

January 18, 2019

Contents:

CMH Association and Member Activities:.....	2
CMHAM Committee Schedules, Membership, Minutes, and Information.....	2
News from Our Corporate Partners:.....	2
Local Security and Cloud Servers?.....	2
State and National Developments and Resources:.....	2
MDHHS Director Gordon Reaches out to CMH Association, MDHHS employees, and MDHHS Stakeholders...2	
New Director Talks About Opportunities in Combined MDHHS.....	4
State Funding Recognition of K-12 Mental Health Issues, Advocates Say.....	4
MDHHS Seeking Public Comment on MI Health Link (“Duals Project”) Waiver Amendment.....	5
The Job Most Americans Don't Know About, but is Crucial to The Success of People with Disabilities.....	6
CDC Provides Cultural Competence Resources.....	7
Mental Health Self-Directed Care Financing: Efficacy in Improving Outcomes and Controlling Costs for Adults with Serious Mental Illness.....	8
State Legislative Update:.....	9
House Creates New Committee Structure to Provide More Debate.....	9
House Committee Assignments.....	9
Federal Update:.....	11
No Major Impacts' from Shutdown on State Gov't At Least Through Feb. 5.....	11
Education Opportunities:.....	13
CMHAM & Michigan Health Endowment Fund Present New Training Series: Managed Care Contracting from a Position of Strength!.....	13
Earlybird Deadline TODAY! CMHAM Annual Winter Conference.....	13
CMHAM Annual Spring Conference.....	14
Administration for Community Living (ACL) Announces HCBS Resource.....	15
Dialectical Behavior Therapy (DBT) Trainings for 2018/2019.....	15
Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019.....	16
Motivational Interviewing College Trainings for 2018/2019.....	17
Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019.....	18
CHCS Announces Complex Care Webinar.....	18

CMHA WEEKLY UPDATE

Miscellaneous News and Information:	19
Job Opportunity: Executive Director of Michigan Certification Board for Addiction Professionals	19
CMH Association’s Officers and Staff Contact Information:	19
CMHAM Officers Contact Information:.....	19
CMHAM Staff Contact Information:.....	19

CMH Association and Member Activities:

CMHAM Committee Schedules, Membership, Minutes, and Information

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

News from Our Corporate Partners:

Local Security and Cloud Servers?

It is a common misconception that local computers and networks do not have to be secure because an organization’s EMR system lives in the cloud. Although you are still required to have a BAA for that cloud provider, it is also imperative to protect the local network. An attacker could gain access to a local computer and either take screenshots of ePHI that a user is viewing, or they could capture login credentials to a cloud EMR system. The same security rules apply to a local network even if the server is not onsite. Reach out to the CMHA to get help today!

Abilita is the leader in telecommunications consulting and endorsed by CMHAM since 2011 to help members reduce risks, costs and prevent your staff from wasting their time. Abilita evaluates HIPAA technology risks and can insure you are in compliance without wasting your staffs’ time. In addition, we reduce your telecom costs by 29% with no upfront costs or risk. Abilita is an independent consulting company with offices across Michigan and North America! As one of the largest independent Communications Technology consulting firms in America, Abilita has the experience needed to help members by not just identifying, but by managing the implementation of recommendations you approve. For additional information, contact: Dan Aylward, Senior Consultant, Abilita at 888-910-2004 x 2303 or dan.aylward@abilita.com.

State and National Developments and Resources:

MDHHS Director Gordon Reaches out to CMH Association, MDHHS employees, and MDHHS Stakeholders

On his first day in the role as the Director of the Michigan Department of Health and Human Services, Robert Gordon reached out to talk to our Association, as a key MDHHS stakeholder. We discussed the CMH Association’s recommendations to strengthen Michigan’s public mental health system, drawing on two of the Association’s core advocacy documents “Vision for a World Class Public Mental Health System in Michigan” and its “Addressing the systemic underfunding of Michigan’s public mental health system”. He expressed his strong support for our system, reminding us that his father was a psychiatrist in the public mental health system of New York. He asked that we drop off hard copies of the materials that we discussed, along with other materials related to our system.

CMHA WEEKLY UPDATE

Below is an e-mail, from Robert Gordon's office, that went out to all of the Department's key stakeholder organizations, earlier this week.

Additionally, below is an email (and a link to a video interview) from Robert Gordon that was sent to MDHHS employees, earlier this week. While this e-mail and video are intended for MDHHS employees, the themes contained in the e-mail and video provide us with a clear picture of his approach to his work and his hopes and vision for MDHHS.

Message to MDHHS stakeholders from Director Gordon:

Dear Stakeholders:

I am grateful to Governor Whitmer for the honor of service as Director of the Department of Health and Human Services.

With my appointment, many of you issued statements that expressed your support and shared your commitments and concerns. I am grateful. I know the indispensable roles that diverse private, non-profit, and public organizations play in delivering care in this great state. I look forward to working with all of you to improve Michiganders' lives.

While I am focused for now on getting to know the Department staff, I am eager to begin meeting many of you in the coming weeks and months. The state's stakeholders will be critical partners in any success. I am excited to work together with you building a Michigan where everyone has access to the care they need and can make health decisions for themselves and their families.

Sincerely,

Robert Gordon

Message to MDHHS staff from Director Gordon:

Good afternoon MDHHS employees:

Thank you so much for your warm welcome last week. It was a pleasure to meet a few of you, and I'm looking forward to meeting even more of you going forward. I'm excited to learn about how we can work together to improve Michiganders' lives.

Please know that my immediate focus will be on speaking with you about what is working and what is not. Where changes need to be made, I will be deliberate and transparent.

As I begin this new opportunity, I am guided by five principles: act on scientific data; put the interest of the public ahead of my personal interests or the interests of the agency; treat residents of all racial or economic backgrounds with dignity, honesty and respect; spend taxpayer dollars like they were my own; and create opportunities for all of you to do your best work.

If you're interested, please take a moment to watch this video for more about me. (The CMH Association has placed this YouTube video on the Association's website to expedite access to it: <https://cmham.org/message-from-mdhhs-director-robert-gordon/>)

Thank you again,

Robert

New Director Talks About Opportunities in Combined MDHHS

The following are excerpts from a recent MIRS news story on the early days of MDHHS Director Robert Gordon. Incoming Director Robert **GORDON** said today he believes there are "huge opportunities to improve services through the combination" of agencies that turned the Department of Health and Human Services (DHHS) into a huge 14,000-employee department.

"There are enormous connections between health and human services. People don't live their lives in bureaucrat boxes," he said in a telephone press conference today. ". . . I also know it is clear there is much more work to be done to leverage the combination and to get the full benefit."

Gordon was appointed Thursday as the new DHHS director by Gov. Gretchen **WHITMER**. He most recently was senior vice president of finance and global strategy for The College Board. Previously, he served under President Barack **OBAMA** as acting deputy director at the U.S. Office of Management and Budget, and was the acting assistant secretary for Planning, Evaluation, and Policy Development at the U.S. Department of Education (

Whitmer said in December she was considering breaking up DHHS and had been concerned with the combination when it was made under former Gov. Rick **SNYDER**. She has since said it's not an immediate priority.

"I view it as an open question. I should say, I don't think there is a final decision on this question. But my going in is to look hard at it and see if and how we can make a single agency really effective for people," Gordon said. ". . . Often, it's the same people on one side of the house that need services on the other side of the house."

Gordon is replacing former director Nick **LYON**. Lyon and former chief medical executive Dr. Eden **WELLS** are still facing charges stemming from the Flint water crisis.

Asked how he intends to address morale in the department in the wake of those charges, Gordon said he would be "setting forth principles that we can all stand behind and that reflect our aspirations."

Those principles include acting on data and evidence, putting the interests of the public ahead of the interests of the agency, treating all residents of Michigan with respect, "and lastly, we have to shepherd taxpayer dollars carefully. We have to treat taxpayer money like it's our own," he said.

Gordon said that while he knows improvements at the department are needed, he plans to listen to the staff and honor the work they do.

"I have personal experience working with case workers and social workers side by side, case by case trying to figure out how to do the right thing for a kid in terrible distress. I know how hard those jobs are. I know you don't do those jobs for the money because the money is not great," he said.

State Funding Recognition of K-12 Mental Health Issues, Advocates Say

Below are excerpts from a recent media story about the inclusion of funding, in the FY 2019 Supplemental Budget Bill recently signed by Governor Snyder. These funds target many of the school-based mental health services in which the Association's members are involved and was fostered by a coalition, of which this Association was a part, led by the School Community Health Alliance of Michigan (SCHA-MI).

Gov. Rick Snyder recently signed legislation designating \$31.3 million for School Mental Health and Support Services within the K-12 budget.

Advocates for children say years of lobbying and advocacy finally paid off in December.

CMHA WEEKLY UPDATE

School leaders say every year they try to meet the growing needs of students with mental, emotional or behavioral disorders with limited resources.

"We are abundantly grateful for the allocation because it acknowledges student mental health issues are a problem in our schools," said Ottawa Area ISD Superintendent Peter Haines.

"For a long time, there has been a universal outcry that this is a common problem. This funding is a good start and will make a difference."

Snyder signs \$1.3B in funding for roads, toxic clean-ups, schools
\$114 million will go toward roads

There is also excitement around the funding opening the door for the possible expansion of the Medicaid-enrolled students for whom a school can bill Medicaid for health services delivered in the school.

The full article can be found at:

<https://www.mlive.com/news/grand-rapids/2019/01/state-funding-recognition-of-k-12-mental-health-issues-educators-and-advocates-say.html>

MDHHS Seeking Public Comment on MI Health Link ("Duals Project") Waiver Amendment

Dear Interested Party:

RE: Section 1915(c) MI Health Link Waiver Amendment

The Michigan Department of Health and Human Services (MDHHS) is submitting a waiver amendment to the Centers for Medicare & Medicaid Services (CMS) for the Section 1915(c) MI Health Link waiver. The purpose of this amendment is to:

1. Revise the data sources, frequency of data collection and sampling approach associated with the waiver's performance measures.
2. Add Door 8 for the nursing facility level of care determination which will be used to determine functional eligibility.
3. Reflect the change in name from Department of Community Health to Michigan Department of Health and Human Services and the change in name from Bureau of Medicaid Policy and Health System Innovation to Bureau of Medicaid Long-Term Care Services and Supports.
4. Remove Community Transition Services from the waiver. These services will be provided as State Plan services.
5. Change references of Level of Care (LOC) code to Program Enrollment Type (PET) code.
6. Modify language pertaining to the appeals process to comply with the federal Managed Care Rule. Enrollees will need to exhaust the internal appeals process prior to requesting a State Fair Hearing through the Michigan Administrative Hearing System (MAHS) or the Michigan Department of Insurance and Financial Services (DIFS). Requests for appellate review must be filed within ten (10) calendar days after the notice of adverse resolution or decision, in order to continue to receive those services during the pendency of the appeal. This is true for the internal appeal and any subsequent review by MAHS or DIFS.
7. Update excluded populations to include persons residing in State Veterans' Administration (VA) Homes as of June 1, 2018. (bulletin MSA 18-08)
8. Add methods for Level of Care Quality Assurance Reviews based on State-wide methodology.

The anticipated effective date of this waiver amendment is April 1, 2019.

CMHA WEEKLY UPDATE

There is no public hearing scheduled for this waiver amendment. Input regarding this waiver amendment is highly encouraged. The Section 1915(c) MI Health Link waiver amendment can be found online at https://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_64077---,00.html and comments regarding this Notice of Intent may be submitted to MSAPolicy@michigan.gov, or by mail to:

Attention: Medicaid Policy
Michigan Department of Health and Human Services
P.O. Box 30479
Lansing, Michigan 48909-7979

All comments on this topic should include a "Section 1915(c) MI Health Link waiver Amendment Comment" reference somewhere in the written submission or in the subject line if email is used. Comments and related responses will be available at the above website following the end of the comment period. Comments will be accepted until February 11, 2019.

MDHHS appreciates the continued opportunity to work collaboratively with you to care for the residents of our state. We thank you in advance for your participation.

Sincerely,
Kathy Stiffler, Acting Director
Medical Services Administration

The Job Most Americans Don't Know About, but is Crucial to The Success of People with Disabilities

Below are excerpts from a recent story, in Forbes magazine, about the value of direct care and the need for their work to be supported fiscally and organizationally.

A whopping 88% of direct support professionals leave their job because of inadequate wages.

The Case for Inclusion, a report recently published by two nonprofit institutions, ANCOR Foundation and United Cerebral Palsy (UCP), gives a meticulously researched overview of what life is like for people with intellectual and developmental disabilities (I/DD). The report assesses states on how well they include, support and empower individuals with I/DD. The conclusion? Despite progress, overall support for this community has stalled, according to the report—and honestly, even the word stalled sounds a little too kind.

There are years-long waiting lists for residential services and a low number of individuals with I/DD working at a market-driven wage. Families are picking up the duties that a professional would if they were covered by Medicaid. The good news: Decades after states embarked on efforts to close large institutions that essentially warehoused the I/DD population, 34% of people with intellectual disabilities are employed. Every dollar spent on supporting individuals in finding work, friends, and self-esteem promises a huge return on investment.

For people of all abilities in this community, success is often determined by one highly influential, skilled person who helps them navigate both the work world and home life. They are called DSPs. Not familiar with the acronym? You're not alone. Read on to learn more.

One word of warning—there are a lot of acronyms in this post. Plow through anyway. This is important information for business leaders and their communities.

What Exactly Is A Direct Support Professional?

The Case for Inclusion devotes more than a few pages to what is known as the direct care workforce or DSPs—Direct Support Professionals. They are often called the linchpin or the backbone of the care/support system. DSPs specialize in supporting individuals with I/DD so that they can live in the community with their family and peers instead of in state institutions, per the report. DSPs are also the relationship builders who connect individuals to jobs, volunteer opportunities, friends, religious groups and civic life.

For the general public, who wouldn't know an HSA or PCA from a DSP if their life depended on it (and someday it might), this is your wake-up call.

Essentially, every aspect of an I/DD individual's life could very well change for the better if DSP wages improved. Still, many legislators lack an understanding of the crucial role of DSPs in the caregiving system, which can result in limited funding for them, which comes primarily from Medicaid.

The full article can be found at:

<https://www.forbes.com/sites/denisebrodey/2019/01/10/the-job-most-americans-dont-know-about-but-is-crucial-to-the-success-of-people-with-disabilities/#334aac336105>

CDC Provides Cultural Competence Resources



Centers for Disease Control and Prevention
Your Online Source for Credible Health Information

Below is an excerpt from a recent Centers for Disease Control and Prevention (CDC) announcement on the CDC's resources on cultural competence.

Tools for Cross-Cultural Communication and Language Access Can Help Organizations Address Health Literacy and Improve Communication Effectiveness

Effective communication recognizes and bridges cultural differences.

The ideas people have about health, the languages they use, the health literacy skills they have, and the contexts in which they communicate about health reflect their cultures. Organizations can increase communication effectiveness when they recognize and bridge cultural differences that may contribute to miscommunication.

Culture Allows and Can Get in the Way of Communication

Culture can be defined by group membership, such as racial, ethnic, linguistic or geographical groups, or as a collection of beliefs, values, customs, ways of thinking, communicating, and behaving specific to a group.

As part of a cultural group, people learn communication rules, such as who communicates with whom, when and where something may be communicated, and what to communicate about. Members of a cultural group also learn one or more languages that facilitate communication within the group. Sometimes, though, language can get in the way of successful communication. When people and organizations try to use their in-group languages, or jargon, in other contexts and with people outside the group, communication often fails and creates misunderstanding and barriers to making meaning in a situation.

Doctors, nurses, dentists, epidemiologists, and other public health and healthcare workers belong to professional cultures with their own languages that often aren't the everyday language of most people. When these professionals want to share information, their jargon may have an even greater effect when limited literacy and cultural differences are part of the communication exchange with patients, caregivers, and other healthcare workers. Review the Find Training(<https://www.cdc.gov/healthliteracy/gettraining.html>) section of this website for courses in culture and communication.

The full resource list is available at:

<https://www.cdc.gov/healthliteracy/culture.html>

Mental Health Self-Directed Care Financing: Efficacy in Improving Outcomes and Controlling Costs for Adults with Serious Mental Illness

Below is an excerpt from a recent article in Psychiatric Times On-Line regarding the value of self-directed care.

Over the past two decades, the federal Centers for Medicare and Medicaid Services (CMS) has promoted use of a consumer-directed, "money follows the person," health care financing approach for use by individuals with a broad range of disabilities. Called self-directed care, this model gives individuals direct control over public funds to purchase health care services, supports, and material goods necessary for them to reside in the community rather than in inpatient or nursing facilities.

Although use of this model to promote the recovery of people with serious mental illness is less common, multiple states are now developing mental health self-directed care initiatives, and interest in this approach is growing. Recently, consumer, advocacy, and service provider communities have called for greater use of self-directed care in mental health, as have federal agencies, including CMS (1), the Substance Abuse and Mental Health Services Administration (2), and the U.S. Department of Health and Human Services' Office of Disability, Aging and Long-Term Care Policy (3). The purpose of this study was to conduct a randomized controlled trial of a mental health self-directed care program, assessing its effects on participant outcomes, service satisfaction, and service costs.

Objective

Self-directed care allows individuals with disabilities and elderly persons to control public funds to purchase goods and services that help them remain outside institutional settings. This study examined effects on outcomes, service costs, and user satisfaction among adults with serious mental illness.

Methods

Public mental health system clients were randomly assigned to self-directed care (N=114) versus services as usual (N=102) and assessed at baseline and 12 and 24 months. The primary outcome was self-perceived recovery. Secondary outcomes included psychosocial status, psychiatric symptom severity, and behavioral rehabilitation indicators.

Results

Compared with the control group, self-directed care participants had significantly greater improvement over time in recovery, self-esteem, coping mastery, autonomy support, somatic symptoms, employment, and education. No between group differences were found in total per-person service costs in years 1 and 2 or both years combined.

However, self-directed care participants were more likely than control group participants to have zero costs for six of 12 individual services and to have lower costs for four.

CMHA WEEKLY UPDATE

The most frequent nontraditional purchases were for transportation (21%), communication (17%), medical care (15%), residential (14%), and health and wellness needs (11%).

Client satisfaction with mental health services was significantly higher among intervention participants, compared with control participants, at both follow-ups.

Conclusions

The budget-neutral self-directed care model achieved superior client outcomes and greater satisfaction with mental health care, compared with services as usual.

The full article can be found at:

<https://ps.psychiatryonline.org/doi/10.1176/appi.ps.201800337>

State Legislative Update:

House Creates New Committee Structure to Provide More Debate

The new House Ways and Means Committee will be reviewing and vetting legislation after it leaves its original committee in the coming term to ensure almost every bill receives a second look and further debate before moving to the House floor. The House Judiciary Committee will review and vet legislation from any House committee that creates or changes criminal penalties. The House Appropriations Committee will review and debate any bills that include an appropriation.

Under the new structure, Appropriations, Government Operations, Judiciary, and Ways and Means will be the four committees that can send bills directly to the House floor.

"This new process is going to encourage more debate and give our bills a much stronger look before they hit the House floor, making our state government more responsible and more effective," said Speaker of the House Lee Chatfield. "Criminal justice reform and state budgeting are two critically important areas in particular, and both areas are going to continue to see important reforms. This new process will allow us to make more of a coordinated effort on those specific topics, carefully review how every bill impacts the larger picture and eventually pass better legislation for the people we represent."

House Committee Assignments

Wednesday evening, Speaker of the House Lee Chatfield announced House Committee assignments for the 2019 session year, which can be viewed below.

- Agriculture -- Alexander (Chair), Meerman (Vice Chair), LaFave, Eisen, Mueller, Wendzel, Elder (Minority Vice Chair), Coleman, Garza, C. Johnson, Witwer.

- Appropriations -- Hernandez (C), Miller (VC), Inman, Albert, Allor, Brann, VanSingel, Whiteford, Yaroch, Bollin, Glenn, Green, Huizenga, Lightner, Maddock, Slagh, VanWoerkom, Hoadley (MVC), Love, Pagan, Hammoud, Peterson, Sabo, Anthony, Brixie, Cherry, Hood, Kennedy, Tate.

- Commerce & Tourism -- Marino (C), Wendzel (VC) Reilly, Meerman, Schroeder, Wakeman, Cambensy (MVC), Camilleri, Hope, Manoogian, Robinson.

- Communications & Technology -- Hoitenga (C), S. Johnson (VC), Wozniak, Coleman (MVC), Chirkun.

- Education -- Hornberger (C), Paquette (VC), Crawford, Vaupel, Reilly, Hall, Markkanen, O'Malley, Wakeman,

CMHA WEEKLY UPDATE

Camilleri (MVC), Sowerby, B. Carter, T. Carter, Koleszar, Stone.

- Elections & Ethics -- Calley (C), Sheppard (VC), Hornberger, Marino, Paquette, Guerra (MVC), Hope.

- Energy -- Bellino (C), Wendzel (VC) Alexander, Frederick, Lower, Filler, Markkanen, Mueller, O'Malley, Schroeder, Lasinski (MVC), Sneller, T. Carter, Haadsma, Kupa, Manoogian, Shannon.

- Families, Children & Seniors -- Crawford (C), Rendon (VC), Hoitenga, Meerman, Wozniak, Garrett (MVC), Liberati, B. Carter, C. Johnson

- Financial Services -- Farrington (C), Schroeder (VC), Sheppard, Bellino, Berman, Wakeman, Gay-Dagnogo (MVC), Clemente, Stone, Whitsett.

- Government Operations -- Sheppard (C), Cole (VC), Lilly, Greig (VC), Rabhi,

- Health Policy -- Vaupel (C), Frederick (VC), Alexander, Calley, Hornberger, Lower, Whiteford, Afendoulis, Filler, Mueller, Wozniak, Liberati (MVC), Garrett, Clemente, Ellison, Koleszar, Pohutsky, Stone, Witwer.

- Insurance -- Rendon (C), Markkanen (VC), Webber, Vaupel, Bellino, Frederick, Hoitenga, LaFave, Berman, Paquette, Wittenberg (MVC), Gay-Dagnogo, Lasinski, Sneller, Bolden, B. Carter, Coleman.

- Judiciary -- Filler (C), LaFave (VC), Farrington, Howell, S. Johnson, Rendon, Berman, Wozniak, LaGrand (MVC), Guerra, Elder, Yancey, Bolden.

- Local Government & Local Municipal Finance -- Lower (C), Marino (VC), Crawford, Calley, Howell, Eisen, Meerman, Paquette, Ellison (MVC), Sowerby, Garza, Hope, Kupa.

- Military, Veterans & Homeland Security -- LaFave (C), Mueller (VC), Marino, Afendoulis, Markkanen, Jones (MVC), Chirkun, T. Carter, Manoogian.

- Natural Resources & Outdoor Recreation -- Howell (C), Wakeman (VC), Calley, Reilly, Rendon, Eisen, Sowerby (MVC), Cambensy, Pohutsky.

- Oversight -- Hall (C), Reilly (VC), Webber, S. Johnson, LaFave, Schroeder, C. Johnson (MVC), Camilleri, LaGrand.

- Regulatory Reform -- Webber (C), Berman (VC), Crawford, Farrington, Frederick, Hoitenga, Filler, Hall, Wendzel, Chirkun (MVC), Liberati, Cambensy, Jones, Garza, Robinson.

- Selected Committee On Reducing Car Insurance Rates -- Wentworth (C), Rendon (VC), Frederick, LaFave, Afendoulis, Lasinski (MVC), Sabo, Bolden, Whitsett.

- Tax Policy -- Afendoulis (C), Lower (VC), Vaupel, Webber, Farrington, S. Johnson, Hall, O'Malley, Schroeder, Yancy (MVC), Wittenberg, Ellison, Lasinski, Robinson, Whitsett.

- Transportation & Infrastructure -- O'Malley (C), Eisen (VC), Cole, Sheppard, Alexander, Bellino, Howell, Afendoulis, Sneller (MVC), Clemente, Yancey, Haadsma, Shannon.

- Ways & Means -- Iden (C), Lilly (VC), Leutheuser, Griffin, Hauck, Kahle, Wentworth, Warren (MVC), Byrd, Neeley, Hertel.

- Joint Committee On Administrative Rules -- Maddock (C), Wozniak (VC), S. Johnson, Bolden (MVC), Garrett.

- House Fiscal Governing Committee -- Hernandez (C), Chatfield (VC), Cole, Hoadley (MVC), Greig, Rabhi.

CMHA WEEKLY UPDATE

- Legislative Council -- Chatfield (C), Hernandez, Lilly, Wentworth, Cole*, Whiteford*, Clemente, Rabhi, Garrett*.

* = alternate member

Appropriations Subcommittees

- Agriculture & Rural Development -- VanWoerkom (C), Bollin (VC), Albert, Green, Kennedy (MVC), Sabo, Brixie.

- Corrections -- Albert (C), Slagh (VC), VanSingel, Lightner, Maddock, Pagan (MVC), Sabo, Anthony, Kennedy.

- General Government -- Huizenga (C), Lightner (VC), Allor, Brann, Bollin, VanWoerkom, Sabo (MVC), Hoadley, Tate.

- Health & Human Services -- Whiteford (C), Green (MVC), Inman, Allor, Yaroch, Glenn, Huizenga, VanWoerkom, Hammoud (MVC), Hoadley, Love, Brixie, Cherry.

- Higher Education & Community Colleges -- VanSingel (C), Bollin (VC), Huizenga, Green, Slagh, Anthony (MVC), Hoadley.

- Joint Capitol Outlay -- Inman (C), Slagh (VC), Hernandez, Maddock, Whiteford, Love (MVC), Cherry.

- Judiciary -- Brann (C), Lightner (VC), Yaroch, Maddock, Brixie (MVC), Pagan, Hammoud.

- Licensing & Regulatory Affairs/Insurance & Financial Services -- Yaroch (C), Glenn (MVC), VanSingel, Lightner, Peterson (MVC), Hammoud, Anthony.

- Military & Veterans Affairs/State Police -- Inman (C), VanWoerkom (VC), Albert, Brann, Tate (MVC), Peterson, Hood.

- Natural Resources/Environmental Quality -- Allor (C), Glenn (VC), VanSingel, Glenn, Slagh, Cherry (MVC), Hood.

- School Aid/Department of Education -- Miller (C), Hornberger (VC), Inman, Albert, Allor, Huizenga, Green, Pagan (MVC), Hood, Kennedy, Tate.

- Transportation -- Maddock (C), Yaroch (VC), Miller, Brann, Bollin, Peterson (MVC), Love.

Federal Update:

No Major Impacts' from Shutdown on State Gov't At Least Through Feb. 5

The State Budget Office today said the federal shutdown will have "no major impacts" felt by state government on or before Feb. 5, but if the shutdown continues past Jan. 21, the office will reassess what happens next.

Budget Office spokesperson Kurt Weiss said state government can generally "operate seamlessly" for about 45 days after a shutdown begins, and "we are about halfway through that timeframe as of today," he said.

"Unfortunately, federal shutdowns or talks of federal shutdowns have become all too commonplace, which means we here in the State Budget Office don't start to take it seriously until the federal government shuts down for a prolonged period of time," Weiss said. "Now that the shutdown has continued for several weeks, having started on December 22, our office took the action to complete a statewide assessment of impacts to federal dollars."

CMHA WEEKLY UPDATE

After the assessment was completed, it was determined "no major impacts" would be felt on state government programs or operations through Feb. 5, according to the Budget Office today. If the shutdown gets to Jan. 21, the state will reassess what happens beyond Feb. 5.

Weiss said nearly 40 percent – or \$22 billion – of Michigan's total \$57 billion comes through the federal government, and a "prolonged shutdown could have devastating effects for Michigan."

As far as public assistance programs, the feds have already said food stamps will be available through February. The Michigan Department of Health and Human Services (DHHS) today announced it would issue February benefits for food stamp recipients on Jan. 19, as other states are planning on doing.

For child nutrition programs -- including school meals and the Child and Adult Care Food Program -- states already have funding to cover operations for the months of January through March, Weiss said.

And for other feeding programs like Women, Infants, and Children (WIC), the federal government has identified resources to cover projected state expenditures through February.

And while the Temporary Assistance for Needy Families (TANF) program has yet to be reauthorized and has expired with no new funding, Michigan has enough TANF funds to carry forward, along with the first quarter award for Fiscal Year 2019, to last through February 5, 2019.

The Budget Office does have some dates on the calendar where certain state programs could be affected, such as:

- The Housing Choice Voucher program operated by the Michigan State Housing Development Authority (MSHDA) has an anticipated impact beginning Feb. 12.
- Section 8 housing programs operated by MSHDA have anticipated impact beginning March 1.
- Community Development Block Grants operated by the Michigan Economic Development Corp. (MEDC) has an anticipated impact beginning July 1.
- While the Michigan Department of Transportation (MDOT) has enough funding to pay for invoices at this time and no immediate impacts are anticipated, should the shutdown extend into March, cash flow could become a problem.

The Budget Office also found there has been a slowdown in U.S. Department of Justice (DOJ) and U.S. Department of Housing and Urban Development (HUDS) grants, which has been attributed to furloughed federal workers.

While the programs are still operational, there is "uncertainty about how quickly Michigan will receive the federal funds," Weiss said.

In other shutdown news, U.S. Rep. Dan Kildee (D-Flint Twp.) met with Flint air traffic controllers today who have been working without pay for 24 days, according to a press release.

"I am grateful that local workers took time to talk to me and highlight how the ongoing government shutdown is affecting them and their families," Kildee said in a statement. "Their professionalism showing up to work every day without pay stands in stark contrast to the President's inability to do his job and work with Congress. It is wrong for the President and Congress to punish federal workers over disagreements about the federal budget."

Education Opportunities:

CMHAM & Michigan Health Endowment Fund Present New Training Series: Managed Care Contracting from a Position of Strength!

Many behavioral health agencies mistakenly believe that they lack leverage with the MCOs to negotiate fair provisions in their participation agreements, overlooking legal protections available under state and federal law. In addition, many behavioral health agencies fail to position themselves to participate under value-based payment arrangements with MCOs, foregoing potential revenue streams. This full-day training will assist behavioral health agencies negotiate favorable participation agreements with MCOs. The training will address the following topics:

- Preparing for contract negotiations by identifying and assessing potential leverage points, such as regulatory leverage, market power, and competing on value;
- Evaluating managing care contracts using a team-based approach, considering an MCO's operational and financial stability;
- Negotiating strategies and tips to make the most persuasive case; and,
- Understanding common contract terms and what language is most advantageous.

FEATURING: ADAM J. FALCONE, JD, MPH, BA, PARTNER, FELDESMAN TUCKER LEIFER FIDELL, LLP

Based in Pittsburgh, PA, Mr. Falcone is a partner in FTLF's national health law practice group, where he counsels a diverse spectrum of community-based organizations that render primary and behavioral healthcare services. He counsels clients on a wide range of health law issues, with a focus on fraud and abuse, reimbursement and payment, and antitrust and competition matters.

WHO SHOULD ATTEND:

- Nonprofit mental health providers and those mental health providers serving within the public mental health network interested in negotiating contracts with managed care organizations
- You may send more than 2 attendees from your agency

REGISTRATION: \$100 per person. The fee includes training materials, continental breakfast and lunch.

ADDITIONAL INFO: <https://macmh.org/education>, cward@cmham.org; or 517-374-6848.

TO REGISTER, CLICK ON YOUR DATE & LOCATION:

[January 24, 2019 - West Bay Beach Holiday Inn](#) (13 spots left)

Earlybird Deadline TODAY! CMHAM Annual Winter Conference

The CMHAM Annual Winter Conference, "Together...We All Win!"

February 4, 2019: Pre-Conference Institutes

February 5 & 6, 2019: Full Conference

Radisson Plaza Hotel, Kalamazoo

[CLICK HERE TO REGISTER FOR THE WINTER CONFERENCE](#)

PRE-CONFERENCE INSTITUTES:

Human Trafficking

February 4, 2019 from 1:00pm – 4:00pm (registration at 12:30pm)

Member Fee: \$37

Non-Member Fee: \$44

CMHA WEEKLY UPDATE

[CLICK HERE TO REGISTER FOR HUMAN TRAFFICKING](#)

This class offers a clear and comprehensive view of human trafficking in the United States. Develop a broader understanding of human trafficking as a whole; who are traffickers, victims and how are they trapped in this victimization. Understand how the culture is nurturing this crime and feeding the demand for modern day slavery. Learn how to recognize signs and symptoms of a victim, a perpetrator and how to respond. Understand a basic over view for the physical, mental and emotional outcome of a victim. Additionally, realize the complexity of resolving the human trafficking cycle including the challenges of a victim becoming a survivor by examining their mental health, the recovery process, existing recovery challenges and outcomes.

Presenter: Jennifer Mason

Jennifer Mason is the Grant Administrator for The Salvation Army Anti-Human Trafficking Initiative. The Initiative offers intensive case management, education, awareness and training, and we strive to bring collaboration and overarching support to the Tri-County area anti-human trafficking realm. Jennifer is also the Founder of The Alabaster Gift and for the past 5 years was the Executive Director. Established in 2013, The Alabaster Gift is a nonprofit 501(c)3 anti-human trafficking organization providing services to victims of sexual and labor trafficking including exploitation through a Drop In Center model. She is a pastor, currently transferring her license to the Assemblies of God Church, working toward Ordination. She served previously for 9 years as a staff pastor in the Wesleyan Church within the traditional ministry realm. Jennifer is certified through FFAST (Faith Alliance Against Slavery and Trafficking) as a Train the Trainer; completed Michigan Human Trafficking Task Force as Train the Trainer; certified by The Human Trafficking Training Institute; completed Ascent 121's Build Beyond Trauma Training and What About Boys Trauma Training; completed Trauma-Informed Care by No Boundaries International/Lori Basey; certified as a Mental Health First Aid Responder; accomplished CCDA Immersion Training (Christian Community Development Association) and affiliated with the WJN (Wesleyan Justice Network).

Wearing the HIPAA Hat

February 4, 2019 from 1:00pm – 3:00pm (registration at 12:30pm)

There is no fee to attend this Pre-Conference Institution, but registration is REQUIRED.

[CLICK HERE TO REGISTER FOR WEARING THE HIPAA HAT](#)

Have you had the HIPAA Compliance Officer role added to your duties or is your organization considering you for this role? If so, this training is for you! In this training, we'll discuss what needs to be done throughout the year and annually to maintain compliance. The training will cover ways to efficiently manage your time needed for this role by scheduling tasks and delegating duties to other departments. We'll also dive deeper into how to identify what data needs to be protected, who needs to sign a BAA, end user HIPAA training, and the breach notification process. By the end of this training, you'll be more competent with your HIPAA Compliance Officer role. Skill level: Beginner – Intermediate

Presenter: Sean C. Rhudy, Abilita

CMHAM is pleased to offer this training partnership with Abilita to help free staff's time and reduce operating expenses for CMH, PIHP and Providers. Abilita is the leader in telecommunications consulting and endorsed by CMHAM since 2011 to help members reduce risks, costs and prevent your staff from wasting their time. Abilita evaluates HIPAA technology risks and can ensure you are in compliance without wasting your staffs' time. In addition, they reduce your telecom costs by 29% with no upfront costs or risk.

CMHAM Annual Spring Conference

Save the Date: The CMHAM Annual Spring Conference will be held on:

June 10, 2019: Pre-Conference Institutes

June 11 & 12, 2019: Full Conference

Suburban Collection Showplace

Novi, Michigan

CMHA WEEKLY UPDATE

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

Administration for Community Living (ACL) Announces HCBS Resource

Below is a recent announcement from the federal Administration for Community Living (ACL) regarding a set of newly developed HCBS resources.

As you may know, the Administration for Community Living (ACL) is putting on a series of webinars on topics related to the HCBS Settings Rule. The second in the three-part series took place on November 29th. If you were unable to participate, we want to make sure you have access to the slide deck used for the webinar. You will also see links to other resources, and a reminder regarding the third and final webinar, in the ACL message below.

Dan Berland; Director of Federal Policy; NASDDDS

Recap of Webinar 2 of 3: "Promising State Strategies for Working with Providers to Meet the HCBS Settings Criteria & Promote Optimal Community Integration" (November 29, 2018)

For those that participated in the 11/29/2018 webinar, please complete the following 3-minute survey: <https://www.surveymonkey.com/r/P25Z8TR>. We value your feedback, and it helps ACL strengthen its technical assistance offerings in the future.

We have attached an accessible copy of the power-point presentation, and a recording of the webinar may be downloaded over the next two weeks through the following instructions:

Click on the link below, or if your email program does not allow linking, copy and paste the link into the address field of your Internet Browser.

<https://resnet-garm.webex.com/resnet-garm/lsr.php?RCID=b43e4856e1175bf97995a2e37d4588c8>

Once you have been redirected to the Download page, select the "Download" button. When given the option to "Open" or "Save" the file; select the arrow next to the "Save" button then select "Save As".

Once the "Save As" window appears, choose the location where you would like to save the FTP file and select the "Save" button.

Please find the link to a copy of Minnesota's "[Provider's Guide to Putting the HCBS Rule Into Practice](#)".

A written transcript is also available upon request. These materials, along with additional written technical resources, will also be shared on ACL's website by January 2019.

Dialectical Behavior Therapy (DBT) Trainings for 2018/2019

2-Day Introduction to DBT Trainings

This 2-Day introduction to DBT training is intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers in the state of Michigan who are interested in learning the theoretical underpinnings of the treatment. It will explain what the key ingredients are in DBT that make up its empirical base. A basic overview of the original DBT skills will be covered along with how to structure and format skills training groups. This training is targeted toward those who are new to DBT with limited experience and who are looking to fulfill the pre-requisite to attend more comprehensive DBT training in the future.

Dates/Locations:

CMHA WEEKLY UPDATE

February 21-22, 2019 | Detroit Marriott Livonia – *only 9 spots left!*

March 18-19, 2019 | Great Wolf Lodge, Traverse City

May 13-14, 2019 | Kellogg Center, East Lansing

Who Should Attend?

This event is sponsored by the adult mental health block grant and is only intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers in the state of Michigan. This seminar contains content appropriate for medical directors, clinical directors, case workers, supports coordinators, and other practitioners at all beginning level of practice.

Training Fee:

\$125 per person. The fee includes training materials, continental breakfast and lunch for both days.

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

5-Day Comprehensive DBT Trainings

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

Dates/Locations:

May 20-24, 2019 | Detroit Marriott Livonia

June 3-7, 2019 | Best Western, Okemos

August 12-16, 2019 | Great Wolf Lodge, Traverse City

Training Fee:

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

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

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

Course Description:

Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. This co-prevalence has been studied since the 1980s, yet despite this substantive increased risk, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated services offer superior outcomes to parallel or sequential treatments and call on providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Recovery-oriented care requires

CMHA WEEKLY UPDATE

changes at a systems and individual practitioner level in areas including assessment, treatment planning, and delivery. Integrated co-occurring providers will learn about the research on integrated care including evidence-based practices (EBP), and ways to develop stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders.

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

Dates/Locations:

April 26, 2019 | Hotel Indigo, Traverse City

June 19, 2019 | Okemos Conference Center

Training Fee:

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

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

Motivational Interviewing College Trainings for 2018/2019

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

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

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

Dates/Locations:

February – DoubleTree Bay City

Basic: Monday & Tuesday, Feb. 25-26, 2019

Advanced: Monday & Tuesday, Feb. 25-26, 2019

Supervisory: Tuesday, Feb. 26, 2019

Teaching MI: Wednesday & Thursday, Feb. 27-28, 2019

March – Weber's Ann Arbor

Basic: Monday & Tuesday, March 11-12, 2019

Advanced: Monday & Tuesday, March 11-12, 2019

Supervisory: Tuesday, March 12, 2019

Teaching MI: Wednesday & Thursday, March 13-14, 2019

April – Shoreline Inn Muskegon

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

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

Supervisory: Tuesday, April 9, 2019

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

June – Holiday Inn Marquette

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

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

Supervisory: Monday, June 10, 2019

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

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

CMHA WEEKLY UPDATE

\$125 per person for all 2-day trainings (Basic, Advanced)
\$69 per person for the 1-day Supervisory training.

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

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

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

This training fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for ethics.

This training fulfills the MCBAP approved treatment ethics code education – specific.

Trainings offered on the following dates.

- *Training Full:* January 23 – Lansing [Click Here to Register for January 23](#)
- February 20 – Lansing [Click Here to Register for February 20](#)
- March 13 – Lansing [Click Here to Register for March 13](#)
- April 24 – Troy [Click Here to Register for April 24](#)

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

\$115 CMHAM Members

\$138 Non-Members

CHCS Announces Complex Care Webinar

Below is a recent announcement from the Center for Health Care Strategies of an upcoming webinar on the recently issued blue print for complex care.

CHCS: Introducing the Blueprint for Complex Care: Opportunities to Advance the Field

Funder: The Commonwealth Fund, the Robert Wood Johnson Foundation, The SCAN Foundation

Date and Time: January 22, 2019, 2:00 – 3:00 PM ET



Health care innovators across the country are pioneering new approaches to provide better care at lower cost for people with complex health and social needs. Advancing the field of complex care and dramatically improving care delivery for the nation's most vulnerable patients, however, cannot be achieved by one organization alone. The recently released Blueprint for Complex Care provides a strategic plan to unite the

CMHA WEEKLY UPDATE

broad set of individuals and organizations experimenting with innovative care models and outlines opportunities to further advance the field.

During this webinar, Blueprint authors from the National Center for Complex Health and Social Needs, the Center for Health Care Strategies, and the Institute for Healthcare Improvement will outline the goals of the Blueprint, discuss how it was developed, describe recommendations for building the complex care field, and share opportunities to get involved. Two experts in the field will provide ground-level perspectives on the Blueprint's recommendations.

Providers, health system and health plan leaders, community-based organizations representatives, policymakers, state officials, and other stakeholders are invited to join this 60-minute event. This webinar is made possible by The Commonwealth Fund, the Robert Wood Johnson Foundation, and The SCAN Foundation.

Miscellaneous News and Information:

Job Opportunity: Executive Director of Michigan Certification Board for Addiction Professionals

The Executive Director has responsibility and authority for the day-to-day management of the Michigan Certification Board for Addiction Professionals (MCBAP) business except those areas specifically reserved to the MCBAP Board of Directors. The Executive Director is responsible for maintaining communication with the Board of Directors to keep the body fully informed of activities, issues and organizational goals. The Executive Director is responsible for Administering the credentialing program, long-range planning, financial, human resource management, operations, public relations and marketing. Salary range: \$57,000 to \$73,000, commensurate with experience. Email resume and cover letter to info@mcbap.com by 1-31-19.

CMH Association's Officers and Staff Contact Information:

CMHAM Officers Contact Information:

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

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

CMHAM Staff Contact Information:

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

Alan Bolter, Associate Director, abolter@cmham.org

CMHA WEEKLY UPDATE

Christina Ward, Director of Education and Training, cward@cmham.org

Monique Francis, Executive Secretary/Committee Clerk, mfrancis@cmham.org

Jodi Johnson, Training and Meeting Planner, jjohnson@cmham.org

Nakia Payton, Data-Entry Clerk/Receptionist, npayton@cmham.org

Dana Ferguson, Accounting Clerk, dferguson@cmham.org

Michelle Dee, Accounting Assistant, acctassistant@cmham.org

Chris Lincoln, Training and Meeting Planner, clincoln@cmham.org

Carly Sanford, Training and Meeting Planner, csanford@cmham.org

Annette Pepper, Training and Meeting Planner, apecpper@cmham.org

Bethany Rademacher, Training and Meeting Planner, brademacher@cmham.org

Anne Wilson, Training and Meeting Planner, awilson@cmham.org

Robert Sheehan, CEO, rsheehan@cmham.org