



Community

MENTAL HEALTH
CLINTON • EATON • INGHAM

BOARD OF DIRECTORS MEETING MINUTES

December 20, 2018

6:00 p.m., G11C

Community Mental Health Authority
812 E. Jolly Road
Lansing, MI 48910

Staff Present:

Shana Badgley, Jana Baylis, Karla Block, Aleshia Echols, Gwenda Summers, Joanne Holland, Sara Lurie, Ericanne Spence

Excused: Sharon Blizzard, Stacia Chick, Jennifer Stanley, MD, Joyce Tunnard

Public Present

David Pohl

Carol Koenig

Union Representative

Jeff Fleming, Local 459

Call to Order

The meeting was called to order by Vice Chairperson, Jim Rundborg at 6:00 p.m.

Roll Call

Joe Brehler, Dale Copedge, Paul Palmer, Jim Rundborg, Al Platt, Kay Randolph-Back, Chris Swope, Kay Pray, Raul Gonzales, Kam Washburn

Excused

Dianne Holman

Previous Meeting Minutes:

ACTION:

MOVED by Raul Gonzales and SUPPORTED by Paul Palmer to approve the meeting minutes of November 29, 2018, as written.

MOTION CARRIED unanimously.

Adoption of Agenda:

MOVED by Kam Washburn and SUPPORTED by Paul Palmer to approve the revised December 20, 2018 meeting agenda.

MOTION CARRIED unanimously.

Public Comment on Agenda Items:

Jeff Fleming requested that the board consider approving the tentative agreements for Local 459 Residential, Large & RN Unit enclosed in this evening's packet.

Recognition - Kam Washburn

With great sadness Sara Lurie announced that tonight would be Kam Washburn's last CMHA-CEI Board meeting and shared that Mr. Washburn has been a CMHA-CEI board member since January, 2013. With that being said, it is with great pleasure to present him with a plaque thanking him for six years of dedicated and committed service to the CMHA-CEI Board of Directors. In addition, Carol Koenig commented that she feels very fortunate to have served on this board during Mr. Washburn's tenure and shared how much she has appreciated all of his wisdom and guidance through the years, it has been an absolute pleasure!

Mr. Washburn announced that David Pohl, Clinton County Commissioner will be replacing him on the CMHA-CEI Board of Directors and introduced Mr. Pohl to the board.

Recognition - Carol Koenig

Sara Lurie presented Carol Koenig with a certificate of appreciation thanking her for five years of service through November, 2018 which was when Ms. Koenig resigned her positions as Ingham County Chair and CMHA-CEI board member to seek a public defender position through Ingham County. Ms. Lurie stated that she is holding on to a plaque for Ms. Koenig until such time as a new Ingham County Commissioner is appointed to the CMHA-CEI Board of Directors in hopes that she will reinstate the CMHA-CEI board position.

Happy Birthday - Kay Pray

Sara Lurie asked that the board members join her in wishing Kay Pray a happy birthday and thanked Ms. Pray for her attendance this evening. The board members then enjoyed birthday cake in Ms. Pray's honor.

Ms. Lurie then wished all of the CMHA-CEI board members an enjoyable holiday and expressed appreciate for all of their dedicated and committed service throughout the year.

MDHHS

Chris Swope inquired about rumors that he has heard that the new administration may be considering splitting MDHHS. Discussion ensued.

ACTION: As information becomes available, Sara Lurie will keep board members updated.

Mid State Health Network Update

Joe Brehler reported that there was no new information to report as the MSHN Board has not met since the last CMHA-CEI Board meeting.

CEO Report

Sara Lurie introduced Ericanne Spence, Director Substance Abuse Services who presented an Overview of Substance Abuse Services and Corrections Mental Health (attached). Highlights from the presentation included:

- How Consumers Access Publicly Funded SUD Treatment
- Number admitted in SAS
- Diagnosis at Admissions – SAS program
- MSHN Region by Substance
- MSHN Region by County
- Corrections Mental Health
- Data for Corrections MH
- SAS Accomplishments FY18 (Clinton County Counseling Center, Correctional Assessment and Treatment Services, House of Common, The Recovery Center, SAS Administration
- Outcomes
- Contact Information

Strategic Plan Action Plan (2018 – 2023) - Handout

Sara Lurie distributed the FY19 Strategic Plan Action Plan which identifies the committee leads for each goal. Throughout the year the board will receive updates and

on an annual basis will receive a progress report.

Program & Planning Committee

New Expense Contract: The Arc of Mid-Michigan

ACTION:

MOVED by Raul Gonzales and **SUPPORTED** by Kay Randolph-Back that the Community Mental Health Authority of Clinton, Eaton, Ingham Counties Board of Directors authorize CMHA-CEI to enter into a new contract and to purchase independent facilitation services from the Arc of Mid-Michigan and pay the rates listed below for the retroactive period of December 1, 2018 through September 30, 2019.

Rate Schedule

Service	Code	Unit Rate	Rate
Independent Facilitation	H0032	Encounter	\$125* Up to 2 Units of Service (or \$250) Per PCP. One unit for Pre-Planning, prior to the date of the PCP. One unit for the Person Centered Planning Meeting.

* This rate is inclusive of all activities related to the PCP process; Pre-planning, telephone calls, travel, attendance at the Person Centered Planning Meeting, documentation provided to the Case Manager, and any other follow-up meetings deemed necessary. As demonstrated, two encounters can be billed per PCP for Pre-Planning needs as well as for the PCP meeting itself and be paid accordingly. The maximum is 2 encounters per PCP.

MOTION CARRIED unanimously.

New Expense Contract: Home Management Company, LLC, Tom Johnson

Carpentry, LLC

ACTION:

MOVED by Raul Gonzales and **SUPPORTED** by Chris Swope that the Community Mental Health Authority of Clinton, Eaton, Ingham Counties Board of Directors authorize CMHA-CEI to enter into new contracts with Home Management Company, LLC and Tom

Johnson Carpentry, LLC at the total cost identified below for Environmental Modifications for the period of 1/1/19 to 9/30/19.

RATE SCHEDULE

Service	Company	Code & Modifier	Rate	Unit
Environmental Modification (Habilitation Supports Waiver Service)	Home Management Company, LLC	S5165 HK	\$20,022.00	Per Service
	Tom Johnson Carpentry, LLC	S5165 HK	\$16,975.00	Per Service

MOTION CARRIED unanimously.

Finance Committee

Expense Contract Amendment: Elder Ridge Manor II, LLC

ACTION:

MOVED by Joe Brehler and **SUPPORTED** by Kay Randolph-Back that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties authorize CMHA-CEI to enter into renewal contract with Elder Ridge Manor II (license number AL330380274) to purchase specialized residential services for the period of December 1, 2018 through September 30, 2019, and pay a per diem rate specific to an identified consumer of \$129.03, independent of any amount paid to the home for room and board as calculated in the consumer’s ability to pay. For all other consumers in the home the previously Board approved amount will remain \$81.37.

MOTION CARRIED unanimously.

Expense Contract Amendment: Homelife Inc.

ACTION:

MOVED by Joe Brehler and **SUPPORTED** by Raul Gonzales that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties authorize CMHA-CEI to amend its current contract with Homelife, Inc. to reflect the per diem of \$224.72 to be paid from January 1, 2019 through September 30, 2019.

MOTION CARRIED unanimously.

New Expense Contract: OnSolve – Mass Notification Services

ACTION:

MOVED by Joe Brehler and SUPPORTED by Kay Randolph-Back that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties authorize CMHA-CEI to enter into a new contract with OnSolve to purchase the mass notification services product Send Word Now from OnSolve for the period of January 1, 2019 to December 31, 2019 and pay \$14,750 for those services.

MOTION CARRIED unanimously.

Expense Contract Renewal: Aflac Continental American Insurance Company 2019

Plan Year

ACTION:

MOVED by Joe Brehler and SUPPORTED by Kam Washburn that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties authorize CMHA-CEI to enter into contract renewal with Aflac Continental American Insurance Company (CAIC) to purchase employee supplemental accident and critical illness insurance benefits from Aflac Continental American Insurance Company (CAIC) for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

Accident:

CAIC GROUP ACCIDENT ADVANTAGE - PLAN Series 7700 With High Option - 24 Hour Plan With Wellness Benefit

Coverage	Premium
Employee	\$7.48
Employee & Spouse	\$10.69
Employee & Child	\$14.26
Family	\$17.47

Critical Illness:

CAIC GROUP CRITICAL ILLNESS Series 2800 - Additional Benefits Rider Occupational HIV Rider Heart Event Rider UNI-TOBACCO for Employee

Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$2.31	\$3.81	\$5.31	\$6.81	\$8.31	\$9.81	\$11.31	\$12.81	\$14.31	\$15.81
30-39	\$3.26	\$5.70	\$8.15	\$10.59	\$13.04	\$15.49	\$17.93	\$20.38	\$22.83	\$25.27
40-49	\$6.33	\$11.84	\$17.36	\$22.87	\$28.39	\$33.90	\$39.42	\$44.93	\$50.45	\$55.96
50-59	\$9.86	\$18.90	\$27.95	\$36.99	\$46.04	\$55.09	\$64.13	\$73.18	\$82.23	\$91.27
60-64	\$15.21	\$29.61	\$44.01	\$58.41	\$72.81	\$87.21	\$101.61	\$116.01	\$130.41	\$144.81

CAIC GROUP CRITICAL ILLNESS Series 2800 - Additional Benefits Rider Occupational HIV Rider Heart Event Rider UNI-TOBACCO for Spouse

Age	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
18-29	\$2.31	\$3.06	\$3.81	\$4.56	\$5.31	\$6.06	\$6.81	\$7.56	\$8.31
30-39	\$3.26	\$4.48	\$5.70	\$6.93	\$8.15	\$9.37	\$10.59	\$11.82	\$13.04
40-49	\$6.33	\$9.08	\$11.84	\$14.60	\$17.36	\$20.11	\$22.87	\$25.63	\$28.39
50-59	\$9.86	\$14.38	\$18.90	\$23.43	\$27.95	\$32.47	\$36.99	\$41.52	\$46.04
60-64	\$15.21	\$22.41	\$29.61	\$36.81	\$44.01	\$51.21	\$58.41	\$65.61	\$72.81

Expense Contract Renewal: Advanced Benefit Solutions D/B/A ARORx 2019-2020

Plan Year

ACTION:

- to enter into contract renewal with Advanced Benefit Solutions D/B/A ARORx to purchase employee pharmacy benefits from Advanced Benefit Solutions D/B/A ARORx for the period of January 1, 2019 to December 31, 2020 and pay fees per the rate schedule below.

Financial Terms and Conditions

Traditional Offering		Year 1	Year 2
Retail			
Brand	Discount	16.50%	16.50%
GER includes SSG	Discount	81%	81.1%
	Dispensing Fee	\$1.00/net paid claim	\$1.00/net paid claim
Retail 90			
Brand	Discount	22.50%	22.50%
GER includes SSG	Discount	81%	81.10%
	Dispensing Fee	\$1.00/net paid claim	\$1.00/net paid claim
Mail			
Brand	Discount	24%	24%
GER includes SSG	Discount	83%	83%
	Dispensing Fee	\$1.00/net paid claim	\$1.00/net paid claim
Specialty			
Brand	Discount	13.50%	13.50%
Generic	Discount	See Discount Sheet	See Discount Sheet
Rebates			
	Retail Brand	\$50.74/brand	\$56.48/brand
	Mail/Retail 90 Brand	\$140.29/brand	\$155.25/brand
	Exclusive Specialty 30 day	\$393.75/rebateable brand	\$447.97/rebateable brand
Fees			
	Appeals First Level	Included	Included
	Independent Review	\$375	\$375

The following claims are excluded from Rebate Guarantees: claims with a member cost share 100% after deductibles have been satisfied, claims adjudicated through a government sponsored program or pharmacy, OTC claims, 340B claims, COB claims, Discount Card claims, LTC/HI/ITU pharmacy claims, cosmetics, cosmetic drugs, appliances, devices, bandages, heat lamps, braces, splints, and artificial appliances, health and beauty aids, cosmetics and dietary supplements, biosimilar drugs, vaccines, claims older than 180 days, claims through Sponsor-owned, university, pharmacies located on premises of a Sponsor, claims that are reversed, and claims with invalid identifiers.

- The following claims are excluded from Discount Guarantees: claims adjudicated through a government sponsored program or pharmacy, 340B claims, COB claims, Discount Card claims, LTC/HI/ITU pharmacy claims, Compound drugs, Limited Distribution Specialty Drugs, OTC, Manual claims, Medical Supplies claims, Vaccines and out of network claims.
- The Drug Classification determination is made based on indicators from a single nationally recognized source such as MediSpan. Single source generics fall under the generic guarantee.
- Discounts are guaranteed at the client level and cannot be offset.

Expense Contract Renewal: CIGNA 2019-2020 Plan Year

ACTION:

- to enter into contract renewal with CIGNA (Life Insurance Company of North America) to purchase employee Life, Short Term Disability (STD), Long Term Disability (LTD), Voluntary Life and Voluntary AD&D insurance coverage from

CIGNA (Life Insurance Company of North America) for the period of January 1, 2019 to December 31, 2020 and pay fees per the rate schedule below.

Renewal Rate Summary

Community Mental Health Authority of Clinton, Eaton and Ingham Counties

Product	Policy #s	Inforce Rate	Renewal Rate	Rate Basis	% Change
Basic Life	FLX 966179	\$0.139	\$0.139	per \$1,000 of coverage	0%
Basic AD&D	OK 967724	\$0.015	\$0.015	per \$1,000 of coverage	0%
Voluntary Life- Employee*	FLX 966179	step rates	step rates	per \$1,000 of coverage	0%
Voluntary Life- Spouse*	FLX 966179	step rates	step rates	per \$1,000 of coverage	0%
Voluntary Life- Child	FLX 966179	.20	.20	per \$1,000 of coverage	0%
Long-Term Disability	LK 964237	\$0.35	0.35	per \$100 of covered payroll	0%
Short Term Disability	LK 751631	Class 1: .29 Class 2: .46	Class 1: .29 Class 2: .46	per \$1,000 of coverage	0%
Rate Guarantee Period	All lines to renew on 1/1/2021				

Cigna reserves the right to change premium rates if any of the following occurs:

- The policy terms change
- A division, subsidiary, eligible company, or class is added/deleted
- There is a change of more than 10% in the number of eligible employees since the last census was provided
- Please see appendix for proposed renewal step rates

Appendix I: Age-Banded and Class Level Rates

VOLUNTARY TERM LIFE RATE SUMMARY	
Coverage	Premium Rate
Voluntary Term Life	
Employee	See Step Rates Table below
Voluntary Dependent Life	
Spouse	See Step Rates Table below
Child	\$0.20 per \$1,000

VOLUNTARY LIFE INSURANCE STEP RATES FOR EMPLOYEE AND SPOUSE		
Age	Employee Rate per \$1,000	Spouse Rate per \$1,000
<20-24	\$0.115	\$0.154
25-29	\$0.100	\$0.129
30-34	\$0.115	\$0.134
35-39	\$0.164	\$0.175
40-44	\$0.238	\$0.245
45-49	\$0.380	\$0.386
50-54	\$0.596	\$0.609
55-59	\$0.904	\$0.936
60-64	\$1.286	\$1.649
65-69	\$2.186	\$2.875
70-74	\$3.893	\$5.133
75-99	\$7.849	\$9.997

The number of authorized hours per the individual's level of care and need.

Expense Contract Renewal: Delta Dental 2019 Plan Year

ACTION:

- to enter into contract renewal with Delta Dental of Michigan to purchase employee dental benefits from Delta Dental of Michigan for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

Service Fees	Rates per subscriber per month
Composite Administrative Fee	\$4.87
Enrollee only	\$39.45
Enrollee with one dependent	\$72.55
Enrollee with two or more dependents	\$123.41

Expense Contract Renewal: The Hartford Group 2019 Plan Year

ACTION:

- to enter into contract renewal with The Hartford Group to purchase retiree health benefits from The Hartford Group for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

 THE HARTFORD			
NOTES: **Rates shown are proposed, FINAL rates are based on actual enrollment & underwriting approval. ** Rates are Medical Fully Insured/Rx Self funded Illustrative *Taxes not included*			
Type of Group	Total Enrolled	Current Monthly Cost	Renewal Monthly Cost
65-69	14	\$344.69	\$351.69
70-74	23	\$374.04	\$381.04
75-79	6	\$404.03	\$411.03
80+	6	\$414.28	\$421.28
Total Members	49		
Monthly Total		\$18,338	\$18,681
Annual Total Cost:		\$220,061	\$224,177
Difference vs Current			\$4,116
DISCLAIMERS		< Please read prior to making any decision >	

Expense Contract Renewal: Infinisource 2019 Plan Year

ACTION:

- to enter into contract renewal with Infinisource to purchase COBRA administration services and COBRA compliance notices from Infinisource for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

**COMMUNITY MENTAL HEALTH AUTHORITY-CEI
2019 COBRA RATES**

***Health Insurance Monthly Premiums
2019***

INSURANCE CARRIER	SINGLE	DOUBLE	FAMILY
PHP High Deductible Health Plan- \$1,350/2,700 Deductible	437.84	1050.78	1313.48
PHP HRA 1A- No Deductible	604.26	1438.08	1795.44
PHP HRA 1B- \$250/\$500 Deductible	560.47	1332.99	1664.07

***Dental Insurance Monthly Premiums
2019***

INSURANCE CARRIER	SINGLE	DOUBLE	FAMILY
Delta Dental	40.24	74.00	125.88
Midwestern	25.20	49.17	84.04

***Vision Insurance Monthly Premiums
2019***

INSURANCE CARRIER	SINGLE	DOUBLE	FAMILY
VSP	4.83	9.65	15.41

*** Includes a 2% Administrative Fee**

**** PHP HRA includes HRA Factor**

Expense Contract Renewal: VSP 2019 Plan Year

ACTION:

- to enter into contract renewal with VSP to purchase employee vision benefits from VSP for the period of January 1, 2018 to December 31, 2019 and pay fees per the rate schedule below.

VISION	VSP
SINGLE	4.74 /MO
DOUBLE (2 Persons)	9.46 /MO
FAMILY (More than 2 persons)	15.11 /MO

Expense Contract Renewal: MaxorPlus, Ltd. 2019-2020 Plan Year

ACTION:

- to enter into contract renewal with MaxorPlus, Ltd. to purchase employee pharmacy benefits from MaxorPlus, Ltd. for the period of January 1, 2019 to December 31, 2020 and pay fees per the rate schedule below.

EXHIBIT C
Financial Terms

1. Retail Prescriptions. For each Covered Drug dispensed by a Participating Pharmacy to a Member, Client shall reimburse MaxorPlus an amount equal to (1) the lesser of the Participating Pharmacy's Usual and Customary Price or the applicable rate plus dispensing fee listed in the Section 1, (2) plus any applicable sales or use taxes, (3) less the Member's Co-Payment. Client is responsible for the payment of any applicable sales or use taxes, and CLIENT shall reimburse MaxorPlus for all taxes paid on its behalf by Participating Pharmacies.

The actual amount paid to the Participating Pharmacy may be more or less than the amount paid to MaxorPlus by Client.

Discount Rates and Dispensing Fees

Category	Year 1	Year 2
Brand Drugs		
Retail 30-Day Discount Rate	AWP-16.50%	AWP-16.50%
Retail 30-Day Dispensing Fee	\$1.00	\$1.00
Retail 90-Day Discount Rate	AWP-22.50%	AWP-22.50%
Retail 90-Day Dispensing Fee	\$1.00	\$1.00
Generic Drugs		
Retail 30-Day Discount Rate	AWP-81.00%	AWP-81.10%
Retail 30-Day Dispensing Fee	\$1.00	\$1.00
Retail 90-Day Discount Rate	AWP-81.00%	AWP-81.10%
Retail 90-Day Dispensing Fee	\$1.00	\$1.00

"Retail" means Covered Drugs filled by Participating Pharmacies to Members.

"30-Day" means all prescriptions filled at Participating Pharmacies with a days' supply of 1 to 83 days.

"90-Day" means prescriptions filled at Participating Pharmacies with a days' supply of 84 to 90 days.

Usual and Customary Claims (U&C) are included in the brand & generic discount guarantees.

2. Mail Order Pharmacy. For Covered Drugs dispensed by Maxor Mail to Members, Client shall pay (1) the minimum effective guarantees listed in the chart below (2) plus any applicable sales or use taxes or fees, (3) less any Co-Payment.

Maxor Mail Aggregate Effective Guarantees

Category	Year 1	Year 2
Brand Discount Rate	AWP-24.00%	AWP-24.00%
Brand Dispensing Fee	\$1.00	\$1.00
Generic Discount Rate	AWP-83.00%	AWP-83.00%
Generic Dispensing Fee	\$1.00	\$1.00

Usual and Customary Claims (U&C) are included in the brand & generic discount guarantees.

3. Chronic Injectable/Specialty Pharmacy. For each Prescription dispensed by Maxor Specialty to a Member, Client shall pay MaxorPlus the applicable amount as follows:

Category	Year 1	Year 2
----------	--------	--------

MXPPBM0118

23

The information contained herein is confidential, proprietary and constitutes trade secrets of MaxorPlus, Ltd. and is not for distribution to anyone other than the client named herein and the client's authorized representatives.

30-Day Specialty Brand Discount Rate	AWP-13.50%	AWP-13.50%
Specialty Brand Dispensing Fee	\$1.00	\$1.00
30-Day Specialty Generic Discount	See attached schedule	See attached schedule
Specialty Generic Dispensing Fee	\$1.00	\$1.00

4. **Special Reimbursement for Certain Drugs.** Certain drugs that become available on the market from time to time will be priced separately from, and thus not subject to the reduced contracted reimbursement rate, due to, among other things, specialized manufacturer processes, limited availability or extraordinary shipping requirements. Such drugs might include compounds. MaxorPlus shall provide Client with a list of such drugs, and their corresponding reimbursement rates (which are generally no less than full AWP), upon request. Participating Pharmacies may dispense these drugs to Members unless the Benefit Plan design would otherwise exclude these drugs or the Client notifies MaxorPlus in writing of its objections. Compounds will require Client approval if the plan cost exceeds \$300.

5. **Administrative Services and Fees.**

Ad hoc reports	Included
Administrative Prior Authorizations such as vacation override, refill too soon, etc.	Included
Appeals Level One	Included
Clinical Prior Authorization & other benefit coverage rules	Included
Quantity and dosing limits	Included
Step Therapy Program	Included
Connectivity charges to online system	Included
ID Cards (initial cards)	Included
Mailed to Members	Included
ID Cards (additional or replacement)	Included
Paper Claims Processing	Included
Appeals Level Two (Medical Determinations/Physician Review)	Cost of services with a maximum of \$ 375 per appeal

MXPPBM0118

24

The information contained herein is confidential, proprietary and constitutes trade secrets of MaxorPlus, Ltd. and is not for distribution to anyone other than the client named herein and the client's authorized representatives.

Participating Pharmacy Audit

Cost of services not to exceed the amount recovered

6. Rebates

MAXORPLUS will provide the following minimum guarantees for each applicable year. All rates listed in this Section 6 are on a per brand Rx basis.

Category	Year 1	Year 2
Retail 1-83 Day Supply	\$50.74	\$56.48
Retail 84+ Day Supply	\$140.29	\$155.25
Mail	\$140.29	\$155.25
Specialty	\$393.75	\$447.97

Rebate guarantees listed in this Section 6 are contingent upon using the MaxorPlus Advantage or Preferred Formulary in its entirety.

Rebated Brand Claims exclude (i) cosmetic drugs, (2) appliances, devices, bandages, heat lamps, braces, splints, and artificial appliances, (iii) health and beauty aids, cosmetics, and dietary supplements, (iv) over the counter products, other than the diabetic supplies, and other than any over the counter products that are covered by the Plan as communicated to MaxorPlus during the bidding process, (v) Claims submitted directly by Members, (vii) Medicaid subrogation Claims, (viii) Claims older than 180 days, (ix) Claims through Sponsor-owned, university, long term care, or 340B pharmacies, (x) Medicaid fee-for-services Claims, (xi) Claims that are reversed, (xii) Claims with invalid identifiers (i.e. provider identifiers), and (xiii) Claims pursuant to a 100% Member Copayment Plan.

Rebates are also contingent on Plan sponsor funding 50% or greater of the aggregate annual costs of all covered drugs dispensed for all Members within the applicable plan.

MXPPBM0118

25

The information contained herein is confidential, proprietary and constitutes trade secrets of MaxorPlus, Ltd. and is not for distribution to anyone other than the client named herein and the client's authorized representatives.

MOTION CARRIED unanimously.

New Expense Contract: Rx Reins Stop Loss 2019 Plan Year

ACTION:

MOVED by Joe Brehler and SUPPORTED by Chris Swope that the Community Mental Health Authority of Clinton, Eaton, Ingham Counties Board of Directors authorize CMHA-CEI to enter into contract with Rx Reins to purchase aggregate stop loss insurance for prescription drug benefits from Maxor ARORx for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

Monthly Attachment Factors:	No. of Employees	Option A
Employee Only	220	208.50
Employee + One	82	500.00
Employee + Family	116	625.00
Minimum Aggregate Attachment Point (MAAP)		1,912,440.00
Maximum Annual Benefit Amount		2,000,000.00
Aggregate Premium:		
Premium (PEPM)	418	9.00
Premium % of MAAP		2.35%
Estimated Annual Premium		45,144.00
Minimum Annual Premium		43,000.00
Semi Annual Premium		21,500.00

MOTION CARRIED unanimously.

New Expense Contract: Physicians Health Plan 2019 Plan Year

ACTION:

MOVED by Joe Brehler and SUPPORTED by Kam Washburn that the Community Mental Health Authority of Clinton, Eaton, Ingham Counties Board of Directors authorize CMHA-CEI to enter into contract with Physicians Health Plan to purchase employee healthcare benefits from Physicians Health Plan for the period of January 1, 2019 to December 31, 2019 and pay fees per the rate schedule below.

PHP Plan only rates:

		Med Premium Per Month
PHP HRA	Single	307.36
B	Double	737.66
	Family	922.08
	Sponsored Dependent	0.00
PHP HRA	Single	307.36
A	Double	737.66

	Family	922.08
	Sponsored Dependent	0.00
PHP HDHP	Single	429.25
	Double	1030.18
	Family	1287.73
	Sponsored Dependent	0.00

MOTION CARRIED unanimously.

Access Ad Hoc Committee

Sara Lurie reported that at its December 3, 2018 meeting, the following items were highlighted:

- FY18 Demographic Data Report
- FY17/18 Outreach Initiatives by program
- October online Screening platform
- Strategic Plan Action Plan Goals
- Access & Video Summary Sheet
- CCBHC Grant Update

Consumer Advisory Council

Raul Gonzalez reported that at its December 6, 2018 meeting the following items were highlighted:

- Lame Duck Session Update
- HCBS and CSDD Community Connect Expo
- HCBS Community Update Newsletter
- This is my Brave
- CAC Member Update
- Review and Update to the CACS By-Laws
- Save the Date: CMHA-CEI Annual Community Breakfast Event
- Winter Warm Up

Recipient Rights Committee

ACTION:

MOVED by Paul Palmer and SUPPORTED by Raul Gonzales that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties approve the 2018 “Desired Outcomes for the Recipient Rights Office” and the 2018 “Recommendations to the CMHSP Board” suggested by the Recipient Rights Committee. These recommendations will be submitted as part of the CEI Recipient

Rights Annual Report to the Michigan Department of Health and Human Services, Office of Recipient Rights.

MOTION CARRIED unanimously.

Human Resources Committee

Fourth Quarter EEO Report

ACTION:

MOVED by Kam Washburn and SUPPORTED by Chris Swope that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties accept the fourth quarter EEO Report from July 1, 2018 through September 30, 2018.

MOTION CARRIED unanimously.

Labor Relations Fourth Quarter Grievance Report

DISCUSSION:

Kam Washburn reported that for this fiscal year, we have had 7 grievances. Last year, we had 12. The year prior, 20 and the highest number of grievances we have had in one fiscal year was 37. Mr. Washburn stressed that it is important to understand that this has been achieved due to the strong union/management relationship that has been established over the years by union representative, Jeff Fleming and the Chief Human Resources Officer, Sharon Blizzard and the HR team. Going forward, the strategic plan also includes initiatives to address hiring and recruitment. The weekly union/management meetings allow for questions and concerns to be addressed up front which allows problems to be resolved before they reach the grievance level. This is a compliment to the employees, senior Leadership, and to the union in this agency.

Labor Relations Fourth Quarter Grievance Report

ACTION:

MOVED by Kam Washburn and SUPPORTED by Dale Copedge that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties accept the Fourth Quarter Grievance Report from July 1, 2018 through September 30, 2018.

MOTION CARRIED unanimously.

Building and Sites Ad Hoc Committee

Sara Lurie reported that the next Building and Sites Ad Hoc Committee meeting is scheduled for Wednesday, January 9, 2019 at 4:00 p.m., G11-C, 812 E. Jolly Road, Lansing, MI.

Old Business

None.

New Business

CMHA-CEI FY18-19 Calendar of Board and Committee Meeting Schedule

ACTION:

MOVED by Kay Randolph-Back and SUPPORTED by Kam Washburn that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties approve the proposed FY18-19 Calendar of Board and Committee Meeting schedule as written.

MOTION CARRIED unanimously.

Tentative Agreement: OPEIU Local 459 – Residential Unit

ACTION:

MOVED by Chris Swope and SUPPORTED by Raul Gonzales that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties

- ratifies the Tentative Agreements reached between the Employer and the Local 459 Residential Unit for the extension of the October 1, 2015 through September 30, 2020 collective bargaining agreement through September 30, 2022, as presented by staff on December 20, 2018.

Tentative Agreement: OPEIU Local 459 – Large and RN Units

ACTION:

- ratifies the Tentative Agreements reached between the Employer and the Local 459 Large and RN Units for the extension of the October 1, 2015 through September 30, 2020 collective bargaining agreements through September 30, 2022, as presented by staff on December 20, 2018.

MOTION CARRIED unanimously.

Tentative Agreement: Local 512 – Physician’s Unit

ACTION:

MOVED by Chris Swope and SUPPORTED by Kam Washburn that the Board of Directors of Community Mental Health Authority of Clinton, Eaton, and Ingham Counties

- ratifies the Tentative Agreements reached between the Employer and the Local 512 Physicians’ Unit for the extension of the October 1, 2015 through September 30, 2019 collective bargaining agreement through September 30, 2022, as presented by staff on December 20, 2018.

Tentative Agreement: Local 512 – Supervisors’ Unit

ACTION:

- ratifies the Tentative Agreements reached between the Employer and the Local 512 Supervisors Unit for the extension of the October 1, 2015 through September 30, 2019 collective bargaining agreement through September 30, 2022, as presented by staff on December 20, 2018.

MOTION CARRIED unanimously.

ANNOUNCEMENTS

New Year’s Bash Employee Appreciation

Sara Lurie announced that the New Year’s Bash Employee Appreciation is scheduled for Thursday, January 10, 2019 from 12 – 2 and 3 – 5 at the University Club of Lansing, 3435 Forest Avenue, Lansing, MI and extended an invitation to all board members.

Dr. Martin Luther King Jr., Luncheon

Sara Lurie announced that if you are interested in tickets for the upcoming luncheon scheduled for Monday, January 21, 2019 at 11am, at the Lansing Center, please contact Aleshia Echols.

Adjournment

The meeting was adjourned at 7:15 p.m. The next meeting is scheduled for Thursday, January 17, 2019, 812 E. Jolly Road, G11-C, Lansing, MI beginning at 6:00 p.m.

Minutes Submitted by:

Aleshia Echols

Executive Administrative Assistant

