

# WEEKLY Update

January 22, 2021

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

## TABLE OF Contents

<b>CMH Association and Member Activities .....</b>	<b>2</b>
<i>New! CMHA and partners issue call for vaccination access for persons with disabilities .....</i>	<i>2</i>
<i>CMH and provider crisis lines now posted on CMHA web .....</i>	<i>3</i>
<b>State &amp; National Developments and Resources.....</b>	<b>3</b>
<i>New! Michigan’s Opioids Task Force issues report on 2020 Opioids Strategy Key Progress .....</i>	<i>3</i>
<i>New! Joint NACo NSA report on the federal Medicaid inmate exclusion policy.....</i>	<i>4</i>
<i>New! CHRT issues brief on CCHBC.....</i>	<i>4</i>
<i>New! Medicaid Substance Use Disorder (SUD) Data Book issued .....</i>	<i>5</i>
<i>New! Leading Age issues report on direct care worker wages: Making Care Pay Work.....</i>	<i>5</i>
<i>New! Health Affairs: The Affordable Care Act Reduced Income Inequality In The US .....</i>	<i>5</i>
<b>State Legislative Update .....</b>	<b>6</b>
<i>View January’s Legislative Video on CMHA’s Website .....</i>	<i>6</i>
<i>New! Whiteford Promises Fast Start for DHHS Approps Subcommittee .....</i>	<i>6</i>
<i>DHHS EMERGENCY ORDERS.....</i>	<i>7</i>
<i>Executive Orders Signed.....</i>	<i>7</i>
<b>Federal Update.....</b>	<b>7</b>
<i>House Passes Short-Term Federal Funding .....</i>	<i>7</i>
<b>Education Opportunities.....</b>	<b>8</b>

<i>Still Time to Register - CMHA 2021 Virtual Annual Winter Conference</i> .....	8
<i>VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings – Registration Open</i> .....	9
<i>VIRTUAL Pain Management and Mindfulness Trainings – Registration Open</i> .....	9
<i>Family PsychoEducation Basic Facilitator Virtual Training – Registration Open</i> .....	10
<i>Virtual Motivational Interviewing College Trainings – Registration Open</i> .....	10
<i>Free Virtual X-Waiver/MAT Training for Michigan Clinicians Jan. 25<sup>th</sup></i> .....	11
<i>New! Surviving Suicide Loss: A Journey of Healing and Hope</i> .....	11
<b>Education &amp; Training Resources from Great Lakes MHTTC</b> .....	<b>12</b>
<i>Catalog of MHTTC resources</i> .....	12
<i>MHTTC announces series on National School Mental Health Curriculum</i> .....	12
<b>News from Our Preferred Corporate Partners</b> .....	<b>13</b>
<i>Abilita: Are you ready for E-911?</i> .....	13
<i>myStrength: new digital behavioral health resources empower consumers to move beyond trauma..</i>	13
<b>CMH Association’s Officers &amp; Staff Contact Info</b> .....	<b>13</b>
<i>CMHA Officers Contact Information:</i> .....	13
<i>CMHA Staff Contact Information:</i> .....	14

## CMH Association and Member Activities

### **New!** CMHA and partners issue call for vaccination access for persons with disabilities

CMHA joined a powerful group of advocates, led by the Self-Advocates of Michigan, in issuing a call for Michigan’s health system leaders to ensure that Michiganders with disabilities are prioritized for the Corona virus vaccine. Excerpts of that letter are provided below.

The Self-Advocates of Michigan (SAM), and the signatories below, greatly appreciates the work that the state and the various departments within the state have done to curb the outbreak of COVID-19 in Michigan. Recognizing that much work is still needed, we would like to address several issues important to people with disabilities.

...With this in mind, we have concerns regarding people with disabilities and the level they are placed in the distribution line-up; 1C. We feel that people with disabilities have been compiled

as an all-inclusive group which is far from reality. We share these following points and ask for your reconsideration in the level of importance for vaccine distribution.

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

### **CMH and provider crisis lines now posted on CMHA web**

While the access numbers for all the state's CMHs have been posted on the CMHA website, for years, the 24/7 crisis lines numbers have not. Now those crisis numbers are a part of the CMH listing section, searchable via an interactive map. (Acknowledgement to our partners at BHDDA/MDHHS who developed this map and keep it updated). The CMH maps, access numbers, websites and crisis numbers are [found here](#).

## **State & National Developments and Resources**

### **New! Michigan's Opioids Task Force issues report on 2020 Opioids Strategy Key Progress**

Below is a summary of the progress that Michigan made, in 2020, in combating the opioid crisis. This effort was guided by the Michigan Department of Health and Human Services Opioids Task Force, a group made up of knowledgeable and diverse stakeholders, including CMHA and a number of CMHA members.

#### **Michigan Naloxone Portal**

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- Launched publicly June 2020; pre-launch access given to jails, SUD treatment providers, MSP & MDOC
- As of Nov. 30, the portal has shipped 62,268 kits
- During the pandemic period (March 2020-Nov. 2020) the portal distributed 56,712 kits
- EMS Naloxone leave-behind protocol adopted by 6 EMS agencies; 10 additional EMS agencies in talks to adopt protocol

#### **2021 Priorities:**

- Pursue legislation to permit state standing order for community organizations to purchase naloxone
- Require all levels of EMS to carry naloxone
- Require SUD treatment providers to offer kits to clients
- Persuade jails to offer naloxone to people being released

#### **ED-based MAT & Care for Individuals with OUD**

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- MDHHS funding ED-based MAT programming through Michigan Opioid Partnership to 12 hospitals
- MI-OPEN working in 9+ hospital EDs to increase naloxone kit distribution to individuals post-overdose

- Piloting 6 post-overdose rapid response teams to provide in-person outreach within 24-72 hours post-overdose; programming will begin in early 2021
- DIFS updated the Essential Health Benefits benchmark plan to require two new OUD benefits in 2022 plans

2021 Priority: through legislation, require hospital EDs to have capability to initiate buprenorphine following an overdose

#### Services for Criminal justice populations

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- MDHHS committed over \$6m in funding to expand MOUD access in jails in 2021
- MDOC plans to expand MOUD access to all facilities by 2023; currently piloting in three facilities
- MDHHS funding peer recovery coaches in MDOC probation offices to improve connection to treatment & other resources
- MDHHS continues to support MI-REP program that offers pre- and post-release support to individuals
- The Improving Care for Justice-Involved Patients pilot received \$500k MHEF funding for a pilot project to improve data sharing between jails and providers to streamline Medicaid re-activation post-release

2021 Priorities: pilot LEAD diversion programs to divert individuals to services prior to arrest and launch an engagement center to connect individuals with resources

#### **New!** Joint NACo NSA report on the federal Medicaid inmate exclusion policy

Below are excerpts from a recent report developed by a joint task force of the National Association of Counties (NACo) and the National Sheriffs' Association (NSA) around the need for federal policy changes to eliminate the Medicaid inpatient exclusion policy.

The U.S. Constitution is clear: individuals are presumed innocent until proven guilty. Despite this clear constitutional mandate, people who receive federal health benefits, such as Medicaid, Medicare or CHIP benefits for juveniles are stripped of those benefits when arrested and jailed for an alleged crime, before conviction. From that starting point comes this report by a joint task force of the National Association of Counties (NACo) and the National Sheriffs' Association (NSA).

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

#### **New!** CHRT issues brief on CCHBC

Below are excerpts from a recent brief developed by the Center for Health and Research Transformation (CHRT) regarding the federal Certified Community Behavioral Health Center initiative - an initiative in which the state of Michigan and number of CMHA members are deeply involved.

The bipartisan [Excellence in Mental Health Act of 2009](#), which was introduced by U.S. Senator Debbie Stabenow (MI), increased federal and financial support for high quality mental health and substance use treatment services. To do so, Section 223 of the [Protecting Access to Medicare Act of 2014](#) established a two-year, eight-state demonstration program.

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

### **New! Medicaid Substance Use Disorder (SUD) Data Book issued**

Recently, the Centers for Medicare & Medicaid Services (CMS) released its second publication of the Transformed Medicaid Statistical Information System (T-MSIS) based Medicaid Substance Use Disorder (SUD) Data Book to help policymakers, researchers and other stakeholders better understand where to focus drug prevention and treatment efforts.

Key findings contained in the 2018 data book reveal the following:

- Of the 55.9 million Medicaid beneficiaries with full or comprehensive benefits ages 12 and older, 4.6 million (8%) were treated for a SUD in 2018
- 57% of beneficiaries treated for a SUD were diagnosed with tobacco use disorder and 30% had an opioid use disorder
- Nearly half of beneficiaries (46%) treated for a SUD received emergency services (the most common SUD treatment service)
- 26% received at least one service in an outpatient or home- or community-based setting within 30 days of discharge

The complete interactive T-MSIS based Substance Use Disorder Data Book can be [found here](#).

### **New! Leading Age issues report on direct care worker wages: Making Care Pay Work**

Below are excerpts from a recent announcement of the report issued by Leading Age, containing a number of recommendations related to the wage level for direct care workers. Leading Age is a national association working on long-term care issues. The Michigan office of Leading Age is an advocacy partner of CMHA.

As members on the front lines of the coronavirus pandemic know better than most, direct care workers are critically important to our nation's health—but they are not usually valued accordingly.

A new LeadingAge study, Making Care Pay Work, offers a glimpse into a different world in which direct care workers earn at least a living wage. The research demonstrates that the single action of paying direct care workers a living wage has the power to reduce staff shortages and turnover, improve productivity and quality of care, infuse billions of dollars into local economies, and offer financial security and independence of care workers themselves.

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

### **New! Health Affairs: The Affordable Care Act Reduced Income Inequality In The US**

Matthew Buettgens and colleagues from the Urban Institute show that the Affordable Care Act's (ACA's) coverage expansion reduced income inequality in 2019 compared with a simulated baseline scenario

without the ACA. Nonelderly adults with the lowest incomes experienced significant increases in income when a health-inclusive poverty measure was used.

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

## State Legislative Update

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

The Capitol Briefing is a monthly resource available to CMHA members providing a high-level overview of the key items impacting the public mental health system that (or each) month at the State Capitol. Our December Briefing features CMHA Associate Director, Alan Bolter, provides a 2020 legislative lame duck session recap which concluded in late December. *To view the latest video, [CLICK HERE!](#)*

### **New!** Whiteford Promises Fast Start for DHHS Approps Subcommittee

Rep. Mary Whiteford, chair of the Department of Health and Human Services Appropriations Subcommittee, plans to start her second session in this role quickly. She's already scheduled an 11 a.m. Wednesday hearing on human trafficking. She also expects a 22-bill package to be introduced next week addressing the issue. It is a reintroduction of a similar package introduced last year, which failed to get a hearing because of the COVID pandemic.

Another area of interest for Whiteford that she will be able to address in this appropriations subcommittee is mental health services, especially those for children.

"I looked at the number of children who are traumatized and have mental problems, anxiety, depression, matching with the number of providers out there and I realized if I can increase the reimbursement for behavioral health providers, I'm hoping that they will offer services to more of these children. When you take the reimbursement for Medicare, Medicaid can be half of that," Whiteford said.

She said she did get that into the budget this year, the budget has been increased.

Several other accomplishments have already been made, she said. One is the creation of crisis stabilization licensing. Not every person needs a full in-patient stay, so instead they can go to a stabilization unit for 72 hours, she said.

Psychiatric Residential Treatment Facilities for children was signed into law at the end of December, so that children who don't need the full intensity of a psychiatric hospital can go into a facility with more of a residential setting. And the Michigan Crisis and Access Line is going live in Oakland County and the U.P. this quarter, Whiteford said.

## DHHS EMERGENCY ORDERS

Currently, there are active *DHHS* emergency orders. Please find a list of the active emergency orders with the topic, date it was signed and a hyper link accessing the emergency order below. For individuals still interested, or in need of referencing previous *Executive Orders*, please click [here](#).

Today, Governor Whitmer announced the finalization of the Feb. 1 reopening of indoor dining for restaurants and bars, but with a 10 p.m. curfew and a 25% capacity limit, up to 100 people.

Large stadiums will also be allowed more capacity to allow for additional attendance at high school football finals being hosted this weekend, under the newest epidemic order issued by the Michigan Department of Health and Human Services (DHHS) that will take effect Feb. 1 and run until Feb. 21.

The new capacity limits allow for 500 people at venues that seat over 10,000 people, while stadiums that seat less than 10,000 are allowed to be at 20% capacity, up to 250 people.

The order also will allow concessions at casinos, movie theaters and stadiums; personal services requiring mask removal and non-residential gatherings of up to 10 people from two households.

## Executive Orders Signed

Currently, Governor Gretchen Whitmer has signed over 170 Executive Orders in response to COVID-19. Below is the most recent list of Executive Orders with the topic and a hyper link accessing the Executive Order below.

For a complete list of Governor Whitmer's Executive Orders click on the link below:

[https://www.michigan.gov/whitmer/0,9309,7-387-90499\\_90705---,00.html](https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705---,00.html)

- **Executive Order 2020-181** – Amendment to the Safe Start order, please click [here](#) to access Executive Order 181.

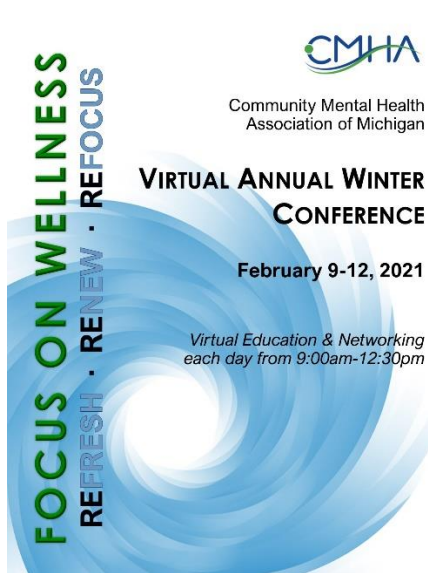
## Federal Update

### House Passes Short-Term Federal Funding

This week, the House of Representatives passed a short-term continuing resolution (CR) through December 18 to provide appropriators with additional time to reach a spending agreement for fiscal year (FY) 2021. The CR also includes provisions that would extend several expiring health care policies, including Certified Community Behavioral Health Clinics (CCBHCs). The Senate now has until midnight tonight to vote on the CR to avert a shutdown.

# Education Opportunities

## Still Time to Register - CMHA 2021 Virtual Annual Winter Conference



CMHA 2021 Virtual Annual Winter Conference  
"Focus on Wellness: Refresh · Renew · Refocus"

February 9-12, 2021  
Educational Sessions Each Morning

**[CLICK HERE TO REGISTER!](#)**

Here's some key benefits on why you should register for this virtual conference series!

***Earn 9.5 Social Work CEs + 10.5 MCBAP CEs at the CMHA Virtual Annual Winter Conference!***

**Reduced Registration Fee:** Eliminating the cost of food, meeting room rental, audio-visual rental and materials allows us to lower

our conference fee.

**Save on Travel Costs:** The extra costs such as mileage reimbursement, hotel overnight costs and meal per diems *substantially increase* the cost of each person attending the conference.

### **LIVE Conference Fees:**

*Live Conference: You are NOT required to attend the entire conference – you can attend 2 sessions or 8 or more! You receive credit for each session you log in, view live at the scheduled time and participate fully (90% of advertised time). Viewing the sessions live is the only way to receive CE Credits. You also have access to session recordings for 90 days after the conference (no CEs).*

**Member: \$210 per attendee**

**Non-Member: \$252 per attendee**

### **Recording Only (No CEs) Conference Fees:**

*Recording Only– No Continuing Education Credits: For those who do not need CEs take advantage of the significantly reduced fee. The recordings will be available AFTER the conference and you will have 90 days to view the recordings. You can view as many sessions as you like.*

**Member: \$50 per attendee**

**Non-Member: \$70 per attendee**

**How Far Does \$3,000 Go?** Invest in your staff and board members by making sure they are up to date on the latest evidence-based practices and hot topics in our industry. Traditionally, for \$3,000 a member



organization could only send 3 attendees to an in-person conference. *Virtual conferences allow you to stretch that \$3,000 to send 20 attendees!*

**Time Efficient:** The conference takes place in the mornings only - so your afternoons are available for meetings, emails and projects.

**Location:** You can attend from anywhere that has internet access: office, home, coffee shop, out of state, the beach....the possibilities are endless!

**More Accessibility:** Virtual conferences are more accessible to a larger and more diverse audience. Traveling long distances and prolonged time away from home, office, personal commitments are no longer barriers with a virtual environment.

**The Education Never Ends – Don't Miss Any Sessions:** Usually during in-person conferences, there are so many sessions taking place at the same time – but you can only select 1 per timeslot. With virtual conferences, you'll have access to view ALL the educational sessions for up to 3 months after the conference concludes (no continuing education credits for viewing the recordings).

**Questions?** Contact Chris Ward at [cward@cmham.org](mailto:cward@cmham.org) or 517-237-3143.

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

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

Community Mental Health Association of Michigan is pleased to offer VIRTUAL Ethics for Social Work, Substance Use Disorder, Recipient Rights and Psychologist Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC online through Zoom. There are 6 CE credits available for this training. 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.

**Dates:**

- February 22, 2021 *(SOLD OUT)*
- March 22, 2021 [\(Register Here\)](#) *(42 spots left)*
- April 5, 2021 [\(Register Here\)](#) *(58 spots left)*
- April 26, 2021 [\(Register Here\)](#) *(56 spots left)*

**Agenda:**

Log into Zoom: 8:15am  
Education: 8:30am – 11:30am  
Lunch Break: 11:30am – 12:00pm  
Education: 12:00pm – 3:00pm

**Training Fees:** \$120 CMHA Members \$143 Non-Members

### **VIRTUAL Pain Management and Mindfulness Trainings – Registration Open**

Community Mental Health Association of Michigan is pleased to offer Pain Management Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC online through Zoom.

This course qualifies for 2 CEs and fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for pain management.

**Dates:**

- March 8, 2021 *(SOLD OUT)*

**Agenda:**

Log into Zoom: 8:45 am  
 Education: 9:00am – 11:00am

**\*NEW Pain Management and Mindfulness Training Date to be Announced Soon\***

**Training Fees:** \$43 CMHA Members \$51 Non-Members

**Family PsychoEducation Basic Facilitator Virtual Training – Registration Open**

Registration is now open for the Family PsychoEducation Basic Facilitator Virtual Training to be held February 1, 2, 8 and 9 for two hours each day. Two cohorts will be held. For additional information, please email [awilson@cmham.org](mailto:awilson@cmham.org) for a brochure.

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

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

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

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

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

**Times:**

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

**Training Fees:**



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

### **Free Virtual X-Waiver/MAT Training for Michigan Clinicians Jan. 25<sup>th</sup>**

[Get Waivered](#), a national organization that empowers clinicians (physicians, PAs, NPs) with DEA-X waivers so that they may provide the most advanced treatment interventions in addressing the opioid epidemic. With 30-40 Michiganders dying from opioid overdoses each week — a figure that is expected to soar due to COVID-19 — Michigan practitioners are uniquely-positioned to do something about it. The pandemic has placed ongoing stress on hospitals across the state and practitioners are needed now more than ever to decompress emergency departments by providing medication-assisted treatment (MAT) for opioid use disorder (OUD) in outpatient settings.

In response, Get Waivered, the American College of Emergency Physicians (ACEP), Providers Clinical Support System (PCSS), the Michigan Opioid Collaborative (MOC), the Michigan Emergency Department Improvement Collaborative (MEDIC) and the Michigan Opioid Prescribing Engagement Network (OPEN) are partnering to provide the first free, fully-remote MAT training class for [Michigan providers on January 25th](#), while new, amended regulations allow for waived physicians to prescribe buprenorphine without requiring an in-person intake appointment. After completing this course, clinicians will be able to provide evidence-based care to patients struggling with OUD, while limiting their reliance on emergency department resources.

### **New! Surviving Suicide Loss: A Journey of Healing and Hope**

Suicide is a personal tragedy that has become all too common in Michigan and in communities throughout the country. And when someone dies by suicide, it can have a profound effect on survivors — the families, friends and others who knew and loved the individual.

To help those grieving such a loss and to foster healing, Kevin's Song and Detroit Public Television (DPTV) are hosting a free public event, "Surviving Suicide Loss: A Journey of Healing and Hope" with suicide loss survivors.

**Join us this Saturday, Jan. 23, from 12:00-1:30 p.m. on DPTV's [Facebook](#) page and [website](#)**

"Surviving Suicide Loss: A Journey of Healing and Hope" will be a 90-minute discussion with a panel of four suicide loss survivors, who will share their stories, discuss how they dealt with the various stages of grief and offer insights into the resources they were able to call upon to support them through their grief journeys.

# Education & Training Resources from Great Lakes MHTTC



MHTTC

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

CMHA, in partnership with the SAMHSA-funded Great Lakes Mental Health Technology Transfer Center (Great Lakes MHTTC), CMHA, provides educational materials and training on a range of evidence based and promising mental health prevention and treatment practices. This section of the Weekly Update will regularly feature education, training, and technical assistance offerings from the Great Lakes MHTTC and its partner MHTTCs from across the country.

## Catalog of MHTTC resources

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

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

## MHTTC announces series on National School Mental Health Curriculum

The National School Mental Health Curriculum was the result of a partnership between the Mental Health Technology Transfer Center (MHTTC) Network and the National Center for School Mental Health (NCSMH) to identify priority training topics, develop training content and gather related resources for inclusion in the training curriculum.

The national Mental Health Technology Transfer Center (MHTTC) Network, one of the groups that provides the backbone support for that curriculum, has developed and is hosting an 8-part training series using the National School Mental Health Curriculum: Guidance and Best Practices for States, Districts, and Schools. Each session will include a pre-session video, live panel session, and post-session regional breakout.

Information on this free series, which starts on February 9 and runs through March 25, can be [found here](#).

## News from Our Preferred Corporate Partners

### **Abilita: Are you ready for E-911?**

By the end of this year, all organizations with greater than 20,000 square feet of workspace and/or multiple buildings or floors must comply. If someone from your organization called 911 now, would their location in the building get sent to the 911 center? Are you in compliance with the new E911 law?

Check out [www.abilita.com/michigan-e911](http://www.abilita.com/michigan-e911) to learn more and find out what you need to do to prepare!

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

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

## CMH Association's Officers & Staff Contact Info

### **CMHA Officers Contact Information:**

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

President: Joe Stone [Stonejoe09@gmail.com](mailto:Stonejoe09@gmail.com); (989) 390-2284  
First Vice President: Carl Rice Jr; [cricejr@outlook.com](mailto:cricejr@outlook.com); (517) 745-2124  
Second Vice President: Craig Reiter; [gullivercraig@gmail.com](mailto:gullivercraig@gmail.com); (906) 283-3451  
Secretary: Cathy Kellerman; [balcat19@live.com](mailto:balcat19@live.com); (231) 924-3972  
Treasurer: Randy Kamps; [randyk@4iam.com](mailto:randyk@4iam.com); (231)392-6670  
Immediate Past President: Bill Davie; [bill49866@gmail.com](mailto:bill49866@gmail.com); (906) 226-4063

## CMHA Staff Contact Information:

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

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