



IMPACT REPORT 2023





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Lakeshore Regional Entity is a Prepaid Inpatient Health Plan for people with mental illness, developmental disabilities, and substance use disorder in Allegan, Kent, Lake, Mason, Muskegon, Oceana and Ottawa counties.



INTRODUCTION

Dear Fellow Stakeholders:

I am pleased to report 2023 was a year of significant achievements across Region 3. It was a year marked by strong financial performance, higher quality of service delivery, and excellent operating outcomes. The year has also brought greater collaboration with our regional partners, initiating a growing excitement toward a more integrated culture and a deeper commitment to the communities in which we serve.



The performance exhibited reinforces our values:

 <p>LOCAL SOLUTIONS</p> <p>VALUE LOCAL DIFFERENCES</p> <p>We value locally unique service systems that are responsive to local needs, partnerships, and available resources.</p>	 <p>FISCAL RESPONSIBILITY</p> <p>ACCOUNTABLE & RESPONSIBLE WITH FUNDS</p> <p>Transparent and accountable use of public funds. Maximize available resources.</p>	 <p>COLLABORATIVE RELATIONSHIPS</p> <p>FOSTER EFFECTIVE PARTNERSHIPS</p> <p>Nurture collaboration based on mutual trust & shared commitment to quality. Approach all interactions with respect, openness, and a commitment to proactively resolve conflict.</p>	 <p>INNOVATION</p> <p>BOLDLY PURSUE EXCELLENCE</p> <p>Pursue audacious goals by challenging the status quo and trying new things. Actively work to identify and support opportunities for innovation.</p>
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The accomplishments demonstrated in the Lakeshore Regional Entity (LRE) 2023 Annual Impact Report reflect the talent and commitment of the LRE team and CMHSP teams' collective efforts. They do an amazing job and I thank them for their continued hard work. Our shared values, purpose and vision are essential elements of our culture.

In addition, LRE will continue to provide data that drives innovation and paves the way for improvements to methodologies that create cost effective quality service delivery to the member community mental health organizations and regional network providers. We are committed to being a dynamic resource for empowering regional development.

I am confident that as we continue to invest in the people and resources within our region, LRE will have a strong presence in the future.

Thank you for your ongoing support.

Sincerely,

Mary Marlatt Dumas

Mary Marlatt Dumas
Chief Executive Officer
LRE



Executive Board Members

The LRE Executive Board of Directors is comprised of 14 community/business leaders serving throughout the LRE's seven-county geographical footprint. The LRE values and appreciates the Board's commitment to upholding the LRE's mission and vision.



Pastor Craig Van Beek
Allegan



Alice Kelsey
Allegan



Jim Storey
Allegan



Jon Campbell
Kent



Patricia Gardner
Kent



Stan Stek
Kent



Ron Bacon
Lake, Mason, Oceana



Ron Sanders
Lake, Mason, Oceana



Andy Sebolt
Lake, Mason, Oceana



Linda Dunmore
Muskegon



Janice Hilleary
Muskegon



Janet Thomas
Muskegon



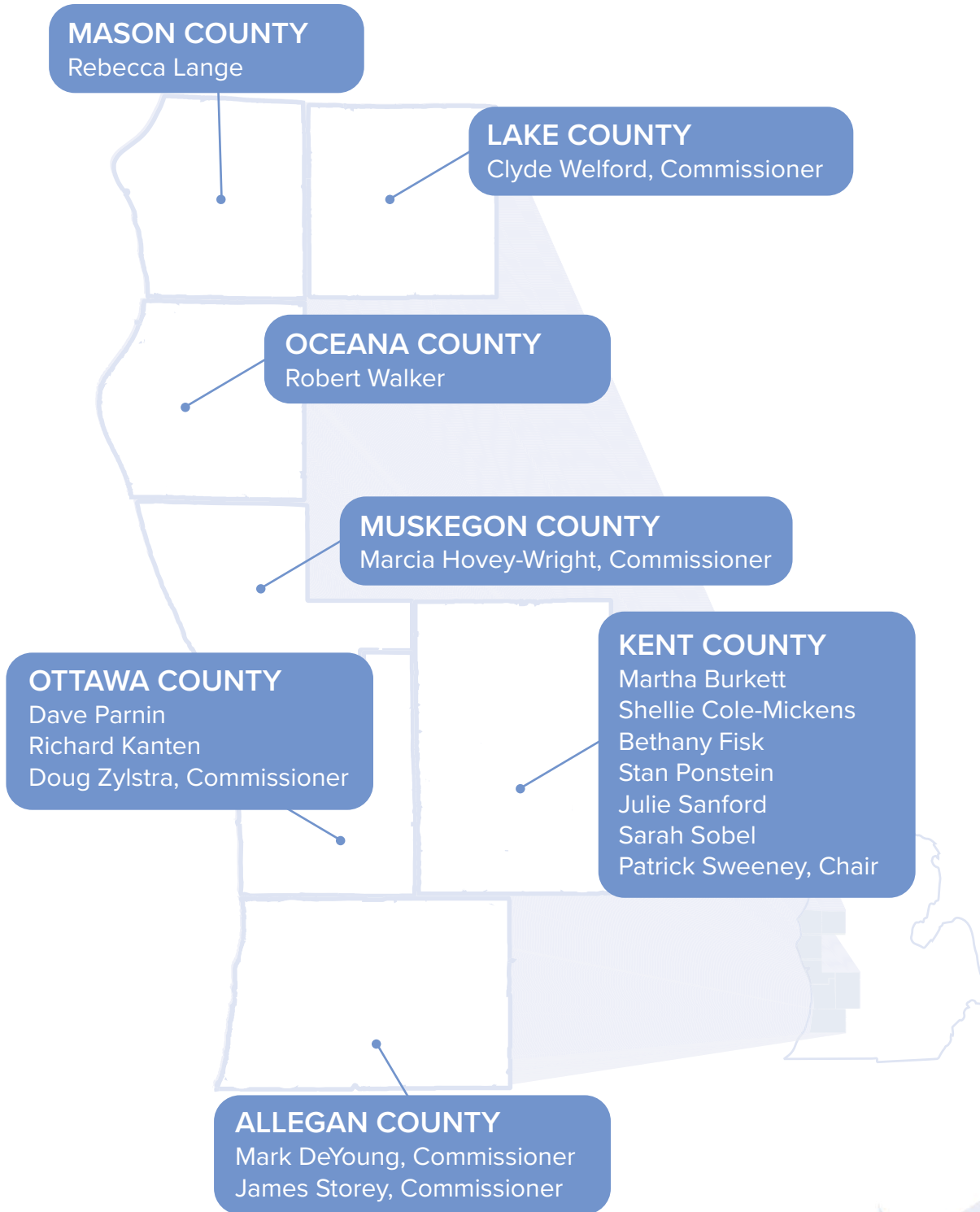
Sara Hogan
Ottawa



Richard Kanten
Ottawa



Substance Use Disorder Oversight Policy Board





Grants

LRE Substance Use Disorders (SUD) Sponsored Trainings

- ✓ The LRE supported the keynote speaker for the 2023 Lakeshore Muskegon Community Opiate Task Force Summit held August 18, 2023 featuring Dr. Alexander Elswick.
- ✓ LRE sponsored three webinars on Emerging Drug Trends presentations with Karen Williams.
 - Brain Chemistry: It's What Drugs of Abuse Mess With
 - The Teen Brain & Drugs: Why They Are at the Greatest Risk!
 - The Science of Hope: The Foundation of Resilience, Motivation & Recovery.
- ✓ Provided 85 virtual scholarships to LRE SUD Prevention Coalitions for professionals and key sector representatives for up-to-date drug recognition education from a national presenter, Jermaine Galloway aka "Tall Cop".



Dr. Alexander Elswick

State Opioid Response (SOR3)

- ✓ Implemented evidence-based prevention programming in schools and juvenile justice settings in five counties.
- ✓ Made significant progress in implementing jail-based medication assisted treatment (MAT) in Lake, Mason, Oceana, and Muskegon counties. Served 468 individuals with jail-based medications for opioid use disorder (MOUD) throughout the region.
- ✓ A mobile care unit was outfitted, operationalized, and is now serving areas of need within Kent, Ottawa and Allegan counties. It served 1,031 individuals throughout the region this year, and reports 73 LIVES SAVED through their Naloxone Distribution program.
- ✓ Provided free Suboxone to 308 individuals for help with Opiate Use Disorder.

ACCOMPLISHMENTS

Gambling Disorders

- ✓ Supported four local provider projects to address prevention and treatment for gambling disorders in the LRE region with allocations totaling \$157,935.
- ✓ The regional gambling website, StayOuttaTheDangerZone.com, was updated and promoted during Problem Gambling Awareness Month through a multi-media campaign conducted in partnership with the Sports Director of WZZM/Channel 13 website. The campaign achieved 296,000 impressions, reaching 36,000 people during March and April of 2023.

Smoking Cessation

- ✓ Grant funds continue to be distributed to all Region 3 PIHP Member CMHSPs. The funds pay for staff time, indirect costs, supplies, and materials to develop and maintain trainers to provide training in the DIMENSIONS smoking cessation curriculum. Many peers and staff have been trained in the DIMENSIONS curriculum and provide cessation groups in their communities.

Native American

- ✓ In FY23, 77 Native American individuals received various culturally-relevant behavioral health services.

COVID-19 Supplemental Funding

- ✓ During FY23, SUD Prevention funding provided programming support for youth summits, public messaging campaigns and opportunities for parent/youth education. One provider program demonstrated a 17% increase in knowledge of risks and consequences and perception of harm regarding alcohol and marijuana for youth who participated in programming. Region-wide, SUD related professionals were able to participate and offer professional development summits and conferences.
- ✓ COVID Grant Funds earmarked for treatment were used to support a number of new pilot programs and initiatives. Kent County opened an Engagement Center within a homeless shelter, staffed with recovery coaches who are charged with building relationships with individuals and working with them on stages of change. This program has a large number of participants each month and has successfully referred many clients to formal treatment. We're also supporting a sober living home for mothers with children, as a transitional living environment between formal treatment and independent living. Ottawa County has begun offering same day medications for opioid use disorder, a model that seems to be connected with improved long term outcomes for clients. We've also been able to support evidence-based contingency management programs for clients, as well as staff development and retention opportunities for clinical staff that weathered the storms of COVID and remained in the system, committed to our clients.

SUD Treatment Infrastructure Grant

- ✓ The LRE was able to assist Our Hope Association in securing a \$495,000 grant to open an expanded residential treatment facility with an on-site detox program.

Hispanic Services

- ✓ In FY23, 129 LatinX individuals received culturally-relevant behavioral health services.

Utilization Management*

- ✓ Intensive Crisis Stabilization Services (ICSS) consists of a two-person mobile crisis team that attempts to meet face to face with a family in crisis in order to help mitigate

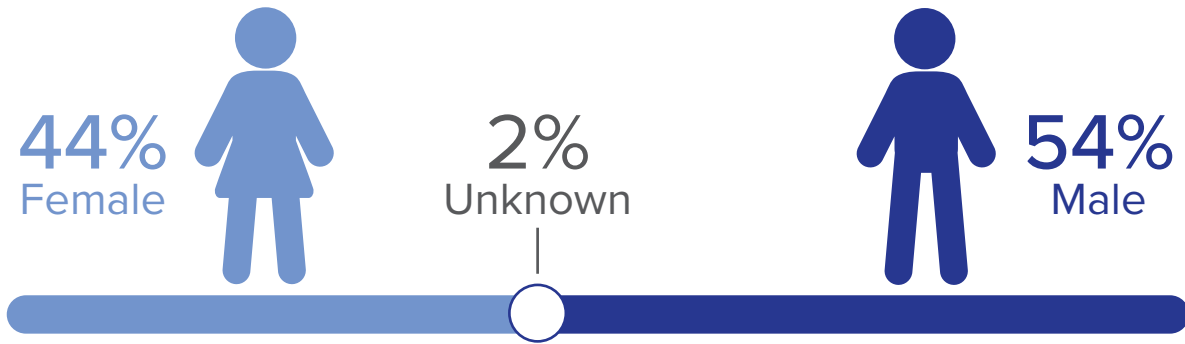
SERVICE STATISTICS: BEHAVIORAL HEALTH TREATMENT

the need for hospitalization or law enforcement involvement. ICSS is a Medicaid funded service intended to help children and families get through crisis situations. During FY23 Region 3 fielded over 1300 calls. 67% of those calls resulted in face-to-face services being provided in less than 1 hour (urban areas) or 2 hours (rural areas). ICSS calls are fielded 24 hours a day with the majority of those calls placed from either Muskegon or Kent Counties.

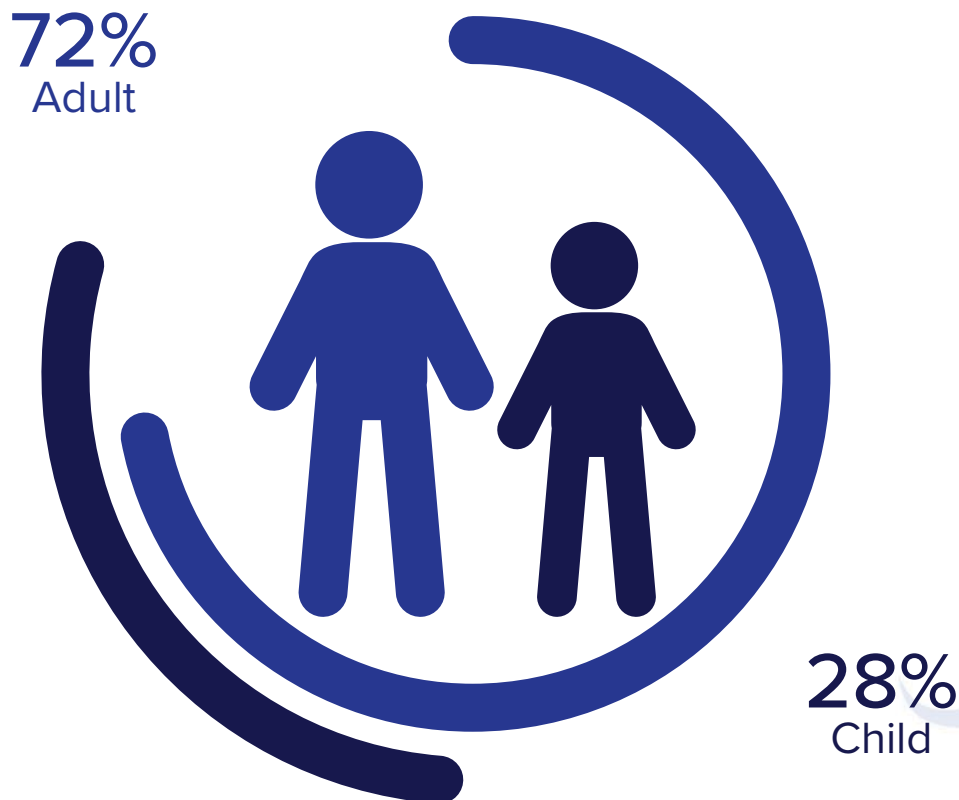
Measuring Impact 2023

Numbers Served

Unique Count Of Consumers Served by Gender

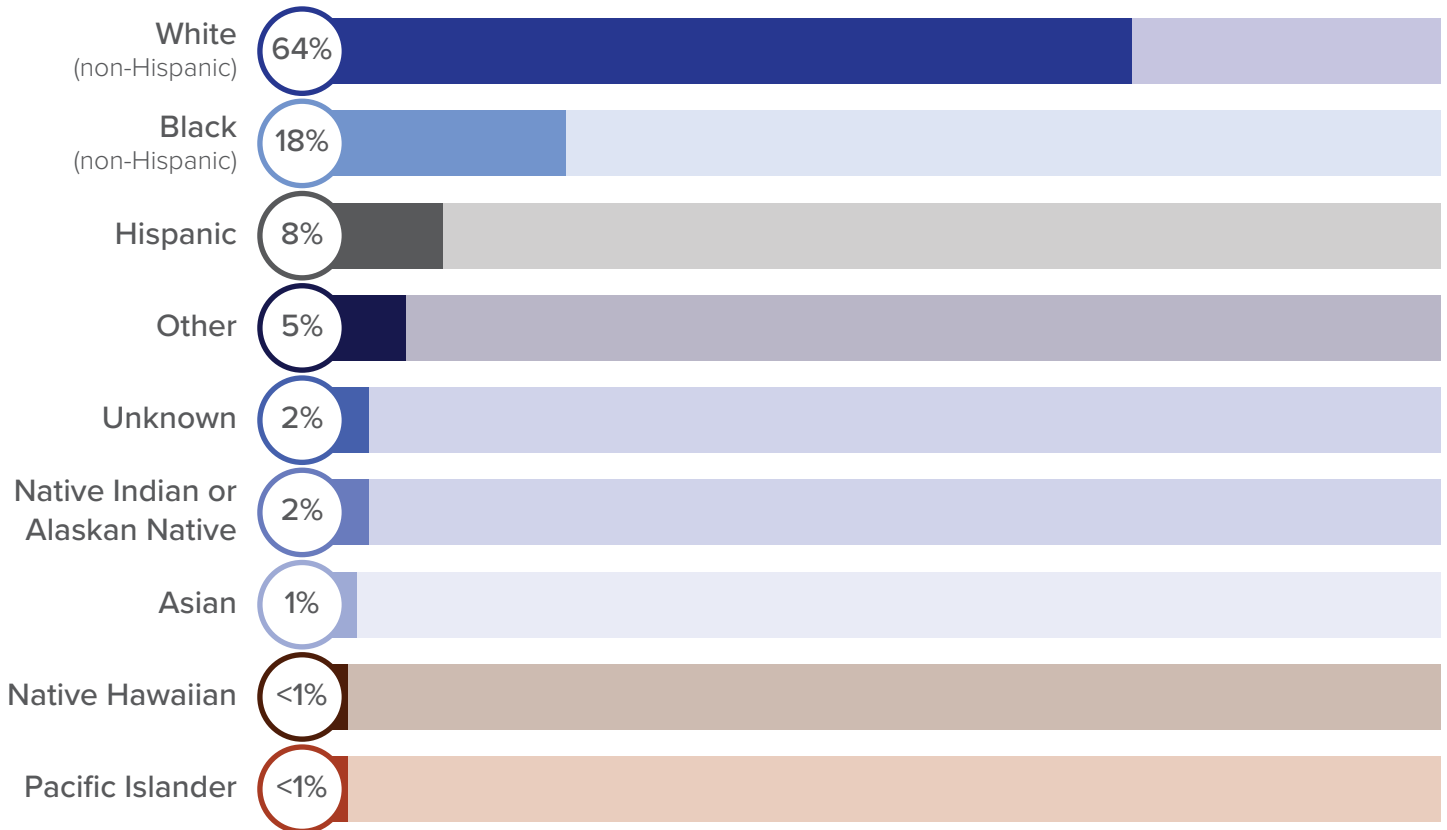


Unique Count Of Consumers Served by Age

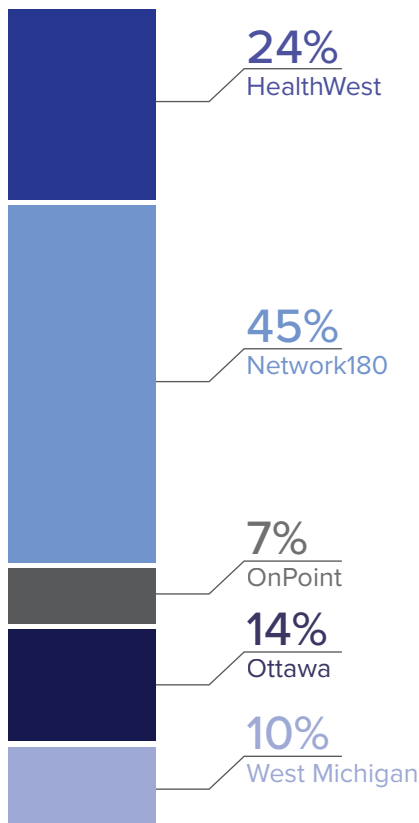


SERVICE STATISTICS: BEHAVIORAL HEALTH TREATMENT

Consumers Served By Race/Ethnicity



Percent Served By CMH



Count Of Unique Persons Served By Population

3,984
DD/IDD¹ Adult

1,957
DD/IDD¹ Child

12,552
Mental Illness

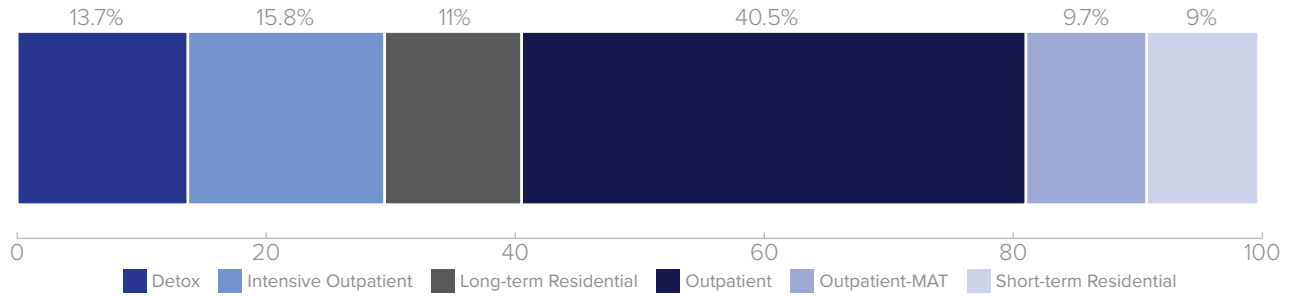
6,613
SED²

5,062
SUD³

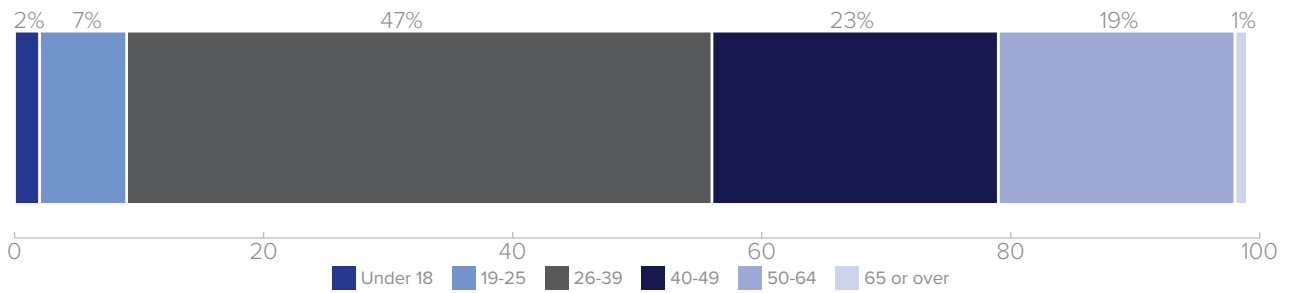
¹ Developmental Disabilities/Intellectual Developmental Disabilities
² Serious Emotional Disturbance
³ Substance Use Disorder

Admissions

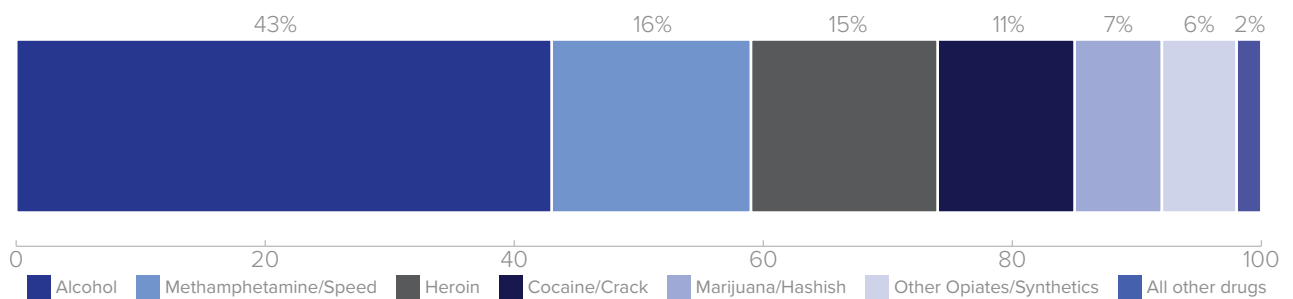
Admission By Level Of Care



Admission By Age Group



Primary Substance At Admission



Admission By Gender



Health Services Advisory Group

External Quality Review

- ✓ Health Services Advisory Group (HSAG) validated LRE's two Performance Improvement Projects (PIPs) upon first submissions for Year 1 and Year 2.
- ✓ HSAG validated LRE's data collection and reporting processes via the Performance Measure Validation (PMV) audit.
- ✓ Since HSAG revised its compliance review standards in FY19, LRE received its highest audit score in FY23, which was driven by the engagement of subject matter experts from all relevant LRE departments.
- ✓ HSAG fully validated LRE's remediation efforts for audit years FY21 and FY22.

Process Efficiency Gains

- ✓ LRE improved the efficiency of the CMHSP Site Review process by reducing the Site Review Cycle Time from 19.5 weeks to 9.1 weeks, including any Corrective Action Plan (CAP) development by the CMHSPs, which is a 114% reduction in cycle time.
- ✓ LRE reduced the average time for CMHSPs to enter CAP responses into Lakeshore Integrated Data Solutions (LIDS) from 40 hours to zero hours by leveraging technology and pivoting from LIDS to PowerBI Dashboards.
- ✓ With MDHHS' launch of the Customer Relationship Management (CRM) for critical incidents, LRE hand-entered all critical incidents into the CRM to minimize disruption to the CMHSPs until MDHHS solidified its technical requirements. LRE then developed a standardized CMHSP reporting template. LRE successfully operationalized the new critical incident reporting requirements in LIDS via the standardized CMHSP reporting template.
- ✓ LRE developed five new Quality PowerBI (PBI) Dashboards: Audits, MMBPIS, CIRE, Encounter look-up tool, and Behavior Treatment Plan Review Committee.
 - a. The Audits PBI Dashboard allows for detailed aggregate data that enables LRE to pinpoint systemic issues at the CMHSP level related to clinical and credentialing processes and enables LRE to draft actionable reports for CMHSPs' remediation efforts.
 - b. The Encounter look-up PBI Dashboard allows LRE to pull clinical and credentialing samples for CMHSP, SUD, and IP Site Reviews versus having the CMHSPs and organizational providers pull samples, which reduces the administrative burden on CMHSPs and organizational providers.



Improved Quality & Compliance

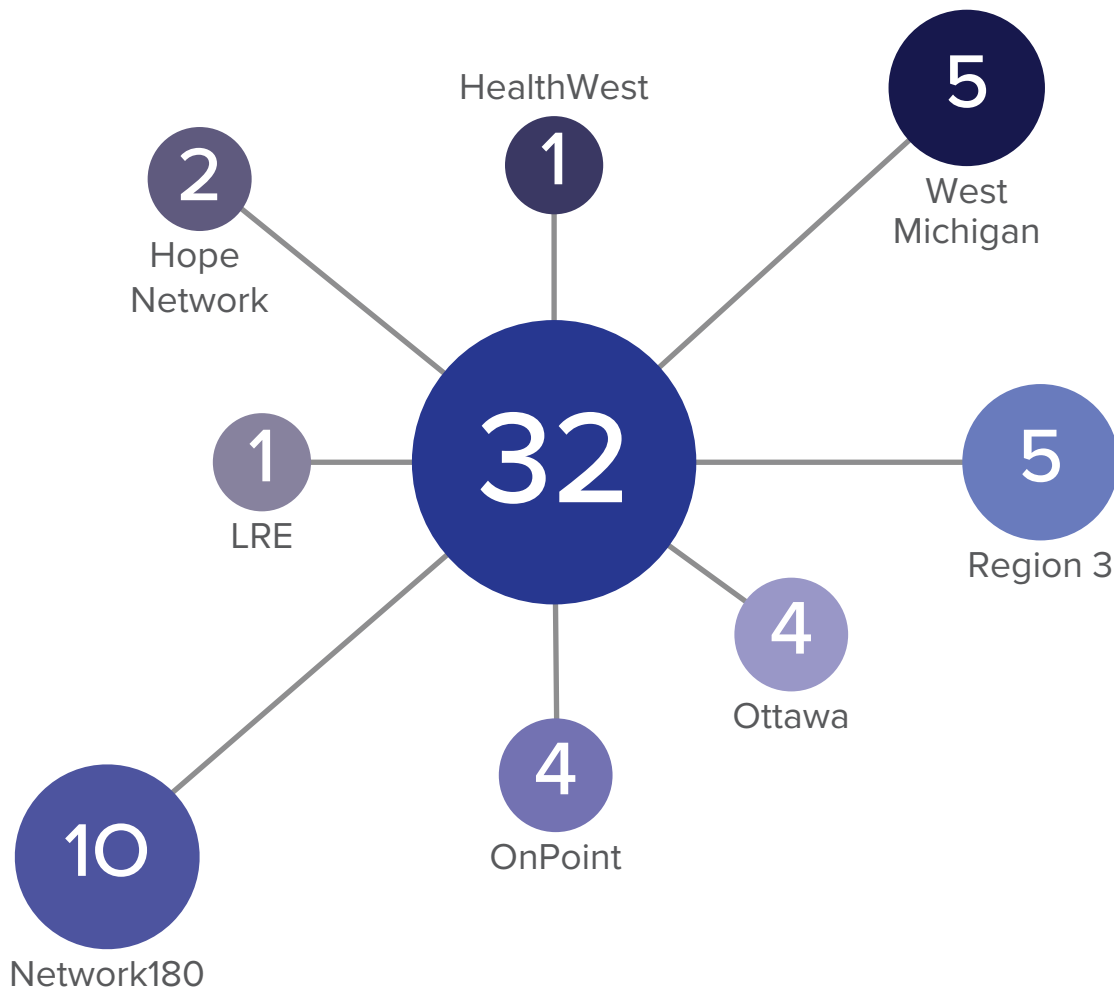
Increased the number of facilities reviews completed by over 300%, from 80 in FY21 to 325 in FY23 by hiring and diverting auditing staff.

PERFORMANCE REPORT CARD: HEALTH SERVICES ADVISORY GROUP

Improved Quality & Compliance:

- ✓ During FY23 Facilities Reviews, LRE improved compliance rates and quality of care by issuing 403 CAPs with 178, or 43%, related to Home and Community Based Services (HCBS) non-compliance, of which 80, or 43%, were due to the use of locks/barriers and 60, or 34%, were due to non-compliant documentation standards. LRE resolved 398, or 98.8%, of the 403 CAPs from FY23.
- ✓ LRE conducted 32 HCBS Trainings with CMHSP and the Provider Network bolstering the knowledge of and compliance with the HCBS Final Rule. LRE has noticed marked improvements in Individual Plan of Service (IPOS) and Behavior Treatment Plan (BTP) HCBS compliance at the majority of its CMHSPs.
- ✓ LRE's CMHSP Site Reviews resulted in an overall improvement in Credentialing Audits of over 3%.
- ✓ LRE revised its Quality Assessment and Performance Improvement Plan (QAPIP) reporting template, and MDHHS' review of LRE's FY23 QAPIP and work plan resulted in the most favorable review ever garnered by LRE.

HCBS Trainings by Entity



Compliance Monitoring

State Fair Hearings

What is a State Fair Hearing (SFH)?

- ✓ It is a type of trial afforded to a Medicaid beneficiary that wishes to contest an appeal based off of a denial, reduction, or suspension of services.
- ✓ It is an impartial review by a state level Administrative Law Judge (ALJ) of a decision made by the local agency (CMHSP) or the PIHP.
- ✓ The beneficiary must exhaust the local appeal before requesting a fair hearing.
- ✓ It is governed by 42 CFR 431.200 et seq. 431.214.



All cases listed were originally denied by the CMH and LRE before proceeding to the state level for appeal, where the ALJ affirmed or reversed the case.



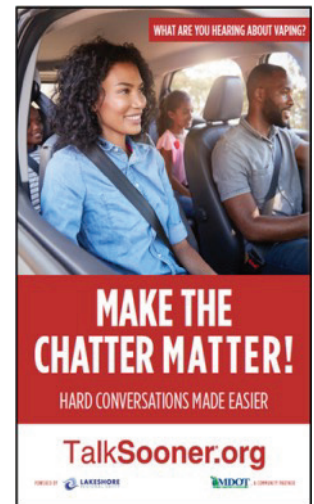
Prevention Services

TalkSooner

TalkSooner partnered with MDOT for the Make the Chatter Matter campaign. Posters from TalkSooner.org in English and Spanish were displayed at most of MDOT's 77 rest areas and Welcome Centers around the state to encourage family conversations.

MIRecovery.org

MIRecovery.org is a comprehensive set of options for people in recovery from substance use disorder and addiction. The site is hosted by the LRE regional work team.



LRE Funded SUD Prevention Numbers Served

Between FY21 and FY23, almost 300,000 individuals received prevention services throughout the region.

During FY21, providers began offering many services using a virtual format rather than in-person due to COVID-19. For many initiatives, virtual programming has continued where it was found to be beneficial.

During FY21, prevention providers proactively responded to limitations caused by COVID-19. Prevention providers digitized existing programs and resources that schools could use in remote settings which ensured service continuation. Providers remained flexible and accommodating to ensure communities received the services needed as situations evolved.

Estimated Reach

Estimated reach is collected for activities where an official count of persons is not possible. Providers estimate that they have achieved more than 16 million impressions through campaigns such as TalkSooner, Above the Influence, and others.

Estimated reach for the LRE region totaled 3M in FY21, 10.9M in FY22, and 2.4M in FY23. The increased reach during FY22 was likely due to additional time-limited specialty grants, many of which were used to support marketing campaigns.

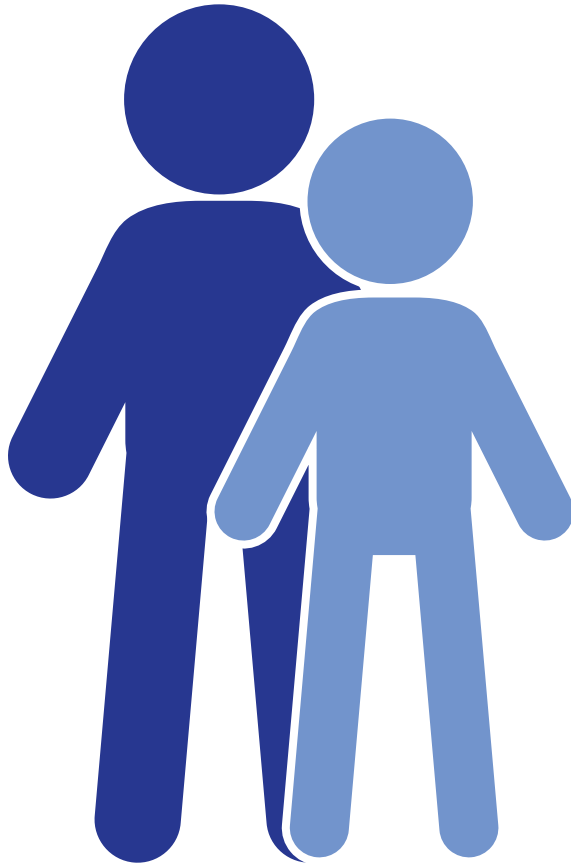
Hours of Service

More than 34,000 hours of service were provided in the following strategies:

	FY21	FY22	FY23
Education	2,969	3,822	2,902
Community-based	5,329	4,306	5,025
Environmental	3,664	705	980
Information Dissemination	561	212	623
Student Assistance/Prevention Assessment	632	664	979
Alternative	383	168	541
TOTAL	13,538	9,877	11,050



SUBSTANCE USE DISORDER PREVENTION



299,822
Persons Served

16.3M
Estimated Reach

34,463
Hours Of Service

Youth Tobacco Access

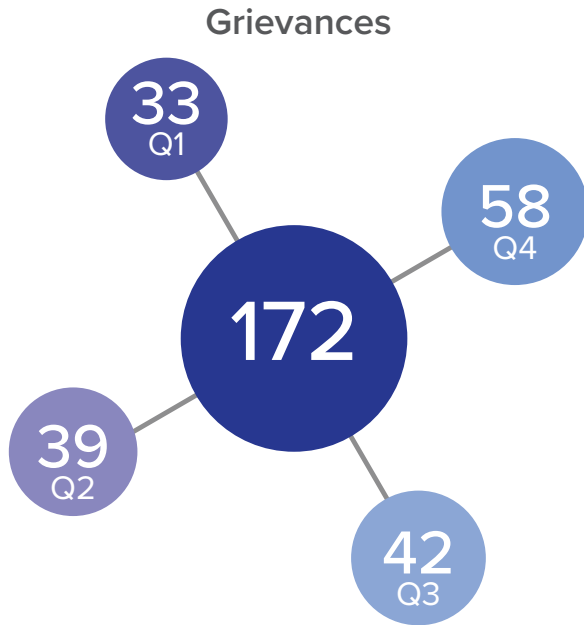
The Federal Synar Amendment requires states to enact and enforce laws prohibiting the sale of tobacco products to individuals under the age of 18. In December of 2019 federal law was enacted to restrict tobacco sales to anyone under the age of 21. Each state must conduct annual unannounced inspections for a random sample of tobacco retailers and achieve a success rate of at least 80%. If they do not, the state risks loss of up to 40% of the Substance Abuse Prevention and Treatment (SAPT) Block Grant funds. Checks conducted as part of this sample are called Synar compliance checks.

Synar Compliance Check Results

	FY21	FY22	FY23
# Checks completed	45	63	49
# Retailers that refused sale	38	58	41
Compliance Rate	84.4%	92.1%	83.7%

Customer Services

- ✓ LRE staff began quarterly audits of grievances, appeals and notice of adverse benefit determination denials.
- ✓ LRE offered Notice of Adverse Benefit Determination and Person-Centered Writing trainings, over 750 CMSHP staff have attended these trainings.
- ✓ LRE Consumer Advisory Panel has increased membership by including over six new community members to their group.

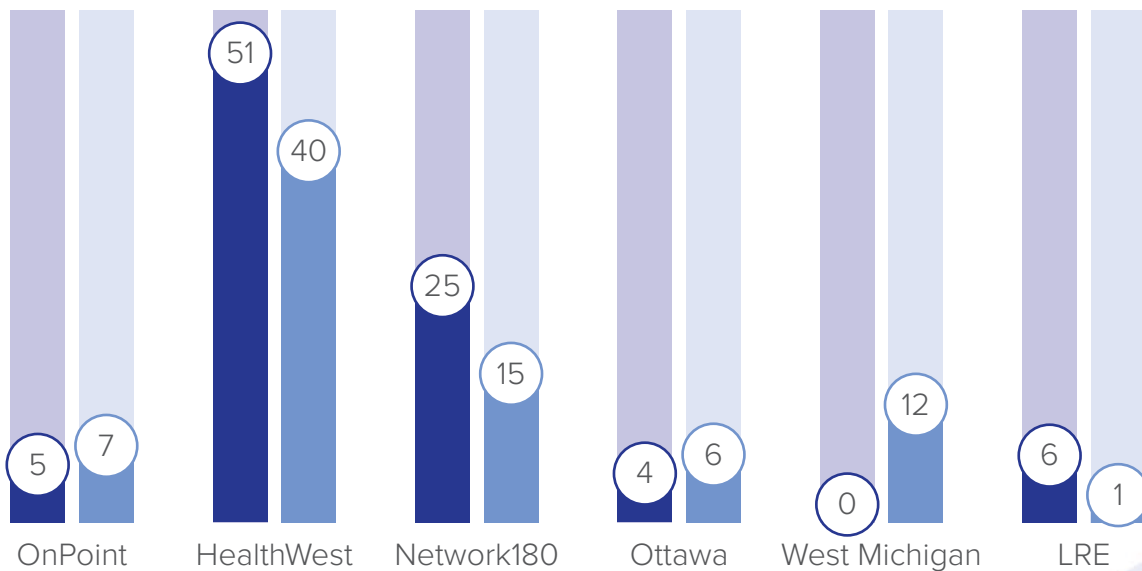


Quick Facts:

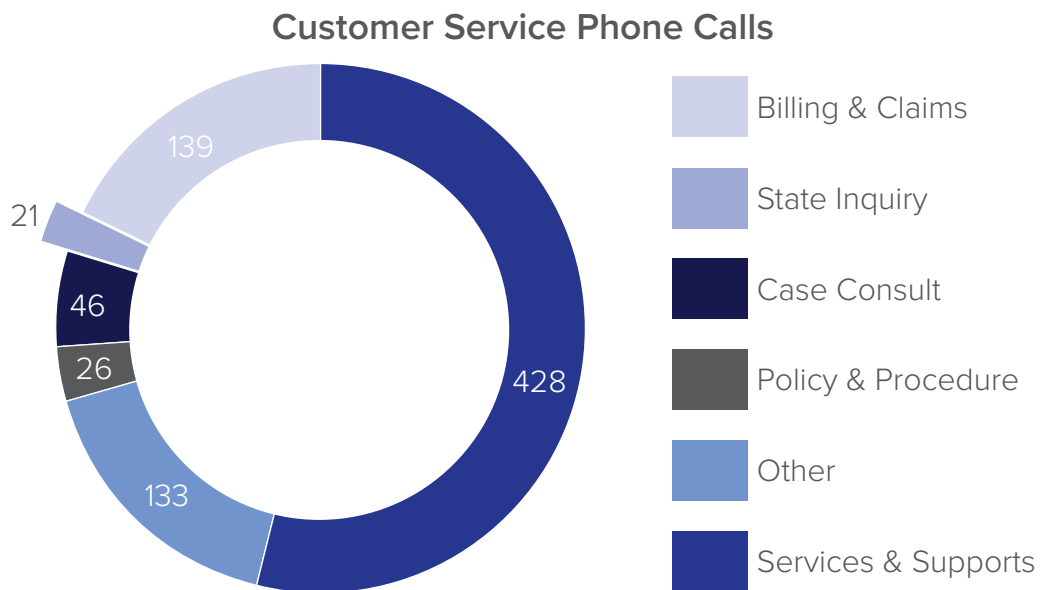
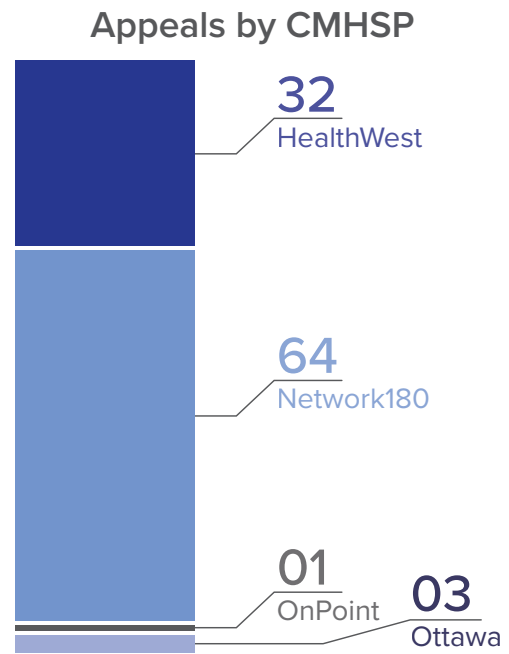
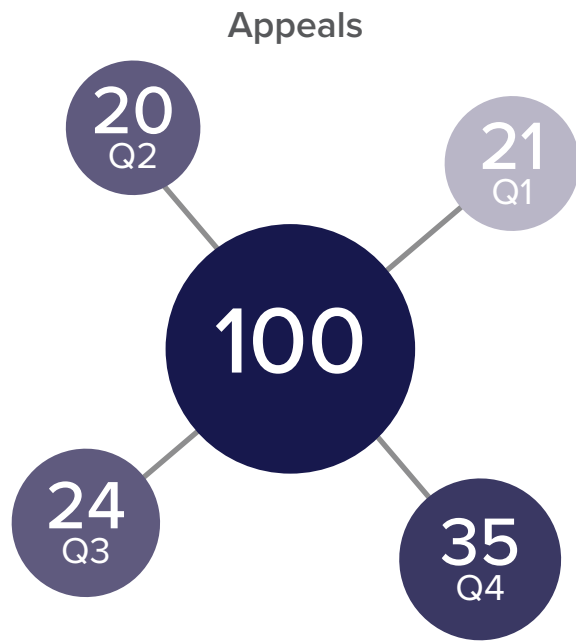
- ✓ 172 Grievances were reported for Region 3 in FY23; an increase of 77 from FY22.
- ✓ Most grievances concerned Quality of Care followed by Access and Availability.
- ✓ 81 grievances were unsubstantiated, 91 were substantiated - there was enough information to determine that the grievance was legitimate and in favor of the complainant.

Count of Closed Cases by Grievance Determination

DETERMINATION: ■ Substantiated ■ Unsubstantiated



CUSTOMER SERVICES



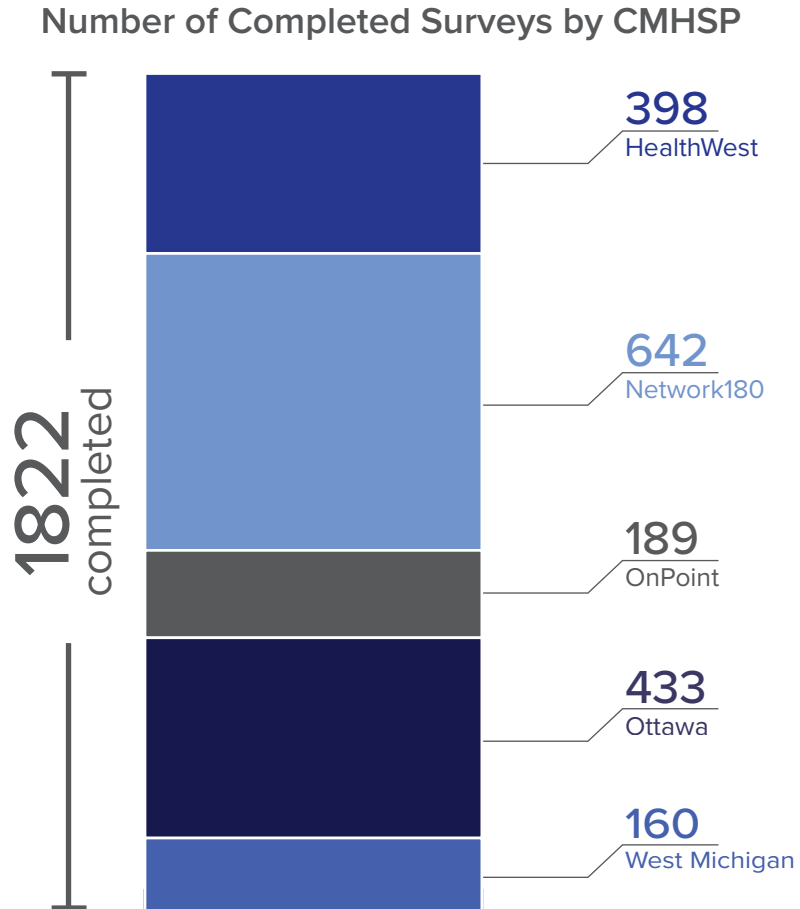
In FY23, the LRE received and recorded 793 calls to the Customer Service phone line.



CUSTOMER SERVICES

Customer Satisfaction Survey

Customer Services, in collaboration with member CMHSPs, created and implemented a customer satisfaction survey and corresponding procedure to ensure consistency in the region.



Autism

The LRE is responsible for administering medically necessary Behavioral Health Treatment (BHT) for individuals with an Autism Spectrum Disorder (ASD) ages 0-21. Behavioral Health Treatment is a comprehensive treatment including, Screening, Diagnosis, Applied Behavior Analysis (ABA), Parent Training, and Social Skills group.

The goal of delivering ABA is to help the identified consumer and their family achieve goals that will make meaningful change in their lives, by following the seven dimensions of behavior analysis identified by Baer, Wolf, and Risley (1968) in their seminal article Some Current Dimensions of Applied Behavior Analysis.

In 2023 the LRE has been focused on improving the consistency and access to ABA services. To that end, the LRE brought together a number of stakeholders to identify and provide recommendations to improve ABA service across the region. We facilitated a quarterly Autism Provider work group to improve regional consistency. We disseminated the regional guidelines and provided regional trainings on ABA service guidelines. Additionally, we developed improved data processes to better understand how ABA services are being utilized within the region.



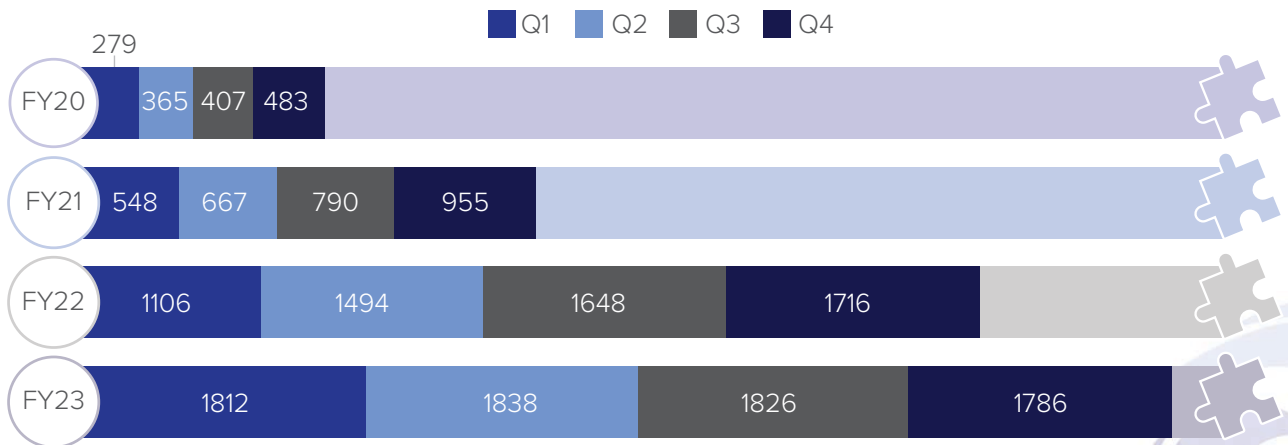
Capacity in the region continues to grow to keep up with demand. The LRE is working with the CMHSP partners and provider network to ensure appropriate services are provided.

DIRECT SERVICE HOURS

40.98 TOTAL MONTHLY AVERAGE

With input from regional CMH service providers, we developed and implemented a comprehensive data tracking system. During the months leading up to April 2023 we worked with IT and autism staff to create the data points we would need to continue to monitor services and enrollment. This ABA file submission form went live 4/1/23 and provides a view of all ABA services across the region. This will help the LRE to provide oversight and support regionally. By the end of FY23, all five CMH boards have consistently submitted their ABA data to the LRE monthly.

Number Of Open/Pending Cases Based On Eligibility



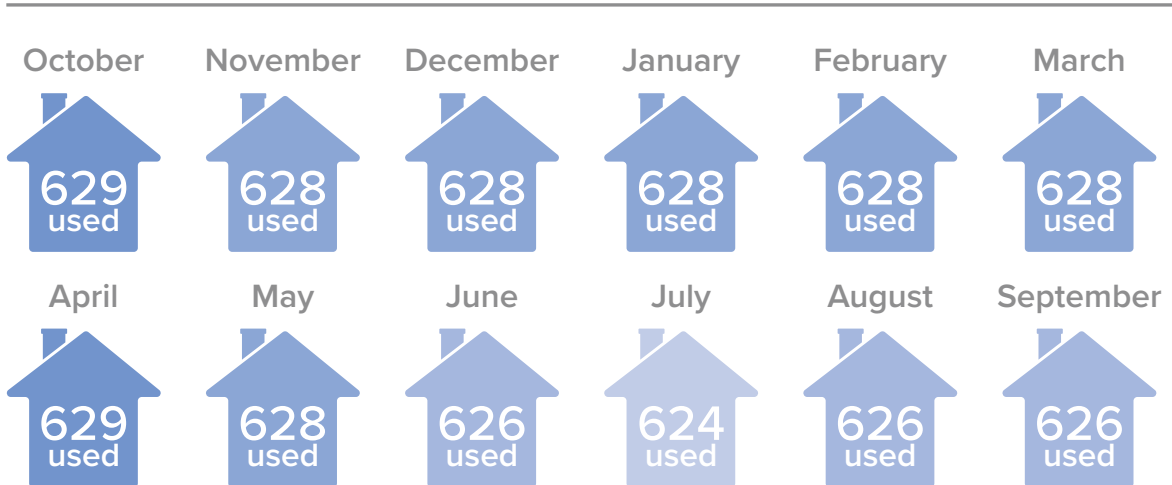
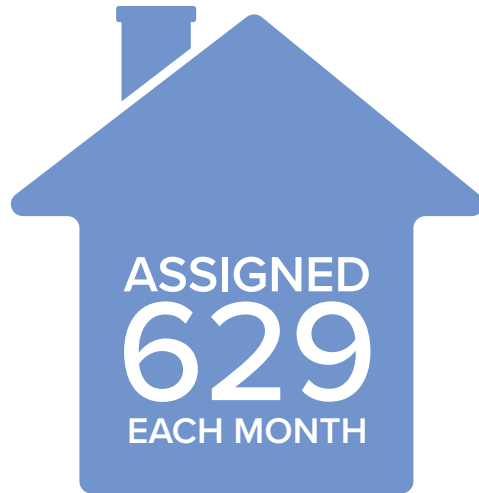
Habilitation Supports Waiver

Under the 1915 (c) of the Social Security Act, states may request a waiver of certain federal requirements in order to provide specified home and community based services to designated enrolled participants who would otherwise require institutional services reimbursed through Medicaid.

Requirements for the waiver:

- ✓ A client must have a developmental disability and must be living in a group or family home, private residence, or other community setting.
- ✓ They must have active Medicaid and need to meet the ICF/IID level of care.
- ✓ They must have a need for active treatment and receive at least one (1) HSW service per month.
- ✓ Consumers may not be enrolled simultaneously in any other 1915(c) waiver.

We served 664 clients across the region in FY23.



Children With Serious Emotional Disturbance Waiver

The Serious Emotional Disturbance Waiver (SEDW) continued to see an upward trend in enrollments for the region. The waiver is being well utilized and serving more children and families than we have ever had in the past. We saw an overall 23% increase in enrollments in FY23. The LRE also hosted MDHHS for an SEDW 101 Training in December 2022, and reinstated the SEDW Regional Workgroup, which began meeting again in September 2023.

SEDW Children Served

CMSHP	Start of FY23	End of FY23
OnPoint	3	6
HealthWest	17	16
Network180	34	46
Ottawa	18	19
West MI	4	4
TOTAL:	65	75

1915(i)SPA

In FY23 the LRE and the 1915(i)SPA Regional Workgroup worked to enroll all eligible iSPA cases into the WSA by 10/1/23. The CMHSPs did a tremendous amount of work identifying and entering cases that needed to be enrolled. The LRE also developed a 1915(i)SPA Policy and Procedure that were approved and put into effect at the end of FY23.

Total Enrolled by End of FY23



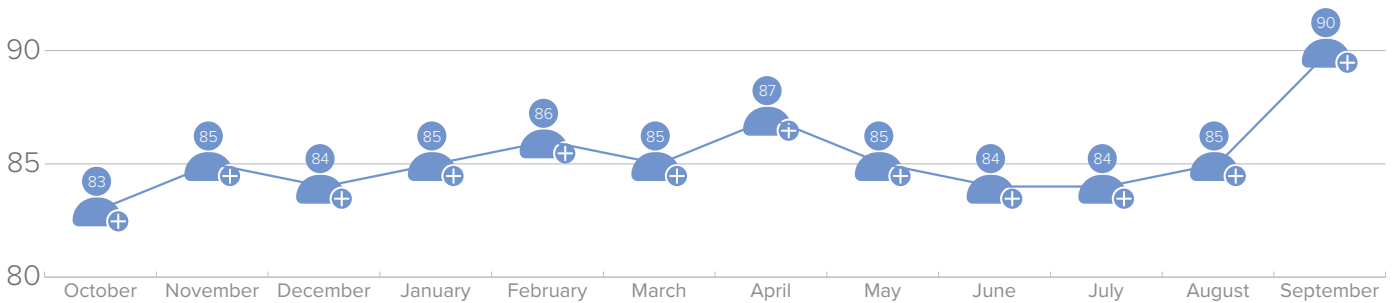
Children's Waiver Program

The LRE again saw an increase in children enrolled in the Children's Waiver Program (CWP) for FY23. Although this increase was not as significant as we saw in FY22, FY23 does mark the most children the LRE has served on the CWP to date. The Children's Waiver served a total of 105 children during FY23.

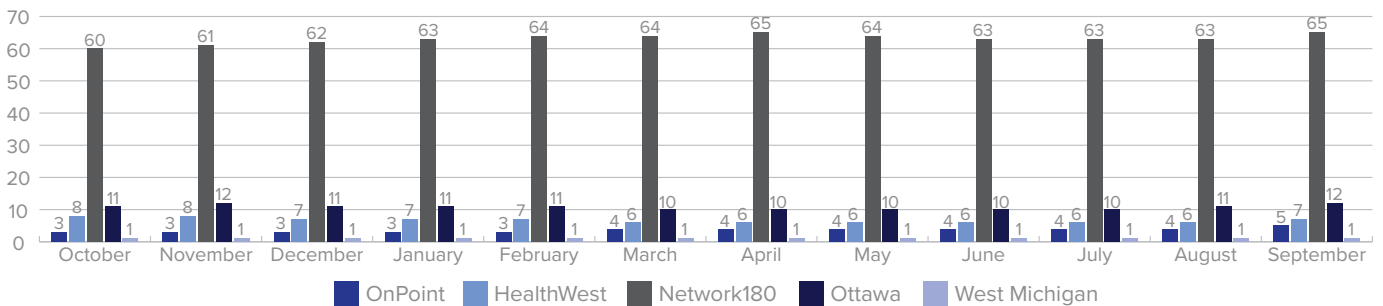
Services Provided to CWP Enrollees in FY23

- ✓ Targeted Case Management
- ✓ Community Living Supports
- ✓ Respite
- ✓ Music Therapy
- ✓ Art Therapy
- ✓ Recreational Therapy
- ✓ Environmental Accessibility Adaptations
- ✓ Family Training
- ✓ Non-Family Training
- ✓ Specialized Medical Equipment and Supplies
- ✓ Applied Behavior Analysis
- ✓ Occupational Therapy

Total Enrolled By Month



Total Enrolled By Month By CMHSP



Veteran Navigator

The purpose of the Veteran Navigator (VN) position is to coordinate resources of support for Veterans within Region 3. The VN does this through connecting with individual veterans, creating partnerships with organizations who provide resources to veterans, participating and leading coalitions to better serve Veterans, and acting as an expert for organizations within the region that are working to improve service delivery to Veterans.

Advocacy Highlights

- ✓ Following spinal surgery, a veteran required mobility assistance and received a chair lift from the VN, which was installed for their use. The chair lift was reported to have provided significant comfort and alleviated pain during recovery.
- ✓ The VN helped a veteran living in a poor-conditioned vehicle with no connections with the VA. The organization facilitated repairs to the car through a non-profit, introduced the veteran to a Veteran Service Officer (VSO) for a disability compensation application, and connected them with housing resources to address homelessness.

Support Highlights

- ✓ Collaborated with 72 veterans to facilitate their income, benefits, and healthcare assistance applications through the VA and various Veteran Service Organizations (VSOs).
- ✓ Assisted 6 homeless veterans by linking them with suitable programs that offer pathways from temporary to permanent housing solutions.
- ✓ Guided 71 veterans to local mental health and substance abuse treatment centers to receive necessary care within their communities.
- ✓ Engaged with 19 veterans to connect them with peer support and mental health resources, successfully preventing suicide in all cases for the fiscal year 2023.

The VN connected 102 regional veterans with individualized services in FY23.

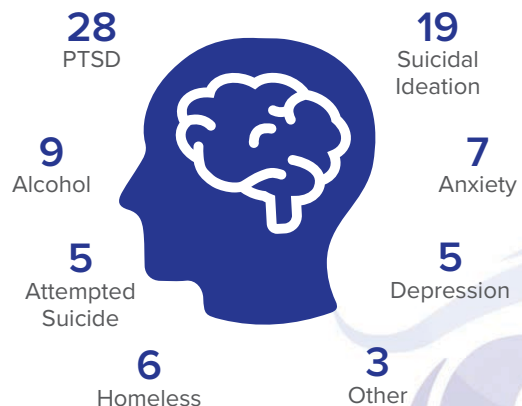
Referral Network

- ✓ In Fiscal Year 2023, the VN focused on building referral connections within Region 3 and creating new partnerships with 21 community organizations.

VN Resources Provided



Veteran Mental Health Challenges



Expenditures

	Medicaid MH and SUD	% of Total	Healthy Michigan MH and SUD	% of Total
OnPoint	\$ 28,613,392	12%	\$ 4,187,808	8%
HealthWest	\$ 54,212,549	16%	\$ 8,589,049	16%
Network180	\$ 169,785,764	51%	\$ 24,773,599	47%
Ottawa	\$ 47,289,254	14%	\$ 6,640,579	13%
West Michigan	\$ 16,961,224	5%	\$ 1,589,939	3%
Taxes and HRA	\$ 10,582,698	3%	\$ 6,149,670	12%
LRE	\$ 5,738,605	2%	\$ 712,528	1%
TOTAL	\$ 333,183,486	—	\$ 52,643,172	—

Revenue

	Medicaid MH and SUD	% of Total	Healthy Michigan MH and SUD	% of Total
OnPoint	\$ 28,613,392	9%	\$ 4,187,808	7%
HealthWest	\$ 54,212,549	17%	\$ 8,589,049	15%
Network180	\$ 169,785,764	52%	\$ 24,773,599	42%
Ottawa	\$ 47,289,254	14%	\$ 6,640,579	11%
West Michigan	\$ 16,961,224	5%	\$ 1,589,939	3%
Taxes and HRA	\$ 10,582,698	5%	\$ 6,149,670	11%
LRE	\$ 169,305	0%	\$ 6,281,828	11%
TOTAL	\$ 327,614,186	—	\$ 58,212,472	—

Figures have not been audited, and no assurance is provided.



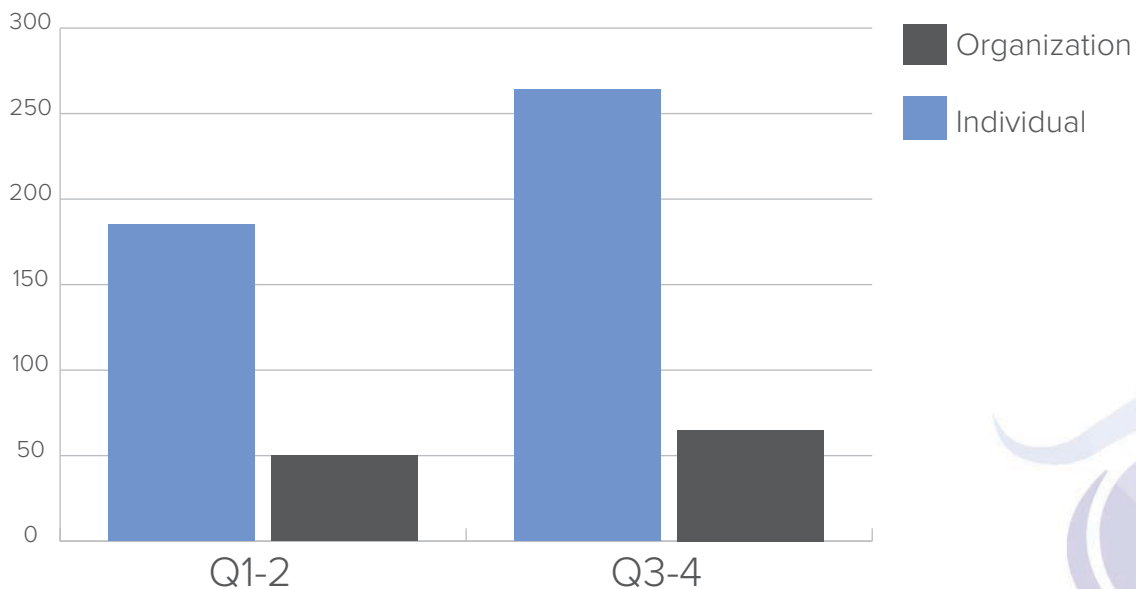


Credentialing

Credentialing for the LRE focuses on ensuring highly qualified providers are serving our consumers and families to support them in achieving their wellness goals. The primary activity for the LRE is ensuring all provider organizations in the service delivery network are appropriately credentialed to perform their contracted services. In addition, the LRE provides oversight and coordination for individual practitioner credentialing completed by our CMHSP partners.

Twice per fiscal year, the LRE submits a summary of regional credentialing activities to MDHHS.

Credentialing Stats



Utilization Management

Inter-Rater Reliability

FY23 was the first year the LRE published the Inter-Rater Reliability (IRR) exam to CMHSP staff. The Utilization Management Coordinator at the LRE, Tom Rocheleau, collaborated with CMHSP staff to provide tutorials of the exam and to make it more user friendly. The exam is published on March 1st and must be completed by March 31. Across the region, we had 38 staff take the IRR exam with a pass rate of over 90%.

Integrated Health (Joint Coordination) & Shared Metrics

Since 2016 the LRE has been working with six regional Medicaid Health Plans (MHP) to provide mandated care coordination efforts for Medicaid enrollees across Region 3. On a monthly basis, the LRE meets with the MHPs to discuss whether an enrollee's quality of life would be improved by creating an Integrated Care Plan. With an Integrated Care Plan, the CMHSPs and the MHPs work together to address the physical and behavioral health care needs for an enrollee. The CMHSP and MHP services can be used in tandem by an enrollee and can help provide a more effective level of care for enrollees with complex needs.

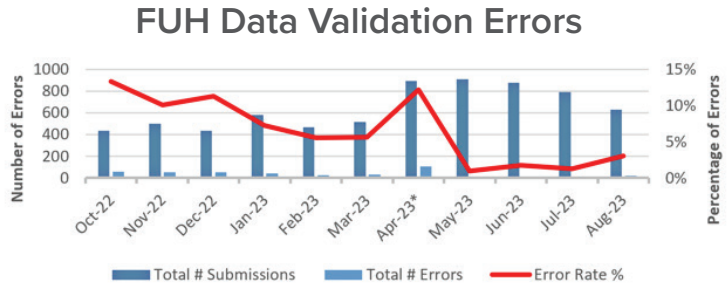
Clinical Management

The LRE region provides over 35 Evidence-Based Practices (EBP) which includes but is not limited to: Trauma Focused- Cognitive Behavioral Therapy (TF-CBT), Parent Management Training -Oregon Model (PMTO), Parenting Through Change (PTC), and QPR (Question, Persuade, Refer). The EBPs are delivered by a reported 80-100 trained staff per CMH via Peers, Wraparound, Crisis, Access, Clinicians, and support coordinators.



Health Data Exchange - Care Coordination (FUH)

A regional work group was formed in December 2022 to improve the quality, timeliness and effectiveness of the Follow Up after Hospitalization (FUH) data submitted regularly to the MDHHS CC360 system (MDHHS then shares this data with Medicaid Health Plans to help coordinate timely follow-up appointments after hospital discharge). The previous process required 15 PIHP staff hours per week and resulted in one file submission per week. After troubleshooting and addressing barriers in clinical and IT systems, the new process resulted in an 80% reduction in PIHP staff hours and a 56% decrease in data errors in CMHSP file submissions to the PIHP. It also provides for two file submissions per week instead of one so that data delivered to our Medicaid Health Plan partners is more timely and, therefore, more actionable.



Improvement in BHTEDS (Client Demographic) Completeness Over Time

Efforts at accelerating BHTEDS (client demographic) submissions to MDHHS resulted in LRE seeing steady improvements in completeness over time and staying above the MDHHS required 95% completeness threshold throughout most of FY23.

BHTEDS Completeness 3/2022-12/2023 (per MDHHS calculations)



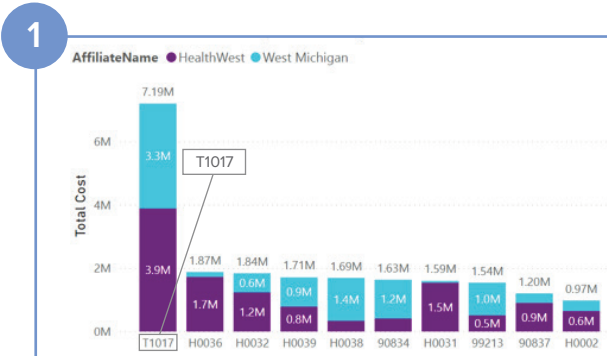
Data Analytics / Dashboards

Certified Community Behavioral Health Clinics (CCBHC)

With LRE becoming an “all CCBHC” region, we’ve invested in additional features and flexibilities on our CCBHC dashboard to help meet the complex information needs of various business units including finance, clinical, and quality teams at both the PIHP and CMHSP level.

CCBHC Costs & Units By CPT Code

This data shows procedure codes with the highest costs/number of people served.

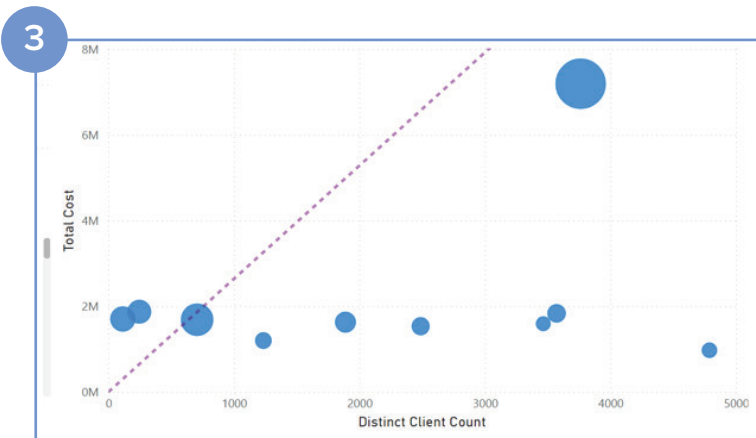
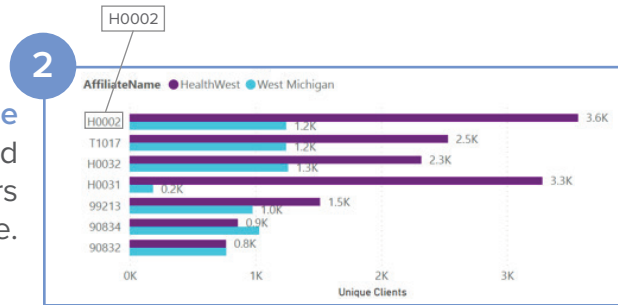


Total Cost of Services–Top 10 Codes by Cost

The procedure codes that had the highest amount billed and the relative billing for HealthWest and West Michigan.

Unique Clients Served by CPT Code

The procedure codes that had the highest number of consumers receiving that particular service.



Cost per Client–Top 10 Codes by Cost

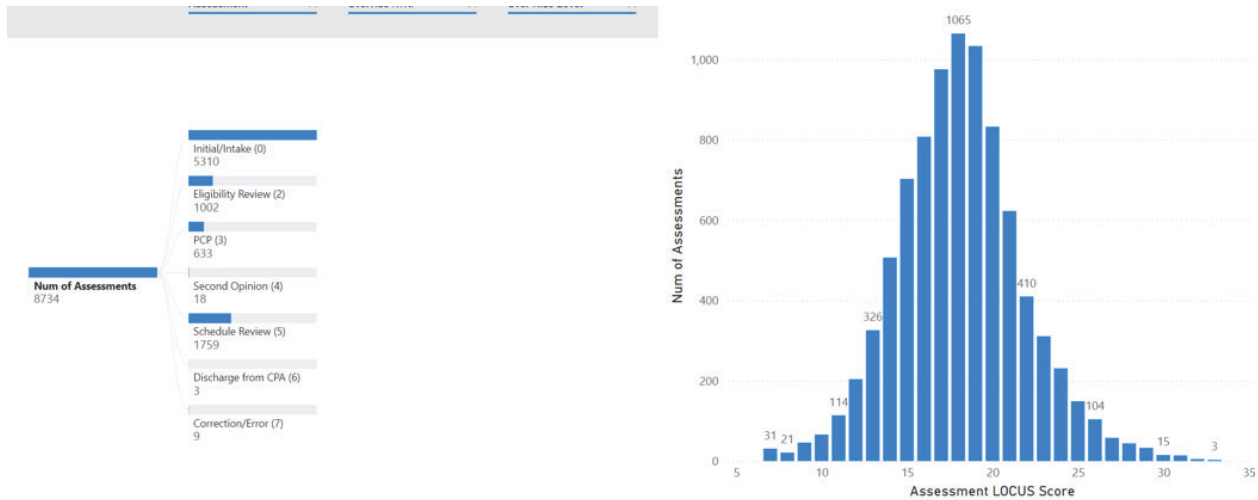
Bubbles that are higher indicate that service has a higher cost per client.

LOCUS

The LOCUS (Level Of Care Utilization System) is a standardized level of care placement tool used state-wide for all adults who are coming into care with a mental illness concern.

LRE has been studying its regional LOCUS data along several key dimensions to gain an understanding of how frequently the LOCUS is administered, how often the calculated score is overridden by a higher or lower score based on clinical judgment, to monitor consistency and fidelity to the tool, and to evaluate its potential uses for further data analytics to inform and guide future regional Utilization Management projects.

LOCUS Results/Individual Outlier





Customer Services

For assistance please call 1-800-897-3301 (TTY-711)

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