

September 13, 2019

## Contents:

Note: To aid Weekly Update readers in finding the newest resources, those Weekly Update articles that are new are noted as "New!" in the table of contents and in the body of the document.

<b>CMH Association and Member Activities:</b> .....	<b>2</b>
New! Coming Up for Air Movie Premiere.....	2
New! Chief Jim Blocker Chosen 2019 Police Chief of the Year by CIT International .....	3
Summit Pointe Receives Full CARF Accreditation.....	4
Central Michigan CMH Medical Director Named to National Integrated Care Advisory Council .....	5
Kalamazoo CMH Changes Its Name.....	5
Detroit-Wayne MHA Undergoes Name Change .....	6
CHI2 Releases Analysis of Causes of Public Mental Health System Fiscal Distress.....	7
Seeking Nominations: Nick Filonow Award of Excellence for 2019 .....	8
CMHA Committee Schedules, Membership, Minutes, and Information .....	8
<b>News from Our Preferred Corporate Partners:</b> .....	<b>8</b>
myStrength: Digital Solution for Behavioral Healthcare Staff Shortages and Rampant Consumer Demand ..	8
Relias Announces Webinar on Staff Retention: Keep Your Staff by Giving Them What They Need .....	9
<b>State and National Developments and Resources:</b> .....	<b>9</b>
Requirements Relaxed to Ensure Strong Supply of ABA Clinicians.....	9
MDHHS Announces Efforts to Prepare HMP Enrollees for Work Requirements .....	10
MDHHS Announces Suicide Prevention Resources for Suicide Prevention Week .....	11
Expansion Coming for Program that Helps Seriously Mentally Ill in Northern Michigan .....	12
New Report Shows Employment Rate Increased for Individuals with Serious Mental Illness .....	13
Resources to Fight Rural Drug Addiction Announced.....	14
NYT Essay Addresses Early Intervention to Address Psychosis.....	14
Trump Administration Grants Michigan \$28M to 'Smash the Grip' of Opioid Crisis .....	15
<b>State Legislative Update:</b> .....	<b>15</b>
New! Budget Process Moving Forward .....	15
Governor Orders All Flavored Vaping Products Off Shelves.....	15
<b>Federal Update:</b> .....	<b>16</b>
New! Senate Appropriators Postpone Work on FY20 Health Funding .....	16
<b>Education Opportunities:</b> .....	<b>16</b>

## CMHA WEEKLY UPDATE

Save the Date for the 2019 CMHA Fall Conference.....	16
Annual Recipient Rights Conference .....	16
Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings.....	17
Save the Date for the 2019 Annual Home and Community Based Waiver Conference .....	17
UPDATED: Calhoun County Hosts Annual Michigan CIT Conference in Battle Creek! .....	18
Michigan League for Public Policy Forum on Racial Equity Announced.....	18
Great Lakes Health Connect Announces Summit.....	19
<b>Miscellaneous News and Information:.....</b>	<b>19</b>
<b>CMH Association’s Officers and Staff Contact Information:.....</b>	<b>19</b>
CMHA Officers Contact Information:.....	19
CMHA Staff Contact Information: .....	20

## CMH Association and Member Activities:

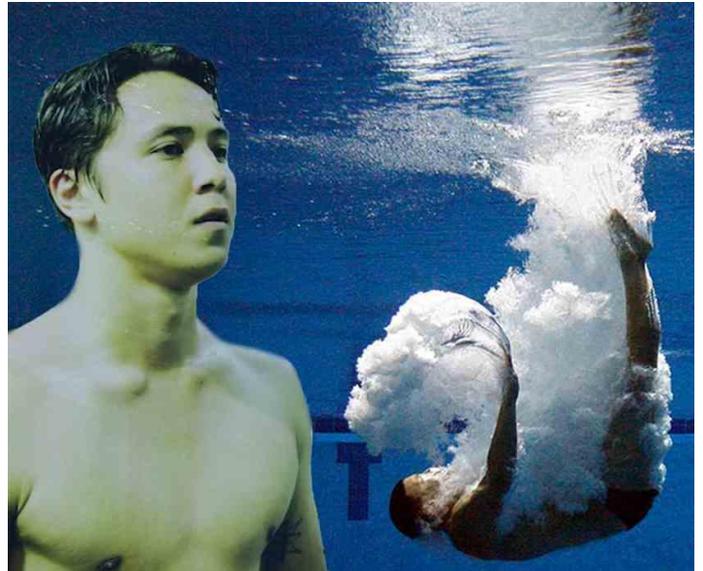
### New! Coming Up for Air Movie Premiere

*Stan is an A-grade, diving champ – looking at an Olympic spot in the men’s 10m dive team.*

*Anna, his mom, is raising him on her own. But has the pressure to succeed got to him? Can he handle the stress of high-stakes athletic competition as well as his academic grades?*

*Suddenly, his grades and his dives start to fall off and he withdraws into himself with potentially tragic consequences.*

*Coming Up for Air is a breathtaking family drama which takes audiences on an all-too-common journey, highlighting the importance of mental health care, sensible gun safety laws and the pressures that are put upon teenagers to succeed.*



The film “Coming Up for Air” offers insight on the key role caregivers play helping people with mental health challenges. The film is locally recognized for being produced and filmed in Michigan.

- Wednesday, September 18, 2019 at 6:30pm
  - Dogwood Center – Fremont, MI
  - No cost to attend, but registration is required
  - Light dinner provided to the first 325 people at 5:30pm
  - Sponsored by Newaygo County Mental Health
  - To register for tickets, please visit [www.newaygocmh.org](http://www.newaygocmh.org). Questions? Call (800) 968-7330

The film is playing daily Sept. 20-26 at Celebration Cinema Lansing four to six times a day. Also, at 25 other theaters across the midwest and in Florida. Details at [comingupforairmovie.com/events-1](http://comingupforairmovie.com/events-1)

## CMHA WEEKLY UPDATE

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The updated trailer is at <https://vimeo.com/356881427> See information below regarding an event in Lansing with NAMI, CMH and other community partners.

Dear Community Partners,

In collaboration with Community Mental Health Authority of Clinton, Eaton and Ingham Counties, The Greater Lansing 100+ Women Who Care and other community sponsors, NAMI Lansing would like to share our upcoming Mental Illness Awareness Week Events. ***In particular***, I am asking for your participation in the program:

**Program:** Youth Mental Health: A Community Conversation.

**Date:** Monday October 7th, 2019 starting at 6:30 PM

**Location:** Alfreda Schmidt Community Center @ 5825 Wise Road Lansing, MI - in the Auditorium.

The Community Conversation will consist of clips from the new Michigan made movie: ***Coming Up For Air*** and then a panel discussion. We are happy to share that we will have an amazing diverse panel of experts including Dr. Carmen McIntyre, members of the Tri-County Lifesavers, Sara Lurie from CMHA-CEI member of NAMI Lansing, and young adults who will share their story of struggle and recovery. Programs in the Tri-County area that emphasize resiliency will be on display.

***Please share this information within your organizations.***

There is an opportunity to see the film, as it premieres prior to the Community Conversation. Seeing the movie ***Coming Up For Air*** in advance will help to enrich our community conversation - see the following link for the trailer: <https://vimeo.com/356881427>

***Here in Lansing, the film will be shown Celebration Cinema in Lansing @ 200 E Edgewood Blvd, Lansing, MI 48911 from September 20 - 26th, 2019. Leaders are encouraged to promote the film and the community conversation within their networks.***

***Please see below the information about where the movie is being shown around the state and country. I have attached flyers for the youth event and "overall". Please share the Youth Mental Health Flyer and "overall" flyer. For the other programs listed on the "overall flyer", we will happily share the flyers if you would like to also share those in your network.***

Margaret M. Keeler  
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see: [www.namilansing.org](http://www.namilansing.org)

***Upcoming events:***

[Mental Illness Awareness Week Events](#)  
[NAMI Walks Grand Rapids: 10/12/2019](#)

### **New! Chief Jim Blocker Chosen 2019 Police Chief of the Year by CIT International**

BATTLE CREEK - For years Battle Creek Police Chief Jim Blocker has held a strong commitment to understanding the impact of mental illness on policing and strengthening the relationship between mental

health professionals and community law enforcement. At the Tuesday, August 6 Summit Pointe Board Meeting it was announced that Chief Blocker has been awarded well-deserved national recognition for his efforts by being selected 2019 Police Chief of the Year by CIT International.

Chief Blocker has worked tirelessly to promote improved relationships between mental health providers and law enforcement. In 2015, following two incidents involving police and individuals with mental health needs, he recognized the vital need for crisis training and actively pursued a partnership with local mental health professionals to help provide specialized training and education to law enforcement.

Since its inception, a total of 61 officers from the Battle Creek Police Department, Calhoun County Sheriff's Office, Albion Department of Public Safety, Marshall Police Department, Emmett Township Public Safety, the Tribal Police and Veteran's Administration have completed CIT training. There have been 450 CIT contacts since 2017, resulting in eight individuals transported to jail. Others received mental health evaluations, were resolved on the scene or referred to other community resources.

"Our community is very fortunate to have a visionary like Chief Blocker," said Jeannie Goodrich, CEO of Summit Pointe. "Chief Blocker has exhibited a sound understanding of the importance of identifying individuals experiencing a mental health crisis and has been open to learning about mental illness and treatment options. Early on he recognized the increase in incidences between law enforcement and people with mental health issues and sought a solution that would benefit all parties involved. He has worked tirelessly to implement positive change in how we resolve crisis situations and our community has benefited."

Goodrich stressed that Chief Blocker was a catalyst in bringing CIT to our community, and continues to be a champion for the program by spending countless hours increasing awareness about the benefits of CIT. This includes educating local businesses, clergy, hospitals, and community organizations including rotary clubs, nonprofit's, and advocacy groups, she said.

Chief Blocker's dedicated approach to CIT and his unique ability to foster positive relationships has had a tremendous impact on our community. In addition to local efforts, he has been active at the state level to introduce legislation and standards for Michigan. He has made a commitment to helping support the statewide CIT Conference, to be held in Battle Creek at McCamly Plaza Hotel October 3-4.

"Chief Blocker is a tireless advocate for improved community policing not only in Battle Creek, but statewide," Meghan Taft, CIT Coordinator said. "The level of success CIT has experienced are clearly the result of his vision, leadership and support."

According to Brenda Hunt, Battle Creek Community Foundation CEO, the success of the CIT program in our community was instrumental to Battle Creek being chosen as an All-American city.

"The work of CIT was well documented in the All American Cities Award application process, and was a key component of the All American Cities Award application and selection process," Hunt said. "This leadership recognition of our Police Chief is another example of the depth and quality of the work taking place right here in our community! Congratulations Chief!"

Chief Blocker will receive his award during an Awards Luncheon at the CIT International Conference August 27 in Seattle, WA.

### **Summit Pointe Receives Full CARF Accreditation**

Below is a recent announcement, from Summit Pointe, the CMH serving Calhoun County, of the recent receipt of full three-year accreditation by the national accrediting body, CARF. Congratulations to Summit Pointe.

Summit Pointe is pleased to announce that they were awarded a Three-Year Accreditation from The Commission on Accreditation of Rehabilitation Facilities (CARF) in June. This is the first attempt at CARF accreditation that Summit Pointe has pursued and is the highest level of accreditation that can be awarded.

This recognition applies to all of Summit Pointe's Case Management Programs, Outpatient Treatment Services, and their Assertive Community Treatment Program. Additionally, all three of their Crisis Intervention programs have been accredited including Mobile Crisis, Intensive Crisis Stabilization, as well as their Recovery Center which has also provided social detox services since opening in March 2017.

The on-site survey occurred in late April of this year and included CARF surveyors interviewing multiple customers, board members and staff and observing the operations at four Summit Pointe locations. In addition, a substantial review was conducted of Summit Pointe's organizational documents and activities in which the organization has implemented to assure quality services are being provided to the customers of Calhoun County.

The CARF Accreditation Report outlined the many strengths of the organization, including its methods for obtaining input from their stakeholders, the relationships and collaborations with an extensive network of community partners, a unique performance measurement system that drives improvements in operations and service delivery, and well written policies, procedures and plans that provide clear guidance for its staff. These achievements exemplify the organization's dedication and commitment to improving the quality of care for their customers and looks forward to the ongoing consultation with CARF.

### **Central Michigan CMH Medical Director Named to National Integrated Care Advisory Council**

Below is a recent announcement from Community Mental Health of Central Michigan (CMHCMH) regarding the appointment of CMHCM's Medical Director to the National Council's Integrated Care Advisory Council.

CMHCM proudly announces that Angela Pinheiro, M.D., CMHCM Medical Director is invited to participate on the newly convening Integrated Care Advisory Council for the National Council for Behavioral Health. The role of the Advisory Council will be to provide strategic guidance to inform the development of practical tools and resources to support communities, individual practitioners, providers and states advance integrated care. The National Council for Behavioral Health was awarded the Center of Excellence for Integrated Health Solutions by the Substance Abuse and Mental Health Services Administration (SAMHSA). Their aim is to advance the implementation of high quality, evidence-based treatment for individuals with co-occurring physical and mental health conditions, including substance use disorders.

### **Kalamazoo CMH Changes Its Name**

Below is a recent announcement from Kalamazoo Community Mental Health & Substance Abuse Services regarding its new name.

As of Oct. 1, 2019, the agency known as Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS) will take on a new name: Integrated Services of Kalamazoo (ISK).

For more than 30 years, KCMHSAS has served youth, families and adults with mental health challenges, intellectual and developmental disabilities and substance use disorders in Kalamazoo

County. From Oct. 1, 2017 through Sept. 30, 2018, KCMHSAS served nearly 8,000 individuals, either directly through KCMHSAS service programs or through a network of provider agencies that contract with KCMHSAS. The agency is one of 46 Community Mental Health Services Programs in Michigan.

Jeff Patton, CEO of KCMHSAS, said the new name will better reflect the agency's expanded programming beyond traditional community mental health services. "In recent years, we've extended our services to include comprehensive housing assistance and outreach to homeless persons, crisis response to opioid overdoses, veteran services, stigma-reduction efforts and community training in Mental Health First Aid," Patton explained. "'Integrated Services of Kalamazoo' builds on our agency's current name-recognition and reflects our ongoing collaboration with community partners."

When considering options for a new name, the agency sought input from the people KCMHSAS serves, as well as staff and providers. Without singling out any specific conditions (like mental illness or substance use disorders), the new name conveys wider access to a range of resources, Patton said. In addition, it retires the term "substance abuse," which has been recognized as stigmatizing.

Integrated Services of Kalamazoo is also much shorter, quicker to say and easier to abbreviate, Patton noted. "We've expanded our services but streamlined our name. I think that's a fair trade."

The new name officially takes effect on Tuesday, Oct. 1, at the beginning of the agency's new fiscal year. Patton emphasized that all services, locations and staff will remain the same, and individuals who receive services will not notice any change other than the name. Much of the agency's signage will be changed right away, while some materials may retain the former name until current stock is depleted, for cost savings.

### **Detroit-Wayne MHA Undergoes Name Change**

Below is a recent announcement, from Detroit-Wayne Mental Health Authority, of its name change.

The Detroit Wayne Mental Health Authority is changing its name to the Detroit Wayne Integrated Health Network in an effort to more accurately reflect the direction of the organization, which is taking a more holistic approach to the care it provides to the 75,000 children and adults it serves in Wayne County.

"We are moving more toward the intersection of behavioral and physical health to provide a fully integrated system of care to the people we serve and we wanted our name to reflect the change as well," said President and CEO Willie E. Brooks, Jr. "We want people to know we provide services and supports to a wide range of populations including children with serious emotional disturbance, those with intellectual and developmental disabilities and individuals with substance use disorder and mental illness."

Changing the name of the organization will not affect the citizens or the services that DWMHA offers. They will continue receiving services by their Providers, in the locations they are accustomed to and they will still be able to contact any staff at the Authority, as their contact information will remain the same.

The DWIHN Board of Directors approved the name change several months ago and believes it will fully encompass all of the services and supports offered by its provider network which include ensuring quality of care, treatment and consistency to the people we serve. In addition, the organization will continue to focus on establishing itself as a national leader that improves the behavioral and overall health of the communities it serves.

"The timing is right for this change as we are in the midst of a system transformation where we are changing the way we do business by working directly with our Service Providers and offering a more holistic approach to care," said Brooks. "We are also beginning a pilot project, so we can provide the best possible services and supports to people."

The name change is effective October 1, 2019. Please follow the link to a short video.  
<https://youtu.be/IKWRbo7v6h8>

### **CHI2 Releases Analysis of Causes of Public Mental Health System Fiscal Distress**

The Center for Healthcare Integration and Innovation (CHI2), the CMH Association's policy analysis arm, has recently issued a study on the causes of the fiscal distress faced by Michigan's public mental health system. This study "The perfect storm for fiscal distress in Michigan's public mental health system" aggregates a number of the analyses carried out by CMHA over the past several years. That press release announcing its completion is attached. This study and the related media relations effort are part of the Association's efforts to highlight the real causes of the fiscal distress experienced by the members of CMHA – the backbone of the state's public mental health system and safety net.

Below are excerpts from the paper:

The Center for Healthcare Integration and Innovation (CHI2) examined financial and service delivery records of Michigan's public mental health system – its Community Mental Health Centers (CMHs), Prepaid Inpatient Health Plans (PIHPs), and provider network - to determine the causes of the fiscal distress experienced by this system from Fiscal Year 2014 through FY 2019.

That study found that the convergence of a number of factors, starting in 2014 led to the sustained, system-wide revenue shortages and event deeper fiscal distress in a number of regions throughout the state.

The causes of system-wide fiscal distress, all tied to the changes initiated in 2014, were identified as:

1. State funding to public mental health system not keeping pace with increased demand and health care cost increases, from FY 2014 to the present (the gap averaged \$100 million for each of the last three years)
2. Deep cut of \$200 million (representing a 60% cut) in General Fund support eliminated a key part of CMH fiscal infrastructure
3. Increased demand for substance use disorder services, especially opioid treatment
4. Dramatically expanding autism benefit without matching revenues
5. Revenue loss (an 80% cut in per enrollee revenues) due to high cost traditional Medicaid enrollees moving to low revenue Healthy Michigan Plan
6. Failure of the state to fund federally required contributions to public mental health system's risk reserves
7. Inappropriate state demand that county funds be used to close Medicaid funding gap

Causes of uneven impact of fiscal distress across the state - 2014 to the present

1. Widely disparate impact of FY 2016 and FY 2018 Medicaid ratesetting
2. Dramatic differences in demand for services not matched by funding
3. Uneven distribution of high-value Habilitative Support Waiver dollars

## Seeking Nominations: Nick Filonow Award of Excellence for 2019

The Nick Filonow Award of Excellence recognizes eligible individuals, committees or groups that have made a significant contribution or effort to improve the public mental health community-based system at a local or state-wide level through finance, technology or quality efforts.

Nominations may be submitted by any of the following eligible member groups:

- CMHSP
- CMHA Affiliate Member Agency
- CMHA Executive Board
- PIHP
- CMHA Standing Committee

**DEADLINE FOR NOMINATIONS IS OCTOBER 1<sup>ST</sup>, 2019 AT 5:00PM.** All nominations will be reviewed by the Improving Outcomes Conference Planning Committee. Award recommendations will be based on the quality of the nomination, its support information and attachments, not the number of nominations an individual receives. The award will be presented during the CMHA Improving Outcomes December Conference.

The nomination application can be found on the CMHA event page [HERE](#) under the 'documents' section. To be considered, nominations must be emailed to Chris Ward at [cward@cmham.org](mailto:cward@cmham.org).

## CMHA Committee Schedules, Membership, Minutes, and Information

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

## News from Our Preferred Corporate Partners:

### myStrength: Digital Solution for Behavioral Healthcare Staff Shortages and Rampant Consumer Demand

Across the U.S., a staggering 77% of counties have underserved behavioral healthcare needs. And within the next six years, providers will face an estimated shortage of more than 250,000 behavioral health professionals. Lack of access to care is culminating in a crisis for the U.S. healthcare system resulting in poor outcomes, over-dependence on emergency departments, lower quality of care, reduced consumer satisfaction, and increasing costs.

Technology can help. Staff are increasingly stressed due to heavy caseload burdens and administrative work demands. Digital solutions can ease these burdens by helping meet clinical patient needs, especially those with less acute issues. myStrength's scalable, HIPAA-compliant digital behavioral health platform offers evidence-based tools that extend reach and allow clinicians to work at the high-end of their licensure by focusing on the needs of the most needy and vulnerable patients. Offering bridge support between treatment sessions, myStrength's mobile and web self-care tools are proven to drive improved outcomes and cost savings

[Request a Demo](#)

### Relias Announces Webinar on Staff Retention: Keep Your Staff by Giving Them What They Need

When your staff feels supported and prepared, they are more likely to stay in their roles than leave for another position, whether at a different organization or in a different field altogether.

Last week, two of our product managers, Melissa Lewis-Stoner and Justin Hess, hosted a fantastic webinar to demonstrate how using assessments and learning in combination can help your employees feel more competent and effective in their jobs.

While the live webinar has come and gone, you can still watch it on demand and read the full Q&A that followed.

Enjoy!

[Watch the Webinar](#)

[Read the Q&A](#)

## State and National Developments and Resources:

### Requirements Relaxed to Ensure Strong Supply of ABA Clinicians

The Medicaid Qualified Behavioral Health Professional (QBHP) policy, allowing for a wider range of clinicians to provide supervision of persons providing Applied Behavioral Analysis (ABA) has been extended through September 30, 2025. Additionally, effective January 1, 2020 the policy indicates these professionals are eligible up to two years after completing their ABA graduate coursework to be QBHPs. Previously there was not a limit on the number of years a QBHP could practice after completing coursework. Below is the policy bulletin with additional details.

Bulletin Number: MSA 19-21

Issued: August 30, 2019

Subject: Update of Coverage of Autism Services for Children Under 21 Years of Age

Effective: January 1, 2020

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild

Behavioral health treatment (BHT) services are highly specialized services that require specific qualified providers who are available within Prepaid Inpatient Health Plan (PIHP)/Community Mental Health Services Program (CMHSP) provider networks and have extensive experience providing specialty mental health and behavioral health services. BHT services must be provided under the direction of a Board Certified Behavior Analyst (BCBA), a qualified Licensed Psychologist (LP) or Limited License Psychologist (LLP), or a master's prepared Qualified Behavioral Health Professional (QBHP).

The Michigan Department of Health and Human Services (MDHHS) Behavioral Health and Developmental Disabilities Administration (BHDDA) recently completed a statewide applied behavior analysis provider capacity survey of the PIHP/CMHSP system and is forecasting a provider network shortage that will negatively affect access, quality, and compliance of autism spectrum disorder benefit services. Current policy indicates BHT supervisors, including LPs, LLPs, and QBHPs, must be certified as a BCBA by September 30, 2020. This policy deadline is being extended to September 30, 2025 to ensure there is adequate access to a network of providers of BHT services. In addition, the

QBHP must be certified as a BCBA within two years of successfully completing their applied behavior analysis (ABA) graduate coursework.

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

### **MDHHS Announces Efforts to Prepare HMP Enrollees for Work Requirements**

Below is an announcement from MDHHS regarding its work to equip Healthy Michigan Plan enrollees to meet the new work requirements

MDHHS takes new preemptive steps to prepare Healthy Michigan Plan beneficiaries for work requirements, begins 'how to' notifications on continuing coverage

The Michigan Department of Health and Human Services (MDHHS) is taking another step in its efforts to preserve coverage for Healthy Michigan Plan beneficiaries by mailing new informational letters to program enrollees. Beneficiaries who will be affected by new work requirements beginning in January will receive mailed notifications starting this month in MDHHS's most significant step yet to inform enrollees and help preserve their health insurance coverage.

MDHHS began sending notification letters on Tuesday to more than 270,000 Healthy Michigan Plan beneficiaries who currently are not exempt from the work requirements based on department records. To retain coverage, these individuals must comply with the new requirements beginning in January.

"These letters are an important step in MDHHS's multifaceted plan to give Healthy Michigan Plan beneficiaries clear information about what they need to do to continue their coverage," said MDHHS Director Robert Gordon.

"We are doing everything in our power so that individuals can comply with this complex and demanding statute. Clear communication is key."

The letter notifies beneficiaries that beginning Jan. 1, 2020, they will be required to report to MDHHS each month 80 hours of work or other eligible activities, such as job training. It lets them know that if they do not report, they could lose their health care coverage. Beneficiaries are also advised that they will receive more information in December about how to inform MDHHS about their work activities.

A form is included for beneficiaries to fill out if they meet one of the exemptions from the work requirements – such as being medically frail or a full-time student.

Michigan enacted its highly successful Healthy Michigan Plan effective April 1, 2014, after bipartisan approval of legislation that expanded Medicaid to more than 650,000 additional people with incomes at or below 133 percent of the federal poverty level.

According to research from the University of Michigan, the Healthy Michigan Plan has more than doubled primary care usage, reduced enrollees' reliance on the emergency room by 58 percent, cut uncompensated care by nearly 50 percent, and added \$2.3 billion to the state's economy.

In 2018, the Legislature voted to implement work requirements for Healthy Michigan Plan beneficiaries upon approval from the federal government, which occurred in December.

MDHHS partnered with the firm MAXIMUS to use what's called human-centered design in developing the informational letters. The idea is to make the letters easy to read and understand by using simple, vivid language, large fonts, bright colors and clear asks. Research from the field of behavioral science has shown that changes of this kind have a meaningful impact on response rates.

In addition to this month's notification letters, MDHHS has put in place a communication plan to get the word out about the upcoming work requirements. The department has hosted webinars for community partners and providers and will build upon these efforts throughout the fall with paid advertising, media outreach, social media posts and additional outreach to community partners and stakeholders who work with people who may be affected.

In October, notifications will also go out to Healthy Michigan Plan beneficiaries who are exempt from the work requirements, including people who will be age 62 and older.

Learn more about the Healthy Michigan Plan at [HealthyMichiganPlan.org](http://HealthyMichiganPlan.org) and about the work requirements and other changes on the Changes Coming in 2020 tab.

### **MDHHS Announces Suicide Prevention Resources for Suicide Prevention Week**

As part of National Suicide Prevention Week, September 8 through 14, below is a recent announcement from MDHHS regarding a set of suicide prevention resources.

Suicide is a hard topic to discuss and report on, and a complex public health issue. In advance of National Suicide Prevention Week, Sept. 8 – 14, the Michigan Department of Health and Human Services (MDHHS) is reaching out to our media and public health partners to share current Suicide Prevention Media Resources with you.

Media and online coverage of suicide should be informed by using best practices. When crafting your messages about suicide prevention and reporting on a death by suicide, we urge you to make sure they align with safe and effective messaging recommendations.

Worldwide studies have found that certain types of news coverage can increase the likelihood of suicide in vulnerable individuals. Word choice matters, and media coverage can influence behavior negatively by contributing to contagion or positively by encouraging help-seeking. Below are resources that can assist in reporting on this complex and difficult topic.

Media Resources for Suicide Prevention Reporting Toolbox: The American Association of Suicidology toolkit:

- **Media as Partners in Suicide Prevention:** This toolkit was generated by extensive consultation with journalists and those with lived experience of suicide attempts and thoughts. It contains critical information for all media professionals looking to effectively report on suicide as a topic.
- **Recommendations for Reporting on Suicide** is a two-page document that was developed with worldwide suicide prevention agencies. It offers specific reporting strategies that could help prevent another suicide or encourage someone to seek help.
- The National Action Alliance for Suicide Prevention offers several resources on its media messaging page. These include: Real Stories, a collaborative approach for news and entertainment; Talking About Teens, Technology; and current articles focused on Reporting on Suicide.

There are also Michigan-based coalitions, crisis lines, fact sheets, trainings and events listed on the MDHHS website at [Michigan.gov/suicideprevention](https://Michigan.gov/suicideprevention).

### **Expansion Coming for Program that Helps Seriously Mentally Ill in Northern Michigan**

Below is a recent news story, featuring the CEO of Northern Lakes CMH, regarding the receipt of a Health Endowment Fund grant, by a number of CMHs in northern Michigan, to expand their health home initiatives. The MDHHS press release on this grant is provided after the news story.

The Michigan Department of Health and Human Services is making a \$500,000 grant to expand two pilot projects in northern Michigan.

The program is called the "Behavioral Health Home" initiative. It offers wrap-around services with a team approach to treat both mental and physical health care needs for Medicaid patients with serious mental illness or serious emotional disturbance.

"Basically, it's putting everything together, their physical health, their behavioral health, all in one service provider group," says Lynn Sutfin, spokeswoman for MDHHS. "Everybody's working together - making sure that everything's being addressed for this individual."

Karl Kovacs is CEO of Northern Lakes Community Mental Health Authority, which runs one of the pilots. He says the program has been very successful, and has resulted in some dramatic stories, such as doctors discovering cancer in a seriously mentally ill man who hadn't seen a primary care physician in a very long time. The man was successfully treated for the cancer.

"People with serious mental illness have, for a variety of reasons, not always been able to have sustained primary care," says Kovacs. "They're not always the easiest people to work with and treat, so it takes extra effort and time to determine, is he following through on his appointments, is he following through on his diabetes, his seizures? Is his medication from the psychiatrist being well coordinated with his physical health care providers?"

The \$500,000 grant could boost the number of people served from about 160, to several thousand. The expansion will be in northern Michigan counties, where access to both primary and mental health care can be more difficult.

The money for the grant comes from the Michigan Health Endowment Fund. The fund was created through Public Act 4 of 2013, which authorized certain changes on how Blue Cross Blue Shield of Michigan (BCBSM) operates. The law requires BCBSM to contribute up to \$1.56 billion over 18 years to a health endowment fund that benefits

The article is found [here](#) ; the news release about this effort is found below:

The Michigan Department of Health and Human Services (MDHHS) recently received \$500,000 from the Michigan Health Endowment Fund to expand a program that integrates physical and behavioral health care services for Medicaid beneficiaries with serious mental illness or serious emotional disturbance.

Currently, Behavioral Health Home (BHH) is offered in Grand Traverse and Manistee counties. The additional funds will be used to modernize and expand BHH operations into several more counties to provide access to integrated services for an estimated 3,000 - 4,000 more Michiganders.

“Integrated and coordinated care is essential to improving outcomes for the most severely ill living in our state,” said Dr. George Mellos, senior deputy director of the MDHHS Behavioral Health and Developmental Disabilities Administration. “This funding will increase capacity for essential services, which will help mitigate the growing number of Michiganders with mental illness and the alarming trend in deaths by suicide.”

Reports about Michigan’s current program show that the BHH increases patient engagement of care, follow-up visits after hospitalization, preventative screenings and reduces inpatient hospital length of stay. Additionally, an independent evaluation demonstrated significant cost-efficiencies through reductions in avoidable costs. Specific benefits of the BHH include the following:

- A single point of contact for navigating a patient’s health and social needs.
- Access to an interdisciplinary team of physical and behavioral health providers.
- Engagement in a person-centered health action plan.
- Social and emotional support from peer support specialists/community health workers.
- Personalized care and support to positively affect a patient’s life.
- Providers of the BHH receive enhanced reimbursement and outcome-based performance incentives for delivering Health Home services. This program is one of many strategic initiatives focused on improving the continuum of public behavioral health services in Michigan.

MDHHS has three overarching goals for the BHH:

- Improve care management of beneficiaries with serious mental illness or serious emotional disturbance.
- Improve care coordination between physical and behavioral health care services.
- Improve care transitions between primary, specialty and inpatient settings of care.

### **New Report Shows Employment Rate Increased for Individuals with Serious Mental Illness**

The Michigan Department of Health and Human Services (MDHHS) 2018 Individual Placement & Support (IPS) report shows a 30 percent competitive, integrated employment rate was achieved by individuals with serious mental illness who were supported by evidence-based IPS services, an increase from 26 percent in 2017.

This is more than double the 10.4 percent employment rate reported in 2016, when only general supported employment services were provided. In 2018, 1,465 individuals received IPS supports in 18 Michigan counties. This is an increase of 148 individuals from 2017.

IPS is a model of supported employment for people with serious mental illness. IPS-supported employment helps people living with behavioral health conditions work at individual, competitive and integrated jobs of their choosing. Employment specialists help clients obtain part- and full-time competitive jobs that pay at least minimum wage in community settings alongside others without disabilities. Mainstream education and technical training are included as ways to advance career paths.

“Through the years, IPS has had a profound impact on many individuals across Michigan, making a significant difference in not only their lives but the lives of their families,” said Robert Gordon, MDHHS director. “This program has helped these individuals by increasing their confidence, self-worth, pride and perhaps most importantly, hope.”

Michigan began implementing the Evidence-Based Practice Supported Employment – IPS model in 2004. Twenty-one IPS programs currently serve Michigan residents through local Community Mental Health

Services Programs (CMHSPs) or contracted providers. Employment services are closely integrated with mental health treatment and benefits counseling.

Participants averaged 26.89 hours a week and earned an average of \$10.40 per hour as people gained greater financial independence.

CMHSPs or providers interested in being an IPS site or seeking to register should visit [Improvingmipractices.org](http://Improvingmipractices.org) and select the Practice Areas tab, then the Individual Placement & Support tab.

### Resources to Fight Rural Drug Addiction Announced

Fighting the crisis of drug addiction is a key priority for the Trump Administration. Under the leadership of Director Jim Carroll, the White House Office of National Drug Control Policy is focusing on the needs of rural communities in this epidemic. Below are links to connect local leaders to more information about resources which may be available to help.

- (1) National Drug Control Policy Strategy: Establishes the Administration's priorities for addressing the challenge of drug trafficking and use. <https://www.whitehouse.gov/wp-content/uploads/2019/01/NDCS-Final.pdf>
- (2) Federal Rural Resources Guide: A listing of Federal programs that can be used to address substance use disorder and opioid misuse in rural communities. Designed to be a one-stop-shop for rural leaders looking for Federal funding and partnership opportunities. <https://www.rd.usda.gov/files/RuralResourceGuide.pdf>.
- (3) Community Assessment Tool: Provides a snapshot of user-friendly, county-by-county data about drug overdose deaths and socio-economic conditions in a county to help leaders build grassroots solutions for prevention, treatment and recovery. <https://opioidmisusetool.norc.org>
- (4) USDA resources: <https://www.usda.gov/topics/opioids>
- (5) School Resource Guide: A comprehensive guide for teachers, administrators and staff about resources available to help educate and protect students from substance misuse. <https://www.whitehouse.gov/ondcp/additional-links-resources/resource-guide-for-school-staff/>

### NYT Essay Addresses Early Intervention to Address Psychosis

Below is a recent New York Times essay on the importance of early intervention efforts to address psychosis.

Interventions to Prevent Psychosis: An impending psychotic break can be identified and prevented if it is recognized early and appropriate steps are taken to head it off.

Tiffany Martinez was a 17-year-old college freshman when she began hearing voices, seeing shadowy figures and experiencing troubling, intrusive thoughts. Her friends at the University of Southern Maine, where she was majoring in psychology, noticed that she was acting strangely and urged her to get help.



They most likely saved her from a crippling mental health crisis, prevented the derailment of her education and ultimately enabled her to become a psychiatric nurse practitioner who can help other young people avert a psychiatric crisis.

The full essay can be found [here](#).

### **Trump Administration Grants Michigan \$28M to 'Smash the Grip' of Opioid Crisis**

Below are excerpts from a recent news story on the receipt, by the State of Michigan, of federal dollars targeted to fighting the opioid crisis.

Michigan will receive a \$27.9 million federal grant to help communities respond to the epidemic of opioid addiction.

The U.S. Department of Health and Human Services announced \$1.8 billion in federal funds will help states increase access to medication, treatment and mental health resources. President Donald Trump said Wednesday the funds will be delivered to communities where the help is most needed, with the hope of "building a drug-free future."

The full article can be found [here](#).

## **State Legislative Update:**

### **New! Budget Process Moving Forward**

This week Gov. Whitmer agreed to abandon efforts to tie her additional road funding requests to passing the FY20 budget. Whitmer issued a statement with Senate Majority Leader Shirkey and House Speaker Chatfield that the Budget Office would begin negotiations with Legislature's budget folks to work out final target numbers.

With Whitmer's \$2.5 billion additional revenue request no longer on the table, the prospects of a FY20 spending plan by the beginning of the Oct. 1 fiscal year are high. However, Senate Appropriations Chair Stamas did say if an agreement can't be reached between the Republican-controlled Legislature and the Governor, the Republicans will have their own budget ready to send to her in order to meet the constitutional Sept. 30 deadline. Stamas made the comment while talking to reporters Wednesday about Senate and House Republicans beginning to work out points of difference with Whitmer's budget office. The House and Senate have already worked out many of the disparities between themselves.

The DHHS Conference Committee has been scheduled to meet on Thursday, September 19 at 4pm.

### **Governor Orders All Flavored Vaping Products Off Shelves**

The week Gov. Whitmer offered three emergency rules banning all flavored vaping products from Michigan shelves amid what Chief Medical Executive Dr. Joneigh Khaldun believes is a youth vaping "public health emergency." "This is a health crisis and in a health crisis, I have the ability to take action and we're taking it," Whitmer said. "There are 13-year-olds who are vaping fruit loops right now. They are doing life-long damage and have no idea they are engaging in a substance that they're going to be addicted to maybe for the rest of their lives," she said.

The Governor said she is the nation's first chief executive to move against the vaping industry, which she described as "an industry notorious for deceiving the public and for putting their bottom line before the public health."

Her three-step ban includes taking all flavored e-cigarettes and vaporizing products off the shelves, including such flavors as bubble gum and apple sauce. She is going after the marketing strategies that she argues "are

## **CMHA WEEKLY UPDATE**

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focusing on our kids and they are targeting and making money off of them and they're hurting them." She reported products are sold next to candy on the store shelves.

The Governor's unprecedented action comes after she signed legislation earlier this year that bans the sale of vaping products to teenagers under 17. Whitmer said the extra steps are needed "because (the law) is not being enforced and they (the products) are widely available. That's the problem." She will eventually ask lawmakers to codify her temporary emergency action.

The Governor's actions impact both minors and adults, who will still apparently have access to so-called tobacco vaping devices.

### **Federal Update:**

#### **New! Senate Appropriators Postpone Work on FY20 Health Funding**

The Senate Appropriations Committee was scheduled to debate and vote on Fiscal Year 2020 spending bills this week, including funding for the Department of Health and Human Services. However, the vote was postponed after partisan disagreements over specific "poison pill" amendments, which are measures that greatly reduce a bill's chance for passage. The House and Senate must act quickly to pass an appropriations package to stave off a government shutdown before the end of FY 2019 on September 30.

### **Education Opportunities:**

#### **Save the Date for the 2019 CMHA Fall Conference**

The CMHAM Annual Fall Conference will be held on:

October 21 & 22, 2019

Grand Traverse Resort, Traverse City, Michigan

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

#### **Annual Recipient Rights Conference**

Join us for the 26<sup>th</sup> Annual Recipient Rights Conference which will be held on September 24-27, 2019 at the McCamly Plaza Hotel in Battle Creek, Michigan.

Pre-Conference on September 24, 2019 from 9am-4pm: Scientific Content Analysis featuring Avinoam Sapir  
Full Conference from September 25-27, 2019 will feature General Sessions on Human Trafficking and How Policy Makers Work and How Advocates can Influence change with Senator Rebekah Warren as well as 24 workshops.

Conference Registration information: [Click here to register!](#)

#### **Overnight Accommodations:**

The McCamly Hotel is **currently sold out**. You may request to be put on a waiting list.

Standard Rooms \$119.00 + 11% sales and accommodation tax

Reservations: e-mail [mccamlyreservations@truthorhospitality.com](mailto:mccamlyreservations@truthorhospitality.com) or 269-268-5021.

Room block name: 2019 Recipient Rights Conference

Cutoff date to secure hotel accommodations is August 23, 2019

## Overflow Hotel Information:

Holiday Inn at 12812 Harper Village Drive, Battle Creek

**For Reservations, call: 269-979-0500 refer to Block Code RRC**

\$119 single/double plus taxes

Cutoff date to secure hotel accommodations is **September 6, 2019**

## Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings

- September 24-25, 2019 – Great Wolf Lodge, Traverse City

Visit [www.cmham.org](http://www.cmham.org) for more information.

## Save the Date for the 2019 Annual Home and Community Based Waiver Conference

The Annual Home and Community Based Waiver Conference will be held November 19 & 20, 2019.

Kellogg Hotel & Conference Center  
55 South Harrison Road  
East Lansing 48823

**Conference Objective:** This conference will provide technical assistance and training on the implementation and maintenance of the Children's Waiver Program (CWP) and the Habilitation Supports Waiver (HSW), clinical issues, and administrative functions relevant to these waivers. Additionally, this conference will provide training in ASD, evidence-based services, highlight programs across the state, and provide technical assistance on implementation of the Medicaid/MiChild Autism Benefit.

**Who Should Attend:** This conference contains content appropriate for case managers, supports coordinators, clinicians, behavior analysts, CMH administrative or clinical staff, providers, HCBS or waiver coordinators, individuals receiving services and family members and social workers at all levels of practice (beginning, intermediate and/or advanced).

**Overnight Accommodations:** The Kellogg Hotel & Conference Center is located in East Lansing adjacent to Michigan State University.

- Room Rate: \$85 per night plus tax.
- For Room Reservations: Call 517-432-4000 and provide the discount code of 1911DCH&MA.
- The deadline for room discounts is October 10, 2019.

**Special Rate:** A special \$20 conference rate will be offered for people receiving waiver services and their family members. A limited number of scholarships are available to people who receive services and their families. Scholarships may cover registration fees, overnight rooms, travel expenses, meals and childcare. Deadline to request scholarship: October 1, 2019. To request a scholarship form, contact Anne Wilson at [awilson@cmham.org](mailto:awilson@cmham.org) or 517-374-6848.

Questions? Call 517-374-6848 OR email [cward@cmham.org](mailto:cward@cmham.org) OR [awilson@cmham.org](mailto:awilson@cmham.org)



### **UPDATED: Calhoun County Hosts Annual Michigan CIT Conference in Battle Creek!**

Please join us for the 2<sup>nd</sup> annual Michigan Crisis Intervention (CIT) Conference. Hear from over 24 presenters on how to start a CIT program, strategies to maintain an existing program and the positive impact CIT has had on their community. Also, hear from the 2019 CIT-International Chief of the Year, Jim Blocker and CIT-International's President, Tom von Hemert as the featured keynote speaker. We invite representatives from law enforcement, mental health and advocacy groups to come together at this conference to identify strategies to improve collaborative relationships and improve crisis responses. This conference has 24 sessions devoted to learning more about CIT and the impact this program has on your community. The link below outlines the schedule for this conference and allows you to register also! Please plan to join us!!

Register here: <https://www.summitpointe.org/asp-products/michigan-cit-conference-oct-3-4/>

Registration deadline September 20th

Hotel Accommodations: Reservations can be made by calling 877-352-8777 (Reference Michigan CIT Conference) or online at <http://firekeeperscasino.com/stay/>. For online reservations, click "Book Now" at the top of the webpage and enter code **1022019CIT** in the "Group Attendee" drop-down box to receive the discounted group rate of 102.00 + tax. Please note, reservations must be made by 5:00pm on September 17th, 2019 to receive the discounted rate.

### **Michigan League for Public Policy Forum on Racial Equity Announced**

Below is an announcement, by the Michigan League for Public Policy (MLPP) of its 2019 Public Policy Forum

Registration is now open for our 2019 Public Policy Forum!

This year's forum, titled Reframe and Reclaim: Addressing racial equity through asset framing, features keynote speaker Trabian Shorters.

Mr. Shorters is the leading authority on an award-winning approach to diversity, equity and inclusion called Asset Framing, which calls for defining people by their aspirations and contributions, not by the negative circumstances they may face.

Asset framing shifts narratives away from crisis and deficit and focuses on potential and worth. By reframing narratives, we take steps toward removing harmful stigmas and negative associations. Asset framing leads to positive definition, and it's crucial in the pursuit of racial equity.

After the keynote, you will have the opportunity to choose one of three breakout sessions to participate in, discussing what was learned and how to utilize asset framing in your life and career.

We're thrilled about this year's forum and look forward to learning, sharing and evolving with you as we work towards racial equity.

We hope you can join us for this event on Tuesday, November 12. The forum will be held from 1:00-4:15 p.m. at the Radisson Hotel in Lansing.

[CLICK HERE](#) to register today and secure your space at this event!

We will have a few spaces available for on-site registration, but would prefer that everyone register in advance so we can get an accurate count.

## Great Lakes Health Connect Announces Summit

Below is a recent announcement of the upcoming Great Lakes Health Connect summits.

On behalf of Great Lakes Health Connect (GLHC), I would like to invite you to attend the 2019 Summit Series. The 2019 Summit Series gathers healthcare professionals and staff from across Michigan to learn about how health information exchange and interoperability can transform the healthcare system.

There are three regional events, each with different dynamic keynote speakers and breakout sessions. The overall theme will focus on how the power of technology and relationships can break down the barriers that prevent organizations and providers from optimally delivering, coordinating, and tracking patient care.

Metro Detroit Summit – Friday, September 27 – Troy  
Capital Area Summit – Wednesday, October 23 – Lansing  
West Michigan Summit – Thursday, November 14 – Grand Rapids

You and other staff/members from the Community Mental Health Association of Michigan are welcome at any/all of the Summit Series events. These events are free and open to all, lunch is included. Learn more and register on the Great Lakes Health Connect website, [www.gl-hc.org/2019-summit-series](http://www.gl-hc.org/2019-summit-series).

Stay up-to-date with GLHC and health information exchange news from across the state by subscribing to the monthly newsletter!

## Miscellaneous News and Information:

## CMH Association's Officers and Staff Contact Information:

### CMHA 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](mailto:Stonejoe09@gmail.com); (989) 390-2284  
First Vice President: Carl Rice Jr; [cricejr@outlook.com](mailto:cricejr@outlook.com); (517) 745-2124  
Second Vice President: Craig Reiter; [gullivercraig@gmail.com](mailto:gullivercraig@gmail.com); (906) 283-3451  
Secretary: Cathy Kellerman; [balcat3@live.com](mailto:balcat3@live.com); (231) 924-3972  
Treasurer: Randy Kamps; [randyk@4iam.com](mailto:randyk@4iam.com); (231)392-6670  
Immediate Past President: Bill Davie; [bill49866@gmail.com](mailto:bill49866@gmail.com); (906) 226-4063

## **CMHA WEEKLY UPDATE**

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### **CMHA Staff Contact Information:**

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

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Christina Ward, Director of Education and Training, [cward@cmham.org](mailto:cward@cmham.org)

Monique Francis, Executive Secretary/Committee Clerk, [mfrancis@cmham.org](mailto:mfrancis@cmham.org)

Dana Ferguson, Accounting Clerk, [dferguson@cmham.org](mailto:dferguson@cmham.org)

Janessa Nichols, Accounting Assistant, [acctassistant@cmham.org](mailto:acctassistant@cmham.org)

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Robert Sheehan, CEO, [rsheehan@cmham.org](mailto:rsheehan@cmham.org)