

Community Mental Health Member Authorities

REPORT OF THE MSHN DEPUTY DIRECTOR TO THE MSHN SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD (SUD OPB)

December 2020/January 2021

Bay Arenac Behavioral Health

CMH of Clinton.Eaton.Ingham Counties

CMH for Central Michigan

Gratiot Integrated Health Network

Huron Behavioral Health

The Right Door for Hope, Recovery and Wellness (Ionia County)

LifeWays CMH

Montcalm Care Center

Newaygo County Mental Health Center

Saginaw County CMH

Shiawassee Health and Wellness

Tuscola Behavioral Health Systems

Board Officers

Ed Woods Chairperson

Irene O'Boyle Vice-Chairperson

Colleen Mailette Secretary

Kurt Peasley Immediate Past Officer As part of a new reporting structure to the SUD OPB, members will now receive a written update provided by the Deputy Director. The report includes high level MSHN/regional matters and updates on SUD State or Federal initiatives. Board members will also now receive the financial reports directly from our Chief Financial Officer, Leslie Thomas. We hope this new structure brings additional value to the board members. Feedback on the report, including other topics the board may find useful, is welcomed, and appreciated.

MSHN/REGIONAL MATTERS

1. COVID-19 Operations Status:

- MSHN staff remain 100% remote except for one staff member assigned to manage inoffice operations. Staff report being able to maintain job responsibilities and support of
 our network with minimal interruption/change in functions. MSHN will continue in a
 fully remote environment under the current state directive for business operations.
- MSHN's Provider Network continues to provide essential services and supports with a mix of both in-person and telehealth services.
- MSHN continues to meet weekly with MDHHS regarding COVID-19, including pandemic
 updates, new policies/waiver change, and provider stabilization supports. The latest
 updates have included directions and/or concerns regarding the vaccination roll out by
 health departments.
- MSHN's <u>COVID-19 webpage</u> provides updates regarding federal, state and regional responses to the pandemic. Included under the resources section is <u>COVID risk graphs</u> for our region available for use by the network.
- MSHN's Board of Director's recently approved a <u>Direct Care Wage Premium Pay</u> extension to July 9, 2021, that was previously set to expire on January 9, 2021.
- Based on MDHHS direction, MSHN has also extended the <u>Provider Network Stabilization Plan</u> through September 30, 2021, which allows for financial support to providers experiencing challenges during the pandemic. Through November 30, 2020 for FY 20, the MSHN region has provided an additional \$1,664,942 in provider stabilization assistance to 29 substance abuse treatment and recovery providers. Residential treatment providers, including residential withdrawal management services providers, were supported with \$589,706 in stabilization payments and outpatient services providers were assisted with \$1.075M in stabilization support. All requests for stabilization assistance have been approved.

2. Substance Abuse Prevention and Treatment Block Grant (SABG):

 The SUD OP Board received a report and presentation in December regarding the MDHHS block grant reduction and MSHN's strategy to absorb the reductions along with the prevention, treatment, and recovery services providers. Staff met with applicable providers to begin implementation as of January 1, 2021.



 As indicated in the strategy, MSHN has planned for the possibility of allocating up to 25% of PA2 funds to support service continuation in FY21. MSHN expects to be able to provide the board with an update on the impacts of the reduction in April and June. This time frame allows for the second quarter expenditure reports to be reviewed and more accurate projections reported.

STATE OF MICHIGAN/STATEWIDE ACTIVITIES

3. Open Meeting Act Statue - Virtual Meetings Extended:

The Michigan Legislature has passed, and Governor Whitmer has signed, what is now PA 254 of 2020 which extends authorization for virtual meetings of public bodies for any reason through March 30, 2021. On and after March 31 through 12/31/21, virtual meetings are only allowed under specific circumstances. The next meeting of the SUD OP Board is scheduled for April 21, 2021. MSHN has planned for the meeting to take place virtually in anticipation of an extension but will communicate via email with board members as soon as possible regarding any change in venue, including any rules regarding social distancing.

4. State FY21 & FY22 Key Budget Issues:

Governor Whitmer is expected to present her FY22 executive budget recommendations to the legislature on February 11, which is the unofficial kickoff of the budget process. It is also expected to include a FY21 supplemental budget request. The main budget items applicable to SUD include: DCW \$2/hour increase through 9.30.21, CCBHC implementation funding, and SUD block grant and SOR funding shortfalls.

On February 3, 2021, the House Appropriations Committee passed out the <u>HB 4019</u>, which is a FY21 supplemental budget that includes additional federal SUD block grant dollars. Substance Abuse Prevention and Treatment Block Grant includes authorization to receive an additional \$13.1 million in newly awarded federal block grant funding with Mental Health Block Grant to receive an additional \$12.0 million. MSHN is unsure how this will be allocated if it passes the full house and senate but if approved, will help to minimize the impact of the SABG reduction strategy.

5. State Submits application for 2 SAMHSA Grants:

First — State Pilot Grant Program for Treatment of Pregnant and Postpartum Women to enhance the flexibility in the use of funds for family-based services, addressing the continuum of care in non-residential settings and promote coordinated, effective and efficient state systems by encouraging new approaches and models of service delivery. (This would affect those PIHPs already involved it the Opioid Health Home project)

Second – Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths to reduce opioid overdose related deaths and adverse events among adults 18 years of age and older by training first responders and other key community sectors in SAMHSA's OEND Tool Kit. More to come on this one, we are still looking at data to help determine target areas.

FEDERAL/NATIONAL ACTIVITIES

6. CDC Toolkit to Educate and Raise Awareness of COVID-19 Vaccinations:

CDC has published new toolkits for community-based organizations available at https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/community-organization.html



and essential workers available at https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/essential-workers.html to educate community members and workers about COVID-19 vaccines, raise awareness about the benefits of vaccination, and address common questions and concerns.

7. CDC Health Alert: Increase in Fatal Overdoses in the US

The CDC issued a <u>national healthcare alert</u> noting the following:

- substantial increases in drug overdose deaths across the United States, primarily driven by rapid increases
 in overdose deaths involving synthetic opioids excluding methadone (hereafter referred to as synthetic
 opioids), likely illicitly manufactured fentanyl;
- a concerning acceleration of the increase in drug overdose deaths, with the largest increase recorded from March 2020 to May 2020, coinciding with the implementation of widespread mitigation measures for the COVID-19 pandemic;
- the changing geographic distribution of overdose deaths involving synthetic opioids, with the largest percentage increases occurring in states in the western United States;
- significant increases in overdose deaths involving psychostimulants with abuse potential (hereafter referred to as psychostimulants) such as methamphetamine; and
- recommendations for communities when responding to the evolving overdose crisis.

NOTE: MDHHS epidemiologists have seen an increase in drug overdose deaths in Michigan during the COVID-19 pandemic. However, at this time, there is insufficient information to quantify the involvement of synthetic opioids in this increase.

8. President Biden to Extend Marketplace:

"In accordance with the Executive Order issued today by President Biden, the CMS determined that the COVID-19 emergency presents exceptional circumstances for consumers in accessing health insurance and will provide a Special Enrollment Period (SEP) for individuals and families to apply and enroll in the coverage they need. This SEP will be available to consumers in the 36 states served by Marketplaces that use the HealthCare.gov platform, and CMS will conduct outreach activities to encourage those who are eligible to enroll in health coverage. CMS strongly encourages states operating their own Marketplace platforms to make a similar enrollment opportunity available to consumers in their states.

Starting on February 15, 2021 and continuing through May 15, 2021, Marketplaces using the HealthCare.gov platform will operationalize functionality to make a SEP available to all Marketplace-eligible consumers who are submitting a new application or updating an existing application. These consumers will newly be able to access the SEP through a variety of channels: through HealthCare.gov directly, the Marketplace call center, or direct enrollment channels.

CMS plans to spend \$50 million on outreach and education, on a mix of tactics to increase awareness, including advertisements on broadcast, digital, and an earned media.

Some consumers may already be eligible for other existing SEPs, Medicaid, or the Children's Health Insurance Program (CHIP) – they can visit HealthCare.gov now to find out if they can enroll even before this new SEP. Starting February 15, consumers seeking to take advantage of this SEP can find out if they are eligible by visiting HealthCare.gov, and are no longer limited to calling the Marketplace call center to access this SEP.



As always, consumers found eligible for Medicaid or CHIP will be transferred to their state Medicaid and CHIP agencies for enrollment in those programs."

Additional information about the Health Insurance Marketplace is available at https://www.healthcare.gov/quick-guide/getting-marketplace-health-insurance/ while a press release is available at https://www.hhs.gov/about/news/2021/01/28/hhs-announces-marketplace-special-enrollment-period-for-covid-19-public-health-emergency.html.

9. <u>President Biden's Proposed Emergency a proposed emergency legislative package entitled an American</u> Rescue Plan.

The high-level view of the general allocation of recommended funding follows:

Category	Cost	Highlights
Direct aid	\$1,000,000,000,000	\$1400 checks for most Americans; rental, food, childcare and utility assistance for those in need
Community support	\$440,000,000,000	\$350 billion for first responders and other essential workers; grants for small businesses, tribal governments and transit agencies
National vaccination program/school reopening	\$400,000,000,000	Funds to expand vaccinations and testing; \$130 billion for schools to achieve safe reopening
Information technology	\$10,000,000,000	Funds to modernize the federal cybersecurity infrastructure

The principal provisions of the Plan are:

Mount a national vaccination program, contain COVID-19, and safely reopen schools.

- Mount a national vaccination program
- Scale up testing to stop the spread of COVID, safely reopen schools and protect at-risk populations
- Mobilize a public health jobs program to support COVID-19 response
- Address health disparities and COVID-19
- Protect vulnerable populations in congregate settings
- Identify and address emerging strains of COVID-19
- Provide emergency relief and purchase critical supplies and deploy the National Guard
- Invest in treatments for COVID-19
- Protect workers against COVID-19
- Restore US leadership globally and build better preparedness
- Provide schools the resources they need to reopen safely
 - o Provide \$130 billion to help schools to safely reopen
 - o Expand the Higher Education Emergency Relief Fund
 - o Hardest Hit Education Fund



- Provide emergency paid leave to 106 million more Americans to reduce the spread of the virus and call on Congress to:
 - Put the requirement back in place and eliminate exemptions for employers with more than 500 and less than 50 employees
 - o Provide expanded paid sick leave and family and medical leave
 - o Expand emergency paid leave to include federal workers
 - o Provide a maximum paid leave benefit of \$1400 per-week for eligible workers
 - o Reimburse employers with less than 500 employees for the cost of this leave
 - Reimburse state and local government for the cost of this leave
 - o Extend emergency paid leave measures until September 30, 2021

Deliver immediate, direct relief to families bearing the brunt of the crisis

- Give working families a \$1400 per-person check to help pay their bills, bringing their total relief payment from this and the December down payment to \$2000
- Extend and expand unemployment insurance benefits so American workers can pay their bills
 - Extend financial assistance for workers who have exhausted their regular unemployment compensation henefits
 - Extend financial assistance for unemployed workers who do not typically qualify for unemployment compensation benefits
 - Fully fund states' short-term compensation programs and additional weeks of benefits
- Help struggling households keep a roof over their heads
 - o Ensure that families hit hard by the economic crisis won't face eviction or foreclosure
 - Help renters and small landlords make ends meet by providing an additional \$130 billion in rental and critical energy and water assistance for hard-hit individuals and families
 - Deliver \$5 billion in emergency assistance to help secure housing for people experiencing or at risk of homelessness
- Address the growing hunger crisis in America
 - o Extend the 15 percent SNAP benefit increase
 - o Invest \$3 billion to help women, infants and children get the food they need
 - Partner with restaurants to feed American families and keep restaurant workers on the job at the same time
 - Support SNAP by temporarily cutting the state match
 - o Provided US territories with \$1 billion in additional nutrition assistance for their residents
- Raise the minimum wage to \$15 per hour
- Call on employers to meet their obligations to frontline essential workers and provide back hazard pay
- Expand access to high-quality, affordable child care
- Help hard-hit child care providers, including family child care homes, cover their costs and operate safely by creating a \$25 billion emergency stabilization fund
- Expand child care assistance to help millions of families and help parents return to work
- Increase tax credits to help cover the cost of childcare
- Bolster financial security for families and essential workers in the midst of the pandemic
- Call for an additional \$1 billion for states to cover the additional cash assistance to TANF
- Preserve and expand health coverage
- Expand access to behavioral health services by asking Congress to appropriate an additional \$4 billion for SAMHSA and HRSA to expand access to these services
- Combat increased risk of gender-based violence



Provide critical support to struggling communities

- Provide small businesses with the funding they need to reopen and rebuild
 - o Provide grants to more than 1 million of the hardest hit businesses
 - Leverage \$35 billion in government funds into \$175 billion in additional small business lending and investment
- Provide support for first responders and other essential workers
- Protect the future of public transit
- Support Tribal governments' response to COVID-19

Modernize federal information technology to protect against future cyber attacks

- Expand and improve the Technology Modernization Fund
- Surge cybersecurity technology and engineering expert hiring
- Build shared, secure services to drive transformational projects
- Improving security monitoring and incident response activities

Submitted by:

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