MEMBERS PRESENT: ☒Glenn Adams, Cumberland County Commissioner, JD, ☒Jennifer Anderson, MHSA, ☐Tony Braswell, Johnston County Commissioner, ☒Heidi Carter, Durham County Commissioner, MPH, MS, ☐David Curro, BS, ☒Angela Diaz, MBA, ☐Greg Ford, Wake County Commissioner, MA, ☒Lodies Gloston, MA, ☒David Hancock, MBA, MPAff, ☒Duane Holder, MPA, ☐D. Lee Jackson, BA, ☐Donald McDonald, MSW, ☒Lynne Nelson, Vice-Chair, BS, ☒Gino Pazzaglini, Board Chair, MSW LFACHE, ☒Pam Silberman, JD, DrPH, ☒McKinley Wooten, Jr., JD; ☐(vacancy representing Cumberland County); ☐(vacancy representing Durham County); ☐(vacancy representing Durham County); and ☐(vacancy representing Wake County)

GUEST(S) PRESENT: Denise Foremen, Wake County Manager’s office; Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Developmental Disabilities and Substance Abuse Services); and Mary Hutchings, Wake County Finance Department

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications and Marketing Specialist II; Lisa Brockmeier, Communications and Marketing Specialist II; Joey Dorsett, Senior Vice-President/Chief Information Officer; Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Kelly Goodfellow, Executive Vice-President/Chief Finance Officer; Veronica Ingram, Executive Assistant II; Mehul Mankad, Chief Medical Officer; Jennifer Meade, 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; Tammy Thomas, Senior Director of Project Portfolio Management; Carol Wolff, General Counsel; and Doug Wright, Director of Community and Member Engagement

1. CALL TO ORDER: Chair Gino Pazzaglini called the meeting to order at 4:02 p.m.

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<tr>
<th>AGENDA ITEMS:</th>
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<tr>
<td>2. Agenda Adjustments</td>
<td>There were no agenda adjustments.</td>
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<td>3. Public Comment</td>
<td>There were no public comments.</td>
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<td>4. Chair’s Report</td>
<td>Chair Pazzaglini expressed gratitude to FY (fiscal year) 2020-2021 Alliance Board Committee Chairs: David Curro (Audit and Compliance Committee Chair), David Hancock (Finance Committee Chair), Angela Diaz (Human Rights Committee Chair), Donald McDonald (Network Development and Services Committee Chair), Lodies Gloston (Policy Committee Chair), and Pam Silberman (Quality Management Committee Chair). Also, Chair Pazzaglini announced Carol Council’s appointment to Alliance’s Board representing Durham County and pending approval from Cumberland County for the recommended applicant, Dr. John Lesica; there are two remaining vacancies: one representing Durham County and one representing Wake County</td>
</tr>
<tr>
<td>5. CEO’s Report</td>
<td>Mr. Robinson mentioned the i2i conference (December 2-4, 2020), which is virtual this year. He advised Board members to contact Veronica Ingram, Executive Assistant, to register. Mr. Robinson introduced Brian Perkins, Senior Vice-President/Strategy and Government Relations. Mr. Perkins reviewed recent communication with the NC General Assembly regarding efforts made by NC MCOs to meet member and provider needs during COVID-19; this included how CARES funding is being used.</td>
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<td>AGENDA ITEMS:</td>
<td>DISCUSSION:</td>
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</table>
| 6. Consent Agenda | A. Draft Minutes from September 3, 2020, Board Meeting – page 4  
B. Audit and Compliance Committee Report – page 8  
C. Network Development and Services Committee Report – page 10  
D. Quality Management Committee Report – page 12  
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.  
**BOARD ACTION**  
A motion was made by Mr. Wooten to adopt the consent agenda; motion seconded by Mr. Curro. Motion passed unanimously. |
| 7. Committee Reports | A. Consumer and Family Advisory Committee – page 16  
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 included draft minutes from the Steering, Durham and Wake Committee meetings.  
Doug Wright, Director of Community and Member Engagement, presented the report. Mr. Wright shared that each CFAC committee meeting included checking-in with members, and that one member was deceased due to COVID-19. He also shared that September was recovery month and that the direct support professional initiative is progressing across NC (to ensure sustainable pay for this service and access to this service). Mr. Wright stated that CFAC committees reviewed their charters and revised them to include TBI (traumatic brain injury) representation; committees are developing goals for the remainder of the fiscal year (through June 30, 2021). The CFAC report is attached to and made part of these minutes.  
**BOARD ACTION**  
The Board received the report.  
B. Finance Committee – page 54  
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 2:30/3:00 p.m. prior to the regular Board meeting. This month’s report included draft minutes from the September 3, 2020, meeting, the Summary of Savings/(Loss) by Funding Source, ratios for the period ending August 31, 2020, recommendations to the Board to approve all presented contracts over $500,000, and any other applicable Finance Committee topics.  
David Hancock, Committee Chair, presented the report. Mr. Hancock noted that revenue exceeded expenditures and all contractual ratios were met except for the MLR (medical loss ratio), which was impacted by receipt of COVID funds. Sara Pacholke, Senior Vice-President/Financial Operations, reviewed plans to meet the MLR and background on requested financial commitments. The Finance Committee report is attached to and made part of these minutes.  
**BOARD ACTION**  
A motion was made by Mr. Hancock to approve the one-year reinvestment plan of $12,692,000 and commit $15,699,817 as of June 30, 2020, which includes $3,007,817 for the required intergovernmental transfer (one year) and $12,692,000 for the reinvestment (one year).
### AGENDA ITEMS: DISCUSSION:

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<th>AGENDA ITEMS</th>
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<td>year); motion seconded by Ms. Gloston. Motion passed unanimously.</td>
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<td>A motion was made by Mr. Hancock to authorize the CEO to enter into a contract with Blaze Advisors for the development, implementation, and initial management of a behavioral health accountable care network in Cumberland County for an amount not to exceed $698,700; motion seconded by Mr. Wooten. Motion passed unanimously.</td>
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<td>C. Executive Committee Report – page 64</td>
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<td>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 included draft minutes from the September 21, 2020, meeting.</td>
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<td>Chair Pazzaglini reviewed progress with sale of the property at 3309 Durham Drive in Raleigh; he reminded the Board that at the August 6, 2020, Board meeting, the Board voted to authorize the Executive Committee to take further action to sell this property in the event the current sale did not close, which it did not. At the September 21, 2020, meeting, the Committee voted to accept an offer from North Street Investments, LLC for $1,680,000 and authorized the CEO to execute the purchase agreement and closing documents.</td>
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<td>BOARD ACTION</td>
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<td>The Board received the report.</td>
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<td>8. Closed Session(s)</td>
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<td>BOARD ACTION</td>
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<td>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 Mr. Curro. Motion passed unanimously.</td>
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<td>9. Reconvene Open Session</td>
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<td>The Board returned to open session.</td>
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<td>10. Special Update/ Presentation: Bridge Housing Program – page 66</td>
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<td>Alliance entered into a partnership to operate eight units as bridge housing at the Carolina Duke Inn located in Durham. Ann Oshel, Senior Vice-President/Community Health and Well-Being, provided an overview of the bridge housing program. The program provides safe and temporary (three to five months) housing for persons exiting homelessness; this includes support services with the goal to secure permanent supportive housing. Ms. Oshel reviewed additional community living options. The presentation is saved as part of the Board’s files.</td>
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<td>BOARD ACTION</td>
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<td>The Board accepted the training/presentation.</td>
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<td>11. Adjournment</td>
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<td>All business was completed; the meeting adjourned at 5:49 p.m.</td>
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**Next Board Meeting**  
**Thursday, November 05, 2020**  
**4:00 – 6:00 pm**  
Minutes approved by Board on November 5, 2020.
ITEM: Draft Minutes from the September 3, 2020, Board Meeting

DATE OF BOARD MEETING: October 1, 2020

REQUEST FOR AREA BOARD ACTION: Approve the draft minutes from the September 3, 2020, meeting.

CEO RECOMMENDATION: Approve the draft minutes from the September 3, 2020, meeting.

RESOURCE PERSON(S): Gino Pazzaglini, Board Chair; Robert Robinson, CEO
MEMBERS PRESENT: ☒Glenn Adams, Cumberland County Commissioner, JD, ☒Jennifer Anderson, MHSA, ☐Tony Braswell, Johnston County Commissioner, ☒Heidi Carter, Durham County Commissioner, MPH, MS, ☐David Curro, BS, ☐Angela Diaz, MBA, ☒Greg Ford, Wake County Commissioner, MA, ☒Lodies Gloston, MA, ☒David Hancock, MBA, MPAff, ☒Duane Holder, MPA, ☒D. Lee Jackson, BA, ☐Donald McDonald, MSW, ☒Lynne Nelson, Vice-Chair, BS, ☒Gino Pazzaglini, Board Chair, MSW LFACHE, ☒Pam Silberman, JD, DrPH, ☒McKinley Wooten, Jr., JD; ☐(vacancy representing Cumberland County); ☐(vacancy representing Durham County); ☐(vacancy representing Durham County); and ☐(vacancy representing Wake County)

GUEST(S) PRESENT: Denise Foremen, Wake County Manager’s office; Yvonne French, NC DHHS/DMH (Department of Health and Human Services/Division of Mental Health, Developmental Disabilities and Substance Abuse Services); Mary Hutchings, Wake County Finance Department; and Jason Phipps, Alliance CFAC

ALLIANCE STAFF PRESENT: Brandon Alexander, Communications Marketing Specialist II; Michael Bollini, Executive Vice-President/Chief Operating Officer; Joey Dorsett, Senior Vice-President/Chief Information Officer; Doug Fuller, Director of Communications; Kelly Goodfellow, Executive Vice-President/Chief Financial Officer; Cheala Garland-Downey, Executive Vice-President/Chief Human Resources Officer; Veronica Ingram, Executive Assistant II; 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, CEO; Sean Schreiber, Executive Vice-President/Network and Community Health; 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: Vice-Chair Gino Pazzaglini called the meeting to order at 4:01 p.m.

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<td>2. Agenda Adjustments</td>
<td>Chair Pazzaglini reviewed a requested adjustment to the agenda, which is to remove Finance Committee report from the consent agenda, in order to present a contract for approval and allow time for discussion.</td>
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<td><strong>BOARD ACTION</strong></td>
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<td>A motion was made by Commissioner Adams to approve the amended agenda; motion seconded by Mr. Holder. Motion passed unanimously.</td>
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<td>3. Public Comment</td>
<td>There were no public comments.</td>
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<td>4. Chair’s Report</td>
<td>Chair Pazzaglini reported the following:</td>
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<td>A. Appointment Recommendation and Vacancy Update: Chair Pazzaglini reviewed a recent interview for a vacant seat on Alliance’s Board representing Durham County.</td>
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<td><strong>BOARD ACTION</strong></td>
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<td>A motion was made by Dr. Silberman to forward Carol Council’s application to the Durham Commissioners and request her appointment to Alliance’s Board; motion seconded by Mr. Hancock. Motion passed unanimously.</td>
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## AGENDA ITEMS:

### DISCUSSION:

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<thead>
<tr>
<th>5. CEO’s Report</th>
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<tr>
<td><strong>B.</strong> Acknowledgements: Chair Pazzaglini acknowledged staff for a seamless transition to working during the COVID-19 pandemic. Commissioner Adams also acknowledged the multiple efforts of Alliance staff to meet the needs its members. Mr. Robinson expressed appreciation for NC DHHS and Alliance providers to facilitate continued services to Alliance members.</td>
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<tr>
<th>6. Consent Agenda</th>
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<tr>
<td><strong>A.</strong> Draft Minutes from August 6, 2020, Board Meeting – page 3</td>
</tr>
<tr>
<td><strong>B.</strong> By-Laws/Policy Committee Report – page 8</td>
</tr>
<tr>
<td><strong>C.</strong> Executive Committee Report – page 24</td>
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</table>

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.

### BOARD ACTION

A motion was made by Ms. Gloston to approve the amended consent agenda; motion seconded by Vice-Chair Nelson. Motion passed unanimously.

<table>
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<tr>
<th>7. Items Pulled from the Consent Agenda</th>
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<tr>
<td><strong>Finance Committee Report – page 26</strong></td>
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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 included the draft minutes from the August 6, 2020, meeting, the Summary of Savings/(Loss) by Funding Source and ratios for the period ending July 31, 2020, recommendations to the Board to approve all presented contracts over $500,000, and any other applicable Finance Committee topics.

David Hancock, Committee Chair, presented the report. Mr. Hancock addressed a question by Dr. Silberman regarding the MLR (Medicaid loss ratio) and the agency not meeting this ratio for the first month of the fiscal year; if not met two consecutive months, it would necessitate a corrective action plan per the Medicaid contract. Mr. Hancock also reviewed a request to increase a current contract; the Finance Committee reviewed and recommended this for Board approval. The Finance Committee report is attached to and made part of these minutes.

### BOARD ACTION

A motion was made by Vice-Chair Nelson to authorize the CEO to increase the existing contract with Milliman, Inc. to $750,000 to add financial consulting services; motion seconded by Dr. Silberman. Motion passed unanimously.

A motion was made by Commissioner Adams to approve the Finance Committee minutes; motion seconded by Ms. Gloston. Motion passed unanimously.
8. Committee Reports

A. Consumer and Family Advisory Committee – page 34

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 included draft minutes from the August Steering, Durham, Wake, and Johnston Committee meetings.

Jason Phipps, CFAC Chair, presented the report. Mr. Phipps provided an update from recent CFAC meetings, including staff attendance at these meetings and updates specific to each subcommittee; he reminded Board members that detailed information was included in the minutes, which were sent previously to the Board. The CFAC report is attached to and made part of these minutes.

**BOARD ACTION**
The Board received the report.

9. Closed Session(s)

**BOARD ACTION**
A motion was made by Commissioner Ford to enter closed session pursuant to NC General Statute 143-318.11 (a) (1), (a) (3), and (a) (6) to prevent the disclosure of information that is confidential and not a public record under NCGS 122C:126.1, to consult with or give instructions to an attorney in order to preserve the attorney-client privilege, and to consider the qualifications, competence, and performance of an employee; motion seconded by Vice-Chair Nelson. Motion passed unanimously.

10. Reconvene Open Session

The Board returned to open session.

11. Adjournment

All business was completed; the meeting adjourned at 5:57 p.m.

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**Next Board Meeting**
Thursday, October 01, 2020
4:00 – 6:00 pm

Minutes approved by Board on [Click or tap to enter a date]..
ITEM:  Audit and Compliance Committee Report

DATE OF BOARD MEETING:  October 1, 2020

BACKGROUND:  The purpose of the Audit and Compliance Committee is to put forth a meaningful effort to review the adequacy of existing compliance systems and functions and to assist the Board in fulfilling its oversight responsibilities.

This report includes minutes from the August meeting.

REQUEST FOR BOARD ACTION:  Accept the report.

CEO RECOMMENDATION:  Accept the report.

RESOURCE PERSON(S):  David Curro, Committee Chair; Monica Portugal, Chief Compliance Officer
1. WELCOME AND INTRODUCTIONS – the meeting was called to order by Jennifer Anderson at 4:07 pm

2. REVIEW OF THE MINUTES – The minutes from the May 27, 2020 meeting were reviewed; a motion was made by Ms. Gloston and seconded by Mr. Holder to approve the minutes. Motion passed unanimously.

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<th>AGENDA ITEMS:</th>
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<td>4. Internal Audits &amp; Monitoring</td>
<td>A. Administrative Contract Audit: Portugal reported that Internal Audit and management is in communication regarding the effectiveness of the implemented plan and the resolution will be reported at the next meeting.</td>
<td>Results will be reported at the next meeting</td>
<td>11/25/2020</td>
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<td>B. Compliance Audits: Portugal reviewed scope, methodology and results of several compliance audits in the areas of privacy/security, exclusions and a vendor audit. One audit resulted in a remediation plan and one with recommendations.</td>
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<td>5. Quarterly Reports</td>
<td>Committee reviewed the quarterly reports for FY20, including Network Compliance, Program Integrity, Corporate Compliance, Security Awareness, and HIPAA Incidents and Complaints. Committee asked questions about changes in operations during COVID-19, particularly telecommuting, special investigations and provider actions.</td>
<td>N/A</td>
<td>N/A</td>
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12. ADJOURNMENT: the meeting adjourned at 5:01 pm; the next meeting will be November 25, 2020, from 4:00 p.m. to 5:30 p.m.
ITEM: Network Development and Services Committee Report

DATE OF BOARD MEETING: October 1, 2020

BACKGROUND: The committee reviews progress on the agency's network development plan and progress on service development. The committee reports to the Board and provides guidance and feedback on development of the needs and gaps assessment to meet state and agency requirements.

This report includes draft minutes from the September 9, 2020, meeting.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Donald McDonald, Committee Chair; Sean Schreiber, Executive Vice-President/Network and Community Health
### Agenda Items:

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<th>Agenda Items</th>
<th>Discussion</th>
<th>Next Steps</th>
<th>Time Frame</th>
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</table>
| 3. CONVERT Overview and Update (Carlyle Johnson) | Presentation on WakeMed/Alliance pilot to improve early identification and referral of individuals at risk for Opioid Use Disorders and overdose  
- Project overview  
- Initial data review  
- Feedback on future direction provided by Committee members | Will provide an update on progress at November meeting | November 11, 2020 |
| 4. Physical Health Network Recruiting Discussion and Update (Sean Schreiber) | Presentation on Physical Health Recruiting Plan  
- Strategy overview  
- Recruiting target overview and timelines  
- Adequacy standards  
- High volume practice overview  
- Discussion and feedback | Send Committee recruiting deck (Alliance provider recruiting pitch) to committee and recruiting target list | September 26, 2020 |
| 5. COVID Service Update (Sean Schreiber) | Shared highlights from COVID dashboard reflecting service access and utilization trends | On-going | |
| 6. Next Meeting | | November 11, 2020 | |
| 7. Adjournment | | 5:15pm | |
ITEM: Quality Management Committee Report

DATE OF BOARD MEETING: October 1, 2020

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 Director of Quality Management
This meeting was held virtually, via Zoom

APPOINTED MEMBERS PRESENT: ☐ David Curro, BS (Board member); ☐ David Hancock, MBA, MPAff (Board member); ☐ Angela Diaz (Board Member) ☒ Duane Holder, MPA (Board member); ☒ Pam Silberman, JD, DrPH (Board member; Committee Chair) by phone; ☒ Israel Pattison (CFAC); ☒ Gino Pazzaglini (Board Chair)

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

BOARD MEMBERS PRESENT:

STAFF PRESENT: Michael Bollini, Chief Operating Officer; Diane Fening, Executive Assistant I; Tia Grant, QI Manager; Wes Knepper, Quality Management Director; Mehul Mankad, Chief Medical Officer; Doug Wright, Director of Community and Member Engagement

1. WELCOME AND INTRODUCTIONS – the meeting was called to order at 1:00 pm.

2. REVIEW OF THE MINUTES – The minutes from the June 4, 2020, and August 6, 2020 meeting were reviewed. Israel moves to approve, Gino seconded. For August, in the first paragraph, under membership appointment, change Diane, David and Israel, to Diane, Dava and Israel. In June 4, page 4, a bullet point appears to be in the wrong spot.

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| 3. OLD BUSINESS | • QIP Recommended for Closure - one of the QIPs that we are asking for closure is TCLI IPS/SE. We have hit the benchmark. Duane made a motion to support closing this QIP and Israel seconded; the motion passed.  
• Adverse letter QIP – when Utilization Management makes an adverse decisions (anything but fully approving it), we send out adverse letters. There are many details that we have to get right. If one detail is missed, the letter is not good by our standards. We have made many changes and things are going very well. Israel moved to close this QIP, Duane seconded and the motion passed. | TCLI IPS/SE – Transition to Community Living Initiative referred for Individual Placement Supports/Supported Employment  
QIP-Quality Management Plan | |
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| **4. NEW BUSINESS** | • **New TCLI QIP Proposal** - we are contractually required to have a TCLI QIP. When we close one, we need to open one. Working with the TCLI team, we decided that the next QIP would be to improve In-Reach contact rates. Historically we have not been very consistent with this. We are required to have timely contact (documented contact within the previous 90 days) with members receiving In-Reach. It could be an in-person contact, by letter or phone call, based on member preference. We want to develop a system that is timely. Gino moved to accept the QIP, Duane seconded the motion; the motion passed.  
• **QM Eval, Program Description and Work Plan** – these have been discussed at the last two meetings and Wes has incorporated many suggestions. Duane motioned to approve all three with the changes made to the work plan. Israel seconded the motion; the motion passed. | • Wes will add the post-closure adverse letters and the post-closure TCLI-IPS/SE QIPs to the work plan. |  |
| **3. OLD BUSINESS** | • **Membership Appointment Terms and Limits** - Israel, Diane and Dava received notification about extending their tenure on the committee from 2 year to 3-year terms. All agreed. Going forward next year around this time, we will be doing a lot of recruitment. | • Pam will look into where our new CFAC member is in the onboarding process for this committee. | • **CFAC-Consumer and Family Advisory Committee**  
• By the next meeting, October 1 |
| **4. NEW BUSINESS** | • **QMC Charter and Required Updates** - this committee has a charter that was last revised August 2015 and needs to be updated. It is not lined up with our board by-laws. We can make some suggested edits, then bring it back to this committee next month for a vote. Committee members are urged to take a look and see if anything needs to be tweaked or clarified. The board will vote on our changes through a consent agenda.  
• Wes, Doug and Pam will be rewriting the charter, taking into account things that have been brought up in this committee (questions about CFAC and what we can and cannot do, and see if we can broaden the pool of who can | • Wes, Doug and Pam will rewrite the charter of the committee and will send it out to the committee in advance of the next meeting. | • Before 10/1/20 |
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</table>
|             | participate in this committee). They also will consider a general shift from members reviewing things to taking a more active role.  
• The State is not going to require us to complete the needs and gaps assessment. We will be doing a smaller, more nimble version of it and will bring the results to the committee. We will do the annual satisfaction report next month and April Parker will do the utilization review.  
• COVID-19 Update-Dr. Mehul gave a Covid-19 update. 125 vaccine candidates are in trials globally, and 25 have reached advanced stages. The Department of Public Health of NC has to write their vaccine distribution policy and get it to the CDC by October 1. About 40-50% of deaths have been in nursing homes and they will get vaccine first. The membership of Alliance will be in a lower pecking order. Congregate living facilities are also at the top of the list.  
• Israel brought up a concern about the benefits of telehealth in these Covid times and members who cannot utilize telehealth. Alliance funds providers to buy cell phones with data plans for members. We have also directed providers to share information with members about low cost or no cost internet providers. However, that doesn’t work if you are a person with moderate to severe IDD. The smart phone might sit in a drawer. Hopefully, those level IDD people would have caregivers who could help with smart phones. We’ve done a telehealth survey and we will share that with our providers. | Wes will share the results of our telehealth survey at the next meeting. | 10/1/20 |

5. **ADJOURNMENT:** the meeting adjourned at 1:54 pm; the next meeting will be October 1, 2020, from 1:00 p.m. to 2:30 p.m.
ITEM: Consumer and Family Advisory Committee (CFAC) Report

DATE OF BOARD MEETING: October 1, 2020

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. Sub-committee 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 you with the minutes to our 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.

REQUEST FOR BOARD ACTION: Please accept the draft minutes from our September 2 Steering Committee, the September 14 Durham, and the September 8 Wake Committee meetings along with the supporting documents. The Cumberland and Johnston County minutes were not yet available.

CEO RECOMMENDATION: Accept the report.

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

(Back to agenda)
1. WELCOME AND INTRODUCTIONS

2. REVIEW OF THE MINUTES – The minutes from the August 3, 2020, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Annette Smith and seconded by Vicky Bass to approve the minutes. Motion passed.

<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
<th>NEXT STEPS:</th>
<th>TIME FRAME:</th>
</tr>
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<tbody>
<tr>
<td>3. Public Comment</td>
<td>COVID-19 Check in – making sure everyone is doing okay.</td>
<td>Ongoing</td>
<td>N/A</td>
</tr>
<tr>
<td>Individual/Family Challenges</td>
<td>Vicky Bass stated that they had a long-term member from her organization pass away recently from COVID-19. The group offered support and discussed impacts that our communities are still facing.</td>
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<tr>
<td>and Solutions</td>
<td>Doug mentioned that Dave Curro had been injured in a motorcycle accident and is recovering at home. The group offered well wishes and a speedy recovery.</td>
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<td></td>
<td>Annette Smith gave an update on her groups progress on the DSP initiative, and asked Doug for a Durham County contact to assist in the processes.</td>
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<tr>
<td>4. State Updates</td>
<td>Stacy Harward, NCDHHS was in attendance for tonight’s meeting and went over the State updates:</td>
<td>Ongoing</td>
<td>N/A</td>
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</table>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.
CFAC MEETING - REGULAR MEETING  
5200 W. Paramount Parkway, Morrisville, NC 27560  
5:30 – 7:00 p.m.  
Virtual meeting via videoconference

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<tr>
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<tbody>
<tr>
<td></td>
<td>CE&amp;E September update was sent out today; all members should have received it in their email.</td>
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<td></td>
<td>Crisis update &amp; information has its own page on CE&amp;E</td>
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<td>Team trainings &amp; events are listed on the front of the page</td>
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<tr>
<td></td>
<td>A poll has been added to see what times people would like to have these trainings; the majority of the responses so far have been for morning sessions</td>
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<td>A poll for broadband Wi-Fi/internet access has been created in hopes to prove to lawmakers that internet access should be considered a utility-please encourage everyone to participate in the poll that needs internet</td>
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<td></td>
<td>NC CARES &amp; NC HEALERS -grant funded for support for workers and families during this unrestful time, has also added teachers and their families to the list of those supported</td>
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<td></td>
<td>Please check all LME/MCO websites during the month of September for specific trainings and webinars that are free-and take advantage of the opportunities</td>
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</tbody>
</table>
|               | SCOOP on Managing Stress: new initiative for self-care  
  - S-Stay connected to family & friends  
  - C-Compassion for yourself & others  
  - O-Observe your use of substances  
  - O-Ok to ask for help  
  - P-Physical activity to improve your mood |               |             |
|               | Town Hall meetings—Listening session and Q&A with Kody Kinsley and Victor Armstrong: September 27 from 6-730—invites will be sent out |               |             |

5. LME-MCO Updates  
Board Meeting – Thursday- Please let Doug or Jason Phipps know if you have any questions or comments.  
Ongoing  
N/A

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

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</table>

### 6. Advocacy Toolkit

Doug went over the LME/MCO updates—nothing really new to report on except the new COVID phase 2.5 announced from Governor Roy Cooper and Secretary Mandy Cohen:

Phase 2.5 means the following for North Carolina:

- Mass gathering limits will increase to 25 people indoors and 50 people outdoors from the current limit of 10 indoors and 25 outdoors.
- Playgrounds may open.
- Museums and aquariums may open at 50% capacity.
- Gyms and indoor exercise facilities, such as yoga studios, martial arts, and rock climbing, as well as skating rinks, bowling alleys, indoor basketball, volleyball etc., may open at 30% capacity.
- Bars, nightclubs, movie theaters, indoor entertainment facilities, amusement parks, dance halls will remain closed.
- Large venues remain subject to the mass gathering limits.

Presented to local committees to see if this is something they would find valuable and use. Next steps?

- Members agreed that the CFAC orientation package should be revised and additions should be made that are similar to the VAYA example. It was also requested that the topic of 6 unmet needs be added to an advocacy guideline within the orientation package.

**Discuss at local CFAC**

### 7. Local Committee Considerations

- TBI Representation: Recruitment should begin for a TBI representative for CFAC. It was also requested to begin the process of adding TBI to the MH/SA/IDD into the by-laws which will begin with the local CFAC charter.

**Discuss at local CFAC**

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**AGENDA ITEMS:**

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- A request has been suggested for additional funding for CFAC members to add new members. More will be discussed on this topic at a later TBD date. In addition, it was mentioned if members could be limited to stipend only @ 12, and add additional members without stipend, as well as waitlisted.

- Members who have not been active in the past 90 days: Each counties Member Engagement Specialist will review their current membership and compose a list of those who have not been actively engaged in the last 90 days and present during their local meetings for members to conduct outreach to these members and see if they are still interested in being a current member.

- New goals and task terms for the new year will be discussed at individual county CFAC meetings and reported back to the next Steering committee meeting in October.

8. Subcommittees
   - Wake
   - Durham
   - Cumberland
   - Johnston
   - Area Board
   - Human Rights

None

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

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</tr>
</thead>
<tbody>
<tr>
<td>Quality Management</td>
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</table>

9. Announcements

10. **ADJOURNMENT: 7pm:** The next meeting will be October 5, 2020, at 5:30 p.m.

Respectfully Submitted by:

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Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.
Get the #SCOOP! How are you managing your stress? The Division is here to help! Click on the image above or go to https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/hope4nc-and-hope4healers

To learn more about SCOOP. Here are some quick things you can do to manage your stress.

1. While watching your favorite tv program, use the commercial breaks as an opportunity to stretch and move your body.
2. Reset you’re your body by taking 3 deep breaths in to the count of seven.
3. Take 5 minute break to do a clean sweep of your area, get rid of unneeded papers and wipe down surface areas.
4. Spruce up your space with a house plant or some cut greenery from outside. Some grocery chains also offer discounted bouquets.

Share the #SCOOP on your social media! Use the hashtag (pound sign) #SCOOP when you share your stress management and self-care tips and photos.

The CE&E Team is collaborating across the service category teams and throughout DHHS to bring virtual trainings on SCOOP and how you can better manage your stress. Contact us at CEandE.Staff@dhhs.nc.gov and invite ask to “Get the #SCOOP” from the Division!

The CE&E Team continues to offer trainings to Local and State CFAC members, as well as to the community. We need your feedback on the days and times that work best for you. Please use this link for a quick poll! https://tinyurl.com/CEE-TeamPoll

Keep your eyes out for the CE&E Team Lunch & Learn Series, continuing in September.

ECAC Resources and Tools: https://www.ecac-parentcenter.org/all-resource-materials/
CASEL COVID Resources: https://casel.org/covid-resources/
MHA Back to School Kit: https://www.mhanational.org/back-school
Understood IEP Accommodations During Distance Learning
UNC School of Social Work Focus on Family & Disability

Look for a Social-Emotional Learning (SEL) Tip sheet in your inbox coming soon!

The Family Supports Community of Practice will continue to offer virtual trainings during the month of September to help families prepare. Reach out to Kate Barrow for more information.

Transitioning back to school looks a little different this academic year. Here are some helpful tools for you and your student(s).

ECAC Resources and Tools: https://www.ecac-parentcenter.org/all-resource-materials/
CASEL COVID Resources: https://casel.org/covid-resources/
MHA Back to School Kit: https://www.mhanational.org/back-school
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Opportunities for Input

Legislative Updates
Please review these pieces of legislation. You can contact your legislators by going to [https://www.ncleg.gov/](https://www.ncleg.gov/) to review legislative activities and to find your legislator.

<table>
<thead>
<tr>
<th>Bill Number</th>
<th>Bill Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>S808</td>
<td>Medicaid Funding Act</td>
</tr>
<tr>
<td>H488</td>
<td>Address Direct Service Personnel Staffing Crisis</td>
</tr>
<tr>
<td>S476</td>
<td>School-Based Mental Health</td>
</tr>
<tr>
<td>H1134</td>
<td>Housing &amp; Utility Assistance/COVID-19</td>
</tr>
<tr>
<td>H1135</td>
<td>Housing and Foreclosure Prevention Assistance</td>
</tr>
<tr>
<td>S742</td>
<td>Increase Veteran’s Access to Healthcare</td>
</tr>
<tr>
<td>H1149</td>
<td>Police Notice of Person w/IDD in Vehicle</td>
</tr>
<tr>
<td>H1037</td>
<td>COVID-19 Health Care Working Group</td>
</tr>
</tbody>
</table>

Olmstead Listening Sessions
Learn more about NC Olmstead and get information on the on-going listening sessions by clicking on the link: [https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/nc-olmstead](https://www.ncdhhs.gov/divisions/mental-health-developmental-disabilities-and-substance-abuse/nc-olmstead)

The Hope4NC Helpline (1-855-587-3463) connects all North Carolinians to additional mental health and resilience supports that help them cope and build resilience during times of crisis.

The Hope4Healers Helpline (919-226-2002) is statewide a partnership with the North Carolina Psychological Foundation, and provides mental health and resilience supports for:
- Health Care Professionals
- Emergency Medical Specialists
- First Responders
- Other Health Care Setting Staff
- Educators & School Staff

If you or your family members are experiencing stress from being on the front lines of the state’s COVID-19 response, contact the Hope4Healers line for free emotional support.

State CFAC
The State Consumer and Family Advisory Committee (CFAC) meeting is on the 2nd Wednesday of the Month from 9 am to 1 pm (COVID-19) and is open to the public. All State CFAC meetings will be held as webinars until further notice. The September 9th call-in and virtual meeting information will be sent out in a separate email. Contact Kate Barrow by email for more information. Join by web browser: [https://tinyurl.com/StateCFAC-0909](https://tinyurl.com/StateCFAC-0909)

Call-in: +1-415-655-0003
Access Code: 171 083 5283

State to Local Collaboration
The State to Local Collaboration Call has been moved to the 4th Wednesday of every 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. [https://tinyurl.com/S2LCollaborationCall](https://tinyurl.com/S2LCollaborationCall)

Call-in: +1-415-655-0003
Conference ID: 171 896 6313
“While suicide prevention is important to address year-round, Suicide Prevention Awareness Month provides a dedicated time to come together with collective passion and strength around a difficult topic. The truth is, we can all benefit from honest conversations about mental health conditions and suicide, because just one conversation can change a life.” (NAMI)

According to the CDC, suicide rates have increased by 30% since 1999. Nearly 45,000 lives were lost to suicide in 2016 alone. Comments or thoughts about suicide — also known as suicidal ideation — can begin small like, “I wish I wasn’t here” or “Nothing matters.” But over time, they can become more explicit and dangerous.

Here are some resources to use for raising awareness about Suicide Prevention in your community.

NAMI: This page will give you resources on learning the warning signs, risk factors and how to access support during a crisis. [https://www.nami.org/About-Mental-Illness/Common-with-Mental-Illness/Risk-of-Suicide](https://www.nami.org/About-Mental-Illness/Common-with-Mental-Illness/Risk-of-Suicide)

Suicide Prevention Resource Center: This link gives you some ideas for action during Suicide Prevention Month. [https://www.sprc.org/sites/default/files/Suicide%20Prevention%20Month%20Ideas%20for%20Action%202020%20.pdf](https://www.sprc.org/sites/default/files/Suicide%20Prevention%20Month%20Ideas%20for%20Action%202020%20.pdf)

If you or someone you know is in an emergency, call The National Suicide Prevention Lifeline at 800-273-TALK (8255) or call 911 immediately and ask for a CIT officer.

North Carolinians can also contact the Hope4NC Helpline 1-855-587-3463

Suicide Prevention Town Hall

Join the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services for the September Suicide Prevention Town Hall.

This event is open to the public; you do not need to have a Facebook account to view the live broadcast. Simply enter the website below and watch the live feed. A banner will appear asking you to “Log In” or “Create a New Account.” You do not need to do either of these to view the live stream of the town hall.

[https://www.facebook.com/Govinst/](https://www.facebook.com/Govinst/)

Wednesday, Sept 2, 2020 - 3:00pm

https://facebook.com/govinst/

Now in its 31st year, Recovery Month celebrates the gains made by those in recovery, just as we celebrate improvements made by those who are managing other health conditions such as hypertension, diabetes, asthma, and heart disease.

Each September, Recovery Month works to promote and support new evidence-based treatment and recovery practices, the emergence of a strong and proud recovery community, and the dedication of service providers and community members across the nation who make recovery in all its forms possible.

The theme for 2020 National Recovery Month is Join the Voices for Recovery: Celebrating Connections.

Visit [https://rm.facesandvoicesofrecovery.org/](https://rm.facesandvoicesofrecovery.org/) for more information and downloadable resources, including social media graphics.

MY5NC Challenge

Join a grassroots social connection campaign, as part of the I’m IN Community Inclusion initiative to help maintain a sense of connection to the larger community and help to frame thinking in a healthier way, so as to not experience social isolation.

The goal of the “MY5NC Challenge” is to contact 5 people, 3 or more times a week for one month. Please watch this 3 minute video spark for the “MY5NC Challenge” to learn more— and then connect!

[https://vimeo.com/447873973/16d0666fa2](https://vimeo.com/447873973/16d0666fa2)

Certified Peer Support Specialist

A public comment period is now underway regarding recommendations for the occupational regulation of peer support in North Carolina.

Key topics include: creation, powers, and duties of an independent certification oversight board; board membership and selection; procedures related to complaints, investigations, and disciplinary actions.

To review the Recommendations and participate in the public comment, please visit [https://pss.unc.edu/pss-commission/about](https://pss.unc.edu/pss-commission/about) by the closing date of September 25, 2020.
The Office of Rural Health is conducting a survey in the community to find out more about internet connection in North Carolina. You can help! Visit the website here for more information and an outreach guide to help you engage in your community.


Community Inclusion

Fundamental #6
Community Inclusion focuses on participation that occurs more like everyone else.

To the degree desired by the person, participation should be self-determined, in the community, and should maximize opportunities for interactions with the most diverse group of fellow citizens possible.

People with lived experience, be it with mental health, developmental disabilities, and/or substance use disorders should not have to carve out space in public environments and social spaces for themselves. People with the lived experiences and their friends and families can help promote community inclusion by continuing to have conversations and advocacy events, but can also call on fellow community members without a tie to MH/DD/SUD to join in making communities inclusive. Learn more by visiting the Temple University Collaborative. http://www.tucollaborative.org/community-inclusion-resources/

Veterans, Servicemembers & Families

Want to learn more about services for Veterans in North Carolina? Go to NC Governor’s Working Group 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.

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

Accessible Voting

Your vote is your voice. Taking part in the election process by registering and casting your vote is part of what it means to be included in civic life. People with the lived experience have the right to vote. You can cast your vote as part of what you do to use your voice. Here is some helpful information about accessible voting, with links to help get you prepared to register and know your rights when you go to vote.

https://disabilityrightscn.org/what-we-do/our-advocacy-work/voting

Dates to Remember
Deadline to Register: October 9th
Start of Early Voting: October 15th
End of Early Voting: October 31st

Check out the N.C. State Board of Elections website for more information on registering to vote: https://www.ncsbe.gov/registering

Voter Resources can be found here: https://www.ncsbe.gov/voting

Learn about the “REV UP” Campaign by clicking here: https://www.aapd.com/advocacy/voting/

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
Durham CFAC (Sub-Committee)
Steering Committee Representatives
- Local Chair + 2 Others
- Minimum 1 member from each population MH, I/DD and SUD
- Selected from & by local CFAC Members

Wake CFAC (Sub-Committee)
Steering Committee Representatives
- Local Chair + 2 Others
- Minimum 1 member from each population MH, I/DD and SUD
- Selected from & by local CFAC Members

Cumberland CFAC (Sub-Committee)
Steering Committee Representatives
- Local Chair + 2 Others
- Minimum 1 member from each population MH, I/DD and SUD
- Selected from & by local CFAC Members

Johnston CFAC (Sub-Committee)
Steering Committee Representatives
- Local Chair + 2 Others
- Minimum 1 member from each population MH, I/DD and SUD
- Selected from & by local CFAC Members

Alliance Health CFAC - Steering Committee
NC Statute 122C CFAC Requirements
Alliance CFAC By-laws
Relational Agreement

Individual and Family Affairs Liaison

Durham CFAC
- MH Members
- I/DD Members
- SUD Members
- Service Array, Delivery and Gaps in services
- Durham County MH/I/DD/SUD Communities Served
- Durham County NC Innovations Registry of Unmet Needs

Wake CFAC
- MH Members
- I/DD Members
- SUD Members
- Service Array, Delivery and Gaps in services
- Wake County MH/I/DD/SUD Communities Served
- Wake County NC Innovations Registry of Unmet Needs

Cumberland CFAC
- MH Members
- I/DD Members
- SUD Members
- Service Array, Delivery and Gaps in services
- Cumberland County MH/I/DD/SUD Communities Served
- Cumberland County NC Innovations Registry of Unmet Needs

Johnston CFAC
- MH Members
- I/DD Members
- SUD Members
- Service Array, Delivery and Gaps in services
- Johnston County MH/I/DD/SUD Communities Served
- Johnston County NC Innovations Registry of Unmet Needs

Service Array, Delivery and Gaps in services

Just added the Registry of Unmet needs to show that each Registry of Unmet Needs, kept in each county and managed corporately
CFAC By-laws Draft

Alliance Behavioral Healthcare.
Consumer and Family Advisory Committee.
ByLaws.

Contents.

- **Article 1 - Terms**
  - Section 1 - Name
  - Section 2 - Affiliation
  - Section 2 - Definitions
- **Article 2 - Area Authority**
  - Section 1 - Area Board Responsibilities
  - Section 2 - Relational Agreement
- **Article 3 - Consumer and Family Advisory Committee**
  - Section 1 - Purpose
  - Section 2 - Mission
  - Section 3 - Vision
  - Section 4 - Statutory Responsibilities
  - Section 5 - Additional Responsibilities
- **Article 4 - Advisors**
  - Section 1 - Rights
  - Section 2 - Qualifications
  - Section 3 - Responsibilities
  - Section 4 - Fees and Remuneration
  - Section 5 - Term
- **Article 5 - Local CFACs**
  - Section 1 - Team Responsibilities
  - Section 2 - Removing a Team Member
- **Article 6 - Steering Committee**
- **Article 7 - Officers**
- **Article 8 - Committees**
- **Article 9 - Grievances**
- **Article 10 - Amendments**
- **Article 11 - Dissolution**
Article 1.
Terms.

§1-1. Name.

The name of this committee shall be the Alliance Behavioral Healthcare Consumer and Family Advisory Committee (also referred to as "CFAC" or “the committee”).

1-2 Affiliation

Pursuant to N.C.G.S. § 122C-170, the CFAC shall be a committee of the established local Area Board.

§1-2. Definitions

1. "Consumer" means an individual who is a client or a potential client of public services from a State or area facility.
2. “N.C.G.S” shall refer to the North Carolina General Statutes including statutes that have been modified or replaced by the legislature since the adoption of these by-laws.
3. "Department" shall refer to the North Carolina Department of Health and Human Services.
4. "Area authority" shall refer to the area mental health, developmental disabilities, and substance abuse authority.
5. "Catchment area" shall refer to the geographic part of the State served by a specific area authority or county program.
6. "Area board" shall refer to the area mental health, developmental disabilities, and substance abuse board.
7. "Local management entity/managed care organization" or "LME/MCO" shall refer to a local management entity that is under contract with the Department to operate the combined Medicaid Waiver program authorized under Section 1915(b) and Section 1915(c) of the Social Security Act.
8. "Director" shall refer to the Executive Director of the LME/MCO chosen by the Area Board.
9. “Local Consumer and Family Advisory Committee (CFAC)” means a self-governing and self-directed organization that advises the area authority or county program in its catchment area on the planning and management of the local public mental health, developmental disabilities, and substance abuse services system.
10. "Relational Agreement" shall refer to a document establishing a relationship between and agreed-upon roles within the Area board and the Local CFAC.
11. “Advisor” refers to an eligible, willing and able individual appointed to serve on the Local Consumer and Family Advisory Committee.
12. Steering Committee refers to the officers, the local CFAC chairs, and additional members appointed by the local CFACs to give direction to the local committees, to share
information, and to communicate effectively with the LME-MCO the thoughts, ideas, and concerns of all CFAC members.

Article 2.
Area Authority.

§ 2-1. Responsibilities.

Pursuant to N.C.G.S. § 122C-170(d), the area board and the LME/MCO director shall:

1. Establish a committee made up of consumers and family members to a Local Consumer and Family Advisory Committee (CFAC).
2. Provide sufficient staff to assist the CFAC in implementing its duties pursuant to N.C.G.S. § 122C-170(c), including:
   1. Data for the identification of service gaps and underserved populations;
   2. Training to review and comment on business plans and budgets;
   3. Procedures to allow participation in quality monitoring; and
   4. Technical advice on rules of procedure and applicable laws

§ 2-2. Relational Agreement.

At the request of either the CFAC or the area board, the CFAC and the area board shall execute an agreement that:

1. Identifies the roles and responsibilities of each party,
2. Identifies channels of communication between the parties, and
3. Provides a process for resolving disputes between the parties

Article 3.
Consumer and Family Advisory Committee.

§3-1 Purpose.

The committee shall advise the LME/MCO on the planning and management of the local public mental health, developmental disabilities, and substance abuse services system pursuant to N.C.G.S. §122C-170.
§3-2 Mission.

The committee shall:

1. Be an active and constructive partner and participant in state and local mental health system development;
2. Represent the interests of consumers and families in our geographic area and state systems of care;
3. Participate in the creation and maintenance of local systems in our communities that are responsive to the needs of consumers and families;
4. Participate in the creation and maintenance of local systems in our communities in which consumers and families are an integral part of planning, management and evaluation activities;
5. Provide appropriate feedback to consumers, families, the area authority, the LME/MCO, its providers and the State regarding the system;
6. Seek to dispel myths, misinformation, and stigma regarding disabilities.

§3-3. Vision.

The committee shall strive to:

1. Promote a community-based support system that seeks to have each person reach his or her full potential.
2. Give voice to the interests and opinions of persons with needs related to mental health challenges, intellectual and developmental disabilities and substance use disorders.
3. Embrace the dignity of all residents in our communities so that each person may achieve his or her highest level of responsibility in the community.
4. Promote the empowerment of consumers and the active involvement of family members.

§ 3-4. Statutory Responsibilities.

Pursuant to N.C.G.S. § 122C-170, the committee shall:

1. Adopt bylaws to govern the selection and appointment of its members, their terms of service, the number of members, and other procedural matters;
2. Review, comment on, and monitor the implementation of the local business plan;
3. Identify service gaps and underserved populations;
4. Make recommendations regarding the service array and monitor the development of additional services;
5. Review and comment on the area authority or county program budget;
6. Participate in all quality improvement measures and performance indicators; and
7. Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services.

§ 3-5. Additional Responsibilities.
In accordance with the provisions of these bylaws, the committee shall:

1. Meet regularly for the purpose of fulfilling its statutory responsibilities and to conduct business;
2. Adopt and publish policies and procedures regarding members’:
   1. Qualifications,
   2. Leaves of absence,
   3. Resignation,
   4. Termination, and
   5. Disclosure of potential conflicts of interest;
3. Maintain the composition and membership of the committee including the recruiting and appointment of new members.

Article 4.
Advisors.

§ 4-1. Rights.

1. The committee shall take no actions that impede or prevent the participation, self-
   determination and independent decision-making capability of its advisory members.
2. Any restriction or condition of membership established by the team shall apply equally to all individuals.
3. Each advisor is entitled to no more than one (1) vote on actions of the committee.

§ 4-2. Qualifications.

1. Pursuant to N.C.G.S. § 122C-170(b):
   1. Adult individuals are qualified to be advisory members of the committee if they or a member of their family are a consumer of mental health, developmental disabilities, and substance abuse services.
   2. No member may serve more than three consecutive terms.
   3. Employees of the area authority or the LME/MCO are not eligible for membership on the committee.
2. Qualified advisor candidates shall demonstrate willingness, ability and intention to comply with the duties, rights and responsibilities of team membership.
3. Advisors shall be appointed without regard to race, color, gender, national origin, age, religion, creed, disability, veteran's status, sexual orientation, gender identity or gender expression.

§4-3 Responsibilities.

Each advisory member of the committee shall:
1. Participate openly, expressing their thoughts, ideas, and concerns without hesitation.
2. Treat each other, staff of the LME-MCO, and guests with dignity and respect.
3. Prepare for meetings by reading information sent or by doing research on items of interest to them and the group.
4. Listen to community member’s concerns and relay those concerns to the committee.
5. Do their utmost to participate in at least one outreach event in their community.
6. Advocate for their community at whatever level they are most comfortable participating.
7. Honor their statutory responsibilities by focusing their energy and time in fulfilling those responsibilities.

§4-4. Fees and Remuneration.

1. Advisors are volunteers, and receive no benefits or compensation for their participation on the committee.
2. No fees, dues or assessments shall be required for membership on the committee.
3. Advisors may be reimbursed by the committee for reasonable expenses incurred while participating in approved committee activities.

§4-5. Advisor Term.

Pursuant to N.C.G.S. § 122C-170(b) an advisor's term shall be three years, and no advisor may serve more than three consecutive terms.

Article 5.
Local CFAC

§ 5-3 Local CFAC Responsibilities.

Each local CFAC shall:

1. Adopt and publish procedures by which interested, qualified individuals may apply to become a member of the team.
2. Develop a charter that guides their action and tasks to be completed.

§ 5-2. Removing an Advisor.

1. Teams shall adopt and publish procedures by which an advisor may be removed from the local CFAC.
2. Local CFACs shall remove any advisor who:
   1. Fails to fulfill their duties as established by the local CFAC or committee rules; or
   2. Does not properly disclose conflicts of interest and act accordingly as required by these bylaws;
3. When the local CFAC removes a member, the former member shall be notified of the action immediately by written correspondence.

Article 6.
Steering Committee

1. The Steering Committee shall be made up of duly elected officers and the chairs of each of the local CFACs.
2. Local CFACs have the right to send up to two additional members to the Steering Committee as voting members on a monthly basis; the additional members attending can be determined by the local CFAC.
3. The Steering Committee will meet monthly, rotating in-person meetings with telephonic meetings or as needed or called for by one or more of the Steering Committee members.
4. A quorum will be considered one more than 50% of the officers and the local CFAC chairs.
5. The Steering Committee has the authority to take any action necessary and to act as the conduit for information to and from the LME-MCO.

Article 7.
Officers

1. The officers of the Alliance CFAC Steering Committee shall be a Chair, a Vice-Chair, and a Secretary/Treasurer. We will strive to have the Chair and the Vice-Chair from different counties.
2. Officers must have served on the CFAC for, at least, six months.
3. Officers should be limited to serve for two consecutive 1-year terms in office.
4. The Alliance CFAC Steering Committee Chair shall appoint a three-member Nominations Subcommittee that will propose a slate of officers by May of each calendar year with elections to be held in June of each calendar year.
5. Any officer may be removed from office by the affirmative vote of two-thirds of the Alliance CFAC Steering Committee at any regular or special meeting called for that purpose. Reasons for removal include conduct detrimental to the mission and purpose of the Committee, for lack of empathy with or respect for consumers/family members, or for refusal to render reasonable assistance in carrying out the Committee’s mission and purpose.
6. In the event that the Alliance CFAC Steering Committee determines it is necessary to remove a member from an office, the Alliance CFAC Steering Committee will notify the member in writing within 14 days upon removal from office.
7. In case an office becomes vacant, the majority of the members of the Alliance CFAC Steering Committee may elect an officer to fill the vacancy for the remainder of that term.

**Article 8.**
**Committees**

1. The Alliance CFAC Steering Committee shall, as necessary, appoint subcommittees with a chairperson to address specific issues or tasks on behalf of the committee.
2. Subcommittee members shall be composed of CFAC members appointed by the CFAC chair. Subcommittees will choose the member to chair.
3. The general public is welcomed and encouraged to participate.

**Article 9**
**Grievances**

In the event that conflict between the Committee and its liaison, any staff person or regarding policies or procedures cannot be resolved, appeal shall be made to the CEO. If resolution is not achieved, the Committee may appeal to the Area Authority Board. If the conflict cannot be resolved at the local level, then the CFAC may involve an external mediator.

**Article 10**
**Amendments**

The Alliance CFAC Steering Committee shall have power to make, alter, amend, and repeal the Bylaws as long as two-thirds of the elected members are present, whether changes are made by consensus, or an affirmative vote of the majority of the elected members of the Committee. The action shall be proposed at a regular or special meeting of the Alliance CFAC Steering Committee at which a quorum is present and adopted at a subsequent regular meeting at which at least 2/3 of the elected members are present.

**Article 11**
**Dissolution**

The Alliance CFAC may voluntarily dissolve at such time as there is a two thirds affirmative vote of the current members that such action is appropriate or necessary.
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Q1. Does your Local CFAC perform the tasks of reviewing, commenting on, and monitoring the implementation of your LME/MCO’s Local Business Plan?

Q2. Does your Local CFAC identify service gaps and underserved populations, and provide comment regarding these to your respective governing board?

Q3. Does your Local CFAC communicate to its respective governing board recommendations regarding the service array and monitor the development of additional services?

Q4. Does your Local CFAC perform at submitting to the State CFAC findings and recommendations regarding ways to improve the delivery of MH/DD/SA services?

Q5. Does your Local CFAC function at participating in all quality improvement measures and performance indicators and provide advisement to the respective governing board?
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THE ALLIANCE JOHNSTON COUNTY
CONSUMER AND FAMILY ADVISORY COMMITTEE (CFAC)

CHARTER

Name, Purpose, Membership and Objectives/Activities

1. **NAME:** The name of this sub-committee of the Alliance CFAC, shall be The Alliance Johnston Consumer and Family Advisory Committee (CFAC). Referred to hereafter as Johnston CFAC.

2. **PURPOSE:** The Johnston CFAC shall support the work of the Alliance CFAC and Alliance Health, referred to hereafter as Alliance, to help improve the local service provisions and array. Johnston CFAC is responsible for gathering information, disseminating information, and reporting to Alliance CFAC Steering Committee concerns specific to Johnston County and overall system concerns regarding the following statutory requirements:

   a. Review, comment on, and monitor the implementation of the local business plan.
   b. Identify service gaps and underserved populations.
   c. Make recommendations regarding the service array and monitor the development of additional services.
   d. Review and comment on the area authority or county program budget.
   e. Participate in all quality improvement measures and performance indicators.
   f. Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, intellectual/developmental disabilities, and substance use disorders.

3. **MEMBERSHIP:** Members must be consumers or former consumers of Mental Health, Intellectual/Developmental Disabilities or Substance Use Disorder Services in Johnston County, or a family member of such a consumer.

   a. **Conflict of Interest:** Every member will be required to complete and sign a "Conflict of Interest Disclosure Statement" annually and voluntarily update it as needed. Conflict of interest is a situation in which the personal or professional concerns of a committee member affect his or her ability to put the welfare of the committee or the organization before their personal/professional benefit.

   b. **Committee Membership:** Candidates must attend at least two (2) consecutive meetings and express an interest in becoming a member. The candidate will present themselves to the Johnston CFAC for membership and the Johnston CFAC will vote on the candidate.

   c. **Member Duties/Responsibilities**
      i. Members are responsible for promoting Johnston CFAC, community outreach events, and recruit new members as needed.
         a. Members are responsible for arranging their own transportation to all events, meetings, workshops, etc.
         b. Members are responsible for being prepared to actively participate in each meeting, to the best of their ability, by reading materials that may have been distributed prior to the meeting.
         c. Members are responsible to notify the chair, co-chair, secretary or Alliance Health CFAC liaison in the event he or she is unable to attend the regular monthly Committee meeting.
         d. The Johnston CFAC will be comprised of current or past consumers and family members representing: As closely as possible equally the disability groups, and the needs of child consumers and family members and adult consumers, and the race and ethnic composition of the catchment area.
4. **TERMS:** Terms of serving on the Johnston CFAC shall be for three, three year consecutive terms or a total of nine consecutive years.
   
i. **Resignation of members.** Any member may resign in writing to either of the committee officers. The resignation will be effective upon delivery to the co-chair.
   
   ii. **Meeting Requirements.** Any member missing three consecutive meetings without cause or notification of the Chair, Co-chair, or Secretary may be subject to removal from the Committee.
   
   iii. **Committee Composition** (numbers). The Johnston CFAC shall comprise of no more than 12 members that reside in Johnston County, who are eighteen years of age and older. Every effort will be made to recruit members to achieve equal representation across all three disciplines (MH, I/DD, and SUD). Members of the public are welcome and will be encouraged to attend and participate.
   
   iv. **Special Circumstances** - If a committee member has reached the limit of service, nine consecutive years, and wishes to continue to serve on CFAC they must withdraw from the committee for a minimum of one month. The member will then be eligible to re-apply for committee membership, unless there is a new member waiting to serve on the committee (see 4.v below). The request will be reviewed at the next CFAC general meeting where the other members will vote on reinstating the member making the request. If the member rotating off serves on any sub-committees or represents Johnston CFAC in the community or is an officer of the CFAC committee, those activities would also have to be suspended while not on the committee. If the applicant wishes to continue in those roles in the community, the CFAC membership would need to confirm those appointments.
   
   v. **Reinstatement of Members:** The reinstatement of a member who is re-applying for membership has reached the limit of service and has withdrawn from committee for , will be dependent on if there is no new member waiting to serve on the committee. The ex-member of CFAC may continue to attend the CFAC meetings as a member of the general public.

The Johnston CFAC will achieve their responsibility by doing the following:
   
i. Hosting at least one community wide forum to receive input about the Mental Health, Intellectual and Developmental Disability, and Substance Use Disorder Service System.
   
   ii. Participate in community events with the Alliance Community Relations Department at least three times per year.
   
   iii. Recruit new members for CFAC
   
   iv. Receive training and/or presentations from Alliance staff or provider agencies around relevant information and services.
   
   v. Annually in June elect a Chairperson and Co-Chairperson to facilitate the meetings and lead their efforts.

**Officers**

1. **OFFICERS:** Officers of the Committee will be the Executive Committee consisting of:
   
a. Chairperson
   
b. Co-Chair
   
c. Secretary - Maybe elected from the current membership or assumed by Alliance support staff.

1. **OFFICER DUTIES**
   
a. Chair acts as presiding officer of the Committee.
   
b. Co-Chair shall act as presiding officer of the committee if the Chair is unavailable.
3. ELECTION AND TERM OF OFFICE

Officers of the Johnston CFAC will be elected by a majority vote of the Committee at a regular meeting of the Committee preceding the next fiscal year (beginning July 1). An officer will hold office for a term of two years, coinciding with the fiscal year of July 1st-June 30th or until the successor of such office will have been duly elected and qualified, resignation, disqualification, or removal from office of such offer. An officer may not hold office for more than two consecutive terms.

a. The chair shall appoint a Committee on Nominations that will nominate Committee Officers and present the nominations to the Committee prior to the expiration of the terms of Committee officers, or upon the occurrence of vacancies.

b. Removal of Officers. Any officer of the Committee may be removed with or without cause, by vote of a majority of the Committee, at a special meeting called for such purpose.

c. Resignation of Officers. Any officer, of the Committee, may resign by giving written notice thereof to the Chair.

d. Special allowances. The terms of office may be extended for one additional term, if no successor has been identified from within the membership, and approved of the membership by a simple majority.

Meetings

1. On the third (3rd) Tuesday of each month at 521 North Brightleaf Boulevard, Smithfield, NC 27577.

2. The Chairperson will construct an agenda with the assistance from Alliance Health Plan Staff.

3. A quorum will consist of 50% of membership present (either in person or on the phone).

4. The Chairperson, Co-chair or Designee will facilitate the meeting.

5. The Chairperson will encourage attendance of the Alliance CFAC meetings either in person or by teleconference.

6. Steering Committee Meetings will be held monthly alternating from telephonic and in person/teleconference on the first Monday of each month. The chair and one or two other members will participate either in person or via teleconference.

Committees

The chair or co-chair may appoint members to represent the Johnston CFAC on local committees in the community that they feel the presence of CFAC members would be beneficial. Members representing CFAC by such an appointment are eligible for a stipend consistent with Alliance policy.

Stipends/Mileage/Conferences

1. Johnston CFAC members may receive a stipend, as detailed in Alliance Operational Procedure #3501 - CFAC Stipends.

2. Community Events/Outreach: CFAC members who participate in special events will receive a stipend with the understanding he/she will be required to staff the event table/booth for a minimum two-hour shift not including set up and dismantling.

3. Conferences, seminars, workshops, or classes.

   a. Members will not receive a stipend to attend conferences, seminars, workshops, or classes paid for and approved by the Alliance CFAC and Alliance Health Plan.
b. Members will receive mileage at the Alliance reimbursement rate from 521 North Brightleaf Boulevard to attend a conference, seminar, and workshop or class paid for and approved by the Alliance CFAC and Alliance Health Plan.

c. Members are responsible to register, if at all possible, during early bird registration and participation must be approved by the Alliance CFAC and Alliance Health Plan. Members must attempt to apply for a scholarship if offered. Event attendees are responsible to notify a member of the Executive Committee as soon as possible if they are unable to attend the event for any reason.

d. Event attendees are responsible upfront for their own transportation, meals, parking fees, and accommodations unless provided by the event. Receipts must be presented for reimbursement of parking fees, breakfast, lunch, and dinner. Reimbursement is at NC State allowed rates.

e. Late registration must be approved by the Alliance CFAC and Alliance Health Plan, with the understanding that the attendee may have to pay for the event fee out of their personal funds. Reimbursement will follow as soon as possible.

Event attendees are responsible to provide a report and/or handouts at the following regularly scheduled Alliance CFAC Steering Committee meeting so that the information can be shared with all of Alliance's CFAC members.

This Charter will go into effect once discussed with Johnston CFAC Members and approved by the membership and signed by the local Chair and/or Co-Chair and Alliance Health CFAC Liaison.

Signed this day: _____________________

By________________________________
Johnston CFAC Chair

By________________________________
Johnston CFAC Co-Chair

__________________________________
Alliance Health Liaison
ALLIANCE BEHAVIORAL HEALTHCARE  
CONSUMER AND FAMILY ADVISORY COMMITTEE  
CUMBERLAND COUNTY SUBCOMMITTEE CHARTER

PURPOSE:
The county subcommittees are responsible for gathering information, and disseminating information, and reporting to the full Alliance CFAC of its findings and concerns specific to their county and overall system concerns regarding the following statutory requirements:

1. Review, comment on, and monitor the implementation of the local business plan.
2. Identify service gaps and underserved populations.
3. Make recommendations regarding the service array and monitor the development of additional services.
4. Review and comment on the area authority or county program budget.
5. Participate in quality improvement measures and performance indicators.
6. Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance abuse services.

TASKS:
The Cumberland Subcommittee will achieve this responsibility by doing the following:

1. Hosting at least one community wide forum to receive input about the Mental Health, Intellectual and Developmental Disability, and Substance Abuse Disorder service system.
2. Participate in community events with the Alliance Community Relations Department at least three times per year.
3. Recruit new members for CFAC.
4. Receive training and/ or presentations from Alliance staff or provider agencies around relevant information and services.

COMPOSITION:
The Cumberland CFAC Subcommittee is made up of members of the Alliance CFAC that reside in Cumberland County. The Cumberland CFAC will try to recruit members to support with equal representation to all three disciplines (MH, IDD, and SA). Members of the public are and will be encouraged to attend and participate where appropriate.

MEETINGS:
The Cumberland County CFAC Subcommittee will hold meetings:

1. On the fourth (4th) Thursday of every month at 711 Executive Place, Fayetteville, NC.
2. The chairperson will construct an agenda with assistance from Alliance staff.
3. A quorum will consist of 50 % of the membership present (either in person or on the phone).
4. The Chairperson or Designee will facilitate the meeting.
5. The Chairperson will encourage attendance of Alliance CFAC meetings either in person or by teleconference.
Steering Committee Meetings, formerly known as the Big CFAC meetings, will be monthly alternating from telephonic and in person/via teleconference. The chair and one to two other members will participate either in person or via teleconference.
**Alliance Health Consumer and Family Advisory Committee**  
**Durham County Charter**

**Purpose:**  
The county committees are responsible for gathering information, disseminating information, and reporting to the CFAC Steering Committee concerns specific to their county and overall system concerns regarding the following statutory requirements:

- 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 area authority or county program budget.
- Participate in all quality improvement measures and performance indicators.
- Submit to the State Consumer and Family Advisory Committee findings and recommendations regarding ways to improve the delivery of mental health, developmental disabilities, and substance use disorders.

**Tasks:**  
The Durham CFAC will achieve this responsibility by doing the following:

- Hosting at least (1) one community wide forum per year to receive input about the Mental Health/Intellectual and Developmental Disability/ Substance Use Disorder service system.
- Participate in community events with the Alliance Community Relations Department at least (3) three times per year.
• Receive training and/or presentations from Alliance staff or provider agencies around relevant information and services.
• The committee will designate during the regular monthly meeting, (2) members to attend in person or telephonically the Alliance CFAC Steering Committee meeting.
• Other tasks agreed upon by the committee.
• Recruit new members for CFAC.
  Individuals that are interested in CFAC membership should come to at least (2) meetings and on the 3rd meeting they are eligible to be voted in.

**Composition:**

The Durham CFAC is made up of individuals and family members that reside in Durham County. Members of the public are encouraged to attend and participate where appropriate.

**Meetings:**

• Meetings will be held on the second Monday night of each month at TROSA (1820 James Street Durham NC).
• The chair will construct an agenda with assistance from Alliance staff.
• The chair will designate someone to take minutes.
• The chair or designee will facilitate the meeting.
• The Durham CFAC Subcommittee shall not exceed more than 12 members.
• Members who exceed more than 3 absences consecutively, this could be cause for dismissal from the Durham Subcommittee. This rule can be discussed on a case-by-case circumstance (i.e., illness or family emergency).
Alliance Behavioral Healthcare
Consumer and Family Advisory Committee
Wake County Committee Charter

Responsibilities:
The purpose of this committee is to support the work of the Alliance CFAC at the county level by:
1. Electing a chair to serve annually and participate as a member of the CFAC Steering Committee.
2. Setting meeting agendas.
3. Assist the Alliance CFAC meet its statutory responsibilities.
4. Monitor and make recommendations regarding services provided.
5. Community outreach.
6. Communicate the concerns of the CFAC members and the community to the CFAC Steering Committee on a monthly basis.
7. Report any activities undertaken to the CFAC Steering Committee.
8. Provide relevant training to the CFAC, Wake Committee.
9. Appoint members in addition to the Chair to represent the Wake Committee and CFAC Steering Committee.

Authority:
The committee is authorized by the by-laws and led by the CFAC Wake County Sub-committee Chairperson. The Chairperson will make effective use of the time during meetings.

Sub-committee members shall:
1. Prepare for meetings ahead of time.
2. Communicate needs to the Chairperson or Alliance Liaison.
3. Respect each other.
4. Be on time to meetings or notify the chair when unable to attend.
5. Support the decisions of the CFAC Steering Committee.

Composition: The Wake County Sub-committee is made up of members of the Alliance BHC CFAC who reside in Wake County.

Meetings:
1. These meetings are open to the public and the public is encouraged to attend.

Meetings will be conducted as follows:
1. The second Tuesday of every month at 5:30 until 7:00 PM. The Chairperson retains the authority to change the meeting date and time due to conflicts and weather conditions with reasonable notice to all members.
2. The Chairperson will construct the meeting agenda with the assistance of the Alliance BHC staff.
3. The Chairperson will designate a member to take the minutes of the meeting.
4. A quorum will consist of 50% of membership or more.
5. The Chairperson will facilitate the meeting.

Approved: 02/11/2020
6. The Wake CFAC Subcommittee shall members not exceed more than 12 members.
7. Members who exceed more than 3 absences consecutively, this could be cause for dismissal from the Wake Subcommittee. This rule can be discussed on a case-by-case circumstance (i.e., illness for family emergency).
MEMBERS PRESENT: ☒ Steve Hill, ☒ Tammy Shaw, ☐ James Henry, ☐ Latasha Jordan, ☒ Dave Curro, ☒ Trula Miles, ☒ Brenda Solomon, ☒ Chris Dale, ☒ Dan Shaw, ☒ Pinkey Dunston, ☐ Regina Mays, ☒ Charlitta Burruss, ☒ Helen Castillo
BOARD MEMBERS PRESENT: None
GUEST(S): ☒ Suzanne Thompson, DHHS
STAFF PRESENT: ☒ Doug Wright, Director of Community & Member Engagement, ☐ Terrasine Gardner, Member Engagement Manager, ☒ Ramona Branch, Member Engagement Specialist

https://alliancehealthplan.zoom.us/meeting/register/tJYsfu2pqT4uGNFVqntbPrIQiVWiAekkIsUN

1. WELCOME AND INTRODUCTIONS

2. REVIEW OF THE MINUTES – The minutes from the August 10, 2020, Consumer and Family Advisory Committee (CFAC) meeting were reviewed; a motion was made by Dan Shaw and seconded by Charlitta Burriss to approve the minutes. Motion passed.

<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
<th>NEXT STEPS:</th>
<th>TIME FRAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Public Comments</td>
<td>COVID-19- Check In:</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>☐ Pinkey Dunston stated that she attended the SCFAC meeting this past month and summarized the topics discussed. Those topics included: Medicaid, Bill 122C (A statute to define and make changes for CFAC), and Children initiatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Steve Hill stated that TROSA is still COVID free and that it takes a tremendous amount of effort on the organizations part to continue to keep their campus free from positive case</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Dave Curro was back tonight and feeling better after enduring an accident, he also stated that he has family members that are currently battling COVID</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Charlitta mentioned that she is still experiencing impacts from COVID within her family and neighborhood</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Terrasine was not in attendance tonight due to the passing of her Mother, our thoughts and prayers are with her during this time</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.
<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
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<th>TIME FRAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Recovery Oriented System of Care</td>
<td>Alliance is celebrating Recovery Month with the release of our Changing Hearts and Minds video series. The series of six trainings will give you basic tools needed to support the people we serve with the dignity and respect they deserve, to improve our communities by allowing them to experience all of their citizens’ different gifts, to have inclusive neighborhoods that embrace the value of every member. The first video was shown tonight for the CFAC members; and once the video concluded the group was able to comment on their thoughts and concerns.</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
| 5. Durham County Tasks | TBI Representation:  
- The group discussed recruitment for a TBI representative for CFAC. The representative could be a member or a family member. The group will continue to discuss this at the next CFAC meeting.  
- The group also suggested that (2) positions be added to the Durham CFAC subcommittee which would include (1) TBI member and (1) member from the LatinX community  
Active Member List:  
- The group discussed the current members and as a whole all members except for James Henry are considered active. Charlitta Burriss stated that she would reach out to James Henry to have a conversation with him and report back to the group next month the outcome of the outreach.  
- Latasha Jordan is currently a member but has not been in able to attend meetings due to her work schedule of 2nd shift  
- Regina Mays is also a member and is having classes the next few meetings and will return after her classes are completed | October Agenda Item | 30 Days |
| 6. LME/MCO Updates | Town Hall meetings-Listening session and Q&A with Kody Kinsley and Victor Armstrong: September 27 from 6-730- invites will be sent out  
- Masks and Children’s coloring books have been assembled and distributed throughout the Alliance communities to help support families during the COVID pandemic  
- Alliance’s Hotel project has ended and was successful in assisting those that were experiencing homelessness during the COVID | Ongoing | N/A |
<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
<th>NEXT STEPS:</th>
<th>TIME FRAME:</th>
</tr>
</thead>
</table>
| 7. State Updates | Suzanne Thompson, NCDHHS was in attendance tonight and went over the State updates:  
- CE&E September update was sent out today; all members should have received it in their email.  
- Crisis update & information has its own page on CE&E  
- Team trainings & events are listed on the front of the page  
- A poll has been added to see what times people would like to have these trainings; the majority of the responses so far have been for morning sessions  
- A poll for broadband Wi-Fi/internet access has been created in hopes to prove to lawmakers that internet access should be considered a utility-please encourage everyone to participate in the poll that needs internet  
- NC CARES & NC HEALERS -grant funded for support for workers and families during this unrestful time, has also added teachers and their families to the list of those supported  
- Please check all LME/MCO websites during the month of September for specific trainings and webinars that are free-and take advantage of the opportunities  
- SCOOP on Managing Stress: new initiative for self-care  
  - S-Stay connected to family & friends  
  - C-Compassion for yourself & others  
  - O-Observe your use of substances  
  - O-Ok to ask for help  
  - P-Physical activity to improve your mood | Ongoing | N/A |
| 8. Steering Committee | Alliance Member Engagement Specialists will begin to re-vamp the CFAC orientation packet and will consist of adding advocacy guidelines and other suggestions made from the VAYA example  
- Durham Charter Updates | October Agenda Item | N/A |
| 9. Event-Goal Planning | The group will continue to discuss goals at the next meeting in October | October Agenda Item | N/A |

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.
ADJOURNMENT: 6:45pm the next meeting will be October 12, 2020, at 5:30 p.m.

Respectfully Submitted by:

Click here to enter text. Date Approved
1. WELCOME AND INTRODUCTIONS

2. REVIEW OF THE MINUTES – The minutes from the August 11, 2020, Wake Consumer and Family Advisory Committee (CFAC) Subcommittee meeting were reviewed; a motion was made by Karen McKinnon and seconded by Jessica Larrison to approve the minutes. Motion passed unanimously.

<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
<th>NEXT STEPS:</th>
<th>TIME FRAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Public Comments Individual and Family Challenges</td>
<td>Israel suggests Wake CFAC educate the public about communication skills.</td>
<td>Israel will email Suzanne Thompson, cc Stacy, to request her team to create a communication training.</td>
<td></td>
</tr>
<tr>
<td>4. Wake Tasks Active member list Look at By-laws and make recommendations TBI representation</td>
<td>Annette would like to create another task group, similar to NCDSP, to address community needs. Technology was suggested. Israel discussed how businesses are allowing children, who do not have access to computers or the internet, come in and use their business computers evenings and weekend. Transportation is not an issue right now since busing is free during COVID.</td>
<td>Israel and Vicky will email each other, cc Stacy, regarding technology.</td>
<td></td>
</tr>
<tr>
<td>4. State updates</td>
<td>Suzanne discussed the state virtual Townhall meetings where Deputy Secretary Kody Kindley and Dr. Armstrong Sept 17, 2020 6-8 pm will address I/DD changes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. LME/MCO updates</td>
<td>Enrollments letters are going out to those on the standard plans. Alliance has distributed 7,000 kids masks to prevent COVID. Alliance has created a COVID coloring book called Joey the Kangaroo and has distributed 15,000 books to reassure children.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Draft minutes may be submitted with the monthly Board packet. Minutes will be approved by this Committee at a later date.
5. **ADJOURNMENT:** the next meeting will be October 13, 2020, at 5:30 p.m.

Respectfully Submitted by:

Stacy Guse

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

DATE OF BOARD MEETING: October 1, 2020

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 2:30/3:00 p.m. prior to the regular Board Meeting.

This month’s report includes draft minutes from the September 3, 2020 meeting, the Summary of Savings/(Loss) by Funding Source, ratios for the period ending August 31, 2020, 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
AGENDA

1. Review of the Minutes – September 3, 2020

2. Monthly Financial Reports as of August 31, 2020
   a. Summary of Savings/(Loss) by Funding Source
   b. Statement of Revenue and Expenses (Budget & Actual)
   c. Senate Bill 208 Ratios
   d. DMA Contractual Ratios

3. Year End Summary
   a. Committed Funds and Reinvestment Plan

      A motion to recommend the Board approve the one year reinvestment plan of $12,692,000 and commit $15,699,817 as of 6/30/20 which includes:
      - $3,007,817 for the required intergovernmental transfer (one year)
      - $12,692,000 for reinvestment (one year)

4. Approval of Contract(s)

5. Adjournment
### AGENDA ITEMS:

<table>
<thead>
<tr>
<th>#</th>
<th>AGENDA ITEMS</th>
<th>DISCUSSION</th>
<th>NEXT STEPS</th>
<th>TIME FRAME</th>
</tr>
</thead>
</table>
| 3 | Monthly Financial Report | The monthly financial reports were discussed which includes the Summary of Savings/(Loss) by Funding Source, the Statement of Revenue and Expenses, Senate Bill 208 Required Ratios, and DMA Contract Ratios as of July 31, 2020. Ms. Pacholke discussed the monthly reports with the caveat that some yearend adjustments have not been factored into July 2020 due to the timing of the yearend close and the Finance Committee meeting.  
  - As of 5/31/20 we have savings of $5.6M  
  - We are meeting all SB208 ratios  
  - We are meeting the defensive interval required in the DMA contract, however the MLR is currently below the 85% threshold (81.5%). Alliance is monitoring this ratio and working on a spending plan to increase spending, especially related to COVID revenue. |            |            |
| 4 | FY20 Close Update    | Ms. Pacholke gave a summary on yearend close. Final information has been received and the Finance team is working on finalizing the numbers. The final summary of savings and loss by funding source and net position will be presented to the Finance Committee in October for the Board to vote on Committed funds. |            |            |
| 5 | Contract Approval(s) | Ms. Pacholke summarized one contract that needs Board approval. The following motion was made by Ms. Anderson and seconded by Mr. Pazzaglini related to the contract approval. Motion passed unanimously.  
  - A motion to recommend to the Board to authorize the CEO to increase the existing contract with Milliman, Inc. to $750,000 to add financial consulting services. |            |            |
| 6 | Closed Session       | A motion was made by Chair Hancock and seconded by Mr. Pazzaglini to close the meeting pursuant to NC General Statute 143-318.11 (a) 1 to prevent the disclosure |            |            |
Choose an item.

Virtual meeting via videoconference - 2:30-4:00 p.m.

<table>
<thead>
<tr>
<th>AGENDA ITEMS:</th>
<th>DISCUSSION:</th>
<th>NEXT STEPS:</th>
<th>TIME FRAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>of information that is privileged or confidential pursuant to the law of this State or of the United States, or not considered a public record within the meaning of Chapter 132 of General Statutes. The motion passed unanimously. The Committee returned to open session at 3:25 and the meeting was adjourned.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. **ADJOURNMENT**: the meeting adjourned at 3:25 pm; the next meeting will be October 1, 2020, from 3:00 p.m. to 4:00 p.m.
Summary of Savings/(Loss) by Funding Source as of August 31, 2020

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Expense</th>
<th>Savings/(Loss)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Waiver Services</td>
<td>$77,347,174</td>
<td>$68,148,464</td>
</tr>
<tr>
<td>Medicaid Waiver Risk Reserve</td>
<td>$1,712,805</td>
<td>-</td>
</tr>
<tr>
<td>Federal Grants &amp; State Funds</td>
<td>$11,785,751</td>
<td>$11,875,983</td>
</tr>
<tr>
<td>Local Funds</td>
<td>$3,240,861</td>
<td>$3,240,861</td>
</tr>
<tr>
<td>Administrative</td>
<td>$11,585,282</td>
<td>$10,545,320</td>
</tr>
<tr>
<td>Total</td>
<td>$105,671,873</td>
<td>$93,810,628</td>
</tr>
</tbody>
</table>

Committed
Intergovernmental Transfers    | (501,303)      |
Reinvestments-Service        | -              |
Reinvestments-Administrative  | (680,052)      |
Total Committed               | (1,181,355)    |

Restricted                   | 3,130,690      |
Unrestricted                  | 9,911,910      |
Total Fund Balance Change     | $11,861,246    |

Fund Balance as of August 31, 2020

<table>
<thead>
<tr>
<th>Investment in Fixed Assets</th>
<th>4,846,758</th>
<th>(95,446)</th>
<th>4,751,312</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restricted - Risk Reserve</td>
<td>60,923,872</td>
<td>1,712,805</td>
<td>62,636,677</td>
</tr>
<tr>
<td>Restricted - Other</td>
<td>7,005,672</td>
<td>-</td>
<td>7,005,672</td>
</tr>
<tr>
<td>State Statutes</td>
<td>873,407</td>
<td>1,513,332</td>
<td>2,386,739</td>
</tr>
<tr>
<td>Cumberland</td>
<td>2,966,038</td>
<td>2,966,038</td>
<td>2,966,038</td>
</tr>
<tr>
<td>Restricted - Other</td>
<td>10,845,117</td>
<td>1,513,332</td>
<td>12,358,449</td>
</tr>
<tr>
<td>Committed</td>
<td>3,007,817</td>
<td>(501,303)</td>
<td>2,506,514</td>
</tr>
<tr>
<td>Intergovernmental Transfer</td>
<td>500,000</td>
<td>-</td>
<td>500,000</td>
</tr>
<tr>
<td>Reinvestments-Service</td>
<td>12,192,000</td>
<td>(680,052)</td>
<td>11,511,948</td>
</tr>
<tr>
<td>Total Committed</td>
<td>15,699,817</td>
<td>(1,181,355)</td>
<td>14,518,462</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>19,033,358</td>
<td>9,911,910</td>
<td>28,945,268</td>
</tr>
<tr>
<td>Total Fund Balance</td>
<td>$111,348,923</td>
<td>$11,861,246</td>
<td>$123,210,168</td>
</tr>
</tbody>
</table>
# Statement of Revenue and Expenses (Budget and Actual) - As of August 31, 2020

<table>
<thead>
<tr>
<th></th>
<th>Budget</th>
<th>Current Period</th>
<th>Year to Date</th>
<th>Balance</th>
<th>% Received/Expended</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Grants</td>
<td>$38,239,101</td>
<td>$754,629</td>
<td>$3,240,861</td>
<td>$34,998,240</td>
<td>8.48%</td>
</tr>
<tr>
<td>State &amp; Federal Grants</td>
<td>$54,723,221</td>
<td>$7,369,441</td>
<td>$11,785,751</td>
<td>$42,937,470</td>
<td>21.54%</td>
</tr>
<tr>
<td>Medicaid Waiver Services</td>
<td>$399,202,069</td>
<td>$39,365,265</td>
<td>$79,059,979</td>
<td>$320,142,090</td>
<td>19.80%</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$492,164,390</td>
<td>$47,489,336</td>
<td>$94,086,591</td>
<td>$398,077,800</td>
<td>19.12%</td>
</tr>
<tr>
<td><strong>Administrative</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Administration</td>
<td>$382,104</td>
<td>$32,300</td>
<td>$64,600</td>
<td>$317,504</td>
<td>16.91%</td>
</tr>
<tr>
<td>LME Administrative Grant</td>
<td>$4,359,385</td>
<td>$363,281</td>
<td>$726,564</td>
<td>$3,632,821</td>
<td>16.67%</td>
</tr>
<tr>
<td>Medicaid Waiver Administration</td>
<td>$54,436,646</td>
<td>$5,369,769</td>
<td>$10,783,685</td>
<td>$43,652,961</td>
<td>19.81%</td>
</tr>
<tr>
<td>Miscellaneous Revenue</td>
<td>$500,000</td>
<td>$4,870</td>
<td>$10,433</td>
<td>$489,567</td>
<td>2.09%</td>
</tr>
<tr>
<td><strong>Total Administrative Revenue</strong></td>
<td>$59,678,135</td>
<td>$5,770,221</td>
<td>$11,585,282</td>
<td>$48,092,853</td>
<td>19.41%</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$551,842,525</td>
<td>$53,259,557</td>
<td>$105,671,873</td>
<td>$446,170,652</td>
<td>19.15%</td>
</tr>
<tr>
<td><strong>EXPENSES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Services</td>
<td>$38,239,101</td>
<td>$754,629</td>
<td>$3,240,861</td>
<td>$34,998,240</td>
<td>8.48%</td>
</tr>
<tr>
<td>State &amp; Federal Services</td>
<td>$54,723,221</td>
<td>$7,369,441</td>
<td>$11,785,751</td>
<td>$42,937,470</td>
<td>21.54%</td>
</tr>
<tr>
<td>Medicaid Waiver Services</td>
<td>$399,202,069</td>
<td>$39,365,265</td>
<td>$79,059,979</td>
<td>$320,142,090</td>
<td>19.80%</td>
</tr>
<tr>
<td><strong>Total Service Expenses</strong></td>
<td>$492,164,390</td>
<td>$43,671,689</td>
<td>$83,265,308</td>
<td>$408,899,082</td>
<td>16.92%</td>
</tr>
<tr>
<td><strong>Administrative</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operational</td>
<td>$7,912,882</td>
<td>$735,974</td>
<td>$1,410,046</td>
<td>$6,502,836</td>
<td>17.82%</td>
</tr>
<tr>
<td>Salaries, Benefits, and Fringe</td>
<td>$47,114,282</td>
<td>$4,213,189</td>
<td>$8,395,587</td>
<td>$38,718,694</td>
<td>17.82%</td>
</tr>
<tr>
<td>Professional Services</td>
<td>$4,150,972</td>
<td>$286,186</td>
<td>$739,687</td>
<td>$3,411,284</td>
<td>17.82%</td>
</tr>
<tr>
<td>Miscellaneous Expense</td>
<td>$500,000</td>
<td>$0</td>
<td>$0</td>
<td>$500,000</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>Total Administrative Expenses</strong></td>
<td>$59,678,135</td>
<td>$5,237,349</td>
<td>$10,545,320</td>
<td>$49,132,815</td>
<td>17.67%</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$551,842,525</td>
<td>$48,909,038</td>
<td>$93,810,628</td>
<td>$458,031,897</td>
<td>17.00%</td>
</tr>
</tbody>
</table>

| **CHANGE IN NET POSITION** | $4,350,519 | $11,861,245 |
**Senate Bill 208 Ratios - As of August 31, 2020**

**CURRENT RATIO**

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

**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**

**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 (7/1/19-6/30/20).
<table>
<thead>
<tr>
<th>Net Position</th>
<th>6/30/2020</th>
<th>6/30/2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investment in Capital Assets</td>
<td>$4,846,758</td>
<td>$4,946,365</td>
</tr>
<tr>
<td>Restricted:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risk Reserve</td>
<td>60,923,872</td>
<td>51,602,006</td>
</tr>
<tr>
<td>Cumberland County</td>
<td>2,966,038</td>
<td>-</td>
</tr>
<tr>
<td>Total Restricted</td>
<td>63,889,910</td>
<td>51,602,006</td>
</tr>
<tr>
<td>Unrestricted:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Committed - Legislative Reductions</td>
<td>-</td>
<td>7,342,029</td>
</tr>
<tr>
<td>Committed - Intergovernmental Transfer</td>
<td>3,007,817</td>
<td>3,007,817</td>
</tr>
<tr>
<td>Committed - Reinvestment Plan</td>
<td>12,692,000</td>
<td>6,785,013</td>
</tr>
<tr>
<td>General</td>
<td>26,912,438</td>
<td>14,290,829</td>
</tr>
<tr>
<td>Total Unrestricted</td>
<td>42,612,255</td>
<td>31,425,688</td>
</tr>
<tr>
<td>Total Net Position</td>
<td><strong>$111,348,923</strong></td>
<td><strong>$87,974,059</strong></td>
</tr>
</tbody>
</table>
## Reinvestment Plan

<table>
<thead>
<tr>
<th>Services</th>
<th>FY21</th>
</tr>
</thead>
<tbody>
<tr>
<td>General</td>
<td>$500,000</td>
</tr>
<tr>
<td><strong>Administrative</strong></td>
<td></td>
</tr>
<tr>
<td>Tailored Plan Implementation*</td>
<td>$12,192,000</td>
</tr>
</tbody>
</table>

**Total** $12,692,000

*Includes implementation costs for July 1, 2020-June 30, 2021. Future costs will be committed next year.
ITEM: Executive Committee Report

DATE OF BOARD MEETING: October 1, 2020

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 report includes draft minutes from the September 21, 2020, meeting.

REQUEST FOR AREA BOARD ACTION: Accept the report.

CEO RECOMMENDATION: Accept the report.

RESOURCE PERSON(S): Gino Pazzaglini, Board Chair; Robert Robinson, CEO
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), ☒Donald McDonald, MSW (Network Development and Services Committee Chair); ☒Lynne Nelson, BS (Board Vice-Chair), ☒Gino Pazzaglini, MSW LFACHE (Board Chair), and ☒Pam Silberman, JD, DrPH (Quality Management Committee Chair)

BOARD MEMBERS PRESENT: None

GUEST(S): None

STAFF PRESENT: Veronica Ingram, Executive Assistant II; Brian Perkins, Senior Vice-President/Strategy and Government Relations; Robert Robinson, CEO; 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 pm

2. REVIEW OF THE MINUTES – The Committee reviewed minutes from the August 17, 2020, meeting; a motion was made by Dr. Silberman and seconded by Vice-Chair Nelson to approve the minutes. Motion passed unanimously.

AGENDA ITEMS: DISCUSSION: NEXT STEPS: TIME FRAME:

3. Sale of Property at 3309 Durham Drive, Raleigh
   Carol Wolff, General Counsel, reminded Committee members that the Board decided at its August 6, 2020, meeting to authorize the Executive Committee to take any further action necessary to sell this property. Ms. Wolff reviewed a proposal from a new buyer.
   COMMITTEE ACTION:
   A motion was made by Mr. Curro to accept the offer to purchase 3309 Durham Drive, Raleigh from North Street Investments, LLC for $1,680,000 as set forth in the proposed Purchase Agreement and to authorize the CEO to take the necessary legal actions to close the sale, including execution of the Purchase Agreement and closing documents. Motion seconded by Vice-Chair Nelson. Motion passed unanimously.

4. NC Open Meetings Law Training
   Carol Wolff, General Counsel, provided this training. The presentation is saved as part of the Committee’s files.
   COMMITTEE ACTION: The Committee received the training.

5. Draft Agenda for October Board Meeting
   Committee reviewed the draft agenda for the October 1, 2020, Board meeting.
   COMMITTEE ACTION: The Committee accepted/supported the draft agenda as presented.

6. Legislative/ Medicaid Reform Update
   Brian Perkins, Senior Vice-President/Strategy and Government Relations, provided an update on the agency’s and other LME/MCO’s collaborative efforts during COVID-19 and interactions with NC legislators.
   COMMITTEE ACTION: The Committee received the update.

7. ADJOURNMENT: the meeting adjourned at 4:45 pm; the next meeting will be October 19, 2020, at 4:00 p.m.
ITEM: Bridge Housing Program at Carolina Duke Inn

DATE OF BOARD MEETING: October 1, 2020

BACKGROUND: Alliance has entered into a partnership to operate eight units to be used as bridge housing at the Carolina Duke Inn located in Durham. Bridge housing is a three to five month program for persons exiting out of homelessness to connect them to services and supports and assist in accessing permanent housing.

REQUEST FOR AREA BOARD ACTION: Receive the presentation.

CEO RECOMMENDATION: Receive the presentation.

RESOURCE PERSON(S): Ann Oshel, Senior Vice-President/Community Health and Well-Being