BAY-ARENAC BEHAVIORAL HEALTH

PRIMARY NETWORK OPERATIONS & QUALITY MANAGEMENT COMMITTEE MEETING

Thursday, July 9, 2026

1:30 p.m. - 2:30 p.m.

Lincoln Center - East Conference Room/Zoom

MEMBERS				AD-HOC MEMBERS	
Alexandria Comai, BABH Clinical Team Lead - MRT/EAS	X	Kelli Wilkinson, BABH Supervisor - Children's IMH/HB		Amanda Johnson, BABH Supervisor - ABA/Wraparound	
Allison Gruehn, BABH Program Manager - Adult MI/CSM/ACT	X	Laura Sandy, MPA Clinical Director & CSM Supervisor	X	Barb Goss, SPSI COO	
Amy Folsom, BABH Program Manager - Psych/OPT Services	X	Lynn Blohm, BABH North Bay Team Supervisor - CLS	X	Jacquelyn List, List Psychological COO	
Anne Sous, BABH Supervisor - EAS		Megan Smith, List Psychological Site Supervisor	X	Kathy Johnson, Consumer Council Rep (J/A/J/O)	
Brad Parker, BABH Team Leader - Adult I-DD		Melanie Corrion, BABH Program Manager - Adult ID/DD		Lynn Meads, BABH Medical Records Associate	
Courtney Clark, SPSI Supervisor - OPT		Melissa Deuel, BABH Quality & Compliance Coordinator	X	Michele Perry, BABH Manager - Finance	
Emily Gerhardt, BABH Program Manager - Children	X	Melissa Prusi, BABH Director Health Care Accountability	X	Moregan LaMarr, SPSI Clinical Director	
Emily Simbeck, MPA Supervisor - Adult OPT	X	Nicole Sweet, BABH Director Integrated Care - Acute	X	Nathalie Menendes, SPSI COO	
Heather Friebe, BABH Director Integrated Care - Arenac	X	Pam VanWormer, BABH Program Manager - Arenac		Sarah Van Paris, BABH Manager - Nursing	
Jackie Kish, BABH Recipient Rights & Customer Services Manager		Sarah Holsinger (Chair), BABH Quality Manager	X	Stephanie Gunsell, BABH Manager - Contracts	
Jaclynn Nolan, SPSI Supervisor - OPT		Sarah Mulvaney, SPSI CSM Supervisor		Taylor Keyes, BABH Team Leader - Adult MI	
Joelin Hahn (Chair), BABH Director Integrated Care - Child & Family	X	Stacy Krasinski, BABH Program Manager - EAS	X	**GUESTS**	
Joelle Sporman (Recorder), BABH BI Secretary III	X	Stephani Rooker, BABH Program Manager - CLS/Horizon	X	Craig Kanicki, BABH North Bay Clinical Team Lead	X
Karen Amon, BABH Director Integrated Care - Long-term/IDD		Tracy Hagar, MPA Supervisor - Child OPT	X	Kaitlyn, List Intern	X

Topic	Key Discussion Points	Action Steps/ Responsibility
1. **a. Review of, and Additions to Agenda** b. Presentations: None **c. Approval of Meeting Notes: May 14, 2026** **d. Program/Provider Updates and Concerns**	a. There was an addition to the agenda; 4.f. iv. GF Plan update. b. There are no presentations this month. c. The May 14th meeting notes were approved as written. d. **Program/Provider Updates and Concerns:** Bay-Arenac Behavioral Health: - ABA/Wraparound – No updates to report this month. - ACT/Adult MI/Senior Outreach – Both teams are full staffed. - Arenac – Hired an intake worker and she is getting trained. - Children's Services – No updates to report this month. - CLS/North Bay & Horizon – Chris Pluta is no longer with APS. Mackenzie Lester is taking over till they fill his position. Theresa Witkowski is no longer at the Arnold Center and Tasha Q. is standing in for the adults. IPS - Vocational needs more referrals. North Bay started their first official children's CLS case and MI-A from ACT. - Corporate Compliance – No updates to report this month. - Emergency Access Services (EAS)/Mobile Response Team (MRT) – We now have a full MRT Team for 1st and 2nd shift; available from 8:00 am - 12:00 am. AOT Coordinator	

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		position is grant funded and ends September 30th, but we will continue as is with that role. - ID/DD – No updates to report this month. - Physician/OPT Services – Amy sent out an updated staff listing with all the prescriber changes. The Madison Clinic is down a medical assistant. - Quality – The waiver audit is finishing up. More details to come. - Recipient Rights/Customer Services – No updates to report this month. - Self Determination – No updates to report this month. List Psychological: - Nothing to report this month. MPA: - CSM – No updates to report this month. - OPT-A – MPA is losing a therapist on 07/16/26. - OPT-C – No updates to report this month. Saginaw Psychological: - CSM – No updates to report this month. - OPT – No updates to report this month.	
2.	**Plans & System Assessments/Evaluations** a. QAPIP Annual Plan (Sept) b. Organizational Trauma Assessment Update	a. QAPIP Annual Plan – Nothing to report this month. b. Organizational Trauma Assessment – Nothing to report this month.	
3.	**Reports** a. QAPIP Quarterly Report (Feb, May, Aug, Nov) b. Harm Reduction, Clinical Outcomes & Stakeholder Perception Reports **i. Recipient Rights Report (Jan, Apr, Jul, Oct)** **ii. Recovery Assessment Scale (RAS) Report (Mar, Jun, Sep, Dec)**	a. QAPIP Quarterly Report – Nothing to report this month. b. Harm Reduction, Clinical Outcomes & Stakeholder Perception Reports i. **Recipient Rights** – Defer till next month. ii. **RAS** – Sarah went over the RAS Summary Report for FY26Q2. The report is saved in the meeting folder and was emailed to the PNOQMC. iii. MHSIP/YSS – Nothing to report this month. iv. Provider Satisfaction Survey – Nothing to report this month.	

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	iii. Consumer Satisfaction Report (MHSIP/YSS) iv. Provider Satisfaction Survey (Oct) c. Access to Care & Service Utilization Reports **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. Regulatory and Contractual Compliance Reports i. Internal Performance Improvement Report (Feb, May, Aug, Nov) ii. MSHN MEV Audit Report (Apr, Sep) **iii. MDHHS Waiver Audit Report (Oct when applicable)** e. Ability to Pay Report f. Program Capacity Status **i.** Review of Referral Status Report	c. Access to Care & Service Utilization Reports i. **MMBPIS Report** – Sarah went over the MMBPIS Report for FY26Q2. The report is saved in the meeting folder and was mailed to the PNOQMC. There is an effort with MDHHS in the mental health framework to transition some of the pre-admission screening process to the MHP's. There is a lot of advocating at the state level. ii. **Leadership Dashboard** – Defer till next month. iii. **Customer Service Report** – Defer till next month. iv. **Employment Data** – MRS have 42 participants; 2 are employed and 2 have been successfully closed, 15 were closed for other reasons, 18 are actively participating in some kind of job development or on the job evaluations, and 5 are going through the eligibility stage. d. Regulatory and Contractual Compliance Reports i. PI Report – Nothing to report this month. ii. MSHN MEV Audit Report – Nothing to report this month. iii. **MDHHS Waiver Audit Report** – The credentialing qualifications verification form was approved by MDHHS 2 years ago, but now they will not accept it. The form has more than what a resume has, but the form is still not being accepted. The objectives cannot be written with percentages. Getting med consents signed was another issue. e. Ability to Pay Report – Nothing to report this month. f. Referral Status Report – Nothing to report this month.	
4.	**Discussions/Population Committees/Work Groups** a. Harm Reduction, Clinical Outcomes and Stakeholder Perceptions i. Consumer Council Recommendations (as warranted) b. Access to Care and Service Utilization	a. Harm Reduction, Clinical Outcomes and Stakeholder Perceptions i. Consumer Council Recommendations – Nothing to report this month. b. Access to Care and Service Utilization – Nothing to report this month. c. Regulatory Compliance & Electronic Health Record	

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c. Regulatory Compliance & Electronic Health Record i. Management of Diagnostics d. BABH Policy/Procedure Updates e. Medicaid/Medicare Updates i. Verification of Insurance: Reminder to have staff check with every contact ii. Healthy MI vs. Full Medicaid Coverage **f. General Fund** i. Spenddown: Priority to Assist with Application for Full Medicaid Redetermination **ii. Healthy MI: Assist/Advocate for Full Medicaid** iii. FY26 GF Plan Review **iv. GF Plan Update** **g. Supervisor Dashboard** **h. LOCUS Training** **i. Expired Assessments – Defer till August** **j. New Performance Improvement Report** **k. BHTEDS**	i. Management of Diagnostics – Nothing to report this month. d. BABH - Policy/Procedure Updates – Nothing to report this month. e. Medicaid/Medicare Updates i. Verification of Insurance – Nothing to report this month. ii. Healthy MI vs. Full Medicaid Coverage – Nothing to report this month. **f. General Fund** i. Spenddown – Nothing to report this month. ii. **Healthy MI: Assist/Advocate for Full Medicaid** – HR1 will be implemented by January 1st. If someone is on Healthy MI and has SSI, contact Jodi Surbrook at MDHHS to see if they can be considered disabled and bumped up to Medicaid. All address changes need to be made in the system, so anything sent from MDHHS is received and not overlooked. iii. FY26 GF Plan Review – Nothing to report this month. iv. **GF Plan Update** – We are allowing limited outpatient therapy so no one is being referred directly to therapy, they will go through the case manager first. BABH had their first appeal on a closure where someone sent an ABD. If someone hasn't been engaged in a few months, and they are closed, they need to go by the current GF criteria. FYI - the level of care is being cleaned up in the consumer information tab. GF requests need to be sent to Stephani Rooker, so they are not overlooked. g. **Supervisor Dashboard** – Sarah will follow-up with this as some staff have not heard from Greg Lietzow. h. **LOCUS Training** – Nothing to report this month. i. **Expired Assessments** – Defer till next meeting. j. **New PI Report** – The Quality Department will be using a new format to complete the quarterly Performance Improvement Reviews. Previously, all review findings were grouped	g. **Supervisor Dashboard** - Sarah will follow up with Greg Lietzow.

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		together in a single cell. Going forward, the reviews will focus on 8–9 key areas, with each finding listed on its own separate line to improve clarity and organization. The quality staff will highlight each specific consumer so it's easier to identify the findings that are connected with that consumer. These reviews will be focusing on the quarter that the review occurred versus the quarter the data was pulled. k. **BHTEDS** – Any data in BHTEDS needs to be resolved and completed in BHTEDS due to a switch to the new system. Any data that we are no longer required to report, do we wish to collect moving forward. The changes will start October 1st.	
5.	**Parking Lot** a. Conflict Free CSM		
6.	**Adjournment/Next Meeting**	The meeting adjourned at 2:30 pm. The next meeting is scheduled for August 13, 2026, 1:30-3:30, at the Lincoln Center in the East Conference Room.	