

CHAIRPERSON
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VICE-CHAIRPERSON
VICTOR CELENTINO

VICE-CHAIRPERSON PRO-TEM
ROBIN NAEYAERT

HUMAN SERVICES COMMITTEE
TERI BANAS, CHAIR
TODD TENNIS
RYAN SEBOLT
DEB NOLAN
CAROL KOENIG
THOMAS MORGAN
ROBIN NAEYAERT

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, OCTOBER 15, 2018 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 [October 1, 2018 Minutes](#)
Additions to the Agenda
Limited Public Comment

1. Health Center Board – Interviews
2. Medical Care Facility – Update on Additions/Renovations
3. Health Department
 - a. Resolution to Accept [Substance Use Disorder Funding](#) Award
 - b. Resolution to Authorize the First Year of a New Funding Cycle of the [Americorps*Vista Grant](#) 2018-2019
 - c. Resolution to Authorize an Amendment with [BCBSM](#) Administrative Services Agreement
 - d. Resolution to Authorize Agreements with [Wayne Children's Healthcare](#) Access Program to Act as the Fiduciary/Payee for Agency Funding

Announcements
Public Comment
Adjournment

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OR SET TO MUTE OR VIBRATE TO AVOID
DISRUPTION DURING THE MEETING**

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HUMAN SERVICES COMMITTEE

October 1, 2018

Draft Minutes

Members Present: Banas, Nolan, Koenig, and Sebolt,

Members Absent: Morgan, Naeyaert, and Tennis

Others Present: Audriyana Jaber, Mimli Vij, Linda Vail, Lori Noyer, Melissa Buzzard, Jared Cypher, Lindsey LaForte, and others.

The meeting was called to order by Chairperson Banas at 6:30 p.m. in Personnel Conference Room "D & E" of the Human Services Building, 5303 S. Cedar Street, Lansing, Michigan.

Approval of the September 17, 2018 Minutes

MOVED BY COMM. SEBOLT, SUPPORTED BY COMM. NOLAN, TO APPROVE THE MINUTES OF THE SEPTEMBER 17, 2018 HUMAN SERVICES COMMITTEE MEETING.

MOVED BY CHAIRPERSON BANAS TO AMEND THE MINUTES AS FOLLOWS:

Mr. Cypher stated that the Controller's Office had been working with the Budget Office and Fair Office to examine the Fair fund. He further stated that it was short by about ~~\$700,000~~ **107,000** this year.

This was considered a friendly amendment.

MOVED BY COMM. SEBOLT TO AMEND THE MINUTES AS FOLLOWS:

Commissioner Morgan stated that even if the County took everything in-house, it needed to be taken back **to the voters** and resold.

This was considered a friendly amendment.

THE MOTION CARRIED UNANIMOUSLY. Absent: Commissioners Morgan, Naeyaert, and Tennis.

Additions to the Agenda

Removed –

2. Medical Care Facility – Update on Additions/Renovations

Limited Public Comment

None.

MOVED BY COMM. SEBOLT, SUPPORTED BY COMM. NOLAN, TO APPROVE A CONSENT AGENDA CONSISTING OF THE FOLLOWING ACTION ITEMS:

5. Health Department
 - a. Resolution to Accept Funding from MDHHS for HIV Care Coordination
 - b. Resolution to Pay Wieland Deposit for Custom Aluminum Boards
 - c. Resolution to Approve a Third Five Year Extension of Reciprocal Agreements
6. Fair Office – Resolution to Amend the 2018 Fair Fund Budget
7. Parks Department
 - a. Resolution to Authorize an Amendment to City of East Lansing and Meridian Township Trails and Parks Millage Agreements
 - b. Resolution to Authorize an Amendment to City of Lansing Trails and Parks Millage Agreements
 - c. Resolution Honoring the Service of John Veenstra
8. Controller’s Office – Resolution Authorizing Adjustments to the 2018 Ingham County Budget

THE MOTION CARRIED UNANIMOUSLY. Absent: Commissioners Morgan, Naeyaert, and Tennis.

THE MOTION TO APPROVE THE ITEMS ON THE CONSENT AGENDA CARRIED UNANIMOUSLY. Absent: Commissioners Morgan, Naeyaert, and Tennis.

1. Youth Commission – Interviews

Audriyana Jaber interviewed for a position on the Youth Commission.

Mili Vij interviewed for a position on the Youth Commission.

MOVED BY COMM. SEBOLT, SUPPORTED BY COMM. NOLAN, TO APPOINT AUDRIYANA JABER AND MILI VIJ TO THE YOUTH COMMISSION.

THE MOTION CARRIED UNANIMOUSLY. Absent: Commissioners Morgan, Naeyaert, and Tennis.

3. Ingham Health Plan – Resolution Authorizing an Amendment to the 2018 Health Services Millage Contract with the Ingham Health Plan Corporation (IHPC)

MOVED BY COMM. KOENIG, SUPPORTED BY COMM. NOLAN, TO APPROVE THE RESOLUTION.

Commissioner Koenig stated that she wanted to pull the resolution for discussion to apologize to the IHPC Director, Lori Noyer, for grilling her at the at the last meeting. She further stated that Commissioner Tennis had mentioned that when he walked into the meeting the questioning was like cross-examination.

Commissioner Koenig stated she appreciated and respected the work that the IHPC did and she had a lot of faith in them. She further stated that she did asked a lot of questions and her tone may have been pointed but she did not intend to come across as not respecting or supporting the organization.

THE MOTION CARRIED UNANIMOUSLY. Absent: Commissioners Morgan, Naeyaert, and Tennis.

4. Sheriff's Office/Health Department – Jail Medical (*Discussion*)

Linda Vail, Health Officer, stated that she had been joined by Major Darin Southworth, Ingham County Sheriff's Office (ICSO), at the last Law & Courts Committee meeting for a discussion of Jail Medical.

Chairperson Banas stated that there had been a full discussion of this issue at the Law & Courts Committee and they had asked for more information including a Request for Proposal (RFP), and use for the Justice Millage programming funds toward Jail Medical. She further stated that the County was leery about making great changes, but this required some problem solving.

Ms. Vail stated that Jail Medical became an Ingham County Health Department (ICHD) responsibility about six years ago. She further stated that the ICHD had taken it over because it was experiencing difficulties under the ICSO.

Ms. Vail stated that she had been with ICHD for about four and a half years and, in that time, Jail Medical had always been difficult for ICHD. She further stated that this was adrift from the mission for the ICHD.

Ms. Vail stated that there were physicians who specialized in Jail Medical and had special certifications, but the Medical Directors at the ICHD did not have that specialization. She further stated that there were issues with the ICHD Call Center taking calls from the jail when the Jail Medical staff was not available, instead of calls from the ICHD Medical Center which they were supposed to be doing.

Ms. Vail stated that there were a lot of indirect costs to providing administrative support which was accounted for in grants, but had not been accounted for with Jail Medical. She further stated that those costs were handled by ICHD.

Ms. Vail stated that Chris DeHaven was a part-time manager over Jail Medical and the ICHD Medical Center. She further stated that Jail Medical drew her time away from other things that are more aligned with the mission of the ICHD.

Ms. Vail stated that Jail Medical posed a lot of challenges for ICHD. She further stated that the ICHD was not able to run 24 hours a day, 7 days a week, 365 days a year.

Ms. Vail stated that the lack of service at times resulted in the inmates being taken to the hospital. She further stated that they were not able to back fill for people who were out sick or on vacation, but other organizations may be able to backfill.

Ms. Vail stated that there were five nurse positions in Jail Medical and they had two vacancies since August, without a mechanism to backfill. She further stated that the Jail Medical nurses were not in the same union as the ICHD Medical Center nurse and qualifications between the two were different also.

Ms. Vail stated that she was not able to pull from other nurses in the ICHD to fill the needs of Jail Medical. She further stated that since the County was starting to plan the new Justice Complex facility, someone should be at the table to explain what was needed for the medical part of the facility.

Ms. Vail stated that this was a good time to examine this issue prior to the discussions about the physical needs for the Jail Medical facility. She further stated that she understood concerns about privatization and employees but quality care of inmates needed to be the top concern.

Ms. Vail stated that they if they issued a RFP now they could have time to compare the RFP with what was currently happening. She further stated that if ICHD was asked to continue providing Jail Medical, then they needed more resources.

Ms. Vail stated that Jail Medical needed a full-time manager and along with some other changes. She further stated that it was wise to have this done before the architect started working on the building design.

Ms. Vail stated that she was told that departments did not need permission to issue RFPs, but thought it would be wise to discuss this issue with the Board of Commissioners. She further stated that they would work to place Jail Medical employees in the ICHD as much as possible.

Ms. Vail stated that they had a number of medical assistants who were members of the United Auto Workers (UAW) and the ICHD always had openings for medical assistants. She further stated that it would be a bit more difficult to place the nurses.

Ms. Vail stated that the Jail Medical nurses were members of different bargaining units than the ICHD Medical Center nurses. She further stated that it was frequently included in the RFPs for Jail Medical to request that the company make priority of employees in their hiring process.

Ms. Vail stated that they would help to cover concerns for what would happen to employees. She further stated that there were companies out there that had expertise at correctional medicine and Ingham was the only County in the state to run Jail Medical.

Ms. Vail stated that she often liked to be the only County to do things, so that was not bad to say, but most counties used a private company. She further stated that this was an opportunity to look at what the challenges and options were present.

Chairperson Banas asked if Ms. Vail what the cost would be to the County if the ICHD continued to provide Jail Medical services.

Ms. Vail stated that the ICHD would bring back what changes were needed. She further stated that there would need to be a change in supervision.

Ms. Vail stated that they contracted with Michigan State University's (MSU) College of Nursing for the nurse practitioner. She further stated that covered 40 hours a week but MSU was hesitant a bit about renewing this agreement so additional changes may be needed there.

Ms. Vail stated that a Jail Medical Manager was needed and that change would have to happen.

Chairperson Banas asked how many hours a week Jail Medical provided service.

Ms. Vail stated that she was not sure the exact number of hours. She further stated that they did not cover weekends and some portion of each night was not covered.

Ms. Vail stated that Jail Medical did not have the ability to do diagnostic x-ray services because ICHD did not have that ability, but some of the outside vendors would be able to provide those services.

Commissioner Nolan asked about what it cost the ICHD to provide this coverage as far as indirect costs.

Ms. Vail stated that the budget was \$1.68 million for Jail Medical. She further stated that the indirect cost built in for grants that the services provided for the State were about 10-15%.

Ms. Vail stated that it was a cost to ICHD to provide Jail Medical and they redirected resources often as a result. She further stated that time spent on Jail Medical meant that the manager was missing out on quality measures, revenue opportunities and more.

Ms. Vail stated that it was difficult to assign a value to what Jail Medical was costing in terms of administrative costs. She further stated that a manager for Jail Medical would probably be an MCF 10 which would cost over \$100,000 annually.

Commissioner Nolan stated she appreciated the comment about mission drift. She further stated that she had heard of situations where people did not have medical coverage could end up in jail for medical care.

Ms. Vail stated that now 5% of the Health Manager's time, and 5% of the Physician's time was reported to Jail Medical no matter how much work they did. She further stated that the Health Manager had only been reporting time actually at the jail and not accounting for all of the time spent in her regular office dealing with Jail Medical Work.

Ms. Vail stated that this could not continue. She further stated that due to grants, they needed a careful accounting of where staff's time was utilized.

Commissioner Nolan asked if the Sheriff was supportive.

Ms. Vail stated that the Sheriff was supportive. She further stated that the former Sheriff had brought up making this change a while ago.

Ms. Vail stated that she had heard concerns from Judge Boyd and Judge Allen about issues with Jail Medical. She further stated that they tried their best to do the work and take care of inmates but this was the challenge.

Ms. Vail stated that they could fix the challenge and more resources could help make that fix; however, this would still be adrift of ICHD's mission. She further stated that an additional manager would really help.

Commissioner Nolan stated that she remembered the history of ICHD taking over Jail Medical and it had to do with the jail being fully certified and in compliance.

Ms. Vail stated that the Jail Administration used to cover handle all of the Jail Medical through their office.

Commissioner Nolan stated that under the Jail Administration the Jail Medical was not meeting the requirements needed for certification.

Chairperson Banas stated that Jared Cypher, Deputy Controller, had shown her some information that stated that Jail Medical provided 16-20 hours of services. She further stated that it did not include weekend hours.

Ms. Vail stated that service coverage went down when there were staff vacancies such as right now.

Chairperson Banas asked if the Jail Medical nurses worked 8 or 12 hour shifts.

Ms. Vail stated that hospital nurses commonly worked 12 hour shifts, but County nurses more commonly worked an 8 hour shift. She further stated that she was unsure of the shift length for the Jail Medical nurses.

Commissioner Sebolt stated that he had been clear about where he stood on privatization. He further stated that privatization was rarely ever as successful as it was promised.

Commissioner Sebolt stated that privatization rarely, if ever, saved as much money as promised. He further stated that privatization came with additional costs that were not included in the RFP.

Commissioner Sebolt stated that he did not think that privatization was a successful endeavor. He further stated that when the County approved the County Jail's Food Services privatization, he warned that it would start a slow creep into more privatization.

Commissioner Sebolt stated that it felt like that was what was happening.

Ms. Vail stated that she did not even know about that.

Commissioner Sebolt stated that he hated to say, "I told you so," but it felt that that was happening and this was a slow chipping away toward privatization. He further stated that they will privatize, and privatize, and privatize until there was so little being done by the County that they just privatized everything.

Commissioner Sebolt stated that this was not a successful way to go for the County. He further stated that unless there was a magic trick he would still be skeptical.

Chairperson Banas stated that she agreed with Ms. Vail that quality medical care was needed. She further stated that good time to examine this issue and push for more resources for the ICHD, if that was needed.

Chairperson Banas stated that maybe there would be a good firm to handle Jail Medical, but the Board of Commissioners needed to look at this. She further stated that if a director was uncomfortable with no manager somewhere in their department, then it needed to be examined.

Commissioner Sebolt stated that he agreed.

Commissioner Koenig stated that \$1.6 million was a lot of money. She asked if the Sheriff was fine with this or if that money was from somewhere else.

Ms. Vail stated that \$1.6 million was the amount of funding transferred to the ICHD from the ICSO.

Commissioner Koenig asked how many staff members would be laid off.

Ms. Vail stated that there would be eight positions. She further stated that it would affect five nurses, but two of those positions are currently vacant, two medical assistants, and an LPN.

Commissioner Koenig stated that she kept hearing from Ms. Vail that this was a hard service to provide.

Ms. Vail stated that this was difficult because this not what they were trained to do. She further stated that they tried but experienced challenges.

Ms. Koenig asked what the names of the private companies were.

Ms. Vail stated that they included Corizon and Correct Care Solutions.

Commissioner Koenig stated that there was no question that those companies would cost more than what they had currently budgeted. She asked if the County could create a new department that provided this services.

Commissioner Koenig stated that Ms. Vail was stating that the ICHD could not do Jail Medical.

Ms. Vail stated that she was not saying that, but it was not what they were trained to do.

Commissioner Koenig stated that maybe they could have a little department to handle Jail Medical. She further stated that she had spoken to the Sheriff and he was positive about making changes at that same time as they prepared to build the new facility.

Commissioner Koenig stated that the new facility probably would not be completed until 2022 but it was nice to have the ducks in a row. She further stated that it would help architecturally for the provider of Jail Medical to dictate their needs.

Discussion.

Commissioner Koenig stated that the timing to examine this issue could not be better.

Ms. Vail stated that was why she was bringing this to the Committee now. She further stated that doing Jail Medical differently was a maybe, but it was worth looking at it and making the decisions based on quality and patient care.

Ms. Vail stated that ICHD was currently struggling with Jail Medical.

Commissioner Sebolt stated that he wanted to be clear that he thought that quality patient care needed to be a priority, but he did not think that the County would get that through privatization. He further stated that a change may be needed, but privatization may not be the right change.

Commissioner Nolan stated that she commended Ms. Vail for looking down the road. She further stated that the new Justice Complex was a project that would not be done for another 3 years.

Commissioner Nolan stated that it was helpful to have the foresight to examine Jail Medical and look at options. She further stated that she appreciated it.

Ms. Vail stated that the Sheriff was not necessarily up to speed on Jail Medical because he was relatively new in that position and had a lot going on. She further stated that the issue was that there were a lot of gaps and holes that needed to be covered.

Ms. Vail stated that having a Jail Medical manager was essential. She further stated that Judge Boyd had contacted her a number of times to speak to her about medication issues.

Ms. Vail stated that she and Judge Boyd had met, discussed the issues, fixed the problems and then problems developed again. She further stated that there must be an answer.

Commissioner Koenig stated that she heard Ms. Vail state that Jail Medical was not meeting her standards and making her uncomfortable. She asked if the County made a department to handle Jail Medical should it be under ICHD or ICSO.

Ms. Vail stated that if completely separate from ICHD that would be even more costly and difficult. She further stated that Major Southworth stated at the Law & Courts Committee that the ICSO did not want that responsibility and they did not speak medical.

Chairperson Banas stated that she spoke with Ms. Vail earlier in the week and had asked about changing Jail Medical to a hybrid system where it was partially done by the County and partially privatized.

Chairperson Banas asked if it was possible to contract with services to back fill when needed.

Ms. Vail stated that the firms would not be interested in doing that because helping the County would not encourage the County to hire them and it would be working against themselves. She further stated that when she had worked in Kalamazoo there were some organizations that would fill in gaps, but she was not sure if they could provide that for nurses for backfill.

Ms. Vail stated that they did use temporary employees to some extent in ICHD. She further stated that it was not the easiest position to recruit people for as it involved working in the jail.

Commissioner Sebolt stated that in response to these companies backfilling positions that had been done to some extent by Canteen Food Services. He further stated that regarding the comment about not wanted to compete against themselves, it proved some of his concerns.

Commissioner Sebolt stated that of course patient care should be number one, but private companies always wanted profit above all. He further stated that patient care would be number two if they privatized because making money was always number one for private companies.

Commissioner Sebolt stated that the County would not keep quality patient care as top priority if they go private.

Chairperson Banas stated that the County would go forward for the RFP and bring back the information. She further stated that this was an issue that should be settled sooner rather than later, and it was a good time to explore this issue.

Chairperson Banas stated that this was a good time to plan the facility and make changes. She further stated with the difficulties they were experiencing, the Board of Commissioners should not leave ICHD hanging.

Chairperson Banas stated that the ICHD needed real resources now. She further stated that part of the trouble in government was that the offices were always working with the least amount of people possible.

Chairperson Banas stated that other areas of the County worked with less such as the Clerk's Office had less staff and the Sheriff's office has less Deputies. She further stated that they would not let this go without a conclusion.

Chairperson Banas stated that the Board of Commissioners should look at numbers soon and resolve the issue.

Commissioner Nolan stated that she wanted to comment that there would have been a report tonight about the Medical Care Facility, which was a premier care facility and nonprofit. She further stated that there was a waiting list for it.

Commissioner Nolan stated that there were many for-profit medical care facilities in the County too. She further stated that people did not have a choice but to use them because of the waiting list.

Commissioner Nolan stated that it was a good idea to have the County provide the services but it was not always possible.

Chairperson Banas stated that she would like to investigate ways to retain employees in Jail Medical even though it was a tough environment. She further stated that there may be ways to make the job more appealing.

Chairperson Banas stated that it was a necessary job because people who were incarcerated often had some serious medical and substance abuse issues, and very serious needs. She further stated that they needed to find a way to make this work.

Chairperson Banas stated that employees needed to understand that they were valued and maybe that was not always communicated well.

Commissioner Koenig stated that the Medical Care Facility acted as a nonprofit but could do it because they were funded by Medicaid and Medicare. She further stated that if Jail Medical could be funded in the same manner, it could be perfect.

Ms. Vail stated that inmates could not be covered by Medicaid or Medicare.

Commissioner Koenig stated that was true, but this needed to be changed. She further stated that this Country was a mess with health care.

Chairperson Banas thanked Ms. Vail for the discussion.

Announcements

None.

Public Comment

None.

Adjournment

The meeting was adjourned at 7:30 p.m.

OCTOBER 15, 2018 HUMAN SERVICES AGENDA STAFF REVIEW SUMMARY

ACTION ITEMS:

The Deputy Controller is recommending approval of the following resolutions

3. *Health Department*

a. *Resolution to Accept Substance Use Disorder Funding Award*

This resolution accepts a funding award of \$201,317 provided through the U.S. Department of Health Resources and Services Administration to expand access to integrated substance use disorder and mental health services effective September 1, 2018 through August 31, 2019.

b. *Resolution to Authorize the First Year of s New Funding Cycle of the Americorps*Vista Grant 2018-2019*

This resolution accepts a first year of a new funding cycle for the AmeriCorps*VISTA Program budget in the amount of \$142,413, effective September 6, 2018 through September 4, 2019.

c. *Resolution to Authorize an Amendment with BCBSM Administrative Services Agreement*

This resolution amends the Administrative Services Agreement with BCBSM effective October 1, 2018 through the duration of this agreement, and renews it automatically on an annual basis. This agreement is in place for paying claims from health care services provided through jail medical.

d. *Resolution Authorize Agreements with Wayne Children's Healthcare Access Program to Act as the Fiduciary/Payee for Agency Funding*

This resolution authorizes the acceptance of funds from WCHAP in the amount of \$487,290 where ICHD will act as their fiduciary/payee. This agreement will be effective October 1, 2018 through September 30, 2019. As the Medicaid Outreach Match Partner for WCHAP, ICHD will:

1. Receive funds from WCHAP in the amount of \$487, 290
2. Set up a system to provide quarterly reimbursement of costs.
3. Process Medicaid Outreach documentation required to draw Medicaid Outreach Match Funds.
4. Perform on site monitoring of WCHAP.
5. Forward any required reports as provided by WCHAP.

WCHAP will:

1. Provide quarterly financial reports of all expenses.
2. Provide quarterly reports for Medicaid Outreach.
3. Keep ICHD up-to-date on any changes in funding.

OTHER ITEMS:

1. *Health Center Board – Interviews*

2. *Medical Care Facility – Update on Additions/Renovations*

TO: Board of Commissioners Human Services, County Services, and Finance Committees
FROM: Linda S. Vail, MPA, Health Officer
DATE: September 25, 2018
SUBJECT: Accept Substance Use Disorder Funding Award
For the meeting agenda of October 15th, 16th, and 17th, 2018

BACKGROUND

Ingham County Health Department’s (ICHD’s) Community Health Centers (CHCs) wish to accept a funding award in the amount of \$201,317.00 provided through the U.S. Department of Health Resources and Services Administration (HRSA). This award will be used to implement and advance evidence-based strategies to expand access to integrated substance use disorder (SUD) and mental health services and will be effective September 1, 2018 through August 31, 2019. Subsequent year funding will be contingent upon implementation of the proposed project within eight months of the award.

In order to expand access to integrated substance use disorder and mental health services, this award will include the following creation of positions and purchases:

- 1.0 FTE Community Health Worker at \$38,572.55 (UAW Grade D, Step 5).
- 1.0 FTE Behavioral Health Consultant (Licensed Clinical Social Worker) at \$80,000.00 via an amendment to ICHD’s existing services agreement with Community Mental Health Authority of Clinton, Eaton and Ingham Counties (CMH-CEI).
- A one-time funding purchase of \$36,555.00 for supplies to equip the operational space at the Sparrow-VOA Health Center to accommodate the 1.0 FTE Ingham County Employee and the 1.0 Contractual Employee.

ALTERNATIVES

There are no alternatives.

FINANCIAL IMPACT

This acceptance of this award will be an increase in funding by \$201,317.00 for evidence-based strategies to expand access to integrated substance use disorder and mental health services in ICHD’s CHCs.

STRATEGIC PLANNING IMPACT

This resolution supports the overarching long-term objective of promoting accessible healthcare, specifically section A.1 (e) of the Action Plan – Expand access to healthcare for county residents, with an emphasis on the uninsured and underinsured.

OTHER CONSIDERATIONS

There are no other considerations.

RECOMMENDATION

Based on the information presented, I respectfully recommend authorizing ICHD to accept a funding award of \$201,317.00 provided through the U.S. Department of Health Resources and Services Administration to expand access to integrated substance use disorder and mental health services effective September 1, 2018 through August 31, 2019.

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

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION TO ACCEPT SUBSTANCE USE DISORDER FUNDING AWARD

WHEREAS, the Ingham County Health Department's (ICHD's) Community Health Centers (CHCs) wish to accept a funding award in the amount of \$201,317.00; and

WHEREAS, the funds are provided through the U.S. Department of Health Resources and Services Administration (HRSA); and

WHEREAS, this award will be used to implement and advance evidence-based strategies to expand access to integrated substance use Disorder (SUD) and mental health services; and

WHEREAS, this award will be effective September 1, 2018 through August 31, 2019; and

WHEREAS, subsequent year funding will be contingent upon implementation of the proposed project within 8 months of the award; and

WHEREAS, in order to expand access to integrated substance use disorder and mental health services, this award will include the following creation of positions and purchases:

- 1.0 FTE Community Health Worker at \$38,572.55 (UAW Grade D, Step 5).
- 1.0 FTE Behavioral Health Consultant (Licensed Clinical Social Worker) at \$80,000.00 via an amendment to the ICHD's existing services agreement with Community Mental Health Authority of Clinton, Eaton and Ingham Counties (CMH-CEI).
- A one-time funding purchase of \$36,555.00 for supplies to equip the operational space at the Sparrow-VOA Health Center to accommodate the 1.0 FTE Ingham County Employee and the 1.0 Contractual Employee; and

WHEREAS, this acceptance of this award will be an increase in funding by \$201,317.00 for evidence-based strategies to expand access to integrated substance use disorder and mental health services in ICHD's CHCs; and

WHEREAS, the Ingham Community Health Center Board recommends accepting the award of the \$201,317.00 from HRSA effective September 1, 2018 through August 31, 2019; and

WHEREAS, the Health Officer recommends accepting the award of the \$201,317.00 from HRSA effective September 1, 2018 through August 31, 2019.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners accepts the award of the \$201,317.00 from HRSA effective September 1, 2018 through August 31, 2019.

BE IT FURTHER RESOLVED, that the Board of Commissioners authorizes the creation of 1.0 FTE Community Health Worker position (\$38,572.55 UAW Grade D, Step 5).

BE IT FURTHER RESOLVED, that the Board of Commissioners authorizes amending the existing agreement with CMH-CEI to add a 1.0 FTE Behavioral Health Consultant at \$80,000.00.

BE IT FURTHER RESOLVED, that the Board of Commissioners authorizes a one-time funding purchase of \$36,555.00 for supplies to equip the operational space at the Sparrow-VOA Health Center to accommodate these additional 2.0 FTE positions.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to make any necessary budget adjustments and changes to the position allocation list consistent with this resolution.

BE IT FURTHER RESOLVED, that the Chairperson of the Ingham County Board of Commissioners is authorized to sign any necessary contract documents consistent with this resolution upon approval as to form by the County Attorney.

TO: Board of Commissioners Human Services and Finance Committees
FROM: Linda S. Vail, MPA, Health Officer
DATE: September 28, 2019
SUBJECT: Resolution to accept the first year of a new funding cycle of the AmeriCorps*VISTA Project
For the meeting agendas of October 15 and October 17, 2018

BACKGROUND

Ingham County Health Department (ICHD) wishes to accept the first year of a new FY18-19 funding cycle from the Corporation for National and Community Services (CNCS) to be used for the AmeriCorps *VISTA Program. This cycle of funding will allow 16 AmeriCorps *VISTA members to perform national services for strengthening and supplementing efforts to eliminate poverty and poverty-related human, social, and environmental issues. On behalf of the Power of We Consortium (PWC), ICHD was the recurring recipient of grant funds in support of the AmeriCorps* VISTA Project from 2006-2010, and annual renewal of such funding was accepted by resolution (#06-333, #07-307, #08-321, #09-159, #10-055, #10-396). Through Resolution # 17-358, ICHD was the recipient of grant funds in support of the AmeriCorps*VISTA Project from the CNCS, used for the FY17-18 funding cycle. This first year of a new FY18-19 funding cycle from CNCS totaling \$142,413 will be effective September 6, 2018 through September 4, 2019.

ALTERNATIVES

There are no alternatives.

FINANCIAL IMPACT

CNCS has granted ICHD the first year of funding for the AmeriCorps*VISTA Program with a total budget of \$142,413 for the 2018-2019 fiscal year comprised of \$10,000 of CNCS funds and \$132,413 local resources, and authorizes a grant agreement with the CNCS for the time period of September 6, 2018 through September 4, 2019. Out of a total of 12 FTE AmeriCorps*VISTA members, 11 FTE will be placed in host sites selected through an RFP process and 1 FTE AmeriCorps*VISTA Leader will be placed with the ICHD AmeriCorps* VISTA program.

The Local Resources are drawn from:

- 1) Cash contributions from the external host sites totaling \$110,340
- 2) General funds from Ingham County \$22,073

From the local resources, CNCS is requiring payment of the VISTA Cost Share in the amount of \$49,244.

Separate from the \$142,413 budget, CNCS will pay the following member expenses directly to the members out of additional Federal dollars: For living allowances, CNCS will pay \$150,134, for education and end of service awards, CNCS will pay \$94,720, and for health insurance CNCS will pay \$43,200, for a total of \$288,054. All funding for the AmeriCorps VISTA Program was included in the FY2018-19 budget.

STRATEGIC PLANNING IMPACT

This resolution supports the overarching long-term objective of Promoting Accessible Healthcare, specifically section A.1(e) of the Action Plan – Expand access to healthcare for county residents, with an emphasis on the uninsured and underinsured.

This resolution also supports Goal F. Human Resources and Staffing: Attract and retain exceptional employees who reflect the community they serve and who prioritize public service

OTHER CONSIDERATIONS

There are no other considerations.

RECOMMENDATION

Based on the information presented, I respectfully recommend approval of the attached resolution to accept a first year of a new funding cycle for the AmeriCorps*VISTA Program budget in the amount of \$142,413, effective September 6, 2018 through September 4, 2019.

Introduced by the Human Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

**RESOLUTION TO AUTHORIZE THE FIRST YEAR OF A NEW FUNDING CYCLE
OF THE AMERICORPS*VISTA GRANT 2018-2019**

WHEREAS, Ingham County Health Department (ICHD) wishes to accept the first year of a new FY18-19 funding cycle from the Corporation for National and Community Services (CNCS) to be used for the AmeriCorps *VISTA Program; and

WHEREAS, this cycle of funding will allow 16 AmeriCorps *VISTA members to perform national services for strengthening and supplementing efforts to eliminate poverty and poverty-related human, social, and environmental issues; and

WHEREAS, ICHD was the recurring recipient of grant funds in support of the AmeriCorps* VISTA Project from 2006-2010, and annual renewal of such funding was accepted by resolution (#06-333, #07-307, #08-321, #09-159, #10-055, #10-396); and

WHEREAS, through Resolution # 17-358, ICHD was the recipient of grant funds in support of the AmeriCorps*VISTA Project from the CNCS, used for the FY17-18 funding cycle; and

WHEREAS, this first year of a new FY18-19 funding cycle from CNCS totaling \$142,413 will be used for the AmeriCorps *VISTA Program and will be effective September 6, 2018 through September 4, 2019; and

WHEREAS, CNCS has granted ICHD the first year of funding for the AmeriCorps*VISTA Program with a total budget of \$142,413 for the 2018-2019 fiscal year comprised of \$10,000 of CNCS funds and \$132,413 of local resources, and authorizes a grant agreement with the CNCS for the time period of September 6, 2018 through September 4, 2019; and

WHEREAS, out of a total of 12 FTE AmeriCorps*VISTA members, 11 FTE will be placed in host sites selected through an RFP process and 1 FTE AmeriCorps*VISTA Leader will be placed with the ICHD AmeriCorps* VISTA program; and

WHEREAS, the local resources are drawn from:

- 1) Cash contributions from the external host sites totaling \$110,340
- 2) General funds from Ingham County \$22,073

WHEREAS, from the Local Resources, CNCS is requiring payment of the VISTA Cost Share in the amount of \$49,244; and

WHEREAS, separate from the \$142,413 budget, CNCS will pay the following member expenses directly to the members out of additional Federal dollars: For living allowances, CNCS will pay \$150,134, for education and end of service awards, CNCS will pay \$94,720, and for health insurance CNCS will pay \$43,200, for a total of \$288,054; and

WHEREAS, all funding for the AmeriCorps VISTA Program was included in the FY2018-19 budget; and

WHEREAS, the Health Officer recommends that the Board of Commissioners accept the first year of a new FY18-19 funding cycle from the Corporation for National and Community Services (CNCS) to be used for the AmeriCorps *VISTA Program effective September 6, 2018 through September 4, 2019.

THEREFORE BE IT RESOLVED, that the Board of Commissioners accept the first year of a new FY18-19 funding cycle from the Corporation for National and Community Services (CNCS) to be used for the AmeriCorps *VISTA Program effective September 6, 2018 through September 4, 2019.

BE IT FURTHER RESOLVED, that this cycle of funding will allow 16 AmeriCorps *VISTA members to perform national services for strengthening and supplementing efforts to eliminate poverty and poverty-related human, social, and environmental issues.

BE IT FURTHER RESOLVED, that CNCS has granted ICHD the first year of funding for the AmeriCorps*VISTA Program with a total budget of \$142,413 for the 2018-2019 fiscal year comprised of \$10,000 of CNCS funds and \$132,413 of local resources, and authorizes a grant agreement with the CNCS for the time period of September 6, 2018 through September 4, 2019.

BE IT FURTHER RESOLVED, that out of a total of 12 FTE AmeriCorps*VISTA members, 11 FTE will be placed in host sites selected through an RFP process and 1 FTE AmeriCorps*VISTA Leader will be placed with the ICHD AmeriCorps* VISTA program.

BE IT FURTHER RESOLVED, that the local resources are drawn from:

- 1) Cash contributions from the external host sites totaling \$110,340
- 2) revenue from Ingham County \$22,073

BE IT FURTHER RESOLVED, that the Health Officer is authorized to submit the 2018-2019 budget electronically through the CNCS E-Grants system, and tentatively electronically approve the Memorandum of Agreement, and after approval as to form by the County Attorney, the Memorandum of Agreement is final.

TO: Board of Commissioners Human Services Committee
FROM: Linda S. Vail, MPA, Health Officer
DATE: September 28, 2018
SUBJECT: Amendment to Administrative Services Agreement with BCBS

BACKGROUND

Ingham County Health Department (ICHHD) wishes to amend the Administrative Services Agreement with Blue Cross Blue Shield of Michigan (BCBSM), for paying claims from health care services provided through jail medical. BCBSM has made adjustments to the fees associated with prescription services and fees gained upon subrogation which requires an amendment to the agreement to disclose these fee changes. Execution of this amendment is necessary to maintain the contract, regardless of ICHD's use of the prescription or subrogation service October 1, 2018 through the duration of the agreement, and will renew automatically on an annual basis.

ALTERNATIVES

There are no alternatives.

FINANCIAL IMPACT

ICHHD does not utilize the prescription drug benefits nor the subrogation services affected by the amendment; therefore there are no increased fees or costs to the agreement association with entering this amendment.

STRATEGIC IMPACT

This resolution supports the overarching long-term objective of Promoting Accessible Healthcare, specifically section A.1(e) of the Action Plan – Expand access to healthcare for county residents, with an emphasis on the uninsured and underinsured.

OTHER CONSIDERATIONS

There are no other considerations.

RECOMMENDATION

Based on the information presented, I respectfully recommend authorization to amend the Administrative Services Agreement with BCBSM effective October 1, 2018 through the duration of this agreement, and to renew automatically on an annual basis.

Amendment to Administrative Services Contract

Ingham County Inmates
117977

This amendment ("Amendment") to the Administrative Services Contract, effective on your 2018 Renewal Date ("Contract"), is between Blue Cross Blue Shield of Michigan ("BCBSM") and the undersigned group ("Group"), as the plan sponsor and administrator of its group health care plan.

In consideration of their mutual promises, the Contract will be amended as follows:

1. The Subrogation section of Article II—Group Responsibilities—is amended by adding the following sentence at the end of the first paragraph:

On and after the effective date of the new Shared Savings Program, which shall not be sooner than January 1, 2018, BCBSM will retain as administrative compensation a percentage of all funds recovered through subrogation efforts as set forth in Schedule A.

2. The Pharmacy Rebates section of Article II—Group Responsibilities is deleted in its entirety and replaced with the following:

Pharmacy Benefits.

To the extent Group has engaged BCBSM to administer prescription drug claims for its Plan, BCBSM or its subcontractor shall process all prescription drug claims according to Group's benefit design and BCBSM's participating pharmacy contracts.

Group acknowledges that payments to participating pharmacies may include prescription drug costs, dispensing fees, and incentive fees for dispensing a generic drug or compounding a prescription drug.

Group understands and agrees that BCBSM may directly contract with pharmaceutical manufacturers or BCBSM may contract with various subcontractors that have contracts with pharmaceutical manufacturers ("Rebate Administrators"). Because of such contracts with Rebate Administrators, Group agrees that Group will not submit, either directly or indirectly through a third party, prescription drug claims to any pharmaceutical manufacturers for rebates. The Rebate Administrators retain a portion of the gross rebates collected from drug manufacturers as a claims processing and rebate administration fee ("Rebate Administrator Fee"). In addition, notwithstanding anything to the contrary in this Contract, BCBSM retains a portion of the rebates as administrative compensation ("BCBSM Rebate Service Fee"). The Rebate Administrator Fee and BCBSM Rebate Service Fee are set forth in Schedule A. If, pursuant to BCBSM's agreement with a Rebate Administrator, the Rebate Administrator Fee changes during a Contract Year, such change shall be effective and automatically incorporated in Group's Schedule A following 30 days' notice by BCBSM to Group. BCBSM will pass on to Group rebates net of any fees set forth in the Schedule A. If BCBSM receives rebate adjustments or de minimis amounts of unidentifiable rebates that cannot practicably be tied to particular claims, BCBSM will proportionally allocate those rebate amounts to customers with pharmacy benefits.

3. Except as set forth in this Amendment, all other terms and conditions of the Contract shall remain in full force and effect. If there is a conflict between the terms of this Amendment and the Contract, the terms of this Amendment shall prevail.

Signatures

BCBSM:

GROUP: _____

By: (Signature)	By: (Signature)
Name: (Print)	Name: (Print)
Title:	Title:
Date:	Date:

Introduced by the Human Services Committee of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

**RESOLUTION TO AUTHORIZE AN AMENDMENT WITH
BCBSM ADMINISTRATIVE SERVICES AGREEMENT**

WHEREAS, Ingham County Health Department (ICHHD) wishes to amend the Administrative Services Agreement with Blue Cross Blue Shield of Michigan (BCBSM), for paying claims from health care services provided through jail medical; and

WHEREAS, BCBSM has made adjustments to the fees associated with prescription services and fees gained upon subrogation which requires an amendment to the agreement to disclose these fee changes; and

WHEREAS, execution of this amendment to acknowledge this disclosure is necessary to maintain the contract, regardless of ICHHD's use of the prescription or subrogation service; and

WHEREAS, ICHHD does not utilize the prescription drug benefits nor the subrogation services affected by the amendment; and

WHEREAS, there are no increased fees or costs to the agreement association with entering this amendment; and

WHEREAS, the Health Officer recommends authorizing an amendment to the BCBSM Administrative Services Agreement for paying claims from the health care services provided through jail medical effective October 1, 2018 through the duration of the agreement and will renew automatically on an annual basis.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes an amendment to the BCBSM Administrative Services Agreement for paying claims from the health care services provided through jail medical effective October 1, 2018 through the duration of the agreement and will renew automatically on an annual basis.

BE IT FURTHER RESOLVED, that BCBSM has made adjustments to the fees associated with prescription services and fees gained upon subrogation which requires an amendment to the agreement to disclose these fee changes.

BE IT FURTHER RESOLVED, that execution of this amendment to acknowledge this disclosure is necessary to maintain the contract, regardless of ICHHD's use of the prescription or subrogation service.

BE IT FURTHER RESOLVED, that ICHHD does not utilize the prescription drug benefits nor the subrogation services affected by the amendment.

BE IT FURTHER RESOLVED, that there are no increased fees or costs to the agreement association with entering this amendment

BE IT FURTHER RESOLVED, the Chairperson of the Ingham County Board of Commissioners is authorized to sign any necessary contract documents consistent with this resolution upon approval as to form by the County Attorney.

TO: Board of Commissioners Human Services & Finance Committees
FROM: Linda S. Vail, MPA, Health Officer
DATE: September 21, 2018
SUBJECT: Fiduciary/Payee Agreements with Wayne Children's Healthcare Access Program
For the meeting agendas of October 15 and October 17, 2018

BACKGROUND

Ingham County Health Department (ICHD) wishes to enter into an agreement with Wayne Children's Healthcare Access Program (WCHAP) to act as the Medicaid Outreach Match Partner. ICHD has partnered with WCHAP since 2014, acting as a Medicaid Match Partner whereby WCHAP offers a pediatric medical home implementation program now in its eighth year. WCHAP coordinates an integrated system of early childhood support services that is voluntary, accessible, and culturally competent for families with children who are on Medicaid or are Medicaid eligible. WCHAP provides this service through a variety of avenues including telephone consultation, education, transportation, home visits, interpretation services, and asthma case management services. WCHAP sustainability is dependent upon receiving Medicaid Outreach Match funds. This agreement would be effective October 1, 2018 through September 30, 2019.

As the Medicaid Outreach Match Partner for WCHAP, ICHD will:

1. Receive funds from WCHAP in the amount of \$487, 290
2. Set up a system to provide quarterly reimbursement of costs.
3. Process Medicaid Outreach documentation required to draw Medicaid Outreach Match Funds.
4. Perform on site monitoring of WCHAP.
5. Forward any required reports as provided by WCHAP.

WCHAP will:

1. Provide quarterly financial reports of all expenses.
2. Provide quarterly reports for Medicaid Outreach.
3. Keep ICHD up-to-date on any changes in funding.

ALTERNATIVES

There are no alternatives.

FINANCIAL IMPACT

ICHD will retain a 10% administrative fee of the total funds received during the duration of these agreements; this includes the Medicaid Match funds.

STRATEGIC PLANNING IMPACT

Goal A. Service to Residents: Provide easy access to quality, innovative, cost-effective services that promote well-being and quality of life for the residents of Ingham County. Strategy 1. Strive to make facilities and services user-friendly b. Expand Medicaid enrollment activities throughout Ingham County.e. Expand access to health care for County residents, with an emphasis on the uninsured and the under-insured.

OTHER CONSIDERATIONS

There are no other considerations.

RECOMMENDATION

Based on the information presented, I respectfully recommend approval of the attached resolution to authorize the acceptance of funds from WCHAP in the amount of \$487,290 where ICHD will act as their fiduciary/payee. This agreement will be effective October 1, 2018 through September 30, 2019.

Introduced by the Human Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION TO AUTHORIZE AGREEMENTS WITH WAYNE CHILDREN'S HEALTHCARE ACCESS PROGRAM TO ACT AS THE FIDUCIARY/PAYEE FOR AGENCY FUNDING

WHEREAS, Ingham County Health Department (ICHD) wishes to enter into an agreement with Wayne Children's Healthcare Access Program (WCHAP) to act as the Medicaid Outreach Match Partner; and

WHEREAS, ICHD has partnered with WCHAP since 2014, acting as a Medicaid Match Partner whereby WCHAP offers a pediatric medical home implementation program now in its eighth year; and

WHEREAS, WCHAP coordinates an integrated system of early childhood support services that is voluntary, accessible, and culturally competent for families with children who are on Medicaid or are Medicaid eligible; and

WHEREAS, WCHAP provides this service through a variety of avenues including telephone consultation, education, transportation, home visits, interpretation services, and asthma case management services; and

WHEREAS, WCHAP sustainability is dependent upon receiving Medicaid Outreach Matching funds; and

WHEREAS, this agreement would be effective October 1, 2018 through September 30, 2019; and

WHEREAS, as the fiduciary/payee of the WCHAP funds, ICHD will:

1. Receive funds from WCHAP up to \$487,290
2. Set up a system to provide an initial payment to WCHAP and subsequent reimbursement of costs
3. Process Medicaid Outreach documentation required to draw Medicaid Outreach Matching Funds
4. Perform on-site monitoring of WCHAP
5. Forward any required reports as provided by WCHAP; and

WHEREAS, WCHAP will:

1. Provide quarterly financial reports of all expenses
2. Provide quarterly reports for Medicaid Outreach
3. Keep ICHD up-to-date on any changes in funding; and

WHEREAS, the Health Officer recommends that the Ingham County Board of Commissioners authorize the acceptance of funds up to \$487,290, from WCHAP for ICHD to act as its fiduciary/payee for the period of October 1, 2018 through September 30, 2019.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes the acceptance of funds from WCHAP up to \$487,290 Medicaid Match Partner for the period of October 1, 2018 through September 30, 2019.

BE IT FURTHER RESOLVED, that ICHD will retain a 10% administrative fee of the total funds received during the duration of this agreement including the Medicaid Match funds.

BE IT FURTHER RESOLVED, that the Controller/Administrator is authorized to make any necessary budget adjustments consistent with this resolution

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