

# MINUTES

**BAY ARENAC BEHAVIORAL HEALTH  
BOARD OF DIRECTORS  
HEALTH CARE IMPROVEMENT & COMPLIANCE COMMITTEE MEETING  
Wednesday, September 6, 2023 at 5:00 pm  
William B. Cammin Clinic, Bay Room, 1010 N. Madison Avenue, Bay City, MI 48708**

<b>Committee Members:</b>	<b>Present</b>	<b>Excused</b>	<b>Absent</b>	<b>Committee Members:</b>	<b>Present</b>	<b>Excused</b>	<b>Absent</b>	<b>Others Present:</b>
Robert Pawlak, Ch	_____	X	_____	Patrick McFarland	X	_____	_____	BABH: Karen Amon, Sarah Holsinger, Jesse Bellinger, and Sara McRae  Legend: M-Motion; S-Support; MA- Motion Adopted; AB-Abstained
Robert Luce, V Ch	X	_____	_____	Colleen Maillette, Ex Off	X	_____	_____	
Tim Banaszak	X	_____	_____	Richard Byrne, Ex Off	X	_____	_____	
Ernie Krygier	X	_____	_____					

	Agenda Item	Discussion	Motion/Action
1.	Call to Order & Roll Call	Committee Vice Chair, R. Luce, called the meeting to order at 5:00 pm.	On motion of C. Maillette and support of E. Krygier, R. Pawlak was excused. The motion passed unanimously.
2.	Public Input (Maximum of 3 Minutes)	There were not any members of the public present.	
3.	Corporate Compliance Report 3.1) Corporate Compliance Report	3.1) K. Amon provided the corporate compliance report noting the trainings completed with internal and provider staff, an update on privacy investigations, and that the focus has been on the delegated managed care site review.	3.1) No action was necessary
	3.2) Corporate Compliance Committee meeting notes from July 11, 2023	3.2) The Committee reviewed the notes.	3.2) No action was necessary
4.	Other Reports 4.1) Primary Network Operations and Quality Management Committee meeting notes from July 13, 2023	4.1) The Committee reviewed the notes.	4.1) No action was necessary
5.	Unfinished Business	There was not any unfinished business presented to the committee.	

6.	<p>New Business</p> <p>6.1) Leadership Dashboard Report</p> <p>6.2) Quality Assessment &amp; Performance Improvement Program (QAPIP) Report</p> <p>6.3) Security Risk Assessment</p>	<p>6.1) K. Amon reviewed the categories for substantiated fraud and abuse investigations as follow up from the last meeting. K. Amon and J. Bellinger also reviewed the dashboard reports noting fraud and abuse investigations, privacy and security investigations, regional fraud and abuse investigations and trends, information technology (IT) usage and storage space. There were discussions regarding the amount of storage space and whether it is sufficient.</p> <p>6.2) S. Holsinger reviewed the QAPIP report with the Committee noting the goals identified in the plan including the count of adverse events, behavior treatment events, completion of crisis plan, risk events, number of days to resolve a grievance, number of days to resolve an appeal, consumers who are screened for diabetes, consumers who receive lab work to monitor diabetes, consumers who are screened for cardiovascular disease, evidence of primary care coordination, children served that have meaningful improvement in their assessment scales, quality of care record reviews, audited services with documentation, Medicaid event verification reviews, plan of service completion within 15 days, and the Michigan Mission Based Performance Indicators. There were general discussion commending staff for the hard work happening behind the scenes and the responsibility of the prescribing physician to coordinate screening for diabetes due to the mental health medications having the side effect risks.</p> <p>6.3) J. Bellinger reviewed the security risk assessment with the Committee noting the assessment is required by federal law to ensure electronic protected health information is received, created, and safely secured. BABH is compliant.</p>	<p>6.1) No action was necessary</p> <p>6.2) No action was necessary</p> <p>6.3) No action was necessary</p>
7.	Adjournment	On motion of E. Krygier and support of P. McFarland, the meeting adjourned at 5:32 pm. The motion passed unanimously.	

  
Robert Luce, Committee Vice Chair