

WEEKLY Update

March 5, 2021

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

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CMH Association and Member Activities

New! Lakeshore Regional Entity announces New CEO

Below are excerpts from a recent press release announcing the appointment of Mary Marlatt-Dumas as the CEO of the Lakeshore Regional Entity.

Lakeshore Regional Entity (LRE), one of the 10 designated Prepaid Inpatient Health Plans (PIHPs) in Michigan, has announced the appointment of Mary Marlatt-Dumas as its Chief Executive Officer (CEO). This appointment comes after an independent search firm conducted a nationwide search for the LRE that started in October of 2020. LRE Board unanimously approved the appointment of Ms. Marlatt Dumas after their interview with her, during the February 18, 2021 Board meeting.

Mrs. Marlatt-Dumas has over fifteen years of extensive, senior operations management leadership in Michigan’s behavioral health, managed care public system with expertise in federal regulations and the public community mental health service system. She has direct experience working for and with other PIHPs across the state. Her philosophy of working hard, being transparent, synthesizing information and data for decision-making and her expertise with the behavioral health system allowed her to lead initiatives and the development of many programs and projects over the years.

We wish Mary the best in this new role.

New! Centra Wellness and partners open on-campus health center for students

Below are excerpts from a recent news story on the opening of a health center on the school campus by Centra Wellness and a number of its community partners.

A northern Michigan school district is going the extra mile to care for its students.

Manistee Area Public Schools is opening up an on-campus health center inside the middle and high school building.

If a student needs anything from vaccination to a sports physical, all they need to do is walk through the hallway of their own school and visit the northwest Michigan Health Clinic, and show up for their appointment Monday through Friday even throughout the summer.

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

New! CMHA speaks to inpatient bed access issues in news story: Mother of teen in need of mental health care

Below are the opening lines of a recent news story in which CMHA spoke to some of the causes of the barriers to access to inpatient psychiatric care.

After a local family's plight exposed the challenge of getting children the mental health care they need, another family is coming forward pleading for help after finding themselves in a similar situation. Jay and Jo Ann Gross' struggle to find in-patient services for their teenage son quickly went viral, shining a light on what they describe as a broken system.

Another family's story is very familiar to the Gross family's. Nicole Norris is at her breaking point.

"I've reached a point where I just feel so lost and fear that my daughter is going to die," Norris said.

The full story and television news story can be [found here](#).

Traveling Art Show

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

State & National Developments and Resources

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

MDHHS has recently released the recording from the March 4 presentation, by MDHHS, around the revised emergency order for visitation and COVID19 testing reimbursement. That video can be [found here](#).

New! Medicaid Forward: Behavioral Health

The National Association of Medicaid Directors (NAMD), a bipartisan, nonprofit, professional organization representing leaders of state Medicaid agencies across the country, today released the first of a three-part series of reports aimed at communicating the critical role Medicaid will play as the nation looks toward recovery from the pandemic and the country's "new normal."

The initial report, Medicaid Forward: Behavioral Health, focuses on the realities of mental health and addiction for the roughly 77 million Americans who now use Medicaid or the Children's Health Insurance Program to access the health care they need – enrollment grew by 6.6 million since the start of the pandemic. Prior to COVID-19, Medicaid covered more than 11 million adults with diagnosed mental illnesses.

This report can be [found here](#).

New! MDHHS issues RFP for implementing evidence-based services with juvenile justice-involved youth

The Michigan Department of Health and Human Services (MDHHS) has issued a Request for Proposals (RFP) to implement evidence-based practices in order to promote and preserve community-based placement for juvenile justice involved youth in Michigan.

The Evidence-Based Services for Youth in the Juvenile Justice System program seeks to increase the availability of Multisystemic Therapy, Multisystemic Therapy for Problem Sexual Behaviors and Functional Family Therapy services with juvenile justice involved youth, in order to promote and preserve community-based placement and decrease the need for out-of-home care. A total of \$445,000 is available in this RFP, and MDHHS anticipates issuing up to three awards.

Funded applicants will receive ongoing guidance from the MDHHS project coordinator regarding program start-up, reporting requirements and barriers to program implementation.

Grant applications for the Evidence-Based Services for Youth in the Juvenile Justice System RFP must be submitted electronically through the EGrAMS program by 3 p.m. on April 13. The program period begins May 1 and ends Sept. 30. Funding from Oct. 1 through April 30, 2022, may be available to successful applicants, based upon funding availability and acceptable performance.

For more information or to apply, visit the [EGrAMS website](#) and select "About EGrAMS" link in the left panel to access the "Competitive Application Instructions" training manual. The complete RFP can be accessed under the 'Current Grants' section under the "Behavioral Hlth and Dev Dis Adm Standard" link and selecting the "EBSJJ-2021" grant program.

New! DWIHN and partners offer webinar series: real talk: being black with a disability



Real Talk: Being Black with a Disability

[CLICK HERE TO REGISTER](https://form.jotform.com/203234675683056) or use the link that follows:
<https://form.jotform.com/203234675683056>

"I Want You...To Want Me Too"

During this session, panelists will talk about relationships when you are black with a disability.
March 11, 2021 1:00-3:00pm EST



MARY SHEHAN-BOOGAARD
MODERATOR



TAWANA CARTER
ALL WELL-BEING SERVICES



TAMEKA CITCHEN-SPRUCE
MICHIGAN DISABILITY RIGHTS COALITION



BLAKE PERRY
SELF-ADVOCATES OF MICHIGAN



ROBERT SPRUCE
DWIHN

"Inner City Blues (Make You Want a Holler)"

These speakers will highlight some of the untapped resources contributing to the blues.
March 18, 2021 1:00-3:00pm EST



BRENT MIKULSKI
MODERATOR



KENYA HARPER
MICHIGAN ALLIANCE FOR FAMILIES



PAUL JOHNSON
DETROIT HEALTH DEPARTMENT



JAIME JUNIOR
WARRIORS ON WHEELS

"What's Going On"

This session will explore the financial inequities, reasons, and how to right the ship.
March 25, 2021 1:00-3:00pm EST



LUCINDA BROWN
MODERATOR



NANETTE GOODMAN
BURTON BLATT INSTITUTE
SYRACUSE UNIVERSITY

"What's Happening Brother..."

This session will focus on the overcriminalization of Blacks with developmental disabilities.
April 9, 2021 2:00-4:00pm EST



JUDGE DEBORAH THOMAS
MODERATOR



LEIGH ANN DAVIS
ARC NATIONAL CENTER ON CRIMINAL JUSTICE AND DISABILITY

Michigan    

[Register here](#) for this series.

New! MDHHS launches campaign to promote harm reduction services

Below are excerpts from a recent press release announcing the harm reduction campaign of MDHHS.

The Michigan Department of Health and Human Services (MDHHS) has partnered with Vital Strategies to launch [a media campaign](#) to promote the critical importance of harm reduction services in Michigan's response to the opioid epidemic.

As part of Michigan's comprehensive [opioid strategy](#), the harm reduction component includes expanding the availability of naloxone and access to syringe service programs (SSPs). Naloxone can save lives by reversing the effects of opioid-related drug poisonings or overdoses. SSPs are agencies that offer clients compassionate, judgement-free and person-centered care to reduce the harms associated with substance use.

The campaign kicks off on the heels of Gov. Gretchen Whitmer declaring Feb. 24-28 as [Opioid Addiction Awareness Week](#).

Vital Strategies work on this campaign is part of the Bloomberg Philanthropies \$10 million investment in overdose prevention in Michigan that was announced in March 2019. This \$900,000 campaign includes billboards, gas station posters, search, video, social media and digital media. The ads encourage Michiganders to "change at their own pace" and include real-life stories from people across Michigan sharing their personal experiences with substance use and harm reduction services.

For more information and resources, visit Michigan.gov/Opioids.

New! Subscribe Now to the CMS Rural Health Listserv!

The Centers for Medicare & Medicaid Services rural health listserv is dedicated to sharing information about programs, policies and resources to help ensure rural populations have access to quality health care. To subscribe to the new topic, [click here and enter your email](#).

Our goal at CMS is to develop programs and policies that ensure rural Americans have access to high quality care, support rural providers and not disadvantage them, address the unique economics of providing health care in rural America, and reduce unnecessary burdens in a stretched system to advance our commitment to improving health outcomes for Americans living in rural areas.

Subscribe to the rural health care listserv to receive the latest information and resources on:

- CMS Rural Health Strategy
- Maternal health care
- Payment and billing
- Policies and regulation
- Resources for partners

In order to find more information on rural health activities at CMS, please visit go.cms.gov/ruralhealth or contact RuralHealth@cms.hhs.gov

New! CDC urged to prioritize COVID-19 vaccines for people with developmental disabilities

Below are excerpts from a recent news story on the work of advocates around ensuring access to the COVID19 vaccines by persons with intellectual and developmental disabilities.

With access to COVID-19 vaccines varying dramatically for people with developmental disabilities, advocates want the Centers for Disease Control and Prevention to update its prioritization plan to account for the high risk this population faces.

In a letter to CDC leadership late last month, 16 advocacy groups called for people with developmental disabilities who are living independently in the community or with family to be added to group 1B in the CDC's recommendations for the vaccine rollout.

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

New! Save lives by prioritizing individuals with Schizophrenia for COVID-19 outreach and education

Below is a composite summary of recent research on the impact of COVID 19 on persons with schizophrenia.

In a cohort of people with COVID-19, a Schizophrenia-spectrum diagnosis was associated with more than double the odds of dying, according to new research published in the Journal of the American Medical Association.¹ In this study, a diagnosis of Schizophrenia ranked behind only age in how strongly it was associated with COVID-19 mortality. This was a well-designed cohort study of 7,348 adults with laboratory-confirmed COVID-19 in an academic health system in New York State.

Background : Decades of research established that people with Schizophrenia-spectrum disorders are at higher risk of health problems like heart disease, diabetes, and cancer; moreover, they die up to 25 years earlier than the general public. This well-known problem has been called "a scandal of premature mortality." Evidence from earlier vaccination efforts shows difficulty reaching people with Schizophrenia. Unlike other vulnerable groups, flu vaccine rates among people with Schizophrenia-spectrum disorders are as low as 25%. We can save lives by ensuring that Michiganders living with Schizophrenia know how to protect themselves from COVID-19, and access vaccines as soon as possible.

Barriers and Potential Solutions:

Barrier: Systems level barriers may include low access to healthcare.

Solution: Offer education, outreach, and vaccine clinics in locations where people with Schizophrenia feel comfortable, such as Clubhouses⁵, Drop-In Centers⁶, and Community

Mental Health Centers. Collaborate with organizations such as the National Alliance for Mental Illness (NAMI)⁷ to make the public aware of the higher risk of COVID-19 mortality among people with Schizophrenia.

Barrier: Individual level barriers may include suspiciousness of the vaccine, low health literacy, or lack of motivation to engage in preventive self-care.

Solution: Provide the behavioral health workforce – including psychiatrists, social workers, nurses, Peer Support Specialists, and Community Health Workers – with education on the link between Schizophrenia and COVID-19 mortality. Tailor educational brochures on COVID-19 risk for people with Schizophrenia, to raise awareness of their increased risk using clear and simple language, and provide these to the behavioral health workforce for distribution.

Researchers involved in this effort:

- Adrienne Lapidos, PhD, Clinical Assistant Professor, Department of Psychiatry, University of Michigan Medical School. alapidos@med.umich.edu
- Stephan Taylor, MD, Professor, Department of Psychiatry, University of Michigan Medical School. sftaylor@med.umich.edu
- Ivy Tso, PhD, Assistant Professor, Department of Psychiatry, University of Michigan Medical School. ivyts@med.umich.edu
- Gregory Dalack, MD, Department Chair and Professor, Department of Psychiatry, University of Michigan Medical School. gdalack@med.umich.edu

New! For some teens, it's been a year of anxiety and trips to the E.R.

Below are excerpts from a recent news story highlighting the burdens faced by some teenagers, with mental health and substance use disorder needs, during the pandemic.

When the pandemic first hit the Bay Area last spring, Ann thought that her son, a 17-year-old senior, was finally on track to finish high school. He had kicked a heavy marijuana habit and was studying in virtual classes while school was closed.

The first wave of stay-at-home orders shut down his usual routines — sports, playing music with friends. But the stability didn't last.

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

State Legislative Update

View February'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 February Briefing features CMHA Associate Director, Alan Bolter, provides an overview of the Governor's FY22 executive budget as well as a couple of other key updates. *To view the latest video, [CLICK HERE!](#)*

New! Legislature Sends Supplemental Budget to the Governor

Wednesday afternoon, the Michigan House approved the COVID relief package that the Senate passed on Tuesday. Again, the package is a product of an agreement reached between the House and the Senate on the expenditure of some of the state's federal COVID-19 relief funding. Below are some of the details:

- House Bill 4047 (S-3) – the new Senate substitute includes supplemental appropriations for fiscal year 2020-21 of \$2.3 billion Gross (\$632 million GF/GP) – the majority of which will be dedicated to Health and Human Services (\$1.45 billion Gross). Specifically:
 - Extension of the direct care worker wage increase (\$2.25 per hour) for the remainder of the fiscal year (\$150 million gross)
 - Vaccine distribution (\$110 million)
 - COVID Testing (\$551 million) – \$347.3 million of the testing money is contingent on enactment of Senate Bill 1 (see below)
 - Mental Health Block Grant (\$15 million)
 - Substance Use Disorder Block Grant (\$17 million)
 - Congregate and home-delivered meals (\$1.3 million)

The measure includes boilerplate requiring a recipient of a COVID-19 vaccine be provided with information or be informed if and in what manner the development of the vaccine utilized aborted fetal tissue or human embryonic stem cell derivation lines. Notably, the measure did not include language prohibiting the use of the social vulnerability index.

- House Bill 4048 (S-1) – would amend the School Aid Act to provide \$1.65 billion in federal Elementary and Secondary School Emergency Relief (ESSER) funds, \$125.7 million in Federal Governor's Emergency Relief (GEER) funds, and \$170 million in State School Aid Fund (SAF) for a total gross appropriation of \$1.9 billion to support school districts. Some of the funding would be contingent on the enactment of HB 4049. The bill also ties some funding to an incentive for districts to offer in-person instruction.
- House Bill 4049 (H-1) – would amend the Public Health Code to prohibit the Director of Health and Human Services from closing schools to in-person instruction or prohibiting sporting events

and would instead allow local health officers to issue an emergency order to make a determination to act in this manner based on criteria set forth in the legislation.

- Senate Bill 1 – would amend the Public Health Code to specify that an emergency order issued to control an epidemic would be valid for up to 28 days unless a request from the Director of the Department of Health and Human Services (DHHS) to extend the order was approved by resolution of both Houses of the Legislature

The Governor is expected to line-item veto some aspects of the package, including the tie-bars.

New! House and Senate DHHS Committee Meetings

Below are the scheduled House and Senate DHHS budget committee meetings for next week. Please note that Monday, March 8 is one of the scheduled public testimony days for the House committee.

House DHHS Committee

Committee(s) Appropriations Subcommittee on Health and Human Services

Chair Rep. Mary Whiteford

Clerk Name [Sue Frey](#)

Clerk Phone 517.373.8080

Location Room 519, House Office Building, Lansing, MI

Date Monday, 3/8/2021

Time 1:00 PM

Time Notes

Agenda Public Testimony on the Fiscal Year 2021-22 Executive Budget Recommendation for the Department of Health and Human Services

Due to concerns regarding Coronavirus (COVID-19), audience seating will be extremely limited.

For those wishing to present their positions/testimony, written statements are strongly encouraged and can be submitted to the Committee Clerk listed above prior to the meeting

Remote testimony may be an option through video conferencing technology. Please contact the Committee Clerk or Committee Chair for participation details

Overflow viewing rooms may be available to members of the general public who are unable to enter the room due to capacity limits. Direction and signage to overflow viewing locations will be in place.

Senate DHHS Committee

Committee(s) Appropriations Subcommittee on Community Health/Human Services

Chair Sen. Rick Outman

Clerk Name [Steven Angelotti](#)

Clerk Phone 517.373.2768

Location Senate Hearing Room, Ground Floor, Boji Tower, 124 W. Allegan Street, Lansing, MI 48933

Date Tuesday, 3/9/2021

Time 8:00 AM

Time Notes

Agenda Presentation on Governor Whitmer's Proposed FY 2021-2022 Department of Health and Human Services Budget by Elizabeth Hertel, Director of the Department of Health and Human Services

And any other business properly before the committee.

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

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

Federal Update

Urge Your Legislators to Cosponsor the Medicaid Reentry Act

Last week, Reps. Tonko (D-NY) and Turner (R-OH) were joined by Senators Baldwin (D-WI) and Braun (R-IN) in reintroducing the Medicaid Reentry Act (H.R. 955/S. 285). This bipartisan bill would allow states to restart Medicaid coverage for eligible incarcerated individuals up to 30 days before their release from jail or prison. H.R. 955/S. 285 is an important step toward improving access to much-needed mental health and substance use services for one of the most vulnerable populations in the country.

Will you take two minutes today to urge your legislators to cosponsor the Medicaid Reentry Act?

<https://www.thenationalcouncil.org/policy-action/write-your-legislators/?vvsrsrc=%2FCampaigns%2F58978%2FRespond#/TakeAction/Go/LetterGroupID/25/publicGRRecID/88E807BF-5056-92E0-69D373CF5A273620/EID/ELSAPXOKYL>

The criminal justice system has become the largest de facto mental health and substance use disorder treatment provider in the country. According to the Bureau of Justice Statistics, more than half of people in the criminal justice system have a mental illness. Of those with serious mental illness, approximately 75 percent also have a co-occurring substance use disorder. Successful reentry into the community requires enabling justice-involved individuals to avoid returning to the exact environmental factors that led to their incarceration in the first place. Equipping individuals with timely access to substance use, mental health, and other health-related services before release, will facilitate the transition to community-based care necessary to break the cycle of recidivism.

Education Opportunities

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:

- March 22, 2021 *(SOLD OUT)*
- April 5, 2021 [\(Register Here\)](#) *(5 spots left)*
- April 26, 2021 [\(Register Here\)](#) *(16 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 30, 2021 (*SOLD OUT*)
- April 6, 2021 ([Register Here](#)) (*43 spots left*)

Agenda:

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

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

Virtual Motivational Interviewing College Trainings – Registration Open

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

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

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

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

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.

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

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

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

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

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

Integrated Dual Disorder Treatment 101

Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. This co-prevalence has been studied since the 1980s, yet despite this, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated and team-based services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Integrated Dual Disorder Treatment (IDDT) was designed following systematic study of high intensity COD treatment needs and alterations of the Assertive Community Treatment (ACT) model. Within this training attendees will understand the components of IDDT, including fidelity and outcome measurement. Specific attention will be paid to the development of stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders using the IDDT model.

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

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

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

\$30 Registration fee includes electronic training materials and CEs

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

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

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

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

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

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

\$30 Registration fee includes electronic training materials and CEs

Recovery-Based Co-Occurring Treatment Planning and Delivery

Until the 21st century, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated services offer superior outcomes to parallel or sequential treatments, and call providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Recovery-oriented care requires changes at a systems and individual practitioner level in areas including assessment, treatment planning, and delivery. Integrated co-occurring providers will learn about the research on integrated care including Evidence-Based Practices (EBP), and ways to develop stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use.

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

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

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

\$30 Registration fee includes electronic training materials and CEs

Stage Matched Treatment for Co-Occurring Needs

Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. In addition, treatment engagement is often lower for individuals with COD, particularly when those individuals are in early stage of readiness for one of more presenting problems. This training will focus on the assessment of stage of readiness using validated tools, and the interventions that are best fit for each stage of readiness. In addition, ways to address organizational readiness for COD treatment will be discussed.

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

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

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

\$30 Registration fee includes electronic training materials and CEs

New! CMHA and partners offer: Interdisciplinary Partnerships: Community Mental Health & Law Enforcement Collaboration Webinar



In the midst of a global pandemic, the related economic downturn, and a renewed focus on racial justice, mental health, and public safety, the intersection of law enforcement and mental health have come to the fore in public discussion and debate. Our organizations, representing Michigan's law enforcement professionals, prosecuting attorneys, and community mental health (CMH) systems, want to underscore the ideas of continuously examining best practices, as well as taking the opportunity to

enhance longstanding partnerships between law enforcement, mental health systems and communities throughout Michigan and to recommend strengthening those partnerships.

When placed on the shoulders of law enforcement, the list of community needs burdens them with an evergrowing list of expectations from the public – expectations beyond the core responsibilities and capacities of any law enforcement professional.

As we look forward to shared strategies that enhance the capacity to respond to a variety of crisis situations, Michigan communities have developed innovative and effective partnerships between local law enforcement agencies and community mental health systems – the public mental health system designed to provide high quality, evidence-based and community-centered mental health services. These partnerships focus the appropriate resources and personnel on the issues at hand in any given crisis call - by applying law enforcement approaches when needed, mental health and human services approaches when needed, and partnering together as needed.

This webinar will explore interdisciplinary partnership and collaboration efforts from three innovative Michigan communities.

When: March 26th, 2021 | 10:30 a.m. – 12:00 p.m.

Webinar Registration Cost: FREE (*Registration for this webinar is made available by the Michigan Department of Health & Human Services.*)

Registration: Registration URL: <https://attendee.gotowebinar.com/register/3156763167938164236>

For additional information please contact J. Eric Waddell at jericwaddell@thecardinalgroup2.com

New! Special Olympics “Strong Minds” Virtual Event

Competition provides a natural opportunity to develop active strategies for maintaining emotional wellness under stress, such as: thinking positive thoughts, releasing stress and connecting with others. During this webinar we will be discussing the Strong Minds program which is a discipline of Special Olympics Healthy Athletes. Strong Minds focuses on developing adaptive coping skills for individuals with intellectual disabilities. We will also be discussing in greater detail what exactly a Strong Minds event teaches Special Olympics participants, how participants and volunteers benefit from the program, and ways attendees can get involved.

When: Thursday, March 18th

Time: 12:00 – 1:00pm

RSVP: <https://forms.gle/xxkvUsCmx7ZdQQKG6>

Questions? Contact Kellie Murphy at kellie.murphy@somi.org

Behavioral Telehealth Resource Center

Telehealth Resource Center

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

[CMHA recommendations: Michigan's emerging Medicaid telemedicine policies](#): Recognizing that the Medical Services Administration of MDHHS is in the process of revising and expanding the state's Medicaid telemedicine policies, CMHA has created a document which outlines recommended telemedicine policies. These recommendations reflect the views of a broad cross section of CMHA members and stakeholders.

Behavioral Health Provider Experiences with Telehealth during COVID-19

[The Behavior Health Workforce Research](#) Center at the Institute for Healthcare Policy and Innovation, University of Michigan recently completed key informant interviews and published a brief that highlights key findings and federal policy implications. Read the [IHPI Brief here](#).

New! New Medicare Law Requires in Person Visit for Telehealth Coverage

The Consolidated Appropriations Act of 2021, section 123 includes language that requires behavioral health providers to have seen their client in person during the prior six months before a telehealth visit will be covered by Medicare. Further, providers must have in-person visits on a "regular interval" to be determined by the Health and Human Services Department for telehealth visits to be covered by Medicare. This change, signed into law in the last days of December 2020, has raised confusion in the telemental health provider community. As discussed in the blog by Nathaniel Lacktman, a partner at Foley & Lardner who chairs the Telemedicine and Digital Health Industry team "the in-person exam requirement is at odds with a direction that telehealth policy has moved over the last decade. It disrupts Medicare's historical approach which is to defer to state laws on professional practice requirements and clinical standards of care."

Read the full article [HERE](#).

New! Psychotherapy Notes Excluded from Federal "Open Notes Rule?"

A new rule that prohibits "information blocking" for electronic health records takes effect April 5, 2021. Psychotherapists who use electronic health records (EHR) will have to comply with this federal rule requiring that health care providers give patients better access to their electronic health information (EHI). Exceptions to the Open Notes Rule include:

- Psychotherapists may exclude notes of any type that may cause harm to the patient or others should the patient have access. However, the rule specifically states that psychological distress does not meet the definition of harm (Torous, 2020).
- Psychotherapists who keep paper records will not be impacted.
- Any notes designated as “psychotherapy notes” are excluded from the Open Notes Rule as long as they are stored separately. However, if the psychotherapy notes reference content that is considered medical record notes, they cannot be blocked.
- Psychotherapists who used an uncertified EHR such as PsyBooks are not required to follow the Open Notes Rule.

The American Psychological Association further describes the application of the Open Notes Rule to psychologists here: [New federal rule affects psychologists with electronic health records.](#)

Read the full article [HERE](#).

New! Peer to Peer Connection Opportunity!



Please join CoE Office Hour – Rural Health Challenges during COVID-19. Rural America’s short supply of mental and behavioral health providers grows even thinner as the need for services rise amidst the COVID-19 pandemic. Rural health providers are doing all they can to reach those most in need in their communities, but the health disparities experienced by the 20% of rural Americans have only been amplified.

Please join us for our Office Hour session on Thursday, March 11th, from 2:00pm – 3:00pm ET to share your experiences and challenges with us in an open discussion with other rural health providers and experts. In this session, our panelists will share strategies they’ve used to provide culturally competent and equitable services in under-resourced areas through tele-health and mobile health innovations. We also hope to learn more about your community’s needs and opportunities, so please join us to have your voice heard. [Register Now!](#)

Education & Training Resources from Great Lakes MHTTC



Great Lakes (HHS Region 5)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

CMHA's partnership with SAMHSA funded Great Lakes MHTTC

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

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](#).

MHTTC upcoming webinar series: healing school communities in the context of racial violence: where do we go from here?

About the Learning Series: Healing School Communities in the Context of Racial Violence: Where do we go from here? is a two-part learning series intended for students, families, educators and school mental health professionals who are navigating the ongoing impact of racial violence in all forms on student mental health. More information at: <https://mhttcnetwork.org/centers/global-mhffc/healing-school-communities-context-racial-violence-where-do-we-go-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 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; (989) 390-2284
First Vice President: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124
Second Vice President: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451
Secretary: Cathy Kellerman; balcat19@live.com; (231) 924-3972
Treasurer: Randy Kamps; randyk@4iam.com; (231) 392-6670
Immediate Past President: Bill Davie; 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:

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