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CMH Association and Member Activities:

CMHAM Committee Schedules, Membership, Minutes, and Information

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

News from Our Corporate Partners:

HIPAA and Remote Access

Security doesn't have to mean reduced functionality. But it does mean you have to consider a different approach to common tasks. The Remote Desktop Protocol (RDP) is commonly used for remote access and is very quick and easy to setup. Earlier this year, the McAfee Advanced Threat Research team discovered shops on the dark web selling RDP access to systems for as little as \$3 and up to \$19 each. At the time of discovery, the shop had roughly 17,500 compromised systems for sale with dozens relating to hospitals, nursing homes, and suppliers of medical equipment. It's critical to consult with an IT security expert to ensure your organization is utilizing a secure and compliant remote access system. 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:

Michigan Child Collaborative Care-Connect (MC3-Connect) Advisory Committee

MDHHS recently convened an Advisory Committee made up of key stakeholders and agencies to support the statewide expansion of Michigan Child Collaborative Care (MC3) into the Upper Peninsula of Michigan as well as in the rural and underserved regions of the state. Representatives of the CMH Association are members of this Advisory Committee

Below are excerpts from a description of that Advisory Committee.

The Advisory Committee will be instrumental in identifying resolutions to barriers identified, supporting expansion activities and utilizing relationships in key geographic areas to assist in the dissemination of information of MC3 and to solicit participation in consultation, educational opportunities and follow up activities (evaluation). In addition, the Advisory Committee will work with key stakeholders to ensure sustainability of MC3-Connect.

Recommended programmatic changes in MC3-Connect will be implemented in an iterative fashion with input from the Advisory Committee, providers, Behavioral Health Consultants, and families and consumers, including community and tribal leaders.

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CHAIR:

Dr. Debra Pinals, Medical Director, Behavioral Health and Developmental Disabilities Administration, MDHHS

MEETING FREQUENCY:

The Advisory Committee will meet on a regular basis (4-6 times per year).

MEMBERSHIP:

The Advisory Committee will be comprised of representatives from:

Michigan Department of Health and Human Services

Mental Health Services to Children and Families (M. Ludtke, Linkage and Education Coordinator)

Maternal and Child Health, Title V Director (H. L. Biery)

Medical Services Administration (Medicaid Agency) (K. Stiffler/designee)

Child and Adolescent Health Services (C. Tarry, T. Doll)

Association for Children's Mental Health (J. Shank)

Family/Youth Representatives from underserved areas (B. Husson, others TBD)

Michigan Medicine at University of Michigan, MC3 (S. Marcus, MD, A. Kramer)

Michigan State University, (Z. Alavi, MD, K. English, MD, J. Turner, MD)

TRAILS (E. Koschmann, PhD)

Michigan Chapter of the American Academy of Pediatrics (S. Swindell, MD, FAAP)

Great Lakes Area Tribal Health Board (Tyler LaPlaunt)

Community Mental Health Association of Michigan (R. Sheehan, C. Conklin (Children's Committee Chairperson))

Other Community Representatives (TBD)

DISSEMINATION OF MC3-CONNECT:

Project findings will be disseminated:

- ❖ At regional, national, and international meetings by the MC3-Connect partners.
- ❖ To regional and statewide community mental health organizations at meetings to allow CMH leads to incorporate learnings and iteratively improve the program.
- ❖ By MDHHS through meetings with stakeholders, including all members of the Advisory Council, as well as Medicaid Health Plan leadership.
- ❖ Through peer review and non-peer review publications by the MC3-Connect partners.
- ❖ Through the National Network of Child Psychiatry Access Programs (NNCPAP)

Website.

- ❖ As designated by HRSA and HRSA supported meetings.

Dissemination of findings will occur at Year 3, and as new findings are identified, as well as at the project's conclusion in Year 5. It is anticipated that continuous quality improvement will occur throughout the project.

2019 MPCA Annual Conference: Call for Presentations

The Michigan Primary Care Association (MPCA) invites you to submit a proposal for consideration to present at its 2019 MPCA Annual Conference: Community Health Trends and Innovations. (Note: MPCA is a long-time partner of the CMH Association; this partnership has been further solidified with the recent involvement of both organizations in the RWJF-funded Delta Center Thriving Safety Net initiative.) The presentation invitation is provided below.

This community health conference will be held August 4-6, 2019, at the Amway Grand Plaza Hotel in Grand Rapids, MI. This event attracts more than 350 Michigan health center members.

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This year's conference will feature the following four tracks"

Clinical

Alternate Payment Methodologies

Enabling Services

Board/Governance

The Michigan Primary Care Association welcomes proposals to provide educational content at the premier annual conference of health center CEOs and executive leadership, including finance and operations personnel, physicians, dentists, social workers, community health workers, behavioral health providers, and health center board members.

Proposals must be submitted by February 4, 2019, following the guidelines below. Review committee decisions will be announced by March 15, 2019.

MPCA is the voice of 45 community health centers that provide primary and preventive health care to more than 700,000 patients in rural and urban communities across Michigan. We advocate to influence and advance health policy in Lansing and Washington, D.C., and we offer operational support and training to our health centers to enhance the delivery of integrated care inclusive of primary care, dental, vision and behavioral health.

Conference Theme

Proposals should address an aspect of the theme "Community Health Trends and Innovations," and may feature:

- Collaborations and programs that lead to the delivery of coordinated, comprehensive health care to meet the special needs of the community, including the integration of behavioral health and primary care.
- Successful partnerships and collaborations between providers of diverse disciplines, consumers, policy makers, advocates, and organizations that are essential to increasing access and improving quality of care through health outcomes.
- Specific information and current practices on health center operations and finances, including general finances, billing, human resources and recruitment/retention of staff, including providers, and risk management issues.
- Programs that strengthen the community's safety net, address the social determinants of health, build a culture of health, and promote health equity.
- Programs that address various subpopulations and their unique health needs, including the elderly, children, veterans, the LGBTQ community, and more.
- Best practices and case studies related to any of the conference tracks.

Conference Tracks

Each proposal should address one of the four conference tracks. The following topics are provided as suggestions, but are by no means inclusive.

Clinical

MPCA supports the delivery of quality health care services in Michigan through training and support in integrated care, inclusive of primary care, dental and behavioral health. Presentations may address current trends in treating a wide range of conditions, including hypertension and diabetes; opioid and pain management; programs to treat HIV and Hep C; physical and occupational therapy and telehealth; success stories on the expansion of services, including vision, pharmacy and chiropractic.

Alternate Payment Methodologies

Policymakers are focused on how to best structure provider integrated payment and delivery systems that provide high-quality and most cost-efficient care. Health centers will benefit from sessions related to improving

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quality and value, the role of financial risk in value-based care, the total cost of care, encounter charges, and clinical perspectives on quality of care and value-based care.

Enabling Services

Enabling services are a core feature of the health center experience. Attendees will benefit from presentations on social determinants of health and special populations; community health workers and team-based care; increasing access to care through non-clinical supports such as transportation, food and housing; motivational interviewing; health literacy; language assistance; health education, cultural competency; and environmental health risk factors; medical-legal partnerships.

Board/Governance

The board's role as a fiduciary; selection and development of board members; legal duties of a board member; how a board should function as a team; the board's role in fund raising; what boards must know about the HRSA Operational Site Visit manual.

Selection Criteria

The Annual Conference Planning Committee will use the following criteria to evaluate and select proposals:

1. Idea: Will the proposed session share innovation or inventive ideas or strategies to address a common challenge for Michigan health centers?
2. Relevance/Interest: Is the proposal relevant to the theme of the meeting? Does it pertain specifically to the advancement of community health centers?
3. Adaptability: Does the proposal share an idea or strategy that can be adapted by a wide variety of audience members?
4. Results/Outcomes: Does the proposal demonstrate results or outcomes of the idea being presented? Are they measurable and/or achievable?
5. Session Design: Does the proposal articulate an appropriate strategy for engaging the audience? Will the session be interactive? If so, how? Is it unique or interesting?

Submission Guidelines: Please complete the form below and submit by February 4, 2019

- Presenters will be notified by March 15, 2019, if their proposal has been accepted.
- No more than two presenters will be accepted per submission.

To learn more about the conference, and complete the presentation application by February 4, 2019, click here. https://www.mpca.net/page/2019AC_CallforPres

Please note, we've learned that when completing the application, it is best to use the google chrome web browser.

NADD Webinar 1/29: Launch of the National Center on Advancing Person-Centered Practices and Systems

Join the NCAPPS launch webinar on January 29 at 3:00 - 4:30 pm EST.

Register for the webinar at:

https://events-na12.adobeconnect.com/content/connect/c1/1379577871/en/events/event/private/2174034509/2174363993/event_landing.html?connect-session=na12breez5m9emmctard7i9av&sco-id=2176613982&_charset=utf-8

The Administration for Community Living and the Centers for Medicare & Medicaid Services recently announced the launch of the National Center on Advancing Person-Centered Practices and Systems (NCAPPS).

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Join the webinar to learn more about NCAPPS and to have your questions answered regarding technical assistance opportunities to transform long-term care service and support systems to implement person-centered thinking, planning and practices.

To learn more, contact NCAPPS@acl.hhs.gov

NCAPPS will assist states, tribes, and territories to transform their long-term care service and support systems to implement U.S. Department of Health and Human Services policy on person-centered thinking, planning, and practices. It will support a range of person-centered thinking, planning, and practices, regardless of funding source. Activities will include providing technical assistance to states, tribes, and territories; establishing communities of practice to promote best practices; hosting educational webinars; and creating a national clearinghouse of resources to support person-centered practice.

Visit the new NCAPPS website for more information: <https://ncapps.acl.gov/>.

States, tribes, and territories can apply for technical assistance through an application available online. The deadline for technical assistance applications is February 12, 2019. Completed applications should be submitted to NCAPPS@acl.hhs.gov.

Arkansas PASSE Program Readies for Full Risk Capitation

Below is an excerpt from a recent discussion, by Health Management Associates, of the latest development in the Medicaid population carve-out initiative in Arkansas. These developments are of interest to Michigan's public mental health community, in that such population carve outs have been discussed as potential healthcare transformation efforts in Michigan.

This week, our *In Focus* section reviews Arkansas' Provider-led Arkansas Shared Savings Entity (PASSE) model, scheduled to transition to full risk capitation in March 2019. The PASSE program provides care coordination to improve the health of Medicaid members with behavioral health needs or developmental/intellectual disabilities.

Background

The Arkansas Department of Human Services sought to implement an innovative care model to meet the needs of individuals with behavioral health needs or developmental/intellectual disabilities. A 2015 state analysis found that 74 percent of Medicaid claims were for the aged, blind, and disabled population. Of the approximately 2,900 individuals on the Intellectual and/or Developmental Disabilities (I/DD) waiver waitlist, 2,640 individuals accounted for \$32 million in Medicaid costs. Supportive living accounted for 96 percent of spending for individuals receiving I/DD services. The cost of care was rising without improved services outcomes, there was a lack of access to quality services, and a lack of care coordination for populations with high needs.

The Arkansas Legislative Health Care Task Force reviewed multiple proposals and selected the PASSE model. The enabling legislation, Act 775, passed in March 2017.

PASSE Model

Each PASSE functions similarly to an insurance company. Under the model, local providers enter into partnerships with an administrative organization to manage the services of beneficiaries. Each PASSE must include several types of providers:

- Developmental Disabilities Services specialty provider
- Behavioral Health Services Specialty provider
- Hospital
- Physician

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- Pharmacist

There is not a limit on the number of PASSEs a provider can enter.

The beneficiary is assigned a Care Coordinator, who develops a Person-Centered Service Plan (PCSP) and meets members monthly face-to-face.

Phase I

In Phase I approximately 46,000 members were assessed and assigned to a PASSE. Optum conducted the independent assessments to determine eligibility. From February 1, 2018 through February 28, 2019, PASSEs are providing care coordination to members. This includes medical health services, specialty services, prevention services, health education, and medication management. Services are provided on a fee-for-service basis.

Phase II

Phase II was delayed from January 1, 2019, to March 1, 2019. Arkansas Total Care (Centene), Empower Healthcare Solutions (Beacon Health Options), and Summit Community Care (Anthem) chose to move forward with the program, while ForeverCare Health Plan (Gateway Health Plan) has pulled out. ForeverCare will transition its 7,600 members to a different PASSE.

Beginning March 1, PASSEs will accept full risk for covered Medicaid services for their members. Providers will bill the PASSEs, rather than Medicaid, for services provided. Providers will negotiate rates directly. In exchange, PASSEs will receive a global payment, an actuarially sound payment to cover the entire cost of care, for services. Beneficiary cost sharing will not be permitted.

Eligible Population

The following individuals are covered by PASSEs:

- Individuals receiving services through the DD Waiver (approximately 4,600 individuals)
- Individuals who are on the DD Waiver Waitlist (2,400 individuals)
- Individuals who are in private DD Intermediate Care Facilities (750 individuals)
- Individuals that have a Behavioral Health Diagnosis and have received an Independent Assessment that determines they need services in Tiers 2 or 3 (38,000 individuals) o Individuals in these tiers are eligible for targeted services provided in home/community settings or residential settings in addition to receiving counseling and medication management

Covered Services

PASSEs will cover State Plan Services, Community & Employment Supports, and Arkansas Community Independence Services.

See table below for examples of included services. Please note, this is not an all-inclusive list.

State Plan Services

Primary Care
Pharmacy

Hospital Services

Community &
Employment
Supports

Respite
Supported
Living

Supported
Employment

Arkansas Community
Independence Services

Behavior Assistance
Peer Support

Family Support
Partners

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Nursing Services	Crisis Intervention	Supportive Housing
Physical Therapy	Supplemental Support	Partial Hospitalization
Speech Therapy	Specialized Medical Supplies	Adult Rehabilitation
Occupational Therapy	Consultation	Day Treatment
Inpatient Psychiatric	Environmental Modifications	Planned/Emergency Respite
Outpatient Behavioral Health Counseling	Community Transition Services	Individual Life Skills Development
		Community Reintegration Program

The full article can be found at: <https://humanservices.arkansas.gov/about-dhs/dms/passe>

FROM THE BEHAVIORAL HEALTH WORKFORCE RESEARCH CENTER: Characteristics of the Rural Behavioral Health Workforce: A Survey of Medicaid/ Medicare Reimbursed Providers

The Behavioral Health Workforce Research Center recently issued a report on the nation's rural behavioral health workforce. Excerpt from that report are found below.

Key Findings

Researchers at the Behavioral Health Workforce Research Center (BHWRC) sent an online survey to 454 rural behavioral health provider organizations. Of the 35 organizations (7.7%) of the organizations that finished the survey, most were community mental health organizations (n=21, 60.0%) or non-profit organizations (n=10, 28.6%). The average organization had about 115 employees of which support staff, behavioral health specialists, case managers, and mental health counselors made up the largest employee categories. The three highest priorities for new hires were occupational therapists, pharmacists, and nurse practitioners, while the lowest were administrators, managers, and non-masters addiction counselors. These organizations showed signs of not fully integrating behavioral health and primary care services. Policy recommendations include funding more integrated care sites, empowering physician assistants and nurse practitioners to work to their full education/training, and developing rural America's telehealth infrastructure.

The full report can be found at:

http://www.behavioralhealthworkforce.org/wp-content/uploads/2019/01/Y3-FA2-P1-Rural-Pop_Full-Report.pdf

MHEF offer: Help Shape Michigan's Transportation Future

The Michigan Health Endowment Fund (MHEF), a longtime partner of the CMH Association, recently announced an opportunity for organizations, such as the members of the CMH Association to "Help Shape Michigan's Transportation Future"

The announcement of this opportunity is provided below

Help Shape Michigan's Transportation Future: Michigan Mobility 2045 seeks resident input

A healthy transportation system is key to the health of a community and its residents. The Michigan Department of Transportation is developing Michigan Mobility 2045, a new long-range transportation

plan that will impact our communities for decades to come. You can help by taking MDOT's survey and submitting online comments. We also encourage you to share these opportunities with your networks—the more input, the better!

[Take the Survey](#)

Journal of Rural Mental Health: Call for Papers on “Current Rural Mental Health Challenges”

Below is a recent call for papers from the Journal of Rural Mental Health, providing an opportunity for Michigan rural mental health providers and leaders to move the field forward.

The *Journal of Rural Mental Health*[®] is the official journal of the National Association for Rural Mental Health and is published by the Journals Program of the American Psychological Association. The *Journal of Rural Mental Health* publishes peer-reviewed articles on rural mental health research, practice, and policy within the United States and internationally.

The journal is announcing a call for papers that focuses on the following urgent topics:

- Rural mental health and opioid abuse prevention and treatment
- Rural mental health and suicide / gun violence
- Innovative technologies that enable rural residents to access mental health treatments
- The mental health needs of rural American Indians, Native Alaskans, and Native Hawaiians and other Pacific Islanders
- The mental health needs of undocumented immigrants in rural areas
- The mental health needs of gender minority populations living in rural areas, including those who identify as transgender, nonbinary, gender non-conforming, gender creative, and/or intersex.

Submissions may use several formats, including brief and full-length reports of original research, theoretical or review articles, program descriptions, and letters to the editor. Submissions will be accepted on a rolling basis and reviewed by experts in the field. Rapid peer review and prompt editorial decisions will ensure that quality manuscripts are published in a timely manner and disseminated widely to inform additional research and policy making on these crucial issues.

Through print and electronic access, articles published in *Journal of Rural Mental Health* are available to a global audience of over 3,000 institutions and 80 million potential readers. [Read more about the Journal of Rural Mental Health \(https://www.apa.org/pubs/journals/rmh/index.aspx\)](https://www.apa.org/pubs/journals/rmh/index.aspx) or submit a manuscript now through the [Manuscript Submission Portal \(https://www.editorialmanager.com/rmh/default.aspx\)](https://www.editorialmanager.com/rmh/default.aspx).

If submitting a manuscript in response to this call for papers, please indicate so in your submission cover letter.

Questions can be sent to the Incoming Editor, Timothy Heckman, Ph.D., heckman@uga.edu

CHCS Provides Trauma-Informed Care Resource

The Center for Health Care Strategies recently announced a set of resources focused on trauma-informed care. Those resources are described below.

CHCS UPDATE

CHCS Center for
Health Care Strategies, Inc.

Advancing innovations in health care delivery for low-income Americans

New Video Explores “What is Trauma-Informed Care?”

How do our experiences as children shape our health as adults? What does it mean to be trauma-informed, and what does trauma-informed care look like in a health care setting?

In this new animated video, meet “Dr. Cruz,” who addresses these questions and shares what she has learned about caring for patients with exposure to trauma, including abuse, neglect, and violence.



View the video to learn about the lifelong impact of trauma on health, and how trauma-informed care can create a more welcoming environment for patients, providers, and staff. It also offers practical steps for integrating trauma-informed care principles into every day clinical practices.

This video was created through Advancing Trauma-Informed Care, a national initiative led by the Center for Health Care Strategies (CHCS) through support from the Robert Wood Johnson Foundation.

WATCH THE VIDEO »

Learn More

VIDEOS: Trauma-Informed Care Champions: From Treaters to Healers
Why are health care professionals across the nation embracing trauma-informed care? CHCS posed this question to providers to gather first-hand perspectives on the value of trauma-informed care. The resulting videos feature practitioners who are leading a movement to improve health care for patients who have experienced trauma. more about these videos at:

https://www.traumainformedcare.chcs.org/trauma-informed-champions-from-treaters-to-healers/?utm_source=CHCS+Email+Updates&utm_campaign=e3c23e5cf3-ATC+Animated+Video+01%2F23%2F2019&utm_medium=email&utm_term=0_bbc451bf-e3c23e5cf3-152144421

Trauma-Informed Care Implementation Resource Center

The Trauma-Informed Care Implementation Resource Center, made possible through the Robert Wood Johnson Foundation, offers a one-stop information hub for health care stakeholders interested in learning more about trauma-informed care. Find practical resources developed by experts across the field of trauma-informed care, including provider success stories, and take the first step toward becoming a trauma-informed care champion. More about this Center at:

https://www.traumainformedcare.chcs.org/?utm_source=CHCS+Email+Updates&utm_campaign=e3c23e5cf3-ATC+Animated+Video+01%2F23%2F2019&utm_medium=email&utm_term=0_bbc451bf-e3c23e5cf3-152144421

State Legislative Update:

Advice and Consent Hearings Start Next Week

The Senate Advice and Consent Committee, chaired by Sen. Peter Lucido (R-Shelby Twp.), is scheduled to get under way next week with hearings planned for both Wednesday and Thursday.

Michigan's Constitution provides the Senate with the power of advice and consent over certain appointments made by the Governor, including every principal department director as well as numerous board and commission appointments.

The committee will meet at 4 p.m. Wednesday, in Room 1100 of the Senate Binsfeld Office Building, to consider the appointment of Paul C. AJEGBA, who has been chosen by Gov. Gretchen Whitmer to be the new Director of the Michigan Department of Transportation (MDOT). Ajegba has been an employee of MDOT 28 years. He began his career in the department's Engineering Development Program before advancing to Metro Region

engineer.

At noon Thursday, the committee will meet in Room 1300 of the Senate Binsfeld Office Building, to consider the appointment of Lisa McCORMICK as Children's Ombudsman Director. McCormick, a long-time criminal prosecutor and child advocate, served 21 years with the Ingham County Prosecutor's Office.

"I am excited for the Senate Advice and Consent Committee to convene and begin reviewing the governor's appointments," Lucido said. "Through the advice and consent process, the committee will help to ensure that Michiganders are well-served by competent individuals in these important, appointed roles. We look forward to this deliberative and thorough process and to work with the Governor's administration to ensure residents get the best from their state government."

Lucido said he intends to hold hearings on all of the Governor's director-level appointees, and that the committee will likely meet twice per week to review the individuals that have been appointed thus far.

Federal Update:

MDHHS Updates Status of Public Assistance Benefits, Medicaid During Partial Federal Government Shutdown

Michigan residents still can apply for and receive Medicaid and public assistance benefits such as food and cash assistance; Women, Infants and Children (WIC); State Emergency Relief and child care reimbursement despite the partial federal government shutdown.

The Michigan Department of Health and Human Services is clarifying the status of the programs, which receive federal dollars but are administered by MDHHS.

The state has determined there will be no impact to the availability of benefits through these programs in February even if the shutdown continues. There has been no official determination made on March benefits. "The partial federal government shutdown has understandably created concerns from families that rely on federal safety net assistance administered by MDHHS," said Terrence Beurer, deputy director of Field Operations Administration for MDHHS. "Programs that feed Michigan residents are a primary concern of the State of Michigan, and we have heard misinformation being spread about the immediate impact of the shutdown. We want people to know that MDHHS is prepared to continue to provide this assistance and that funding remains in place through the end of February."

Below are updates on the status of various federally funded programs administered by MDHHS:

Food Assistance Program: MDHHS issued February food assistance payments early beginning on Jan. 17. The federal government asked states to issue the assistance early to ensure that February funding would be available to be issued. Recipients do not need to redeem their benefits in January and MDHHS is urging them to budget their food assistance benefits so they can meet their food needs through the entire month of February.

WIC: Benefits, which include nutritious food for pregnant and postpartum women, infants and children up to age 5, are funded for the month of February and are being distributed according to the normal schedule.

Medical assistance, including Medicaid and Healthy Michigan Plan: Programs are funded through Sept. 30, 2019, the end of the current fiscal year.

Cash assistance: Funding is in place for January and February.

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State Emergency Relief: Funding for energy-related services such as heating assistance is in place to provide benefits through Sept. 30, 2019. Funding for non-energy-related services – such as home repairs and burials – is in place for January and February.

Child Development and Care (child care assistance): Funding is in place through the end of April. Clients who use Bridge Cards to redeem their food and cash assistance and WIC benefits are still able to do so in January and February.

State government generally can operate seamlessly for about 45 days after a federal shutdown begins. With the shutdown now beyond 30 days, the State Budget Office, Gov. Gretchen Whitmer's office and MDHHS are assessing the impact beyond 45 days and into March. Further information will be released as it becomes available.

Anyone who has questions about all programs above other than WIC can find contact information for their local MDHHS office by going to www.michigan.gov/contactmdhhs. Anyone with questions about WIC can find contact information for their local WIC agency by going to www.michigan.gov/wic.

Education Opportunities:

STILL TIME TO REGISTER: 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

If you need an overnight at the Radisson Hotel at the group rate, please email Chris Ward at cward@cmham.org.

[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

[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

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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

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

CMHA WEEKLY UPDATE

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:

February 21-22, 2019 | Detroit Marriott Livonia – **TRAINING FULL**

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.

CMHA WEEKLY UPDATE

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 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.

CMHA WEEKLY UPDATE

[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.)

\$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.

CMHA WEEKLY UPDATE

Trainings offered on the following dates.

- 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

Pain Management for Social Work and SUD Professionals Coming Soon!

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:

CMHA WEEKLY UPDATE

Robert Sheehan, CEO, rsheehan@cmham.org

Alan Bolter, Associate Director, abolter@cmham.org

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

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

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

Dana Ferguson, Accounting Clerk, dferguson@cmham.org

Michelle Dee, Accounting Assistant, acctassistant@cmham.org

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

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

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

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

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