

**BAY-ARENAC BEHAVIORAL HEALTH
PRIMARY NETWORK OPERATIONS & QUALITY MANAGEMENT COMMITTEE MEETING**

Thursday, January 8, 2026

1:30 p.m. - 3:15 p.m.

Lincoln Center - East Conference Room/Zoom

Topic	Key Discussion Points	Action Steps/ Responsibility
	<ul style="list-style-type: none"> - <u>Corporate Compliance</u> – No updates to report this month. - <u>Emergency Access Services (EAS)/Mobile Response Team (MRT)</u> – If there are MRT needs on second shift, call EAS as MRT staff are not always available. - <u>ID/DD</u> – No updates to report this month. - <u>IMH/HB</u> – No updates to report this month. - <u>IT</u> – The BABH IT Manager resigned, so Melissa Prusi is filling in for the time being. If there are any security issues, please reach out to the Help Desk. - <u>Integrated Care</u>: <ul style="list-style-type: none"> • <u>Acute</u> – No updates to report this month. • <u>Arenac</u> – No updates to report this month. • <u>Child & Family</u> – No updates to report this month. • <u>Long-term</u> – No updates to report this month. - <u>Medical Records</u> – No updates to report this month. - <u>Physician/OPT Services</u> – Madison hired a NP that is still in the credentialing process. The NP will be in-person three days a week at Madison and will only be working with adults. - <u>Quality</u> – Will be starting the sample for MSHN/MEV audit in February. Staff may be reaching out for documentation of staff qualifications or notes. - <u>Recipient Rights/Customer Services</u> – Jeff Wells is retiring the end of February. Interviewing to replace him for RR and Customer Services. - <u>Self Determination</u> – No updates to report this month. <p><u>List Psychological</u>: A worker is back on Monday, and an intern started last Monday.</p>	

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	<p><u>MPA:</u></p> <ul style="list-style-type: none"> - <u>CSM</u> – No updates to report this month. - <u>OPT-A</u> – MPA has two new hires. All consumers should be reassigned by the end of next week. Referrals will open up in February. - <u>OPT-C</u> – No updates to report this month. <p><u>Saginaw Psychological:</u></p> <ul style="list-style-type: none"> - <u>CSM</u> – SPSI started the Children’s Case Management program. Got an exception from a new case manager that will start seeing children on February 3rd. Sarah Mulvaney is the new CSM Supervisor for adult and children. - <u>OPT</u> – Jackie Nolan and Courtney Clark are the OPT Supervisors. A therapist is leaving this month. Staff were trained in EMDR, so when they are ready to take on clients, that information will be shared. A few interns have started. <p>REMINDERS: When cases are closed, the primary case holder needs to make sure all the service providers are being contacted and are included in ABD. If someone is receiving the 1915 iSPA services, the 1915i referral form needs to be filled out and routed to Nicole Popenhagen in ACT, and she will enter the information for the provider in the WSA.</p>	
<p>2. Plans & System Assessments/Evaluations</p> <ul style="list-style-type: none"> a. QAPIP Annual Plan (Sept) b. Organizational Trauma Assessment Update 	<ul style="list-style-type: none"> a. <u>QAPIP Annual Plan</u> – Nothing to report this month. b. <u>Organizational Trauma Assessment</u> – Nothing to report this month. 	
<p>3. Reports</p> <ul style="list-style-type: none"> a. QAPIP Quarterly Report (Feb, May, Aug, Nov) b. <u>Harm Reduction, Clinical Outcomes & Stakeholder Perception Reports</u> <ul style="list-style-type: none"> i. Recipient Rights Report (Jan, Apr, Jul, Oct) ii. Recovery Assessment Scale (RAS) Report (Mar, Jun, Sep, Dec) 	<ul style="list-style-type: none"> a. <u>QAPIP Quarterly Report</u> – Nothing to report this month. b. <u>Harm Reduction, Clinical Outcomes & Stakeholder Perception Reports</u> <ul style="list-style-type: none"> i. Recipient Rights – Jackie went over the Recipient Rights Report for FY26Q1. The report is saved in the meeting folder and was emailed to the PNOQMC. ii. RAS – Sarah went over the RAS Summary Report for FY25Q4. The report is saved in the meeting folder and was emailed to the PNOQMC. Recommendation to 	

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<ul style="list-style-type: none"> iii. Consumer Satisfaction Report (MHSIP/YSS) iv. Provider Satisfaction Survey (Oct) c. <u>Access to Care & Service Utilization Reports</u> <ul style="list-style-type: none"> i. MMBPIS Report (Jan, Apr, Jul, Oct) ii. Leadership Dashboard - UM Indicators (Jan, Apr, Jul, Oct) iii. Customer Service Report (Jan, Apr, Jul, Oct) iv. Employment Data (Dec, Mar, Jun, Sep) d. <u>Regulatory and Contractual Compliance Reports</u> <ul style="list-style-type: none"> i. Internal Performance Improvement Report (Feb, May, Aug, Nov) ii. Internal MEV Report iii. MSHN MEV Audit Report (Apr, Sep) iv. MSHN DMC Audit Report (Sept when applicable) v. MDHHS Waiver Audit Report (Oct when applicable) e. Ability to Pay Report f. <u>Program Capacity Status</u> <ul style="list-style-type: none"> i. Review of Referral Status Report 	<p>separate the intake RAS vs. annual RAS to see if there is a difference from the beginning to the end of services.</p> <ul style="list-style-type: none"> iii. <u>MHSIP/YSS</u> – Nothing to report this month. iv. <u>Provider Satisfaction Survey</u> – Nothing to report this month. <p>c. <u>Access to Care & Service Utilization Reports</u></p> <ul style="list-style-type: none"> i. MMBPIS Report – Sarah went over the MMBPIS Report for FY25Q4. The report is saved in the meeting folder and was emailed to the PNOQMC. ii. Leadership Dashboard – Melissa went over the Leadership Dashboard. The report is saved in the meeting folder and was emailed to the PNOQMC. iii. Customer Service Report – Jackie went over the Customer Service Report for FY26Q1. The report is saved in the meeting folder and was emailed to the PNOQMC. iv. Employment Data – BH Teds is not a point in time data system, so the state data is being reported on. There are 10.8% in full-time competitive employment, 11.9% part-time individuals, 38% are unemployed, and 39% are not in competitive employment for integrated labor. BABHA serves 2823 people in Bay and Arenac Counties for IPS. 305 are in full-time competitive employment and 313 in part-time employment. <p>d. <u>Regulatory and Contractual Compliance Reports</u></p> <ul style="list-style-type: none"> i. <u>PI Report</u> – Nothing to report this month. ii. <u>Internal MEV Report</u> – Nothing to report this month. iii. <u>MSHN MEV Audit Report</u> – Nothing to report this month. iv. <u>MSHN DMC Audit Report</u> – Nothing to report this month. v. <u>MDHHS Waiver Audit Report</u> – Nothing to report this month. <p>e. <u>Ability to Pay Report</u> – Nothing to report this month.</p> <p>f. Referral Status Report – The referral status report is saved in the meeting folder and was emailed to the PNOQMC.</p>	
4. <u>Discussions/Population Committees/Work Groups</u>		

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<ul style="list-style-type: none"> a. <u>Harm Reduction, Clinical Outcomes and Stakeholder Perceptions</u> <ul style="list-style-type: none"> i. Consumer Council Recommendations (as warranted) b. Access to Care and Service Utilization c. <u>Regulatory Compliance & Electronic Health Record</u> <ul style="list-style-type: none"> i. Management of Diagnostics d. BABH Policy/Procedure Updates e. <u>Medicaid/Medicare Updates</u> <ul style="list-style-type: none"> i. Medicare Telehealth Regulations - Update ii. Verification of Insurance: Reminder to have staff check with every contact iii. Healthy MI vs. Full Medicaid Coverage - DEFER f. <u>General Fund</u> <ul style="list-style-type: none"> i. Spenddown: Priority to Assist with Application for Full Medicaid Redetermination ii. FY26 GF Plan Review iii. GF Exceptions - "Out of Network" status with Primary Insurance g. EHR Change h. Kratom i. Supervisor Signature on Interim Plan 	<ul style="list-style-type: none"> a. <u>Harm Reduction, Clinical Outcomes and Stakeholder Perceptions</u> <ul style="list-style-type: none"> i. Consumer Council Recommendations – Nothing to report this month. b. <u>Access to Care and Service Utilization</u> – Nothing to report this month. c. <u>Regulatory Compliance & Electronic Health Record</u> <ul style="list-style-type: none"> i. Management of Diagnostics – Nothing to report this month. d. <u>BABH - Policy/Procedure Updates</u> – Nothing to report this month. e. <u>Medicaid/Medicare Updates</u> <ul style="list-style-type: none"> i. Telehealth Regs – MDHHS is formulating a plan to get everything finalized, and there is a meeting this Friday to try and wrap this up. Established patients need to be seen face to face with a prescriber of the same level at least once within the year. New patients need to be seen face to face for the first six months before they are considered for telehealth. ii. Verification of Insurance – Remind your staff to verify insurance with all their consumers and at every visit. iii. <u>Healthy MI vs. Full Medicaid Coverage</u> – Defer f. <u>General Fund</u> <ul style="list-style-type: none"> i. Spenddown – Nothing to report this month. ii. FY26 GF Plan Review – There are no specifics to discuss as staff are meeting on Friday. There will be GF restrictions due to GF budget issues. iii. GF Exceptions – All agencies need to send a list to Nicole and Joelin of those individuals you are currently serving that are out of network or not able to be billed for. We can no longer approve GF Exceptions and will need to transition those individuals. g. EHR Change – Looking at adding a section to the death report that prompts staff to complete the BH Teds. The Medicaid Spenddown banner has been added. More EHR 	<ul style="list-style-type: none"> f.iii. GF Exceptions – Send a list of current individuals served to Nicole or Joelin.

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<ul style="list-style-type: none"> j. Training - Documentation Requirements k. HCBS Certificate 	<p>changes are to come, but they are not ready for implementation and education will follow.</p> <ul style="list-style-type: none"> h. Kratom – Dr. Morrone is on the Healthcare Practices Committee and is concerned about the safety of using Kratom. It can be bought over the counter and does not get picked up in the regular twelve panel drug screen, so we are not sure how widespread the concern is. BABH has had a death that was related to a Kratom overdose. i. <u>Supervisor Signature on Interim Plan</u> – Nothing to report this month. j. Training - Documentation Requirements – Melissa went over the Medicaid & BABHA Documentation Standards for accuracy, compliance, and best practices training document. Documentation should be completed and signed within one business day. If you have any questions or concerns, please contact Melissa Prusi. The document was saved in the meeting folder and emailed to the PNOQMC. Please provide training to your staff. Melissa Prusi may be coming to your agency to do a training as well. k. HCBS Certificate – Clarification that Melanie sends the HCBS certificates to Staff Development and the Providers. 	<ul style="list-style-type: none"> h. Kratom – Look at posting a Kratom Drug Fact Sheet on BABH’s website.
<p>5. Adjournment/Next Meeting</p>	<p>The meeting adjourned at 3:15 pm. The next meeting is scheduled for February 12, 2026, 1:30-3:30, at the Lincoln Center in the East Conference Room.</p>	