



Thursday, August 05, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)
4:00-6:00 p.m.

MEMBERS PRESENT: Glenn Adams, Cumberland County Commissioner, JD; Heidi Carter, Durham County Commissioner, MPH, MS; Maria Cervania, Wake County Commissioner, MPH; Carol Council, MSPH; David Curro, BS; Vicki Evans; Lodies Gloston, MA; David Hancock, MBA, MPAff; D. Lee Jackson, BA; John Lesica, MD; Lynne Nelson, Chair, BS; Gino Pazzaglini, MSW LFACHE; Pam Silberman, JD, DrPH; Samruddhi Thaker, PhD; and McKinley Wooten, Jr., JD

APPOINTED MEMBERS ABSENT: Angela Diaz, MBA; Donald McDonald, MSW; vacancy representing Durham County; vacancy representing Johnston County; and vacancy representing Wake County

GUEST(S) PRESENT: Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Intellectual Disability, and Substance Abuse Services); and Pamela Wade

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications and Marketing Specialist II; Joey Dorsett, Senior Vice-President/Chief Information Officer; Angel Felton-Edwards, Senior Vice-President/Population Health and Care Management; Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Veronica Ingram, Executive Assistant II; Wes Knepper, Senior Vice-President/Quality Management; Mehul Mankad, Chief Medical Officer; Sara Pacholke, Senior Vice-President/Financial Operations; Brian Perkins, Senior Director/Strategy and Government Relations; Monica Portugal, Chief Compliance Officer; Robert Robinson, Chief Executive Officer; Sean Schreiber, Executive Vice-President/Chief Operating Officer; Jennifer Stoltz, Administrative Assistant II; Tammy Thomas, Senior Vice-President/Business Evolution; Sara Wilson, Senior Director of Government Relations; Carol Wolff, General Counsel; and Doug Wright, Director of Community and Member Engagement

1. **CALL TO ORDER:** Board Chair Lynne Nelson called the meeting to order at 4:01 p.m.

AGENDA ITEMS:	DISCUSSION:
2. Agenda Adjustments	There were no adjustments to the agenda.
3. Public Comment	There were no public comments.
4. Chair's Report	<p>Chair Nelson noted the following:</p> <ul style="list-style-type: none"> • Unique time due to Medicaid Transformation in NC and integral work of board members is required; she encouraged members to advise Ms. Ingram if they are unable to attend a board or board committee meeting • Board meetings will reconvene meeting in person in September at Alliance offices • She encouraged members to contact Ms. Ingram if technical assistance is needed, including recent email migration and app installation • Additionally, she shared that the Board typically chooses to have the Executive Committee serve as the ad hoc committee to provide preliminary review of the CEO and make recommendations to the Board. <p><u>BOARD ACTION</u> A motion was made by Ms. Gloston to appoint the Executive Committee as the FY22 (2021-2022) ad hoc committee to provide preliminary review of the CEO and make recommendations to the Board; motion seconded by Mr. Pazzaglini. Motion passed unanimously.</p>
5. CEO's Report	<p>Mr. Robinson shared the following:</p> <ul style="list-style-type: none"> • The agency's received the NC DHHS RFP tailored plan award with the anticipated go-live date of July 1, 2022

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(virtual meeting via videoconference)
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<ul style="list-style-type: none">• Congratulations to Alliance staff, Veronica Ingram, who received the 2021 achievement award from the International Association of Administrative Professionals (IAAP Honors Alliance's Veronica Ingram - Alliance Health (alliancehealthplan.org)) <p>Mehul Mankad, Chief Medical Officer, provided an update on 2020 increase of suicide rates as noted in the Wall Street Journal article, especially those impacted by an overdose. Dr. Mankad noted the agency's effort to address this concern through use of naloxone kits, increased telehealth opportunities, and provider rate enhancements to support provider sustainability through the pandemic. He also provided updated information on NC's COVID delta variant cases and the agency's response. The presentation is saved as part of the Board's files.</p>
6. Consent Agenda	<p>A. Draft Minutes from June 3, 2021, and June 29, 2021, Board Meetings – page 5 B. Client Rights/Human Rights Committee Report – page 12 C. Executive Committee Report – page 64</p> <p>The consent agenda was sent as part of the Board packet; it is attached to and made part of these minutes. There were no comments or discussion about the consent agenda.</p> <p><u>BOARD ACTION</u> A motion was made by Dr. Silberman to adopt the consent agenda; motion seconded by Mr. Curro. Motion passed unanimously.</p>
7. Committee Reports	<p>A. Consumer and Family Advisory Committee – page 68 The Alliance Consumer and Family Advisory Committee (CFAC) is composed of consumers and/or family members from Durham, Wake, Cumberland or Johnston counties who receive mental health, intellectual/developmental disabilities or substance use/addiction services. This report included documents from the June 24, 2021, Cumberland CFAC meeting.</p> <p>Doug Wright, Director of Community and Member Engagement, presented the report on behalf of Jason Phipps, CFAC Chair. He noted that CFAC did not meet in July, congratulated the agency on winning the NC DHHS' tailored plan award, and shared that CFAC elected to continue meeting remotely through September 2021. The CFAC report is attached to and made part of these minutes.</p> <p><u>BOARD ACTION</u> The Board received the report.</p> <p>B. Quality Management Committee Report – page 92 The Quality Management Committee approves the agency's annual quality improvement projects, monitors progress in meeting quality improvement goals, and provides guidance to staff on QM priorities and projects. This report included draft minutes from the June 3, 2021, meeting.</p> <p>Pam Silberman, Committee Chair, introduced the report, which was presented by Wes Knepper, Senior Vice-President/Quality Management. Mr. Knepper reviewed NC DHHS' quality strategy, which includes goals, objectives, measures and interventions for three aims: better care, healthier people/communities, and smarter spending. He provided an overview of tailored plan quality measures, noting differences from current measures. Additionally, Mr. Knepper noted anticipated accountability efforts including performance measures, surveys, and progress with accreditation for all health plans. He concluded with a summary of the agency's preparation to meet these</p>

Thursday, August 05, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<p>measures and guidelines. The committee report is attached to and made part of these minutes; the presentation is saved as part of the Board's files.</p> <p><u>BOARD ACTION</u> The Board received the report.</p> <p>C. Finance Committee Report – page 98 The Finance Committee's function is to review financial statements and recommend policies/practices on fiscal matters to the Board. This report included draft minutes from the June 3, 2021, meeting, the Summary of Savings/(Loss) by Funding Source, ratios for the period ending May 31, 2021, and recommendations to the Board to approve all presented contracts over \$500,000, and any other applicable Finance Committee topics.</p> <p>David Hancock, Committee Chair, introduced the report, which includes recommendations reviewed by the Executive Committee and Finance Committee and submitted for board approval. Kelly Goodfellow, Executive Vice-President/Chief Financial Officer, presented the recommendations, the RFP (request for proposal) process and recommended awardees: Northwood as DME (durable medical equipment) vendor and Avesis for Vision. The committee report is attached to and made part of these minutes; the presentation is saved as part of the Board's files.</p> <p><u>BOARD ACTION</u> A motion was made by Dr. Lesica to approve the selected DME and Visions vendors; motion seconded by Ms. Gloston. Motion passed unanimously.</p>
8. Closed Session(s)	<p><u>BOARD ACTION</u> A motion was made by Mr. Pazzaglini to enter closed session pursuant to NC General Statute 143-318.11 (a) (1) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1; motion seconded by Commissioner Cervania. Motion passed unanimously.</p>
9. Reconvene Open Session	<p>The Board returned to open session.</p>
10. Special Updates/Presentation(s)	<p>A. Annual Compliance Report – page 107 The Alliance compliance program is designed to deter and mitigate risk to the organization through prevention, detection and remediation activities. It is intended that the scope of all compliance activities promotes integrity, ensures objectivity, fosters trust and supports the stated values of Alliance. In accordance with contractual obligations and federal regulations, Alliance shall have an effective compliance program with reasonable oversight by the governing board, understanding the scope and operations of the compliance program. The Board approved Corporate Compliance Plan states that a report of compliance efforts will be presented annually to the Alliance Health Board of Directors. Monica Portugal, Chief Compliance Officer presented the report and noted the board's role in compliance oversight and this required annual compliance report. The presentation is saved as part of the Board's files.</p> <p><u>BOARD ACTION</u> The Board received the presentation.</p>

Thursday, August 05, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:
	<p>B. Strategic Plan Update (10 minutes) – page 108 Alliance Health has a recommendation for an accelerated process to update its strategic plan; this will meet the spirit and intent of the Board’s strategic plan policy while focusing efforts on growth opportunities and implementation of NC DHHS’ tailored plan. Kelly Goodfellow, Executive Vice-President/Chief Financial Officer presented the update.</p> <p>Ms. Goodfellow provided background on the agency’s strategic plan, noting participants, and policies related to the strategic plan, a timeline, and anticipated next steps. The presentation is saved as part of the Board’s files.</p> <p><u>BOARD ACTION</u> The Board received the update.</p>
11. Adjournment	All business was completed; the meeting adjourned at 6:41 p.m.

Next Board Meeting
Thursday, September 02, 2021
4:00 – 6:00 pm

Minutes approved by Board on September 2, 2021.



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Draft Minutes from the June 3, 2021, and June 29, 2021, Board Meetings

DATE OF BOARD MEETING: August 5, 2021

REQUEST FOR AREA BOARD ACTION: Approve the draft minutes.

CEO RECOMMENDATION: Approve the draft minutes.

RESOURCE PERSON(S): Lynne Nelson, Board Chair; and Robert Robinson, CEO



Thursday, June 03, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)
4:00-6:00 p.m.

MEMBERS PRESENT: Glenn Adams, Cumberland County Commissioner, JD; Heidi Carter, Durham County Commissioner, MPH, MS (entered at 4:59 p.m.); Maria Cervania, Wake County Commissioner, MPH; Carol Council, MSPH; David Curro, BS; Lodies Gloston, MA; David Hancock, MBA, MPAff; Duane Holder, MPA; Donald McDonald, MSW; Lynne Nelson, Vice-Chair, BS; Gino Pazzaglini, Board Chair, MSW LFACHE; and Pam Silberman, JD, DrPH

APPOINTED MEMBERS ABSENT: Angela Diaz, MBA; D. Lee Jackson, BA; McKinley Wooten, Jr., JD vacancy representing Cumberland County; two vacancies representing Durham County; vacancy representing Johnston County; and vacancy representing Wake County

GUEST(S) PRESENT: Denise Foreman, Wake County Manager’s office; Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Intellectual Disability, and Substance Abuse Services); Heather Griffin-Dolciney, Freedom House Recovery Center; Robin Marx, SAS; Janaki Nicastro, Freedom House Recovery Center; and Shaneka Parker, Freedom House Recovery Center

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications and Marketing Specialist II; Damali Alston, Director of Network Evaluation; Michael Bollini, Executive Vice-President/Chief Operating Officer; Victoria Boviall, Integrated Care Nurse; Joey Dorsett, Senior Vice-President/Chief Information Officer; Angel Felton-Edwards, Senior Vice-President/ Senior Vice-President/Population Health and Care Management; Doug Fuller, Senior Director of Communications; Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Nathania Headley, Post Transition Engagement Specialist; Veronica Ingram, Executive Assistant II; Joshua Knight, Director of Internal Audit; Mehul Mankad, Chief Medical Officer; Ann Oshel, Senior Vice-President, Community Health and Well-Being; Sara Pacholke, Senior Vice-President/Financial Operations; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Monica Portugal, Chief Compliance Officer; Robert Robinson, Chief Executive Officer; Sean Schreiber, Executive Vice-President/Network and Community Health; Jennifer Stoltz, Administrative Assistant II; Tammy Thomas, Senior Director of Project Portfolio Management; Sara Wilson, Senior Director of Government Relations; Carol Wolff, General Counsel; and Doug Wright, Director of Community and Member Engagement

1. **CALL TO ORDER:** Board Chair Gino Pazzaglini called the meeting to order at 4:03 p.m.

AGENDA ITEMS:	DISCUSSION:
2. Agenda Adjustments	There were no adjustments to the agenda.
3. Public Comment	There were no public comments.
4. Chair’s Report	Chair Pazzaglini reminded Board members of a second meeting this month, June 29, 2021, from 8:00-8:30 am. Staff will confirm if the meeting is still needed and if not, it will be cancelled. Additionally, he reminded Board members that the August 5, 2021, meeting will be held remotely. If the Board needs to meet before August, a special meeting will be called. Lastly, Chair Pazzaglini reminded Board members that several items on today’s agenda require supermajority approval.
5. CEO’s Report	Mr. Robinson introduced Angel Felton-Edwards, Senior Vice-President/Population Health and Care Management. He also provided an update from this week’s NCQA (National Committee for Quality Assurance - an organization that sets quality measures for health plans) visit; the NCQA accreditation is a requirement for NC DHHS’ tailored plans. Mr. Robinson recognized Wes Knepper, Senior Director of Quality Management, and Ginger Yarborough, NCQA Accreditation Manager, for leading efforts in preparing the agency for this accreditation.
6. Consent Agenda	A. Draft Minutes from May 6, 2021, Board Meeting – page 5 B. Audit and Compliance Committee Report – page 10 C. By-Laws/Policy Committee Report – page 28

AGENDA ITEMS:	DISCUSSION:
	<p>D. Network Development and Services Committee Report – page 40 E. Quality Management Committee Report – page 43 F. HR FY22 (Fiscal Year 2021-2022) Classification and Grade Plan – page 47</p> <p>The consent agenda was sent as part of the Board packet; it is attached to and made part of these minutes. Chair Pazzaglini reminded Board members that the consent agenda including approval of the by-laws revision and corporate compliance plan. There were no comments or discussion about the consent agenda.</p> <p><u>BOARD ACTION</u> A motion was made by Ms. Gloston to approve the consent agenda; motion seconded by Mr. McDonald. Motion passed unanimously.</p>
<p>7. Committee Reports</p>	<p>A. Consumer and Family Advisory Committee (5 minutes) – page 58 The Alliance Consumer and Family Advisory Committee (CFAC) is composed of consumers and/or family members from Durham, Wake, Cumberland or Johnston counties who receive mental health, intellectual/developmental disabilities or substance use/addiction services. This month’s report includes draft minutes from the May Steering, Johnston, Durham, and Wake meetings.</p> <p>Dave Curro presented the report on behalf of Jason Phipps, CFAC Chair. Mr. Curro reviewed topics from recent meetings including preparation for the tailored plan, information from the innovations waitlist, adjusting to current public health guidelines, and pending legislation in the NC General Assembly (House Bill 19). The CFAC report is attached to and made part of these minutes.</p> <p><u>BOARD ACTION</u> The Board received the report.</p> <p>B. Executive Committee Report (10 minutes) – page 121 The Executive Committee sets the agenda for Board meetings and acts in lieu of the Board between meetings. Actions by the Executive Committee are reported to the full Board at the next scheduled meeting. This month’s report includes draft minutes from the previous meeting and an appointment recommendation for a vacant seat representing Durham County. Chair Pazzaglini presented the appointment recommendation, which was previously sent to Board members.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Curro to forward Samruddhi Thaker’s application to the Durham Commissioners and request her appointment to Alliance’s Board. Motion seconded by Mr. McDonald; motion passed unanimously.</p> <p>C. Finance Committee Report and FY22 Approved Budget (20 minutes) – page 123 The Finance Committee’s function is to review financial statements and recommend policies/practices on fiscal matters to the Board. This month’s report includes draft minutes from the May 6, 2021, meeting; Summary of Savings/ (Loss) by Funding Source; ratios for the period ending April 30, 2021; and recommendations to the Board to approve all presented contracts over \$500,000. This report also includes a public hearing on the FY22 (Fiscal Year 2021-2022) budget. Per NC GS (General Statute) 159-12 (b), a public hearing shall be held to allow any persons who wish to be heard on the Fiscal Year 2021-2022 (FY22) budget to appear. The FY22 budget is also submitted for approval and adoption per NC GS 159-13.</p>

AGENDA ITEMS:	DISCUSSION:
	<p>Chair Pazzaglini opened the public hearing on the FY22 budget. There were no speakers.</p> <p><u>BOARD ACTION</u> A motion was made by Dr. Silberman to close the public hearing on the FY22 budget; motion seconded by Vice-Chair Nelson. Motion passed unanimously.</p> <p>David Hancock, Finance Committee Chair, presented the report. Mr. Hancock noted the current revenue and expenditures as well as progress with the MLR (medical loss ratio). The Finance Committee report is attached to and made part of these minutes.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Hancock to approve FY21 amendment 2 to increase the budget by \$515,000 bringing the total FY21 budget to \$693,313,739; motion seconded by Ms. Council. Motion passed unanimously.</p> <p>Sara Pacholke, Senior Vice-President/Financial Operations, provided an update from last month's FY22 budget presentation. The presentation is saved as part of the board's files.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Hancock to approve the FY22 budget \$573,948,623; motion seconded by Ms. Gloston. Motion passed unanimously.</p> <p>A motion was made by Mr. Hancock to appoint Ashley Snyder as the Deputy Finance Officer under G.S. 159-24; motion seconded by Mr. Curro. Motion passed unanimously.</p> <p>Mr. Hancock reported that the agency is required to support funding for uninsured persons at FY 2015 levels. The agency receives funding for these services in the form of single stream funding; the current calculated FY22 funding allocation is approximately \$3.2 million less than the 2015 amount and this would be a reoccurring reduction. Ms. Goodfellow noted that this allocation differs by MCOs as some are funded below and some above the 2015 service level requirement.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Hancock to direct staff to draft a letter requesting a reallocation of single stream funding allocation for FY22; motion seconded by Vice-Chair Nelson. Motion passed unanimously.</p>

AGENDA ITEMS:	DISCUSSION:
<p>8. Lease Agreement for Space at 414 E. Main Street, Durham – page 158</p>	<p>Durham County has offered Alliance a secure space in its Health and Human Services building for \$1 per year. The term is 2 years, with the option to renew for 3 additional 1-year periods, beginning July 1, 2021. Pursuant to the Alliance by-laws, this item requires approval by a supermajority of Board members. Carol Wolff, General Counsel, provided an overview of the lease and answered questions.</p> <p><u>BOARD ACTION</u> A motion was made by Dr. Silberman to approve the lease for space at 414 E. Main Street, Durham and to authorize the CEO to execute the lease agreement; motion seconded by Mr. Holder. Motion passed unanimously.</p>
<p>9. Closed Session(s)</p>	<p><u>BOARD ACTION</u> A motion was made by Vice-Chair Nelson to enter closed session pursuant to NC General Statute 143-318.11 (a) (1) and (a) (6) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1 and to consider the qualifications, competence, and performance of an employee; motion seconded by Ms. Gloston. Motion passed unanimously.</p>
<p>10. Reconvene Open Session</p>	<p>The Board returned to open session.</p> <p>Chair Pazzaglini added a topic to the agenda: Mecklenburg County’s request to disengage with the current MCO and realign with Alliance. Mr. Robinson provided an overview of this request. Commissioner Adams thanked staff and expressed gratitude for this opportunity to expand the agency’s catchment area.</p> <p><u>BOARD ACTION</u> A motion was made by Commissioner Adams to authorize the Board Chair and/or CEO to continue negotiations with Mecklenburg County regarding joining Alliance with information to be brought back by the end of the month; motion seconded by Ms. Gloston. Motion passed unanimously.</p>
<p>11. Fiscal Year 2021-2022 Board Officers Election – page 169</p>	<p>As stated in Article II, Section D of the by-laws, at each final regular Board meeting of the fiscal year, the officers of the Board of Directors shall be elected for a one-year term to begin July 1. The officers of the Board of Directors include Chairperson and Vice-Chairperson.</p> <p>Chair Pazzaglini shared that Lynne Nelson is willing to serve as FY22 Chair and Duane Hancock is willing to serve as FY22 Vice-Chair; he opened the floor for nominations.</p> <p><u>BOARD ACTION</u> A motion was made by Commissioner Adams to close nominations and elect Lynne Nelson as FY22 Board Chair; motion seconded by Dr. Silberman. Motion passed unanimously.</p> <p>A motion was made by Commissioner Adams to close nominations and elect Duane Holder as FY22 Board Vice-Chair; motion seconded by Commissioner Cervania. Motion passed unanimously.</p> <p>Chair-elect Nelson and Vice-Chair-elect Holder expressed gratitude to the Board. Chair-elect Nelson thanked Chair Pazzaglini for his leadership and service as Board Chair.</p>
<p>12. Adjournment</p>	<p>All business was completed; the meeting adjourned at 6:56 p.m.</p>

Thursday, June 03, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)

4:00-6:00 p.m.

Next Board Meeting
Thursday, August 05, 2021
4:00 – 6:00 pm

Minutes approved by Board on [Click or tap to enter a date..](#)

DRAFT



Tuesday, June 29, 2021

AREA BOARD REGULAR MEETING

(virtual meeting via videoconference)
8:00-9:30 a.m.

MEMBERS PRESENT: Glenn Adams, Cumberland County Commissioner, JD; Heidi Carter, Durham County Commissioner, MPH, MS; Maria Cervania, Wake County Commissioner, MPH; Carol Council, MSPH; David Curro, BS; Lodies Gloston, MA; David Hancock, MBA, MPAff (entered at 8:38 am); D. Lee Jackson, BA (entered at 8:33 am); Lynne Nelson, Vice-Chair, BS; Gino Pazzaglini, Board Chair, MSW LFACHE; Pam Silberman, JD, DrPH; and McKinley Wooten, Jr., JD (exited at 9:00 a.m.)

APPOINTED MEMBERS ABSENT: Angela Diaz, MBA; Donald McDonald, MSW; two vacancies representing Cumberland County; two vacancies representing Durham County; vacancy representing Johnston County; and vacancy representing Wake County

GUEST(S) PRESENT: Denise Foreman, Wake County Manager's office

ALLIANCE STAFF PRESENT: Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Veronica Ingram, Executive Assistant II; Mehul Mankad, Chief Medical Officer; Sara Pacholke, Senior Vice-President/Financial Operations; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Monica Portugal, Chief Compliance Officer; Robert Robinson, Chief Medical Officer; Sean Schreiber, Executive Vice-President/Chief Operating Officer; Jennifer Stoltz, Administrative Assistant II; Sara Wilson, Senior Director of Government Relations; and Carol Wolff, General Counsel

1. **CALL TO ORDER:** Board Chair Gino Pazzaglini called the meeting to order at 8:01 a.m.

AGENDA ITEMS:	DISCUSSION:
2. Agenda Adjustments	There were no adjustments to the agenda.
3. Contract Approval – page 3	<p>Per Alliance policy G-10, contracts over a specified amount (\$500,000) require approval by the Board. A summary of the contract was provided in the packet and sent to board members prior to today's meeting.</p> <p><u>BOARD ACTION</u> A motion was made by Dr. Silberman to authorize the CEO to execute the contract with Milliman in an amount not to exceed \$500,000.00 for the purposes stated on the contract summary; motion seconded by Ms. Gloston. Motion passed unanimously.</p>
4. Closed Session(s)	<p><u>BOARD ACTION</u> A motion was made by Mr. Curro to enter closed session pursuant to NC General Statute 143-318 to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126; motion seconded by Ms. Council. Motion passed unanimously.</p>
5. Reconvene Open Session	<p>The Board returned to open session. Chair Pazzaglini added a topic to the agenda: Resolution for Mecklenburg County's realignment with Alliance. Mr. Robinson read the resolution, which is attached to and made part of these minutes.</p> <p><u>BOARD ACTION</u> A motion was made by Mr. Curro to approve the Resolution for the realignment of Mecklenburg County to Alliance Health; motion seconded by Dr. Silberman. Motion passed unanimously.</p>
6. Adjournment	All business was completed; the meeting adjourned at 9:20 a.m.

Next Board Meeting: Thursday, August 05, 2021 | 4:00 – 6:00 pm

Minutes approved by the Board on [Click or tap to enter a date.](#)



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Client Rights/Human Rights Committee Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Human Rights Committee is a Board Committee with at least 50% of its membership being either consumers or family members that are not Board Members. All members and the chair are appointed by the Chair of the Alliance Board of Directors.

The Human Rights Committee functions include:

- 1) Reviewing and evaluating the Area Authority's Client Rights policies at least annually and recommending needed revisions to the Area Board.
- 2) Overseeing the protection of client rights and identifying and reporting to the Area Board issues which negatively impact the rights of persons serviced.
- 3) Reporting to the full Area Board at least quarterly.

This report includes draft minutes from the July 8, 2021, meeting.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Angela Diaz, Committee Chair; Doug Wright, Director of Community and Member Engagement

[\(Back to agenda\)](#)



Thursday, July 08, 2021

BOARD HUMAN RIGHTS COMMITTEE - REGULAR MEETING

5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-5:30 p.m.

APPOINTED MEMBERS PRESENT: Angela Diaz, MBA, Board member (Committee Chair), Marie Dodson, Donald McDonald, MSW, Board member, Board member, Dr. Michael Teague, Patricia Wells, Ira Wolfe, McKinley Wooten, Jr. JD, Board member

APPOINTED, NON-VOTING MEMBERS PRESENT:

BOARD MEMBERS PRESENT:

GUEST(S) PRESENT:

STAFF PRESENT: Doug Wright, Director of Community and Member Engagement, Starlett Davis, Member Engagement Specialist, Noah Swabe, Member Engagement Specialist

- 1. WELCOME AND INTRODUCTIONS** – the meeting was called to order at 4:00pm
- 2. REVIEW OF THE MINUTES** – The minutes from the April 8, 2021 meeting were reviewed; a motion was made by Ms. Wells and seconded by Ms. Wolfe to approve the minutes. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Grievance Review	Todd reviewed the FY21 Q3 Complaint Analysis attached. There were 212 entries with 89 coming from members or legal guardians and 93 coming from internal employee concerns. 27 were received from external sources and we had 3 compliments. 27% of issues were quality of care concerns while 35% were administrative issues. There were 24 abuse/neglect/exploitation issues brought forward. The top 3 services receiving complaints were residential, innovations, and enhanced services.		
4. Incidents Review	Todd reviewed the FY@! Q3 Incident Trends report attached. There were 598 reports, 392 for children, 206 for children. 522 were level 2 while 76 were level 3. Incidents in counties were somewhat consistent with populations. 19% of all reports came from PRTFs. Intensive In-Home services was another category that was higher than most. There were 106 reports for physical restraints and 18 for seclusion. 88% of the physical restraints occurred at PRTFs. We had 40 deaths during the quarter, 14 level 2 and 26 level 3.		
5. Members Rights and Responsibilities	Doug spent some time reviewing the attached presentation on members' rights and responsibilities. This training is given to each new employee Alliance hires during their orientation process. The presentation reviews members' rights and responsibilities, fraud and abuse and advanced directives for individuals.		
6. Announcements/other	None		

7. ADJOURNMENT: the meeting adjourned at 5:10pm; the next meeting will be October 14, 2021, from 4:00 p.m. to 5:30p.m.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, July 08, 2021

BOARD HUMAN RIGHTS COMMITTEE - REGULAR MEETING
5200 W. Paramount Parkway, Morrisville, NC 27560
4:00-5:30 p.m.

DRAFT

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



Q3 FY21
Complaint Analysis

CATEGORIES

Complaint: *(Internal and External Stakeholders)*

An expression of dissatisfaction about any matter other than decisions regarding requests for Medicaid services

Grievance:

A member or legal guardian's expression of dissatisfaction about any matter other than decisions regarding requests for Medicaid services

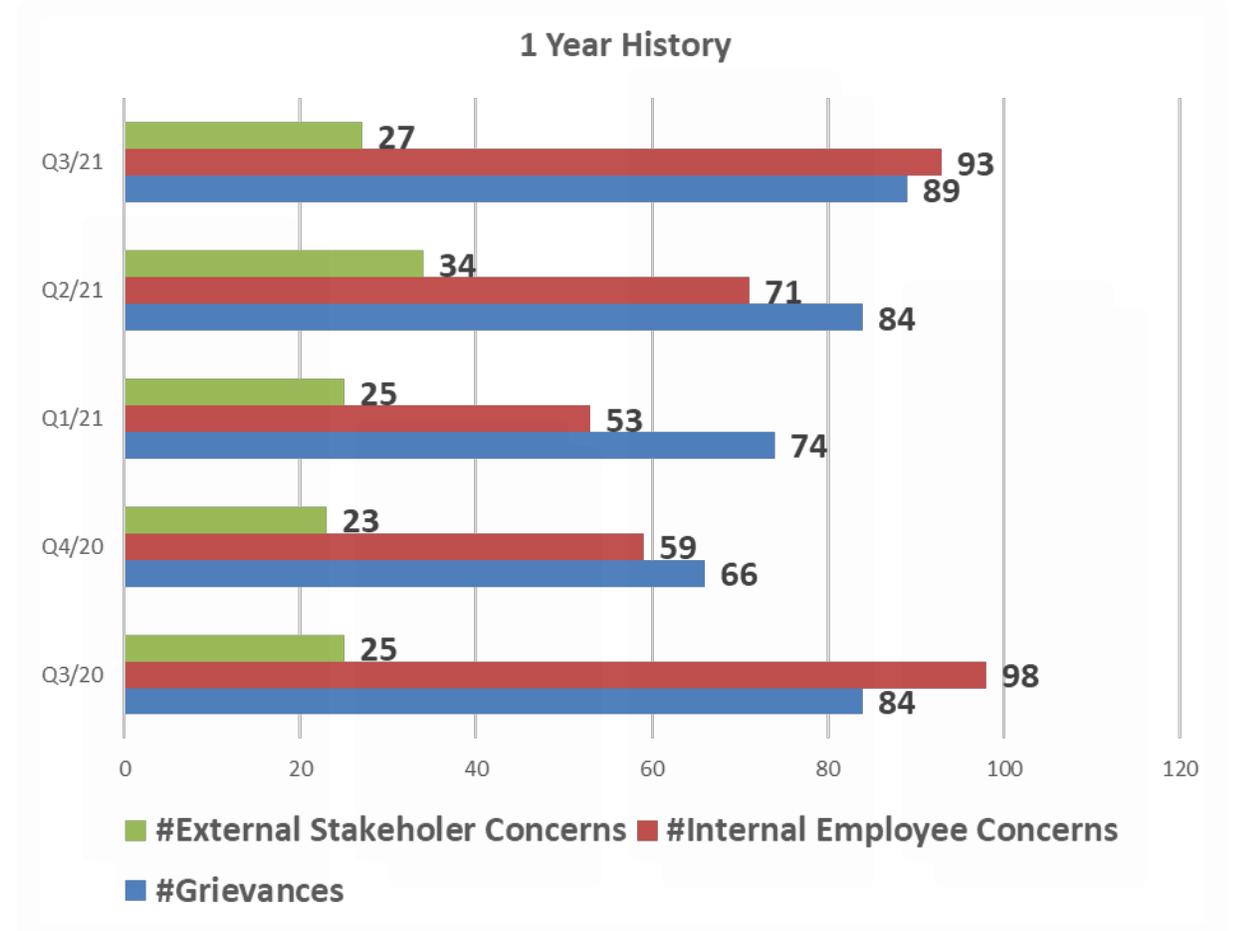
Internal Stakeholder Concern:

An Alliance staff member's expression of dissatisfaction about any matter related to service provision or Alliance functions.

Complaints and Grievances Overview

Q3 FY21 yielded 212 entries

- 89 (42%) Grievances – Members/legal guardians
- 93 (44%) Internal Employee Concerns – Alliance staff
- 27 (13%) External Stakeholder Concerns – Outside entities
- 3 (1%) Compliments

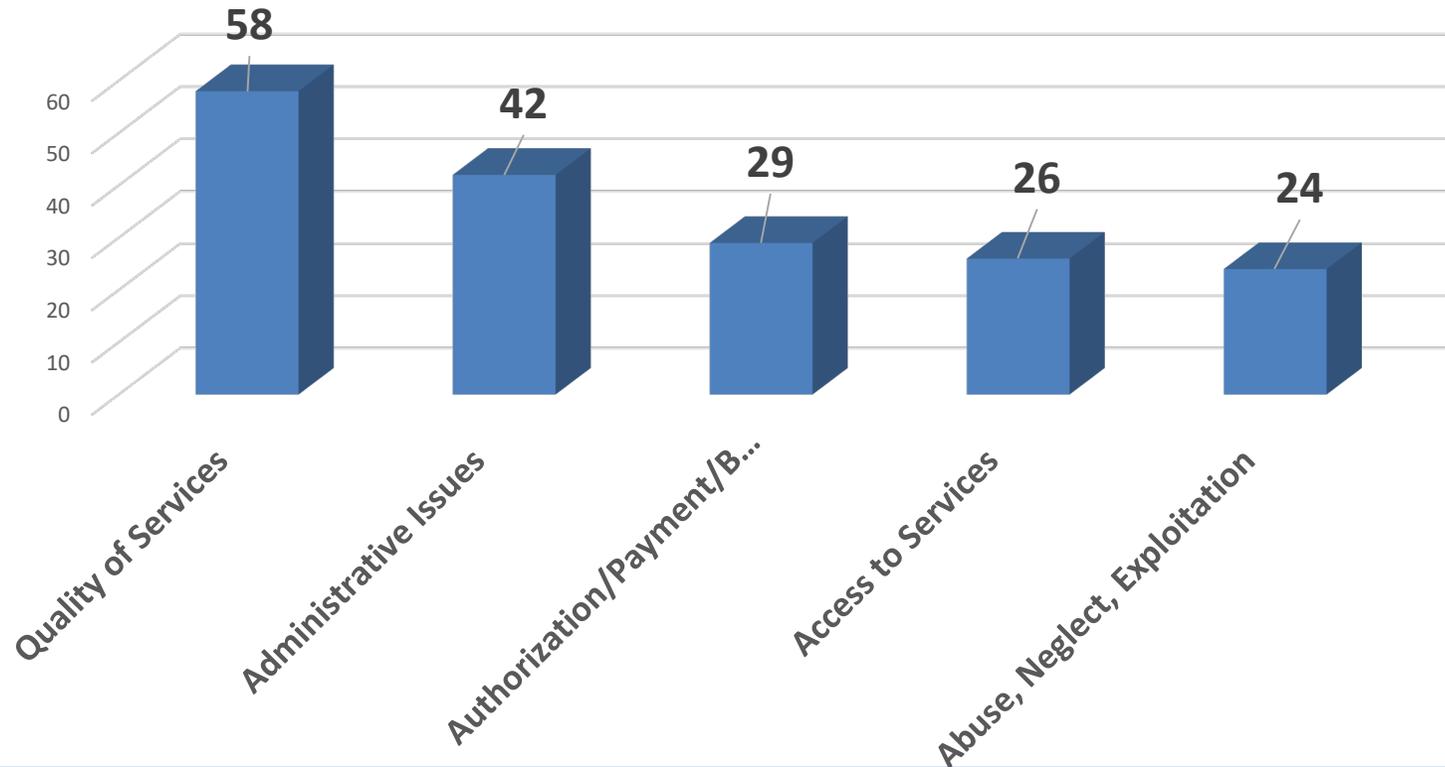


Nature of Issue Definitions

Reporting Category	Definition
Abuse, Neglect and Exploitation	Any allegation regarding the abuse, neglect and/or exploitation of a child or adult as defined in APSM 95-2 (Client Rights Rules in Community Mental Health)
Access to Services	Access to Services as any complaint where an individual is reporting that he/she has not been able to obtain services
Administrative Issues	any complaint regarding a Provider's managerial or organizational issues, deadlines, payroll, staffing, facilities, etc.
Authorization/Payment Issues/Billing PROVIDER ONLY	Any complaint regarding the payment/financial arrangement, insurance, and/or billing practices regarding providers
Basic Needs	Any complaint regarding the ability to obtain food, shelter, support, SSI, medication, transportation, etc.
Clients Rights	Any allegation regarding the violation of the rights of any consumer of mental health/developmental disabilities/substance abuse services. Clients Rights include the rights and privileges as defined in General Statutes 122C and APSM 95 -2 (Client Rights Rules in Community Mental Health)
Confidentiality/HIPAA	Any breach of a consumer's confidentiality and/or HIPAA regulations.
LME/MCO Functions	Any complaint regarding LME functions such as Governance/ Administration, Care Coordination, Utilization Management, Customer Services, etc.
LME/MCO Authorization/ Payment/Billing	Any complaint regarding the payment/financial arrangement, insurance, and/or billing practices of the LME/MCO
Provider Choice	Complaint that a consumer or legally responsible person was not given information regarding available service providers.
Quality of Care – PROVIDER ONLY	Any complaint regarding inappropriate and/or inadequate provision of services, customer services and services including medication issues regarding the administration or prescribing of medication, including the wrong time, side effects, overmedication, refills, etc.
Service Coordination between Providers	Any complaint regarding the ability of providers to coordinate services in the best interest of the consumer.
Other	Any complaint that does not fit the above areas.

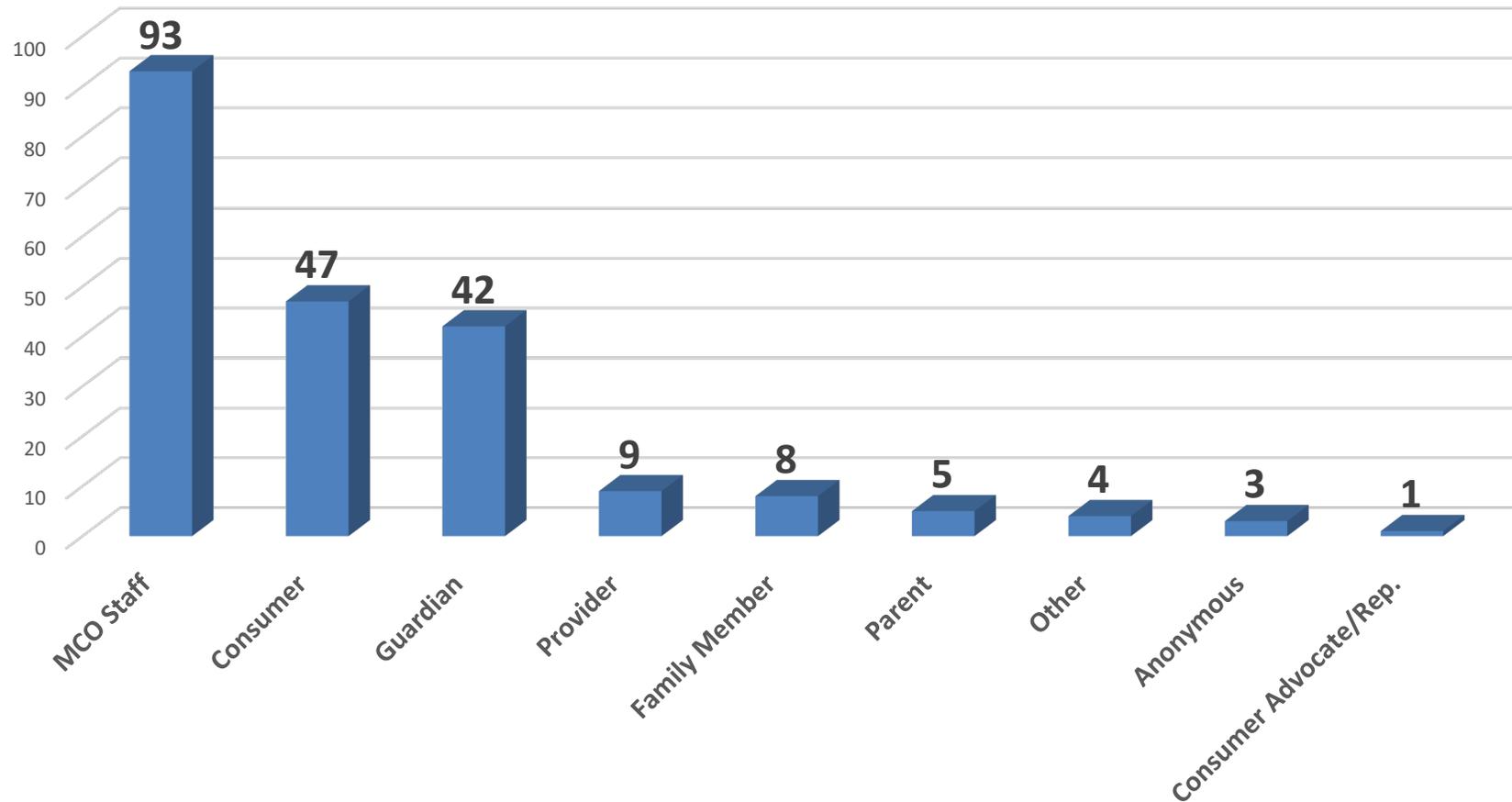
Nature of Issue/Type

(Top 5)



- **Quality of Services - 27% of all Complaints/Grievances**
- **Administrative Issues - 35% of all Complaints/Grievances**

Source: *Who submitted concerns?*



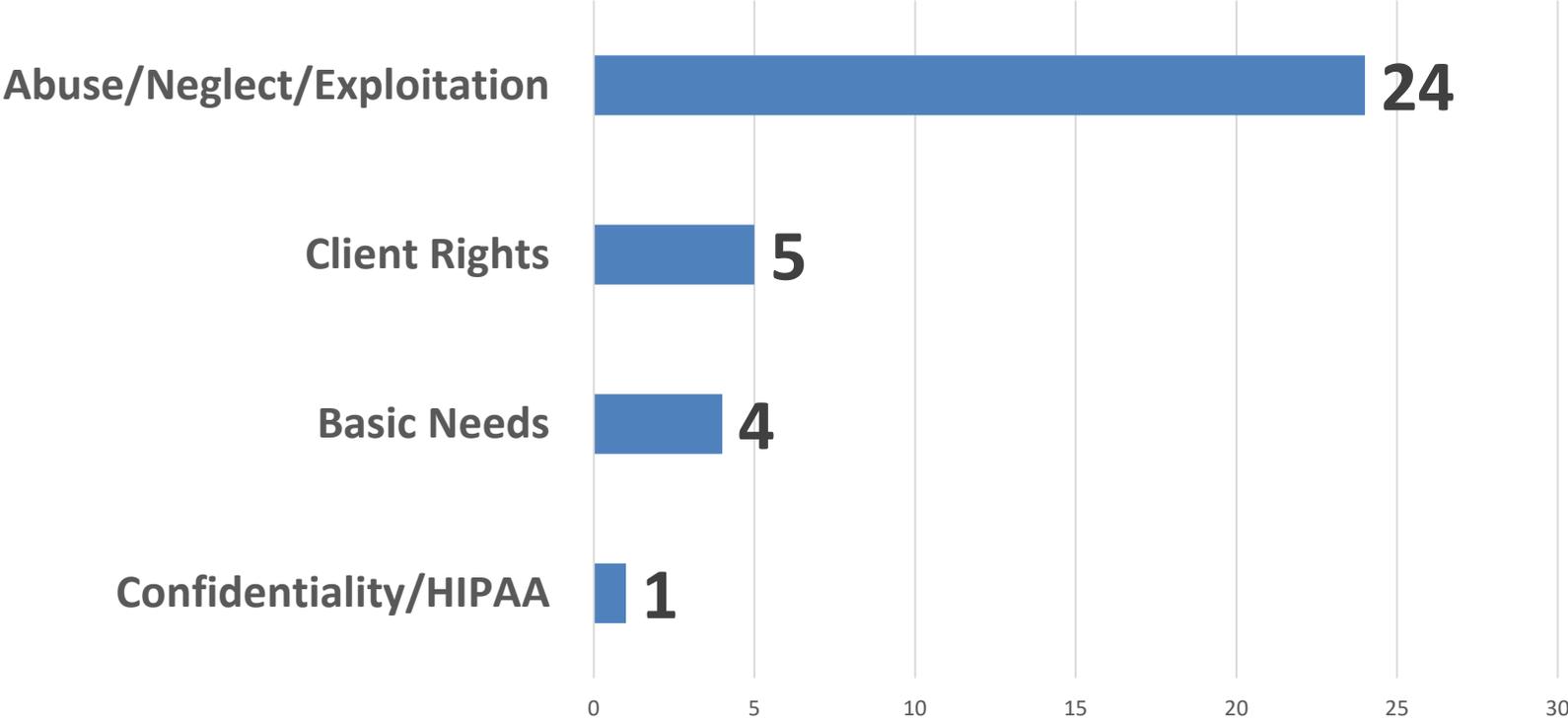
- **93 (44%) Submitted by MCO staff**
- **89 (42%) Grievances submitted by Members or Legal Guardian (Grievances)**

Complaints Against Alliance

17 Complaints Against Alliance

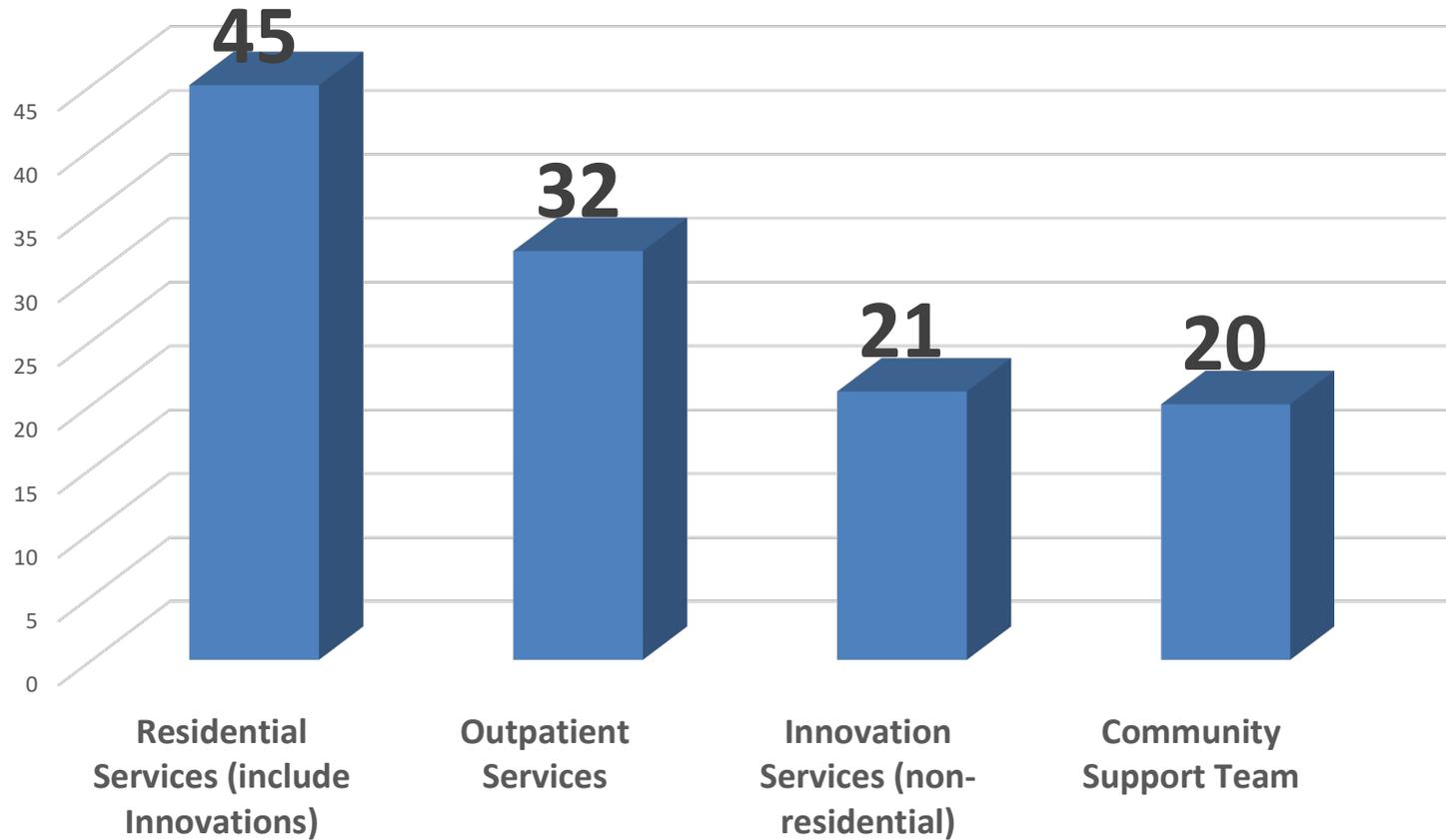
	Nature of Issue	Description
15	LME/MCO Functions	<ul style="list-style-type: none">• Primarily complaints against Alliance staff
2	Authorization/Payment/Billing – LME/MCO Only	<ul style="list-style-type: none">• Reimbursement issues• Billing/Payment flexibilities during COVID

Human Rights Issue



SERVICE BREAKDOWN

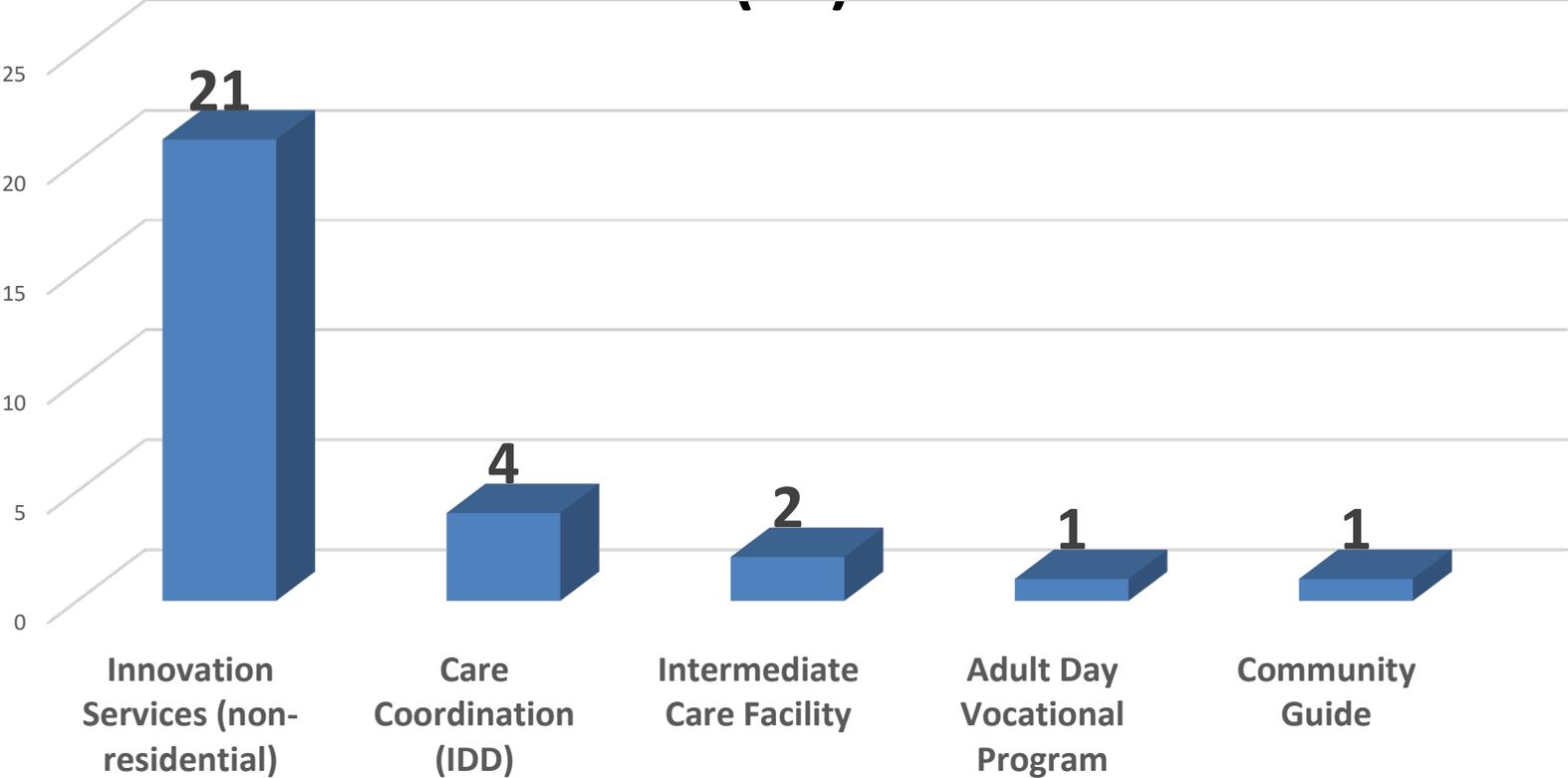
Top 4 Services Overall



- 21% Residential Services
- 15% Outpatient Services

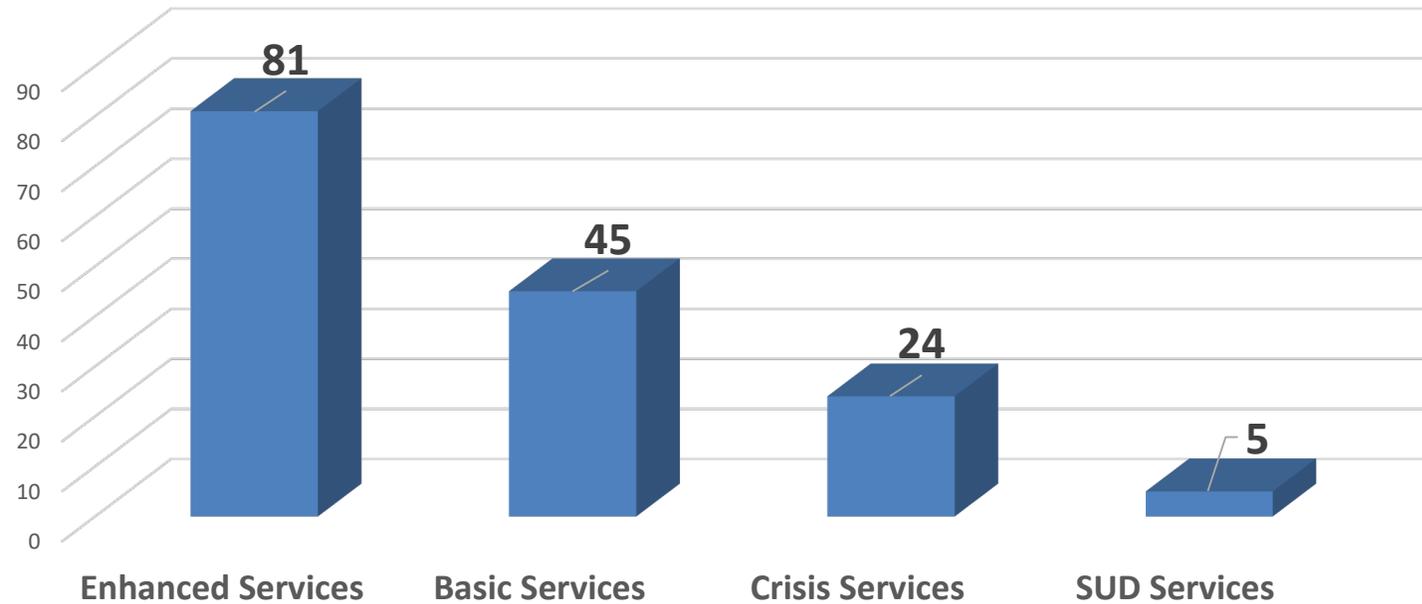
- 10% Innovations Services
- 9% CST

IDD Services (29)



- **14% of all complaints and grievances were from IDD services**
- **72% of IDD services were Non-Residential Innovations Services**

MH/SUD (115)



- **73% of all complaints and grievances were from MH/SUD services**
- **38% of all complaints and grievances were from Enhanced Services**



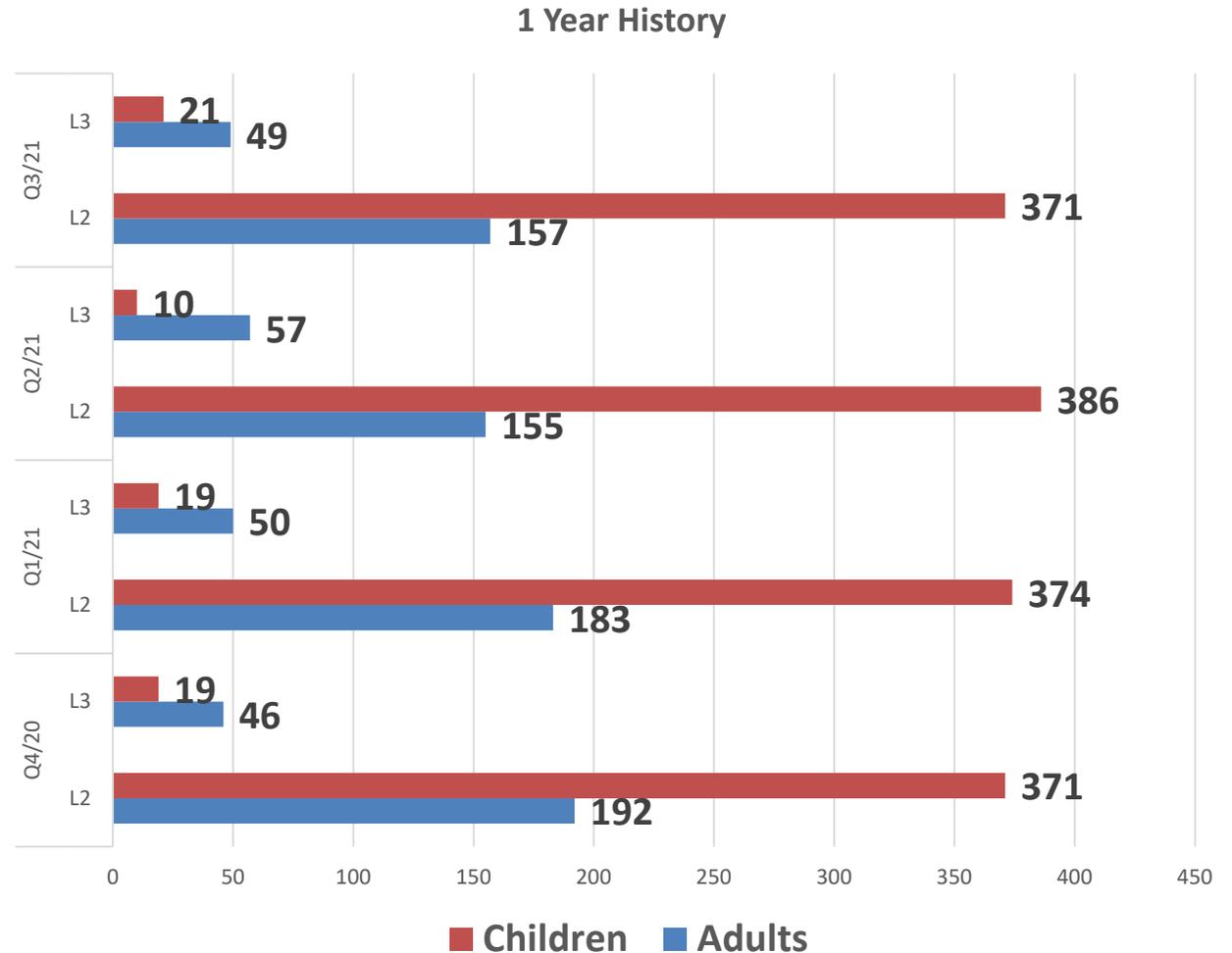
Incident Trends Report
Q3 FY21

Incident Report Breakdown

- 598 Reports were entered in to NC-IRIS for 424 members
- 392 children
- 206 adults

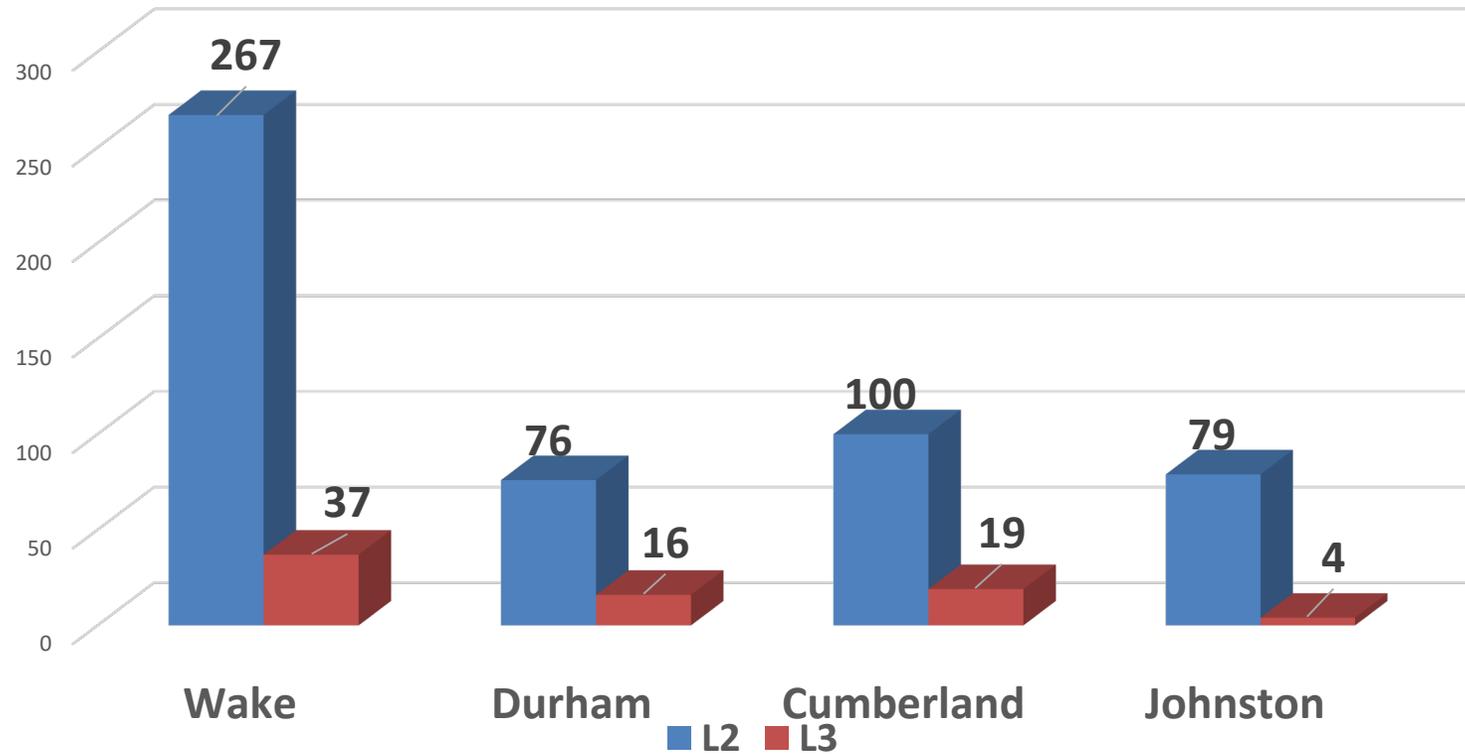
LEVELS

- 522 Level 2 reports
- 76 Level 3



Incident Levels by County

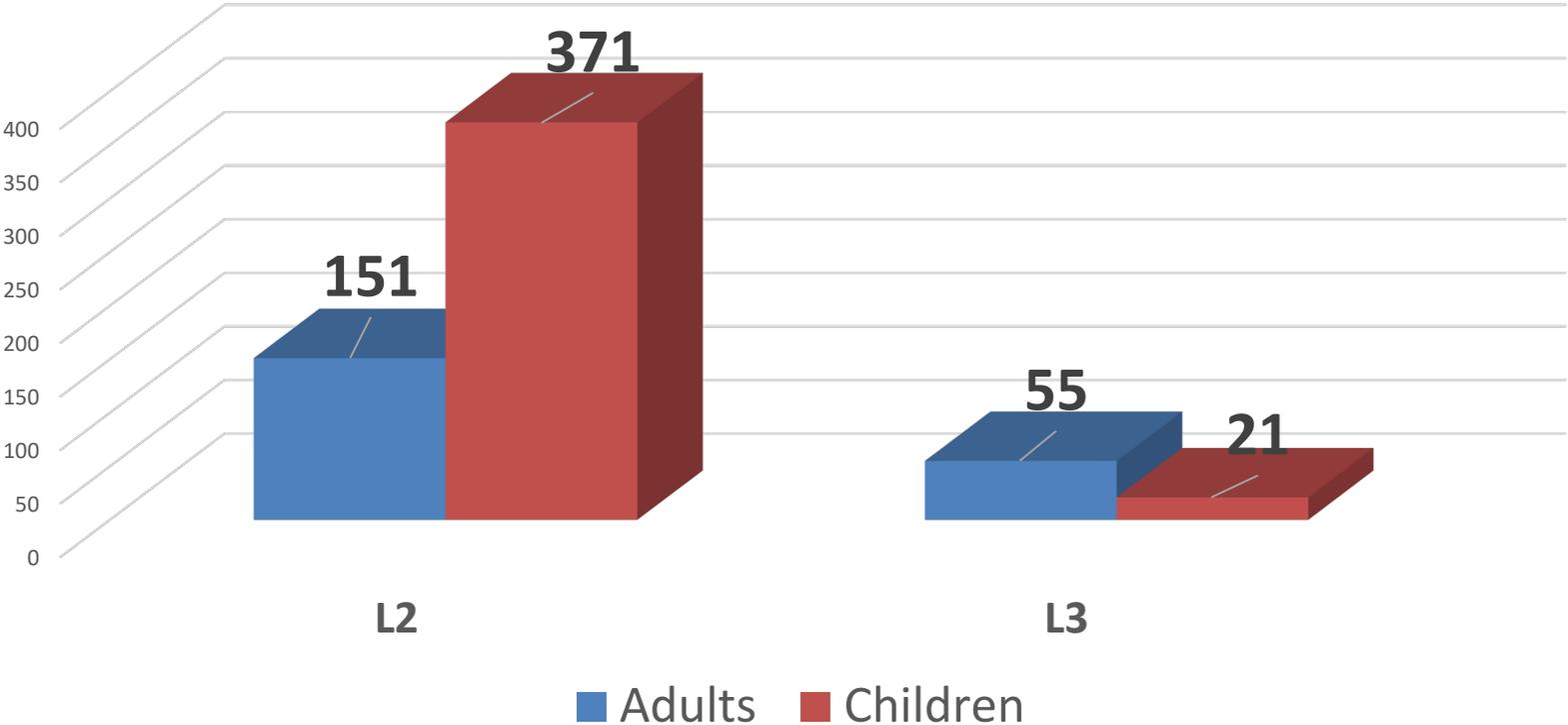
Level 2s and Level 3s



Wake County submitted the largest number of Level 2 and Level 3 reports in the 2^{3rd} quarter of FY2021

Adults vs. Children

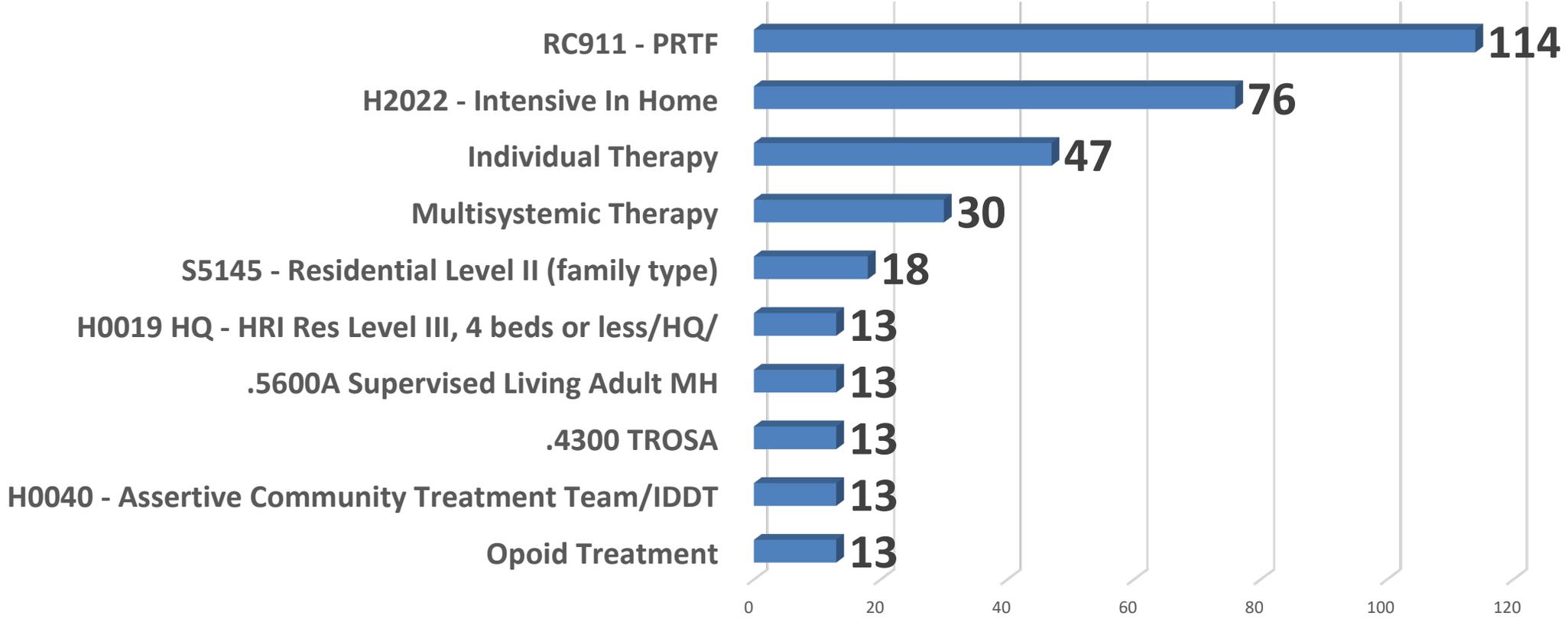
(By Level)



- A total of 392 Incidents were reported for children
- A total of 206 Incidents were reported for Adults

Service Breakdown

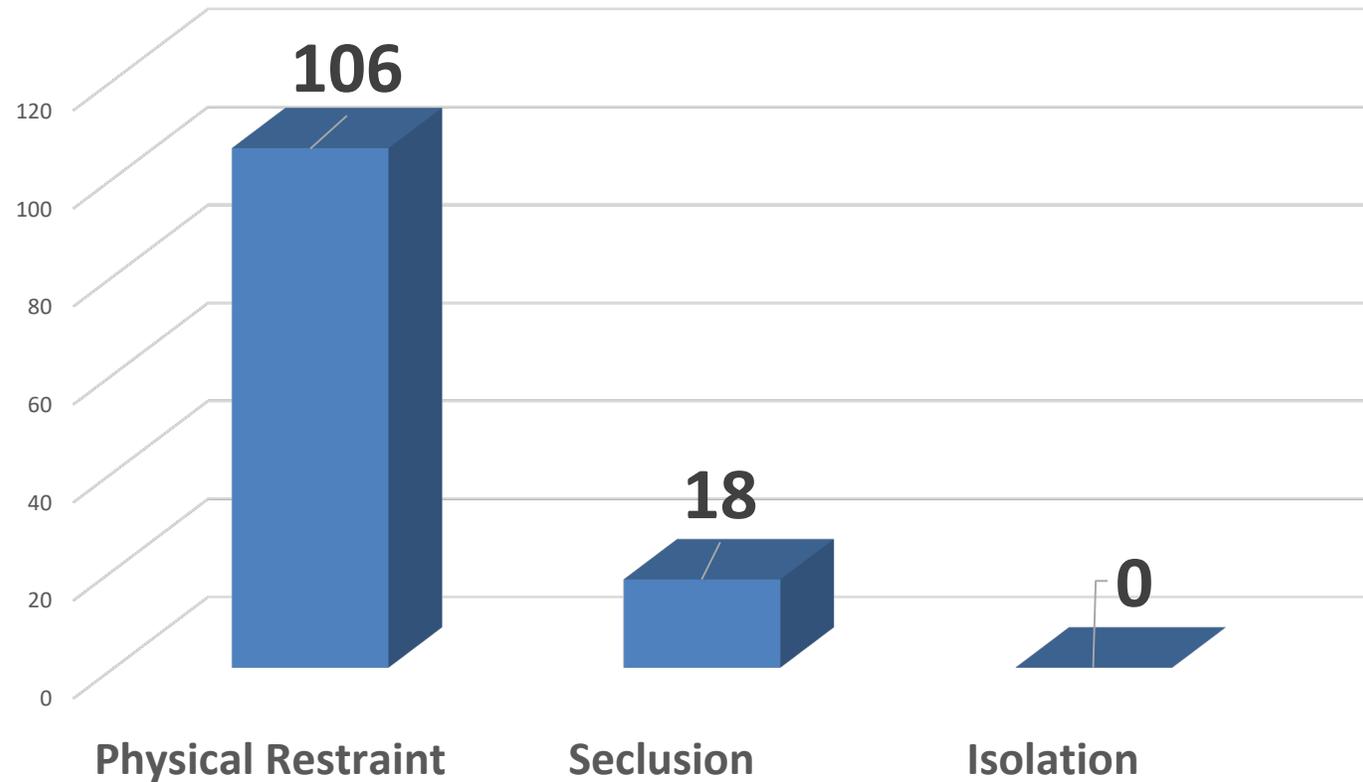
Top 10 Services



• PRTF - 19% of all reports

REPORTS BY INCIDENT CATEGORY (Primarily Human Rights Related)

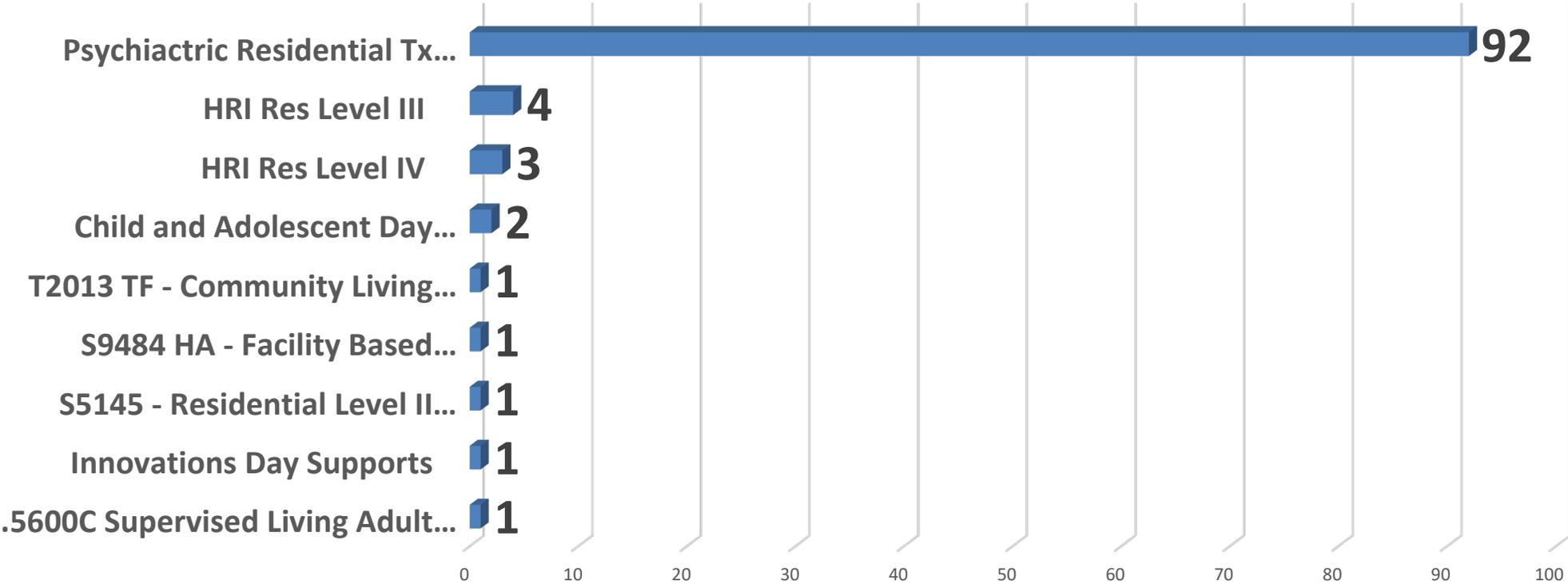
Restrictive Interventions



- **124 Restrictive Interventions reported**
- **85% of Restrictive Interventions were Physical Restraints**

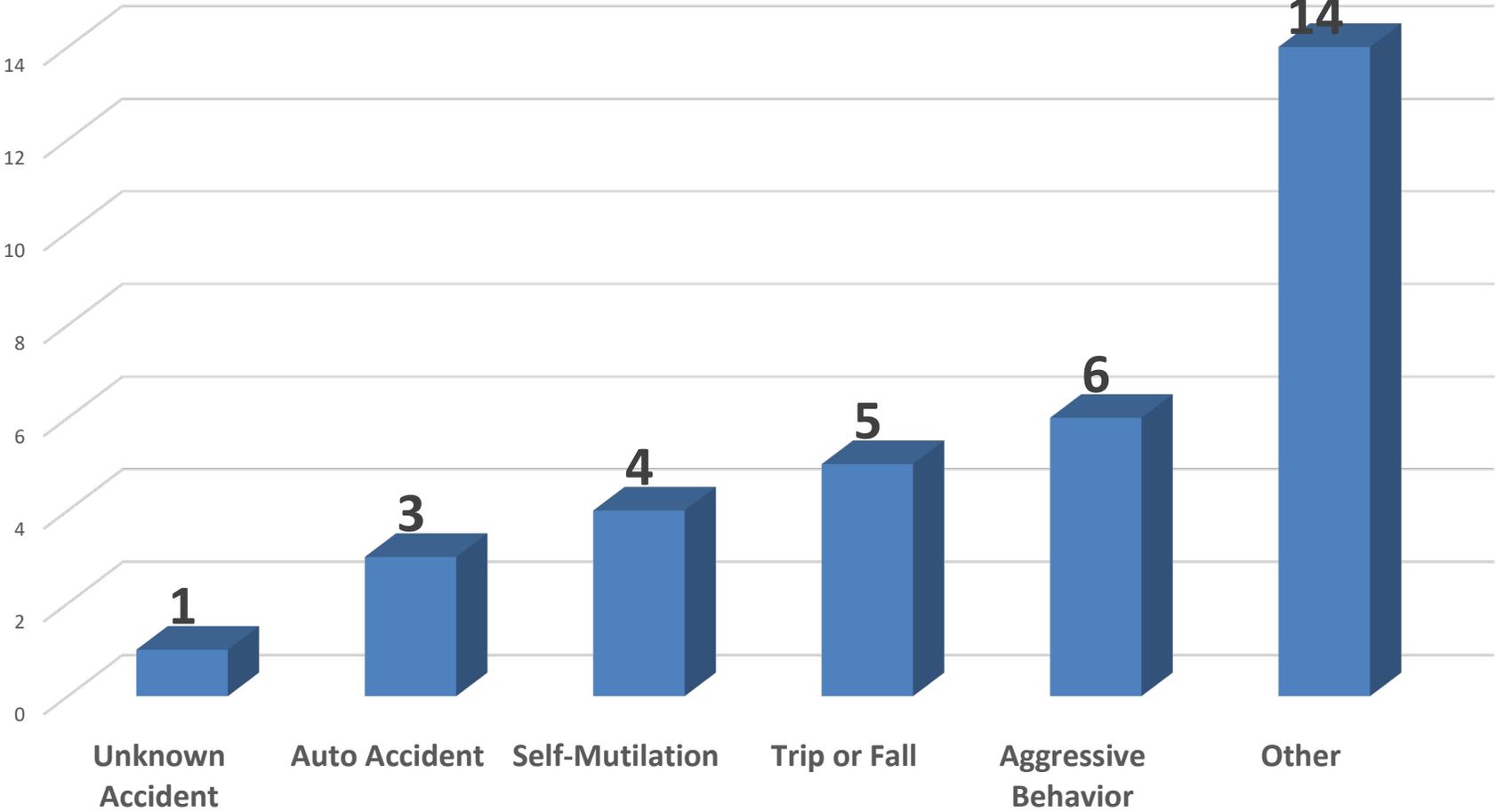
Physical Restraint

Service Breakdown



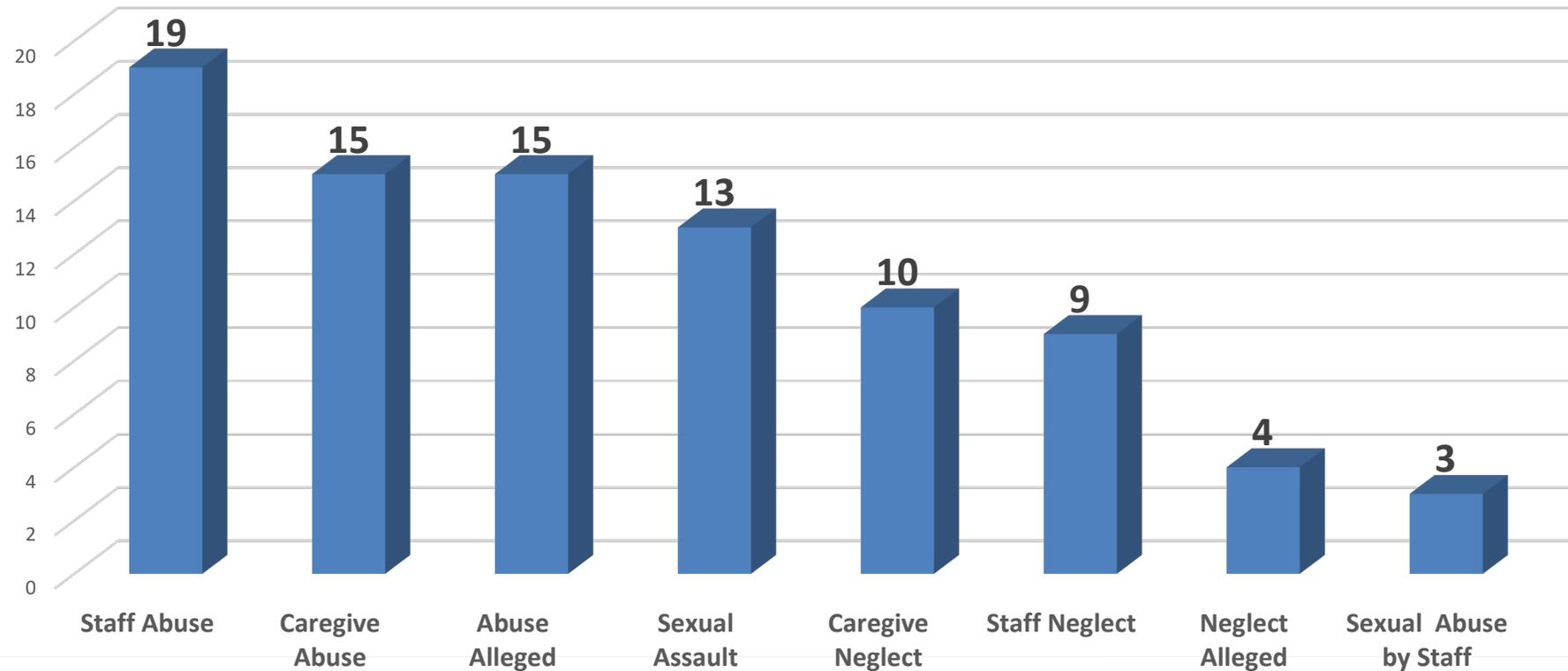
• 88% from PRTF Programs

Injury Categories

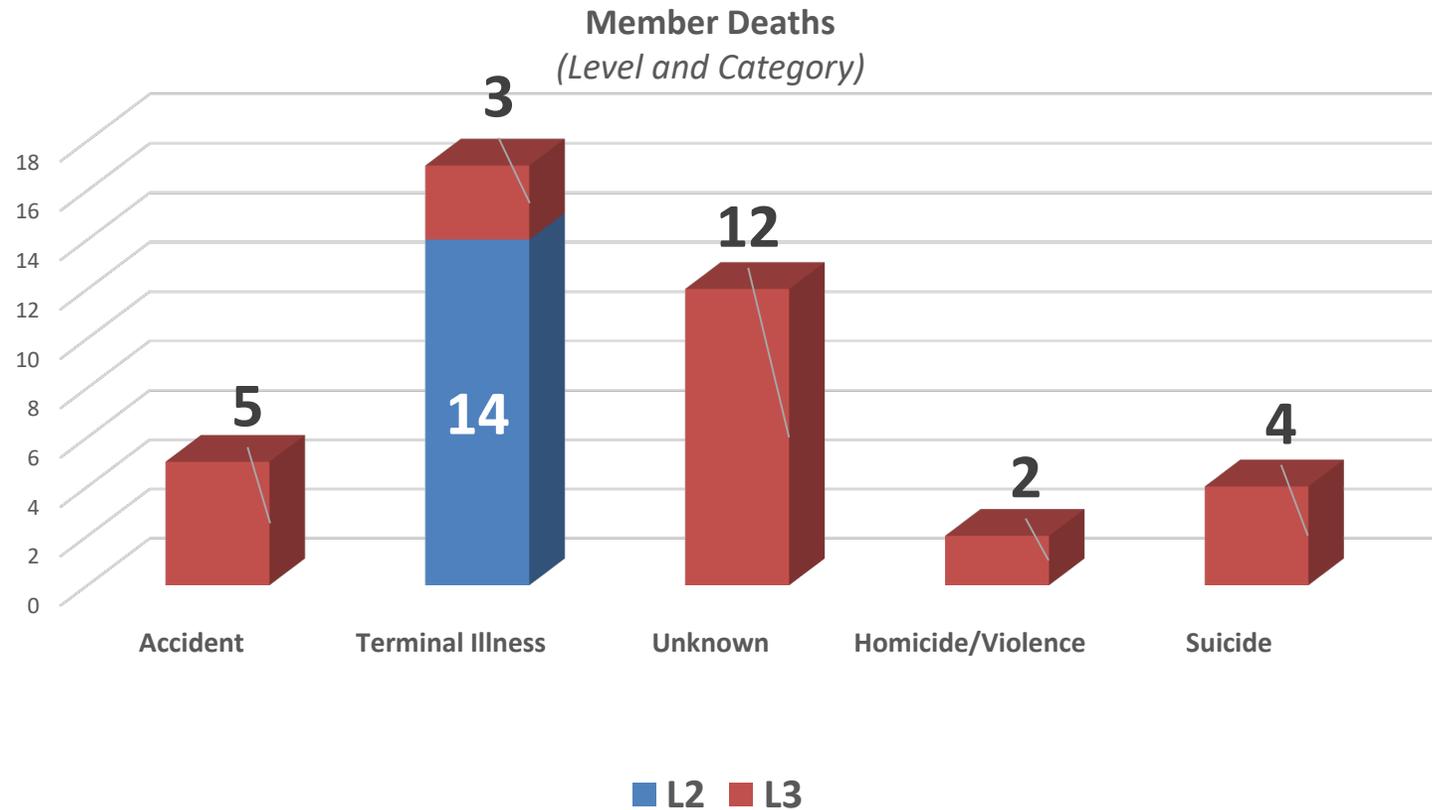


• **33 Total**

Abuse/Neglect/Exploitation



- **88 reported in this category (15% of all Incidents)**
- ***Substantiated***
 - ***1 Neglect Alleged***
 - ***1 Caregiver Abuse***
 - ***1 Caregiver Neglect***
 - ***1 Sexual Abuse by Staff***
 - ***3 Staff Neglect***



- A total of 40 deaths were reported during the 2nd quarter
- 14 (L2); 26 (L3)
- 43% of reports due to Terminal Illnesses

4 OCME Reports Reviewed by Med Team

All confirmed L3

- 2 Accidents
- 1 Homicide
- 1 Media (Youth member in accident)
 - *1 from Q2 2020*
 - *1 from Q3 2020*
 - *1 from Q2 2021*
 - *1 from Q3 2021*

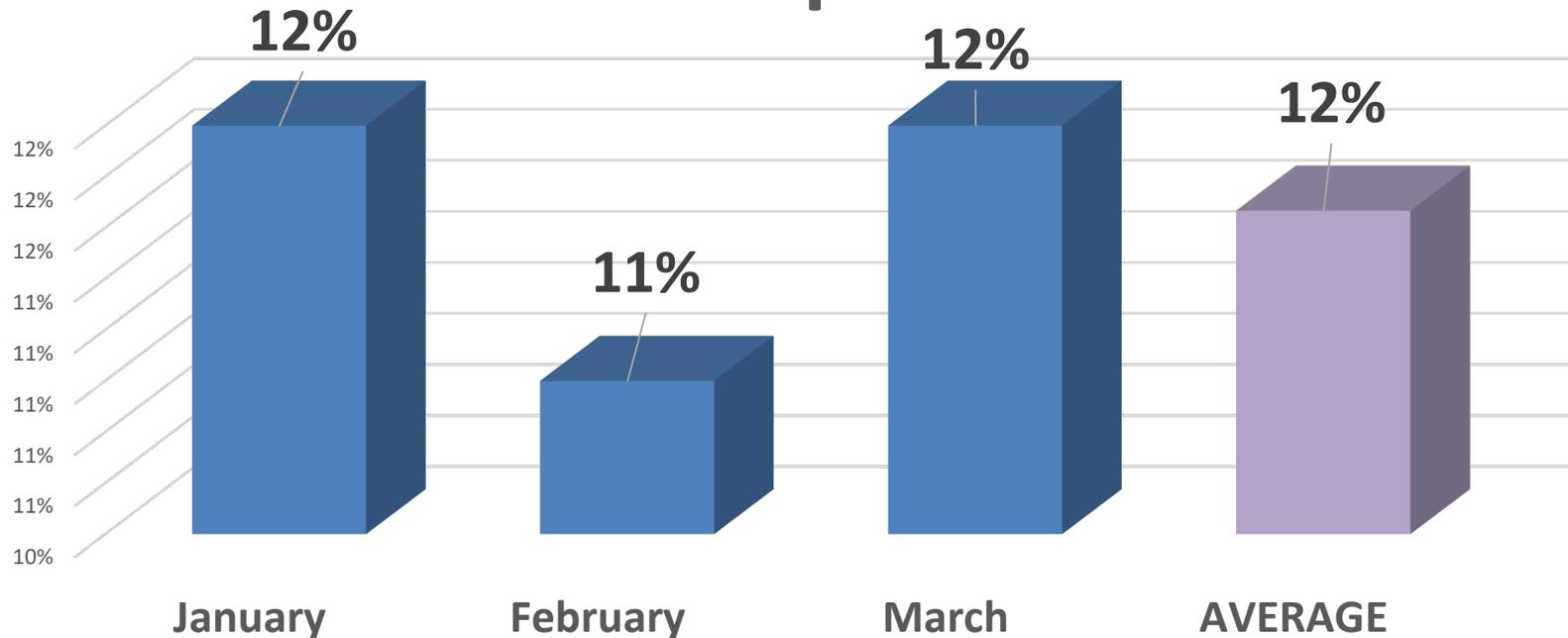
Incident Report Compliance

Incident Report Compliance Process

(Q3 FY2021)

- **Two (2) Plans of Correction issued during 3rd Quarter**
- **17 Late Incident emails sent for 1 late report submitted**

Late Incident Report Submission



- Decreased by 4 points during the 3rd Quarter

The logo for Alliance Behavioral Healthcare features the word "Alliance" in a large, blue, serif font, with "BEHAVIORAL HEALTHCARE" in a smaller, green, sans-serif font below it. The background of the slide shows a group of hands clasped together in a circle, symbolizing support and community. A decorative graphic of three curved lines in orange, green, and blue is in the top right corner.

Alliance

BEHAVIORAL HEALTHCARE

Member Rights and Responsibilities
Medicaid Fraud and Abuse
Advance Directives

✦ Rights and Responsibilities

The background of the slide features a blue silhouette of four people standing in a field of grass, with their arms raised in a gesture of celebration or unity. There are also small butterfly silhouettes scattered throughout the scene.

All members of the Alliance Health Plan have a number of rights and responsibilities

Member Rights

- To receive information about Alliance that is correct and clear
- To be treated with respect
- To participate in making decisions regarding health care
- To have open discussion on appropriate or medically-necessary treatment
- To voice complaints



Member Rights

- To make recommendations regarding member rights and responsibilities
- To be free from restraint or seclusion
- To refuse treatment
- To request and receive a copy of your medical record
- To write a statement to be placed in your file, if you disagree with what is written in your medical record
- To a second opinion



Member Rights

- To participate in developing person-centered treatment plan
- To take part in periodic review of your treatment plan
- To freedom of speech and religious expression
- To equal employment and educational opportunities
- To treatment in the most natural, age-appropriate and least restrictive environment possible
- To ask questions about your care



Member Rights

Minors have the right to agree to treatment of the following without consent of a parent or guardian:

- Sexually transmitted diseases
- Pregnancy
- Abuse of controlled substances or alcohol
- Emotional disturbances



Human Rights Committee

- A committee of the Alliance Board
- At least half of members must be individual receiving services/ families
- Representation reflects makeup of individuals served by Alliance
- Oversees client rights protections for individuals receiving MH/SUD/IDD services
 - Reviews reports on restrictive interventions, rights violations, incidents of abuse, neglect, exploitation



Human Rights Committee

- Monitors functions of the provider Client Rights Committees
 - Providers in the Alliance network must maintain a Client Rights Committee
 - Must maintain minutes and be able to produce them upon request
 - Can partner with other providers to have a Client's Rights Committee that covers both agencies



Appeals and Grievances



The right to appeal Medicaid decisions to reduce or deny services

- Appeal
- Mediation
- Office of Administrative Hearings (OAH)



To file a grievance or complaint

- Against MCO staff
- Against a Provider

Member Responsibility

- Providing necessary information
- Following the plan and instructions for your care
- Understanding your health problems
- Participating in developing your treatment goals
- Telling your doctor/nurse about health changes
- Asking questions about your care



Member Responsibility

- Inviting people to be included in treatment planning
- Respecting the rights and property of other members and program staff
- Respecting members' needs for privacy
- Working on your Person-Centered Plan goals
- Keeping scheduled appointments



Member Responsibility

- Giving 24 hour advance notice if you have to cancel your appointment
- Meeting financial obligations
- Informing staff of any contagious medical conditions you may have
- Take medications as prescribed and communicating with doctor if they are not working



Medicaid Fraud and Abuse

- An individual does not report all income when applying for Medicaid
- An individual does not report other insurance when applying for Medicaid
- A non-Medicaid recipient uses a Medicaid recipient's card with or without the recipient's permission
- A provider's credentials are not accurate
- A provider bills for services not provided
- A provider performs and bills for services not medically necessary

Reporting Fraud and Abuse

- Alliance Fraud and Abuse Line
(855) 727-6721
(you may remain anonymous)
- DHHS Customer Service Center
(800) 662-7030
- Medicaid Fraud, Waste and
Program Abuse Tip Line
(877) 362-8471



Reporting Fraud and Abuse

- Health Care Financing Administration
Office of Inspector General's Fraud Line
(800) 447-8477
- State Auditor's Waste Line
(800) 730-8477
- Submit a confidential online complaint
form at
www.ncdhhs.gov/dma/fraud/fraud.aspx
- Contact your county DSS office



Advance Directives

In case you are unable to make decisions about your care during a crisis, Advance Directives are legal documents that will help guide your care.



Types of Documents

- Psychiatric Advance Directives (Advance Directive for Mental Health Care)
- Health Care Power of Attorney
- Living Will

Advance Directives

- Two qualified people must witness
- Health Care Power of Attorney and Living Wills must be notarized
- Keep a copy in a safe place
 - Give copies to family, your treatment team, your doctor and the hospital where you are likely to receive treatment
 - Register them with the NC Department of the Secretary of the State.
- Directives stay active until you cancel them



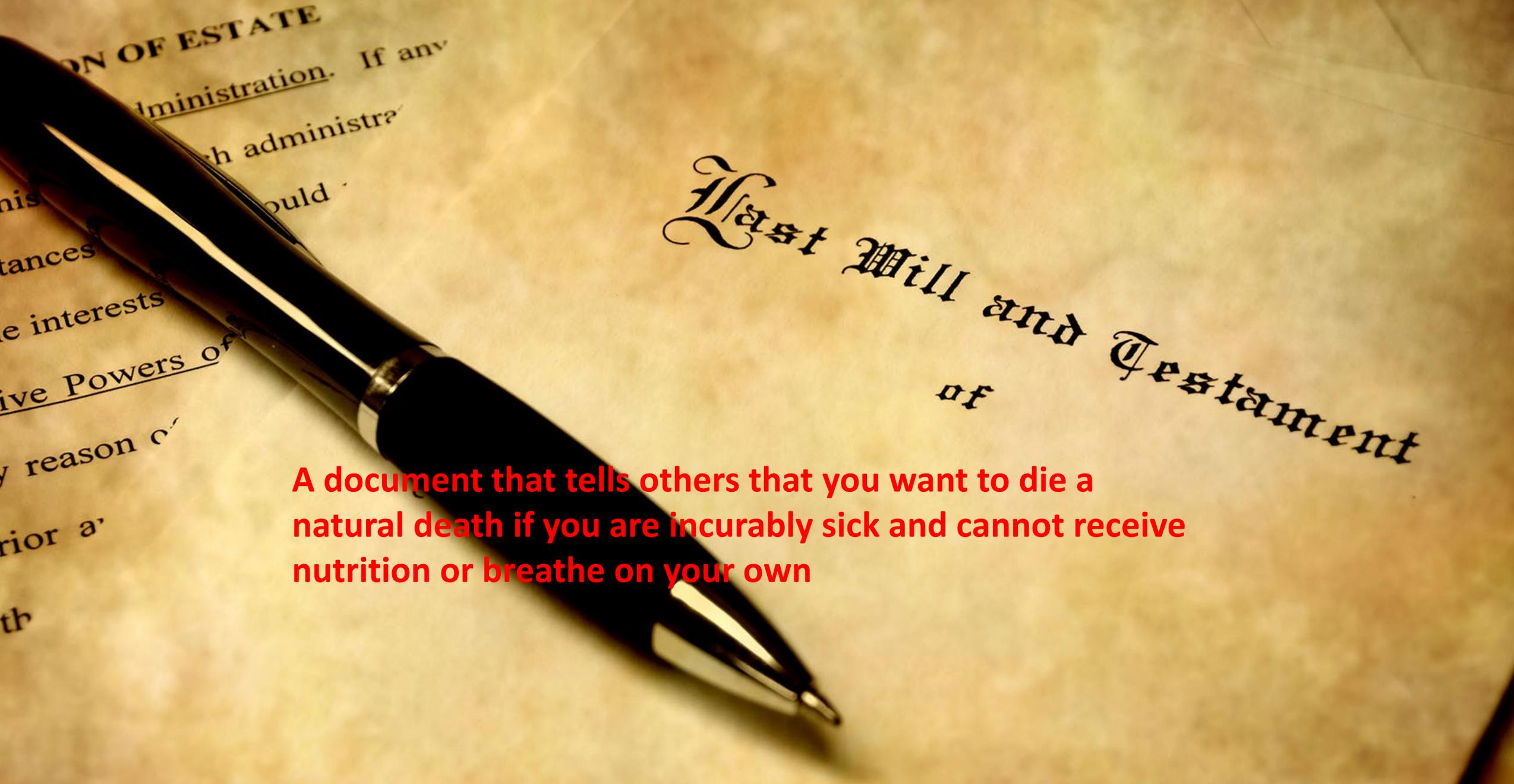
Psychiatric Advance Directive

Instructions for mental health treatment you want if you are in a crisis and unable to make decisions for yourself

- **What you think helps calm you**
- **How you feel about seclusion or electric shock treatments**
- **What medicines you do not want to take**
- **Which doctor you want to be in charge of your treatment**

Health Care Power of Attorney

Allows you to designate someone who can make decisions for you if you are unable to make your own choices about treatment



Last Will and Testament
of

A document that tells others that you want to die a natural death if you are incurably sick and cannot receive nutrition or breathe on your own

thank you

Q&A

You have

Questions

We have

Answers



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Executive Committee Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Executive Committee sets the agenda for Board meetings and acts in lieu of the Board between meetings. Actions by the Executive Committee are reported to the full Board at the next scheduled meeting.

This month's report includes approved minutes from the June 21, 2021, meeting and draft minutes from the July 19, 2021, meeting.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Lynne Nelson, Board Chair; and Robert Robinson, CEO

[\(Back to agenda\)](#)



Monday, June 21, 2021

BOARD EXECUTIVE COMMITTEE - REGULAR MEETING

(virtual meeting via videoconference)
4:00-6:00 p.m.

APPOINTED MEMBERS PRESENT: David Curro, BS (Audit and Compliance Committee Chair); Angela Diaz, MBA (Client Rights/Human Rights Committee Chair); Lodies Gloston, MA (Policy Committee Chair); David Hancock, MBA, PFaff (Finance Committee Chair); Lynne Nelson, BS (Board Vice-Chair); Gino Pazzaglini, MSW LFACHE (Board Chair); and Pam Silberman, JD, DrPH (Quality Management Committee Chair)

APPOINTED MEMBERS ABSENT: Donald McDonald, MSW (Network Development and Services Committee Chair)

BOARD MEMBERS PRESENT: None

GUEST(S): None

STAFF PRESENT: Joey Dorsett, Senior Vice-President/Chief Information Officer; Angel Felton-Edwards, Senior Vice-President/Population Health and Care Management; Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Veronica Ingram, Executive Assistant II; Mehul Mankad, Chief Medical Officer; Ann Oshel, Senior Vice-President/Community Health and Well-Being; Monica Portugal, Chief Compliance Officer; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Robert Robinson, CEO; Sean Schreiber, Executive Vice-President/Network and Community Health; Jennifer Stoltz, Administrative Assistant II; Sara Wilson, Senior Director of Government Relations; and Carol Wolff, General Counsel

- 1. WELCOME AND INTRODUCTIONS** – the meeting was called to order at 4:03 p.m.
- 2. REVIEW OF THE MINUTES** – The Committee reviewed minutes from the May 17, 2021, meeting; a motion was made by Vice-Chair Nelson and seconded by Mr. Curro to approve the minutes. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Closed Session	COMMITTEE ACTION: A motion was made by Mr. Curro to enter closed session pursuant to North Carolina General Statute (NCGS) 143-318.11 (a) (1) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1. Motion seconded by Ms. Gloston. Motion passed unanimously.	N/A	N/A
4. Reconvene Open Session	The Committee returned to open session.	N/A	N/A
5. Agenda for June 29, 2021, Board Meeting	Committee reviewed the draft agenda and provided input.	Ms. Ingram will forward the agenda to staff.	6/21/21

- 6. ADJOURNMENT:** the meeting adjourned at 5:42 p.m.; the next meeting will be July 19, 2021, at 4:00 p.m.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



Monday, July 19, 2021

BOARD EXECUTIVE COMMITTEE - REGULAR MEETING
 (virtual meeting via videoconference)
 4:00-6:00 p.m.

APPOINTED MEMBERS PRESENT: David Curro, BS (Audit and Compliance Committee Chair); Angela Diaz, MBA (Client Rights/Human Rights Committee Chair); Lodies Gloston, MA (Policy Committee Chair); David Hancock, MBA, PFAff (Finance Committee Chair); Lynne Nelson, BS (Board Chair); Gino Pazzaglini, MSW LFACHE (past Board Chair); and Pam Silberman, JD, DrPH (Quality Management Committee Chair)

APPOINTED MEMBERS ABSENT: Donald McDonald, MSW (Network Development and Services Committee Chair)

BOARD MEMBERS PRESENT: None

GUEST(S): Jamezetta Bedford, Orange Board of County Commissioners

STAFF PRESENT: Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Veronica Ingram, Executive Assistant II; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Robert Robinson, CEO; Jennifer Stoltz, Administrative Assistant II; Sara Wilson, Senior Director of Government Relations; and Carol Wolff, General Counsel

1. **WELCOME AND INTRODUCTIONS** – the meeting was called to order at 4:01 p.m.
2. **REVIEW OF THE MINUTES** – The Committee reviewed minutes from the June 21, 2021, meeting; a motion was made by Mr. Curro and seconded by Mr. Pazzaglini to approve the minutes as submitted. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Closed Session	COMMITTEE ACTION: A motion was made by Ms. Gloston to enter closed session NC General Statute 143-318.11 (a) (1) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C-126.1. Motion seconded by Mr. Curro. Motion passed unanimously.	N/A	N/A
4. Reconvene Open Session	Committee returned to open session.	N/A	N/A
5. Agenda for August Board Meeting	Committee reviewed the draft agenda and provided input.	Ms. Ingram will forward the agenda to staff.	7/19/21
6. Updates	A. BOARD SURVEY SOLUTIONS: Rob Robinson, CEO, provided an overview of a draft action plan based on board survey results and board members' input. The presentation is saved as part of the committee's files. COMMITTEE ACTION: A motion was made by Mr. Curro to recommend Board approval of the proposed board survey solutions. Motion seconded by Ms. Diaz. Motion passed unanimously. B. STRATEGIC PLAN UPDATE: Kelly Goodfellow, Executive Vice-President/Chief Finance Officer, provided an update on an accelerated strategic plan; the presentation is saved as part of the committee's files.	A. Topic will be presented to the board in August. B. Topic will be presented to the board in August. C. Topic will be presented to the board in August.	A. 8/5/21 B. 8/5/21 C. 8/5/21

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Monday, July 19, 2021

BOARD EXECUTIVE COMMITTEE - REGULAR MEETING
(virtual meeting via videoconference)
4:00-6:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>C. RECOMMENDED DME (durable medical equipment) AND VISION VENDOR RFP AWARDEES: Ms. Goodfellow provided the update and recommendation; the presentation is saved as part of the committee's files.</p> <p><u>COMMITTEE ACTION:</u> A motion was made by Ms. Gloston to recommend Board approval of the selected DME and Visions vendors subject to Finance Committee's review. Motion seconded by Mr. Pazzaglini. Motion passed unanimously.</p>		

7. **ADJOURNMENT:** the meeting adjourned at 5:45 p.m.; the next meeting will be August 16, 2021, at 4:00 p.m.

DRAFT

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



Alliance Health BOARD OF DIRECTORS Agenda Action Form
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ITEM: Consumer and Family Advisory Committee (CFAC) Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Alliance Consumer and Family Advisory Committee, or CFAC, is made up of consumers and/or family members that live in Durham, Wake, or Cumberland Counties who receive mental health, intellectual/developmental disabilities and substance use/addiction services. CFAC is a self-governing committee that serves as an advisor to Alliance administration and Board of Directors.

State statutes charge CFAC with the following responsibilities:

- Review, comment on and monitor the implementation of the local business plan
- Identify service gaps and underserved populations
- Make recommendations regarding the service array and monitor the development of additional services
- Review and comment on the Alliance budget
- Participate in all quality improvement measures and performance indicators
- Submit findings and recommendations to the State Consumer and Family Advisory Committee regarding ways to improve the delivery of mental health, intellectual/other developmental disabilities and substance use/addiction services.

The Alliance CFAC meets at 5:30pm on the first Monday in the months of February, April, June, August, October and December at the Alliance Corporate Office, 5200 West Paramount Parkway, in Morrisville. Subcommittee meetings are held in individual counties; the schedules for those meetings are available on our website.

The Alliance CFAC tries to meet its statutory requirements by providing minutes to its meetings, letters to the board, participation on committees, outreach to our communities, providing input to policies effecting consumers, and by providing the Board of Directors and the State CFAC with an Annual Report as agreed upon in our Relational Agreement describing our activities, concerns, and accomplishments.

This report includes documents from the following meetings: Draft minutes and supporting documents from the Cumberland County June 24, 2021 and supporting documents. All of our committees took the month of July off.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Jason Phipps, CFAC Chair; Doug Wright, Director of Community and Member Engagement

[\(Back to agenda\)](#)



Thursday, June 24, 2021

CFAC MEETING - REGULAR MEETING
(Virtual Meeting via Video Conferencing)
5:30-7:00 p.m.

MEMBERS PRESENT: Michael McGuire Ellen Gibson, Dorothy Johnson Carrie Morrisy Jackie Blue Sharon Harris Briana Harris Shirley Francis
 Tekeyon Lloyd Tracey Glenn- Thomas Renee Lloyd Carson Lloyd Jr. Felishia McPherson Alejandro Vasquez Andrea Clementi

BOARD MEMBERS PRESENT:

GUEST(S): : Shavalia Ingran, State CE&E

STAFF PRESENT: Doug Wright, Director of Community & Member Engagement, Starlett Davis, Member Engagement Specialist

Join Zoom Meeting

<https://alliancehealthplan.zoom.us/j/9123456789>

Meeting ID: 991 7538 7198

Passcode: 935256

Dial by your location

+1 646 558 8656 US (New York)

1. WELCOME AND INTRODUCTIONS: Felishia McPherson

2. REVIEW OF THE MINUTES – The minutes from the May 27, 2021, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Felishia McPherson and seconded by Renee Lloyd to approve the minutes. Motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Public Comments	<p>Felishia, Renee and Starlett Community events and resources. Covid 19 Check ins</p> <ul style="list-style-type: none"> NAMI Extravaganza postponed. Date will be October 5, 2021. Jackie brought stated that due to the pandemic the public is more opened to mental health assistance. The committee members commented their opinions on this. Members did Covid 19 check ins. Committee members offered their well wishes and thanks. 	Please see Doug or Starlett for any questions.	Ongoing

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Thursday, June 24, 2021

CFAC MEETING - REGULAR MEETING
 (Virtual Meeting via Video Conferencing)
 5:30-7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
4. ADA Updates	Shirley Francis- ADA updated meeting information. <ul style="list-style-type: none"> • ADA next meeting is August 18th. It is the 31st anniversary fir ADA. They plan to have a DHHS Rep speak and the City of Fayetteville rep for ADA speak on the City Plans. Go to City Site to see the plan. This will be virtual. 	Please see Doug, Shirley, or Starlett for any questions	August 18, 2021
5. State Updates	Shavlia Ingram June CE&E Update Please see electronic document. Events/ Meetings to note: <ul style="list-style-type: none"> • June is Pride month • June 28th DMA • June 29th DMH • Minority Health Month is in July 	Please see Doug or Starlett for any questions	Ongoing
6. MCO	Doug Wright MCO Updates Olmstead Doug Wright Spoke about Mecklenburg Co realigning with Alliance health and Orange County realigning with Alliance. The rest of the Cardinal counties have a choice to merge with Viya. There are 13 counties left. The counties are given the option to decide if they want to go to Viya or another tailored plan. Announcement of Tailored plans will be the end of June. Doug also spoke of a of the 30, 60, 90, 120 day expectations and requirements. We are working on that now. Terrasine Gardner took on an opportunity to work with another company. She is no longer with Alliance and we wish her the best.	Please see Doug or Starlett for any questions	Ongoing
7. Updates	Starlett and Doug Additional Discussion July Meeting continued discussion Ellen made a motion that we skip the July meeting and meet again in August. Motion was 2 nd by Michael and Dorothy and committee	Please see Doug or Starlett for any questions Next meeting August 26, 2021	August 26m 2021

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



Thursday, June 24, 2021

CFAC MEETING - REGULAR MEETING

(Virtual Meeting via Video Conferencing)

5:30-7:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>voted that the next meeting will be August 26, 2021 at 5:30pm via Zoom.</p> <p>Registry of Unmet Needs The members were given an electronic document on this lunch and learn to look at when they have the time.</p> <p>Olmstead PowerPoint Talks about Olmsted assessment timeline and who is involved. It will be finalized by January 2022.</p> <p>Phone calls to discuss direction and CFAC priorities Cull membership list for inactivity. Discussion Starlett Davis reached out to members that have been absent from the meetings. She has not been able to get in contact. She asked for one more month to keep trying.</p> <p>Elections Elections were held for Chair and Co Chair. The committee nominated the current chair and co chair. They accepted the nominations. The committee voted Felishia McPherson to continue as Chair and Renee Lloyd to continue as Co Chair.</p>		
8. Prep for next meeting	<p>Felishia- Discuss the next meeting agenda items. Go over expectations, reminders, etc for the next meeting. Next meeting will be August 26, 2021 at 5:30pm via Zoom. Starlett will send out the Advocacy Tool Kit.</p>	Please see Doug or Starlett for any questions	Ongoing
9. Appreciation	Everyone was appreciative for our meeting and fellowship.	N/A	N/A
10.			

ADJOURNMENT: Felishia made a motion to close the meeting. Michael 2nd it. Meeting adjourned at 6:33pm. Next meeting August 26, 2021.

Respectfully Submitted by:

[Click here to enter text.](#)

Date Approved

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.



COMMUNITY ENGAGEMENT & EMPOWERMENT TEAM

Community Updates / June 2021

NCDHHS- DMH/DD/SAS

June is Pride Month

June is Pride month as we tried to find information on Pride month we have learned that there are additional days that are important to the LGBTQ community that we hope as the year progresses to highlight those days also. The beginning of the movement started in :

- 1946 The first LGBTQ organization was started. They used a vague name to hide what was then a taboo purpose— The Netherlands Center for Culture.
- June 26, 1969 - The Stonewall Riots occurred NYC police raid the Stonewall Inn intern instigating the Stonewall Riots .
- June 28, 1970— The First official Pride Parade- Organized by pioneering bisexual activist Brenda Howard and a committee she put together, the parade sees supporters march from Greenwich Village to Central Park
- June 25, 1978- The Rainbow flag fly's high -Gilbert Baker's original design of the rainbow gay pride flag is flown at the San Francisco Gay Freedom Day Parade.
- June 26, 2015—Same Sex Marriage Rights -The U.S. Supreme Court makes same-sex marriages legal in all 50 U.S. states

Traditions for Pride Month

“Pride Month is for everyone to embrace who they are and let the world know — in style! The rainbow aptly signifies the colorful activities and flavors of this month-long celebration. These include massive rallies, pride parades, parties, workshops, concerts, and countless more LGBTQ events to attract participants from all over. The pride community takes huge pride in their movement, going all out for the festivities with elaborate costumes, makeup, and, of course, glitter. So they sparkle for the whole world to see! “

“Commemorations and memorials are also held for members of the community who have lost their lives to hate crimes and HIV/AIDS. Campaigns and rallies aim to promote and preserve the history and well-being of the lesbian, gay, bisexual, and transgender community.”

<https://nationaltoday.com/pride-month-2021/>

Pride Month By The Numbers

- 52%** – the percentage of LGBTQ people who’ve experienced depression recently.
- 1 in 8** – the number of LGBTQ people who have experienced unequal treatment from healthcare staff.
- 46%** – the percentage of lesbian, gay, and bisexual people who are open about their sexual orientation with their family.
- 4.1%** – the estimated percentage of women who identify as LGBT.
- 350,000** – the number of people in the LGBTQ community that are transgender women.
- 1 in 5** – the number of LGBTQ women living in poverty.
- 43%** – the percentage of LGBTQ employees who haven’t revealed their orientation at work.
- 50%** – the percentage of LGBTQ workers who recently got federal protection from discrimination.
- 10%** – the amount of time LGBTQ workers spend hiding their identities.
- <\$12,000** – the annual income earned by 22% of LGBTQ people.

<https://nationaltoday.com/page.72.of.108>

National Survey on LGBTQ Youth Mental Health 2020

Data is just beginning to be understood concerning the impact on mental health from the multiple crises that occurred in 2020. It is known that suicide is a public health crisis, it remains the 2nd leading cause of death among young people. It also continues to disproportionately impact LGBTQ youth. The following research was obtained from the Trevor –National Survey on LGBTQ youth mental health of 2020. There is a great need to continue to have research, systematic data collection and comprehensive mental health support.

- 40% of LGBTQ respondents seriously considered attempting suicide in the past 12 months, with more than half of transgender and non-binary youth having seriously considered suicide.
- 68% of LGBTQ youth reported symptoms of generalized anxiety disorder in the past 2 weeks, including more than 3 in 4 transgender and nonbinary youth.
- 48% of LGBTQ youth reported engaging in self-harm in the past 12 months, including over 60% of transgender and nonbinary youth.
- 46% of LGBTQ youth report they wanted psychological or emotional counseling from a mental health professional but were unable to receive it in the past 12 months.
- 10% of LGBTQ youth reported undergoing conversion therapy, with 78% reporting it occurred when they were under the age of 18.
- 29% of LGBTQ youth have experienced homelessness, been kicked out or ran away
- 1 in 3 LGBTQ youth reported that they had been physically threatened or harmed in their lifetime due to their LGBTQ identify
- 61% of transgender and nonbinary youth reported being prevented or discouraged from using a restroom that corresponds with their gender identity.
- 86% if LGBTQ Youth said that recent politics have negatively impacted their well-being
- Transgender and nonbinary youth who reported having pronouns respected by all or most people in their lives attempted suicide at half the rate of those who do not have pronouns respected.
- <https://www.thetrevorproject.org/survey-2020/?section=Introduction>
- <https://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/LGBTQI>

Don't be afraid to ask for help!

Don't be afraid to ask for help!

If you need to reach out for help you can start with contacting: your health insurance, primary care doctor, local LME/MCO crisis line, Hope for NC or state/county mental health authority for more resources.

If you or someone you know needs helps now, you should immediately call the **National Suicide Prevention Lifeline at 1-800-273-8255 or call 911.**

Please check your community for any activities for Pride month

Hope Program

The Hope Program is once again taking applications for rental and utility assistance. Visit hope.nc.gov or call 888-927-5467 to apply. The State is taking applications from 88 counties, and if you are one of the 12 counties who are handling one of their own programs or you are a registered member of a North Carolina tribe, you will be directed to the right assistance program. This application round is limited to applicants who are 50% of area median income (AMI) or below. This round of applications will cover 12 months of rental payments (9 months of arrears, 3 months of rent). It is crucial to get the word out across the state to make sure that people are aware that the program has reopened.

Director Armstrong Testifies on Improving Mental Health

Victor Armstrong, Director of NCDHHS' Division of Mental Health, Developmental Disabilities and Substance Abuse Services, testified May 12 before the U.S. Senate Finance Subcommittee on Health during a hearing on improving mental health and addiction services in communities. Armstrong and other invited leaders and officials addressed successes and opportunities in improving access to high-quality, community based behavioral health care services and helping people in crisis; recommendations to address disparities in treatment and access to care; and the impact of the pandemic on patients and providers.

Please use the link below to watch the Director Armstrong's Testimony Before US Senate Finance Committee

<https://tinyurl.com/t6vakmmm>

Traumatic Brain Injury

TBI training opportunities are available statewide online currently and in-person post COVID when possible. The TBI Program contracts with the Brain Injury Association of North Carolina (BIANC) to provide a variety of education, outreach and training activities. Some of the training opportunities available include Brain Injury Basics, TBI and Co-Occurring Mental Health and Substance Use Disorders, TBI and Aging, TBI and post-traumatic stress disorder (PTSD) in the Military and Crisis Intervention Training. Many of these trainings are offered in-person and/or in webinar format.

The online training modules include topics such as Identification of TBI among Medical Professionals and the Primary Care Workforce as well as TBI and Public Services in NC.

<https://www.ncdhhs.gov/assistance/disability-services/traumatic-brain-injury>

Join the Team

Developing the State Performance Plan (SPP)

The NC Department of Public Instruction (NCDPI) Exceptional Children's Division is responsible for developing the State Performance Plan (SPP) which includes strategies to improve and measure outcomes for students with disabilities. Just as parents are a critical part of the IEP team in developing their child's IEP, parents are needed on this team to develop the State Performance Plan (SPP). This plan will be submitted to the US Department of Education Office of Special Education Programs for review.

As part of the State Performance Plan (SPP) the Exceptional Children's Division will measure progress for Students with disabilities at the state and local level through [17 performance indicators](#) which were identified by the federal Office of Special Education Programs (OSEP). These performance indicators include: Graduation, Dropout, Reading and Math Proficiency, Suspension & Expulsion, Preschool Outcomes, State Identified Measurable Result, School age Least Restrictive Environment, Preschool Least Restrictive Environment, Resolution Sessions, Mediation Agreements, Parent Involvement and Post-School Outcomes.

At the beginning of each meeting you will hear current data for the indicators, options for new targets/goals, and potential improvement strategies to meet the new targets/ goals. You will then have the opportunity to ask questions and provide input.

How can you participate?

There are **two virtual stakeholder meetings each month from April-November, 2021**. To give participants more options, one meeting is on a Tuesday morning at 10 am and the other is a Thursday evening at 6:00 pm. The content is the same for both meetings and each is scheduled for two hours. You can choose which day works best for you. You can attend one meeting or as many that will fit into your schedule.

Click now to see the [schedule](#) and log-in information for all the meetings. You do not need to register, just click the link to join the meeting. Live captioning in English and Spanish along with ASL interpreters will be provided at every meeting.

June –July Conferences

Bring It Home 2021! June 8th and 9th

Register now for Bringing it Home 2021! Join us on June 8th and 9th for this year's Bringing it Home: Ending Homelessness in NC virtual conference, where we will share best practices, discover successful strategies, and celebrate the tremendous work we have done over the past year. **This year, Bringing it Home will be free to all who register.** <https://nchousing.org/bringing-it-home-2021/>

NC One Community In Recovery June 9th –11th



<https://tinyurl.com/umbd4ya>

I2I Conference June 14-15



<https://i2icenter.org/events/spring/>

Alternatives 2021 (Virtual) Conference: Connecting, Organizing, Activating!

Registration is now open!!

Sponsored by the National Coalition for Mental Health Recovery

Thursday, July 8, & Saturday, July 10, 2021

Thursday, July 15, & Saturday, July 17, 2021

The National Coalition of Mental Health Recovery (NCMHR) will host the 2021 Virtual conference this year! Please Register today— Registration is **FREE** (follow this link: <https://tinyurl.com/22b3p4z5> If you wish to make a donation that would be gladly accepted. Partial list of presenters follow this link: <https://tinyurl.com/e8nj3a4v>

This year, in addition to presenting a full schedule of workshops guaranteed to engage, educate, and inspire you, the conference will invite you to join thought-provoking Action Groups; the goal is to develop important strategic plans to take back to your communities and work on in the days, weeks, and months ahead. Learn to use the power of our collective voice to influence and create policy, programming, and support in alignment with our values.

The Action Groups are:

1. National and Statewide Advocacy
2. Crisis Prevention and Alternatives to Institutionalization
3. Promoting Racial and Social Justice and Community Integration

Monthly Meetings

CONSUMER & PROVIDER CALLS:

Joint DMHDDSAS & DHB Update call : Providers
Thursday, June 3 2021 at 3 PM

Joint DMHDDSAS & DHB Update call :
Consumers & Family Members
Monday, June 28 2021 at 2 PM

Link's will be provided to those on our list serve.If you would like to be on our list serve please email the CEE Team at:
CEandE.staff@dhhs.nc.gov

Regional CFAC Meetings

Alliance, Eastpointe, Sandhills and Trillium

June 21, 2021, 6 pm – 7:00pm

Join on your computer or mobile app
[Click here to join the meeting](#)

Join with a video conferencing device
ncgov@m.webex.com

Video Conference ID: 115 431 050 0

[Alternate VTC dialing instructions](#)

Or call in (audio only)

[+1 984-204-1487,130607187#](tel:+19842041487130607187) United States, Raleigh
Phone Conference ID: 130 607 187#

Cardinal, Partners and Vaya

June 22, 2021, 6 pm – 7:00pm

Join on your computer or mobile app
[Click here to join the meeting](#)

Join with a video conferencing device
ncgov@m.webex.com

Video Conference ID: 117 198 495 5

[Alternate VTC dialing instructions](#)

Or call in (audio only)

[+1 984-204-1487,894881155#](tel:+19842041487894881155) United States, Raleigh
Phone Conference ID: 894 881 155#

Opportunities for Participation

Medicaid Transformation

Here are some additional sites that you may go to find more information on Medicaid Transformation:

<https://medicaid.ncdhhs.gov/transformation>

<https://medicaid.ncdhhs.gov/transformation/more-information>

NC Olmstead

Learn more about NC Olmstead

<https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/nc-olmstead>

Grant Opportunities

<https://tinyurl.com/DMHDDSAS-Grants>

Peer Support Specialist

If you are interested in becoming a Peer Support Specialist, online training options are available! To find an online course, please visit <https://pss.unc.edu/training>.

State CFAC

Nothing About Us, Without Us.



The State Consumer and Family Advisory Committee (SCFAC) meeting is on the 2nd Wednesday of every month and is open to the public. Due to COVID-19, all State CFAC meetings will be held as webinars until further notice. Suzanne Thompson will be supporting SCFAC from March - June 2021; contact [Suzanne by email](mailto:Suzanne.Thompson@dhhs.nc.gov) for more information on the meetings.

Next Meeting: **Wednesday, June 9, 2021**

Time: **9:00 am to 1 pm**

Join by web browser:

<https://tinyurl.com/StateCFACMeeting>

Call-in: +1-415-655-0003

Access Code: 171 378 2076

SCFAC Vacancies

- **NC Association of County Commissioners**—Western Region
Please apply at the following link:
https://www.ncacc.org/about/_scfac-application-form/
- **President Pro Tempore of the Senate** —Central Region
Contact Darrell Malcolm— Darrell.Malcolm@ncleg.gov
- **Speaker of the House**—Central Region
Contact Julie Lisella— Julie.Lisella@ncleg.gov
- **Secretary of Health and Human Services**—
Suzanne.Thompson@dhhs.nc.gov
Substance Use full term July 1, 2021 through June 30, 2024
Mental Health partial term date of appointment through June 30, 2022

Local CFAC Updates

Local CFACs are meeting again in **June** check with your LME/MCO to get full calendar and meeting details, including how to connect with those virtual meetings and or in person. .

Click on the directory link to find your LME/MCO: <https://www.ncdhhs.gov/providers/lme-mco-directory>

New Time for the State to Local Call : 6:00PM



The State to Local Collaboration Call will resume the regular schedule of every **4th Wednesday** of the month. CFAC members can use the same Phone Number and Conference ID for each meeting. Links to participate by web will be sent out before each meeting. The call-in number and conference ID will not change.

Next Call: June 23, 2021 At 6:00 –7:30PM

<https://tinyurl.com/S2L-CollaborationCall>

+1-415-655-0003

Conference ID: 171 710 7705

Don't forget

June 9-11th



**NC ONE COMMUNITY
IN RECOVERY**



Need Help with your Utility Bills !!

For more information, contact:

919-470-8680

contact@CommunityHealthCoalition.com

Or visit

CommunityHealthCoalition.com/utility-assistance

NDEAM 2021 Theme: America's Recovery: Powered by Inclusion

The U.S. Department of Labor announced that the theme for National Disability Employment Awareness Month 2021 is "America's Recovery: Powered by Inclusion." Held each October, the commemoration raises awareness about disability employment issues, and celebrates the many and varied contributions of America's workers with disabilities. Selected by the department's Office of Disability Employment Policy, the theme's annual spring announcement helps the nation's disability advocates and other organizations plan their observances. As ODEP celebrates its 20th anniversary in 2021, it encourages employers and community organizations, advocacy groups and schools to participate.

<https://tinyurl.com/ab7bnmf>

DHHS I/DD Stakeholder Workgroup Meetings

The workgroup is responsible for researching, recommending, and providing support/guidance for future implementation of best or promising practices to meet the needs of Individuals with Intellectual/Developmental Disabilities. This includes reviewing, planning, improving and/or establishing services and supports for this population. This workgroup will be composed of community partners and Subject Matter Experts (SMEs) from DHHS and DPI.

The workgroup will work collaboratively with a shared vision and planning. It is the last item on this link.

<https://tinyurl.com/4thc69tk>

Medicaid Transformation: Ombudsman Update

DHHS has been engaged in an Olmstead planning process for the past six months. The goal of the planning process is to create a comprehensive Olmstead plan for DHHS to use to support people with disabilities and older individuals in NC. States are encouraged to have an Olmstead plan to comply with the Americans with Disabilities Act's integration mandate and the US Supreme Court's *Olmstead v. L.C.* decision.

We have released *An Assessment of Systems and Services that Support Individuals with Disabilities in North Carolina* a report developed by the Technical Assistance Collaborative [TAC] This Assessment will be used by the Department and its Olmstead Advisory Committee to develop a comprehensive Olmstead plan. The report provides observations and recommendations for the state.

A copy of the report can be found at the following link

<https://tinyurl.com/xj7hfpf8>

DHHS plans to have Olmstead Plan finalized by January 2022.

The NC Division of Vocational Rehabilitation Services and your State Rehabilitation Council (SRC) are hosting a virtual public forum via Zoom to gather feedback from vocational rehabilitation (VR) stakeholders.

What: SRC Virtual Public Forum

When: June 10, 2021 4:30-6:30 pm

Register: We recommend registering early. Here: <https://tinyurl.com/9n8fvuek>

You will receive a confirmation email once registered.

If you are a current or former client, a family member of a client, employer or community service provider, VR professional or other stakeholder, please join us and make your voice heard!

Share your success stories, concerns, questions, resources and ideas to improve employment programs and services for people with disabilities. Feel free to send questions to the SRC Chair

dvr.m.srcchair@dhhs.nc.gov *Registration is not required

Veterans, Servicemembers & Families



Want to learn more about services for Veterans in North Carolina? Go to [NC Governor's Working Group](#) (GWG) and explore the site- you'll find out more about the Interactive Retreat Center near Fort Bragg, the monthly NCGWG meetings (including how to view them on Facebook), workshops, economic, health and [COVID-19](#) related issues pertaining to related to Veterans and their families.

GWG on June 24th from 2 – 4:00pm—one of the topics will be on the topic of NCCARE360/NCServes joining forces this summer to create the Nation's First State-wide integrated Resource Coordination Network. To join the meeting virtually, go to <https://www.facebook.com/govinst/>. To watch captioning during this meeting, go to: <https://carolinascaptioning.1capapp.com/event/gwg>. You can use a separate mobile device such as a smart phone, tablet, or laptop to watch the captioning

For more information, contact Jeff Smith, Military and Veterans Program Liaison, by email at Jeff.Smith@dhhs.nc.gov.



Community Engagement & Empowerment Team

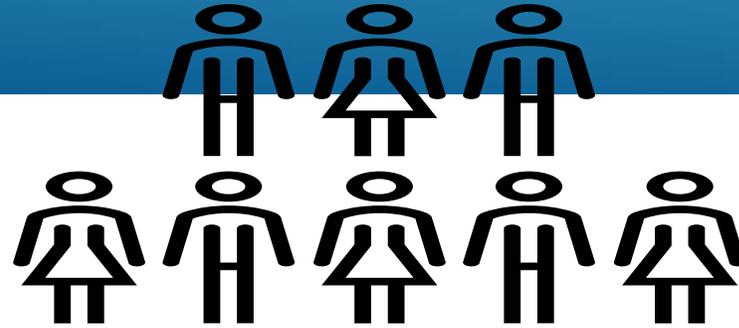
The Division of MH/DD/SAS, Community Engagement and Empowerment team provides education, training, and technical assistance to internal and external organizations and groups to facilitate community inclusion and meaningful engagement of persons with lived MH/DD/SUD experience across HHS policy making, program development, and service delivery systems. Learn more at:

<https://www.ncdhhs.gov/assistance/mental-health-substance-abuse/community-empowerment-and-engagement>



CCR

CANSLER COLLABORATIVE RESOURCES, INC.



Christina Dupuch,
Project Manager for the NC Council on Development Disabilities
Registry of Unmet Needs (RUN)
Project



Project Overview

- Explore NC's Registry of Unmet Needs (RUN)
- Local Management Entity/Managed Care Organization (LME/MCO) Survey Highlights
- Stakeholder Comments
- Strategies from Other States
- Collection of stories & videos
- Commitment for Action

LME/MCO Surveys- 13 Questions & Highlights

1. How many Individuals currently on the RUN?

➤ *15,000+ **Moment in Time*

2. What is the average length of time being on the RUN?

➤ *Approximately 8.2 years*

3. What is the process for being placed on the RUN?

➤ *Website/Call 1-800#/Provide Application & Supplemental Documentation*

4. Do you know the racial breakdown of the RUN list?

➤ *4 LME/ MCO's Do track*

➤ *3 LME/MCO Do not track*

5. How often do you confirm the individual information?

➤ *Annually/Quarterly/Updated thru out the year/Member Responsibility*

LME/MCO 13 Questions/Highlights

6. Have you developed marketing strategies to educate the public about the RUN?
➤ *Website/ Schools/Health Fairs/CFAC/Health Systems/DSS's/ Providers/Care Coordinators/etc.*
7. How are you utilizing the data from the RUN within the LME/MCO?
➤ *Developing In-Lieu Services*
➤ *B3 services*
➤ *Alternative Services*
➤ *Contracting with Provider Network to offer innovative services*
➤ *Developing Quality Management Activities*
**In-Lieu = Alternative, Innovative, evidence-based services that are cost-effective options to behavioral health services offered by the state.*
**B-3 =Alternative services offered in addition to the State Medicaid Plan, part of the Waiver*
**Alternative Services are funded with State Funding*
8. Do you share the RUN information with the BOD, CFAC, IDD Stakeholders, Provider Network, etc.?
➤ *All LME/MCO's share with Internal/External Groups*
9. What services and/or supports do you offer individuals on the RUN? (State-funded, Medicaid, B3, etc.)?
➤ *LME/MCO's evaluate needs and offer services as funding is available*

LME/MCO 13 Questions/Highlights

10. Do you have a plan, or have you implemented strategies to improve supports for individuals on the RUN?

➤ *Formal & informal plans*

11. Please describe your process in awarding innovation slots to individuals on the RUN?

➤ First come/First Serve, Population per Capita, Evaluate each county

12. Do you have families who would share their stories from being on the RUN?

➤ All LME/MCO's offered to locate individuals for interviews

13. Based on your knowledge of managing the RUN, please provide recommendations:

➤ Community Living & Support Services, variety of other services.

➤ Evaluate Social Determinants of Health (SDoH) for members on the RUN

➤ More staff designated to RUN

➤ Statewide database, more to come...

IDD Stakeholder Conversations

- NCCDD Members
- State CFAC
- DD Consortium
- Olmstead Committee
- NC Provider Council – IDD Committee
- NC Innovations Action Waiver Team

Stakeholder Concerns

- How do you find out about getting on the Registry?
- High frustration and lack of hope while waiting
- Low incentive to get on Registry- due to wait
- No regular updates
- Need more information about available services (Do not send me to the web!)
- People talk about the waitlist, but what are they doing?
- Observation of other investments but not for people on the RUN
- Schools & doctors need more education about how to make a referral
- Citizens of NC need to know that 15,000+ people are waiting

Stakeholder Suggestions

- Build a statewide grassroots advocacy group
- ONE VOICE....
- Have members of the RUN present at the NC General Assembly, LME/MCO Boards, County Commissioner Meetings, etc.
- Conduct TV, interviews, radio and other social media interviews of people waiting- tell our story!
- Consider implementing more smaller waivers
- Invite members of the RUN to help improve the system

Strategies From Other States

Interviewed Eight DD Council State Directors:

- Georgia
- Louisiana
- North Carolina
- Maryland
- Tennessee
- Texas
- Washington
- Wisconsin

Information from Other States

- CCR & Duke-Margolis Public Health conducted interviews
- Developed a standard IDD Waiver & Waitlist Interview
- Timeline to complete interviews: March 15-May 15
- Gathering additional information through conversations with other state/national leaders

Findings from Other States

Political Interventions:

- Give the legislation of decreasing the RUN a FACE!!
- Legislative champion(s)
- Waitlist members participate in legislative sessions
- Presentation by grassroots advocacy groups to legislators (not just providers)
- Education on growth rate of this population

Management:

- Most waivers & waitlist are managed by the State's Medicaid Office
- Most have a statewide database
- Implement enrollment processes no matter where individual lives
- Standardization of required documents (based on state's waiver)
- Standardization of determination process (based on waiver)
- Core services for those waiting (may vary by location)
- Standardization of criteria for emergency requests or approvals

Findings from Other States-continued

Design

- Utilization of data to create a tier waivers: (examples)
 - Employment/ Meaningful Day
 - Focused array of services based on database
 - Transition from School

Interesting Facts:

- Wisconsin** negotiated with legislators prior to manage care implementation to establish if anyone meets criteria for a waiver, it will be seen as an entitlement (NO Waitlist)
- Georgia**, even with Olmstead, still dealing with waitlist and now dealing with cuts
- Maryland** has 3 waivers (Comprehensive Waiver for 21 & Older, Family Support for Under 21 & Community Support Services for over 21)
- Tennessee**, *Pathfinder* at Vanderbilt University (over 3000+ connections/services)

Findings from Other States-continued

Interesting Facts:

- ❑ **Washington**, deinstitutionalization pushed for more waivers
- ❑ **Texas**, completed evaluation, evaluating how to address gaps in real time & manage timely access to services, prioritizing certain populations, considering reduction allocations to serve more people

Collection of Stories & Website Development

- **CCR is working with NCCDD's vendor O'Neill Communications**
- **Discussed gathering stories/videos of individuals on RUN**
- **LME/MCO's links on NCCDD's website regarding RUN information**
- **Linking additional information from other States**

Commitment to Action

NC Council on Developmental Disabilities (NCCDD)

**This research project was designed to inform the development of a Request for Applications (RFA) for a future 3-4 years initiative for NCCDD to support on the topic of the Registry of Unmet Needs by helping people with I/DD obtain the services & supports they need to live in the community
On May 13th & 14th, at the NCCDD Quarterly Meeting, the members will be voting on this RFA.**

So grateful for the opportunity to be with you today.....



Olmstead

Tuesday roll-out

Olmstead Assessment Rollout Timeline

April 27th

- Review Report with Secretary Cohen

April 30th

- Share embargoed report DRNC
- Share report with Judge Baddour

May 3-7

- Meet with DRNC to receive any comments
- Develop DHHS Press statements and statements to advocacy and provider Associations

May 10th

- Finalize statements and rollout plan in the hands of key contacts
- Matt e-mails legislators

May 11th

- 8:00 am -12:00 noon – Pre calls to Legislators /Key stakeholders
- 1:00 pm - Release report to Olmstead Committee
- 1:30pm - DHHS post Report and send Statements to Press and Stakeholder groups
- 2:00 pm -5:00 pm DHHS staff available for press inquiries

May 12th

Olmstead Committee reviews

Olmstead e-mail for Tuesday

For

Medicaid Associations – Dave

LME/MCO's Vic

BH-IDD Associations – Vic

Ageing organizations-Joyce

Olmstead Committee -Holly

Pre calls – Dave

LME/MCO -CEO meeting -Dave and Vic

E-mails for Associations

Good Afternoon

DHHS has been engaged in an Olmstead planning process for the past six months. The goal of the planning process is to create a comprehensive Olmstead plan for DHHS to use to support people with disabilities and older individuals in NC. States are encouraged to have an Olmstead plan to comply with the Americans with Disabilities Act's integration mandate and the US Supreme Court's *Olmstead v. L.C.* decision.

Today we released *An Assessment of Systems and Services that Support Individuals with Disabilities in North Carolina* a report developed by the Technical Assistance Collaborative [TAC] This Assessment will be used by the Department and its Olmstead Advisory Committee to develop a comprehensive Olmstead plan. The report provides observations and recommendations for the state.

A copy of the report can be found at the following link <https://www.ncdhhs.gov/about/department-initiatives/nc-olmstead> DHHS plans to have Olmstead Plan finalized by January 2022.



**Alliance Behavioral Healthcare
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Quality Management Committee Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Global QMC is the standing committee that is granted authority for Quality Management by the MCO. The Global QMC reports to the MCO Board of Directors which derives from General Statute 122C-117. The Quality Management Committee serves as the Board's monitoring and evaluation committee charged with the review of statistical data and provider monitoring reports. The goal of the committee is to ensure quality and effectiveness of services and to identify and address opportunities to improve LME/MCO operations and local service system with input from consumers, providers, family members, and other stakeholders.

The Alliance Board of Directors' Chairperson appoints the committee consisting of five voting members whereof three are Board members and two are members of the Consumer and Family Advisory Committee (CFAC). Other non-voting members include at least one MCO employee and one provider representative. The MCO employees typically assigned are the Director of the Quality Management (QM) Department who has the responsibility for overall operation of the Quality Management Program; the MCO Medical Director, who has ultimate responsibility of oversight of quality management; the Quality Review Manager, who staffs the committee; the Quality Management Data Manager; and other staff as designated.

The Global QMC meets at least quarterly each fiscal year and provides ongoing reporting to the Alliance Board. The Global QMC approves the MCO's annual Quality Improvement Projects, monitors progress in meeting Quality Improvement goals, and provides guidance to staff on QM priorities and projects. Further, the Committee evaluates the effectiveness of the QM Program and reviews and updates the QM Plan annually.

The draft minutes from the previous meeting are attached.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Pam Silberman, Committee Chair; Wes Knepper, Senior Vice-President /Quality Management

[\(Back to agenda\)](#)



Thursday, June 03, 2021

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

This meeting was held virtually, via Zoom

APPOINTED MEMBERS PRESENT: David Curro, BS (Board member); Marie Dodson (CFAC), Duane Holder, MPA (Board member); Pam Silberman, JD, DrPH (Board member; Committee Chair) Israel Pattison (CFAC) Carol Council (Board Member)

APPOINTED, NON-VOTING MEMBERS PRESENT: Diane Murphy, (Provider, IDD) Dava Muserallo, (Provider MH/SUD)

BOARD MEMBERS PRESENT:

GUEST(S) PRESENT: Mary Hutchings; Yvonne French (LME Liaison)

STAFF PRESENT: Michael Bollini, Chief Operating Officer; Diane Fening, Executive Assistant I; Mehul Mankad, Chief Medical Officer; Doug Wright, Director of Community and Member Engagement; Tia Grant, Quality Improvement Manager; Schuyler Moreno, QM Data Manager; Ginger Yarbrough

1. **WELCOME AND INTRODUCTIONS** – The meeting was called to order at 1:01 p.m.

2. **REVIEW OF THE MINUTES** – The minutes from the May 6, 2021 meeting were reviewed. Marie Dodson motioned to approve the minutes, Dave Curro seconded the motion. The motion passed.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
NEW BUSINESS	<p>The agenda order changed as Tia had a commitment.</p> <p>b. QIP Updates (Tia Grant)</p> <ul style="list-style-type: none"> Health Crowd will have a meeting next week to talk about the text messaging campaign. That implementation is planned to begin at the end of June. From a provider perspective, UM is assisting by adding notes to any kind of service request to remind providers that there are particular screenings that would need to be completed. Point of Care testing – some providers are using it, but because of lag in claims we won't know the results for a month or two. The Provider Networks team touches base with providers to find out what their roadblocks are. Seven day follow up – there are several different ways we are trying to engage providers. A team from Provider Networks had monthly meetings with providers to talk about what their productivity is from a claims' perspective. Care Coordinator admins reach out to members to see if there are any challenges to meeting their appointments. This has been helping and allows for us to receive real time information. 	<p><i>UM-Utilization Management</i></p> <p><i>QIP- Quality Improvement Projects</i></p>	

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, June 03, 2021

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> Peer Bridger piece – some modification to be made to assist with Covid-19 and the world opening up. Assertive engagement still ongoing to understand effectiveness of it and if there are any type of adjustments which need to be made. We are performing a deeper dive to understand why our performance is worse for people with mental health problems than for people with substance abuse problems. We don't have a Medicaid for Mental Health measure because we have consistently met it. We will be presenting at the August board meeting around quality and talk about key performance measures and what we are doing to improve them. He will also talk about the consumer satisfaction data and geographic data. 		
<p>3. OLD BUSINESS</p>	<p>HEDIS Vendor Procurement Efforts (Schuyler Moreno)</p> <ul style="list-style-type: none"> We have been looking for a HEDIS and quality measures vendor. From a list of all NCQA certified vendors, we narrowed it down to those who are certified in the measures we need. After the vendors did demos, Schuyler presented 6 vendors to the procurement committee and three vendors did product demonstrations in May. Follow up questions were sent out to the vendors and we have received the responses. A decision will probably be made in the next couple weeks. It will take until fall to have a fully functioning vendor in place. It is important to have an NCQA certified vendor to do our HEDIS measures. About half of our future accreditation score (when we become a Tailored Plan) will be our certified HEDIS scores, performance and our member satisfaction. We are doing this now in order to meet our future needs. We still need to decide what the vendor will be doing between the fall and go live. We have majority of physical health claims right now so we can measure that and determine our member's performance on these measures. But we aren't responsible for it now nor can we influence it to the extent that we would like to. 	<p><i>HEDIS-Healthcare Effectiveness Data and Information Set</i></p> <p><i>NCQA-National Committee for Quality Assurance</i></p>	

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Thursday, June 03, 2021

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<ul style="list-style-type: none"> Another reason why we want to have our measures certified by an NCQA vendor is that it will enable us to push back in the event that the State is unable to measure these things in the way we think matches the standards. It would be a useful tool. <p>Performance Dashboard (Schuyler Moreno)</p> <ul style="list-style-type: none"> As requested, Schuyler made a column with QIPs. There are eight that were not met. We didn't meet DHB 7-day SUD follow up, and the DMH 7-day mental health follow up. The other six come from the quarterly access to care report. There were three for urgent and three under routine. The Access to Care report was not mentioned anywhere in the RFA, and we are hoping that that report will go away and that there are better measures for this. 	<p><i>DHB- Division of Health Benefits (Medicaid)</i></p> <p><i>SUD-Substance Use Disorder</i></p> <p><i>RFA-Request for Application</i></p>	
<p>4. NEW BUSINESS</p>	<p>a. NCQA Accreditation Update (Ginger Yarbrough)</p> <ul style="list-style-type: none"> Cardinal has the LTSS distinction and we are the only other MCO that is going for it. June first and second was the on-site file review. Findings were overwhelmingly positive. Comments were that documents were well prepared and organized, everyone was knowledgeable and dedicated, and it was noted that the LTSS assessments were particularly well done and came to thoughtful conclusions. They are not able to give us final scores yet. We still have to go through the internal process and comment period. By July 16 we should be accredited. What is roadmap for the next two or three years? We have to keep the MBHO standards up. Three years post contract award, we will be required to have health plan accreditation with LTSS distinction, so that is our next big lift. As we are building the procedures for the Tailored Plan we are doing that with health plan accreditation in mind. After a full year of being a health plan, we can move forward with applying for health plan accreditation. The reason that we pursued the MHBO as a stepping stone is because it is a huge cultural shift to move from a URAQ accreditation to an NCQA accreditation. There are different expectations. In going from an MHBO to a full health plan, the LTSS standards will be same, UM and credentialing 	<p><i>MCO-Managed Care Organization</i></p> <p><i>LTSS-Long Term Services and Supports</i></p> <p><i>MBHO-Managed Behavioral Health organization accreditation</i></p> <p><i>URAC</i></p> <ul style="list-style-type: none"> Wes will get quality data broken down by race and ethnicity to see whether there are barriers and 	<ul style="list-style-type: none"> To Be Determined

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Thursday, June 03, 2021

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 1:00-2:30 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
	<p>standards are virtually identical, a lot of members rights and responsibilities are the same.</p> <ul style="list-style-type: none"> • NCQA does accreditation and owns HEDIS. We are required to report the HEDIS measures results publicly. NCQA will take our satisfaction scores, do risk adjustments and put the results with every health plan in in country and make it available for anyone to see. Everyone will be able to see how well we are serving our members. <p>c. Updated State Draft Quality Strategy (Wes)</p> <ul style="list-style-type: none"> • The public comment period has ended. A lot of this will probably evolve during implementation. The document will no doubt evolve. • Wes talked about some highlights under Item II. Quality Strategy Aims, Goals, Objectives, and Measures. This is really the North Carolina Medicaid strategy for quality: better care delivery, healthier people and smarter spending. • It was suggested that Sean come and talk about where we are in provider network adequacy. He can't talk about some of it because we don't have provider contracts with all of the primary care providers, but can talk about strategy in terms of insuring that we can meet provider network standards. Also, in a future meeting, Wes will ask Carlyle, who is in charge of the opioid work we do, to give an update on how we are doing because there are a lot of quality measures around opioids. • In this quality strategy document, it states that Alliance will not be doing care management directly for a lot of the population. We will provide oversight. • NCQA said that we are one of few plans that they saw doing the level of work around social determinants of health in all of our file folder review. • A lot of this document mirrors the NCQA health plan accreditations so that makes it more convenient. • There is no meeting for this committee in July. We will have a meeting August 5. 	<p>present at a future meeting.</p> <ul style="list-style-type: none"> • Sean will be coming to a future meeting to talk about value-based contracting, which is one of the requirements we will have to meet under the Tailored Plan. It was requested that he also speak about provider network adequacy. • Wes will ask Carlyle to come to a future meeting to give an update on how we are doing with the opioid work. • Wes will add to a future meeting's agenda a presentation about what we are doing to address social determinants of health needs, where we are doing the 	<ul style="list-style-type: none"> • TBD • TBD • TBD

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, June 03, 2021

BOARD QUALITY MANAGEMENT COMMITTEE - REGULAR MEETING
5200 W. Paramount Parkway, Morrisville, NC 27560
1:00-2:30 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
		<p>screenings, and how we are doing in terms of referring people into community services that are available.</p> <ul style="list-style-type: none">• A possible future agenda item for this meeting will be an update on Compliance 360, once we have enough data to pull reports.	<ul style="list-style-type: none">• TBD

5. **ADJOURNMENT:** the meeting adjourned at 2:05 pm; the next meeting will be August 5, 2021, at 1:00.

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)



**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Finance Committee Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Finance Committee's function is to review financial statements and recommend policies/practices on fiscal matters to the Board. The Finance Committee meets monthly at 3:00 p.m. prior to the regular Board Meeting.

This month's report includes draft minutes from the June 3, 2021, meeting, the Summary of Savings/(Loss) by Funding Source, ratios for the period ending May 31, 2021, and recommendations to the Board to approve all presented contracts over \$500,000, and any other applicable Finance Committee topics.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): David Hancock, Committee Chair; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer

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Finance Committee Meeting

Thursday, August 5, 2021

3:00-4:00 pm

AGENDA

- 1. Review of the Minutes – June 3, 2021**
- 2. Monthly Financial Reports as of May 31, 2021**
 - a. Summary of Savings/(Loss) by Funding Source
 - b. Statement of Revenue and Expenses (Budget & Actual)
 - c. Senate Bill 208 Ratios
 - d. DHB Contractual Ratios
- 3. Contract Award**
 - a. Durable Medical Equipment (DME)
 - b. Vision
- 4. Finance Committee Charter**
- 5. Year End Schedule**
- 6. Adjournment**

Next Meeting: Thursday, September 2, 2021 from 3:00-4:00

Alliance Health

Held virtually via Zoom



Thursday, June 03, 2021

BOARD FINANCE COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 Virtual Meeting via videoconference - 2:30-4:00 p.m.

APPOINTED MEMBERS PRESENT: ☑David Hancock, MBA, MPA (Committee Chair), and ☑D. Lee Jackson

BOARD MEMBERS PRESENT: n/a

GUEST(S) PRESENT: Denise Foreman, Wake County

STAFF PRESENT: Rob Robinson, CEO, Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Sara Pacholke, Senior Vice-President/Financial Operations, Ashley Snyder, Director of Accounting and Finance, Sara Wilson, Senior Director of Government Relations, Brian Perkins, Senior Vice-President/Strategy & Government Relations, Carol Wolff, Executive Vice-President/General Counsel

1. **WELCOME AND INTRODUCTIONS** – the meeting was called to order at 2:33 PM
2. **REVIEW OF THE MINUTES** – The minutes from the May 6, 2021, meeting were reviewed; a motion was made by Mr. Jackson and seconded by Mr. Hancock to approve the minutes. Motion passed unanimously.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
3. Monthly Financial Report	<p>The monthly financial reports were discussed which includes Summary of Savings/(Loss) by Funding Source, the Statement of Revenue and Expenses, Senate Bill 208 Required Ratios, and DHB Contract Ratios as of April 30, 2021. Ms. Pacholke discussed the following reports.</p> <ul style="list-style-type: none"> • Through 4/30/21, we have savings of \$32.9M. June projections were discussed with the expectation that savings would remain high through year-end, potentially \$45M. • We are meeting all SB208 ratios • We are meeting the defensive interval required in the DHB contract, however the MLR is currently below the 85% threshold (84.97%). Alliance is monitoring this ratio and expects to meet it through June 30, 2021. Alliance needs an additional \$150,000 in expenses through April to meet 85%. 		
4. FY21 Budget Amendment 2	<p>Ms. Pacholke went over the FY21 budget amendment 2. A motion was made by Mr. Jackson and seconded by Mr. Hancock to recommend the Board approve the FY21 Amendment 2 to increase the budget by \$515,000 bringing the total FY21 budget to \$693,313,739.</p>		
5. FY22 Recommended Budget for Approval	<p>Ms. Pacholke went over the FY22 recommended budget for approval presentation. The FY22 recommended budget for approval increased by \$839,113 compared to the FY22 recommended budget presented May 6, 2021. The changes were discussed. A motion was made by Mr. Jackson and seconded by Mr. Hancock to recommend the Board approve the FY22 budget for \$573,948,623.</p>		
6. Deputy Finance Officer	<p>A motion was made by Mr. Jackson and seconded by Mr. Hancock to recommend the Board appoint Ashley Snyder as the Deputy Finance Officer under G.S. 159-24 replacing the current Deputy Finance Officer, Jeff Wright.</p>		

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date; minutes approved on [Click or tap to enter a date..](#)

Thursday, June 03, 2021

BOARD FINANCE COMMITTEE - REGULAR MEETING
 5200 W. Paramount Parkway, Morrisville, NC 27560
 Virtual Meeting via videoconference - 2:30-4:00 p.m.

AGENDA ITEMS:	DISCUSSION:	NEXT STEPS:	TIME FRAME:
7. FY22 Single Stream Allocation	a. Ms. Goodfellow presented that the State has shared potential FY22 Single Stream allocations. Alliance’s allocation is anticipated to be reduced by \$3.2M. After discussion on the impact of the allocation reduction, a motion was made by Mr. Jackson and seconded by Mr. Hancock to authorize the CEO to draft a letter for the Board Chairperson to sign and send to DHHS address the reduced allocations: <ul style="list-style-type: none"> • Requesting DHHS to reconsider its proposed FY22 Single Stream Funding allocations. • Expressing disappointment that DHHS’ proposed FY22 SSF allocations again disregard the legislative requirement that LME/MCOs are required to continue offering the same level of state-funded services as 2015, forcing Alliance and other LME/MCOs to deficit spend. • Recommending that DHHS fund each LME/MCO to at least its respective 2015 Service Level Requirements, so state-funded service cutbacks can be avoided, and any remaining Single Stream Funds could then be distributed in the most effective manner across North Carolina. • Requesting a meeting with applicable DHHS leader to discuss this matter. 		
8. LGERS Letter	Ms. Pacholke shared a letter received from the NC Department of State Treasurer detailing employees from Alliance Health that are likely to require an additional employer contribution should they elect to retire in the following 12 months. This letter is required to be shared with the CEO and Board.		

9. **ADJOURNMENT:** the meeting adjourned at 3:20 PM; the next meeting will be August 5, 2021, from 3:00 p.m. to 4:00 p.m.

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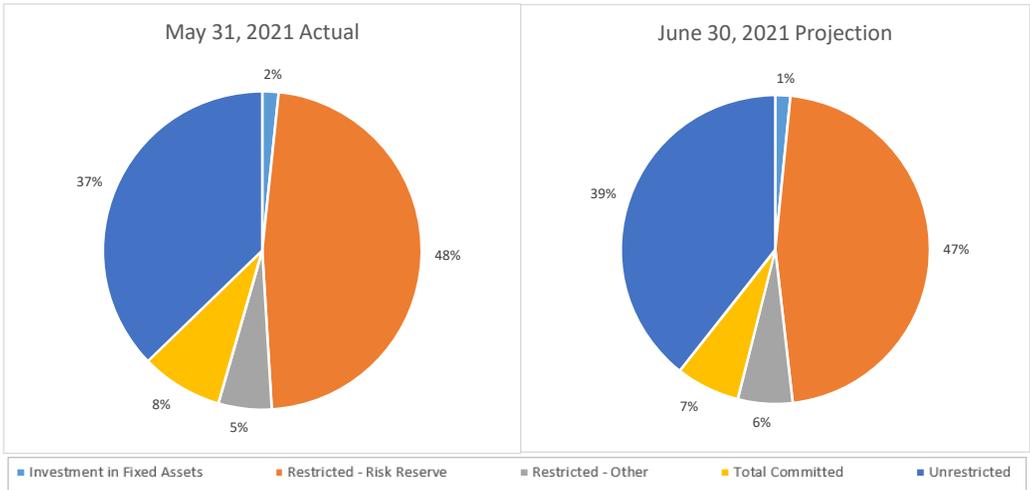


Summary of Savings/(Loss) by Funding Source as of May 31, 2021

	Revenue	Expense	Savings/(Loss)	Projection for June 30, 2021
Medicaid Waiver Services	\$ 422,375,698	\$ 390,890,652	\$ 31,485,046	\$ 24,845,995
Medicaid Waiver Risk Reserve	9,964,270	-	9,964,270	10,884,520
Federal Grants & State Funds	67,474,820	67,480,183	(5,363)	-
Local Funds	25,029,396	25,029,396	-	580,279
Administrative	63,233,567	66,504,063	(3,270,496)	6,332,170
Total	\$ 588,077,751	\$ 549,904,293	\$ 38,173,457	\$ 42,642,964
Committed				
Intergovernmental Transfers			(2,744,915)	(2,994,453)
Reinvestments-Service			(1,590,786)	(2,831,110)
Reinvestments-Administrative			(6,155,935)	(6,786,131)
Total Committed			(10,491,635)	(12,611,695)
Restricted				
			7,799,395	9,423,115
Unrestricted				
			40,865,698	45,831,544
Total Fund Balance Change			\$ 38,173,458	\$ 42,642,964

Fund Balance

	June 30, 2020	Change	May 31, 2021	Projection for June 30, 2021
Investment in Fixed Assets	4,846,758	(2,394,683)	2,452,076	2,407,362
Restricted - Risk Reserve	60,923,872	9,964,270	70,888,142	71,808,392
Restricted - Other				
State Statutes	4,017,894	-	4,017,894	4,017,894
Prepays	873,407	229,808	1,103,215	1,279,798
Cumberland	2,966,038	-	2,966,038	3,035,100
Durham	-	-	-	502,539
Restricted - Other	7,857,339	229,808	8,087,147	8,835,331
Committed				
Intergovernmental Transfer	3,007,817	(2,744,915)	262,902	13,364
Reinvestments-Service	7,702,135	(1,590,786)	6,111,349	4,871,025
Reinvestments-Administrative	12,192,000	(6,155,935)	6,036,065	5,405,869
Total Committed	22,901,952	(10,491,635)	12,410,317	10,290,257
Unrestricted	14,819,001	40,865,698	55,684,700	60,650,545
Total Fund Balance	\$ 111,348,923	\$ 38,173,458	\$ 149,522,381	153,991,886



A FY21 Committed Reinvestment Plan

	Committed Funds FY21	Spent May 31, 2021	Projection June 30, 2021
General Expenses	\$ 500,000	-	\$ 402,000
Child Facility Based Crisis Center	\$ 7,202,135	\$ 1,590,786	\$ 2,429,110
Subtotal	\$ 7,702,135	\$ 1,590,786	\$ 2,831,110
Total - Services	\$ 7,702,135	\$ 1,590,786	\$ 2,831,110
Administration			
Tailored Plan planning and implementation	\$ 12,192,000	\$ 6,155,935	\$ 6,786,131
Total - Administrative	\$ 12,192,000	\$ 6,155,935	\$ 6,786,131
Total Service and Administration	\$ 19,894,135	\$ 7,746,720	\$ 9,617,242

B Key Assumptions

- 1) Restricted - Other State Statutes - is the amount as of June 30, 2020. This will change once fiscal year 21 is closed.
- 2) The savings related to Medicaid Waiver Services is based on the average of year to date revenues vs. expenses.
- 3) Tailor plan spending projections are based on current spend and discussions with Department Heads
- 4) Projections are based on currently available information and therefore are subject to change.

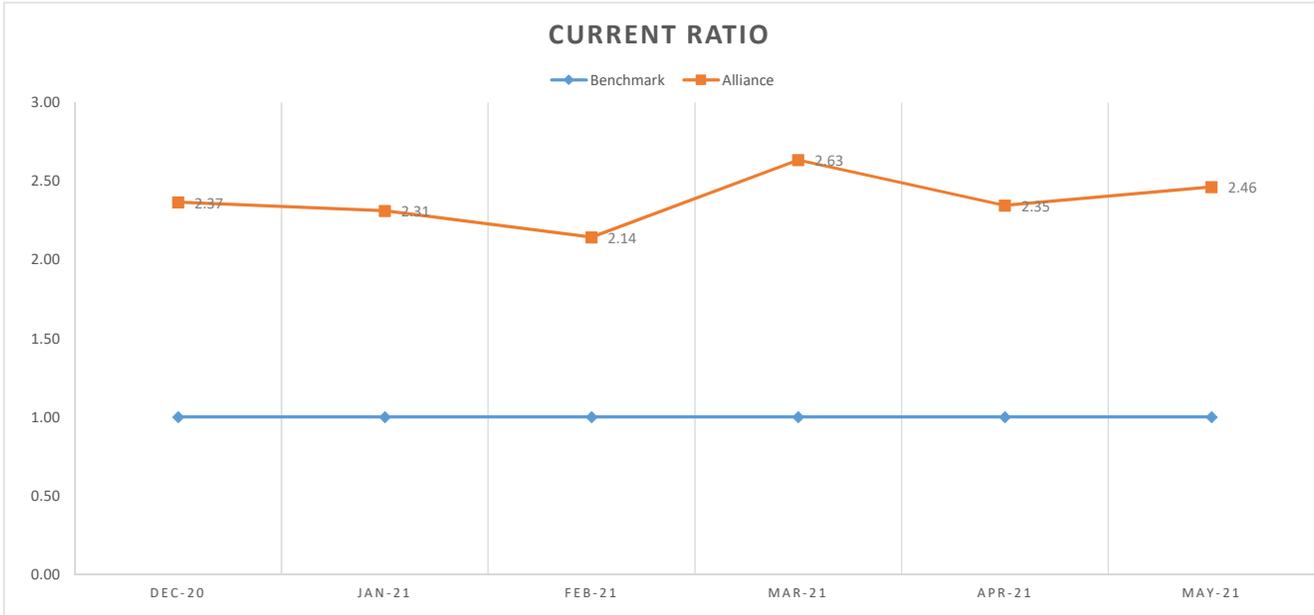


Statement of Revenue and Expenses (Budget and Actual) - As of May 31, 2021

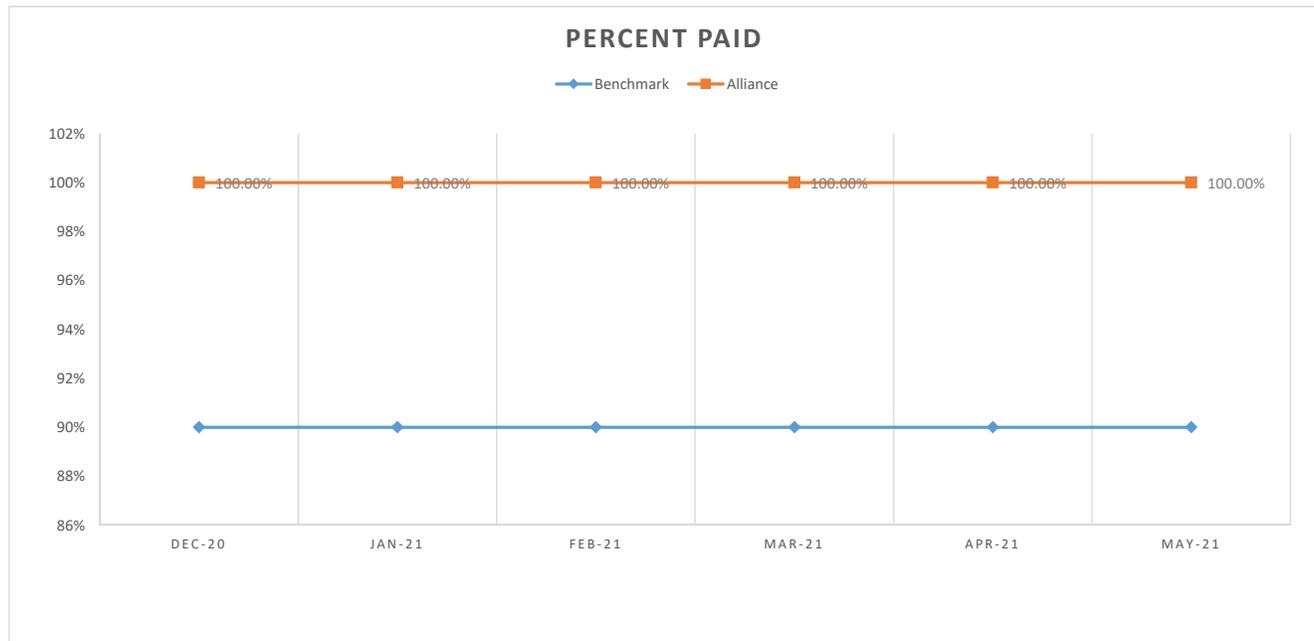
	Budget	Current Period	Year to Date	Balance	% Received/ Expended
REVENUES					
Local Grants	\$38,237,642	\$4,204,564	\$25,029,396	\$13,208,246	65.46%
State & Federal Grants	\$78,733,762	\$4,792,666	\$67,474,820	\$11,258,942	85.70%
Medicaid Waiver Services	\$505,375,375	\$40,307,109	\$432,339,968	\$73,035,407	85.55%
Total Revenue	<u>\$622,346,779</u>	<u>\$49,304,338</u>	<u>\$524,844,183</u>	<u>\$97,502,596</u>	84.33%
Administrative					
Local Administration	\$382,104	\$31,843	\$350,269	\$31,835	91.67%
LME Administrative Grant	\$4,359,385	\$363,282	\$3,996,105	\$363,280	91.67%
Medicaid Waiver Administration	\$65,725,471	\$5,500,363	\$58,836,262	\$6,889,209	89.52%
Miscellaneous Revenue	\$500,000	(\$29,493)	\$50,931	\$449,069	10.19%
Total Administrative Revenue	<u>\$70,966,960</u>	<u>\$5,865,995</u>	<u>\$63,233,567</u>	<u>\$7,733,393</u>	89.10%
Total Revenues	<u>\$693,313,739</u>	<u>\$55,170,333</u>	<u>\$588,077,751</u>	<u>\$105,235,988</u>	84.82%
EXPENSES					
Local Services	\$38,737,642	\$4,204,564	\$25,029,396	\$13,708,246	64.61%
State & Federal Services	\$78,733,762	\$4,659,002	\$67,480,183	\$11,253,579	85.71%
Medicaid Waiver Services	\$489,688,922	\$34,633,353	\$390,890,652	\$98,798,270	79.82%
Total Service Expenses	<u>\$607,160,326</u>	<u>\$43,496,920</u>	<u>\$483,400,230</u>	<u>\$123,760,096</u>	79.62%
Administrative					
Operational	\$10,418,555	\$713,075	\$8,089,301	\$2,329,254	77.64%
Salaries, Benefits, and Fringe	\$65,062,413	\$4,951,052	\$50,516,549	\$14,545,864	77.64%
Professional Services	\$10,172,445	\$770,810	\$7,898,213	\$2,274,232	77.64%
Miscellaneous Expense	\$500,000	\$0	\$0	\$500,000	0.00%
Total Administrative Expenses	<u>\$86,153,413</u>	<u>\$6,434,937</u>	<u>\$66,504,063</u>	<u>\$19,649,350</u>	77.19%
Total Expenses	<u>\$693,313,739</u>	<u>\$49,931,857</u>	<u>\$549,904,293</u>	<u>\$143,409,446</u>	79.32%
CHANGE IN NET POSITION		\$5,238,476	\$38,173,457		



Senate Bill 208 Ratios - As of May 31, 2021



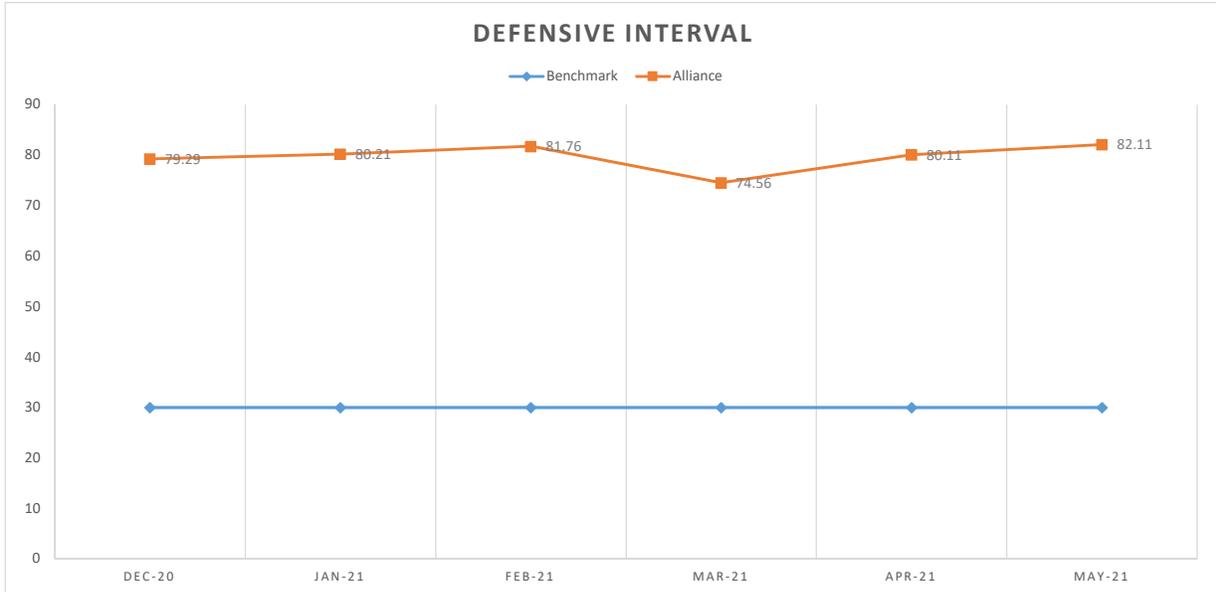
Current Ratio = Compares current assets to current liabilities. Liquidity ratio that measures an organization's ability to pay short term obligations. The requirement is 1.0 or greater.



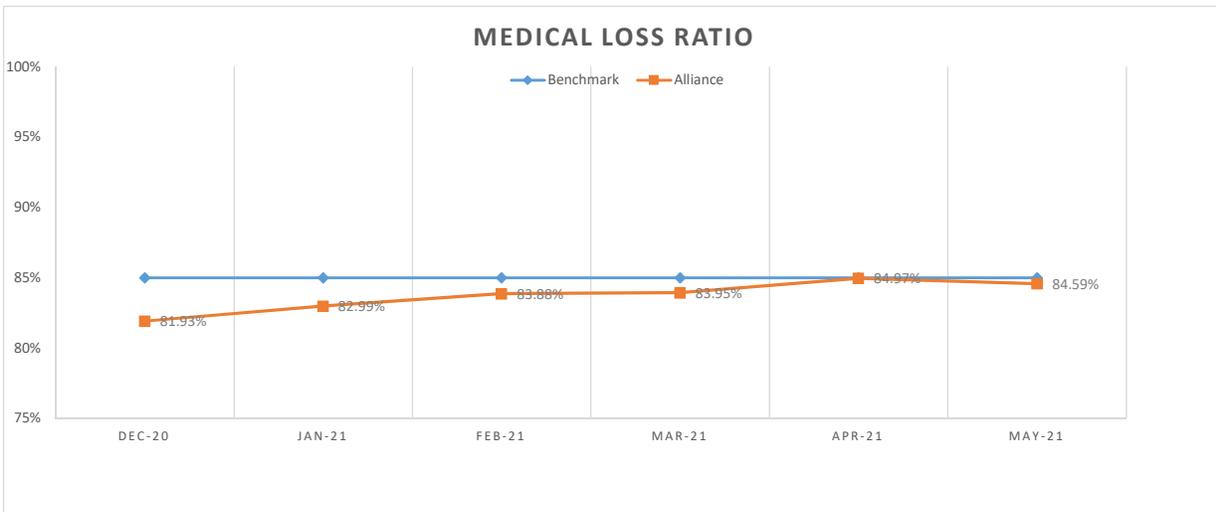
Percent Paid = Percent of clean claims paid within 30 days of receiving. The requirement is 90% or greater.



Division of Health Benefits Ratios - As of May 31, 2021



Defensive Interval = Cash + Current Investments divided by average daily operating expenses. This ratio shows how many days the organization can continue to pay expenses if no additional cash comes in. The requirement is 30 days or greater.



Medical Loss Ratio (MLR) = Total Services Expenses plus Administrative Expenses that go towards directly improving health outcomes divided by Total Medicaid Revenue. The requirement is 85% or greater cumulative for the rating period (7/1/20-6/30/21).



**Alliance Behavioral Healthcare
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Annual Compliance Report

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Alliance compliance program is designed to deter and mitigate risk to the organization through prevention, detection and remediation activities. It is intended that the scope of all compliance activities promotes integrity, ensures objectivity, fosters trust and supports the stated values of Alliance. In accordance with contractual obligations and federal regulations, Alliance shall have an effective compliance program with reasonable oversight by the governing board; understanding the scope and operations of the compliance program. The Board approved Corporate Compliance Plan states that a report of compliance efforts will be presented annually to the Alliance Health Board of Directors.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): David Curro, Audit and Compliance Committee Chair; Monica Portugal, Chief Compliance Officer

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**Alliance Health
BOARD OF DIRECTORS
Agenda Action Form**

ITEM: Strategic Plan Update

DATE OF BOARD MEETING: August 5, 2021

BACKGROUND: The Alliance Health strategic plan needs to be updated for a new period. Alliance has a recommendation for an accelerated process that will meet the spirit and intent of the Board policy while focusing on our efforts on growth opportunities and implementation of the Tailored Plan.

REQUEST FOR AREA BOARD ACTION: Accept the presentation.

CEO RECOMMENDATION: Accept the presentation.

RESOURCE PERSON(S): Robert Robinson, CEO; Kelly Goodfellow, Executive Vice-President/Chief Finance Officer

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