

Contents:

CMH Association and Member Activities:	2
Lenawee CMH Announces E-race Stigma 5k.....	2
Great Lakes Mental Health Technology Transfer Center Announces Newsletter	2
CMHAM Committee Schedules, Membership, Minutes, and Information.....	2
News from Our Corporate Partners:	3
myStrength: Reducing the Need for Opiates with Scalable Digital Behavioral Health Tools.....	3
State and National Developments and Resources:	3
Report Cites \$150M Gap in Mental Health Funding	3
Report: Michigan Shorts Mental Health Industry by \$150 Million Annually	4
CMH Association Develops Focused Graphics Outlining the Causes and Solutions to the Underfunding of Michigan’s Public Mental Health System	5
MDHHS Announces Children’s Services Agency Deputy Director.....	5
Coalition Announces Legislative Forum on Michigan’s Direct Care Worker Crisis	6
National Complete Count Committee Provides Resources to Ensure Complete US Census Count	7
Nonopioid Directive Form Helps Fight Opioid Epidemic by Allowing Patients to	7
Notify Health Professionals They Don’t Want Opioids	7
Federal Judge Again Blocks States’ Work Requirements for Medicaid.....	8
CMHS Announces Resource: Advancing Health Equity in Medicaid: Emerging Value-Based Payment Innovations.....	8
Centene to Buy Meridian Health Owner WellCare for More Than \$15 billion	8
MARO Makes Call For Presentations for re:con.....	10
State Legislative Update:	10
House Upcoming Budget Hearings.....	10
Whitmer Won't Sign Budget Without Road Funding Fix.....	11
Federal Update:	11
Court Blocks Medicaid Work Requirements in Arkansas, Kentucky	11
Education Opportunities:	12
Practicing Effective Management: A Two-Day Training for Improving Relationships and Results.....	12
Pain Management Training for Social Work Professionals – Required for Licensure Renewal	12
Dialectical Behavior Therapy (DBT) Trainings for 2018/2019	13
Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019	13
Motivational Interviewing College Trainings for 2018/2019	14
Register Now for Fetal Alcohol Spectrum Disorder Trainings	14
Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings	14

CMHA WEEKLY UPDATE

SAVE THE DATE: 20th Annual Substance Use and Co-Occurring Disorders Conference.....	15
Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019.....	15
Writing Quality and Comprehensive Behavioral Support Plans.....	15
Eye Movement Desensitization and Reprocessing (EMDR) Trainings.....	15
CALL FOR PRESENTATION: CMHAM Annual Spring Conference	15
35th Annual Developmental Disabilities Conference.....	16
2019 Michigan ACE Initiative Conference	17
Miscellaneous News and Information:	17
Job Opportunity: CEO of Rose Hill Center	17
Job Opportunity: Executive Director of Network 180	17
CMH Association’s Officers and Staff Contact Information:	18
CMHAM Officers Contact Information:.....	18
CMHAM Staff Contact Information:.....	18

CMH Association and Member Activities:

Lenawee CMH Announces E-race Stigma 5k

The 5th Annual E-race the Stigma 5k will be held on Sunday, May 19th, 2019 in downtown Adrian, MI. Our goal is to increase the awareness of mental health issues with a focus on overall health and wellness; mind, body, and spirit. The run/walk will begin at the Adrian Farmers Market on Toledo St. and wind through beautiful Adrian, MI. We encourage people of all abilities to register and will hold a shortened kids dash for younger participants. All kids dash participants will receive a medal. Awards will be given to the top 3 5k finishers in each age group, male and female. For more up to date information please visit our Facebook page: <https://www.facebook.com/Eracethystigma5k/>

Learn more about and register for the race at: <https://runsignup.com/Race/MI/Adrian/ERaceStigma5K>

Great Lakes Mental Health Technology Transfer Center Announces Newsletter

As Weekly Update readers may remember, the CMH Association of Michigan is the Michigan partner to the SAMHSA-funded Great Lakes Mental Health Technology Transfer Center (GLMHTTC). Through this partnership, the CMH Association will be sponsoring a nationally-renowned Change Leadership Academy for the Association’s members and is working in partnership with the Michigan Departments of Education and Health and Human Services and the Michigan Health Endowment Fund to integrate the newly developing national mental health curriculum into Michigan schools.

Recently, the GLMHTTC announced its newly created newsletter – providing ready access to cutting edge information on a range of evidence based and promising practices. That newsletter can be accessed at: <https://mhttcnetwork.org/centers/great-lakes-mhttc/join-our-email-list?destination=/group/27/nodes>

CMHAM Committee Schedules, Membership, Minutes, and Information

Visit our website at <https://www.cmham.org/committees>

News from Our Corporate Partners:

myStrength: Reducing the Need for Opiates with Scalable Digital Behavioral Health Tools

Exceptional outcomes are associated with medication-assisted treatment (MAT), yet few consumers know about it or understand how to get access. Among opioid recovery treatment options with demonstrated efficacy, MAT rises to the top. [Download the White Paper](#)

Preliminary results from myStrength's Pain Management Randomized Controlled Trial (RCT) demonstrate that over the course of the study, individuals utilizing myStrength's digital behavioral health platform (which complements MAT) experienced:

For more, view the expert Q&A: The Role of Technology in Solving the Opioid Crisis: <https://mystrength.com/news/blog/2019/01/24/technology-and-the-opioid-epidemic-your-questions-answered>

Improved life functioning - Less need for medication and/or problematic opioid use myStrength's evidence-based, digital self-care tools inform individuals about opioid use disorders and the recovery process, and offer robust, alternative strategies to opioids and other substances, including education about gold-standard MAT.

myStrength also provides psycho-educational materials about chronic versus acute pain, working with care teams, and using behavioral health strategies like mindfulness and cognitive behavioral therapy (CBT) to work toward living life fully.

These resources are an integrated part of myStrength's platform, which also addresses depression, anxiety, insomnia, substance use, stress, borderline personality disorder, and more – many of which present as comorbid conditions.



State and National Developments and Resources:

Report Cites \$150M Gap in Mental Health Funding

Below are excerpts from a recent article in MIRS, one of the two pre-eminent capitol news outlets, underscoring the systemic underfunding of Michigan's public mental health system.

There's a \$150 million gap between the cost of health care and what's provided to Michigan's public mental health system, according to a recent analysis released by the Community Mental Health Association of Michigan (CMHAM).

The analysis (<https://cmham.org/wp-content/uploads/2019/03/CMHA-Booklet-DIGITAL.pdf>) lays out five recommendations CMHAM sees as addressing "the current crises in unmet mental health and substance use disorder needs."

Among the recommendations include restoring General Fund dollars to the system, setting Medicaid rates to match demands and costs, and removing the local match draw-down obligation from budget boilerplate. CMHAM sees these changes and others as ways to modernize the funding system.

"There are new demands, new crises and new conditions in every community throughout Michigan, which the original financing structure did not account for," said CMHAM CEO Robert SHEEHAN, in a statement. "These include the opioid crisis, incarceration of those with mental health needs, the

CMHA WEEKLY UPDATE

recognition of the prevalence of autism, increased homelessness and more -- yet the system is still operating from a decades-old funding structure."

Only 4 percent of the funding provided to the CMH system is available to serve Michiganders without Medicaid who need mental health services, according to the CMHAM press release.

"Lawmakers and community members may argue the public system has been functioning well despite funding gaps, but CMHAM warns that the current underfunded system is not sustainable long-term," according to the release.

CMHAM believes its recommendations would pave the way to stemming homelessness, poverty, incarceration and the premature death of Michiganders with intellectual and developmental disabilities, mental illness, and substance use disorders.

Report: Michigan Shorts Mental Health Industry by \$150 Million Annually

Below is an excerpt from a recent article, in Crain's Detroit Business, highlighting the gap in funding for Michigan's public mental health system

- Report by mental health providers calls for increase in funding
- Underfunding, increased demands have led to more homelessness, poverty, incarceration and unnecessary deaths
- Pilot studies to test theory that integration of physical and mental health can save costs, expand care

Increased homelessness, poverty, incarceration and deaths are predicted in Michigan by a new report that concludes there is a \$150 million gap between the cost of health care and the funding provided to the state's \$2.8 billion-plus public mental health system.

The study, which was commissioned by the Community Mental Health Association of Michigan, outlines several major changes in the population served since the current managed health care funding model was established in 1997.

Besides the opioid crisis — which resulted in more than 1,700 deaths in Michigan in 2016 alone and tens of thousands of addictions — the increased rates of incarceration of those with mental health needs and autism have caused many more problems within the system and society, the report says.

"Michiganders do not face the same mental health and substance use disorder needs that they had 20 years ago," Robert Sheehan, the mental health association's CEO, said in a statement. "There are new demands, new crises and new conditions in every community throughout Michigan, which the original financing structure did not account for. ... yet the system is still operating from a decades-old funding structure. This is the reality that the public mental health system in Michigan has faced for decades.

"Without moving toward the ambitious vision outlined by the association and addressing this outdated funding structure, Michiganders will continue to live without the mental health care that they need and expect."

Sheehan outlined five recommendations in the report to address unmet mental health and substance use disorder needs:

- Set Medicaid rates to match demands and costs. Medicaid rates account for 90 percent of the system's funding.

CMHA WEEKLY UPDATE

- Mandate Medicaid rates include contributions to risk reserves. Because of rising demand, some mental health organizations have drawn down reserves to the point where they are structurally insolvent.
- Allow for the public mental health system to hold sufficient risk reserves. Mental health agencies are not allowed to retain Medicaid savings that they generate through efficiencies and effective clinical practices.
- Remove the obligation to match state funding with local dollars to cover the gap between mandated Medicaid funding and the actual cost of care.
- Restore general fund dollars to the public mental health system. Since 2014, the state has cut general funding from agency budgets to allow people not covered by Medicaid to have access to mental health services.

The full article can be found at: <https://www.craigslist.com/health-care/report-michigan-shorts-mental-health-industry-150-million-annually>

CMH Association Develops Focused Graphics Outlining the Causes and Solutions to the Underfunding of Michigan's Public Mental Health System

Recently, the Community Mental Health Association developed two infographics which depict, with clarity and focus, the components of the problem and solutions to the systemic underfunding of Michigan's public mental health system. These infographics can be found at:

Problems: <https://macmh.a2hosted.com/wp-content/uploads/2019/03/CMHAM-Problem-Infographic-v5-bleed.pdf>

Solutions: <https://macmh.a2hosted.com/wp-content/uploads/2019/03/CMHAM-Solutions-Infographic-v4.pdf>

MDHHS Announces Children's Services Agency Deputy Director

Below are excerpts from a recent press release announcing the appointment of JooYeun Chang as the Chief Deputy for the Children's Services Agency within MDHHS.

Michigan Department of Health and Human Services (MDHHS) Director Robert Gordon today announced the appointment of JooYeun Chang as Senior Deputy Director for the Children's Services Agency. Chang has over 17 years of experience in child welfare and human service practice and policy.

Chang will lead MDHHS' Children's Services Agency, which oversees the state's child welfare system, including Children's Protective Services, the foster care system that serves approximately 13,500 children, adoption services and juvenile justice programs.

"The hard work of our staff has brought us to this threshold of great progress for the kids we serve," said Gordon. "With JooYeun's deep knowledge of what works, her diverse experiences, and her passionate commitment, we can help many more children achieve safety, gain permanency, and ultimately realize their potential."

Chang is currently Managing Director at Casey Family Programs, the nation's largest operating foundation focused on improving the child welfare system. She has led work to identify, develop and disseminate information about the most promising best practices in child welfare, including work in partnership with Michigan's Children's Services Agency.

CMHA WEEKLY UPDATE

William C. Bell Ph.D., President and CEO of Casey Family Programs shared, "JooYeun Chang is an incredibly talented and committed leader and change agent. I have had the opportunity to work with her in a variety of ways since 2007, and over those 12 years, her commitment to the well-being of all children and families has remained her focus and has never wavered. Michigan will benefit greatly from her leadership."

She previously served as head of the Children's Bureau in the Administration of Children of Families. The Children's Bureau is the first federal agency within the U.S. government to focus exclusively on improving the lives of children and families. In leading the Children's Bureau, Chang administered more than \$7 billion in federal programming to support national child protection, foster care, guardianship and adoption programs. She earned a Bachelor of Arts degree from North Carolina State University and a Juris Doctorate from the University of Miami School of Law.

Chang is expected to start her position on May 20, 2019.

Coalition Announces Legislative Forum on Michigan's Direct Care Worker Crisis

A group of statewide advocacy organizations, including the CMH Association of Michigan, is holding a legislative forum to highlight the state's direct care worker crisis. The details of the event are provided below.

LEGISLATIVE FORUM ABOUT THE DIRECT CARE WORKER CRISIS IN MICHIGAN!

WHEN: FRIDAY, APRIL 12, 2019, 8:30-10:00 AM
WHERE: IN THE GRAND ROOM OF THE KENT ISD EDUCATIONAL SERVICE CENTER
2930 Knapp St NE, Grand Rapids, MI 49525 PARKING IN LOT #11

WHY: 50,000 DIRECT CARE WORKERS ARE NEEDED TO PROVIDE CRUCIAL SUPPORTS AND SERVICES TO INDIVIDUALS WHO HAVE A MENTAL ILLNESS AND/OR DEVELOPMENTAL DISABILITY. THE COMMUNITY MENTAL HEALTH SYSTEM ALONE PROVIDES SERVICES TO APPROXIMATELY 300,000 MICHIGAN CONSTITUENTS. THIS SYSTEM DIRECTLY OR INDIRECTLY IMPACTS MORE THAN TWO MILLION MICHIGAN CITIZENS.

Inadequate wages, which are tied to Medicaid funding, have created a Direct Care Worker shortage. Turnover rates average 37%, and providers cannot compete with other businesses that offer higher wages, often with fewer work demands. People with disabilities who rely on direct care workers for essential supports are unable to access their communities, attend college, work and live full lives.

To RSVP and/or request more information or a reasonable accommodation, please contact Salli Christenson at 800 292-7851, ext. 130 or salli.c@arcmi.org

Event sponsored by:



"Protecting the Rights of Persons With Disabilities"





National Complete Count Committee Provides Resources to Ensure Complete US Census Count

Historically, the census has missed disproportionate numbers of – “hard-to-count populations” (often including persons served by the public mental health system)– leading to inequality in political power, government funding and private-sector investment for these communities. The “Census 2020 Michigan Nonprofits Count Campaign” is an ambitious effort to mobilize nonprofits and partner with state and local government to encourage participation in the census in communities that are at significant risk of being undercounted - including people with disabilities.

As the work of the Nonprofit Complete Count Committee advances, I'm hoping you will consider sharing information on the process and consequences of the census, in hopes of an inclusive and accurate count. For additional information about the work of this Committee, visit their website:

<https://becountedmi2020.com/>

Nonopioid Directive Form Helps Fight Opioid Epidemic by Allowing Patients to Notify Health Professionals They Don't Want Opioids

Below are excerpts from a recent press release on another component of Michigan's work to stem the opioid crisis.

Patients can now fill out a state form that directs health professionals and emergency medical services personnel to not administer opioids to them.

Today the Michigan Department of Health and Human Services (MDHHS) made the nonopioid directive form available to the public on its website in response to a new state law. The nonopioid directive is part of the State of Michigan's multifaceted plan to address the opioid epidemic.

“This law helps ensure nonopioid options to pain management are considered in the medical treatment of Michigan patients,” said Dr. Debra Pinals, MDHHS medical director of Behavioral Health and Forensic Programs. “Providing this supportive tool for patients to notify their health professionals that they are seeking alternatives for pain treatment is critically important for those who are most at-risk of misusing opioids, including those with a history of an opioid disorder.”

A link to the directive form can be found under “Additional Resources” at the bottom of the “Find Help Page” on Michigan's Opioid Addiction Resources website, www.michigan.gov/opioids, along with other information.

The nonopioid directive can be filled out by the patient or a person's legal guardian or patient advocate. Once submitted, the directive must be included in the patient's medical records. There are exceptions in the law, such as a provision that a prescriber or a nurse under the order of a prescriber may administer an opioid if it is deemed medically necessary for treatment.

Public Act 554 of 2018 amended the Public Health Code to provide for the form and

CMHA WEEKLY UPDATE

required MDHHS to make it available on its website by today.

Michigan has been significantly affected by the national opioid epidemic. The number of annual opioid-related overdose deaths in the state have more than tripled since 2011, from 622 to 2,053. As part of the state-government-wide plan to address the issue, MDHHS has developed an action plan that is focused on prevention, early intervention and treatment

Federal Judge Again Blocks States' Work Requirements for Medicaid

Below are excerpts from a news story regarding the recent decision by a federal judge to block the implementation of Medicaid work requirements in Kentucky and Arkansas.

For a second time in nine months, the same federal judge has struck down the Trump administration's plan to force some Medicaid recipients to work to maintain benefits.

The ruling Wednesday by U.S. District Judge James Boasberg blocks Kentucky from implementing the work requirements and Arkansas from continuing its program. More than 18,000 Arkansas enrollees have lost Medicaid coverage since the state began the mandate last summer.

Boasberg said that the approval of work requirements by the Department of Health and Human Services "is arbitrary and capricious because it did not address ... how the project would implicate the 'core' objective of Medicaid: the provision of medical coverage to the needy."

The decision could have repercussions nationally. The Trump administration has approved a total of eight states for work requirements, and seven more states are pending.

The full story can be found at: <https://www.npr.org/sections/health-shots/2019/03/27/707401647/federal-judge-again-blocks-states-work-requirements-for-medicaid>

CMHS Announces Resource: Advancing Health Equity in Medicaid: Emerging Value-Based Payment Innovations

Health care disparities persist across the United States, despite growing awareness of the issue. Black mothers are two to three times more likely to die of common pregnancy complications than white women. Minority patients, especially those with Medicaid coverage, are more likely to be diagnosed with cancer at later disease stages and experience worse survival rates compared to other patients.

Health equity is particularly salient to Medicaid programs, which are responsible for addressing the needs of diverse populations. State Medicaid agencies are well positioned to advance health equity across several categories, including: race or ethnicity, gender, sexual identity, age, disability, behavioral health diagnosis, socioeconomic status, and geographic location. Using Medicaid payment reform as a lever to promote health equity holds particular promise.

The resource can be found at: https://www.chcs.org/advancing-health-equity-in-medicaid-emerging-value-based-payment-innovations/?utm_source=CHCS+Email+Updates&utm_campaign=1bdceb220d-March+2019+Monthly+Update&utm_medium=email&utm_term=0_bbc451bf-1bdceb220d-152144421

Centene to Buy Meridian Health Owner WellCare for More Than \$15 billion

Below are excerpts from a recent article on the impending purchase, by Centene, of WellCare Health Plans (which recently purchased the Michigan-based Medicaid Health Plan, Meridian).

CMHA WEEKLY UPDATE

Health insurer Centene Corp. agreed to buy WellCare Health Plans Inc., a Tampa-based provider of Medicaid and Medicare services, for more than \$15 billion to expand in the market for government-sponsored health care.

Last year, WellCare (NYSE: WCG) bought the multi-state operations of Detroit-based Meridian Health for \$2.5 billion.

Because St. Louis-based Centene has a small operation in Michigan there is a little overlap in business, WellCare spokesman Kimbrel Arculeo told Crain's on Wednesday.

"WellCare will continue to offer its statewide prescription drug plan and provide Medicaid, Medicare and health insurance exchange (Obamacare) plans through its wholly-owned subsidiary, Meridian, in their current state through this acquisition," Arculeo, vice president of corporate communications, said in an email.

"Meridian, a WellCare company, remains committed to providing quality health care to all of our members."

Centene offered \$305.39 per share in cash and stock for WellCare, the companies said in a joint statement Wednesday. Both boards backed the transaction, which has an enterprise value of \$17.3 billion.

The deal will add to adjusted earnings per share in its second year, the companies said.

The purchase will give Centene, which focuses on Medicaid and Affordable Care Act markets, a Medicare business even as the Trump administration launches a fresh assault on Obamacare. The enlarged company would be threatened if higher courts uphold a request to wipe out the entire law, though legal experts have called that outcome unlikely.

Founded by David Cotton, M.D., and his wife, Shery, in 1997, Meridian is Michigan's largest Medicaid health plan, with more than 500,000 members, and was one of the largest family-owned for-profit managed-care companies in the nation. Overall, Meridian served about 1.1 million Medicaid, Medicare Advantage, integrated dual-eligible and health insurance marketplace members.

Sources familiar with Meridian and WellCare told Crain's that the Centene offer took the Detroit-based company and executives by total surprise. Meridian executives declined comment, referring all communication to WellCare officials in Tampa.

Susan Moore, R.N., a health care quality consultant with Ortonville-based Health Care Resources, said the merger of health plans that sell government-sponsored insurance products makes sense to build economies of scale and reduce costs.

"WellCare purchased Medicare plans in the last few years that they're still integrating into their organization, along with the purchase of Meridian," Moore said. "With the states' budgets taking huge hits for the increasing cost of Medicaid as a portion of their budgets, they're trying to economize as much as possible on payments to plans."

Moore said it is much easier to "buy" members by purchasing the plans instead of setting up new plans in markets where they don't have a presence or where they can eliminate a competitor.

"Even though WellCare is smaller, they've been very successful at winning competitive bids in new states," she said.

CMHA WEEKLY UPDATE

Meridian is also a major employer in downtown Detroit and ranked fourth on Crain's Private 200 list of largest privately held companies in metro Detroit with \$3.8 billion in 2017. The company has become a visible fixture in downtown Detroit since purchasing One Campus Martius with Dan Gilbert's Bedrock LLC in 2015 for an estimated \$140 million to \$150 million.

MARO Makes Call For Presentations for re:con

re:con (the annual conference sponsored by MARO, a partner of the CMH Association of Michigan) seeks presentations that focus on innovative service delivery models and positive outcomes. All breakout sessions will be scheduled on November 7 or 8 (Thursday & Friday) this year.



Core Purpose: Engaging people committed to removing barriers, restarting lives, and restoring community.
Vision: To establish a network of shared values through professional development, resulting in enhanced outcomes for the people we serve.

What we're looking for:

Presentation categories may include Assistive Technology, Disability Policy, Employment Opportunities, Community Access, Health and Wellness for both practitioners and persons served, Leadership Development, Independent Living, Transitions, Behavioral Health, Veterans' Services, WIOA, HCBS, Disability Specific Issues, and Professional Ethics.

For information about last year's event visit: <https://mi-recon.org/>

Proposals must be submitted by April 2, 2019 to be considered.

State Legislative Update:

House Upcoming Budget Hearings

1. House Health and Human Services subcommittee of the Standing Committee on Appropriations Rep. Mary Whiteford, Chair

DATE: Monday, April 8, 2019

TIME: 1:00 PM

PLACE: Room 352, House Appropriations, State Capitol Building, Lansing, MI

AGENDA: **Public Testimony on the FY 2019-20 Executive Budget Recommendation for the Department of Health and Human Services**

OR ANY BUSINESS PROPERLY BEFORE THIS COMMITTEE

2. House Health and Human Services subcommittee of the Standing Committee on Appropriations, Rep. Mary Whiteford, Chair

DATE: Thursday, April 11, 2019

TIME: 1:30 PM or after committees are given leave by the House to meet, whichever time is later.

PLACE: Room 352, House Appropriations, State Capitol Building, Lansing, MI

AGENDA: **Department of Health and Human Services Presentations:**

CMHA WEEKLY UPDATE

-FY 2019-20 Executive Budget Recommendation for Behavioral Health and State Hospitals, and Information Technology and Public Testimony on the DHHS FY 2019-20 Budget Recommendation

OR ANY BUSINESS PROPERLY BEFORE THIS COMMITTEE

Whitmer Won't Sign Budget Without Road Funding Fix

Gov. Gretchen Whitmer said this week she will not sign any FY20 spending plan that doesn't include a road-funding piece, a response to House and Senate Republicans ranking road funding third on their 2019 session priority list behind auto-insurance reform and the budget. Senate Majority Leader Mike Shirkey (R-Clarklake) said last week that the road funding issue and the budget process are separate, as far as the Senate Republicans are concerned.

"People need to prepare to work here and stay here until the job is done because that budget is absolutely interlinked," Whitmer said. "Our ability to fund our education system, to clean up drinking water is linked with our ability to rebuild roads in this state. So, I'm not signing anything until it's all done together." Asked if this meant this could put state government into a potential shutdown-like situation, Whitmer said, "We're not going to shut down because we're going to stay working here all summer long to get this done. "I am serious about it. The people of the state elected me because I believe they want me to fix the damn roads. They want honesty in budgeting. They want real solutions, not half measures and shell games and that's exactly what I put on the table."

An answer doesn't have to be a 45-cent-a-gallon gas tax, she repeated. If their alternative gets the state \$2.5 billion in additional funding on a yearly basis for the next 10 years, "I'm all ears. But until then, let's get serious about talking about my budget and getting it passed to fix these problems."

The scenario Whitmer is trying to head off is the Republicans sending her an FY20 spending plan with possibly some additional road-funding dollars, but nothing close to \$2.5 billion. Under the 2015 road-funding plan, the state is required to put in \$325 million in additional income tax money into the roads.

Federal Update:

Court Blocks Medicaid Work Requirements in Arkansas, Kentucky

On Wednesday, a district court judge issued a pair of decisions blocking Medicaid work requirements in Kentucky and Arkansas. Consistent with an earlier ruling, the court found that the federal government had failed to justify how adding employment requirements advanced Medicaid's central statutory objective to provide medical assistance to the state's citizens. The impact of the ruling is likely to extend beyond these two states and complicate Trump Administration plans to expand Medicaid work requirements more broadly.

IMPLICATIONS

While Judge James Boasberg's ruling applies only to Kentucky and Arkansas' programs, his reasoning for overturning the Centers for Medicare and Medicaid's (CMS) decision to approve these initiatives could extend to the other seven states that CMS has approved for work requirements in addition to the seven other states whose waiver applications are currently being reviewed by the federal government. Joan Alker, head of Georgetown's Center for Children & Families, told Politico, "The judge's ruling is a wake-up call for states considering work requirements or other barriers to coverage in Medicaid."

CMHA WEEKLY UPDATE

Although the decision did not outlaw Medicaid work requirements outright, it makes clear that the Department of Health and Human Services (HHS) Secretary does not have unlimited authority to approve waivers or “refashion the program Congress designed in any way they choose.” In other words, as Joan Alker explains “Medicaid was designed by Congress to be a health insurance program for low income people and the Trump Administration can not arbitrarily change that.”

WHAT’S NEXT?

HHS must now reevaluate Kentucky and Arkansas’ waiver approvals and decide whether they will seek an appeal. As a result, HHS may hold off on announcing any additional work requirement approvals — and states may wait to submit their requests — until this legal battle reaches its conclusion.

Kentucky Gov. Matt Bevin (R) has threatened to reverse the state’s Medicaid expansion if his Medicaid reforms do not survive legal challenges.

Education Opportunities:

Practicing Effective Management: A Two-Day Training for Improving Relationships and Results

TBD Solutions is hosting its next Practicing Effective Management Training May 8th & 9th at the Grand Rapids Chamber of Commerce. This training provides practical guidance for enhancing relationships and improving results through structured supervision, effective feedback, delegation, interviewing, time management, and employee development. This dynamic, interactive training is relevant for all levels of management.



Since 2016, TBD Solutions has proudly trained over 250 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, maintaining a 98% satisfaction rate.

Cost for this two-day training is \$500, and lunch is provided. Group discounts are also available. To learn more or register for the training, visit www.eventbrite.com/e/practicing-effective-management-training-registration-58010345505. For questions about the training, email training@TBDSolutions.com.

Pain Management Training for Social Work Professionals – Required for Licensure Renewal

Community Mental Health Association of Michigan Presents: **2-HOUR TRAINING: PAIN MANAGEMENT AND MINDFULNESS.** *This course qualifies for 2 CEs and fulfills the Michigan Social Work Licensing Board’s requirement for licensure renewal for pain management.*

April 25, 2019 - 9:00am – 11:00am (registration at 8:30am)

Location:

Community Mental Health Association of Michigan at 426 S. Walnut, Lansing, Michigan 48933

Training Fee: (includes training materials)

\$39 CMHAM Members

\$47 Non-Members

To Register:

[Click Here to Register for the April 25 from 9-11 Training!](#)

Dialectical Behavior Therapy (DBT) Trainings for 2018/2019

5-Day Comprehensive DBT Trainings

- This training is designed for CMH, CMH service providers, PIHP, and PIHP service provider staff who are directly responsible for delivering DBT.
- Due to the fact DBT is a comprehensive treatment that treats high-risk individuals, one's core training ought to be comprehensive as well.
- IT IS EXPECTED THAT ALL PARTICIPANTS WILL MAKE A FULL COMMITMENT TO ATTEND ALL 5 DAYS mindfully and will participate fully in discussion, role-plays and complete daily homework assignments.
- Participants are asked to bring a copy of "Cognitive Behavioral Treatment of Borderline Personality Disorder" by Marsha Linehan, PhD, with them to the training.
- COMPLETION OF A 2-DAY INTRODUCTION TO DBT TRAINING OR EQUIVALENT IS A PRE-REQUISITE FOR ATTENDING THIS TRAINING.
- This is NOT a training that teaches DBT skills. There will be very little focus on DBT skills. The majority of the focus of this training will be to help clinicians on how to conduct individual DBT sessions. If your goal is to come to this training in order to learn DBT skills, do not attend. By attending, you understand and consent to knowing this ahead of time.

Training Fee:

\$250 per person. Fee includes training materials, continental breakfast and lunch for 5 days.

Dates/Locations:

May 20-24, 2019 | Detroit Marriott Livonia | [REGISTER HERE](#)

June 3-7, 2019 | Best Western, Okemos | [REGISTER HERE](#)

August 12-16, 2019 | Great Wolf Lodge, Traverse City | [REGISTER HERE](#)

Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019

Course Description:

Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. This co-prevalence has been studied since the 1980s, yet despite this substantive increased risk, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated services offer superior outcomes to parallel or sequential treatments and call on providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Recovery-oriented care requires changes at a systems and individual practitioner level in areas including assessment, treatment planning, and delivery. Integrated co-occurring providers will learn about the research on integrated care including evidence-based practices (EBP), and ways to develop stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders.

This training fulfills the annual requirement for persons who are part of an IDDT team, as well as for persons providing COD services in Adult Mental Health outpatient services.

Training Fee:

\$65 per person. The fee includes training materials, continental breakfast and lunch.

CMHA WEEKLY UPDATE

Dates/Locations:

April 26, 2019 | Hotel Indigo, Traverse City | [REGISTER HERE](#)

June 19, 2019 | Okemos Conference Center | [REGISTER HERE](#)

Motivational Interviewing College Trainings for 2018/2019

4 Levels of M.I. Training offered together at 4 convenient locations!

This event is sponsored by the adult mental health block grant and is intended for persons who serve adults only through the mental health and substance abuse provider network in the state of Michigan. It contains content appropriate for CEOs, COOs, clinical directors, supervisors, case managers, support coordinators, therapists, crisis workers, peer support specialists and any other practitioners at the beginning, advanced and supervisory levels of practice.

New This Year! We are excited to add a new 2-Day TNT: Teaching Motivational Interviewing training to the lineup.

Dates/Locations:

April – Shoreline Inn Muskegon – **Many spots still available! Register ASAP to take advantage of trainings held in the West Michigan region!**

Basic: Monday & Tuesday, April 8-9, 2019

Advanced: Monday & Tuesday, April 8-9, 2019

Supervisory: Tuesday, April 9, 2019

TNT: Teaching MI: Wednesday & Thursday, April 10-11, 2019

June – Holiday Inn Marquette

Basic: Monday & Tuesday, June 10-11, 2019

Advanced: Monday & Tuesday, June 10-11, 2019

Supervisory: Monday, June 10, 2019

TNT: Teaching MI: Wednesday & Thursday, June 12-13, 2019

Training Fees: (The fees include training materials, continental breakfast and lunch each day.)

\$125 per person for all 2-day trainings (Basic, Advanced)

\$69 per person for the 1-day Supervisory training.

[CLICK HERE](#) for full training details, CE information, overnight accommodations and registration links.

Register Now for Fetal Alcohol Spectrum Disorder Trainings

Register now for three Fetal Alcohol Spectrum Disorder Trainings with presenter Dan Dubovsky, MSW – a National FASD Specialist. Registration online at www.cmham.org - We have 300 training spaces available.

May 6 – Mackinaw City

May 8 – Ann Arbor

May 9 – Kalamazoo

Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings

- April 30-May 1, 2019 – Drury Inn & Suites, Grand Rapids
- June 18-19, 2019 – Holiday Inn, Marquette
- July 16-17, 2019 – Best Western/Okemos Conference Center, Okemos
- August 13-14, 2019 – Hilton Garden Inn, Detroit
- August 27-28, 2019 – Radisson Plaza Hotel, Kalamazoo
- September 24-25, 2019 – Great Wolf Lodge, Traverse City

CMHA WEEKLY UPDATE

Visit www.cmham.org for more information.

SAVE THE DATE: 20th Annual Substance Use and Co-Occurring Disorders Conference

- September 15, 2019 - Pre-Conference Workshops – Cobo Hall, Detroit
- September 16-17, 2019 – Cobo Hall, Detroit

Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019

Community Mental Health Association of Michigan is pleased to offer 6 Ethics for Social Work & Substance Use Disorder Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC.

This training fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for ethics. This training fulfills the MCBAP approved treatment ethics code education – specific.

Trainings offered on the following date.

- April 24 – Troy [Click Here to Register for April 24](#)

Training Fees: (fee includes training material, coffee, lunch and refreshments.

\$115 CMHAM Members

\$138 Non-Members

Writing Quality and Comprehensive Behavioral Support Plans

The Writing Quality and Comprehensive Behavioral Support Plans training will be held April 12, 2019 at the Holiday Inn Express & Suites, Gaylord. This training is intended for practitioners who are responsible for writing behavior support plans through a functional analysis, as well as members of behavior support committees who are responsible for reviewing plans. Registration fee is \$45 per person. Must be pre-approved to attend. [Click here to get application form and information.](#)

Eye Movement Desensitization and Reprocessing (EMDR) Trainings

Trauma Recovery/EMDR Humanitarian Assistance Programs presents Eye Movement Desensitization and Reprocessing (EMDR). EMDR Basic Training consists of Weekend I and Weekend II Training. Each training event is three days of didactic and supervised practice. To complete Trauma Recovery/HAP's EMDR Training, each participant is required to complete 10 hours of consultation. Each participant/agency must arrange for consultation hours on their own, through the HAP Consultant Directory. Location of Training:

Kellogg Hotel and Conference Center, 219 S Harrison Rd, East Lansing, MI 48824

Dates: May 16-18, 2019 (Thursday-Saturday). Registration: 8:00am-8:30am and Training: 8:30 a.m. to 5:00 p.m. Part II – Dates to be determined by the group

Cost: \$150.00 fee for Part I (fee does not include consultation and books). The fee for each staff person is \$300 (which includes Part I and Part II). Both Part I and Part II are required to be completed as part of the training. Participants will be responsible for own hotel/mileage and some meals. The average range consultants tend to charge is between \$25 to \$50 per person per group consultation hour; and between \$50 to \$100 per person for individual consultation hour. If interested in EMDR, please email awilson@cmham.org

CALL FOR PRESENTATION: CMHAM Annual Spring Conference

We're looking for the Best of the Best! Submit your workshop ideas by April 4, 2019.

The CMHAM Annual Spring Conference will be held on:

CMHA WEEKLY UPDATE

June 10, 2019: Pre-Conference Institutes
June 11 & 12, 2019: Full Conference
Suburban Collection Showplace, Novi, Michigan

[Click Here to Download Presentation Submission Form!](#)

Note: Hotel reservation and Conference registration are not available at this time.

35th Annual Developmental Disabilities Conference

The Annual Developmental Disabilities Conference will focus on issues related to healthcare, social, community, and educational services which are of critical importance to the future of persons with DD. The program will provide an overview of issues related to the spectrum of services currently available as well as strategies for enhancing these services. This educational program is designed for physicians, nurses, psychologists, social workers, therapists, dietitians, educators, home care providers, and other professionals interested in the delivery of care and services to persons with developmental disabilities.

For more information, please contact Courtney Puffer. Courtney.Puffer@med.wmich.edu or (269) 337-4305

Date & Location

Tues., April 16, 2019, 7:30 AM – Wed., April 17, 2019, 4:30 PM, Kellogg Hotel & Conference Center, East Lansing, MI

Objectives

- Identify effective methods for the practical application of concepts related to improving the delivery of services for persons with developmental disabilities.
- Identify advances in clinical assessment and management of selected health care issues related to persons with developmental disabilities.
- Discuss the ethical issues related to persons with developmental disabilities.
- Identify and emphasize attitudes that enhance the opportunities for persons with developmental disabilities to achieve their optimal potential.
- Develop strategies to promote community inclusion in meeting the needs of persons with developmental disabilities.

Registration: Register at: wmed.cloud-cme.com/2019DDConference

REGISTRATION FEES

When registering please use your personal log-in to access your CloudCME account. If you do not have an account, you must create one using your email. If you have trouble navigating this process, please do not hesitate to contact the Conference Coordinator.

- Early Bird Discounts, postmarked before March 1:
\$185, Tuesday Only; \$185, Wednesday Only; \$245, Two Days, entire conference
- Regular Registration, postmarked March 1-31:
\$205, Tuesday Only; \$205, Wednesday Only; \$260, Two Days, entire conference
- Late Registration, postmarked after April 1 or onsite:
\$230, Tuesday Only; \$230, Wednesday Only; \$280, Two Days, entire conference

By registering, you agree to the terms of our photo release policy listed under Conference Info.

By registering, you also agree to the current cancellation policy listed below. Your confirmation email will be sent via email. Attendees must log-in to register - if you have issues logging-in, please contact ce@med.wmich.edu for assistance. All cancellations must be received in writing email, and are subject to a 10% cancellation fee. If you cancel with 1-6 business days notice, between April 8th and April 15th, you will receive a 50% refund. No refunds will be issued after the conference begins. Send cancellation notices to ce@med.wmich.edu.

2019 Michigan ACE Initiative Conference

WHEN: May 23, 2019 from 10:00 a.m. to 3:00 p.m.

WHERE: Eagle Eye Banquet Center, 15500 Chandler Road, Bath, MI

WHAT: The Michigan ACE Initiative was created just over two years ago and has successfully devoted its energy to provide awareness of the impact of Adverse Childhood Experiences in Michigan. While we will continue to create awareness, it is now time to shift the focus of our conversation to the next step—resilience.

Our 2019 conference has been designed with resilience in mind, in a way that is coordinated, based on science and best practices, and one in which local and state synergies are created. Join us to continue to reduce the impact of Adverse Childhood Experience in Michigan.

WHO: Our featured speakers include:

- Christina Bethell, PhD, MBA, MPH, Professor, Bloomberg School of Public Health, Johns Hopkins University and Director, Child and Adolescent Health Measurement Initiative, Baltimore, MD
- Lynn Waymer, Vice President of Community Engagement, KPJR Films, Atlanta, GA
- And the premiere of the Michigan ACE Initiative Video: Resilience

To register and for lodging information and the conference agenda, go to: www.regonline.com/2019ace

For questions, contact Diane Drago, Conference Coordinator, ddrago@dmsevents.com 734-747-2746

Miscellaneous News and Information:

Job Opportunity: CEO of Rose Hill Center

Kittleman & Associates is pleased and honored to announce the search for the next President & CEO of Rose Hill Center in Holly, Michigan, and I wanted to make sure that you saw the attached Position Guide.

As one of the nation's leading long-term mental health facilities, Rose Hill Center in Holly, Michigan offers comprehensive psychiatric treatment and residential rehabilitation programs for adults, 18 and over, on 400 serene acres close to major amenities offered by Ann Arbor and the greater Detroit region. With an emphasis on Recovery, the programs offered by Rose Hill provide individuals with the insights, life skills, attitudes, opportunities and medication management needed to manage their illness and live fulfilling lives. Rose Hill provides five levels of mental health treatment that are supported largely through private pay with financial assistance provided through the Rose Hill Foundation as well as through Community Mental Health (Medicaid) and commercial insurance. <https://www.rosehillcenter.org/>

Job Opportunity: Executive Director of Network 180

Network180 is seeking its next Executive Director to direct the management and delivery of a complete array of mental health, intellectual /developmental disability, and substance abuse services to the citizens of Kent County, Michigan. With an annual budget of over \$140 million, Network180 annually serves over 18,000 individuals in Kent County through a network of over 30 non-profit providers. Interested candidates can apply through our website at: <http://www.network180.org/en/employment/employment-opportunities>.

CMHA WEEKLY UPDATE

CMH Association's Officers and Staff Contact Information:

CMHAM Officers Contact Information:

The Officers of the CMH Association of Michigan recently proposed, in their commitment to fostering dialogue among the members of the Association with the Association's leaders, that their contact information be shared with the Association membership. While this dialogue will not take the place of the regular dialogue and decision making that occurs during the meetings of the Association's Executive Board, Steering Committee, Provider Alliance, Association Committees, Directors Forum, PIHP CEOs meeting, nor any of the great number of Association-sponsored and supported dialogue venues, the Officers want to ensure that the members of the Association can reach them to discuss issues of interest to the Association's members. The contact information for the officers is provided below:

President: Joe Stone Stonejoe09@gmail.com; (989) 390-2284
First Vice President: Lois Shulman; Loisshulman@comcast.net; (248) 361-0219
Second Vice President: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124
Secretary: Cathy Kellerman; balcat3@live.com; (231) 924-3972
Treasurer: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451
Immediate Past President: Bill Davie; bill49866@gmail.com; (906) 226-4063

CMHAM Staff Contact Information:

CMH Association staff can be contacted at (517) 374-6848 and via the e-mail addresses below:

Alan Bolter, Associate Director, abolter@cmham.org
Christina Ward, Director of Education and Training, cward@cmham.org
Monique Francis, Executive Secretary/Committee Clerk, mfrancis@cmham.org
Nakia Payton, Data-Entry Clerk/Receptionist, npayton@cmham.org
Dana Ferguson, Accounting Clerk, dferguson@cmham.org
Michelle Dee, Accounting Assistant, acctassistant@cmham.org
Anne Wilson, Training and Meeting Planner, awilson@cmham.org
Chris Lincoln, Training and Meeting Planner, clincoln@cmham.org
Carly Sanford, Training and Meeting Planner, csanford@cmham.org
Bethany Rademacher, Training and Meeting Planner, brademacher@cmham.org
Jodi Johnson, Training and Meeting Planner, jjohnson@cmham.org
Alexandra Risher, Training and Meeting Planner, arisher@cmham.org
Robert Sheehan, CEO, rsheehan@cmham.org