



## Northeast Michigan Community Mental Health Authority Board

May 2021 Meeting



### **Board Meeting – Strategic Planning [Part One], Thursday, May 13 at 3:00 p.m.**

 **Alan Bolter (CMHA)–  
Environmental Scan**

**This meeting will be available as an  
In-Person or Zoom meeting:  
[https://zoom.us/j/911168583?pwd=SEc3bDZh  
UW5FY1lSU1R1NFdXTmNLZz09](https://zoom.us/j/911168583?pwd=SEc3bDZhUW5FY1lSU1R1NFdXTmNLZz09)**

**Meeting ID: 911 168 583**

**Password: 013259**

**Or**

**Conference Call Meeting using:**

**1-888-627-8019 PIN # 40994**

*All meetings held at 400 Johnson Street, Alpena, MI in the  
Board Room unless otherwise indicated.*



**2NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY BOARD**  
**BOARD MEETING – STRATEGIC PLANNING [PART 1]**  
**May 13, 2021 at 3:00 p.m.**  
**A G E N D A**

- I. Call to Order**
- II. Roll Call & Determination of a Quorum**
- III. Pledge of Allegiance**
- IV. Acknowledgement of Conflict of Interest**
- V. Appointment of Evaluator**
- VI. Information and/or Comments from the Public**
- VII. Approval of Minutes ..... (See pages 1-6)**
- VIII. Environmental Scan ..... Alan Bolter**
- IX. Educational Session – Carter Kits ..... (Erin Fletcher)**
- X. May Monitoring Reports**
  - 1. Treatment of Consumers 01-002..... (See pages 7-11)**
  - 2. Budgeting 01-004 ..... (See page 12)**
  - 3. Financial Condition 01-005..... (See page 13)**
- XI. Board Policies Review and Self-Evaluation**
  - 1. Board Job Description 02-003.....[Review & Self Evaluate]. (See pages 14-15)**
  - 2. Board Core Values 02-014.....[Review & Self Evaluate] ..... (See page 16)**
- XII. Linkage Reports**
  - 1. Northern Michigan Regional Entity Update**
    - a. April 28 Meeting..... (Verbal Update)**
    - b. March 24 Meeting ..... (See pages 17-20)**
  - 2. Board Association**
    - a. Spring Conference Update .....(Verbal)**
- XIII. Operational Report..... (See page 21)**
- XIV. Chair's Report**
  - 1. Strategic Planning Discussion Continued .....(Verbal)**
  - 2. Annual Report Draft..... (Available at Meeting)**
- XV. Director's Report**
  - 1. Director's Report.....(Verbal)**
  - 2. QI Council Update..... (Available at Meeting)**
- XVI. Information and/or Comments from the Public**
- XVII. Information and/or Comments for the Good of the Board**
- XVIII. Next Meeting – Thursday, June 10 at 3:00 p.m.**
  - 1. Set June Agenda ..... (See page 22)**
  - 2. Meeting Evaluation ..... (All)**
- XIX. Adjournment**

MISSION STATEMENT

To provide comprehensive services and supports that enable people to live and work independently.

# Northeast Michigan Community Mental Health Authority Board

## Board Meeting

April 8, 2021

[Due to COVID-19 this meeting was held in-person, ZOOM and/or using Uber Conference]

### I. Call to Order

Chair Eric Lawson called the meeting to order in the Board Room at 3:00 p.m.

### II. Seating of Board Member

Terry Small – Alcona County

Eric Lawson – Alpena County

Pat Przeslawski – Alpena County

Geyer Balog – Montmorency County

### III. Roll Call and Determination of a Quorum

Present: Robert Adrian, Les Buza, Bonnie Cornelius, Roger Frye, Lynnette Greskowiak, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small

Absent: Geyer Balog, Judy Jones

Staff & Guests: Lisa Anderson, Carolyn Bruning (ZOOM), Lee Ann Bushey (ZOOM), Connie Cadarette (ZOOM), Mary Crittenden, Lynne Fredlund, Casey Harper (ZOOM), Ruth Hewett (UBER), Larry Patterson (ZOOM), Lauren Smith (ZOOM), Nena Sork, Nicole Kaiser, Jen Whyte (UBER)

### IV. Pledge of Allegiance

Attendees recited the Pledge of Allegiance as a group.

### V. Acknowledgement of Conflict of Interest

No conflicts were identified.

### VI. Appointment of Evaluator

Eric Lawson appointed Terry Larson as evaluator for this meeting.

### VII. Report of the Nomination's Committee

Terry Larson reported the Nomination's Committee made their recommendations for officers at the March meeting. A copy of the minutes of their meeting was included in the mailing indicating the following recommendations for the Slate of Officers:

Eric Lawson, Chair  
Roger Frye, Vice Chair  
Bonnie Cornelius, Secretary  
Gary Nowak, Past Chair

### VIII. Election of Officers

Terry Larson requested a motion for the slate of officers as a whole be elected as recommended.

***Moved by Terry Larson, supported by Pat Przeslawski, to cast a unanimous ballot for Eric Lawson for the Chair position, Roger Frye for the Vice Chair position, Bonnie Cornelius as the Secretary position and the Past Chair will remain as Gary Nowak.*** Eric Lawson called for other nominations from the floor three times. No other nominations were presented. ***Moved by Roger Frye, supported by Terry Small, to close nominations and cast a unanimous ballot for Eric Lawson for the Chair position, Roger Frye for the Vice Chair position, Bonnie Cornelius as the Secretary position and the Past Chair will remain as Gary Nowak.*** Motion carried.

**IX. Information and/or Comments from the Public**

There were no comments presented.

**X. Approval of Minutes**

*Moved by Roger Frye, supported by Les Buza, to approve the minutes of the March 11, 2021 meeting as presented. Gary Nowak abstained due to his absence at the meeting.*  
Motion carried.

**XI. Educational Session – CARF Standards – Strategic Planning**

Lynne Fredlund, Quality Improvement Coordinator, provided Board members with an overview of the CARF Standards related to components of Strategic Planning. She reported as the Agency is accredited by CARF, which is a nationally accepted accrediting body, the Agency receives “deemed status” by the Department of Health and Human Services which lessens the audit needs on their part.

Lynne Fredlund provided a summary of “What is Strategic Planning?” and reviewed the three standards CARF has as it relates to Strategic Planning. Our Agency conducts our planning over three months. The May meeting focuses on an environmental scan provided to Board members by an external source, the June meeting will include the Advisory Council and together the current Ends will be reported on and the July meeting will be the development of Ends for the next fiscal year. The Strategic Plan is shared with community and other collaborative partners as well as posted to the Agency’s website.

Gary Nowak thanked Lynne Fredlund for the job she does in keeping this Board ready for CARF and others reviewing entities.

**XII. Consent Agenda**

- 1 Employee Assistance Center**
- 2 Blue Horizons Management Agreement**
- 3 Resolution – Group Home Administrator**

*Moved by Gary Nowak, supported by Les Buza, to approve the Consent Agenda as presented.* Roll call vote: Ayes: Robert Adrian, Les Buza, Bonnie Cornelius, Roger Frye, Lynnette Greskowiak, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small; Nays: None; Absent: Geyer Balog, Judy Jones. Motion carried.

**XIII. April Monitoring Reports**

**1. Budgeting 01-004**

The Board reviewed the Statement of Revenues and Expense for month ending February 28, 2021. Connie Cadarette noted when the budget was developed the Agency did not have solid figures for revenues. She noted the Agency budgeted very conservatively and the report indicates a variance of almost \$1.2 million in additional revenue. She noted we did not budget for any revenues for the Behavioral Health Home, only expenses.

Larry Patterson reviewed the negative variances in expenses. He reported the contract residential variance contains some prior months charges mainly due to the Direct Care Wage Pass through and also a late invoice received. He noted the Telephone & Connectivity includes some disputed charges and has actually been reduced by half. He reports the Property & Liability Insurance is a timing issue and clears up when the asset distribution is received usually in July / August.

**2. Communication and Counsel 01-009**

The Board reviewed the monitoring report related to Communications and Counsel to the Board. Eric Lawson noted he likes this monitoring report as it provides much detail. Nena Sork reported the 298 is circling back again. Alan Bolter will provide the environmental scan for our May Strategic Planning and explain in further depth the impact of this type of legislation. Nena notes it will most likely be reinvented and named something other than 298. Nena Sork noted it is so

important to keep the local dollars available for services not covered by Medicaid. She noted each county is different. Nena provided some background related to the early onset of integrated health and how this Agency is positioned to continue providing the services as they are done efficiently.

*Moved by Bonnie Cornelius, supported by Gary Nowak, to approve the April Monitoring Reports as presented.* Motion carried.

**XIV. Board Policy Review and Self Evaluation**

Eric Lawson informed the new Board members of the process used recently to update the title of the Director from CEO to Executive Director

**1. Financial Condition 01-005**

Board members reviewed the policy and noted this was revised last calendar year to update the title. There were no recommended revisions.

**2. Communication and Counsel 01-009**

Pat Przeslawski questioned the "unaware" statement in item #2. The Board policies are written in a negative format in policy governance, which provide guidelines on what the Executive Director cannot do.

**3. Governing Style 02-002**

This policy requires self-evaluation. Eric Lawson reported the Board is functioning in one voice so is abiding with this policy.

**4. Cost of Governance 02-013**

The budget numbers have been adjusted for the current fiscal year in this policy revision. The budget numbers in 2.C. have increased significantly due to a transfer of dollars related to the Partners in Prevention Contract transferred to community education. Nena Sork noted previously the dollars were reported under Children's Services as the Agency contracted with Partners to provide Children's Friendship Training. This artificially inflated the unit cost in service provision in the Children's department. The dollars have been transferred to the public relations portion of our budget which accurately reflects the community service element.

*Moved by Gary Nowak, supported by Pat Przeslawski, to approve the revision to Policies 02-013 Cost of Governance.* Motion carried.

**XV. Linkage Reports**

**1. Northern Michigan Regional Entity (NMRE)**

**a. Regional Board Meetings**

**i. March 24, 2021**

**ii. February 24, 2021**

The minutes from the February NMRE Board meeting were included in the materials in the Board packet for this meeting.

Roger Frye noted the NMRE had much discussion on attempt to revive 298. Eric Lawson questioned the MLR acronym on page 2 of the February minutes. MLR is "medical loss ratio." Gary Nowak reported financially, the NMRE is in good shape. Nena Sork reported the NMRE Board agreed to pay for CE-CERT [Components for Enhancing Clinician Experience and Reducing Trauma] training for staff of the five boards.

**2. Community Mental Health Association of Michigan (CMHAM)**

**a. Spring Conference – June 9 & 10 – NOW VIRTUAL**

Board members were disappointed in the change of this conference to a virtual conference.

### **3. Advisory Council**

The minutes of the most recent Advisory Council meeting along with a flyer on the Virtual Day of Recovery Education were distributed at this meeting. Les Buza reported the Council members viewed the current Traveling Art Show. He reported "The Walk a Mile in My Shoes Rally" has been postponed to September and will be a Facebook event. The Day of Recovery, sponsored by the NMRE, has also been scheduled as a virtual event this year. The theme for this event will be Personal Responsibility and Self-Advocacy.

### **XVI. Operations Report**

Mary Crittenden reviewed the services provided by staff for the month ending March 31, 2021. She noted there were 63 individuals seeking new services from the Agency. She reported there was one individual admitted to the state hospital during this period. Roger Frye questioned if services have increased due to COVID and Mary Crittenden noted it was slower in the beginning of the pandemic but numbers are picking up now.

### **XVII. Chair's Report**

#### **1. Section 222 & Conflict of Interest**

This survey is an annual requirement and Board composition must be certified. This form also addresses conflict of interest. Board members were requested to submit their paperwork to Diane Hayka so the certification can be finalized.

#### **2. Strategic Planning Discussion**

Eric Lawson noted in May Alan Bolter will present the environmental scan for the Board. He noted Lynne Fredlund touched on the components CARF looks for in Strategic Planning and provided an outline of the three meetings the board uses in developing the Strategic Plan. The June Board meeting will continue in the strategic planning process with a report on the current Ends and the progress toward those Ends. Nena Sork will then work with the Board at the July meeting to develop Ends for the next fiscal year and further development of the Board's Strategic Plan.

### **XVIII. Director's Report**

#### **1. Director Report Summary**

Nena Sork introduced Nicole Kaiser, Home Administrator, and provided a summary of all the tasks Nicole has had to fill during her first few months with the Agency.

Nena Sork reported she continues to participate in the Emergency Managers conference call and the Agency continues to provide support to District Health Department #4 with nursing and clerical staff. She reported the Agency is collaborating with MidMichigan on working to get grant dollars to develop a telehub. She participated in a virtual meeting with Governor Whitmer's office.

Management Team met and discussed providing a "Finders Fee" to staff who refer candidates for recruitment in hopes of having another avenue to attract new hires. The "Finders Fee" would be paid to the referring staff after the new hire has maintained employment for a set number of months. Nena Sork reported we are also working on recruiting a psychiatrist who is still in school. She notes the Agency's revenue budget was very conservatively developed. Due to this conservative budget, we are able to provide a 3% cost of living increase to staff retroactively to the beginning of the fiscal year. This will be provided in the April 22<sup>nd</sup> payroll check.

Nena Sork reported with the excess in revenues, we are again at a good standing and would like to get another approval from the Board to catch up on some construction projects within the homes and other purchases for vehicles if possible, phone system, technology, tractor, lifts and other identified items. She requested a temporary waiver of Board approval for items over \$5,000 which are not already included in the approved budget. The Board would be notified of the purchases as they occur but this would eliminate some lag time in getting

the items in place prior to the end of the fiscal year. She noted we would assure the Board the purchasing would not exceed the adopted budget. *Moved by Bonnie Cornelius, supported by Terry Small, to authorize the Director to exceed the purchasing limits established with a report to the Board monthly as long as we stay within the limitations of the budget.* Roll call vote: Ayes: Robert Adrian, Les Buza, Bonnie Cornelius, Roger Frye, Lynnette Greskowiak, Terry Larson, Eric Lawson, Gary Nowak, Pat Przeslawski, Terry Small; Nays: None; Absent: Geyer Balog, Judy Jones. Motion carried.

Nena Sork reported the Agency is participating in an April Take Back Event. This provides a venue for residents to dispose of prescription medications safely. The event is scheduled for April 24<sup>th</sup>. The Agency is also arranging a blood drive in May using Versiti. The tentative date for the blood drive is May 18<sup>th</sup>. Mary Crittenden reported 98% of the blood stays in Michigan. She noted if there is a national disaster it may be sent to another state.

Nena Sork provided an update of her meeting with Representative Sue Allor and provided information on the issues covered with her during this meeting. Rep. Allor thanked this Board for the nomination for the "Go To Bat Award."

## 2. **Annual Submission**

Nena Sork reported the Annual Report is completed annually and the Agency must provide this information to Board members and County Commissioners annually. Eric Lawson noted the error in the previous report related to population has been corrected; however, the overall populations for our four-county area has decreased.

## **XIX. Information and/or Comments from the Public**

There was no information and/or comments presented.

## **XX. Information and/or Comments for the Good of the Board**

Eric Lawson reported the lack of Robert's Rules time for today was only noticed by one person.

## **XXI. New Business**

### 1. **Establishment of Regular Meeting Date**

The consensus was to keep the meeting date and time the same. The Board will continue to meet the second Thursday of the month at 3:00 p.m. The November meeting is scheduled for an Agency holiday, Veteran's Day. Discussion ensued as to whether to combine the November and December Board meeting as the December meeting falls early in the month. The consensus of the Board was to move the November meeting up one week to November 4<sup>th</sup>. It was acknowledged that the financial and operational reports would not be available for November. *Moved by Gary Nowak, supported by Roger Frye, to move the November meeting to the week prior, November 4, 2021 with the Chair having authority to cancel the November meeting if needed.* Motion carried.

### 2. **Appointment of Standing Committees**

Eric Lawson appointed the following members to the Board's Standing Committee:

#### **Recipient Rights Committee**

Pat Przeslawski, Board Representative

Judy Jones, Board Representative

Tom Fredlund

Renee Smart-Shepler

Lorell Whitscell

Barbara Murphy

Ruth Hewett, Recipient Rights Officer

## **XXII. Next Meeting**

The next regularly scheduled meeting of Northeast Michigan Community Mental Health Authority Board will be held Thursday, May 13, 2021 at 3:00 p.m.

**1. Set May Agenda**

The May agenda items were reviewed. The next few months the major focus will be on Strategic Planning.

**2. Evaluation of Meeting**

Terry Larson reported the meeting started on time and we accomplished much business in the time spent at the meeting. The majority of the Board did learn from the meeting and participated. He reported this is a good board and the staff are excellent.

**XXIII. Adjournment**

*Moved by Terry Small, supported by Pat Przeslawski, to adjourn the meeting.* Motion carried. This meeting adjourned at 4:10 p.m.

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Bonnie Cornelius, Secretary

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Eric Lawson, Chair

Diane Hayka  
Recorder





## Recipient Rights Advisory Committee Minutes April 21, 2021

The meeting was called to order at 3:15 p.m. April 21, 2021 by Chair Patricia Przeslawski via Uber line call in.

**Present:** Judy Jones, Barb Murphy, Pat Przeslawski, Renee Smart-Sheppler and Lorell Whitscell  
**Absent:** Tom Fredlund  
**Staff:** Ruth Hewett  
**Guests:** None.

**DRAFT MINUTES**

I. **Old Business.** None.

II. **Approval of Minutes.** The minutes from 01-20-2021 were approved as written. Judy moved to approve, Renee supported, motion carried.

III. **New Business.**

EDUCATIONAL SESSION: The educational session was moved to the beginning of the agenda to facilitate the presenter. Lisa Anderson, Human Resources Manager, presented the educational session on the levels of disciplinary action for substantiated rights violations. The hand-out consisted of Policy 3610, Prohibited and Unacceptable Conduct. Lisa explained this is a formalized process in which to guide supervisors in addressing remedial actions. It is intended to help correct the situation and to assist the staff member to be successful in his/her job.

QUARTERLY RIGHTS ACTIVITY REPORT: The report covered the second quarter of FY 21, 1/1/2021 – 3/31/2021. Complaints this quarter were lower than the previous quarter at 23 with 19 being investigated and 4 containing no code protected right. Of these 19, 7 were substantiated with 2 pending. Renee moved to review the report, supported by Judy, motion carried.

REAPPOINTMENTS: Committee members were informed that at the April Board meeting, all members of the RRAC were reappointed to serve another year.

COMMITTEE COMPOSITION SURVEYS: Annually, the committee must complete a composition survey in order to ensure adherence with the Mental Health Code. Members should complete and return them to Ruth within 30 days.

MEETING DATES AND TIMES: The committee agreed by consensus to hold the meetings on the third Wednesday of July 2021, October 2021, January 2022, and April 2022 and to change the time to 3 p.m. instead of 3:15 p.m.

IV. **Educational Session.** The educational session was moved to the beginning of the agenda for this meeting.

V. **Other Business.**

The next meeting will be July 21, 2021. The committee agreed to hold this meeting via Uber call.

**VI. Adjournment.**

Renee moved to adjourn the meeting, supported by Lorell. The meeting adjourned at 3:45 pm.

Ruth Hewett, Recorder

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Patricia Przeslawski, Chairperson

**QUARTERLY RECIPIENT RIGHTS ACTIVITY REPORT**

**Time Period: January, February & March 2021:**

I.	COMPLAINT DATA SUMMARY	<u>FY 20-21</u>				<u>FY 19-20</u>			
A.	Totals	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>
	Complaints Received:	33	23			39	38	26	31
	Investigated:	26	19			32	30	25	24
	Interventions:	01	-0-			01	02	01	02
	Substantiated:	22	07			14	18	17	21
	Outside Jurisdiction:	02	-0-			05	02	-0-	-0-
	No Code Protected Right:	04	04			01	04	-0-	05

B. Aggregate Summary of Complaints

CATEGORY	Received	Investigation	Intervention	Substantiated
Abuse I	0	0		0
Abuse II	1	1		0
Abuse III	1	1		1
Sexual Abuse	0	0		0
Neglect I	0	0		0
Neglect II	1	1		1
Neglect III	2	2		2
Rights Protection System	2	2	0	1
Admiss/Dischrg-2 <sup>ND</sup> Opinion	1	1	0	*pending
Civil Rights	0	0	0	0
Family Rights	0	0	0	0
Communication & Visits	0	0	0	0
Confidentiality/Disclosure	2	2	0	0
Treatment Environment	2	2	0	*0 + 1 pending
Freedom of Movement	0	0	0	0
Financial Rights	0	0	0	0
Personal Property	1	1	0	0
Suitable Services	6	6	0	2
Treatment Planning	0	0	0	0
Photos/Fingerprints/Audio etc	0	0	0	0
Forensic Issues	0	0	0	0
<b>Total</b>	<b>19</b>	<b>19</b>	<b>0</b>	<b>7 + 2 pdg</b>

\*Involuntary Admission Process pending

\*\*Safety in the Treatment Environment pending

c. Remediation of substantiated rights violations.

<b>Category/Specific Allegation</b>	<b>Specific Provider</b>	<b>Specific Remedial Action</b>
Pending from prev qtr:		
Abuse II	Cornerstone Hernandz	Employee left before subst.
Neglect III	Advanced AFC	Policy change
Confidentiality	Johnson CPA	Other
Suit Serv-Dign & Resp	Victoria's AFC	Other
Suit Serv-Dign & Resp	NEMCMH	Verbal Reprimand
Actions this qtr:		
Abuse III	NEMCMH	Verbal Reprimand
Neglect II	Cornerstone	Termination
Neglect III	NEMROC	Verbal Reprimand
Neglect III	Beacon of Ossineke	Employee left but substant.
Rec Rights System	Cornerstone	Written Reprimand (3 staff)
Suitable Services	NEMCMH	Verbal Reprimand
Dignity & Respect	NEMCMH	Pending

D. Summary of Incident Reports: January, February & March 2021

Category Type	1 <sup>st</sup> Qtr		2 <sup>nd</sup> Qtr		3 <sup>rd</sup> Qtr		4 <sup>th</sup> Qtr	
	'21	'20	'21	'20	'21	'20	'21	'20
01.0 Absent without leave (AWOL)	04	02	01	03		06		03
02.0 Accident – No injury	03	06	05	06		01		02
02.1 Accident – With injury	20	14	18	10		16		12
03.0 Aggressive Acts – No injury	16	30	51	25		24		40
03.1 Aggressive Acts – w/ injury	04	06	05	10		-0-		05
03.3 Aggressive Acts – Property Destruc	01	01	09	04		01		03
04.0 Death	01	05	05	05		02		05
05.0 Fall – No injury	07	12	10	20		09		07
06.0 Medical Problem	103	60	120	78		91		109
07.0 Medication Delay	04	06	05	05		06		04
07.1 Medication Error	29	19	23	19		22		21
07.2 Medication Other	52	49	46	52		41		51
07.3 Medication Refusal	99	47	22	77		63		73
08.0 Non-Serious Injury – Unknwn cause	08	03	08	06		07		04
09.0 Other	68	41	102	65		50		87
10.0 Self Injurious Acts – No injury	04	12	02	03		01		08
10.1 Self Injurious Acts – w/injury	09	06	06	02		04		02
Challenging Behavior	17	35	50	25		12		12
Fall – with injury	07	11	22	16		17		14
Arrests	04	05	02	08		03		03
Total	460	370	512	439		376		465

E. Prevention Activity	Quarter	YTD
Hours Used in Training Provided	26.00	57.25
Hours Used in Training Received	3.50	8.00
Hours Used in Site Visits	5.00	23.00

F. Monitoring Activity	Quarter	YTD
Incident Report Received	508	968

G. Source of All Complaints:	Quarter	YTD
Recipient:	06	09
Staff:	15	35
ORR:	01	06
Gdn/Family:	01	05
Anonymous:	-0-	-0-
Comm/Gen Pub:	<u>-0-</u>	<u>01</u>
Total	23	56

Ruth M. Hewett, Recipient Rights Officer

Date

**Northeast Michigan Community Mental Health Authority**  
**Statement of Revenue and Expense and Change in Net Position (by line item)**  
**For the Sixth Month Ending March 31, 2021**  
**50% of year elapsed**

	Actual March Year to Date	Budget March Year to Date	Variance March Year to Date	Budget FY21	% of Budget Earned or Used
<b>Revenue</b>					
1 State Grants	34,882.31	51,793.50	\$ (16,911)	103,587.00	33.7%
2 Private Contracts	9,406.56	29,455.98	(20,049)	58,912.00	16.0%
3 Grants from Local Units	159,975.07	282,975.00	(123,000)	565,950.00	28.3%
4 Interest Income	600.56	6,082.50	(5,482)	12,165.00	4.9%
5 Medicaid Revenue	13,421,460.54	13,672,923.84	(251,463)	27,345,847.00	49.1%
6 General Fund Revenue	382,191.97	523,339.56	(141,148)	1,046,679.00	36.5%
7 Healthy Michigan Revenue	734,278.08	937,633.08	(203,355)	1,875,266.00	39.2%
8 3rd Party Revenue	159,587.27	193,674.00	(34,087)	387,346.00	41.2%
9 Behavior Health Home Revenue	1,052.91	0.00	1,053	0.00	0.0%
10 SSI/SSA Revenue	253,276.05	260,775.84	(7,500)	521,552.00	48.6%
11 Other Revenue	44,811.94	22,200.54	22,611	44,401.00	100.9%
12 <b>Total Revenue</b>	<b>15,201,523</b>	<b>15,980,854</b>	<b>(779,331)</b>	<b>31,961,705</b>	<b>47.2%</b>
<b>Expense</b>					
13 Salaries	6,247,392.06	6,799,658.86	552,267	13,612,264.00	45.9%
14 Social Security Tax	272,591.47	343,175.46	70,584	686,351.00	39.7%
15 Self Insured Benefits	1,649,166.33	1,482,967.70	(166,199)	2,965,936.00	55.6%
16 Life and Disability Insurances	101,065.08	112,633.38	11,568	225,267.00	44.9%
17 Pension	507,266.95	532,459.74	25,193	1,064,919.00	47.6%
18 Unemployment & Workers Comp.	79,731.62	92,122.98	12,391	184,246.00	43.3%
19 Office Supplies & Postage	22,811.60	23,860.86	1,049	47,721.00	47.8%
20 Staff Recruiting & Development	45,846.75	45,252.60	(594)	90,505.00	50.7%
21 Community Relations/Education	4,962.04	7,270.98	2,309	14,542.00	34.1%
22 Employee Relations/Wellness	22,478.33	26,035.98	3,558	52,072.00	43.2%
23 Program Supplies	226,862.76	307,528.98	80,666	615,058.00	36.9%
24 Contract Inpatient	665,716.41	629,122.98	(36,593)	1,258,246.00	52.9%
25 Contract Transportation	27,144.48	33,248.94	6,104	66,498.00	40.8%
26 Contract Residential	2,729,238.39	2,666,258.52	(62,980)	5,332,517.00	51.2%
27 Contract Employees & Services	1,731,846.07	1,979,164.54	247,318	3,958,329.00	43.8%
28 Telephone & Connectivity	70,841.81	66,997.56	(3,844)	133,995.00	52.9%
29 Staff Meals & Lodging	1,797.92	15,112.44	13,315	30,225.00	5.9%
30 Mileage and Gasoline	111,733.92	154,592.28	42,858	309,185.00	36.1%
31 Board Travel/Education	1,235.24	6,832.02	5,597	13,664.00	9.0%
32 Professional Fees	15,094.21	33,286.98	18,193	66,574.00	22.7%
33 Property & Liability Insurance	63,652.52	32,658.48	(30,994)	65,317.00	97.5%
34 Utilities	80,836.16	79,622.88	(1,213)	159,246.00	50.8%
35 Maintenance	70,769.50	78,736.44	7,967	157,473.00	44.9%
36 Rent	122,445.70	122,488.92	43	232,027.00	52.8%
37 Food (net of food stamps)	24,416.76	32,781.60	8,365	65,563.00	37.2%
38 Capital Equipment	13,033.97	28,717.36	15,683	57,435.00	22.7%
39 Client Equipment	24,101.52	7,414.02	(16,688)	14,828.00	162.5%
40 Miscellaneous Expense	54,381.05	54,478.92	98	108,958.00	49.9%
41 Depreciation Expense	161,041.90	186,371.94	25,330	372,744.00	43.2%
42 <b>Total Expense</b>	<b>15,149,503</b>	<b>15,980,854</b>	<b>831,352</b>	<b>31,961,705</b>	<b>47.8%</b>
43 <b>Change in Net Position</b>	<b>\$ 52,021</b>	<b>\$ (0)</b>	<b>\$ 52,021</b>	<b>\$ -</b>	<b>-0.6%</b>
44 Contract settlement items included above:					
45 Medicaid Funds (Over) / Under Spent	\$ 2,193,849				
46 Healthy Michigan Funds (Over) / Under Spent	452,045				
47 <b>Total NMRE (Over) / Under Spent</b>	<b>\$ 2,645,894</b>				
47 General Funds to Carry Forward to FY22	\$ 24,941				
48 General Funds Lapsing to MDHHS	138,733				
49 <b>General Funds (Over) / Under Spent</b>	<b>\$ 163,674</b>				

**Northeast Michigan Community Mental Health Authority**  
**Statement of Net Position and Change in Net Position**  
**Proprietary Funds**  
**March 31, 2021**

	Total Business- Type Activities March, 2021	Total Business- Type Activities Sept. 30, 2020	% Change
<b>Assets</b>			
Current Assets:			
Cash and cash equivalents	\$ 9,373,383	\$ 7,908,516	18.5%
Restricted cash and cash equivalents	980,954	866,778	13.2%
Investments	750,000	750,000	0.0%
Accounts receivable	999,048	943,040	5.9%
Inventory	37,068	37,068	0.0%
Prepaid items	263,855	420,792	-37.3%
Beneficial Interest	4,637	4,637	0.0%
Total current assets	<u>12,408,944</u>	<u>10,930,830</u>	<u>13.5%</u>
Non-current assets:			
Capital assets not being depreciated	80,000	80,000	0.0%
Capital assets being depreciated, net	1,492,026	1,653,068	-9.7%
Beneficial Interest	9,043	9,043	0.0%
Total non-current assets	<u>1,581,069</u>	<u>1,742,111</u>	<u>-9.2%</u>
Total assets	<u>13,990,013</u>	<u>12,672,940</u>	<u>10.4%</u>
<b>Liabilities</b>			
Current liabilities:			
Accounts payable	6,814,549	4,814,405	41.5%
Accrued payroll and payroll taxes	632,436	1,436,289	-56.0%
Deferred revenue	17,709	63,290	-72.0%
Current portion of long-term debt (Accrued Leave)	81,713	72,203	13.2%
Total current liabilities	<u>7,546,407</u>	<u>6,386,187</u>	<u>18.2%</u>
Non-current liabilities:			
Long-term debt, net of current portion (Accrued Leave)	899,240	794,575	13.2%
Total liabilities	<u>8,445,647</u>	<u>7,180,762</u>	<u>17.6%</u>
<b>Net Position</b>			
Invested in capital assets, net of related debt	1,572,026	1,733,068	-9.3%
Unrestricted	3,972,340	3,759,111	5.7%
Total net position	<u>\$ 5,544,366</u>	<u>\$ 5,492,179</u>	<u>1.0%</u>
<b>Net Position Beginning of Year</b>			
Revenue	5,492,179		
Expense	15,201,523		
	(15,149,503)		
Change in net position	<u>52,021</u>		
<b>Net Position March 31, 2021</b>	<u>\$ 5,544,199</u>		

Unrestricted Net Position as a % of projected annual expense  
Recommended Level

12.4% or 45 days  
8% - 25%

GOVERNANCE PROCESS

(Manual Section)

**BOARD JOB DESCRIPTION**

(Subject)

Board Approval of Policy  
Last Revision of Policy Approved

August 8, 2002  
May 14 2020

●1 **POLICY:**

The job of the board is to represent the people of Alpena, Alcona, Montmorency and Presque Isle counties in determining and ensuring appropriate organizational performance. To distinguish the board's own unique job from the jobs of its staff, the board will concentrate its efforts on the following job "products" or outputs:

1. The link between the organization and the people of Alpena, Alcona, Montmorency and Presque Isle counties.
2. Written governing policies which, at the broadest levels, address:
  - A. *Ends*: Organizational products, impacts, benefits, outcomes, recipients, and the relative worth of these Ends or products (what good for which needs at what cost).
  - B. *Executive Limitations*: Constraints on executive authority which establish the prudence and ethics boundaries within which all executive activity and decisions must take place.
  - C. *Governance Process*: Specification of how the board conceives, carries out and monitors its own task.
  - D. *Board-Executive Director Relationship*: How power is delegated and its proper use monitored; the Executive Director role authority and accountability.
3. The assurance of Executive Director performance (as outlined in policy number 03-004 page 1 of 1, Monitoring Executive Performance 2 A and 2B).
4. Maintain regular communication with the County Board of Commissioners in Alcona, Alpena, Montmorency and Presque Isle counties through regular reports with a copy maintained by the Executive Director.



**NORTHEAST MICHIGAN COMMUNITY MENTAL HEALTH AUTHORITY  
POLICY & PROCEDURE MANUAL**

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5. Actively promote involvement of consumers, former consumers, family members and advocacy groups in planning, implementing and evaluating mental health services.
  
6. Actively participate in the planning of health and social services within its service area by involvement with local and regional health service agencies, school districts and pertinent members and groups of the community through regional coordinating councils and multi-purpose collaborative bodies.

**●2 APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board

**●3 DEFINITIONS:**

**●4 REFERENCES:**

**●5 FORMS AND EXHIBITS:**

GOVERNANCE PROCESS

(Manual Section)

**BOARD CORE VALUES**

(Subject)

Board Approval of Policy  
Last Revision of Policy Approved

November 7, 2002  
May 10, 2018

●1 **POLICY:**

The board will create a set of core values that speak to the beliefs of the ownership of the organization as well as staff. These core values shall not be interpreted as ENDS statements, rather the board's guiding principles.

1. Consumer focus shall be at the heart of all activities. Support of consumer independence is paramount, and to the extent consistent with consumer wishes and confidentiality limitations, the constructive involvement of a consumer's family shall be supported.
2. Honesty, respect and trust are values that shall be practiced by all.
3. We will be supportive and encouraging to bring out the best in one another. While we recognize our responsibility to participate, and we need the ability to disagree and confront, we should do so in a fashion that personal offense is neither given nor taken, and no one need fear retaliation.
4. Understanding of progress and movement toward a continuously improving environment is a responsibility for all.

These core values will be reviewed and reaffirmed on an annual basis.

●2 **APPLICATION:**

The Northeast Michigan Community Mental Health Authority Board and staff

●3 **DEFINITIONS:**

●4 **REFERENCES:**

●5 **FORMS AND EXHIBITS:**

NORTHERN MICHIGAN REGIONAL ENTITY  
BOARD OF DIRECTORS MEETING  
10:00AM – MARCH 24, 2021  
GAYLORD BOARDROOM

<b>ATTENDEES:</b>	Roger Frye, Ed Ginop, Gary Klacking, Terry Larson, Christian Marcus, Mary Marois, Gary Nowak, Jay O’Farrell, Richard Schmidt, Karla Don Smeltzer, Joe Stone, Don Tanner, Nina Zamora
<b>VIRTUAL ATTENDEES:</b>	Mary Marois (Traverse City). Karla Sherman (Petoskey), Don Smeltzer (Frankfort), Don Tanner (Benzonia), Nina Zamora (Traverse City)
<b>ABSENT:</b>	Randy Kamps
<b>STAFF:</b>	Christine Gebhard, Lisa Hartley, Chip Johnston, Sandy Kintz, Karl Kovacs, Eric Kurtz, Tema Pefok, Diane Pelts, Brandon Rhue, Sara Sircely, Nena Sork, Denise Switzer, Deanna Yockey, Carol Balousek
<b>PUBLIC:</b>	Jackie Wurst

CALL TO ORDER

Let the record show that Chairman Nowak called the meeting to order at 10:02AM.

ROLL CALL

Let the record show that all Randy Kamps was absent for the meeting on this date; all other NMRE Board Members were in attendance either virtually or in person.

PLEDGE OF ALLEGIANCE

Let the record show that the Pledge of Allegiance was recited as a group.

ACKNOWLEDGEMENT OF CONFLICT OF INTEREST

Let the record show that no Conflicts of Interest to any of the meeting agenda items were expressed.

APPROVAL OF PAST MINUTES

Let the record show that the February minutes of the NMRE Governing Board were included in the materials for the meeting on this date.

**MOTION MADE BY TERRY LARSON TO APPROVE THE MINUTES OF THE FEBRUARY 24, 2021 MEETING OF THE NORTHERN MICHIGAN REGIONAL ENTITY BOARD OF DIRECTORS; SECOND BY JOE STONE.  
ROLL CALL VOTE.**

**“Yea” Votes:** R. Frye, E. Ginop, G. Klacking, T. Larson, C. Marcus, M. Marois, G. Nowak, J. O’Farrell, R. Schmidt, K. Sherman, D. Smeltzer, J. Stone, D. Tanner, N. Zamora

**“Nay” Votes:** Nill

**MOTION CARRIED.**

CORRESPONDENCE

1) The minutes from the March 4, 2021 PIHP CEO meeting.

- 2) A memorandum from Jeffrey Wieferich at MDHHS to PIHP and CMHSP CEOs dated March 3, 2021 regarding Expectations for the Provision of Face-to-Face Services.
- 3) The MDHHS site review schedule of the NMRE beginning April 12, 2021.
- 4) Email correspondence from Robert Sheehan at CMHAM dated March 15, 2021 regarding the virtual 2021 Member Assembly and Election of Officers.
- 5) A document from CMHAM dated March 2021 titled "MDHHS Cost Allocation Initiative and the role of Michigan's CMHSPs: A comprehensive provider system, with clear statutory roles, financed through an advanced Alternative Payment Method (APM)."
- 6) FY21 Medicaid Strategic paper from the Michigan Association of Health Plans. Titled "Performance, Value, Outcomes: Medicaid Managed Care."
- 7) The draft minutes of the Northern Michigan Regional Entity Finance Committee meeting dated March 10, 2021.

#### ANNOUNCEMENTS

Let the record show that there were no announcements made during the meeting on this date.

#### PUBLIC COMMENTS

Let the record show that the members of the public attending the meeting virtually were recognized.

#### REPORTS

##### **Executive Committee Report**

Let the record show that no meetings of the NMRE Executive Committee have occurred since the February Board Meeting.

##### **CEOs Report**

The NMRE CEO Monthly Report for March 2021 was included in the materials for the meeting on this date. Update on Contract Negotiations Team lead reached out to MDHHS about reconsidering some conflicting close out language; early word is AG's office will likely not change the current language. Christian asked about an update on direct care wage. Approved increase through September 30, 2021 for \$2.25 increase plus 12% admin. Any portion of it permanent? Unclear, Governor supportive.

##### **January 2021 Financial Report**

- Traditional Medicaid showed \$65,498,385 in revenue, and \$54,678,556 in expenses, resulting in a net surplus of \$10,819,829. Medicaid ISF was reported as \$6,157,679 based on the Preliminary FSR. Medicaid Savings was reported as \$6,182,146.
- Healthy Michigan Plan showed \$9,962,378 in revenue, and \$7,490,523 in expenses, resulting in a net surplus of \$2,471,854. HMP ISF was reported as \$8,659,840 based on the Preliminary FSR. HMP savings was reported as \$0.
- Net Position\* showed net surplus Medicaid and HMP of \$13,291,684; Medicaid and HMP combined ISF based on Preliminary FSR was reported as a \$14,817,519; the total Medicaid and HMP net surplus, including carry forward and ISF was reported as \$34,291,349.
- Health Home showed \$126,350 in revenue, and \$99,541 in expenses, resulting in a net surplus of \$26,809.
- SUD showed all funding source revenue of \$6,571,689, and \$5,507,165 in expenses, resulting in a net surplus of \$1,064,524. Total PA2 funds were reported as \$5,894,040.

Ms. Yockey reported that FY20 close out is in process as is the yearly financial audit. It was noted that eligible are still high due to the COVID-related paus in redeterminations. Carry forward into FY22 will likely be \$4.5M with a fully funded ISF.

**MOTION MADE BY MARY MAROIS TO RECEIVE AND FILE THE NORTHERN MICHIGAN REGIONAL ENTITY MONTHLY FINANCIAL REPORT FOR JANUARY 2021; SECOND BY CHRISTIAN MARCUS. ROLL CALL VOTE.**

**“Yea” Votes:** R. Frye, E. Ginop, G. Klacking, T. Larson, C. Marcus, M. Marois, G. Nowak, J. O’Farrell, R. Schmidt, K. Sherman, D. Smeltzer, J. Stone, D. Tanner, N. Zamora

**“Nay” Votes:** Nill

**MOTION CARRIED.**

**NMRE SUD Oversight Board Report**

Let the record show that the next meeting of the NMRE Substance Use Disorder Oversight Board is scheduled to occur at 10:00AM on May 3, 2021.

**Operations Committee**

The minutes from March 16, 2021 were included in the meeting materials in draft form. Mr. Kovacs asked Ms. Yockey if the \$4.5 carry forward and fully funded ISF referenced in the Financial Report includes pay-back of unspent DCW; Ms. Yockey replied that it does.

NEW BUSINESS

**CE-CERT Training**

A training on the Components for Enhancing Clinician Experience and Reducing Trauma (CE-CERT) Model was requested by the regional Clinical Leadership Committee. A proposal for this training to be offered to the five CMHSPs and NMRE was sent to Board Members on March 23, 2021. The comment was made that this is an appropriate use of surplus funds.

**MOTION MADE BY MARY MAROIS TO APPROVE THE SPENDING OF EIGHTY-SEVEN THOUSAND NINE HUNDRED (\$87,900.00) DOLLARS SO THAT THE NORTHERN MICHIGAN REGIONAL ENTITY CAN HOST A REGIONAL TRAINING ON THE COMPONENTS FOR ENHANCING CLINICAL EXPERIENCE AND REDUCING TRAUMA MODEL; SECOND BY JOE STONE. ROLL CALL VOTE.**

**“Yea” Votes:** R. Frye, E. Ginop, G. Klacking, T. Larson, C. Marcus, M. Marois, G. Nowak, J. O’Farrell, R. Schmidt, K. Sherman, D. Smeltzer, J. Stone, D. Tanner, N. Zamora

**“Nay” Votes:** Nill

**MOTION CARRIED.**

OLD BUSINESS

**NMRE ByLaws and Open Meetings Act Compliance**

An opinion from attorney Steve Burnham on the NMRE’s ByLaws and Open Meetings Act Compliance related to virtual meetings was sent to Board Members on March 23, 2021. One suggestion made were to consider consent agenda for non-voting items (Agenda, Minutes). Mr. Stone noted that the order (PA 254 of 2020) to allow public meetings to take place virtually expires on March 31, 2021, unless local health departments request and extension. The CDC, MDHHS, OSHA, and MiOSHA all weighed in; some have differing opinions. Beginning April 1, 2021, the Open Meetings Act limits virtual attendance to military leave, medical condition, or a statewide or local state of emergency/state of disaster. Adhering to only these exceptions would require a change to NMRE ByLaws and policy.

**928 Local Match – The Latest**

During the March 18<sup>th</sup> Contract Negotiations Committee meeting, Mr. Kurtz requested that Section 938 be removed from the PIHP Contract. Mr. Stone asked for Mr. Johnston’s input. Mr. Johnston responded

that advocacy efforts with legislators continue; there is “talk” of using COVID dollars to replace local. Mr. Tanner noted that counties benefit from the jail services provided by CMHSPs using the local dollars. Mr. Kurtz stated that current language in boilerplate forces the PIHP to be a taxing entity; PIHPs don’t have that constitutional authority.

### **NMRE Public Relations**

Mr. Kurtz obtained the contact information for the PR firm used by the Association and a local firm used by North Country and Northern Lakes. Mr. Kurtz clarified some assertions made in some recent Crain’s articles. He emphasized the movement in the public behavioral health system toward care coordination and the health homes initiatives (the other side of the story). Contact information was also obtained from the former PR person for MDHHS who has moved on and started her own firm. A variety of sources may be tapped.

### PRESENTATION

#### **NMRE Quality Assurance and Performance Improvement Program (QAPIP)**

The FY20 QAPIP Evaluation and FY21 QAPIP Workplan were included in the meeting materials. MDHHS contacted PIHPs in November 2020 about its intent to review “the impact and effectiveness of the quality assessment and performance improvement program (QAPIP) of each prepaid inpatient health plan (PIHP).” Mr. Kurtz noted that the QAPIP must also be reviewed annually by the PIHP’s Governing Board; the Governing Board must also receive routine reports on the effectiveness of the QAPIP. Mr. Kurtz acknowledged that it is likely the State is focusing on this due to recent HSAG Compliance Examination findings statewide. The two documents were reviewed.

**MOTION MADE BY JOE STONE TO APPROVE THE NORTHERN MICHIGAN REGIONAL ENTITY QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT PROGRAM EVALUATION FOR FISCAL YEAR 2020 AND THE QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT PROGRAM WORKPLAN FOR FISCAL YEAR 2021 AS PRESENTED AND REVIEWED ON THIS DATE; SECOND BY GARY NOWAK. ROLL CALL VOTE.**

“Yea” Votes: R. Frye, E. Ginop, G. Klacking, T. Larson, C. Marcus, M. Marois, G. Nowak, J. O’Farrell, R. Schmidt, K. Sherman, D. Smeltzer, J. Stone, D. Tanner, N. Zamora

“Nay” Votes: Nill

**MOTION CARRIED.**

### COMMENTS

#### **Board**

- Ms. Marois expressed that staff did a nice job on the two QAPIP documents.
- Mr. Frye thanked Ms. Yockey for her efforts with the FY20 closeout.

### MEETING DATES

The next meeting of the NMRE Board of Directors was scheduled for 10:00AM on April 28, 2021.

### ADJOURN

Let the record show that Mr. Nowak adjourned the meeting at 10:55AM.

	Program	Consumers served April 2021 (4/1/21 - 4/30/21)	Consumers served in the Past Year (5/1/20 - 4/30/21)	Running Monthly Average(year) (5/1/20 - 4/30/21)
1	Access / Crisis / Prescreens	42 - Routine 0 - Emergent 0 - Urgent 41 - Crisis 52 - Prescreens	638 - Routine 1 - Emergent 6 - Urgent 603 - Crisis 553 - Prescreens	53 - Routine 0 - Emergent 1 - Urgent 51 - Crisis 46 -Prescreens
2	Doctors' Services	437	1403	413
3	Case Management			
	Older Adult (OAS)	94	184	107
	MI Adult	122	384	144
	MI ACT	26	166	25
	Home Based Children	70	116	48
	MI Children's Services	171	363	135
	IDD	159	372	150
4	Outpatient Counseling	138(19/119)	383	182
5	Hospital Prescreens	52	533	46
6	Private Hospital Admissions	21	224	19
7	State Hospital Admissions	0	3	0
8	Employment Services			
	IDD	40	94	42
	MI	20	71	22
	Touchstone Clubhouse	78	90	81
9	Peer Support	43	62	39
10	Community Living Support Services			
	IDD	72	127	70
	MI	62	105	63
11	CMH Operated Residential Services			
	IDD Only	58	72	58
12	Other Contracted Resid. Services			
	IDD	31	34	31
	MI	39	43	37
13	Total Unduplicated Served	1074	2282	1072

County	Unduplicated Consumers Served Since May 2020
Alcona	247
Alpena	1413
Montmorency	245
Presque Isle	281
Other	74
No County Listed	22



As discussed during the 4-20-21 NMRE Operations Committee meeting and subsequently approved by the NMRE Board on 4-28-21, this memo from the NMRE is intended to outline a menu of options for benefit stabilization at both the CMHSP and provider levels. In discussions with CEOs and clinical leaders within our region (as well as statewide), between the COVID-19 pandemic and the general lack of clinically qualified staff within our region, the NMRE wants to do everything it can to support the recruitment and retention of qualified and competent staff at all levels for our contractual Medicaid service obligations.

Options discussed and supported by the NMRE include but are not limited to:

- Flat or percentage onetime retention incentives for both directly employed and provider staff (since other CMHSPs and regions are doing the same thing, you may need to consider how much and to whom). This could also include a retention bonus for those who did not have the option of being remote during the pandemic or for those who worked through the pandemic.
- Student loan or certification repayments.
- Ongoing training and education costs.
- Paid internships when allowed by universities and through the provisions of Medicaid covered services.
- Recruitment bonuses such as sign-on, travel, and moving/relocation expenses.
- Permanent direct care wage increases based on true market competitiveness. Since these would-be on-going costs, attention must be paid to staying within your Per Member Per Month allocation "post" pandemic.

Other options proposed outside of these initiatives can be requested and approved through the NMRE CEO. If you have any questions or would like further information, please feel to reach out to me by email or call 231-330-2119.

Sincerely

A handwritten signature in black ink, appearing to read "Eric Kurtz", with a stylized, cursive script.

Eric Kurtz  
NMRE CEO



# DRAFT



## QI Council Minutes

For Meeting on 04/19/21

10:17 AM/11:05 AM

Board Training Room/Teams/Uber

**Meeting called by:** Lynne Fredlund  
**Type of meeting:** Bi-Monthly  
**Facilitator:** Lynne Fredlund  
**Note taker:** Diane Hayka via digital recorder  
**Vice Chair:** Jen Whyte  
**Timekeeper:**

**Attendees:** Mary Crittenden, Lynne Fredlund, Amber Gapske, Joe Garant (via Uber), Rich Greer

**Absent:** Genny Domke, Nena Sork, Angie Stawowy, Jen Whyte

**QI Coordinator:** Lynne Fredlund

**Assistant:** Lee Ann Bushey

**Disclaimer:** Due to COVID 19, the QI Council meeting was held with a combination of in-person, Teams and Uber conference call.

### Agenda Topics

#### Review of Minutes

**Discussion:**

By consensus, the minutes of the January 25, 2021 meeting were approved.

**Action items:**

**Person responsible:**

Diane Hayka via digital recorder

**Deadline:**

ASAP

#### Committees requesting Additional Time

There were no requests from the Committees to have additional time.

#### Management Team

**Discussion:**

Mary Crittenden reported the minutes from the March 8<sup>th</sup> meeting were included in the materials. She noted the Agency is doing well financially and are \$2.2M to the good. Mary reports additional revenue has been received – one reason due to the waiver of the spend-down requirements during COVID. She noted Management Team approved a 3% COLA (cost of living allowance) retroactive to September 27, 2020. This will be reflected in staff's pay this week. Mary informed Council members the Agency is looking to educate staff on ways to be fiscally responsible in their personal lives with the possible establishment of deferred compensation accounts. Investigation is underway to provide an auto-enroll process to establish accounts for staff and if staff decline, they would be able to make that choice. Mary noted the Agency does not gain anything for staff participating in deferred compensation; however, encouragement for staff to prepare for retirement would be beneficial. Financial situations can often be stressful and the Agency would like to assist with providing staff with educational opportunities on the

# DRAFT

importance of planning for their future. Mary Crittenden reported there is a focus to complete needed upgrades to the group homes, which is very difficult due to contractor availability. Arjo lifts and generators will be purchased. Some homes will required some furniture and flooring updates.

Mary Crittenden reported the OBRA Contract assessment rates have been increased. She noted the difficulty in recruiting staff/contractors to provide the assessments timely. The Agency is also looking to upgrade the telephone system for the Agency. A team was formed and the team has met with vendors, brokers and project coordinators in researching the equipment needs for this upgrade. She notes the group has narrowed it down to two vendors and will be having demonstrations of the systems.

She reported Management Team did complete the Annual Submission, a requirement of the State and policy review is getting back on track.

Lynne Fredlund noted the second wave of the employee satisfaction survey was conducted, closing last Friday. A small team will now meet to compile the results. Once the data is reviewed and themes are identified, Management Team will review and share results with staff.

**Action Items:**

Report Monthly

**Person Responsible:**

Nena Sork/Mary Crittenden

**Deadline:**

## Advisory Council

**Discussion:**

Lynne Fredlund reported the minutes for the Advisory Council were included in the materials for this meeting. The Council will be joining the Board as part of the Strategic Planning in June. Per the minutes from the February and April meeting the Council continues to meet regularly. It was noted Nena Sork updated the Council on the Behavioral Health Home program and services provided during COVID including the availability of options of using telehealth in the parking lot.

The NMRE's Day of Recovery Education will be held on May 21<sup>st</sup> as a virtual event. The theme is 'Personal Responsibility and Self Advocacy.' The Administrative Conference Room is reserved for our region and there may be other locations in Alpena such as the Bay View Center and Touchstone's clubhouse hosting this virtual event. The Walk a Mile in My Shoes event is traditionally held in May; however, due to COVID it has been postponed to September 29<sup>th</sup> and will be a Facebook event.

**Action Items:**

Report Bi-Monthly

**Person Responsible:**

Nena Sork

**Deadline:**

## CARF Committee

**Discussion:**

Lynne Fredlund noted while the CARF Committee has not met as a group, they are conducting their business by using email. She notes the group did receive information as to the new and revisions to standards. She noted the new standard book has been ordered. The new standards will begin July 1. Committee members are currently reviewing the program descriptions for the areas they are assigned to and will have any revisions to the committee by the May meeting. The Committee is also looking at beginning "the countdown to CARF." CARF could come

# DRAFT

anytime between April 1<sup>st</sup> and June 30<sup>th</sup> of 2022. Lynne reported the Conformance Report for the current year must be submitted by June 30<sup>th</sup>. Lynne reported while compiling the Conformance Report for this year the 2020 Standards and the 2021 Standards will be reviewed to assure there are no surprises in the new requirements. Once the countdown begins, the Committee will meet monthly.

**Action Items:**

**Person Responsible:**

Lynne Fredlund

**Deadline:**

## Clinical Leadership Team

**Discussion:**

The minutes from the February 10<sup>th</sup>, February 24<sup>th</sup>, March 10<sup>th</sup> and March 24<sup>th</sup> meetings are included in the packet. Mary Crittenden reported she will be wrapping up her participation in the Clinical Leadership Team by month end. Mary reports the Clinical Leadership Team has been focusing on improving training opportunities for staff. There are many virtual trainings provided virtually at low costs right now and with the extra Medicaid funding received, the opportunity to take the trainings is an efficient method. She reports the Team continues to review a few difficult cases each meeting. The Team also monitors inpatient stays.

The Take Back Event will be held this Saturday from 10:00 a.m. to 2:00 p.m. at the Alpena Safety Facility. This is an opportunity for community members to dispose of unwanted prescription medication, in particular opioids. Mary reported the Agency will also be hosting a blood drive tentatively scheduled for May 18<sup>th</sup>. The Blood Drive is coordinated through Versiti and 98% of the blood collected stays in Michigan. She notes Northeast staff will have the first opportunity to sign up and will be paid for their time during the donation process. If there are additional slots available, it will be opened up for family members and/or community members to donate. Mary reported Versiti takes care of all the workers, etc. and we will not need volunteers to work the drive.

Mary Crittenden reported Lisa Orozco will take over the responsibility of providing the updates for QI processes to the Council from Clinical Leadership Team.

Lynne Fredlund inquired as to the role of the Interdisciplinary Team and what cases this team works on. Mary reported the Clinical Leadership Team will review the more emergent cases needing a quick response. The Interdisciplinary Team will work with cases with ongoing needs for cases that may not be showing progress.

**Action Items:**

Report Monthly

**Person Responsible:**

Mary Crittenden

**Deadline:**

## Customer Satisfaction Committee

**Discussion:**

Lynne Fredlund provided an update in the absence of Angie Stawowy for the Customer Satisfaction Committee. Lynne notes the I/DD Customer Satisfaction survey was completed. The results from the last survey were distributed along with the new survey. Lynne noted the brochure limits the amount of questions contained in the trifold brochure and they would like to feature more questions when compiling the responses for the 2021 survey.

# DRAFT

**Action Items:**

Report Bi-Monthly

**Person Responsible:**

Angie Stawowy

**Deadline:**

## **Resource Standards and Development Committee**

**Discussion:**

Lynne Fredlund reported Genny Domke was not able to be here to report. Lynne had talked to committee member, Julie Hasse, and was told there is only one more team to be recognized for Team of the Month. Once the team recognition cycle is complete, the RS & D will focus on presenting committee recognition of the month with a brief explanation of the duties of the committee. The Team of the Month was Pine Park Group Home and the Employee of the Month was Samantha Bowers.

Theme days and activities recently included March Madness brackets, wear green for St. Patrick's Day, Downs Syndrome Day, Pet picture board and having hearts placed around the building with staff names.

**Action Items:**

Monthly

**Person Responsible:**

Genny Domke

**Deadline:**

## **Risk Management Committee**

**Discussion:**

Lynne Fredlund reported the Risk Management Committee meets quarterly. There is a small group that meets for individual risk situations should they occur.

**Action Items:**

Report Bi-Monthly

**Person Responsible:**

Lynne Fredlund

**Deadline:**

## **Safety Committee**

**Discussion:**

Rich Greer reported the Safety Committee has met twice since last report; however, the January minutes were the only approved minutes. The meeting for April will be cancelled as Rich will be on vacation. Rich reports the committee continues to review and update the Safety Manual. The Committee is working on the Infestation Control Policy. A professional with West Bend Argent, Carey Freed, attended a recent meeting and provided the Committee with information related to bedbugs and what should be done to handle those situations.

Rich Greer noted Nicole Kaiser attended the last Safety meeting and she brought attention to the drills conducted in the group home are redundant. The homes are conducting fire drills on each shift each month. Rich reports CARF requires once a year, licensing requires once a quarter. Nicole's recommendation would be to continue to have one per month but only on one shift each month so one month the drill would be conducted on a day shift, the next month the drill would be conducted on the afternoon shift, and the final month of the quarter the drill would be conducted on the midnight shift. This would fulfill the licensing requirements. Rich notes the midnight shift drill is

# DRAFT

supposed to be conducted when a deep sleep is involved. He reported Nicole will be joining the Safety Committee as a member. The change would apply to the fire drills; there are still other drills mandated such as tornado drills.

**Action Items:**

**Person Responsible:**

Rich Greer

**Deadline:**

ASAP

## Utilization Management

**Discussion:**

Lynne Fredlund noted Jen Whyte was not available to report. The minutes from the February 4<sup>th</sup> and March 4<sup>th</sup> Utilization Management Committee were included in the materials for today's meeting. Lynne Fredlund noted Jen Whyte had indicated Meaningful Use objectives for the current year have been met. The case record review continues. Lynne noted the LOCUS score is averaging 16.2; however, she is not sure what a good average should be.

Lynne reported in the minutes of the March 4<sup>th</sup> meeting the COVID report indicated phone contact is still used quite frequently in some programs more than others. Community visits did increase, which is a good sign. It was noted many of the AFC homes still do not want the case holders coming in to the homes.

Per the minutes of the Committee, Respite usage review continues to assure the authorization amounts are based on the need of the individual. The report looks at the number of days remaining in the authorization with the percentage of remaining authorized respite. If the respite is not being used or needed, the plan should reflect a lower authorization level.

**Action Items:**

Report Monthly

**Person Responsible:**

Jennifer Whyte

**Deadline:**

## Quality Oversight Committee - NMRE

**Discussion:**

Lynne Fredlund reported this Committee has primarily been analyzing the works of this committee. Mary Marlatt-Dumas chaired this Committee and she is no longer with the NMRE. The last few meetings critical incidents and risk events were a focus. Of these two, the critical incidents is the only one submitted and discussed; the risk events have not been reported on for some time. Lynne Fredlund explained the process in determining if an event is classified as a true risk event noting this is based on a rolling year. The behavior treatment will also be focused on in the future to provide tracking and trending the elements of the treatment plans. This will be a difficult task as currently the psychologist track this and have more firsthand data in determining treatment plans.

Lynne Fredlund reported Tema Pefok has been hired by NMRE and will be overseeing this committee. She will have compliance and quality assurance duties.

Lynne Fredlund reported the Committee was focusing on the MDHHS review underway and the five boards are trying to assure they are providing the same information across the board.

**Action Items:**

Report Bi-Monthly

# DRAFT

**Person Responsible:**

Lynne Fredlund

**Deadline:**

## **QI Member Concerns**

**Discussion:**

Members had no concerns. Joe Garant noted the supported employment opportunities at NEMROC is going quite well and they are gearing up for the summer. He noted NEMROC received a grant from the Community Foundation to add more hours to the litter brigade this summer.

**Action Items:**

**Person(s) Responsible:**

All members

**Deadline:**

## **Project Team/Workgroup Update/Old Business**

1. **Delegated Function Response – POC sent**

Lynne Fredlund reported there was a Plan of Correction (POC) submitted in response to the Delegated Function review and have not received a response as to whether the POC was accepted.

2. **COVID Matrix – Project Team**

Lynne Fredlund reported the COVID Matrix is a work in progress. She still has two programs to receive their processes used in providing services during COVID.

3. **Audit – Financial/Compliance**

Lynne Fredlund reported the Audit was conducted in February and the financial audit was presented to the Board in March. The Compliance audit will be presented next to the Board. [Lynne Fredlund indicated she believed it may be at the May meeting; however, due to Strategic Planning, this will not be presented until August after the Strategic Planning is complete.]

## **Department/Program Process Improvements/New Business**

1. **Improvements by Department/Program**

Lynne Fredlund provided Council members with an update on improvement projects. She noted the formatting of this report still needs work and having the programs in alphabetical order might help in the viewing of this report. She noted MI Supported Employment developed the MI Integrated Employment Individual Placement Support Goals. A satisfaction survey will also be sent to the individuals receiving MI supported employment services.

Lynne Fredlund reported the Placement Committee is developing a flowchart on placement of individuals. With all the new staff, it will be important to assure staff are provided with consistent information related to the process. The Placement Committee is also updated the Assessment Form which assesses rates for placements.

Clinical Leadership Team is providing an opportunity to train staff on Probate legal paperwork. Mary Crittenden reported Casey Harper created a PowerPoint to walk clinical staff through the process of completing paperwork for the court. Dr. Spurlock will also be collaborating in the training process. There is also a process established to streamline the flow of the legal paperwork received at the office to assure proper staff are

# DRAFT

notified and the needed information gets in the Majestic electronic health record. Mary noted Casey will be leaving the Agency and the position will be posted.

Lynne Fredlund reported the availability of the Rapid COVID testing is very helpful. She noted she had one conducted as she had some symptoms and needed to train the Board at their meeting. She reported the nurse conducting the test was very gentle and made the process an easy one.

2. **QI Training to be scheduled for new members**

Lynne Fredlund reported she will provide training to the new members of this Council prior to the next meeting.

3. **Other**

## **Adjournment**

**Discussion:** Next Meeting is scheduled for June 21, 2021, at 10:15 a.m. in the Board Training Room and hopefully this can be an in-person meeting.

**Action Items:** By consensus, this meeting adjourned at 11:05 a.m.

## **JUNE AGENDA ITEMS**

### **Policy Review**

### **Policy Review & Self-Evaluation**

### **Monitoring Reports**

Budgeting 01-004

Ends 04-001

### **Activity**

Strategic Planning – Part II [Ends Monitoring and Reporting]

### **Educational Session**

Ends discussion





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## PUBLIC NOTICE

Listed below is the schedule of monthly board meetings for the Northeast Michigan Community Mental Health Authority Board. Each meeting is scheduled to begin at **3:00 p.m.** in the Board's Offices, 400 Johnson Street, Alpena unless otherwise specified. Regular monthly Board meetings are to be held the second Thursday of each month.

### MONTHLY BOARD MEETINGS

May 13, 2021	@ 3:00 p.m. *
June 10, 2021	@ 3:00 p.m. *
July 8, 2021	@ 3:00 p.m. *
August 12, 2021	@ 3:00 p.m.
September 9, 2021	@ 3:00 p.m.
October 14, 2021	@ 3:00 p.m.
November 4, 2021	@ 3:00 p.m.**
December 9, 2021	@ 3:00 p.m.
January 13, 2022	@ 3:00 p.m.
February 10, 2022	@ 3:00 p.m.
March 10, 2022	@ 3:00 p.m.***
April 14, 2022	@ 3:00 p.m.****

\* Strategic Planning Session – 3 parts

\*\* The November meeting is held one week earlier due to the regular date falling on a holiday. If there is little business, this meeting may be cancelled at the call of the Chair.

\*\*\* Recognition is held each year in March honoring those Board members reaching notable milestones in their tenure with the Board during the previous year

\*\*\*\* The April meeting is the organizational meeting for the Board and meeting times for the remainder of the year are determined at that time which may affect the meeting dates above.



# WEEKLY Update

April 30, 2021

**COVID-19 Resources:** CMHA has developed a curated set of COVID-19-related resources and announcements from a range of reputable state and national sources. That curated set of resources, which will be regularly updated, **is available by [CLICKING HERE](#)**.

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## CMH Association and Member Activities

**New!** CMHA in Gongwer article: Staff shortages, client crises made covid hard on mental health services



Below are excerpts from a recent Gongwer article on the key issues facing Michigan's mental health system. Gongwer is one of Michigan's core Capitol news sources.

The darkest days of the coronavirus pandemic tested Michigan's mental health care system's strength and resiliency, faced with crippling challenges but also opportunities to grow.

Several providers in interviews with Gongwer News Service said they are becoming concerned about pandemic-driven negative trends in suicidal ideation – especially among youth, teens and young adults – and the care of adults with disabilities.

For some, the circumstances were easier than others. While there have been success stories as providers received the chance to take their services into the virtual realm, others have struggled mightily with staff shortages and funding for necessary support for a strong mental health safety net.

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

### Traveling Art Show

Traveling Art Show VI features pieces from Consumer Art Contests across Michigan. Anyone interested in any of the pieces shown may contact Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org). Those NOT sold by October 1, 2021, will be auctioned off at the 2021 Fall Conference in Traverse City, Michigan. Art may be available for viewing locally or on the [CMHA website](#). Check with your local CMH for more information or email Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org).

## State & National Developments and Resources

### **New!** Michigan's Stay Well initiative announces direct support professional trainings

**Tuesday, May 11, 1:00 – 2:00 p.m. – “Addressing Burnout” - specifically for direct care supervisory staff.**

As the pandemic wears on, burnout among direct care workers is on the rise. If you're a clinician, case management staffer or supervisor trying to manage your own pandemic-related stress while also supporting your team, consider registering for a free, one-hour webinar on addressing burnout. To learn more and to register click link provided below:

[https://zoom.us/webinar/register/WN\\_yafPlaKNT1Ovg7AL3C3tZA](https://zoom.us/webinar/register/WN_yafPlaKNT1Ovg7AL3C3tZA)

**Thursday, May 13, 2:00 – 3:00 p.m. – “Uplifting Our Direct Care Workers” - for hands-on direct care staff.**

Direct care workers have carried a heavy psychological burden throughout the COVID-19 pandemic, risking their own health as they care for others. Many are suffering from emotional

distress because of this burden. A free, one-hour webinar may help those providing hands-on care to manage their feelings and regain hope. To register click link provided below:

[https://zoom.us/webinar/register/WN\\_EEN6bLw-TOKgrFJfC9XXZw](https://zoom.us/webinar/register/WN_EEN6bLw-TOKgrFJfC9XXZw)

The presenter for both webinars is Erin Wallace, CDP, Senior Outreach Specialist for the Stay Well program. Erin has spent much of her 20-year health care career providing education and support for direct care staff.

**New! Video recording available from April 28 MDHHS webinar: Important Updates on AFCs and HFAs COVID-19 Emergency Response**

MDHHS has recently released the recording from the April 14 presentation, by MDHHS, around the Important Updates on AFCs and HFAs COVID-19 Emergency Response. That video can be [found here](#). It can be accessed using code: **95g\*7q0K**

**New! MDHHS announces launch of pilot MiCAL crisis helpline in Oakland County and Upper Peninsula, services to be expanded statewide in coming months**

Below are excerpts from a recent press release related to Michigan's MiCAL roll out.

The Michigan Department of Health and Human Services (MDHHS) released announced the launch of the Michigan Crisis and Access Line (MiCAL), with the rollout beginning in Oakland County and the Upper Peninsula.

Michiganders in Oakland County and the Upper Peninsula will be able to call, text or chat with MiCAL for free behavioral health crisis triage, support, resource information and referral to local services 24 hours a day, 7 days a week. MiCAL can be reached via phone or text at 844-44-MICAL (844-446-4225). Chat is accessed through [Michigan.gov/MiCAL](https://Michigan.gov/MiCAL).

Additionally, MDHHS is integrating the Michigan Warmline into MiCAL, available for all Michiganders across the entire state. The Michigan Warmline provides individuals with emotional support from a certified peer support specialist or peer recovery coach from 10 a.m. to 2 a.m., 7 days a week. The Michigan Warmline can be reached at 888-PEER-753 (888-733-7753).

**MiCAL highlights:**

- Operated by Common Ground, with over 50 years of crisis services experience.
- Available to all Michiganders with mental health and substance use disorder needs regardless of severity of need, insurance status or ability to pay.
- Integrated with CMHSP crisis services including afterhours crisis line coverage, care coordination protocols and the activation/dispatch of in-person crisis services.
- MiCAL is available for persons in need, a concerned family member or friend or a helping professional.
- More information about MiCAL, including plans for future rollouts to more parts of the state, is available at [Michigan.gov/MiCAL](https://Michigan.gov/MiCAL).

## **New! MDHHS awards grant to develop and implement statewide system of behavioral health mediation services**

Below are excerpts from a recent press release related to the launch of Michigan's mental health mediation system.

The Michigan Department of Health and Human Services (MDHHS) has awarded Oakland Mediation Center a grant to develop and implement a statewide system of local mediation services to resolve disputes related to behavioral health services provided by Community Mental Health Services Programs (CMHSP) and their contract providers.

The use of mediation as a first step in the dispute resolution process fosters better treatment relationships and provides for a timelier agreement on what supports and services will be provided by the responsible mental health agency.

The project funded by this grant is expected to be fully implemented by September 2021.

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

## **New! MDHHS names Demetrius Starling to head Children's Services Agency that oversees child welfare system**

Demetrius Starling, who has more than 20 years of experience protecting children and assisting their families, has been named the new executive director of the Children's Services Agency, Michigan Department of Health and Human Services (MDHHS) Director Elizabeth Hertel announced today.

Beginning May 2, Starling will lead the agency that oversees the state's child welfare system, including Children's Protective Services, the foster care system that serves approximately 11,500 children, adoption services and juvenile justice programs.

The full press release around Ms. Starling's appointment can be [found here](#).

**New! ACMH announces Walk A Mile event**

# #WalkInMyShoes

**In honor of Children's Mental Health Awareness Day**, the Association for Children's Mental Health has asked youth and young adults with mental health experiences and their parents and families to create videos capturing what it's like to walk in their shoes or an awareness message they care about. In an effort to shine a light on lived experience, we will be hosting a special showcase event on Children's Mental Health Awareness Day, **May 7th**.

Every journey begins with a single step. Help us make the world a little more hopeful and connected by joining us for our #WalkInMyShoes Showcase. Let's change the world, one step at a time, by spreading awareness and letting others know that they are not walking alone!

## Event Details

**When:** May 7th, 2021 at 12 PM EST

**Where:** Zoom, link provided upon registration

## How to Register

To register, visit our website at:

[www.acmh-mi.org/events/walkinmyshoes-screening/](http://www.acmh-mi.org/events/walkinmyshoes-screening/)



For more details, please visit [acmh-mi.org](http://acmh-mi.org), or email Sara Reynolds at [sreynolds@acmh-mi.org](mailto:sreynolds@acmh-mi.org).

<http://www.acmh-mi.org/events/walkinmyshoes-screening/>

**New! CHCS: Using population identification strategies to tailor care for individuals with complex needs**

The Center for Health Care Strategies (CHCS) has recently announced a webinar on population health for persons with complex needs:

**Date and Time:** Monday, May 17, 12:30-2 pm ET

Traditional approaches to identifying adults with complex health and social needs for care management programs rely on cost, utilization, or clinical patient attributes. However, individuals with complex needs are not homogenous — within this broad category patient needs vary widely, thus a single programmatic approach will likely not benefit everyone. Using data-driven methods to identify unique population subsets can help health care organizations better tailor care interventions to meet a diverse array of patient needs.

This webinar, coordinated by the Better Care Playbook and made possible through the Seven Foundation Collaborative, will feature promising strategies from health systems and payers — including Kaiser Permanente, New York City Health + Hospitals, and CareOregon — for effectively identifying people with complex health and social needs to inform tailored health care interventions for targeted subpopulations. Provider organizations, health systems, health plans, researchers, and other interested stakeholders are invited to join this 90-minute event.

[Register for this event here.](#)

## State Legislative Update

### **New!** View April's Legislative Video on CMHA's Website

The Capitol Briefing is a monthly resource available to CMHA members providing a high-level overview of the key items impacting the public mental health system at the State Capitol.

Our April Briefing features CMHA Associate Director, Alan Bolter, provides an update regarding the Senate integration proposal — “Gearing Towards Integration”.

To view the latest video, [CLICK HERE!](#)

### **New!** House and Senate Putting Together Federal COVID Spending Plans

This week, the Michigan House and Senate Appropriations Committees considered a handful of COVID-19 supplemental appropriations for the Fiscal year 2020-21. These bills aim to spend a large sum of the federal funds allocated through the Coronavirus Response and Relief Supplemental Appropriations (CRRSAA) passed in December, the more recently-passed American Rescue Plan Act (ARPA), as well as the state's General Fund. All of the House and Senate supplementals and their summaries can be found [here](#).

In the House Appropriations Committee, House Bills 4419, 4420 and 4421 (School Aid) were all passed out of committee. In total, the Health and Human Services portion is approximately \$1.7 billion. The following are some items to note:



### House Bill 4419

- \$34.8 million for SUD block grant
- \$2.9 million in fed funding for crisis intervention and other recovery support services for children and adults with serious mental illness and SUD.
- \$32 million for mental health block grant
- Section 351 boilerplate. Requires DHHS to prioritize federal SUD and mental health grants to appropriately support crisis services, including CSUs, mobile crisis services and the Michigan Crisis and Access Line (MCAL).

### House Bill 4420

- House Bill 4420 includes a net \$0 reappropriations in order to correct the fund sourcing referenced in boilerplate for Recovery High School grants and Recovery Community Organization grants.
- \$6.6 Million for Certified Community Behavioral Health Clinics Demonstration Program – assumes the demonstration would begin July 1, 2021.
- Mental Health Facilities - Includes **\$205.0 million** of federal Coronavirus State Fiscal Recovery Funds to:
  - Create a competitive grant program to increase the number of long-term pediatric psychiatric inpatient hospitals or centers (\$100.0 million).
  - Plan and construct a new Hawthorn Center for children and adolescents (\$85.0 million).
  - Create a competitive grant program for infrastructure investments to improve behavioral health care provided through emergency departments (\$15.0 million).
  - Support 12 new psychiatric beds through McLaren Northern Michigan (\$3.0 million).
  - Support behavioral health pilot program through McLaren Greater Lansing (\$2.0 million).
- Sec. 401. Recovery High Schools (\$600,000)
- Sec. 402. Recovery Community Organizations (\$600k)
- Sec. 452. Community Health Campuses Pilot Project. Requires appropriation to be awarded for a pilot project that develops an integrated wellness facility that includes mental, physical, and behavioral health components; requires pilot to serve underserved areas where one-stop wellness is deficient or absent; requires facility to include indoor aquatics, gymnasium, and workout facilities and the workout facilities must provide no or low-cost access to individuals earning 200% of the federal poverty level.

In the Senate Appropriations Committee, Senate Bills 36 and 216 (School Aid) were unanimously passed out of committee with substitutes. In total, the Health and Human Services portion equals approximately \$1.17 billion in federal funding and \$35.21 million in GF/GP for a total of \$1.22 billion in supplemental appropriations. Items to note in these supplementals include:

- \$347.3 million in Federal COVID epidemiology and laboratory capacity grant with \$20.0 million be allocated to public and nonpublic K-12 schools and intermediate school districts for COVID-19 testing and an additional \$20.0 million be allocated to the Department of Corrections for COVID-19 testing
- \$1.25 million for Certified community behavioral health clinics (6 FTEs)
- \$34.8 million for the substance use disorder block grant
- \$31.9 million for the mental health block grant
- \$36.4 million for the federal State opioid response grant
- \$726.3 million for food assistance programs

Both the Senate and House supplementals add language that limits the State Administrative Board's authority to transfer funding for state boards, commissions, and departments. Ultimately, this bill would limit Governor Gretchen Whitmer from using the Administrative Board to make transfers within agencies that increase or decrease an appropriation by more than 3%, or \$125,000, or \$200,000 in the aggregate.

## Federal Update

### Congress Passed 2021 COVID Relief Legislation

Congress just passed the [American Rescue Plan Act of 2021](#), a \$1.9 trillion COVID-19 relief bill aimed at boosting the availability of vaccinations, providing funding for small businesses and schools and giving relief to families through new stimulus checks, extended unemployment benefits and an expanded child tax credit, among other provisions.

The legislation, which President Biden will sign this week, also includes billions in new relief to address rising demand for mental health and addiction services, workforce shortages and pandemic-related layoffs and furloughs.

**In other words, we heard you loud and clear that more relief was needed. And we made sure Congress heard you, too.**

Here are some highlights from this historic legislation:

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grants:** Provides \$3 billion for the Substance Abuse Prevention and Treatment block grant and the Community Mental Health Services block grant (\$1.5 billion each).
- **Certified Community Behavioral Health Clinics (CCBHCs):** Provides \$420 million to SAMHSA to fund CCBHC Expansion Grants.
- **Provider Relief Funds:** \$8.5 billion in new money to the Provider Relief Fund for providers in rural areas and those serving rural communities.

- **Other Mental Health/Substance Use Disorder Funding:** Provides more than \$450 million in additional funding for SAMHSA and Health Resources and Services Administration (HRSA) programming including funding for mental health and addiction services, workforce education and training, suicide prevention and public education campaigns.

## Education Opportunities

### Call for Presentations: CMHA VIRTUAL Annual Summer Conference: June 14-17, 2021



**CMHA Virtual Annual Summer Conference**  
**"Be the Change...Shaping our Future Together"**  
**June 14 - 17, 2021**  
**Virtual Education Daily from 9:00am – 12:30pm EST**

**Deadline for Call for Presentations is Monday, May 3, 2021**

#### **2 WAYS TO SUBMIT YOUR PRESENTATION:**

1) Download the traditional Word document, complete and email.

[CLICK HERE FOR PRESENTATION SUBMISSION FORM](#)

2) Submit electronically via Survey Monkey:

[CLICK HERE TO SUBMIT ELECTRONICALLY VIA SURVEY MONKEY](#)

Watch [www.cmham.org](http://www.cmham.org) for more details!

### Save the Date: 22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference

#### **22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference**

*Health Equity: Transforming to Meet the Challenge*

**Conference Date:** September 13-16, 2021

**Conference Location:** Virtual

Questions? Contact Alexandra Risher at [arisher@cmham.org](mailto:arisher@cmham.org).

### Virtual Motivational Interviewing College Trainings – Registration Open

Registration is open for the FY21 VIRTUAL Motivational Interviewing College trainings which includes Basic, Advanced, Supervisory, and the revamped MI for Leadership & Organizations!

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.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

**Be sure to check out the newly updated M.I. for Leadership & Organizations training lead by Randall Estes!**

Motivational Interviewing for Leadership and Organizations is designed for individuals and groups interested in implementing, teaching, training others in the practical application of Motivational Interviewing. Individuals attending should have a good basic understanding of MI and a strong desire to practice and teach MI. The training will cover basic and advanced MI skills interwoven with teaching methods practice. Participants will observe and demonstrate skills intended to teach MI spirit, style and skill. This training will be taught from Miller, W. R. and Rollnick, S. (2013), "Motivational Interviewing, Helping People Change" (3rd edition), Marshall and Nielsen (2020) Motivational Interviewing for Leaders in the Helping Profession" and Rosengren, D. (2018) "Building Motivational Interviewing Skills: A Practitioner Workbook (Applications of Motivational Interviewing) 2nd Edition."

*See below for dates and link to the event page where you can view the brochure.*

<b><u>Dates</u></b>	<b><u>Training</u></b>	<b><u>Registration Link</u></b>
July 26-27, 2021	M.I. Basic	<a href="#">CLICK HERE</a>
July 29-30, 2021	M.I. Advanced	<a href="#">CLICK HERE</a>
Aug. 2-3, 2021	M.I. for Leadership & Organizations	<a href="#">CLICK HERE</a>
Aug. 5, 2021	M.I. for Supervisors	<a href="#">CLICK HERE</a>

**Times:**

Training(s) start promptly at 9:00am and adjourn at 4:15pm each day. Zoom Waiting Room opens at 8:30am each morning; attendees must be logged on by 8:45am. (All times in EST)

**Training Fees:**

\$125 per person for all 2-day trainings / \$70 per person for the 1-day Supervisory training. The fee includes electronic training materials and CEs for each day.

**Virtual Co-Occurring Disorders Trainings from Jennifer Harrison – Registration Open**

Registration is open for the following co-occurring disorders virtual trainings from presenter Jennifer Harrison.

These events are sponsored by the adult mental health block grant and are intended for persons who serve adults only through the mental health and substance abuse provider network in the state of Michigan. They contain content appropriate for CMHSP clinicians, therapists, peers, supervisors, and nurses.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

***\*Note: Due to the limited number of spots in these trainings, each organization is limited to a maximum of 6 registrants.***

### **Integrated Dual Disorder Treatment 101**

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, 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 and team-based services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Integrated Dual Disorder Treatment (IDDT) was designed following systematic study of high intensity COD treatment needs and alterations of the Assertive Community Treatment (ACT) model. Within this training attendees will understand the components of IDDT, including fidelity and outcome measurement. Specific attention will be paid to the development of stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders using the IDDT model.

**Date:** July 15, 2021 | [CLICK HERE to Register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Our Brave New World: Cannabis, Opioids, and Pain in Behavioral Health Treatment**

Treatment planning for adults with complex mental health, substance use, and physical health needs involved understanding of stages of change and system navigation. Collaborating with these individuals on their wellness and recovery planning requires motivational approaches and often interventions that are more effective for early stage readiness. The prevalence of cannabis and opioid use makes these cases even more demanding to navigate. Add to this, the opioid crisis in the U.S. Since 1999, sales of opioids in the U.S. have quadrupled. From 1999-2015, more than 180,000 people died from overdoses related to prescription opioids. It is now the #1 cause of accidental death for people under 50. Michigan is one of 31 states with laws allowing medicinal or recreational marijuana use. Opioids and cannabis have become our new legal drugs.

This training will focus attention on providing stage-matched assessment and treatment surrounding use of legal drugs including cannabis and opioids. Focus on treatment planning and provision for individuals who have opioid or cannabis use, as well as management of co-occurring mental health or pain disorders.

**Dates:** August 11, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Recovery-Based Co-Occurring Treatment Planning and Delivery**

Until the 21st century, 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 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.

**Dates:** May 5, 2021 | [CLICK HERE to register](#)

August 24, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Stage Matched Treatment for Co-Occurring Needs

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. In addition, treatment engagement is often lower for individuals with COD, particularly when those individuals are in early stage of readiness for one of more presenting problems. This training will focus on the assessment of stage of readiness using validated tools, and the interventions that are best fit for each stage of readiness. In addition, ways to address organizational readiness for COD treatment will be discussed.

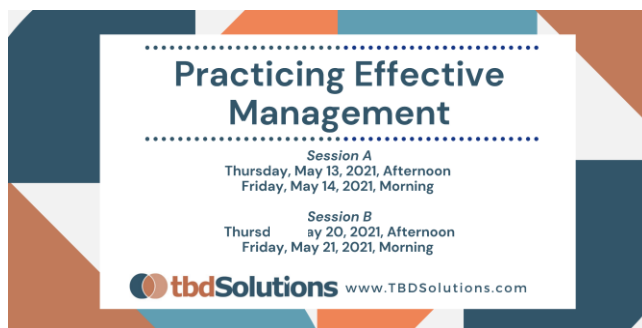
**Dates:** May 11, 2021 | [CLICK HERE to register](#)

August 31, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Practicing Effective Management Virtual Training



TBD Solutions is hosting its next Practicing Effective Management Training online on May 13, 14, 20, and 21. This virtual 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 more than 300 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, while maintaining a 98% satisfaction rate.

**To register please visit:** <https://www.eventbrite.com/e/practicing-effective-management-tickets-140075773409>

For questions or additional information, contact Molly at [MollyR@TBDolutions.com](mailto:MollyR@TBDolutions.com)

## Arc Michigan Disability Policy Webinar Series



The Arc Michigan is excited to announce the:

***“June 2021 Disability Policy Webinar Series”***

Registration now open!!

Click here to register <https://attendee.gotowebinar.com/register/3396825039610487053>

## Behavioral Telehealth Resource Center

### Telehealth Resource Center

Michigan’s Behavioral Telehealth Resource Center serves to provide current information on telehealth policies, training and engagement opportunities. Please visit the [webpage](#), to see available resources. If you have information to be included on the webpage, please contact [astagg@cmham.org](mailto:astagg@cmham.org).

### **New! Webinar: How to Leverage Telehealth Strategies for Substance Use Brief Intervention**

May 11, 2021 from 3-4pm ET. This webinar is supported by the CoE for Integrated Health Solutions funded through a grant award from SAMHSA. Click [here](#) for webinar description and registration link.

### **New! Telehealth & Medicaid: A Policy Webinar Series featuring Medicaid experts**

This free four-part webinar series was developed by the Center for Connected Health Policy in response to an ever-changing and complex landscape for telehealth policy in Medicaid. Please [click here](#) for each webinar description and the registration links.

### **Distance Learning & Telemedicine Opportunity Announcement**

[Distance Learning & Telemedicine Opportunity Announcement](#) (FOA) closes on June 4, 2021. For full information, see the [Program Fact Sheet](#).

For questions contact a [General Field Representative](#) that serves your area or call (202)720-0800 or email [dltinfo@usda.gov](mailto:dltinfo@usda.gov).

## FCC Announces Application Filing Window for Round Two of COVID-19 Telehealth Program

On April 15, 2021, the FCC [announced](#) that on Thursday, April 29, 2021 at 12:00 PM ET it will begin accepting applications for the second round of its COVID-19 Telehealth Program. The filing window closes on Thursday, May 6, 2021 at 12:00 PM ET.

Under this application processing round, the FCC will distribute nearly \$250 million to eligible health care providers to provide telehealth and connected care services to patients in response to the COVID-19 pandemic. Health care providers wishing to apply under round two of the Program should complete and submit an application on the [FCC's Program Webpage](#). To ensure timely submission, interested providers should carefully review the FCC's Application Process Guidance, which is attached as Appendix C to the FCC's March 30, 2021 [Report and Order on Reconsideration](#). Specific questions about the application process can be submitted to [Round2TelehealthApplicationSupport@usac.org](mailto:Round2TelehealthApplicationSupport@usac.org).

## Education & Training Resources from Great Lakes MHTTC



Great Lakes (HHS Region 5)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

### CMHA's partnership with SAMHSA funded Great Lakes MHTTC

CMHA is the Michigan partner of the Great Lakes Mental Health Technology Transfer Center (MHTTC). Through this partnership, funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), MHTTC and CMHA provide Michiganders with access to a wide range of evidence-based and promising mental health practices. More information on the work of the Great Lakes MHTTC can be [found here](#).

The Great Lakes Mental Health Technology Transfer Center (MHTTC) makes available a large catalog of Great Lakes MHTTC products at its [Products and Resources](#) webpage.

This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

## News from Our Preferred Corporate Partners





## Abilita: You WILL Profit from a Technology Audit

There isn't any doubt that 2020 will be deemed "the year of the pandemic". It doesn't matter what line of business you are engaged in, or what your position in the organization is (was), your technology and telecom picture has changed. And, it may never be quite the same again.

Organizations' technology teams have been overwhelmed with the urgency of the crisis and have had to deploy new collaboration and connectivity solutions without a lot of thought for the long term. 2021 will be the year of preparing for the new reality in telecom and technology which may include:

- more Work From Home challenges
- more video, less telephony
- more flexibility in services and connectivity

Let's call 2021 the "**Year of the Technology Audit**". Look at where you were, where you are, and where and how to move ahead.

For some ideas on how to do this and what you might want to consider, [read this article titled "2021 - The Year of the Audit"](#). To get started now, contact us for a zero-risk review of your technology systems and services.

## myStrength: new digital behavioral health resources empower consumers to move beyond trauma

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. [Click here to request a demo.](#)

## CMH Association's Officers & Staff Contact Info

### 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 Board of Directors, 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; [balcat19@live.com](mailto:balcat19@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 Staff Contact Information:**

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

Alan Bolter, Associate Director, (517) 237-3144; [abolter@cmham.org](mailto:abolter@cmham.org)  
Audrey Daul, Administrative Assistant, (517) 237-3141; [adaul@cmham.org](mailto:adaul@cmham.org)  
Dana Ferguson, Senior Accounting Specialist, (517) 237-3147; [dferguson@cmham.org](mailto:dferguson@cmham.org)  
Monique Francis, Executive Secretary/Committee Clerk, (517) 237-3145; [mfrancis@cmham.org](mailto:mfrancis@cmham.org)  
Jodi Hammond, Training and Meeting Planner, (517) 237-3148; [jhammond@cmham.org](mailto:jhammond@cmham.org)  
Regina MacDonald, Accounting Assistant, (517) 237-3146; [rmacdonald@cmham.org](mailto:rmacdonald@cmham.org)  
Bethany Rademacher, Training and Meeting Planner, (517) 237-3149; [brademacher@cmham.org](mailto:brademacher@cmham.org)  
Alexandra Risher, Training and Meeting Planner, (517) 237-3150; [arisher@cmham.org](mailto:arisher@cmham.org)  
Carly Sanford, Training and Meeting Planner, (517) 237-3151; [csanford@cmham.org](mailto:csanford@cmham.org)  
Robert Sheehan, CEO, (517) 237-3142 [rsheehan@cmham.org](mailto:rsheehan@cmham.org)  
Madi Sholtz, Training and Meeting Planner, (517) 237-3152; [msholtz@cmham.org](mailto:msholtz@cmham.org)  
Amy Stagg, Behavioral Telehealth Coordinator, (517) 324-7310; [astagg@cmham.org](mailto:astagg@cmham.org)  
Christina Ward, Director of Education & Training, (517) 237-3143; [cward@cmham.org](mailto:cward@cmham.org)  
Anne Wilson, Training and Meeting Planner, (517) 237-3153; [awilson@cmham.org](mailto:awilson@cmham.org)



# WEEKLY Update

April 23, 2021

**COVID-19 Resources:** CMHA has developed a curated set of COVID-19-related resources and announcements from a range of reputable state and national sources. That curated set of resources, which will be regularly updated, **is available by [CLICKING HERE](#)**.

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## CMH Association and Member Activities

### **New!** Pine Rest opens adult foster care COVID-19 unit

Below are excerpts from a recent news story on the opening of a COVID foster care residential site by Pine Rest.

Pine Rest Christian Mental Health Services has opened a 10-bed unit for people living in and adult foster care home and have been diagnosed with COVID-19.

The behavioral health care provider says the unit addresses a gap in care and treats both psychiatric and COVID-19 concerns. The unit was created in partnership with the state of Michigan, and comes online at time when coronavirus cases in Michigan are surging.

The full news story is [found here](#).

### Traveling Art Show

Traveling Art Show VI features pieces from Consumer Art Contests across Michigan. Anyone interested in any of the pieces shown may contact Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org). Those NOT sold by October 1, 2021, will be auctioned off at the 2021 Fall Conference in Traverse City, Michigan. Art may be available for viewing locally or on the [CMHA website](#). Check with your local CMH for more information or email Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org).

## State & National Developments and Resources

### **New!** MDHHS issues RFP for youth suicide prevention programming

The Michigan Department of Health and Human Services (MDHHS) has issued a Request for Proposals (RFP) to provide services aimed at reducing suicides among young adults.

The purpose of the Transforming Youth Suicide Prevention program is to decrease the rates of suicide in young adults aged 18–24 years old, not in a traditional college/university setting, by carrying out identification and early intervention projects, particularly for areas where the 2015-2019 suicide rate for the designated age group exceeds the national rate of 15.66 per 100,000 people.

The RFP seeks competitive plans for local projects that will expand services, prioritizing proposals that focus on suicide prevention among young adults, service counties that exceed the national rate of suicide, serve high-risk populations and incorporate health equity into their approach and outreach. Funded applicants will receive ongoing technical assistance from the MDHHS project coordinator which include help with program start-up, reporting requirements and removing barriers to program implementation.

The award period begins Oct. 1, 2021 and ends Sept. 30, 2022. MDHHS expects to award approximately \$180,000 to up to three applicants, with a maximum of \$60,000 per applicant.

Grant applications must be submitted electronically through the EGrAMS program by 3 p.m. on May 12, 2021.

For more information or to apply, visit the [EGrAMS website](#) and select "About EGrAMS" link in the left panel to access the "Competitive Application Instructions" training manual. The complete RFP can be

accessed under the 'Current Grants' section under the "Public Health Administration" link and selecting the "TYSP-2022" grant program.

## **New! SAMHSA announces Community Mental Health Centers (CMHC) Grant Program**

Below is a recent announcement from SAMHSA on a grant program that fits will with Michigan's CMH system. The executive summary is below with the full Funding Opportunity Announcement (FOA) found at: [fy-2021-cmhc-foa.pdf \(samhsa.gov\)](#)

Department of Health and Human Services  
Substance Abuse and Mental Health Services Administration  
FY 2021 Community Mental Health Centers (CMHC) Grant Program (Short Title: CMHC) (Initial Announcement)  
Funding Opportunity Announcement (FOA) No. SM-21-014  
Catalogue of Federal Domestic Assistance (CFDA) No.: 93.958

**EXECUTIVE SUMMARY** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), is accepting applications for fiscal year (FY) 2021 Community Mental Health Centers (Short Title: CMHC) grant program. The purpose of this program is to enable community mental health centers to support and restore the delivery of clinical services that were impacted by the COVID-19 pandemic and effectively address the needs of individuals with serious emotional disturbance (SED), serious mental illness (SMI), and individuals with SMI or SED and substance use disorders, referred to as co-occurring disorder (COD). SAMHSA recognizes the needs of individuals with behavioral health conditions, including minority populations and economically disadvantaged communities, have not been met during the pandemic and that CMHC staff and other caregivers have been impacted.

Funding Opportunity Title: Community Mental Health Centers Grant Program (Short Title: CMHC Grants) Funding Opportunity Number: SM-21-014

Due Date for Applications: May 21, 2021 Estimated  
Total Available Funding: \$825,000,000  
Estimated Number of Awards: 165 to 825  
Estimated Award Amount: From \$500,000 to \$2,500,000 per year  
Cost Sharing/Match Required: No Anticipated  
Project Start Date: 9/30/2021  
Length of Project Period: Up to 2 years  
Eligible Applicants: Community Mental Health Centers, including state and local government-operated Community Mental Health Centers, as defined by Section 1913(c) of the Public Health Services Act. [See Section III-1 for complete eligibility information.]

## **New! Michigan Suicide Prevention Commission report makes lowering suicide rate a priority**

Below are excerpts from a press release on the Michigan Suicide Prevention Commission's recently issued report.

With someone dying by suicide every six hours in the state, the Michigan Department of Health and Human Services (MDHHS) is releasing a report that makes recommendations on how to reduce the suicide rate.

The Michigan Suicide Prevention Commission Initial Report is from a group appointed by Gov. Gretchen Whitmer in March 2020.

The recommendations address the commission priorities of:

- Minimizing risk for suicidal behavior by promoting safe environments, resiliency and connectedness.
- Increasing and expanding access to care to support Michiganders who are at-risk.
- Improving suicide prevention training and education.
- Implementing best practices in suicide prevention for health care systems.
- Enhancing suicide-specific data collection and systems.

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

### **New! Hogg Foundation issues short videos on mental health**

Did you know there are even more ways to connect with the work of the Hogg Foundation and our mission of improving mental health in everyday life? It's true!

The Hogg Foundation's YouTube page is full of short, informative videos that take complex concepts influencing community mental health and distill them into frank, straightforward explanations.

3TK videos feature never-before-seen content from experts in mental health.

Watch experts from the intersecting fields of [policy](#), [psychiatry](#), [criminal justice](#), and [media studies](#) talk candidly about improving mental health systems and services for all Texans through advocacy and collaboration.

[Watch and subscribe here](#).

## State Legislative Update

### **View March's Legislative Video on CMHA's Website**

The Capitol Briefing is a monthly resource available to CMHA members providing a high-level overview of the key items impacting the public mental health system that (or each) month at the State Capitol.

Our March Briefing features CMHA Associate Director, Alan Bolter, provides an update regarding the confirmation of Elizabeth Hertel as Director of the Michigan Department of Health and Human Services and the passage of a FY21 COVID Supplemental budget.

To view the latest video, [CLICK HERE!](#)

## **New! FY22 House and Senate Budget Proposals**

### **Specific Mental Health/Substance Abuse Services Line items**

	<u>FY'22 (Exec Rec)</u>	<u>FY'22 (House)</u>	<u>FY'22 (Senate)</u>
-CMH Non-Medicaid services	\$125,578,200	\$125,578,200	\$125,578,200
-Medicaid Mental Health Services	\$3,011,525,500	\$2,775,817,800	\$3,005,348,100
-Medicaid Substance Abuse services	\$80,988,900	\$80,988,900	\$80,988,900
-State disability assistance program	\$2,018,800	\$2,018,800	\$2,018,800
-Community substance abuse (Prevention, education, and treatment programs)	\$78,005,200	\$19,501,200 (1/4 funding)	\$78,005,200
-Health Homes Program	\$33,005,400	\$33,005,400	\$33,005,400
-Autism services	\$356,875,800	\$356,875,800	\$356,875,800
-Healthy MI Plan (Behavioral health)	\$540,551,700	\$540,551,700	\$540,551,700
-CCBHC	\$25,597,300	\$25,597,300	\$25,597,300

### **Other Highlights of the FY22 House Budget:**

#### **Direct Care Worker Wage Increase**

- House budget includes a \$100 placeholder

#### **CCBHC Implementation**

**House concurs with the FY22 Executive Budget and includes \$26.5million gross, \$5.0million general fund(6.0FTEs) to support a two-year implementation of the Centers for Medicare and Medicaid (CMS) Certified Community Behavioral Health Clinic (CCBHC) Demonstration program.** Proposed funding will be used to:



- **Establish 14 CCBHC sites**, through 11 Community Mental Health Programs and 3 non-profit behavioral health entities, to provide comprehensive access to behavioral health services to vulnerable individuals.
- Create a new Behavioral Health Policy and Operations Office to oversee the implementation of the CCBHC demonstration, Medicaid Health Homes, and other behavioral health integration initiatives. The new office will comprise 6 new FTE positions and 9 reassigned FTE positions responsible for policy, operations, technical assistance, and quality monitoring support.

### **KB vs. Lyon lawsuit**

**The House does not include funding for the KB v. Lyon lawsuit.** (The FY22 Executive Budget includes \$90 million gross (\$30 million general fund) to recognize new costs related to the implementation of policy changes associated with the KB v. Lyon lawsuit settlement. )

### **Specialty Medicaid Managed Care Health Plan for Foster Children**

House includes \$500,000 Gross (\$250,000 GF/GP) to complete an actuarial analysis and any necessary federal approvals to create a specialty Medicaid managed care health plan for children in foster care to provide comprehensive medical, behavioral, and dental services

### **Other items**

- Concurs with the executive budget and includes \$1 million for Autism Service Navigation (general fund)
- House concurs with the executive budget and includes \$36.4 million in federal SOR grant funding to increase access to medication-assisted treatments, addressing unmet treatment needs, and reducing opioid overdose deaths.
- House adds \$750,000 GF/GP for development and operation of a resiliency Center for Families and Children to provide services to families and children experiencing trauma, toxic stress, chronic disability, neurodevelopmental disorders or addictions (Boilerplate sec 1919)
- House adds \$300,000 GF/GP for the St. Louis Center, a residential community for children and adults with intellectual and developmental disabilities;
- Enhanced FMAP redetermination – placeholder (the Governor’s recommendation included \$23.2 million Gross for additional admin costs for Medicaid eligibility redeterminations once the enhanced FMAP expires)
- House adds one-time funding for special Olympics capital improvements (\$1 million)
- House adds \$19.1 million for MI Choice waiver program to add 1,000 slots by end of FY 21-22

### **Other Highlights of the FY22 Senate Budget:**

#### **Direct Care Worker Wage Increase**

The Senate budget reflects a full year implementation of a \$2.35/hour direct care worker wage increase on an ongoing basis - \$460,007,800 (Gross) / \$159,775,100 GF/GP

## **CCBHC Implementation**

**Senate budget concurs with the FY22 Executive Budget and includes \$26.5million gross, \$5.0million general fund(6.0FTEs) to support a two-year implementation of the Centers for Medicare and Medicaid (CMS) Certified Community Behavioral Health Clinic (CCBHC) Demonstration program.**

Proposed funding will be used to:

- **Establish 14 CCBHC sites**, through 11 Community Mental Health Programs and 3 non-profit behavioral health entities, to provide comprehensive access to behavioral health services to vulnerable individuals.
- Create a new Behavioral Health Policy and Operations Office to oversee the implementation of the CCBHC demonstration, Medicaid Health Homes, and other behavioral health integration initiatives The new office will comprise 6 new FTE positions and 9 reassigned FTE positions responsible for policy, operations, technical assistance, and quality monitoring support.

## **KB vs. Lyon lawsuit**

**The Senate budget includes \$45 million (Gross) / \$15 million GF/GP funding for the KB v. Lyon lawsuit.** (The FY22 Executive Budget includes \$90 million gross (\$30 million general fund) to recognize new costs related to the implementation of policy changes associated with the KB v. Lyon lawsuit settlement. )

## **Local Match Draw Down**

The Senate bill includes funding for the second and third year of a five-year phase-out of the use of Local CMH Local Match funding to support the Medicaid Restricted Mental Health Services line. **\$10,190,200 GF/GP**

## **Other items**

- Senate concurs with the executive budget and includes \$1 million for Autism Service Navigation (general fund)
- Senate concurs with the executive budget and includes \$36.4 million in federal SOR grant funding to increase access to medication-assisted treatments, addressing unmet treatment needs, and reducing opioid overdose deaths.
- Senate adds \$1.3 million increase for the MI Docs program
- Senate adds \$100 placeholder for crisis stabilization units
- Senate increases in Medicaid funding for mental health and SUD services (\$35 million increase)
- Senate adds \$3 million for McLaren Greenlawn project
- Senate adds Families Against Narcotics placeholder

## **House & Senate Key Boilerplate Sections:**

**Sec. 236** NEW Senate – language to require the same level of reimbursement for services provided through telemedicine as for services provided through face-to-face contact in the Medicaid program

**Sec. 908.** NEW Senate – Uniform credentialing , As a condition of their contracts with the department, PIHPs and CMHSPs, in consultation with the Community Mental Health Association of Michigan, shall work with the department to implement section 206b of the mental health code, MCL 330.1206b, to establish a uniform community mental health services credentialing program.

**Sec. 912.** Salvation Army Harbor Light Program – executive deleted but House and Senate retained language to contract with the Salvation Army Harbor Light Program to providing Non-Medicaid substance use disorder services if program meets standard of care. Executive deletes; House & Senate retains.

**Sec. 927.** Uniform Behavioral Health Service Provider Audit. Existing boilerplate requires DHHS to create a uniform community mental health services auditing process for CMHPs and PIHPs, outlines auditing process requirements, and requires a report. Executive deletes; House & Senate retains.

**Sec. 928.** Each PIHP shall provide, from internal resources, local funds to be used as a part of the state match required under the Medicaid program in order to increase capitation rates for PIHPs. These funds shall not include either state funds received by a CMHSP for services provided to non-Medicaid recipients or the state matching portion of the Medicaid capitation payments made to a PIHP.

- House budget did not include 5-year phase out language
- Senate includes 5-year phase out language and years 2 & 3 of funding.

**Sec. 940.** Transferring and Withdrawing CMHSP Allocations - Requires DHHS to review CMHSP expenditures to identify projected lapses and surpluses, to encourage the board of the CMHSP with a projected lapse to concur with the recommendation to reallocate the lapse to other CMHSPs, and to withdraw funds from a CMHSP if those funds were not expended in a manner approved by DHHS, including for services and programs provided to individuals residing outside of the CMHSP's geographic region; prohibits a CMHSP from receiving additional funding if the CMHSP transferred out or withdrew funds during current fiscal year; requires CMHSPs to report any proposed reallocations prior to going into effect; requires legislative notification and report. Executive and House revise by removing the requirement to withdraw unspent funds if funds were not expended in a manner approved by DHHS

**Sec. 964.** Behavioral Health Fee Schedule. Requires the department to provide a report with the standardized fee schedule for Medicaid behavioral health services and supports to the Legislature by July 1 and must include the adequacy standards to be used in all contracts with PIHPs and CMHSPs. In developing the fee schedule the Department must prioritize and support essential service providers and develop a standardized fee schedule for revenue code 0204.

**Sec. 965.** Medication Assisted Treatment - Requires DHHS to explore requiring CMHSPs to reimburse medication assisted treatment at not less than \$12.00 per dose and drug screen collection at not less than \$12.00 per screen. Executive deletes. House revises to require the Medicaid behavioral health fee schedule to offer bundled medication assisted treatment billing and prioritizes federal state opioid response funds to assist in providing efficient and effective billing

**Sec. 974.** The department and PIHPs shall allow an individual with an intellectual or developmental disability who receives supports and services from a CMHSP to instead receive supports and services

from another provider if the individual shows that he or she is eligible and qualified to receive supports and services from another provider. Other providers may include, but are not limited to, MIChoice and program of all-inclusive care for the elderly (PACE).

**Sec. 1005.** Health Home Program – current boilerplate requires DHHS to maintain and expand the number of behavioral health homes in PIHP regions 1, 2, and 8 and to expand the number of opioid health homes in PIHP regions 1, 2, 4, and 9. Executive deletes. House revises to maintain the current behavioral health and substance use disorder health homes and permits DHHS to expand into 2 additional PIHP regions.

**Sec. 1151.** Opioid Addiction Treatment Education Collaboration – current boilerplate requires DHHS to coordinate with other departments, law enforcement, and Medicaid health plans to work with substance use disorder providers to inform Medicaid beneficiaries of medically appropriate opioid addiction treatment options when an opioid prescription is ended, and address other opioid abuse issues; requires report. Executive deletes. House & Senate retain.

**Sec. 1846.** Graduate Medical Education Priorities - Requires DHHS to distribute GME funds with an emphasis on encouragement of the training of physicians in specialties, including primary care, that are necessary to meet future needs of this state, and training of physicians in settings that include ambulatory sites and rural locations. House revises to also emphasize training of pediatric psychiatrists.

## Federal Update

### Congress Passed 2021 COVID Relief Legislation

Congress just passed the [American Rescue Plan Act of 2021](#), a \$1.9 trillion COVID-19 relief bill aimed at boosting the availability of vaccinations, providing funding for small businesses and schools and giving relief to families through new stimulus checks, extended unemployment benefits and an expanded child tax credit, among other provisions.

The legislation, which President Biden will sign this week, also includes billions in new relief to address rising demand for mental health and addiction services, workforce shortages and pandemic-related layoffs and furloughs.

**In other words, we heard you loud and clear that more relief was needed. And we made sure Congress heard you, too.**

Here are some highlights from this historic legislation:

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grants:** Provides \$3 billion for the Substance Abuse Prevention and Treatment block grant and the Community Mental Health Services block grant (\$1.5 billion each).

- **Certified Community Behavioral Health Clinics (CCBHCs):** Provides \$420 million to SAMHSA to fund CCBHC Expansion Grants.
- **Provider Relief Funds:** \$8.5 billion in new money to the Provider Relief Fund for providers in rural areas and those serving rural communities.
- **Other Mental Health/Substance Use Disorder Funding:** Provides more than \$450 million in additional funding for SAMHSA and Health Resources and Services Administration (HRSA) programming including funding for mental health and addiction services, workforce education and training, suicide prevention and public education campaigns.

## Education Opportunities

### Call for Presentations: CMHA VIRTUAL Annual Summer Conference: June 14-17, 2021



#### CMHA Virtual Annual Summer Conference "Be the Change...Shaping our Future Together"

June 14 - 17, 2021

Virtual Education Daily from 9:00am – 12:30pm EST

**Deadline for Call for Presentations is Monday, May 3, 2021**

#### **2 WAYS TO SUBMIT YOUR PRESENTATION:**

1) Download the traditional Word document, complete and email.

[\*\*CLICK HERE FOR PRESENTATION SUBMISSION FORM\*\*](#)

2) Submit electronically via Survey Monkey:

[\*\*CLICK HERE TO SUBMIT ELECTRONICALLY VIA SURVEY MONKEY\*\*](#)

Watch [www.cmham.org](http://www.cmham.org) for more details!

### Save the Date: 22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference

#### **22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference**

*Health Equity: Transforming to Meet the Challenge*

**Conference Date:** September 13-16, 2021

**Conference Location:** Virtual

Questions? Contact Alexandra Risher at [arisher@cmham.org](mailto:arisher@cmham.org).

### VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings

**All dates are currently sold out! We will be offering additional Ethics classes beginning in late summer.**

### **VIRTUAL Pain Management and Mindfulness Trainings**

**There are currently no scheduled dates for Pain Management and Mindfulness. We will be offering additional Pain Management and Mindfulness classes beginning in late summer.**

### **Virtual Motivational Interviewing College Trainings – Registration Open**

Registration is open for the FY21 VIRTUAL Motivational Interviewing College trainings which includes Basic, Advanced, Supervisory, and the revamped MI for Leadership & Organizations!

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.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

<u>Dates</u>	<u>Training</u>	<u>Registration Link</u>
July 26-27, 2021	M.I. Basic	<a href="#">CLICK HERE</a>
July 29-30, 2021	M.I. Advanced	<a href="#">CLICK HERE</a>
Aug. 2-3, 2021	M.I. for Leadership & Organizations	<a href="#">CLICK HERE</a>
Aug. 5, 2021	M.I. Supervisory	<a href="#">CLICK HERE</a>

#### **Times:**

Training(s) start promptly at 9:00am and adjourn at 4:15pm each day. Zoom Waiting Room opens at 8:30am each morning; attendees must be logged on by 8:45am. (All times in EST)

#### **Training Fees:**

\$125 per person for all 2-day trainings / \$70 per person for the 1-day Supervisory training. The fee includes electronic training materials and CEs for each day.

### **Virtual Co-Occurring Disorders Trainings from Jennifer Harrison – Registration Open**

Registration is open for the following co-occurring disorders virtual trainings from presenter Jennifer Harrison.

These events are sponsored by the adult mental health block grant and are intended for persons who serve adults only through the mental health and substance abuse provider network in the state of

Michigan. They contain content appropriate for CMHSP clinicians, therapists, peers, supervisors, and nurses.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

***\*Note: Due to the limited number of spots in these trainings, each organization is limited to a maximum of 6 registrants.***

### **Integrated Dual Disorder Treatment 101**

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, 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 and team-based services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Integrated Dual Disorder Treatment (IDDT) was designed following systematic study of high intensity COD treatment needs and alterations of the Assertive Community Treatment (ACT) model. Within this training attendees will understand the components of IDDT, including fidelity and outcome measurement. Specific attention will be paid to the development of stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders using the IDDT model.

**Date:** July 15, 2021 | [CLICK HERE to Register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Our Brave New World: Cannabis, Opioids, and Pain in Behavioral Health Treatment**

Treatment planning for adults with complex mental health, substance use, and physical health needs involved understanding of stages of change and system navigation. Collaborating with these individuals on their wellness and recovery planning requires motivational approaches and often interventions that are more effective for early stage readiness. The prevalence of cannabis and opioid use makes these cases even more demanding to navigate. Add to this, the opioid crisis in the U.S. Since 1999, sales of opioids in the U.S. have quadrupled. From 1999-2015, more than 180,000 people died from overdoses related to prescription opioids. It is now the #1 cause of accidental death for people under 50. Michigan is one of 31 states with laws allowing medicinal or recreational marijuana use. Opioids and cannabis have become our new legal drugs.

This training will focus attention on providing stage-matched assessment and treatment surrounding use of legal drugs including cannabis and opioids. Focus on treatment planning and provision for individuals who have opioid or cannabis use, as well as management of co-occurring mental health or pain disorders.

**Dates:** April 27, 2021 | **SOLD OUT**

August 11, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Recovery-Based Co-Occurring Treatment Planning and Delivery

Until the 21st century, 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 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.

**Dates:** May 5, 2021 | [CLICK HERE to register](#)

August 24, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Stage Matched Treatment for Co-Occurring Needs

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. In addition, treatment engagement is often lower for individuals with COD, particularly when those individuals are in early stage of readiness for one of more presenting problems. This training will focus on the assessment of stage of readiness using validated tools, and the interventions that are best fit for each stage of readiness. In addition, ways to address organizational readiness for COD treatment will be discussed.

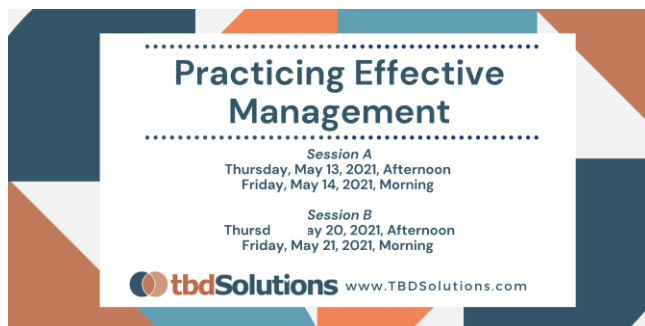
**Dates:** May 11, 2021 | [CLICK HERE to register](#)

August 31, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Practicing Effective Management Virtual Training



TBD Solutions is hosting its next Practicing Effective Management Training online on May 13, 14, 20, and 21. This virtual 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 more than 300 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, while maintaining a 98% satisfaction rate.



To register please visit: <https://www.eventbrite.com/e/practicing-effective-management-tickets-140075773409>

For questions or additional information, contact Molly at [MollyR@TBDolutions.com](mailto:MollyR@TBDolutions.com)

## Arc Michigan Disability Policy Webinar Series



The Arc Michigan is excited to announce the

***“June 2021 Disability Policy Webinar Series”***

Registration is now open!!

Click here to register <https://attendee.gotowebinar.com/register/3396825039610487053>

## **New!** Michigan Health Policy Forum: Public Health Broke or Broken: The Call for Fiscal and Social Equity

**Monday, June 14, 2021**

1:00-3:30 PM

This will be a virtual conference held via Zoom. National and State experts will provide an overview of the challenges, share opportunities and discuss solutions. The agenda, resource materials, speaker bios and Zoom link will be sent at a later date.

CMHA is a longtime member of the Forum’s Advisory Council and hopes that you will be able to join our expert panel on June 14th to discuss this timely issue. If you have any questions, please contact us at [stiff114@msu.edu](mailto:stiff114@msu.edu).

[Register here](#)



## **New!** Michigan Health Policy Forum announces conversation with Dr. Sanjay Gupta

The Michigan Health Policy Forum is sharing this opportunity on behalf of one of our sponsoring organizations, the University of Michigan Institute for Healthcare Policy and Innovation.

[Register here](#)

# Behavioral Telehealth Resource Center

## Telehealth Resource Center

Michigan's Behavioral Telehealth Resource Center serves to provide current information on telehealth policies, training and engagement opportunities. Please visit the [webpage](#), to see available resources. If you have information to be included on the webpage, please contact [astagg@cmham.org](mailto:astagg@cmham.org).

## Distance Learning & Telemedicine Opportunity Announcement

[Distance Learning & Telemedicine Opportunity Announcement](#) (FOA) closes on June 4, 2021. For full information, see the [Program Fact Sheet](#).

This grant opportunity helps rural communities acquire the technology and training necessary to connect educational and medical professionals with students, teachers and patients in rural areas. The intent of the DLT program is to benefit rural areas with populations of 20,000 or less. Grant funds may be used for:

- Audio, video and interactive video equipment
- Broadband facilities that support distance learning or telemedicine
- Computer hardware, network components and software
- Acquisition of instructional programming
- Acquisition of technical assistance and instruction for using eligible equipment

Awards can range from \$50,000 to \$1 million. A minimum 15% match is required and cannot be from another federal sources. Questions? Contact a [General Field Representative](#) that serves your area or call (202)720-0800 or email [dltinfo@usda.gov](mailto:dltinfo@usda.gov).

## **New!** FCC Announces Application Filing Window for Round Two of COVID-19 Telehealth Program

On April 15, 2021, the FCC [announced](#) that on Thursday, April 29, 2021 at 12:00 PM ET it will begin accepting applications for the second round of its COVID-19 Telehealth Program (the "Program"). The filing window will last for seven days and will close on Thursday, May 6, 2021 at 12:00 PM ET. All applications filed during this period will be reviewed after the application filing window has closed.

Under this application processing round, the FCC will distribute nearly \$250 million to eligible health care providers to provide telehealth and connected care services to patients in response to the COVID-19 pandemic. This funding is in addition to the \$200 million the FCC awarded to successful applicants in 2020 under round one of the Program.

Health care providers wishing to apply under round two of the Program should complete and submit an application on the [FCC's Program Webpage](#). To ensure timely submission, interested providers should carefully review the FCC's Application Process Guidance, which is attached as Appendix C to the FCC's March 30, 2021 [Report and Order and Order On Reconsideration](#). Specific questions about the application process can be submitted to [Round2TelehealthApplicationSupport@usac.org](mailto:Round2TelehealthApplicationSupport@usac.org).

## Education & Training Resources from Great Lakes MHTTC



Great Lakes (HHS Region 5)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

### CMHA's partnership with SAMHSA funded Great Lakes MHTTC

CMHA is the Michigan partner of the Great Lakes Mental Health Technology Transfer Center (MHTTC). Through this partnership, funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), MHTTC and CMHA provide Michiganders with access to a wide range of evidence-based and promising mental health practices. More information on the work of the Great Lakes MHTTC can be [found here](#).

The Great Lakes Mental Health Technology Transfer Center (MHTTC) makes available a large catalog of Great Lakes MHTTC products at its [Products and Resources](#) webpage.

This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

## News from Our Preferred Corporate Partners

### Abilita: You WILL Profit from a Technology Audit

There isn't any doubt that 2020 will be deemed "the year of the pandemic". It doesn't matter what line of business you are engaged in, or what your position in the organization is (was), your technology and telecom picture has changed. And, it may never be quite the same again.

Organizations' technology teams have been overwhelmed with the urgency of the crisis and have had to deploy new collaboration and connectivity solutions without a lot of thought for the long term. 2021 will be the year of preparing for the new reality in telecom and technology which may include:

- more Work From Home challenges
- more video, less telephony
- more flexibility in services and connectivity

Let's call 2021 the **"Year of the Technology Audit"**. Look at where you were, where you are, and where and how to move ahead.

For some ideas on how to do this and what you might want to consider, [read this article titled "2021 - The Year of the Audit"](#). To get started now, contact us for a zero-risk review of your technology systems and services.

### **myStrength: new digital behavioral health resources empower consumers to move beyond trauma**

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. [Click here to request a demo.](#)

## **CMH Association's Officers & Staff Contact Info**

### **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 Board of Directors, 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; [balcat19@live.com](mailto:balcat19@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 Staff Contact Information:

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

Alan Bolter, Associate Director, (517) 237-3144; [abolter@cmham.org](mailto:abolter@cmham.org)  
Audrey Daul, Administrative Assistant, (517) 237-3141; [adaul@cmham.org](mailto:adaul@cmham.org)  
Dana Ferguson, Senior Accounting Specialist, (517) 237-3147; [dferguson@cmham.org](mailto:dferguson@cmham.org)  
Monique Francis, Executive Secretary/Committee Clerk, (517) 237-3145; [mfrancis@cmham.org](mailto:mfrancis@cmham.org)  
Jodi Hammond, Training and Meeting Planner, (517) 237-3148; [jhammond@cmham.org](mailto:jhammond@cmham.org)  
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Carly Sanford, Training and Meeting Planner, (517) 237-3151; [csanford@cmham.org](mailto:csanford@cmham.org)  
Robert Sheehan, CEO, (517) 237-3142 [rsheehan@cmham.org](mailto:rsheehan@cmham.org)  
Madi Sholtz, Training and Meeting Planner, (517) 237-3152; [msholtz@cmham.org](mailto:msholtz@cmham.org)  
Amy Stagg, Behavioral Telehealth Coordinator, (517) 324-7310; [astagg@cmham.org](mailto:astagg@cmham.org)  
Christina Ward, Director of Education & Training, (517) 237-3143; [cward@cmham.org](mailto:cward@cmham.org)  
Anne Wilson, Training and Meeting Planner, (517) 237-3153; [awilson@cmham.org](mailto:awilson@cmham.org)



# WEEKLY Update

April 16, 2021

**COVID-19 Resources:** CMHA has developed a curated set of COVID-19-related resources and announcements from a range of reputable state and national sources. That curated set of resources, which will be regularly updated, **is available by [CLICKING HERE](#)**.

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# CMH Association and Member Activities

**New!** CARE of Southeastern Michigan announces Rally 4 Recovery

**RALLY 4  
RECOVERY**  **CARE**  
SOUTHEASTERN MICHIGAN

Register or sign up to volunteer today!

4.24.2021



**11 AM - 2 PM**  
**\$25 per team**

**Grand Prize Raffle: \$1,000**

Rally 4 Recovery is a new, family-friendly adventure throughout Macomb County! Registration is now open!

CARE's Rally 4 Recovery is a family-friendly road rally that takes you around Macomb County with opportunities to win prizes by solving clues and riddles - all while practicing social distancing.

All proceeds from Rally 4 Recovery will support CARE programs that impact the lives of 40,000 individuals each year. Our programs include substance use education, prevention, and recovery. Rally 4 Recovery

lets the community and those who are struggling with substance use know we are here to help. When our community thrives, we all thrive.

Registration is \$25 per team. The event will take place rain or shine.

\*Please note, each registered team will earn a raffle ticket at each completed stop.\*

Raffle Prizes & Rally Rules

**The Grand Prize Raffle is \$1,000.** A full list of raffle prizes can be found at [www.careofsem.com](http://www.careofsem.com).

For the complete Rules of the Rally: [Click Here](#)


## Traveling Art Show

Traveling Art Show VI features pieces from Consumer Art Contests across Michigan. Anyone interested in any of the pieces shown may contact Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org). Those NOT sold by October 1, 2021, will be auctioned off at the 2021 Fall Conference in Traverse City, Michigan. Art may be available for viewing locally or on the [CMHA website](#). Check with your local CMH for more information or email Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org).



## State & National Developments and Resources

**New!** MDHHS Stay Well offers free webinar for Direct Support Professionals/Direct Care Workers



**FREE WEBINAR**

**Uplifting our Direct Care Workers**  
April 20, 3:30 - 4:30 p.m

**CLICK HERE TO REGISTER**

**STAY WELL**  
Michigan.gov/StayWell

**New!** Picture of Michigan and national direct support professional workforce during COVID19

The Institute on Community Integration (MN-UCEDD) has released its 6 month follow-up survey report on the [Direct Care Workforce during COVID-19](#). Michigan had more than 200 respondents, so ICI has created a [Michigan "state profile"](#). It is great to have this state level data and could be helpful to discussions with legislators.

**New!** Recording of recent webinar on the intersection of law enforcement and mental health

In light of the high profile debate around the connection or lack of connection between law enforcement and mental health (including substance use disorder and intellectual/developmental disabilities), the CMHA staff, who are funded by MHTT dollars, partnered with state-level law

enforcement organizations in the development and signing of a joint statement, underscoring the importance of local partnerships between law enforcement and mental health organizations.

As part of this effort, CMHA, in partnership with the Governor's Diversion Council, the Michigan Department of Health and Human Services, and the Cardinal Group are sponsoring a series of webinars highlighting the work of behavioral health and justice partnerships in communities across Michigan and the country and the work of the Center for Behavioral Health and Justice at Wayne State University,

Those webinars are being planned to run monthly, with the first webinar taking place in March 2021. As the content and dates of the subsequent webinars are determined, they will be announced.

The recording of the first webinar, featuring innovative partnerships between local law enforcement organizations and the local public mental health center [can be found here](#)

### **New! Video recording available from April 14 MDHHS webinar: Important Updates on AFCs and HFAs COVID-19 Emergency Response**

MDHHS has recently released the recording from the April 14 presentation, by MDHHS, around the Important Updates on AFCs and HFAs COVID-19 Emergency Response. That video can be [found here](#). It can be accessed with the access code: 7by97q\*5

### **Michigan announces 988 listening sessions**

The Michigan Department of Health and Human Services is planning for the implementation of 988, a new, national, three-digit number for mental health crisis and suicide response. The 988 crisis line is set to launch in July 2022. To support implementation, the State of Michigan has established a 988 planning coalition.

The coalition is seeking perspectives from **people who have experienced suicidal thoughts or behaviors, accessed crisis services, contacted a crisis line, or lost a loved one to suicide** to help inform the 988 implementation plan by participating in a virtual listening session. If you have these experiences and are interested in sharing your input, please register at <https://publicsectorconsultants.com/988-listening-session/>.

Michigan aims to have 24/7 statewide coverage of 988 calls, chats, and texts. Those who contact 988 can be connected to community crisis services and local resources, and call center staff can follow up with callers to ensure they have the support they need. The State is partnering with the current network of certified crisis centers providing suicide prevention and intervention services, as well as the Michigan Crisis Access Line (MiCAL). The 988 planning coalition is examining the state's current system and capacity for mental health crisis calls, reviewing model legislation for establishing a consistent statewide system for 988 calls, and providing other input on potential funding models and sources.

By working together with those with lived experience, Michigan hopes to create a comprehensive and effective crisis line for people in need.

# State Legislative Update

## View March's Legislative Video on CMHA's Website

The Capitol Briefing is a monthly resource available to CMHA members providing a high-level overview of the key items impacting the public mental health system that (or each) month at the State Capitol.

Our March Briefing features CMHA Associate Director, Alan Bolter, provides an update regarding the confirmation of Elizabeth Hertel as Director of the Michigan Department of Health and Human Services and the passage of a FY21 COVID Supplemental budget.

To view the latest video, [CLICK HERE!](#)

## New! Shirkey Renewing Mental Health Integration Talks

Senate Majority Leader Mike Shirkey and his team are leading efforts behind the scenes to craft legislation that wraps all physical and mental health services for Medicaid recipients under a single program. The Leader was scheduled to meet with stakeholders again this week on crafting significant legislation that would have the health plans coordinating services for patients with severe mental health challenges and addictions.

The proposal has some advocates leery about an arrangement in which those most in need will be stuck with substandard therapy because the health plans won't pay for the type of innovative treatment that could benefit them the most.

Robert Sheehan, CEO of the Community Mental Health Association of Michigan, said he's been leery of the latest Shirkey effort of what he sees as "privatization." "In states where it's happened, the quality of care went down. Payments went down. Innovative practices went down," he said. The patients in questions are among the most difficult cases, he said. They have serious mental or intellectual challenges. They have severe addiction. They have conditions that need more than regular couch visits to a psychiatrist, Sheehan said. They need 24 crisis centers, residential services, one-on-one guidance with therapists who have been in the patients' shoes before. They also need case managers who will help them complete some of life's most basic tasks -- renting an apartment, working with a teacher, etc., he said. Sheehan said he's concerned too many people will fall between the cracks if there's a profit motive involved.

Asked this week about further efforts to integrate physical and mental health services, Department of Health and Human Services Director Elizabeth Hertel said, "My focus on behavioral mental health is trying to expand access and focusing on places for people to go in a crisis and need help. Right now, we don't have enough capacity for that and we need to think about that and invest in that."

Dominick Pallone, executive director of the Michigan Association of Health Plans, sees an opportunity to provide more complete care to individuals by providing them with services that address both their

physical and mental needs through a single system. A standardized system, which is in the majority of state, will help Medicaid patients while making dollars go farther.

Andy Hetzel, Blue Cross Blue Shield of Michigan vice president of corporate communications, said the entity is working with its customers and members to integrate its medical, pharmacy and behavioral health solutions because "we know treating the whole patient and coordinating care is critical to achieving better outcomes." The Blues are supporting efforts to increase behavioral and physical care integration. It's looking forward to working with Shirkey to make sure Michiganders "have access to the behavioral health care they need."

## Federal Update

### Congress Passed 2021 COVID Relief Legislation

Congress just passed the [American Rescue Plan Act of 2021](#), a \$1.9 trillion COVID-19 relief bill aimed at boosting the availability of vaccinations, providing funding for small businesses and schools and giving relief to families through new stimulus checks, extended unemployment benefits and an expanded child tax credit, among other provisions.

The legislation, which President Biden will sign this week, also includes billions in new relief to address rising demand for mental health and addiction services, workforce shortages and pandemic-related layoffs and furloughs.

**In other words, we heard you loud and clear that more relief was needed. And we made sure Congress heard you, too.**

Here are some highlights from this historic legislation:

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grants:** Provides \$3 billion for the Substance Abuse Prevention and Treatment block grant and the Community Mental Health Services block grant (\$1.5 billion each).
- **Certified Community Behavioral Health Clinics (CCBHCs):** Provides \$420 million to SAMHSA to fund CCBHC Expansion Grants.
- **Provider Relief Funds:** \$8.5 billion in new money to the Provider Relief Fund for providers in rural areas and those serving rural communities.
- **Other Mental Health/Substance Use Disorder Funding:** Provides more than \$450 million in additional funding for SAMHSA and Health Resources and Services Administration (HRSA) programming including funding for mental health and addiction services, workforce education and training, suicide prevention and public education campaigns.

# Education Opportunities

## Call for Presentations: CMHA VIRTUAL Annual Summer Conference: June 14-17, 2021



### CMHA Virtual Annual Summer Conference "Be the Change...Shaping our Future Together"

June 14 - 17, 2021

Virtual Education Daily from 9:00am – 12:30pm EST

**Deadline for Call for Presentations is Monday, May 3, 2021**

#### **2 WAYS TO SUBMIT YOUR PRESENTATION:**

1) Download the traditional Word document, complete and email.

**[CLICK HERE FOR PRESENTATION SUBMISSION FORM](#)**

2) Submit electronically via Survey Monkey:

**[CLICK HERE TO SUBMIT ELECTRONICALLY VIA SURVEY MONKEY](#)**

Watch [www.cmham.org](http://www.cmham.org) for more details!

## Save the Date: 22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference

### 22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference

*Health Equity: Transforming to Meet the Challenge*

**Conference Date:** September 13-16, 2021

**Conference Location:** Virtual

Questions? Contact Alexandra Risher at [arisher@cmham.org](mailto:arisher@cmham.org).

## VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings

***All dates are currently sold out! We will be offering additional Ethics classes beginning in late summer.***

## VIRTUAL Pain Management and Mindfulness Trainings

***There are currently no scheduled dates for Pain Management and Mindfulness. We will be offering additional Pain Management and Mindfulness classes beginning in late summer.***

## Virtual Motivational Interviewing College Trainings – Registration Open

Registration is open for the FY21 VIRTUAL Motivational Interviewing College trainings which includes Basic, Advanced, Supervisory, and the revamped MI for Leadership & Organizations!

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.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

<u>Dates</u>	<u>Training</u>	<u>Registration Link</u>
July 26-27, 2021	M.I. Basic	<a href="#">CLICK HERE</a>
July 29-30, 2021	M.I. Advanced	<a href="#">CLICK HERE</a>
Aug. 2-3, 2021	M.I. for Leadership & Organizations	<a href="#">CLICK HERE</a>
Aug. 5, 2021	M.I. Supervisory	<a href="#">CLICK HERE</a>

**Times:**

Training(s) start promptly at 9:00am and adjourn at 4:15pm each day. Zoom Waiting Room opens at 8:30am each morning; attendees must be logged on by 8:45am. (All times in EST)

**Training Fees:**

\$125 per person for all 2-day trainings / \$70 per person for the 1-day Supervisory training. The fee includes electronic training materials and CEs for each day.

**Virtual Co-Occurring Disorders Trainings from Jennifer Harrison – Registration Open**

Registration is open for the following co-occurring disorders virtual trainings from presenter Jennifer Harrison.

These events are sponsored by the adult mental health block grant and are intended for persons who serve adults only through the mental health and substance abuse provider network in the state of Michigan. They contain content appropriate for CMHSP clinicians, therapists, peers, supervisors, and nurses.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

***\*Note: Due to the limited number of spots in these trainings, each organization is limited to a maximum of 6 registrants.***

**Integrated Dual Disorder Treatment 101**

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, 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 and team-based services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Integrated Dual Disorder Treatment (IDDT) was designed following systematic study of high intensity COD treatment needs and alterations of the Assertive Community Treatment (ACT) model. Within this training attendees will understand the components of IDDT, including fidelity and outcome measurement. Specific attention will be paid to the development of stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders using the IDDT model.

**Date:** July 15, 2021 | [CLICK HERE to Register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Our Brave New World: Cannabis, Opioids, and Pain in Behavioral Health Treatment**

Treatment planning for adults with complex mental health, substance use, and physical health needs involved understanding of stages of change and system navigation. Collaborating with these individuals on their wellness and recovery planning requires motivational approaches and often interventions that are more effective for early stage readiness. The prevalence of cannabis and opioid use makes these cases even more demanding to navigate. Add to this, the opioid crisis in the U.S. Since 1999, sales of opioids in the U.S. have quadrupled. From 1999-2015, more than 180,000 people died from overdoses related to prescription opioids. It is now the #1 cause of accidental death for people under 50. Michigan is one of 31 states with laws allowing medicinal or recreational marijuana use. Opioids and cannabis have become our new legal drugs.

This training will focus attention on providing stage-matched assessment and treatment surrounding use of legal drugs including cannabis and opioids. Focus on treatment planning and provision for individuals who have opioid or cannabis use, as well as management of co-occurring mental health or pain disorders.

**Dates:** April 27, 2021 | **SOLD OUT**

August 11, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Recovery-Based Co-Occurring Treatment Planning and Delivery**

Until the 21st century, 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 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.

**Dates:** May 5, 2021 | [CLICK HERE to register](#)

August 24, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### Stage Matched Treatment for Co-Occurring Needs

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. In addition, treatment engagement is often lower for individuals with COD, particularly when those individuals are in early stage of readiness for one of more presenting problems. This training will focus on the assessment of stage of readiness using validated tools, and the interventions that are best fit for each stage of readiness. In addition, ways to address organizational readiness for COD treatment will be discussed.

**Dates:** May 11, 2021 | [CLICK HERE to register](#)

August 31, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### 2021 ASD Evaluation and Treatment Trainings

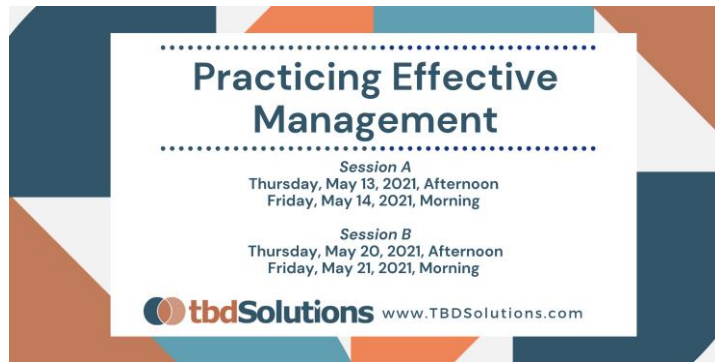
The Michigan Department of Health and Human Services (MDHHS) and Autism Alliance of Michigan (AAoM) have partnered with autism experts across the state to bring virtual autism trainings to providers at no cost. [Click Here to Register!](#)

#### COURSES

MARCH 26	9AM-12PM	ASD EVALUATION DURING COVID-19 & BEYOND: TELEHEALTH AND IN-OFFICE MODIFICATIONS
APRIL 23	12PM-3PM	IS IT AUTISM SPECTRUM DISORDER, TRAUMA OR BOTH? CEUs: 3.0 for Psychologists (APA) and Social Workers (CEC)
APRIL 28	12PM-1PM	BEYOND ABA FOR ASD: TREATMENTS THAT WORK
MAY 20	12PM-3PM	ASD DIFFERENTIAL DIAGNOSIS IN YOUNG CHILDREN CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
MAY 26	12PM-1PM	MAKING ASD REPORTS & FEEDBACK SESSIONS HELPFUL
JUNE 3	9AM-12PM	ASD & COMMON COMORBIDITIES CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
JUNE 23	12PM-1PM	WHEN (AND WHEN NOT) TO RECOMMEND ABA
JULY 14	12PM-1PM	MEDICAL ASSESSMENT & MANAGEMENT OF ASD
JULY 22	9AM-12PM	WHEN IT IS NOT ASD: MANAGEMENT & RECOMMENDATIONS CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
AUGUST 4	12PM-1PM	UNDERSTANDING GIRLS WITH ASD
AUGUST 18	9AM-4PM	ADOS-2 BOOSTER



## Practicing Effective Management Virtual Training



TBD Solutions is hosting its next Practicing Effective Management Training online on May 13, 14, 20, and 21. This virtual 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 more than 300 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, while maintaining a 98% satisfaction rate.

To register please visit: <https://www.eventbrite.com/e/practicing-effective-management-tickets-140075773409>

For questions or additional information, contact Molly at [MollyR@TBDSolutions.com](mailto:MollyR@TBDSolutions.com)

## Arc Michigan Disability Policy Webinar Series



The Arc Michigan is excited to announce the

**“June 2021 Disability Policy Webinar Series”**

Registration is now open!!

Click here to register <https://attendee.gotowebinar.com/register/3396825039610487053>

## Behavioral Telehealth Resource Center

### Telehealth Resource Center

Michigan’s Behavioral Telehealth Resource Center serves to provide current information on telehealth policies, training and engagement opportunities. Please visit the [webpage](#), to see available resources. If you have information to be included on the webpage, please contact [astagg@cmham.org](mailto:astagg@cmham.org).

## **New! Distance Learning & Telemedicine Opportunity Announcement**

[Distance Learning & Telemedicine Opportunity Announcement](#) (FOA) closes on June 4, 2021. For full information, see the [Program Fact Sheet](#).

This grant opportunity helps rural communities acquire the technology and training necessary to connect educational and medical professionals with students, teachers and patients in rural areas. The intent of the DLT program is to benefit rural areas with populations of 20,000 or less. Grant funds may be used for:

- Audio, video and interactive video equipment
- Broadband facilities that support distance learning or telemedicine
- Computer hardware, network components and software
- Acquisition of instructional programming
- Acquisition of technical assistance and instruction for using eligible equipment

Awards can range from \$50,000 to \$1 million. A minimum 15% match is required and cannot be from another federal sources. Questions? Contact a [General Field Representative](#) that serves your area or call (202)720-0800 or email [dltinfo@usda.gov](mailto:dltinfo@usda.gov).

## **FCC Sets New Guidelines for COVID-19 Telehealth Program Relaunch**

The Federal Communications Commission is poised to launch the second round of its COVID-19 Telehealth Program, with new guidelines designed to help health systems qualify for reimbursements.

COVID-19 Telehealth Program – [Order FCC 21-39](#) released 3/30/2021

Notes from Upper Midwest Telehealth Resource Center

- Funding must be awarded to at least one applicant from all 50 states and D.C.
- Filing Window of 7 Calendar Days
  - Two-week notice period via PN (TBD)
  - Anticipate opening filing window within 30-days of the Order
- Round 2 Eligibility
  - Round 1 applicant(s) eligible to apply for Round 2 even if received Round 1 award dollars
  - \$1M cap per applicant
  - FCC Form 460 required for only lead health care provider listed on application
  - HCPs should indicate applying for COVID-19 Telehealth Program on 460 to expedite review
  - Two business day response deadline for 460 questions
  - System for Award Management (SAM) Registration required
  - Do Not Pay verification

## Webinar: Increasing Connectivity with the Emergency Broadband Benefit (EBB)

Thursday, April 15, 2021, 3:00 PM ET

[Register for this Webinar](#)

Connectivity is an essential part of everyday life during the COVID-19 pandemic. A connected device with internet access provides a gateway to social engagement with family and friends while practicing physical distancing; healthcare services; remote work and school; and supplies and meals.

The [Emergency Broadband Benefit](#) is an [FCC program](#) to help households struggling to pay for internet service during the pandemic. This new benefit will connect eligible households to jobs, critical healthcare services, and virtual classrooms.

This webinar will include an overview of the Emergency Broadband Benefit including what it is, who is eligible, how it works, and how to help people enroll. A brief question and answer period will follow the presentation. To submit a question in advance of the webinar, please email: [broadbandbenefit@fcc.gov](mailto:broadbandbenefit@fcc.gov).

## MedPAC Report on Medicare Payment Policy March 2021

The [Medicare Payment Advisory Commission](#) (MedPAC) released the March 2021 report on Medicare payment policy. This report includes recommendations to Congress to continue some Medicare COVID-19 telehealth coverage expansions only temporarily (1-2 years after PHE order is lifted) to allow more time for study before making any policies permanent.

- Read the full report [here](#)
- Center for Connected Health Policy (CCHP) [video](#) and [slide deck](#) discusses the recent MedPAC recommendations for telehealth in the Medicare program. CCHP will review what MedPAC is suggesting and which changes they are recommending be kept once the public health emergency for COVID-19 is over.

## Education & Training Resources from Great Lakes MHTTC



Great Lakes (HHS Region 5)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

## CMHA's partnership with SAMHSA funded Great Lakes MHTTC

CMHA is the Michigan partner of the Great Lakes Mental Health Technology Transfer Center (MHTTC). Through this partnership, funded by the federal Substance Abuse and Mental Health Services



Administration (SAMHSA), MHTTC and CMHA provide Michiganders with access to a wide range of evidence-based and promising mental health practices. More information on the work of the Great Lakes MHTTC can be [found here](#).

The Great Lakes Mental Health Technology Transfer Center (MHTTC) makes available a large catalog of Great Lakes MHTTC products at its [Products and Resources](#) webpage.

This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

### **New! MHTTC and CMHA request your assistance in finding individuals with Perinatal Mood and Anxiety Disorder (PMAD) PMAD experience for listening session**

The MHTTC Perinatal Mood and Anxiety Disorder (PMAD) Coordination Group is hosting a set of listening sessions, during the week of April 12, with people and families who have lived experience with Perinatal Mood and Anxiety Disorders to better determine their needs and design training and technical assistance for the medical and mental health workforces.

See the flyers, in [English](#) and [Spanish](#), and distribute them to health and behavioral health providers who work with individuals and families during the perinatal period to help us get the word out and gather participants in the listening sessions.

## News from Our Preferred Corporate Partners

### **Abilita: You WILL Profit from a Technology Audit**

There isn't any doubt that 2020 will be deemed "the year of the pandemic". It doesn't matter what line of business you are engaged in, or what your position in the organization is (was), your technology and telecom picture has changed. And, it may never be quite the same again.

Organizations' technology teams have been overwhelmed with the urgency of the crisis and have had to deploy new collaboration and connectivity solutions without a lot of thought for the long term. 2021 will be the year of preparing for the new reality in telecom and technology which may include:

- more Work From Home challenges
- more video, less telephony
- more flexibility in services and connectivity

Let's call 2021 the "**Year of the Technology Audit**". Look at where you were, where you are, and where and how to move ahead.

For some ideas on how to do this and what you might want to consider, [read this article titled “2021 - The Year of the Audit](#)”. To get started now, contact us for a zero-risk review of your technology systems and services.

### **myStrength: new digital behavioral health resources empower consumers to move beyond trauma**

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. [Click here to request a demo](#).

## **CMH Association’s Officers & Staff Contact Info**

### **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 Board of Directors, 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; [balcat19@live.com](mailto:balcat19@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 Staff Contact Information:**

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

Alan Bolter, Associate Director, (517) 237-3144; [abolter@cmham.org](mailto:abolter@cmham.org)  
Audrey Daul, Administrative Assistant, (517) 237-3141; [adaul@cmham.org](mailto:adaul@cmham.org)  
Dana Ferguson, Senior Accounting Specialist, (517) 237-3147; [dferguson@cmham.org](mailto:dferguson@cmham.org)  
Monique Francis, Executive Secretary/Committee Clerk, (517) 237-3145; [mfrancis@cmham.org](mailto:mfrancis@cmham.org)



Jodi Hammond, Training and Meeting Planner, (517) 237-3148; [jhammond@cmham.org](mailto:jhammond@cmham.org)  
Regina MacDonald, Accounting Assistant, (517) 237-3146; [rmacdonald@cmham.org](mailto:rmacdonald@cmham.org)  
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Christina Ward, Director of Education & Training, (517) 237-3143; [cward@cmham.org](mailto:cward@cmham.org)  
Anne Wilson, Training and Meeting Planner, (517) 237-3153; [awilson@cmham.org](mailto:awilson@cmham.org)



# WEEKLY Update

April 9, 2021

**COVID-19 Resources:** CMHA has developed a curated set of COVID-19-related resources and announcements from a range of reputable state and national sources. That curated set of resources, which will be regularly updated, **is available by [CLICKING HERE](#)**.

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# CMH Association and Member Activities

## **New!** Tuscola Behavioral Health Systems announces 3-Year Accreditation by CARF

Below are excerpts from a recent announcement from Tuscola Behavioral Health Systems:

Tuscola Behavioral Health Systems (TBHS) Board of Directors are pleased to report to the residents of Tuscola County that TBHS has been accredited for a period of three years, through October 31, 2023.

The latest accreditation is the fifth consecutive Three-Year Accreditation that the international accrediting body, CARF, has awarded to Tuscola Behavioral Health Systems.

The survey report highlighted a number of items that CARF determined to be strengths of TBHS such as:

- The organization has an excellent team, highly caring and dedicated staff whose work reflects the mission and vision of the agency. TBHS incorporates the CARF standards into its day -to -day service delivery practices and business functions, and its practices exemplify continuous quality improvement.
- TBHS provides excellent mental health services to children, adolescent and adult consumers.
- A strong culture of recovery and hope characterizes the organization's community employment services program. The program is well integrated in the overall operations of TBHS. Individualized supports enable consumers to attain their goals via a wide variety of volunteer opportunities and paid employment opportunities.
- Clients speak highly of staff and services and shared some stories related to individual staff and the differences that they have made for consumers/families.
- External stakeholders complimented TBHS staff and noted them to be dedicated and passionate.
- The organization provides a culture of hope; staff are passionate and committed.

Sharon Beals, TBHS Chief Executive Officer, stated "the survey results are confirmation of the staff commitment of providing consistent delivery of quality services and commitment to individuals during their recovery process."

Congratulations to Tuscola Behavioral Health Systems.

## **New!** Senator Stabenow joins Lifeways in celebration of opening of crisis center

The video recording of the celebration of the opening of Lifeway's crisis center – a celebration at which United States Senator Debbie Stabenow was a keynote speaker – can be [found here](#).

## Traveling Art Show

Traveling Art Show VI features pieces from Consumer Art Contests across Michigan. Anyone interested in any of the pieces shown may contact Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org). Those NOT sold by October 1, 2021, will be auctioned off at the 2021 Fall Conference in Traverse City, Michigan. Art may be available for viewing locally or on the [CMHA website](#). Check with your local CMH for more information or email Monique at [mfrancis@cmham.org](mailto:mfrancis@cmham.org).

## State & National Developments and Resources

### **New!** Michigan announces 988 listening sessions

The Michigan Department of Health and Human Services is planning for the implementation of 988, a new, national, three-digit number for mental health crisis and suicide response. The 988 crisis line is set to launch in July 2022. To support implementation, the State of Michigan has established a 988 planning coalition.

The coalition is seeking perspectives from **people who have experienced suicidal thoughts or behaviors, accessed crisis services, contacted a crisis line, or lost a loved one to suicide** to help inform the 988 implementation plan by participating in a virtual listening session. If you have these experiences and are interested in sharing your input, please register at <https://publicsectorconsultants.com/988-listening-session/>.

Michigan aims to have 24/7 statewide coverage of 988 calls, chats, and texts. Those who contact 988 can be connected to community crisis services and local resources, and call center staff can follow up with callers to ensure they have the support they need. The State is partnering with the current network of certified crisis centers providing suicide prevention and intervention services, as well as the Michigan Crisis Access Line (MiCAL). The 988 planning coalition is examining the state's current system and capacity for mental health crisis calls, reviewing model legislation for establishing a consistent statewide system for 988 calls, and providing other input on potential funding models and sources. By working together with those with lived experience, Michigan hopes to create a comprehensive and effective crisis line for people in need.

### **New!** Video recording available from recent MDHHS webinar: revised emergency order for visitation and COVID19 testing reimbursement

MDHHS has recently released the recording from the April 7 presentation, by MDHHS, around the revised emergency order for visitation and COVID19 testing reimbursement. That video can be [found here](#). It can be accessed with the access code: P@hPB\*4y

## **New! Biden Calls For Major Boost To Disability Services**

Below are excerpts from a recent news story on the American Jobs Plan and its positive impact on the expansion of home and community based services.

Alongside funding for bridges and roads, President Joe Biden's wide-ranging \$2 trillion infrastructure plan includes a massive investment in home- and community-based services for people with disabilities.

The proposal unveiled last week known as the American Jobs Plan calls for \$400 billion in spending to expand access to Medicaid home- and community-based services for those currently on waiting lists.

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

## **New! Roadmap to the ideal crisis system**

Below are excerpts from the report recently released by the National Council for Behavioral Health and its collaborators - Roadmap to the ideal crisis system: Essential Elements, Measurable Standards and Best Practices for Behavioral Health Crisis Response

There is broad recognition that behavioral health crises have reached epidemic proportion, with drug overdoses and suicides having overtaken traffic accidents as the two leading causes of death among young Americans ages 25-44. The COVID-19 pandemic has further underscored the dramatic need for behavioral health services, including crisis services. Yet very few communities in the United States have a behavioral health crisis system that would be considered excellent, let alone ideal.

The executive summary can be [found here](#).

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

## **New! Call for presentations: National Coalition for Mental Health Recovery Alternatives Conference**

Below are excerpts from a recent call for presentations for the National Coalition for Mental Health Recovery Alternatives Conference

The National Coalition for Mental Health Recovery (NCMHR) is proud to host the 2021 (Virtual) Alternatives Conference, now in its 35th year. The conference is scheduled for Thursday, July 8, & Saturday, July 10, 2021 ; Thursday, July 15, & Saturday, July 17, 2021.

We invite you to share your wisdom and expertise by submitting a proposal for a 45-minute workshop in one of the categories below. More details are available at [the website](#). Presentation topics can include: Advocacy, Preventing Crisis, Protecting Rights, Promoting Social Justice and Social Inclusion, Youth Empowerment, Healing Through the Arts, Holistic Health, Wellness, and Spirituality, Economic Empowerment.

The deadline for submitting workshop proposals is April 23, 2021. For other conference information, visit the [Alternatives website](#)

### **New! National Institutes of Health (NIH) Helping to End Addiction Long-term Initiative**

The National Institutes of Health (NIH) Helping to End Addiction Long-term Initiative has launched an Idea Exchange, Moving HEAL Research Into Action, to gather public input. The Idea Exchange aims to crowdsource solutions to improve pain management and the prevention and treatment of opioid misuse and addiction. All are invited to participate, including the many individuals on the front lines of the opioid crisis (e.g., treatment providers, advocates and families, law enforcement professionals, first responders, policymakers, and government health officials). The comment period is open from April 6 to June 1, 2021. Individuals must [register with a free account](#) to share ideas.

### **New! Promoting the Community Integration of People with Dual Diagnosis**

The Council on Quality and Leadership has recently examined how individualized organizational supports facilitate the community integration of people with dual diagnosis. The report that emerged from the work can be [found here](#).

## State Legislative Update

### **View March's Legislative Video on CMHA's Website**

The Capitol Briefing is a monthly resource available to CMHA members providing a high-level overview of the key items impacting the public mental health system that (or each) month at the State Capitol.

Our March Briefing features CMHA Associate Director, Alan Bolter, provides an update regarding the confirmation of Elizabeth Hertel as Director of the Michigan Department of Health and Human Services and the passage of a FY21 COVID Supplemental budget.

To view the latest video, [CLICK HERE!](#)

### **Governor's Office Hosted a Behavioral Health Virtual Meeting on FY22 Budget Priorities**

On Tuesday, March 30 Governor Whitmer's community relations office hosted a virtual conversation on the Governor's FY22 budget initiatives for behavioral health. ([2022 budget recommendations](#)). Jon Villasurda from BHDDA provided [PowerPoint slides](#) regarding the key budget initiatives.

### **Elizabeth Hertel Appointment Stands Despite Floor Division**

On Tuesday, the final day for the Senate to disapprove Elizabeth Hertel as Director of the Department of Health and Human Services (DHHS), the full Senate allowed the appointment of Director Hertel to stand, not without some fireworks however. Senate Republicans gave impassioned floor speeches where they strongly disagreed with the appointment of Director Hertel. Not because they questioned her credentials or experience, most members emphasized their opposition was not personal. However, the main criticisms were that Director Hertel did not disagree with Governor Gretchen Whitmer's restrictions implemented during the early phase of the COVID-19 pandemic and that under her leadership, legislative engagement in the decision-making process (or lack thereof) will not change. Following speeches from Republicans, Senator Curtis Hertel (D-East Lansing) explained he will abstain from voting due to a conflict of interest, as he is married to Director Hertel.

The final vote on the approval of Director Hertel, was an 18 to 16 vote. The Senate did fall short on the necessary votes needed to approve an appointment, which is 19. The Michigan Constitution only provides the Senate the power to reject appointments, so the vote to approve an appointment holds no significance outside of voicing approval and disapproval. Only four Senate Republicans voted in favor of approving Director Hertel, which were Senate Majority Leader Mike Shirkey (R-Clarklake), Senators Jim Stamas (R-Midland), Wayne Schmidt (R-Traverse City) and Ken Horn (R-Frankenmuth). All Senate Democrats voted in favor of approving Director Hertel.

## Federal Update

### Congress Passed 2021 COVID Relief Legislation

Congress just passed the [American Rescue Plan Act of 2021](#), a \$1.9 trillion COVID-19 relief bill aimed at boosting the availability of vaccinations, providing funding for small businesses and schools and giving relief to families through new stimulus checks, extended unemployment benefits and an expanded child tax credit, among other provisions.

The legislation, which President Biden will sign this week, also includes billions in new relief to address rising demand for mental health and addiction services, workforce shortages and pandemic-related layoffs and furloughs.

**In other words, we heard you loud and clear that more relief was needed. And we made sure Congress heard you, too.**

Here are some highlights from this historic legislation:

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Block Grants:** Provides \$3 billion for the Substance Abuse Prevention and Treatment block grant and the Community Mental Health Services block grant (\$1.5 billion each).
- **Certified Community Behavioral Health Clinics (CCBHCs):** Provides \$420 million to SAMHSA to fund CCBHC Expansion Grants.

- **Provider Relief Funds:** \$8.5 billion in new money to the Provider Relief Fund for providers in rural areas and those serving rural communities.
- **Other Mental Health/Substance Use Disorder Funding:** Provides more than \$450 million in additional funding for SAMHSA and Health Resources and Services Administration (HRSA) programming including funding for mental health and addiction services, workforce education and training, suicide prevention and public education campaigns.

## Education Opportunities

**New! Call for Presentations: CMHA VIRTUAL Annual Summer Conference: June 14-17, 2021**



**CMHA Virtual Annual Summer Conference**  
**"Be the Change...Shaping our Future Together"**

**June 14 - 17, 2021**

**Virtual Education Daily from 9:00am – 12:30pm EST**

**Deadline for Call for Presentations is Monday, May 3, 2021**

**2 WAYS TO SUBMIT YOUR PRESENTATION:**

1) Download the traditional Word document, complete and email.

[CLICK HERE FOR PRESENTATION SUBMISSION FORM](#)

2) Submit electronically via Survey Monkey:

[CLICK HERE TO SUBMIT ELECTRONICALLY VIA SURVEY MONKEY](#)

Watch [www.cmham.org](http://www.cmham.org) for more details!

### **Call for Presentations: 22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference**

The Annual Substance Use and Co-Occurring Disorder Virtual Conference brought in over 1,000 attendees last year. We would love for you to join us by sharing your expertise, research or showcasing a successful program!

#### **22nd Annual Substance Use and Co-Occurring Disorder Virtual Conference**

*Health Equity: Transforming to Meet the Challenge*

**Conference Date:** September 13-16, 2021

**Conference Location:** Virtual

**Submission Deadline:** *Wednesday, April 14, 2021*

**What we are looking for:** Presentations that fit into the general theme of the conference, specifically, presentations that address: health disparities, health equity, integration of behavioral health (prevention and treatment of mental health and substance use disorders) and physical health, co-occurring disorder, peers and recovery coaching and strength-based services as well as the topics in the attached guidelines document. Please feel free to submit proposals on other topics that you think will address this year's theme.

- Submit this electronic form by **Wednesday, April 14, 2021.**
- We allow for a maximum of 3 presenters during a workshop.
- Workshops are 90 minutes.
- **Presenter Compensation:** Presenters will receive complimentary registration for the full VIRTUAL conference. The conference budget will not provide honorariums for workshop presenters.

[CLICK HERE FOR THE ELECTRONIC SUBMISSION FORM AND MORE INFORMATION ON OUR WEBSITE](#)

Questions? Contact Alexandra Risher at [arisher@cmham.org](mailto:arisher@cmham.org).

### **VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings**

***All dates are currently sold out! We will be offering additional Ethics classes beginning in late summer.***

### **VIRTUAL Pain Management and Mindfulness Trainings**

***There are currently no scheduled dates for Pain Management and Mindfulness. We will be offering additional Pain Management and Mindfulness classes beginning in late summer.***

### **Virtual Motivational Interviewing College Trainings – Registration Open**

Registration is open for the FY21 VIRTUAL Motivational Interviewing College trainings which includes Basic, Advanced, Supervisory, and the revamped MI for Leadership & Organizations!

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.

***By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.***

**Dates**

**Training**

**Registration Link**

April 19-20, 2021	M.I. Basic	<a href="#">CLICK HERE</a>
April 22-23, 2021	M.I. Advanced	<a href="#">CLICK HERE</a>
April 29, 2021	M.I. Supervisory	<a href="#">CLICK HERE</a>
July 26-27, 2021	M.I. Basic	<a href="#">CLICK HERE</a>
July 29-30, 2021	M.I. Advanced	<a href="#">CLICK HERE</a>
Aug. 2-3, 2021	M.I. for Leadership & Organizations	<a href="#">CLICK HERE</a>
Aug. 5, 2021	M.I. Supervisory	<a href="#">CLICK HERE</a>

**Times:**

Training(s) start promptly at 9:00am and adjourn at 4:15pm each day. Zoom Waiting Room opens at 8:30am each morning; attendees must be logged on by 8:45am. (All times in EST)

**Training Fees:**

\$125 per person for all 2-day trainings / \$70 per person for the 1-day Supervisory training. The fee includes electronic training materials and CEs for each day.

**Virtual Co-Occurring Disorders Trainings from Jennifer Harrison – Registration Open**

Registration is open for the following co-occurring disorders virtual trainings from presenter Jennifer Harrison.

These events are sponsored by the adult mental health block grant and are intended for persons who serve adults only through the mental health and substance abuse provider network in the state of Michigan. They contain content appropriate for CMHSP clinicians, therapists, peers, supervisors, and nurses.

*By registering for these trainings, the participant acknowledges they have read & agree to the updated virtual guidelines and terms & conditions in the brochure to ensure they can fully participate in the virtual education. Registration closes 5 business days prior to each training.*

***\*Note: Due to the limited number of spots in these trainings, each organization is limited to a maximum of 6 registrants.***

**Integrated Dual Disorder Treatment 101**

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, 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 and team-based services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Integrated Dual Disorder Treatment (IDDT) was designed following systematic study of high intensity COD treatment needs and alterations of the Assertive Community Treatment (ACT) model. Within this training attendees will understand the components of IDDT, including fidelity and outcome



measurement. Specific attention will be paid to the development of stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders using the IDDT model.

**Dates:** April 15, 2021 | **SOLD OUT**

July 15, 2021 | [CLICK HERE to Register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Our Brave New World: Cannabis, Opioids, and Pain in Behavioral Health Treatment**

Treatment planning for adults with complex mental health, substance use, and physical health needs involved understanding of stages of change and system navigation. Collaborating with these individuals on their wellness and recovery planning requires motivational approaches and often interventions that are more effective for early stage readiness. The prevalence of cannabis and opioid use makes these cases even more demanding to navigate. Add to this, the opioid crisis in the U.S. Since 1999, sales of opioids in the U.S. have quadrupled. From 1999-2015, more than 180,000 people died from overdoses related to prescription opioids. It is now the #1 cause of accidental death for people under 50. Michigan is one of 31 states with laws allowing medicinal or recreational marijuana use. Opioids and cannabis have become our new legal drugs.

This training will focus attention on providing stage-matched assessment and treatment surrounding use of legal drugs including cannabis and opioids. Focus on treatment planning and provision for individuals who have opioid or cannabis use, as well as management of co-occurring mental health or pain disorders.

**Dates:** April 27, 2021 | **SOLD OUT**

August 11, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Recovery-Based Co-Occurring Treatment Planning and Delivery**

Until the 21st century, 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 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.

**Dates:** May 5, 2021 | [CLICK HERE to register](#)

August 24, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

### **Stage Matched Treatment for Co-Occurring Needs**

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. In addition, treatment engagement is often lower for individuals with COD, particularly when those individuals are in early stage of readiness for one of more presenting problems. This training will focus on the assessment of stage of readiness using validated tools, and the interventions that are best fit for each stage of readiness. In addition, ways to address organizational readiness for COD treatment will be discussed.

**Dates:** May 11, 2021 | [CLICK HERE to register](#)

August 31, 2021 | [CLICK HERE to register](#)

**Times:** Training: 8:30am – 4:30pm EST | Zoom log in by 8:15pm

**\$30 Registration fee** includes electronic training materials and CEs

## **New! Mythbusters: Uncovering Truths about Behavioral Health Crisis Care Webinar**



### **Mythbusters: Uncovering Truths about Behavioral Health Crisis Care**

*Thursday, April 15th  
1:00-2:30pm ET*

Beginning April 15th, a collaborative of behavioral health crisis provider organizations will be co-hosting a 3-part webinar series uncovering the truths about behavioral health crisis care. Hear balanced perspectives based on research and practice-based evidence from some of the premier crisis service providers in the country.

This webinar series is brought to you by the Crisis Residential Association, the American Association of

Suicidology, the National Association of Crisis Organization Directors, and TBD Solutions.

Session 1 focuses on risk and staffing models in crisis care: How do crisis programs effectively manage the inherent risk they take on by diverting people from emergency departments, psychiatric hospitals, and even jail? And are staff without advanced-level degrees able to provide meaningful support in these settings?

#### **Moderator:**

Travis Atkinson, Director of Clinical & Crisis Services, TBD Solutions (MI)

#### **Panelists:**

Steve Miccio, CEO, People USA (NY)

Kris Thompson, Associate Executive Director for Crisis Services, Lenape Valley Foundation (PA)

[Register by clicking here!](#)

## New! 2021 ASD Evaluation and Treatment Trainings

The Michigan Department of Health and Human Services (MDHHS) and Autism Alliance of Michigan (AAoM) have partnered with autism experts across the state to bring virtual autism trainings to providers at no cost. [Click Here to Register!](#)

### COURSES

MARCH 26	9AM-12PM	ASD EVALUATION DURING COVID-19 & BEYOND: TELEHEALTH AND IN-OFFICE MODIFICATIONS
APRIL 23	12PM-3PM	IS IT AUTISM SPECTRUM DISORDER, TRAUMA OR BOTH? CEUs: 3.0 for Psychologists (APA) and Social Workers (CEC)
APRIL 28	12PM-1PM	BEYOND ABA FOR ASD: TREATMENTS THAT WORK
MAY 20	12PM-3PM	ASD DIFFERENTIAL DIAGNOSIS IN YOUNG CHILDREN CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
MAY 26	12PM-1PM	MAKING ASD REPORTS & FEEDBACK SESSIONS HELPFUL
JUNE 3	9AM-12PM	ASD & COMMON COMORBIDITIES CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
JUNE 23	12PM-1PM	WHEN (AND WHEN NOT) TO RECOMMEND ABA
JULY 14	12PM-1PM	MEDICAL ASSESSMENT & MANAGEMENT OF ASD
JULY 22	9AM-12PM	WHEN IT IS NOT ASD: MANAGEMENT & RECOMMENDATIONS CEUS: 3.0 FOR PSYCHOLOGISTS (APA) AND SOCIAL WORKERS (CEC)
AUGUST 4	12PM-1PM	UNDERSTANDING GIRLS WITH ASD
AUGUST 18	9AM-4PM	ADOS-2 BOOSTER

## Practicing Effective Management Virtual Training

The graphic features a white central box with a dotted border. The title "Practicing Effective Management" is at the top. Below it, "Session A" is listed with dates "Thursday, May 13, 2021, Afternoon" and "Friday, May 14, 2021, Morning". "Session B" is listed with dates "Thursday, May 20, 2021, Afternoon" and "Friday, May 21, 2021, Morning". At the bottom is the "tbdSolutions" logo and the website "www.TBDSolutions.com". The background consists of overlapping geometric shapes in shades of blue, orange, and white.

TBD Solutions is hosting its next Practicing Effective Management Training online on May 13, 14, 20, and 21. This virtual 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 more than 300 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, while maintaining a 98% satisfaction rate.

To register please visit: <https://www.eventbrite.com/e/practicing-effective-management-tickets-140075773409>

For questions or additional information, contact Molly at [MollyR@TBDSolutions.com](mailto:MollyR@TBDSolutions.com)

### Arc Michigan Disability Policy Webinar Series



The Arc Michigan is excited to announce the

***“June 2021 Disability Policy Webinar Series”***

Registration is now open!!

Click here to register <https://attendee.gotowebinar.com/register/3396825039610487053>

## Behavioral Telehealth Resource Center

### Telehealth Resource Center

Michigan’s Behavioral Telehealth Resource Center serves to provide current information on telehealth policies, training and engagement opportunities. Please visit the [webpage](#), to see available resources. If you have information to be included on the webpage, please contact [astagg@cmham.org](mailto:astagg@cmham.org).

### **New!** FCC Sets New Guidelines for COVID-19 Telehealth Program Relaunch

The Federal Communications Commission is poised to launch the second round of its COVID-19 Telehealth Program, with new guidelines designed to help health systems qualify for reimbursements.

COVID-19 Telehealth Program – [Order FCC 21-39](#) released 3/30/2021

#### Notes from Upper Midwest Telehealth Resource Center

- Funding must be awarded to at least one applicant from all 50 states and D.C.
- Filing Window of 7 Calendar Days
  - Two-week notice period via PN (TBD)
  - Anticipate opening filing window within 30-days of the Order
- Round 2 Eligibility
  - Round 1 applicant(s) eligible to apply for Round 2 even if received Round 1 award dollars

- \$1M cap per applicant
- FCC Form 460 required for only lead health care provider listed on application
- HCPs should indicate applying for COVID-19 Telehealth Program on 460 to expedite review
- Two business day response deadline for 460 questions
- System for Award Management (SAM) Registration required
- Do Not Pay verification

## **New! Webinar: Increasing Connectivity with the Emergency Broadband Benefit (EBB)**

**Thursday, April 15, 2021, 3:00 PM ET**

[Register for this Webinar](#)

Connectivity is an essential part of everyday life during the COVID-19 pandemic. A connected device with internet access provides a gateway to social engagement with family and friends while practicing physical distancing; healthcare services; remote work and school; and supplies and meals.

The [Emergency Broadband Benefit](#) is an [FCC program](#) to help households struggling to pay for internet service during the pandemic. This new benefit will connect eligible households to jobs, critical healthcare services, and virtual classrooms.

This webinar will include an overview of the Emergency Broadband Benefit including what it is, who is eligible, how it works, and how to help people enroll. A brief question and answer period will follow the presentation. To submit a question in advance of the webinar, please email: [broadbandbenefit@fcc.gov](mailto:broadbandbenefit@fcc.gov).

## **MedPAC Report on Medicare Payment Policy March 2021**

The [Medicare Payment Advisory Commission](#) (MedPAC) released the March 2021 report on Medicare payment policy. This report includes recommendations to Congress to continue some Medicare COVID-19 telehealth coverage expansions only temporarily (1-2 years after PHE order is lifted) to allow more time for study before making any policies permanent.

- Read the full report [here](#)
- Center for Connected Health Policy (CCHP) [video](#) and [slide deck](#) discusses the recent MedPAC recommendations for telehealth in the Medicare program. CCHP will review what MedPAC is suggesting and which changes they are recommending be kept once the public health emergency for COVID-19 is over.

# Education & Training Resources from Great Lakes MHTTC



Great Lakes (HHS Region 5)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

## CMHA's partnership with SAMHSA funded Great Lakes MHTTC

CMHA is the Michigan partner of the Great Lakes Mental Health Technology Transfer Center (MHTTC). Through this partnership, funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA), MHTTC and CMHA provide Michiganders with access to a wide range of evidence-based and promising mental health practices. More information on the work of the Great Lakes MHTTC can be [found here](#).

The Great Lakes Mental Health Technology Transfer Center (MHTTC) makes available a large catalog of Great Lakes MHTTC products at its [Products and Resources](#) webpage.

This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

## News from Our Preferred Corporate Partners

### Abilita: You WILL Profit from a Technology Audit

There isn't any doubt that 2020 will be deemed "the year of the pandemic". It doesn't matter what line of business you are engaged in, or what your position in the organization is (was), your technology and telecom picture has changed. And, it may never be quite the same again.

Organizations' technology teams have been overwhelmed with the urgency of the crisis and have had to deploy new collaboration and connectivity solutions without a lot of thought for the long term. 2021 will be the year of preparing for the new reality in telecom and technology which may include:

- more Work From Home challenges
- more video, less telephony
- more flexibility in services and connectivity

Let's call 2021 the "Year of the Technology Audit". Look at where you were, where you are, and where and how to move ahead.

For some ideas on how to do this and what you might want to consider, [read this article titled "2021 - The Year of the Audit"](#). To get started now, contact us for a zero-risk review of your technology systems and services.

### **myStrength: new digital behavioral health resources empower consumers to move beyond trauma**

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. [Click here to request a demo.](#)

## **CMH Association's Officers & Staff Contact Info**

### **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 Board of Directors, 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  
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Second Vice President: Craig Reiter; [gullivercraig@gmail.com](mailto:gullivercraig@gmail.com); (906) 283-3451  
Secretary: Cathy Kellerman; [balcat19@live.com](mailto:balcat19@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 Staff Contact Information:**

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

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