THE HUMAN SERVICES COMMITTEE WILL MEET ON MONDAY, MARCH 14, 2011 AT 6:30 P.M., IN THE PERSONNEL CONFERENCE ROOM (D & E), HUMAN SERVICES BUILDING, 5303 S. CEDAR, LANSING.

Agenda

Call to Order

Approval of the February 28, 2011 Minutes

Additions to the Agenda

Limited Public Comment

1. **Interviews** – Senior Citizens Advisory Committee

2. **Health Department**
   a. Resolution to Authorize an Amendment to the Pediatric Physician Agreement with the College of Human Medicine at Michigan State University
   b. Resolution to Authorize Provider Contracts with Barry-Eaton Health Plan
   c. Resolution to Authorize 10 and 12 Hour Jail Nurse Shifts for the Jail Nurses at the Ingham County Jail

3. **Controller/Administrator’s Office** - Resolution Authorizing an Agreement with the Community Mental Health Authority of Clinton, Eaton, & Ingham Counties for Services in the Ingham County Jail

4. **Veterans Affairs** - Training for Department Employees on Electronic Imaging System

Announcements

Public Comment

Adjournment

**PLEASE TURN OFF CELL PHONES OR OTHER ELECTRONIC DEVICES OR SET TO MUTE OR VIBRATE TO AVOID DISRUPTION DURING THE MEETING**

The County of Ingham will provide necessary reasonable auxiliary aids and services, such as interpreters for the hearing impaired and audio tapes of printed materials being considered at the meeting for the visually impaired, for individuals with disabilities at the meeting upon five (5) working days notice to the County of Ingham. Individuals with disabilities requiring auxiliary aids or services should contact the County of Ingham in writing or by calling the following: Ingham County Board of Commissioners, P.O. Box 319, Mason, MI 48854 Phone: (517) 676-7200. A quorum of the Board of Commissioners may be in attendance at this meeting. Meeting information is also available on line at www.ingham.org.
Members Present: Todd Tennis, Brian McGrain, Carol Koenig, Deb Nolan, Don Vickers, Steve Dougan and Board Chairperson Grebner

Members Absent: None

Others Present: Jared Cypher, Dean Sienko, Renee Canady, Tim Perrone, Charles Barbieri, Andy Such, Bill Lievense, George Rowen, Richard Royston, Phil Preston, Tonia Olson and others

The meeting was called to order by Chairperson Tennis at 6:31 p.m. in the Personnel Conference Room “D & E” of the Human Services Building, 5303 S. Cedar Street, Lansing.

Approval of the February 14, 2011 Minutes
The Minutes were amended to reflect the following:

Item 1.a., Page 2, second paragraph strike in the East Side Neighborhood Housing Association and replace with on the east side of Lansing.

Additions to the Agenda
2. Late – Resolution Calling on the State of Michigan to Preserve the State Earned Income Tax Credit.

Limited Public Comment
Charles Barbieri on behalf of Demmer Corporation and Demmer Properties, LLC expressed their opposition of the regulation and presented the Committee with a short statement titled: OPPOSITION OF DEMMER CORPORATION AND DEMMER PROPERTIES LLC TO PROPOSED INGHAM COUNTY POLLUTION REGULATION. Mr. Barbieri also thanked the Committees for their ongoing communication. He summarized the primary objections as going beyond the federal Right-to-Know requirements, the low thresholds, extensive paper work, frequency of inspections, added fees and penalties, the absence of a meaningful judicial review, handling of trade secrets or other proprietary information, and creating a less desirable manufacturing location. Mr. Barbieri exhibited the thickness of an existing contingency plan explaining that it does not meet the County Status Sheet requirements.

Andy Such, Michigan Manufacturing Association stated his opposition and concern that the resolution needs to be further ironed out. He noted that the most recent draft there had been an attempt to exempt manufactured items; however, a manufactured item is not clearly defined. He further explained that under SARA Title III both the State and Federal governments inform the local communities where product is stored. He expressed his concern that this regulation will put a financial burden on new “green” businesses and that the regulation is a means of increasing the Health Department’s budget.
Bill Lievense, Michigan Chemistry Council expressed his opposition of the regulation although the public safety is a concern. He stated that he was in agreement with the others who spoke before him, and specifically that the regulation goes beyond the scope of SARA Title III which is problematic and redundant to those provisions. He mentioned that the uneven application of the regulation excludes large farms with large tanks of anhydrous ammonia and the large storage of product at warehouse clubs. He shared the concerns of his colleagues’ where fees could be upward of $300,000 and the structure of fines is excessive. Additionally, he reminded the Committee of security issues raised in late 80’s and early 90’s when this information was accessible to those with bad intentions. He also expressed his concern on the process of screening people who have access to such information and reports.

James Clift, Policy Director for the Michigan Environmental Council expressed the support of the proposal and thanked the committee for their efforts. He further explained because of budget cuts the number of state and federal inspections has dropped every year and the regulation fills in the gaps. He noted that the Adam’s Plating fire reinforces the fact information needs to be readily accessible to the emergency responders.

George Rowan, Ingham County Board of Health expressed his continued support of the regulation and believes it upholds the State of Michigan Health Code. Mr. Rowan disclosed that he was on the Ad Hoc Committee, along with representatives from the MEC, fire department personnel, City of Lansing, emergency medical personnel, Insurance Institute of Michigan and Alexander Chemical who reviewed the regulation. The concern of the Ad Hoc Committee was the “what ifs” explaining that this should not be a matter of dollars and cents in terms of human life. He stated that if the Adam’s Plating fire got out of hand it would have been a different story and citizens would have been talking about why the County did not do what it was supposed to do. He also disclosed that he was the past chair of the Sanitary Code Appeals Committee. He urged the Committee to pass the resolution.

Richard Royston, Delhi Township Fire Department stated that he has attended prior meetings, and supports the proposal for many reasons primarily for the safety of the fire fighters and first responders especially those located in more rural areas that do not have on-going inspections. He noted it is of importance that the fire fighters and first responders know what they are up against.

Phil Preston, Gestamp of Mason disclosed that he had participated with the Ad Hoc Committee working on the development of the regulation. He stated that the company has been committed since their existence to be in compliance with the SPCC and PIP Plans requirements, and admitted they may not be happy with the fees and inspections, but compliance is not an issue. Mr. Preston stated that the company is in support of the proposal.

Tonia Olsen, Granger expressed appreciation and respect of the regulation for the first responders, but as a business interest there is some work that needs to be done. She thanked the Committee for their communication and explained that the intent is not consistent with the language in the regulation. She highlighted that it is unclear what chemicals are included under the heading toxic, hazardous, and pollution substances, stating it can mean any MSDS that could be all products. She also stated there were discussions of grouping under the implementation; however, the language did not indicate this. Further, under Section 3.1 existing reports can be
submitted, if, all of the information required is contained in the existing plan but could be modified in the future. Also, the status sheet Section 3.2 goes beyond SPCC and PIP Plan requirements and includes things under heading “A” that states “but not limited to” potentially including anything with a MSDS and has no volume limit. She stated the regulation would create an extensive amount of paper work as written. Ms. Olson summarized that it is Granger’s position the regulation as written is inconsistent and redundant; therefore, they would like to see an opposition to the resolution or more work to be done clarifying the inconsistencies making it more acceptable. Ms. Olsen stated upon request she would provide anyone with the noted inconsistencies.

MOVED BY COMM. VICKERS, SUPPORTED BY COMM. DOUGAN, TO APPROVE A CONSENT AGENDA FOR THE FOLLOWING ITEMS:

1. Health Department
   c. Resolution to Authorize a Contract with Health Management Associates to Assist with Health Plan Management Services’ Strategic Planning
   d. Resolution to Authorize Agreements with the Ingham County Road Commission and Salvation Army
   e. Resolution Honoring Gloria Vorhauer
   f. Resolution Honoring Melany Mack
   g. Resolution Honoring Vicky Morales
   h. Resolution Honoring Judith Price

MOTION CARRIED UNANIMOUSLY.

MOVED BY COMM. VICKERS, SUPPORTED BY COMM. DOUGAN, TO APPROVE THE ITEMS ON THE CONSENT AGENDA.

MOTION CARRIED UNANIMOUSLY.

1. Health Department
   a. Resolution to Amend the Ingham County Sanitary Code by Adding Chapter VIII to Approve Regulations Governing the Identification and Disclosure of Toxic, Hazardous, or Polluting Materials

MOVED BY COMM. MCGRAIN, SUPPORTED BY COMM. NOLAN, TO APPROVE THE RESOLUTION TO AMEND THE INGHAM COUNTY SANITARY CODE BY ADDING CHAPTER VIII TO APPROVE REGULATIONS GOVERNING THE IDENTIFICATION AND DISCLOSURE OF TOXIC, HAZARDOUS, OR POLLUTING MATERIALS.

Dr. Sienko stated that the intent of the resolution is to assess conditions, assure proper plans are in place, and protect the environment, first responders, the public health and community at large.

Comm. Tennis asked Dr. Sienko to respond to the ease in which businesses can abide by the regulation. Dr. Sienko provided a 2011 status sheet and explained that businesses may provide their SARA Title III, PIP Plan or other acceptable documentation. The County’s staff would then electronically integrate the information into the County’s form making it available to first responders.
Comm. Dougan asked for the frequently asked questions (FAQ) sheet, and a matrix that was requested at the previous meeting including the current circumstance and what will be done differently going forward. Dr. Sienko stated that he had emailed the information to everyone on the Committee including Mr. Perrone’s legal opinion, but did not include the current circumstance and what will be done differently going forward. Mr. Cypher provided copies of the FAQ’s and the matrix.

Comm. Vickers stated that it seems as though Adams Plating is the example of what needed to be done or not done, and asked if they were inspected by the Health Department, and could anything have been done differently. Mr. Wilson stated that Adam’s had been inspected by the County, and the advantage of the inspection was that the sergeant was able to bring the PIP Plan, SARA Title III, Section 302 off-site plan identifying the chemicals on-site. He noted that the DEQ did not have any documentation on-site, and Adam’s documentation was in the burning building. Comm. Vickers agreed that the inspections are needed, but, the County’s requirements should not be more stringent than State and Federal requirements. Mr. Piavis stated that 56 gallons could be a possible threat. Mr. Wilson stated that there would be paint and small operators which would now be included because there is a need. There was a discussion of State and Federal agency requirements including thresholds in comparison to the County regulation. Comm. Tennis asked if going down to the 56 gallon minimum would affect some businesses that do not have a plan. Dr. Canady stated that was correct.

Comm. Vickers asked how many inspections would take place. Dr. Sienko stated there would be an initial inspection and follow-up in the next year with a reduction in schedule based on compliance thereafter, say every 2 to 3 years. Comm. Vickers asked if all three inspectors go separately to the site or as a team. Mr. Piavis stated they go to the site separately. Comm. Vickers noted that some fire departments do inspections. Mr. Piavis noted that those inspections are not always beyond fire suppression. Comm. Vickers stated he does not have a problem with the program; however, there is a concern why the big box stores are not included. Comm. McGrain asked why the big box stores were exempt. Mr. Piavis explained because of the changing inventory and reporting burden, and they would be included over the 5 gallon threshold. Mr. Wilson explained that big box stores are not regulated under the other Acts, and all the County is doing is over sight. Further explaining, if the County included the big box stores it would be necessary to create new regulation, standards, sciences and supportive reasons why they should be regulated, as well as, an added liability.

Comm. Koenig asked Dr. Sienko to respond to why the trade secrets Section 7.1 through 7.7 are adequate since there seems to be concern. Mr. Perrone stated that it was no different than what is established in SARA Title III. Comm. Grebner asked if MSU, universities and colleges were exempt. Mr. Wilson noted that they do file a SARA Title III, but, are exempt from the County regulation.

MOTION CARRIED with Comms. Dougan and Vickers voting no.

b. Resolution to Adopt the 2011 Fees for Chapter VIII of the Ingham County Sanitary Code (Pollution Prevention Regulation)
MOVED BY COMM. NOLAN, SUPPORTED BY COMM. KOENIG, TO APPROVE THE RESOLUTION TO ADOPT THE 2011 FEES FOR CHAPTER VIII OF THE INGHAM COUNTY SANITARY CODE (POLLUTION PREVENTION REGULATION).

Comm. Tennis noted that Attachment “A” does not reflect the same description as in the previous resolution.

MOVED BY COMM. TENNIS, SUPPORTED BY COMM. NOLAN, TO AMEND THE ATTACHMENT “A”, UNDER THE HEADING FEE DESCRIPTION AS FOLLOWS:

CAT 1 REPORTING (56-499 GALs.)  
CAT 2 REPORTING (500-4,999 GALs.)  
CAT 3 REPORTING (5,000+ GALs.)

CAT 1 INSPECTION (56-499 GALs.)  
CAT 2 INSPECTION (500-4,999 GALs.)  
CAT 3 INSPECTION (5,000+ GALs.)

THIS WAS ACCEPTED AS A FRIENDLY AMENDMENT.

Comm. Vickers stated that because this is for the good of all residence it is his opinion that it should be paid for by the County General Fund. Comm. Tennis respectfully disagreed stating it is fair to share the cost, and giving the example that restaurants pay inspection fees and that is for the good of the general population. Comm. Koenig noted that the businesses are making a profit.

MOTION CARRIED with Comms. Dougan and Vickers voting no.

2. Resolution Calling on the State of Michigan to Preserve the State Earned Income Tax Credit.

MOVED BY COMM. NOLAN, SUPPORTED BY COMM. KOENIG, TO APPROVE THE RESOLUTION CALLING ON THE STATE OF MICHIGAN TO PRESERVE THE STATE EARNED INCOME TAX CREDIT.

MOVED BY COMM. MCGRAIN, SUPPORTED BY COMM. NOLAN, TO AMEND THE RESOLUTION BY ADDING A SECOND WHEREAS AND FINAL WHEREAS:

WHEREAS, the state EITC complements the federal EITC, which was signed into law by President Gerald Ford and referred to by President Ronald Reagan as the best anti-poverty, best pro-family, best job creation measure ever to come out of Congress;

WHEREAS, elimination of the state EITC would effectively result in a tax increase on people of modest means and as a result would cost Michigan jobs, force families into foreclosure, and increase the number of people relying on more expensive government programs.
Comm. McGrain stated that it is his opinion that families would benefit from this. Comm. Nolan stated she supports the working poor who are being taxed at expense of the business tax breaks.

MOTION CARRIED with Comms. Dougan and Vickers voting no.

MOTION TO APPROVE THE RESOLUTION, AS AMENDED, CARRIED with Comms. Dougan and Vickers voting no.

Announcements
Comms. McGrain and Vickers stated that they had attended an enjoyable diversity luncheon.

Public Comment
None.

The meeting adjourned at approximately 7:34 p.m.

Respectfully submitted,

Julie Buckmaster
INTERVIEWS:
1. Senior Citizens Advisory Committee

ACTION ITEMS:
2(a). Resolution to Authorize an Amendment to the Pediatric Physician Agreement with the College of Human Medicine at Michigan State University

This resolution renews and continues an existing agreement with the College of Human Medicine at Michigan State University to provide pediatric physician services within the Ingham County Health Department’s Community Health Center Network. The agreement provides for 1.0 full-time equivalent pediatric physician through February 28, 2016. The rate is established as $206,482 per full-time physician in 2011 with a 2.0% increase coinciding with the beginning of each calendar year in ensuing years. The Health Department made an effort to negotiate to keep this agreement consistent with County policy on cost increases for service contracts.

The Assistant Deputy Controller recommends approval.

2(b). Resolution to Authorize Provider Contracts with Barry-Eaton Health Plan

This resolution authorizes an agreement with the Barry-Eaton Health Plan to provide covered medical services to people enrolled in the Barry-Eaton Health Plan. The agreement would be similar to the provider contract with the Ingham Health Plan, which has been in place since the inception of the Plan. The agreement outlines the mechanism by which the ICHD will accept and provide Covered Services to Covered Persons, and the Barry-Eaton Health Plan will pay for such Covered Services in accordance with the terms of the Agreement. Approximately $83,000 revenue is expected in the 2011 budget.

The agreement will be in effect from April 22, 2010, and continues from year to year unless terminated as set forth in the agreement.

The Assistant Deputy Controller recommends approval.

2(c). Resolution to Authorize 10 and 12 Hour Jail Nurse Shifts for the Jail Nurses at the Ingham County Jail

The Resolution would authorize the steps necessary to fulfill the long term goal of the Ingham County Sheriff’s Office and the Ingham County Health Department to provide 24/7 medical coverage for the inmates at the Ingham County Jail.

This 24/7 coverage should reduce the number of outside transports for inmates for medical reasons and therefore, reduce the medical costs to the County. By moving to 10 and 12 hour shifts, medical coverage can be provided around the clock contingent on full staff levels and with no employees on leave.

This transition of the Jail Nurses at the Ingham County Jail to 24/7 medical coverage following the proposed 10 and 12 hour shift template, would be effective May 1, 2011.

A shift differential in the amount of $2 per hour for the two “night shift” Jail Nurse positions would also be approved at an additional cost of $9,734, to be split between the Ingham County Sheriff’s Office and the Health Department’s budget for 2011.

The Assistant Deputy Controller recommends approval.
3. Resolution Authorizing an Agreement with the Community Mental Health Authority of Clinton, Eaton, & Ingham Counties for Services in the Ingham County Jail

This Resolution authorizes a Jail Diversion agreement with the Community Mental Health Authority of Clinton, Eaton, & Ingham Counties (CMH). This agreement is inclusive of all services provided by the Community Mental Health at the Ingham County Jail that are funded with State General Fund dollars effective October 1, 2010, and will remain in continuous effect unless terminated by one of the parties.

A recent Michigan Attorney General opinion stipulated that CMH funds provided as a part of their state General Fund formula funding could not be used to provide jail based mental health services.

However, the Department of Community Health (DCH) budget includes boilerplate language that allows local community mental health (CMH) agencies to contract with counties to provide certain jail services and fund them with CMH general fund dollars. This long term practice is now being formalized with a contract for the protection of all entities involved.

The Assistant Deputy Controller recommends approval.

4. Training for Department Employees on Electronic Imaging System

Veterans Affairs is requesting consideration to close down departmental operations (not to include transportation services) for Monday, April 25, 2011, so that MIS can provide four department employees with the necessary training in the appropriate use of the new imaging system.

The Assistant Deputy Controller recommends that the Human Services Committee grant this consideration.
MEMORANDUM

To: Human Services Committee
   Finance Committee

From: Dean G. Sienko, M.D., Health Officer

Date: March 8, 2011

Subject: Authorization to Amend Agreement between Michigan State University and the Ingham County Health Department for Pediatric Physician Services

This is a recommendation to authorize an amendment to the existing agreement (signed August 5, 2009 per Resolution #09-124) with Michigan State University’s College of Human Medicine (MSU CHM) to provide pediatric physician services within the Ingham County Health Department’s Community Health Center Network. Ingham County has contracted with the MSU CHM for pediatric physician services to support its Well Child Health Center since mid-2005 and began to support other Health Centers in 2009. This is a recommendation to renew and continue this agreement through February 28, 2016 and allow this contract to automatically renew annually until either party requests material alterations.

The proposed pediatric physician services agreement with MSU CHM will position the ICHD to continue to deliver primary care and well child services as required for all health center programs covered under Section 330 of the Public Health Service Act as amended by the Health Centers Consolidation Act of 1996 (P.L. 104-299). This includes the ICHD’s Community Health Center Network. I am, therefore, proposing that the Board of Commissioners authorize an agreement with MSU CHM for 1.0 full-time equivalent pediatric physician through February 28, 2016. The rate is established as $206,482 per full-time physician in 2011 with a 2.0% increase coinciding with the beginning of each calendar year in ensuing years. This rate and subsequent increases are consistent with the ICHD’s existing Pediatric Physician Services Agreements with the MSU CHM and the College of Osteopathic Medicine.

I recommend that the Board adopt the attached resolution and authorize the agreement for pediatric physician services with the College of Human Medicine at Michigan State University.

Attachment

c: Debra Brinson, w/attachment
   John Jacobs, CPA, w/attachment
   Barbara Mastin, MA, w/attachment
   Jayson Welter, w/attachment
   Carolyn Redman, w/attachment
Agenda Item 2a

Introduced by the Human Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION TO AUTHORIZE AN AMENDMENT TO THE PEDIATRIC PHYSICIAN AGREEMENT WITH THE COLLEGE OF HUMAN MEDICINE AT MICHIGAN STATE UNIVERSITY

WHEREAS, in Resolution #09-124, the Ingham County Board of Commissioners authorized the existing agreement between the Ingham County Health Department and Michigan State University’s College of Human Medicine (CHM); and

WHEREAS, the Ingham County Health Department is required to fully comply with the Bureau of Primary Health Care’s (BPHC’s) Program Expectations as outlined in the Policy Information Notice (PIN) 98-23 for all health center programs covered under section 330 of the Public Health Service Act (P.L. 104-299); and

WHEREAS, in order to comply with PIN 98-23, the Ingham County Health Department is required to provide certain services, either directly or through contracts or cooperative arrangements, including primary care and well child services, among other required services; and

WHEREAS, the Ingham County Health Department requires a 1.0 full-time equivalent pediatric physician to provide these required services; and

WHEREAS, the County has contracted with the Michigan State University College of Human Medicine (MSU CHM) since July 2005 for pediatric physician services, to support the primary care provided to children through Ingham County’s Community Health Center Network; and

WHEREAS, the Health Officer has advised the Board of Commissioners that the associated projected program income (reimbursement) will financially offset the MSU CHM contractual expenditure.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes the execution of Pediatric Physician Services agreement with Michigan State University’s College of Human Medicine, not to exceed $1,302,513 through February 28, 2016.

BE IT FURTHER RESOLVED, that the Ingham County Board of Commissioners establishes the contractual rate as follows:

1. During Calendar Year 2011 the rate per 1.0 FTE pediatric physician is $206,482.
2. During Calendar Year 2012 the rate per 1.0 FTE pediatric physician is $210,612.
3. During Calendar Year 2013 the rate per 1.0 FTE pediatric physician is $214,824.
4. During Calendar Year 2014 the rate per 1.0 FTE pediatric physician is $219,120.
5. During Calendar Year 2015 the rate per 1.0 FTE pediatric physician is $223,503.
6. During Calendar Year 2016 the rate per 1.0 FTE pediatric physician is $227,972.
BE IT FURTHER RESOLVED, that MSU CHM shall provide 1.0 full-time equivalent board certified physicians trained in pediatrics and adolescent medicine to implement the following scope of services:

1. Direct patient care (a minimum of 36 hours) to pediatric and adolescent patients of the Ingham County Community Health Center Network.
2. Provide medical consultation to registered nurses and other health team members on pediatric and adolescent health care matters.
3. Provide medical consultation related to pediatric and adolescent health care to other Community Health Center staff.
4. Provide and arrange emergency coverage (telephone triage) 24-hours a day, 7 days a week for the Health Department’s pediatric patients.
5. Provide inpatient admissions, rounding and discharge when necessary and appropriate.
6. Referral of patients for specialty care.
7. Participate in team meetings with other staff members.
8. Provide routine physicals of children entering foster care.
9. Provide physical assessments by trained physicians in the area of abuse and neglect, for children who are suspected victims of abuse and neglect.
10. When services are provided by the contractor under the agreement to members/patients of a health plan that has contracted with Ingham County, the Contractor and its physicians shall comply with the applicable terms and conditions of the County’s contract with the member’s health plan.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.
MEMORANDUM

To: Human Services Committee
    Finance Committee

From: Dean Sienko, M.D., Health Officer

Date: March 3, 2011

Subject: Resolution to Authorize Provider Contracts with Barry-Eaton Health Plan

The Ingham County Health Department (ICHD) has a contract with the Ingham Health Plan Corporation to provide covered medical services to people enrolled in the Ingham Health Plan and Mid-Michigan Health Plan. A provider contract has been in place since the inception of Ingham Health Plan and was most recently updated in resolution #10-374.

The ICHD would like to enter into an Agreement with the Barry-Eaton Health Plan to provide covered medical services to people enrolled in the Barry-Eaton Health Plan. Similar to Ingham Health Plan Corporation, the Barry-Eaton Health Plan has a contract with the Michigan Department of Community Health under the County Health Plan Agreement to receive funding pursuant to the Section 1115 Adult Benefits Waiver Program under Title XIX of the Social Security Act, to pay for certain health care services provided to individuals with low-income who are enrolled in the Plan to receive ABW benefits. Barry-Eaton Health Plan also arranges for the provision of certain health care services for certain persons with low-income who are not covered under the ABW program or under any other public or private health care program (“Plan B.”)

The Agreement outlines the mechanism by which the ICHD will accept and provide Covered Services to Covered Persons, and the Barry-Eaton Health Plan will pay for such Covered Services in accordance with the terms of the Agreement. Barry-Eaton Health Plan will pay ICHD Contract Rates, which means the current Medicaid fee-for-service reimbursement rate less co-payments, deductibles or other such amounts. These revenues are anticipated in the ICHD’s budget. The Agreement shall be in effect from April 22, 2010, and shall continue from year to year unless terminated as set forth in the Agreement.

I recommend that the Board of Commissioners adopt the attached resolution and authorize the proposed agreement with the Barry-Eaton Health Plan.

Attachment

c: Debra Brinson, w/ attachment
    John Jacobs, w/ attachment
    Jayson Welter, w/ attachment
    Holly Wilson, w/ attachment
    Carolyn Redman, w/ attachment
Introduced by the Human Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION TO AUTHORIZE PROVIDER CONTRACTS WITH BARRY-EATON HEALTH PLAN

WHEREAS, Ingham County has historically contracted with the Ingham Health Plan Corporation to serve low-income populations in Ingham County; and

WHEREAS, Barry-Eaton Health Plan proposes to contract with Ingham County to purchase covered medical services from the Ingham County Health Department for people enrolled in its Plan; and

WHEREAS, the Health Officer has recommended that the Board of Commissioners authorize an agreement with Barry-Eaton Health Plan.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes an agreement with Barry-Eaton Health Plan, through which Barry-Eaton Health Plan will pay Ingham County for covered medical services provided to persons enrolled in the Barry-Eaton Health Plan.

BE IT FURTHER RESOLVED, that Barry-Eaton Health Plan will pay Ingham County at least Medicaid rates through the contract on a fee-for-service basis.

BE IT FURTHER RESOLVED, that the term of the agreement will be from April 22, 2010, and shall continue from year to year unless terminated as set forth in the agreement.

BE IT FURTHER RESOLVED, that the County Clerk and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents on behalf of the County after approval as to form by the County Attorney.
MEMORANDUM

To: Law Enforcement Committee  
Human Services Committee  
Finance Committee

From: Dean Sienko, M.D., Health Officer

Date: February 15, 2011

Subject: Resolution to Authorize 10 and 12 Hour Jail Nurse Shifts for the Jail Nurses at the Ingham County Jail

The Ingham County Sheriff’s Office is requesting that the Ingham County Health Department provide 24/7 medical coverage for the inmates at the Ingham County Jail. 24/7 medical coverage will ultimately reduce the financial liability of the County’s general funds by helping to reduce the number of outside transports for inmates. Without hiring additional staff and moving to 10 and 12 hour shifts, medical coverage can be provided around the clock, with the exception of, as it is currently, when a Jail Nurse is on leave. All current Jail Nurses and the Ingham County Human Resources Department are in support of the proposed 10 and 12 hour shift template. The Ingham County Employees’ Association (ICEA) supports it as well, but is requesting a shift differential for the two “night shift” Jail Nurse positions. This shift differential will cost the County an additional $9,734 and will be split between the Ingham County Sheriff’s Office and the Health Department.

The Ingham County Health Department assumed the responsibility of providing and managing medical services for Ingham County Jail inmates January 1, 2007. Currently, Jail Nurses provide medical coverage for inmates at the Ingham County Jail all but 24 of the 168 hours in a seven-day period. “Medical coverage” refers to Jail Nurses who are Registered Nurses. A Nurse Practitioner and an LPN Jail Nurse are also on-site Monday through Friday from 8 a.m. to 5 p.m.

I recommend that the Board approve the attached resolution and authorize the Ingham County Health Department to transition the Jail Nurses at the Ingham County Jail to 24/7 medical coverage following the proposed 10 and 12 hour shift template effective May 1, 2011. I also recommend that the Board approve the shift differential in the amount of $2 per hour for the two “night shift” Jail Nurse positions.

c: Debra Brinson, w/ attachment  John Jacobs, w/ attachment  
Barbara Mastin, w/ attachment  Tony Lindsey, w/ attachment  
Jayson Welter, w/ attachment  Krista Buckland, w/ attachment  
Carolyn Redman, w/ attachment  Greg Harless, w/ attachment  
Sam Davis, w/attachment  Alan Spyke, w/attachment
RESOLUTION TO AUTHORIZE 10 AND 12 HOUR JAIL NURSE SHIFTS FOR THE JAIL NURSES AT THE INGHAM COUNTY JAIL

WHEREAS, the Ingham County Health Department assumed the responsibility of providing and managing medical services for Ingham County Jail inmates January 1, 2007; and

WHEREAS, Ingham County Health Department Jail Nurses provide medical coverage for the inmates at the Ingham County Jail all but 24 of the 168 hours in a 7-day period; and

WHEREAS, “medical coverage” refers to Jail Nurses who are Registered Nurses; and

WHEREAS, the Ingham County Sheriff’s Office is requesting that the Ingham County Health Department provide 24/7 medical coverage for the inmates at the Ingham County Jail; and

WHEREAS, all current Jail Nurses support the proposed 10 and 12 hour shift template; and

WHEREAS, there is support for the proposed 10 and 12 hour shift template from Human Resources and the Ingham County Employees’ Association (ICEA); and

WHEREAS, the County received confirmation from the National Labor Relations Board that the Ingham County Employees’ Association (ICEA) is the bona fide representative of certain employees employed by the County; and

WHEREAS, the Ingham County Employees’ Association (ICEA) is requesting a shift differential for the two “night shift” Jail Nurse positions; and

WHEREAS, additional costs in the amount of $9,734 will be incurred with the addition of shift differential for the two “night shift” Jail Nurses and will be split between the Ingham County Sheriff’s Office and the Health Department; and

WHEREAS, no additional staff need to be hired to provide 24/7 medical coverage within the Ingham County Jail, however, when a Jail Nurse is out on leave, there will not be on-site medical coverage for the inmates.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners authorizes the Ingham County Health Department to transition the Jail Nurses at the Ingham County Jail to 24/7 medical coverage following the proposed 10 and 12 hour shift template effective May 1, 2011.

BE IT FURTHER RESOLVED, that a shift differential in the amount of $2 per hour is authorized for the two “night shift” Jail Nurse positions.
BE IT FURTHER RESOLVED, that the Ingham County Board of Commissioners authorizes the Controller/Administrator to make the necessary adjustments to the 2011 Health Department and Sheriff’s Office budgets.

BE IT FURTHER RESOLVED, that the Ingham County Board of Commissioners authorizes the Board Chair and the Clerk to sign any necessary Letters of Understanding with the Ingham County Employees’ Association (ICEA) that are consistent with this resolution as prepared by the County Attorney.
A 2009 opinion of the Michigan Attorney General made it clear that CMH funds provided as a part of their state General Fund formula funding could not be used to provide jail based mental health services. The opinion requires that counties directly fund, or that CMHs use their local funds to fund the cost of these services. The value of those services in FY 2011 is approximately $210,000.

The FY 2011 Department of Community Health (DCH) budget, includes boilerplate language that allows local community mental health (CMH) agencies to contract with counties to provide certain jail services and fund them with CMH general fund dollars as many had prior to the department's interpretation the Attorney General opinion on the issue. Michigan Association of Counties recommends that counties now formalize these arrangements with a contract for the protection of all entities involved. The boilerplate language is below for your information:

Sec. 492. If a CMHSP has entered into an agreement with a county or county sheriff to provide mental health services to the inmates of the county jail, the department shall not prohibit the use of state general fund/general purpose dollars by CMHSPs to provide mental health services to inmates of a county jail.
Introduced by the Law Enforcement and Human Services Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION AUTHORIZING AN AGREEMENT WITH THE COMMUNITY MENTAL HEALTH AUTHORITY OF CLINTON, EATON, & INGHAM COUNTIES FOR SERVICES IN THE INGHAM COUNTY JAIL

WHEREAS, the Community Mental Health Authority of Clinton, Eaton, and Ingham Counties has provided certain services in the Ingham County Jail utilizing State of Michigan General Fund dollars; and

WHEREAS, a 2009 opinion of the Michigan Attorney General required that counties directly fund, or that CMHs use their local funds to fund the costs of these services; and

WHEREAS, the FY 2011 Department of Community Health (DCH) budget contains boilerplate language that allows local community mental health (CMH) agencies to contract with counties to continue to provide certain jail services and fund them with CMH general fund dollars; and

WHEREAS, the Sheriff and the Prosecuting Attorney have maintained a similar agreement with CMH since 2004, but the Ingham County Board of Commissioners desires to formalize that agreement with a contract for the protection of all entities involved.

THEREFORE BE IT RESOLVED, the Ingham County Board of Commissioners authorizes a Jail Diversion agreement with the Community Mental Health Authority of Clinton, Eaton, & Ingham Counties.

BE IT FURTHER RESOLVED, this agreement is inclusive of all services provided by the Community Mental Health Authority of Clinton, Eaton, & Ingham Counties at the Ingham County Jail that are funded with State General Fund dollars.

BE IT FURTHER RESOLVED, this agreement is effective October 1, 2010, and will remain in effect until terminated by any party with 60 days written notice to the other parties.

BE IT FURTHER RESOLVED, that the County Clerk, Sheriff, Prosecuting Attorney, and the Chairperson of the Board of Commissioners are hereby authorized to sign the necessary contract documents consistent with this resolution on behalf of the County after approval as to form by the County Attorney.
March 4, 2011

To: Jared Cypher, Assistant Deputy Controller  

From: Randy Marwede, Director, Veteran Affairs  

Subject: Training for Department Employees on Electronic Imaging System  

In 2009, Ingham County Commissioners approved $5,000 towards implementing an electronic imagining system for Ingham County Department of Veteran Affairs. This system will greatly enhance our Department’s ability to provide services to our clientele and is cost effective.

Kevin Douglas, Programming specialist for MIS is in the process of fine tuning the On Base software system to meet Department specific requirements and we anticipate going “live” in approximately one month. The majority of the hardware has been installed in employees work stations and a training manual is being developed.

I respectfully request consideration to close down our Department’s operations (not to include our transportation services) for Monday, April 25, 2011 so that Mr. Douglas can provide our four Department employees with the necessary training in the appropriate use of this imaging system. It is Mr. Douglas’ and my opinion that a full day of training would be appropriate.

This training is a necessity for our staff members. This will ensure a smooth transition for office staff and at the same time pose as little inconvenience to Ingham County residents as possible. Notice of this closure would be disseminated to the community via emails, posted in our office, and notice will be provided to the Lansing State Journal.

Thank you for consideration of this request.

Randy A. Marwede  

Randy A. Marwede  
Director