

MINUTES

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS

PROGRAM COMMITTEE MEETING

Thursday, February 12, 2026 at 5:00 pm

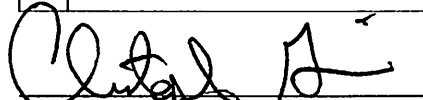
Room 225, Behavioral Health Center, 201 Mulholland Street, Bay City, MI 48708

Committee Members:	Present	Excused	Absent		Present	Excused	Absent	Others Present:
Christopher Girard, Ch	X	_____	_____	Sally Mrozinski	X	_____	_____	BABH: Karen Amon, Nicole Sweet, Stacy Krasinski, M. Prusi, and Sara McRae Legend: M-Motion; S-Support; MA- Motion Adopted; AB-Abstained
Pam Schumacher, V Ch	X	_____	_____	Pat McFarland, Ex Off	_____	X	_____	
Jerome Crete	X	_____	_____	Robert Pawlak, Ex Off	X	_____	_____	
Shelley King	X	_____	_____					

	Agenda Item	Discussion	Motion/Action
1.	Call To Order & Roll Call	The Committee Chair, C. Girard, called the meeting to order at 5:00 pm.	On the motion by R. Pawlak and support by J. Crete, P. McFarland was excused. The motion passed 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) Clinical Program Review: Emergency & Access Services (EAS) Review of MI Department of Health and Human Services (MDHHS) Annual Report, S. Krasinski	4.1) S. Krasinski reviewed the statistical data for EAS including access screenings completed, call volume, pre-admission screenings, crisis contacts, after hours contract work, services provided in coordination with the jail and juvenile detention center, services provided to individuals in the hospital or on a court order, mobile response team services, assisted treatment services, and telephone monitoring services. N. Sweet reviewed the annual submission to MDHHS and the wait list report for autism, community living support (CLS), and residential services. N. Sweet reported there are not any individuals on the waitlist for CLS services. There were general discussions regarding how MDHHS uses the report, specifics of a warm transfer, and acronyms for developmental disability, mental illness, and severe emotional disturbance.	4.1) No action was necessary

<p>4.2) Request for Clinical Privileges: a) Heather Nix, LP – three-year renewal term expiring 02/28/2029</p>	<p>4.2) Committee Chair, C. Girard, reviewed the request for clinical privileges.</p>	<p>4.2) On the motion by R. Pawlak and support by S. King, the request for clinical privileges for Heather Nix, LP, was referred to the full Board for approval. The motion was adopted unanimously.</p>
<p>4.3) Policies Ending 30-Day Review: a) Videoconferencing, recording, transcribing, and use of Artificial Intelligence (AI), 09-05-10</p>	<p>4.3) Committee Chair, C. Girard, reviewed the policy ending 30-day review.</p>	<p>4.3) On the motion by P. Schumacher and support by S. King, the policy, Videoconferencing, recording, transcribing, and use of Artificial Intelligence (AI), 09-05-10, to end 30-day review was referred to the full Board for approval. The motion was adopted unanimously.</p>
<p>4.4) Artificial Intelligence (AI)/Generative AI Policy, M. Prusi</p>	<p>4.4) M. Prusi reported AI is not currently used in clinical practices and the electronic health record (EHR) because of privacy, ethical, and legal concerns. The proposed policy ensures oversight of AI utilization and designates a committee for this oversight. The proposed policy would apply to BABHA and the provider network. There were general discussions related to the capability of AI, private health information should not be in AI, issues within AI if entered into the clinical record could negatively impact lives of individuals in services if there are errors, AI is still learning, mistakes in AI still need to be corrected, and the benefits of being proactive with this policy.</p>	<p>4.4) No action was necessary</p>
<p>4.5) Autism Utilization Management Proposal</p>	<p>4.5) N. Sweet reviewed the proposal from the autism utilization management consultant. N. Sweet reported the goal is to reduce costs and improve outcomes. There were general discussions related to the clarification of 10% of Applied Behavior Analysis (ABA) utilizers.</p>	<p>4.5) No action was necessary</p>
<p>4.6) Provider Network Transitions, K. Amon</p>	<p>4.6) K. Amon reported two provider network transitions are taking place. Valley Residential is merging with Listening Ear. This transition involves licensing due to residential group homes being involved. Legal counsel has reviewed the management contracts to ensure consumer information can be shared with all organizations involved in the transition. Listening Ear is intending to hire as many staff from Valley Residential as possible. K. Amon reported the second transition</p>	<p>4.6) No action was necessary</p>

		<p>involves Arenac Opportunities, Inc. transferring all community mental health services and supports to another network provider, Do-All. Currently, Do-All is a network provider for BABHA and AuSable Valley both. This merger contract is currently being reviewed by legal counsel. Do-All is intending on having two physical sites in Arenac County. Do-All does currently offer Individual Placement and Supports (IPS); AOI did not.</p>	
5.	Adjournment	On the motion by J. Crete and support by S. King, the meeting adjourned at 5:38 pm. The motion passed unanimously.	



Christopher Girard, Committee Chair