist with meeting logistics for the Health Education sessions; as well as four stipends for community residents to assist with project development. The second subcontract is expected with Dr. Ellen Whipple, of Michigan State University's School of Social Work to conduct an overall project evaluation.

The attached resolution authorizes a contract with HRSA and the Ingham County Health Department in the amount of \$965,000 for the proposed grant period of June 1, 2012 through May 31, 2014.

I recommend that the Board of Commissioners adopt the attached resolution and authorize the agreement for the Healthy Start Grant with HRSA.

Introduced by the Human Services, County Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE AN AGREEMENT WITH THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF HEALTH RESOURCES AND SERVICES ADMINISTRATION TO ACCEPT THE HEALTHY START GRANT**

WHEREAS, the infant mortality rate, the rate at which babies less than one year of age die, is often viewed as an overall indicator of a community's health; and

WHEREAS, African American women bear an undue disease burden with disproportionately high rates of infant mortality, with rates of 17.8 per 1,000 live births, as compared to the white infant mortality rate of 8.0 per 1,000 live births; and

WHEREAS, the Health Department has been awarded funding by the United States Department of Health and Human Services (HHS), Division of Health Resources and Services Administration (HRSA) to implement a Healthy Start grant; a national initiative focusing on reducing the rate of infant mortality and improving perinatal outcomes to project areas with high annual rates of infant mortality; and

WHEREAS, the ICHD Healthy Start Project is driven by three local goals: (1) reduce the incidence of overall infant mortality and African American infant mortality in Lansing, Michigan through direct services; (2) strengthen and sustain comprehensive coordination of perinatal providers caring for women before, during, and after pregnancy, and (3) build and expand the capacity of the community to prevent infant mortality by addressing social determinants of health; and

WHEREAS, the United States Department of Health and Human Services, Division of Health Resources and Services Administration has awarded the Ingham County Health Department a grant in the amount of up to \$965,000 to support the delivery of Healthy Start grant activities for the period of June 1, 2012 through May 31, 2014; and

WHEREAS, the Health Department requests the establishment of two new positions: Perinatal Systems Coordinator, MNA Grade 6 and a Health Educator II, ICEA Grade 7; and

WHEREAS, the Healthy Start Project funds will provide support of the work of an existing ICHD Public Health Advocate, as well as an existing ICHD Public Health Nurse; and

WHEREAS, the Healthy Start Project will provide support for two subcontracts - Lansing Housing Commission will assist with outreach and health education meeting logistics; and Dr. Ellen Whipple, of the Michigan State University's School of Social Work will provide program evaluation services; and

WHEREAS, the Health Officer recommends that the Ingham County Board of Commissioners accept the grant award in the amount of up to \$965,000 from the United States Department of Health and Human Services (HHS), Division of Health Resources and Services (HSRS) for the Health Start Project for the period of June 1, 2012 through May 31, 2014.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes an agreement with United States Department of Health and Human Services (HHS), Division of Health Resources and Services Administration (HRSA) to implement a Healthy Start Project in the amount of \$965,000 for the period of June 1, 2012 through May 31, 2014.

BE IT FURTHER RESOLVED, that the Board of Commissioners authorizes the establishment of two new grant-funded positions: Perinatal Systems Coordinator, MNA Grade 6 and a Health Educator II, ICEA Grade 7.

BE IT FURTHER RESOLVED, that the Healthy Start Project funds will provide support of the work of an existing ICHD Public Health Advocate, as well as .5 FTE of an existing ICHD Public Health Nurse.

BE IT FURTHER RESOLVED, that the Board of Commissioners authorizes subcontracts for the time period of June 1, 2012 through May 31, 2013 with Lansing Housing Commission in the amount of \$30,000 to assist with outreach and health education meeting; and Dr. Ellen Whipple, of the Michigan State University's School of Social Work in the amount of \$19,000 to provide program evaluation services.

BE IT FURTHER RESOLVED, that the County Controller/Administrator is authorized to make any necessary adjustments to the Health Department's budget consistent with this resolution.

BE IT FURTHER RESOLVED, that the hiring freeze and hiring delay is waived for the newly established Perinatal Systems Coordinator and Health Educator II positions.

BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign the agreement and the subcontracts after review by the County Attorney.

## MEMORANDUM

TO: Human Services Committee  
County Services Committee  
Finance Committee

FROM: Renée Branch Canady, PhD, MPA, Health Officer

DATE: July 6, 2012

RE: Resolution to Authorize an Agreement between the Health Department's Health Plan Management Services and Health Management Associates

Section 1322 of the Affordable Care Act created the Consumer Operated and Oriented Plan program (CO-OP program) to foster the creation of new consumer-governed, private, nonprofit health insurance issuers, known as "CO-OPs." In addition to improving consumer choice and plan accountability, the CO-OP program also seeks to promote integrated models of care and enhance competition in the Affordable Insurance Exchanges established under sections 1311 and 1321 of the Affordable Care Act. To establish these CO-OPs, the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services Center for Consumer Information and Insurance Oversight issued an Invitation to Apply for loans to capitalize eligible prospective CO-OPs with a goal of having at least one in each state. To respond to this invitation, the Ingham Health Plan joined with several other County Health Plans throughout Michigan to form the Michigan Consumers Health Care CO-OP (MCHCO). The Centers for Medicare and Medicaid Services announced its award of \$72 million in financing for the new MCHCO in May 2012.

MCHCO contracted with Health Management Associates (HMA) to perform various core management functions, including obtaining a license to provide health care coverage and performing a vendor search and bid process. HMA recognized the experience and expertise of Ingham County Health Department's Health Plan Management Services (HPMS) and requested that HPMS assist in providing the start up core functions of the MCHCO. As a result, HMA would like to contract with HPMS at a rate of \$50 per hour for support staff and \$100 per hour for professional staff. HPMS estimates that it will take approximately 1,286 hours to complete the required scope of services for an estimated total of \$103,000. The term of the agreement will be from June 1, 2012 through December 31, 2012. This is a start up contract, HPMS will begin negotiations this fall for an ongoing contract directly with MCHCO.

With Electronic Health Record implementation, the Community Health Center Network utilized HPMS staff for training and quality purposes. In order to fulfill the needs of this agreement with HMA, the position will need to be reassigned back to HPMS, which will leave a void in the EHR implementation team. As part of this agreement, HPMS is requesting to establish and hire an Electronic Health Care/Nurse Trainer position, which will be funded through this agreement and then with the ongoing agreement with MCHCO. The position has been assessed by Human Resources at MNA Grade 3, with a salary range of \$54,384 to \$65,287 (2011 rates) in the MNA contract, with a total position cost of \$93,944 (at Step 5). Attached is the job description from Human Resources.

I recommend that the Board of Commissioners approve this resolution and authorize an agreement between Health Plan Management Services and Health Management Associates and to establish an Electronic Health Care/Nurse Trainer position.

c: Debbie Brinson  
Barb Mastin  
John Jacobs  
Jonathon MacGowen  
Carolyn Redman  
Kathy Fitton, MNA

Introduced by the Human Services, County Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION AUTHORIZING AN AGREEMENT WITH HEALTH MANAGEMENT ASSOCIATES TO PROVIDE START UP CORE FUNCTIONS OF THE MICHIGAN CONSUMERS HEALTH CARE CO-OP**

WHEREAS, section 1322 of the Affordable Care Act created the Consumer Operated and Oriented Plan program (CO-OP program) to foster the creation of new consumer-governed, private, nonprofit health insurance issuers, known as “CO-OPs”; and

WHEREAS, in addition to improving consumer choice and plan accountability, the CO-OP program also seeks to promote integrated models of care and enhance competition in the Affordable Insurance Exchanges established under sections 1311 and 1321 of the Affordable Care Act; and

WHEREAS, to establish these CO-OPs, the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services Center for Consumer Information and Insurance Oversight issued an Invitation to Apply for loans to capitalize eligible prospective CO-OPs with a goal of having at least one in each state; and

WHEREAS, to respond to this invitation, the Ingham Health Plan joined with several other County Health Plans throughout Michigan to form the Michigan Consumers Health Care CO-OP (MCHCO); and

WHEREAS, the Centers for Medicare and Medicaid Services announced its award of \$72 million in financing for the new MCHCO in May 2012; and

WHEREAS, Health Management Associates (HMA) recognized the experience and expertise of Ingham County Health Department’s Health Plan Management Services (HPMS) and requested assistance in providing the start up core functions of the MCHCO; and

WHEREAS, HMA would like to enter into an agreement with the Health Department’s HPMS in the amount of \$103,000 to assist with providing the start up core functions; and

WHEREAS, it is estimated that it will take approximately 1,286 hours to complete the required scope of services at a rate of \$50 per hour for support staff and \$100 per hour for professional staff; and

WHEREAS, to fulfill the needs of this agreement, it is necessary to create an Electronic Health Care/Nurse Trainer position; and

WHEREAS, the position has been assessed by Human Resources at MNA Grade 3, with a salary range \$54,384 to \$65,287 (2011 rates) in the MNA contract; and

WHEREAS, the term of the agreement shall be from June 1, 2012 through December 31, 2012; and

WHEREAS, the Health Officer recommends that the Board of Commissioners authorize an agreement between the Health Department and Health Management Associates for the period of June 1, 2012 through December 31, 2012.

THEREFORE BE IT RESOLVED, that the Board of Commissioners authorizes an agreement with Health Management Associates for the period of June 1, 2012 through December 31, 2012.

BE IT FURTHER RESOLVED, that Health Plan Management Services will perform various core functions for this contract, including:

- Develop COOP project plan for CMS
- Develop and submit HMO application on behalf of COOP
- Develop customer service plan for COOP
- Establish HIPAA compliance plan
- Select and work with a third party administrator for the COOP
- Develop a quality assurance plan for the HMO application and COOP

THEREFORE BE IT RESOLVED, the Board of Commissioners authorizes the establishment and hiring of the position of Electronic Health Care/Nurse Trainer position, MNA Grade 3.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to make the necessary budget adjustments, and the Purchasing Department is authorized to issue any necessary purchase orders or purchase items needed.

BE IT FURTHER RESOLVED, that the hiring freeze and hiring delay are hereby waived for the Electronic Health Care/Nurse Trainer position.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.

## MEMORANDUM

TO: Dale Copedge, Board Chairperson

FROM: Renée Branch Canady, PhD, MPA, Health Officer

DATE: July 9, 2012

RE: Recommendation to authorize an agreement with the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties for the provision of co-located primary and behavioral health services

This is a recommendation to authorize an agreement with the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMH). The Ingham Community Health Center Network is working with CMH to provide integrated primary and behavioral health care services to patients on-site at CMH.

This agreement is mutually beneficial to the community health center network, CMH and its patients. CMH will provide the required space, utilities and communication system and the Community Health Center Network will provide the staff.

To effectively provide primary health care services for the general population at CMH, a Nurse Practitioner (MNA Grade 6 - \$82,795) position will need to be established and hired. An existing Clinic Assistant, UAW/TOPS Grade D - \$36,525, and an Administrative Assistant, UAW/TOPS Grade G - \$43,549, will also be relocated to this Health Center.

This project will also require the purchase of licenses and fees related to the Electronic Health Record, which will not exceed \$18,000. A copy of the budget and revenue projections is attached for your review.

I recommend that the Ingham County Board of Commissioners approve the attached resolution and authorize an agreement between the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties and the Ingham County Health Department Community Health Center Network. The term of the agreement will be from August 1, 2012 through December 31, 2012 with the option to automatically renew for twelve month periods, unless either party provides notice otherwise.

cc: Debra Brinson, MPA, Deputy Health Officer  
Barb Mastin, MA, Chief Operating Officer  
John Jacobs, CPA, Chief Financial Officer  
Jayson Welter, JD, Director of Policy, Programs and Compliance  
Jonathon MacGowen, CPA, MBA, Finance Coordinator  
Carolyn Redman, Project Specialist

Introduced by the Human Services, County Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO AUTHORIZE AN AGREEMENT WITH COMMUNITY MENTAL HEALTH AUTHORITY OF CLINTON, EATON AND INGHAM COUNTIES FOR THE PROVISION OF CO-LOCATED PRIMARY AND BEHAVIORAL HEALTH SERVICES**

WHEREAS, the Ingham County Health Department and the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties (CMH) have a long standing and successful partnership of providing co-located services within the Community Health Center Network locations; and

WHEREAS, this is a recommendation to authorize an agreement with CMH to provide integrated primary and behavioral health care services to patients on-site at CMH; and

WHEREAS, this agreement is mutually beneficial to the Community Health Center Network, CMH and its patients as CMH will provide the required space, utilities and communication system and the Community Health Center Network will provide the staff; and

WHEREAS, to effectively provide primary health care services for the general population at CMH, a Nurse Practitioner (MNA Grade 6 - \$82,795) will need to be established and hired; and

WHEREAS, this project also requires the purchase of licenses and fees related to the Electronic Health Record, not to exceed \$18,000; and

WHEREAS, the Ingham Community Health Center Board of Directors has reviewed and approved this agreement; and

WHEREAS, the Health Officer recommends that the Board of Commissioners authorize an agreement between the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties and the Ingham County Health Department.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes an agreement with the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties for the provision of co-located primary and behavioral health services.

BE IT FURTHER RESOLVED, that the term of the agreement will be from August 1, 2012 through December 31, 2012 with the option to automatically renew for twelve month periods, unless either party provides notice otherwise.

BE IT FURTHER RESOLVED, that the Board of Commissioners hereby establishes and authorizes the posting and hiring of a Nurse Practitioner (MNA Grade 6 - \$82,795) position.

BE IT FURTHER RESOLVED, that an existing Clinic Assistant, UAW/TOPS Grade D - \$36,525, and an Administrative Assistant, UAW/TOPS Grade G - \$43,549, will be relocated to this Health Center.

BE IT FURTHER RESOLVED, that the Board of Commissioners hereby authorizes the purchase of licenses and fees related to the Electronic Health Record, not to exceed \$18,000.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to make the necessary budget adjustments, and the Purchasing Department is authorized to issue any necessary purchase orders or purchase items needed.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.

Introduced by the Human Services Committee of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION HONORING EMPLOYEES OF THE SPARROW COMMUNITY HEALTH CENTER**

WHEREAS, the Sparrow Community Health Center started in 1986 as the “Friendship Clinic,” which was a volunteer initiative led by a physician and nurse practitioner to serve individuals experiencing homelessness; and

WHEREAS, in 1987 the Ingham County Health Department received its first federal grant to provide comprehensive health care to people experiencing homelessness; and

WHEREAS, in 1998, the Friendship Clinic became the Sparrow Community Health Center and moved to its current location; and

WHEREAS, in 2002, the Sparrow Community Health Center became a Federally Qualified Health Center Look-Alike; and

WHEREAS in 2009, the Sparrow Community Health Center became a Federally Qualified Health Center; and

WHEREAS, the dedicated employees of the Sparrow Community Health Center provide primary and mental health services to people of all ages, including people experiencing homelessness; and

WHEREAS, the Sparrow Community Health Center is operated by a team of individuals who are steadfast in their commitment to serving the area’s homeless individuals and all residents of Ingham County; and

WHEREAS, in 2011 these dedicated employees provided quality health care to 2,334 patients over 8,160 visits.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners hereby honors all employees of the Sparrow Community Health Center for their continued service to the residents of Ingham County.



**INGHAM HEALTH PLAN**  
**Frequently Asked Questions – Millage**

**1. Why does IHP need millage funding?**

- IHP's operating revenue sources are at risk – federal DSH funding capacity is declining.
- Currently IHP is considering freezing enrollment due to lack of provider capacity.
- Without additional resources, IHP will have to limit access to care for Ingham County's low-wage earners who are not eligible for publicly funded healthcare.

**2. Why now? Why is IHP asking the BOC to approve a ballot proposal after the U.S. Supreme Court has ruled that the Affordable Care Act (ACA) is constitutional?**

- IHP will continue to share a critical role in the Ingham County healthcare safety net to meet the County's goal of 100% access to health care.
- It is unlikely that the ACA will be fully implemented by 2014.
- If the ACA policies become fully available in 2014:
  - o Estimates show thousands of Ingham County residents will still not have access healthcare insurance due to cost.
    - It is estimated that 60% of IHP members will be eligible for Medicaid.
    - The remaining 40% are between 139% and 250% of the Federal Poverty Level (FPL). That means 4,000 members will not be eligible for Medicaid and may have difficulty affording coverage offered through the Exchange. Many will be eligible to opt out of mandated insurance coverage due to income and high medical expenses. They will still require services provided by IHP.
    - In Ingham County there are 13,200 uninsured residents that will qualify for the Medicaid expansion. Estimates show that in 2014 there will be a 40% take-up rate. The remaining 7,986 eligible individuals will need coverage until they can secure their Medicaid benefit.
- IHP will continue to serve this at-risk uninsured Ingham County population and reduce the costs of uncompensated care.

**3. What will the millage do?**

- Maintain IHP enrollment capacity for 2013
- Ensure access to health care services for all Ingham County residents beyond 2014
- Broaden services to benefit providers and members
- Allow IHP to serve as a "trusted, reliable" ACA navigator to those who need assistance to make health insurance choices

Introduced by the Human Services and Finance Committees of the:

**INGHAM COUNTY BOARD OF COMMISSIONERS**

**RESOLUTION TO SUBMIT TO THE ELECTORATE A SPECIAL MILLAGE QUESTION FOR HEALTH SERVICES FOR LOW INCOME UNINSURED FAMILIES AND ADULTS LIVING IN INGHAM COUNTY**

WHEREAS, the Board of Commissioners desire to continue to provide funding for healthcare services for low income, uninsured families and adults residing in Ingham County; and

WHEREAS, the Board of Commissioners has provided the financial stability necessary for sound planning through the facilitation of a local-federal funding match arrangement since 1998; and

WHEREAS, the current funds available through the federal funding is not sufficient to continue to provide access to medically necessary services for low income, uninsured residents in Ingham County.

THEREFORE BE IT RESOLVED, that the following question be submitted to a vote of the electorate in the election to be held on November 6, 2012:

**HEALTH CARE SERVICES FOR LOW INCOME UNINSURED FAMILIES AND ADULTS MILLAGE QUESTION**

For the purpose of providing a basic healthcare service delivery system for low-income residents of Ingham County who cannot afford health insurance and do not qualify for government health programs, including doctor visits, generic medications and essential preventative care such as early treatment and testing for cancer, diabetes and other serious illnesses, shall the Constitutional limitation of the amount of property taxes which may be assessed each year against all taxable real and personal property in Ingham County be increased by not more than 61/100 (0.61) of one (1) mill, \$0.61 per thousand dollars of state taxable valuation, as new additional millage for a period of three (3) years (2013-2015 inclusive). If approved and levied in full, this millage will raise an estimated \$4,314,685 in the first calendar year of the levy based on state taxable valuation.

YES [ ]

NO [ ]

BE IT FURTHER RESOLVED, that this question is hereby certified to the County Clerk.

BE IT FURTHER RESOLVED, that the County Clerk is hereby directed to place the proposal on the November 6, 2012 ballot and to be prepared and distributed in the manner required by law.