



***PINES BEHAVIORAL HEALTH***

*"Life should be enjoyed...not endured"*

**BRANCH COUNTY COMMUNITY  
MENTAL HEALTH SERVICES AUTHORITY  
(dba) Pines Behavioral Health  
2015 ANNUAL REPORT TO THE COMMUNITY**



# Executive Summary

The Branch County Community Mental Health Authority (dba Pines Behavioral Health) is proud to have been providing high quality and cost efficient services to adults with a severe mental illness, children with serious emotional disturbances, individuals with an intellectual/developmental disability (including autism), and persons with a substance use disorder to the residents of Branch County since 1974.

This annual report serves to provide the highlights of Pines Behavioral Health during 2015 as we learned to maneuver the many transitions, challenges and new opportunities for growth. This perseverance and resilience was made possible through the support of our board and staff, dedicated community partners and leaders, and the many advocates in our county to provide the best care for all citizens. This past year we said goodbye to John Bolton, who steadfastly led Pines for over 40 years. His leadership set the foundation for the organization’s ability to continue to rally in serving those with behavioral health needs with hope and a promise of a better future. With new leadership at hand, it is recognized that there is more work to be done in order to realize our mission to “attain the highest quality of life to those we serve throughout our assistance and support.”

Toward that end, Pines Behavioral Health

- Increased the amount of treatment services in order to better serve those most severe.
- Expanded same day services to allow for easier and more efficient access to care.
- Maintained a local approach to care, with an emphasis on *community* despite the political and financial pressures to do otherwise.

## 2015 Revenue

State & Federal	\$10,691,162
Earned Revenue	\$ 714,767
Local Funding*	<u>\$ 411,304</u>
	\$11,817,233

## 2015 Expenses

Internal Services	\$7,059,116
External Services	<u>\$4,479,739</u>
	\$11,538,855

\*As a result of the Authority Status, Branch County contributes a required match which is frozen at \$180,000, less than 2% of total revenue

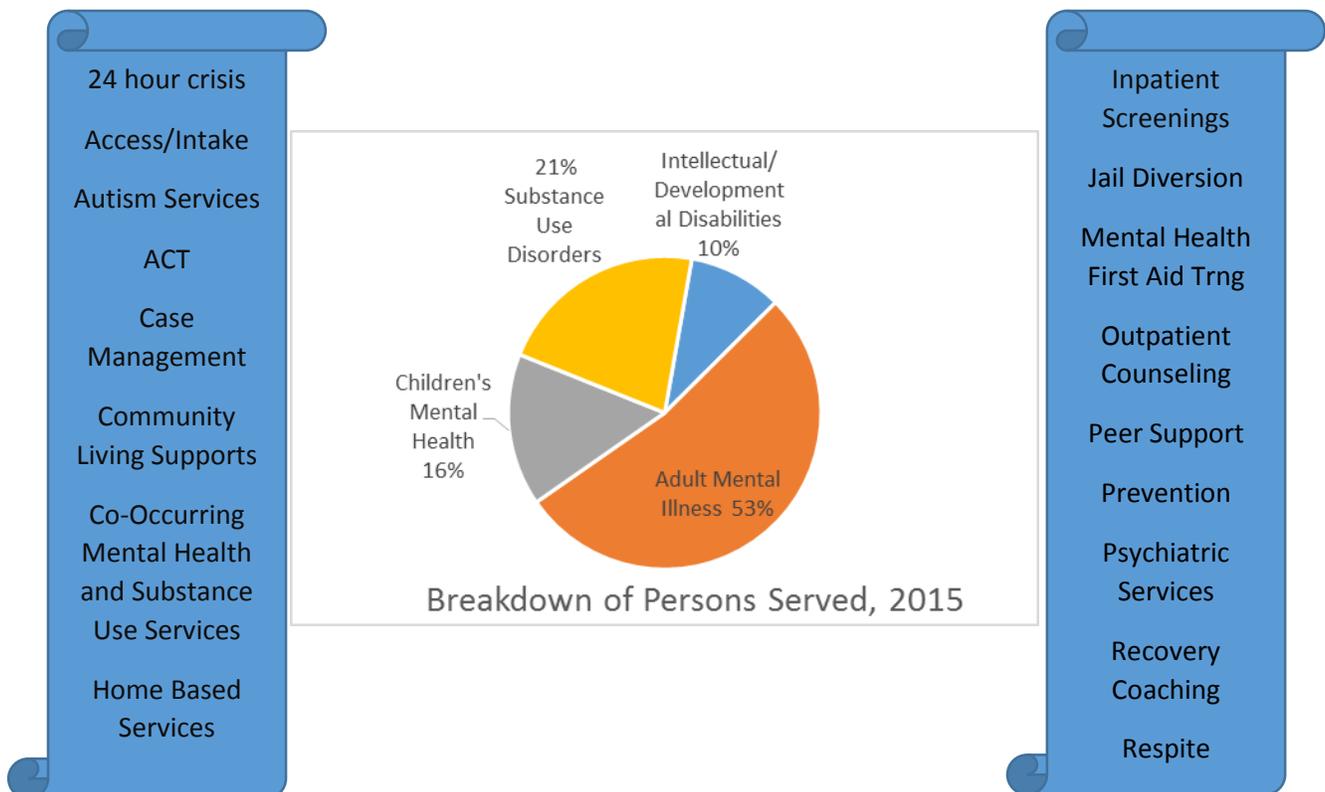
## Persons Served

	Adult Mental Health	Child Mental Health	Developmental Disability	Substance Use	Total
2015	1367	408	253	562	2590
2014	1553	406	277	426	2662
2013	1607	406	270	528	2811
2012	1629	408	270	425	2732

# Pines Programs & Services

**Services for persons with a serious mental illness:** Serious mental illness is characterized by functional limitations and medical symptoms for a duration of 6 months or longer, negatively affecting a person's life in at least three different areas. A wide variety of services are available including case management to help the person connect to resources that will assist them with obtain their basic needs, as well as social support including help with employment, housing, budgeting, and decision making. Peer services to instill hope that recovery is and will be possible, as well as therapy to help with improved coping, symptom management, and skill building. Psychiatric services are also available to treat the medical nature of the symptoms.

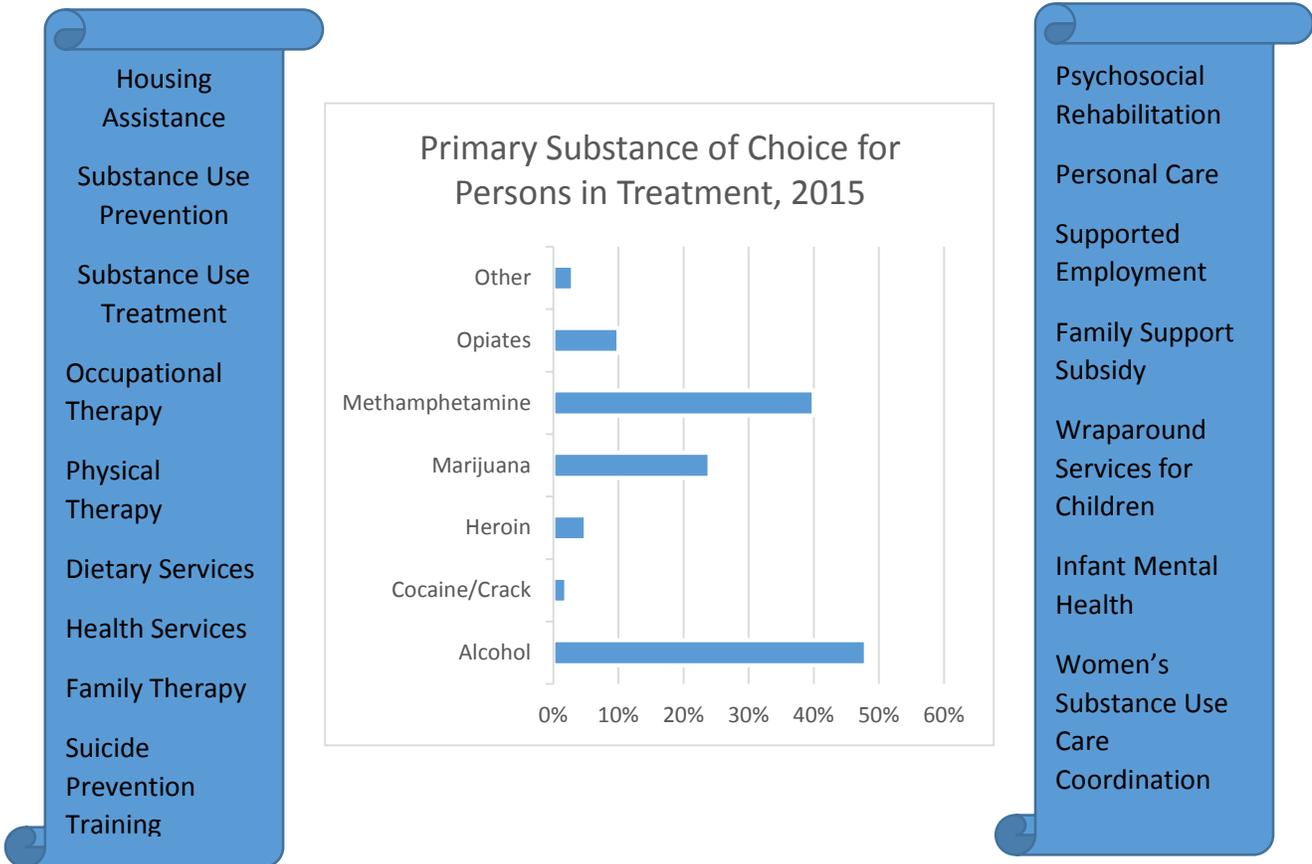
**Services for children with a serious emotional disturbance:** Serious emotional disturbances are characterized by behavioral, medical, or social concerns that affect a child or adolescent across multiple areas in life (home, school, and community), and persist for at least 6 months or longer. Case management services are available to children to assist the parents, as are traditional therapies such as individual or family counseling. Because symptoms in children are often displayed behaviorally, there are several intensive services available in the home including Home Based Services for children at risk of out of home placement, Wraparound to help coordinate multiple treatment providers, and Infant Mental Health when there is risk to the necessary bonding relationship between mother and child.



**Services for adults and children with Intellectual/Developmental Disabilities:** A

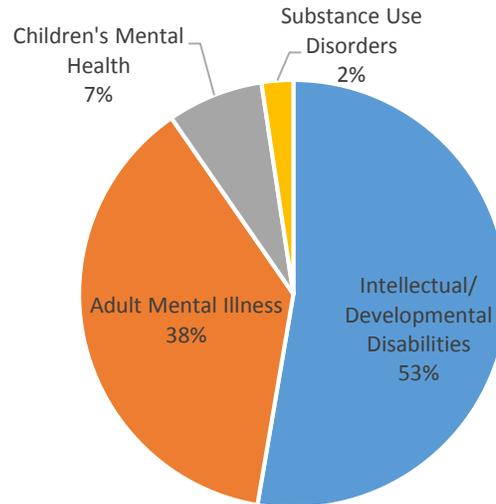
developmental disability is defined in Michigan as a physical and/or mental condition acquired before the age of 22 that is expected to last a lifetime. Persons with an intellectual or developmental disability often require specialty services such as health services, rehabilitation services, and assistance with their day to day living skills. The need for communication and social skills are also commonplace. Time outs for families and caregivers is also a much needed services. Case management services assist in connecting, acquiring, and monitoring the availability and provision of all of these specialty services.

**Services for adults and adolescents with Substance Use Disorders:** From prevention, to early intervention, to treatment and recovery support, Pines provides an array of evidenced based substance use services. Staff are dually certified to provide a combination of mental health and substance use treatment interventions at the same time, so that the person does not have to have two different therapists, but instead receiving integrated treatment. Group and individual services are provided at intensity levels to match a person’s severity of need, as well as their motivation for change. Additionally, support services are provided to assist with other life essentials affected by addiction such as case management, women’s specialty services, and recovery coaching.



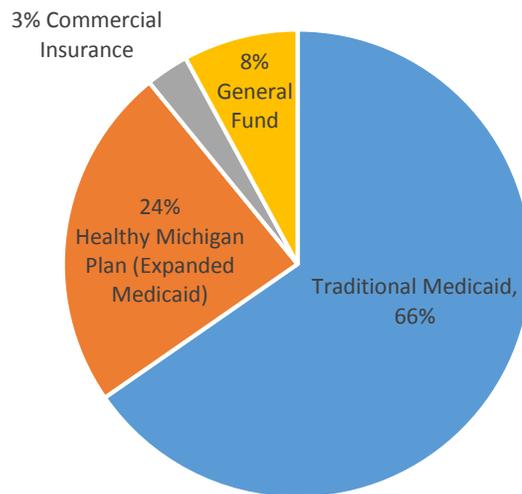
# Expenditures

Percentage of Costs by Behavioral Health Disorder



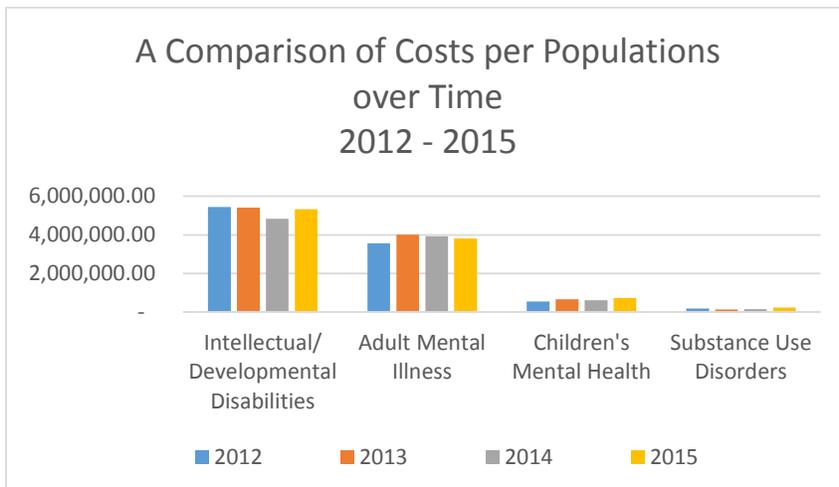
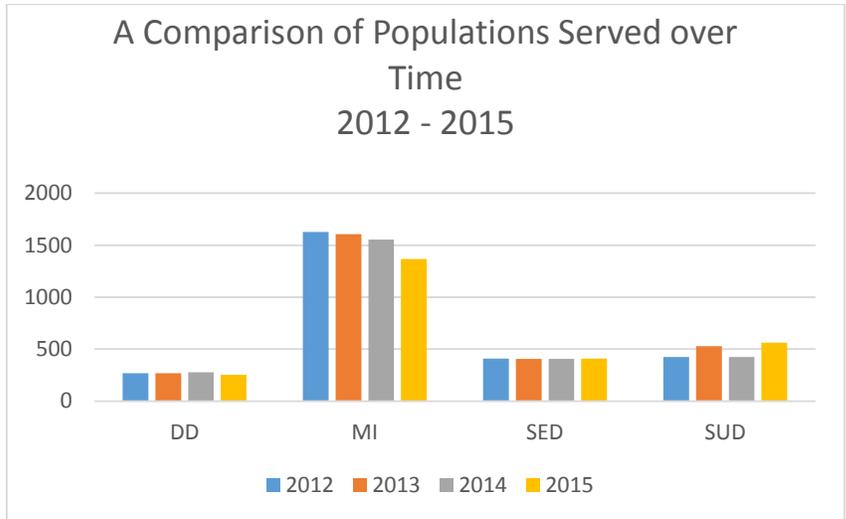
90% of Pines revenue comes from Medicaid (combination of Medicaid and Healthy Michigan Plan). Only 8% comes from the state's general fund, which is intended to serve the non-Medicaid. Services for persons with intellectual/developmental disabilities is more than half the budget given their complex conditions.

Percentage of Expenditures by Insurance



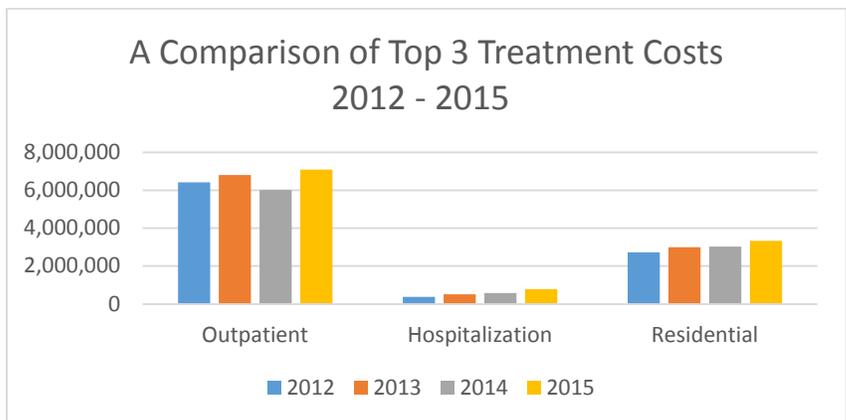
# Comparison Data

From 2012 to present, the greatest increase in population served was persons who have substance use disorder. Despite the high prevalence of substance use in Branch County and across the state, substance use funding is the lowest source of revenue from the State for which to provide services.



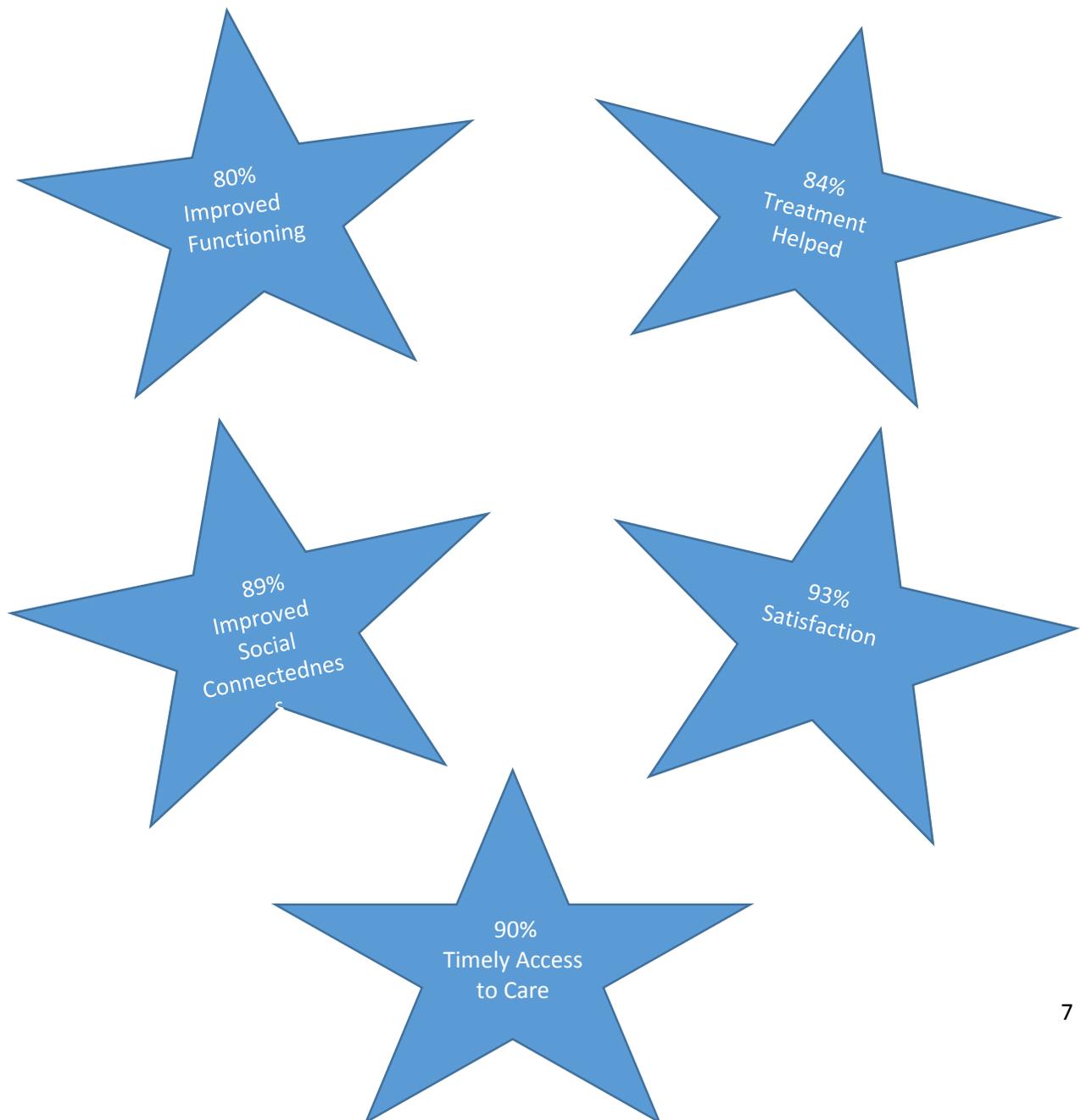
The costs associated with services for persons with intellectual/developmental disabilities has risen largely due to the new Autism benefit, and also due to complex medical concerns and the need for specialized supports for those served.

Persons initially presenting for services are often needing high cost procedures such as intensive therapy, hospitalization, or a need for 24 supervision in a residential setting.



# Satisfaction / Outcome Results

Each year, Pines conducts customer satisfaction surveys on a sample of persons served, including both adults and the families of children. These surveys are conducted telephonically by the WJ Schroer Research Firm, and include comparison scores both nationally, and across 7 other community mental health agencies similar to Pines. Based on these results, the following were noted:



# Future Directions

Over the past several years, there has been much transition for the public mental health system, including regionalization efforts, the expansion of eligible Medicaid beneficiaries, and a greater emphasis on population health and integrated behavioral health care with physical care. As a result of these transformative efforts, Pines has and continues to respond to this changing landscape while still *maintaining a focus on local needs*.

The expansion of Medicaid has resulted in a shift at the state level of who is eligible for services. While the Healthy Michigan Plan now covers the behavioral and physical health care of persons who were previously uninsured, the trade-off was a *loss of 60% general fund dollars* that used to go towards the services and supports of those that were not Medicaid covered. Unlike other community mental health agencies that subsequently have had to turn away persons who are insured by commercial insurances, Pines has been able to continue a limited amount of services for persons insured by Blue Cross, and other employer sponsored commercial insurances.

Medicaid – a combination of traditional Medicaid and Healthy Michigan Plan (expanded Medicaid) - now encompasses 90% of the funding available at Pines for mental health and substance use services. As such, our priority population as a public behavioral health safety net, are those that have the most severe symptoms, have the greatest level of functioning impairments, and/or have a substance use disorder. Our specialty, therefore, is serving non-traditional services to meet the unique needs of these individuals. An emphasis on *recovery* to instill help and providing *outreach and engagement services* are essential, and are being addressed by the addition of peer support and recovery coaching. *Same day access* to care has been expanded with all-day Wednesday walk-ins, and will expand further. With more than 60% of the people we serve having experienced trauma, a workforce that is sensitive to this fact, is competent to avoid re-traumatization, and expertise in trauma specific treatment is crucial. *Trauma informed care* will be commonplace and applicable throughout the organization.

Lastly, Pines will be spending a great deal of time learning, understanding, and applying treatment approaches that will enhance the whole person. Persons receiving behavioral health services often have additional physical health conditions as well. *Integrating the care between behavioral health and physical health* either by the type of treatment provided or evaluating the value of embedding our services in medical offices, will be at our forefront. Additionally, preventative measures will be added to assist the at-risk individual better monitor their health before complications occur will aim to improve *population health* within the community.

As we look toward the future, we see many new opportunities that lie ahead. Despite economic, political, stigma-based barriers, Pines Behavioral Health is committed to the wellness of our consumers and the citizens of Branch County. We look forward to serving the most vulnerable but resilient persons in our county as we help them realize that:

*Life is to be Enjoyed . . . Not Endured.*

# Board of Directors & Leadership Team

## Current Board of Directors

Tom Schmelzer, Chair  
Robert Montgomery, Vice-Chair  
Audrey Strong, Secretary  
Jon Houtz  
Dale Swift  
Joe Scheid  
Maureen Hutchinson  
Loren Burlingame  
Tricia Rzepka  
Carrie Stout  
Stan Bushouse  
Karl Duda

## Current Leadership Team

Sue Germann, CEO  
Sue Enos, Administrative Assistant  
Robbin Wilber, CFO  
Cathie Sutton, Office Manager  
Jean Weber, Substance Use Director  
Laura Sulak, Outpatient Director  
Tammie Winchell, Svcs/Support Director  
Darren Moore, Psych Unit Director  
Shelley Cizio, Procurement & Contracts

This report is respectfully submitted by:

Sue Germann, MPA, LLP, CAADC, CCS-M, CPC  
Chief Executive Officer  
June 30, 2016