

MINUTES

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS CORPORATE COMPLIANCE COMMITTEE MEETING

Thursday, February 6, 2025 at 5:00 pm
Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

Committee Members:	Present	Excused	Absent	Committee Members:	Present	Excused	Absent	Others Present:
Robert Pawlak, Ex Off, Ch	X			Patrick McFarland		X		BABH: Karen Amon, Chris Pinter, and Sara McRae
Christopher Girard, V Ch	X			Pam Schumacher	X			
Tim Banaszak	X			Richard Byrne, Ex Off	X			
Patrick Conley	X							Legend: M-Motion; S-Support; MA-Motion Adopted; AB-Abstained

	Agenda Item	Discussion	Motion/Action
1.	Call to Order & Roll Call	Committee Chair, R. Pawlak, called the meeting to order at 5:00 pm.	On motion of T. Banaszak and support of C. Girard, P. McFarland was excused. The motion was adopted unanimously.
2.	Public Input (Maximum of 3 Minutes)	There were not any members of the public present.	
3.	Unfinished Business	There was not any unfinished business.	
4.	New Business 4.1) Corporate Compliance Report 4.2) Annual Litigation Report	4.1) K. Amon provided the corporate compliance report noting policies and procedures related to corporate compliance have been reviewed. There were a few procedure changes. There were a few procedure changes that did not require Board approval. 4.2) K. Amon reviewed the annual litigation report noting there was not any litigation this year. K. Amon conveyed this is a yearly report required by Midstate Health Network (MSHN). The report is being discontinued after this year. There were general discussions regarding why the requirement was removed from the general fund contract and that it is a region requirement for reporting.	4.1) No action was necessary 4.2) No action was necessary

4.3) Centers for Medicare & Medicaid (CMS) Office of Inspector General (OIG) Work Plan for 2025	4.3) K. Amon reviewed components the OIG work plan relevant to behavioral health services including audit of Medicaid provider enrollment and screening activity, remote patient monitoring services, compliance with requirements for children in foster care placed in qualified residential treatment programs, and Medicaid personal care services.	4.3) No action was necessary
4.4) Quarterly Fraud & Abuse Report to Midstate Health Network (MSHN)	4.4) K. Amon reviewed the quarterly report of all fraud and abuse investigations and audits. K. Amon also reviewed the financial impact to BABH as result of the complaint activity. There were general discussions regarding clarification of the overpayments resulting from the complaint activity and the report was believed to possibly be incorrect. Administration will verify the financial impacts and report back. There were further discussions related to missing progress notes, the process for documentation, and the disciplinary action taken if this process is not followed. Administration will get more details on the specific situation of missing progress notes and report back.	4.4) No action was necessary
4.5) Corporate Compliance Plan	4.5) K. Amon reviewed the purpose of the corporate compliance plan, noted it is reviewed yearly, and provided updates on the program priorities. There were general discussions related to the number of new regulations added however no regulations seem to be removed, the increased workload for staff, and the parallel trend of increased administrative positions and reporting requirements at the Michigan Department of Health and Human Services since 2019. This has only increased the administrative burden on BABH staff but has not shown a benefit in providing services to consumers.	4.5) On motion of C. Girard and support of T. Banaszak, the 2025 Corporate Compliance Plan was referred to the full Board for approval. The motion passed unanimously.
4.6) Corporate Compliance Plan Semi-Annual Report	4.6) K. Amon reviewed the semi-annual report noting compliance activities including monitoring, auditing, risk assessments, and education.	4.6) No action was necessary
4.7) Commission on Accreditation of Rehabilitation Facilities (CARF) Survey Report	4.7) K. Amon reported the CARF survey has been extended until April or May. The extension letter will be included in the February Board agenda packet. There were general discussions regarding the accreditation period is three years.	4.7) No action was necessary

	4.8) Dashboard Review	4.8) K. Amon reviewed the dashboard reports noting trends of increased fraud and abuse investigations. K. Amon also reviewed the Information Technology dashboards, phishing test email results, and data from the Blumira detection software. There were general discussions related to how feedback is reported to staff from the phishing email tests, firewall protections, backup systems, insurance coverage, virtual private network (VPN), dual authentication, and the Bay County breach.	4.8) No action was necessary
5.	Adjournment	On motion of C. Girard and support of P. Schumacher, the meeting adjourned at 5:42 pm. The motion passed unanimously.	


Robert Pawlak, Committee Chair