



Update

October 8, 2021

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CMH Association and Member Activities



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! AOT webinar video recording available

Recently MDHHS sponsored a webinar on Assisted Outpatient Treatment (AOT), designed to build awareness of the value and mechanics of the AOT process. Judge Milton Mack, State Court Administrator Emeritus with the Michigan Supreme Court, in introducing this recording, underscores the value of AOT, "My message is simple, the probate courts are in the best position to convene the community to improve the lives of those suffering from serious mental illness. Expanding the use of AOT, as is being done in some counties, would be a major step in reducing hospital and ER visits, as well as arrest and incarceration for those suffering from serious mental illness.:

The recording of the webinar can be found here.

New! CCBHC impact on states: new report is release

Recently, the National Council for Mental Wellbeing (CMHA and its members are longtime members of the National Council) recently release a CCBHC state-level impact report entitled, Transforming State Behavioral Health Systems: Findings from the Impact of CCBHC Implementation. State officials from the eight CCBHC demonstration states explore how adoption of the CCBHC model has transformed their substance use and mental health care delivery systems, including building workforce capacity and community- and state-level infrastructure needed for lowered costs and improved outcomes.

There are currently 42 states with CCBHC-Expansion grantees, an initial support for providers that may help build on or toward the state-based CCBHC model. Of those states, ten states are now part of the CCBHC demonstration, three states passed legislation to develop the CCBHC model, and multiple other states are in conversations on the CCBHC model as well. This includes the alignment of the CCBHC model and 988, the National Suicide Prevention hotline.

This report can be found here.



New! Justice from the start: improving maternal and infant health outcomes through birth equity: Michigan Health Policy Forum announces fall forum

The Michigan Health Policy Forum, a non-partisan venue to discuss health policy, hosted by Michigan State University recently announced its Fall 2021 Forum: Justice from the Start: Improving Maternal and Infant Health Outcomes through Birth Equity

Justice from the Start: Improving Maternal and Infant Health Outcomes through Birth Equity Monday, November 15, 2021 1:00-3:30 PM

This will be a virtual conference held via Zoom.

Birth equity is the effort to ensure optimal birth conditions for all and addresses the racial and social impact of the current disparities and inequities in birth outcomes for mothers and babies. Michigan has made strides in reducing both infant mortality and narrowing the disparity gap. More can and must be done. Please join us as we explore policy solutions that value all people fully and assure that everyone has the opportunity to achieve optimal health from the start.

The agenda can <u>found here</u>; the Zoom link will be sent at a later date. The speaker bios are <u>available</u> here.

Register for this forum here.

New! US Senators call on Congress to reimagine America's mental health care system

Two United States Senators, one Republican and one Democrat, have recently released a while paper that outlines their vision for significantly reforming mental healthcare in the United States, especially in light of the COVID-19 Pandemic. In an excerpt from that white paper, the Senators point out that, "Local communities have faced unprecedented challenges in their attempt to address increases in suicides, drug overdose deaths, and most alarmingly – pediatric mental health issues. A lack of Federal coordination and administrative burden often prevents local communities from addressing their current needs when they are happening, until it is too late."

The white paper can be <u>found here</u>.

New! Center for Accelerating Care Transformation formed

The MacColl Center for Health Care (with whom CMHA worked as part of the Robert Wood Johnson Foundation's Delta Center project) and the Kaiser Permanente Washington's Learning Health System Program recently announced that they are joining together under one roof in the service of equity and population health.

The new Center for Accelerating Care Transformation (ACT Center) is the next step in the evolution of the MacColl Center and the Learning Health System (LHS) Program.



Housed within Kaiser Permanente Washington Health Research Institute, the new ACT Center will focus on helping health systems achieve large-scale, equitable improvements in care. Our ultimate goal is to accelerate the adoption of evidence-based practices to improve health for people and communities everywhere.

The ACT Center is holding a ribbon cutting ceremony to announce its formation and to allow health care professionals and stakeholders, such as Weekly Update readers, to learn more about the work of the ACT Center.

When: Wednesday, November 3, 2021, 9 to 10 a.m. Pacific Time (12 noon to 1 pm Eastern Time) Join this event using any of the following methods:

Join on your computer or mobile app: Click here to join the meeting

Join with a video conferencing device: teams@evc.kp.org

Video Conference ID: 119 153 334 0 Call in (audio only): 213-533-9530 Phone Conference ID: 255 560 092#

State Legislative Update

View August's Legislative Video on CMHA's Website

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

Our August briefing features CMHA Associate Director, Alan Bolter, provides an update regarding the FY22 budget, and the Senate and House behavioral health redesign proposals.

To view the latest video, **CLICK HERE!**

New! House Democrats Launch Mental Health Listening Tour

Michigan State Rep. Felicia Brabec (D-Pittsfield) is set to start a two-month-long mental health listening tour, focusing on community-based mental health across the state. Brabec will be moderating the events as she and her fellow representatives engage with their constituents and interested stakeholders on how to improve their community-based mental health systems. Once the tour is complete, the recommendations and data gathered will be used to craft legislation that is inclusive of the whole state.

The tour has 11 stops, seven virtual via Zoom and four in person.

• Oct. 4, 5-6:30 p.m. via Zoom with state Rep. Laurie Pohutsky and special guests state Reps. Ranjeev Puri (D-Canton) and Cara Clemente(D-Lincoln Park).



- Oct. 7, 5-6:30 p.m. at the Kool Family Center with state Rep. Jim Haadsma (D-Battle Creek).
- Oct. 11, 5-6:30 p.m. via Zoom with state Rep. Sara Cambensy (D-Marquette).
- Oct. 14, 5-6:30 p.m. via Zoom with state Rep. Kelly Breen (D-Novi) and special guests state Reps. Samantha Steckloff (D-Farmington Hills), Brenda Carter (D-Pontiac), Regina Weiss (D-Oak Park), Jim Ellison (D-Royal Oak) and Padma Kuppa (D-Troy).
- Oct. 18, 5:30-7:00 p.m. via Zoom with state Rep. Christine Morse(D-Texas Township) and special guest state Rep. Julie M. Rogers (D-Kalamazoo).
 - Oct. 21, 5-6:30 p.m. via Zoom with state Rep. Rachel Hood (D-Grand Rapids).
- Oct. 25, 5-6:30 p.m. via Zoom with state Rep. Tenisha Yancey (D-Harper Woods) and special guests state Reps. Abraham Aiyash (D-Hamtramck), Helena Scott (D-Detroit), Stephanie A. Young (D-Detroit) and Mary Cavanagh (D-Redford Township).
- Oct. 28, 6-7:30 p.m. via Zoom with state Rep. Lori Stone (D-Warren) and special guest state Rep. Kevin Hertel (D-St. Clair Shores).
- Nov. 1, 5-6:30 p.m. at the Anderson Enrichment Center with state Rep. Amos O'Neal (D-Saginaw).
- Nov. 4, 5:30-7 p.m. at the Ingham County Human Services Building with state Rep. Kara Hope (D-Holt) and special guest state Rep. Julie Brixie (D-Meridian Township).
- Nov. 15, 5-6:30 p.m. at the Washtenaw County Learning Resource Center with state Rep. Felicia Brabec (D-Pittsfield Township) and special guests House Democratic Leader Donna Lasinski (D-Scio Township), Democratic Floor Leader Yousef Rabhi (D-Ann Arbor) and Rep. Ronnie Peterson (D-Ypsilanti).

If you would like to participate in these events reach out to Brooke Hansen in Rep Brabec's office at bhansen@house.mi.gov - (517) 373-1792.

Federal Update

New! New White Paper Outlines Senators' Bold Vision for Significantly Reforming Mental Health In America in Light of the COVID-19 Pandemic

U.S. Senators Michael Bennet (D-Colo.) and John Cornyn (R-Texas), members of the Senate Finance Committee, released "A Bold Vision for America's Mental Well-being," a white paper outlining a new framework for reimagining and redesigning how mental and behavioral health care is delivered in the United States. The white paper calls for a bold, unified national strategy that is based on smart resource planning and funding, and addresses the country's mental and behavioral health crisis through local community needs. The senators sent the new white paper to the Senate Finance Committee in a letter to Chairman Ron Wyden (D-Ore.) and Ranking Member Mike Crapo (R-Idaho) expressing their interest in working together this year to create a stronger mental and behavioral health care system for all Americans.

"Local communities have faced unprecedented challenges in their attempt to address increases in suicides, drug overdose deaths, and most alarmingly – pediatric mental health issues," wrote Bennet



and Cornyn in the letter. "A lack of Federal coordination and administrative burden often prevents local communities from addressing their current needs when they are happening, until it is too late."

"The Senate Finance Committee has a unique opportunity to create generational change for Americans today and to sustain this focus moving forward. We believe that there are deep, systemic issues with the way that mental and behavioral health services are delivered that warrants bold action to redesign the system and we should reject incremental changes," the senators continued. "We are hopeful we can create better mental and behavioral well-being for all in the United States."

The <u>new white paper</u> highlights how the Coronavirus Disease 2019 (COVID-19) pandemic exacerbated the mental and behavioral health crisis in this country, increasing poor outcomes across the entire human lifespan and magnifying disparities for underserved communities, including Black, brown, and LGBTQ+ communities. As demand increases in the short-term, the white paper calls for resources to address immediate needs, while urging smart policy and resource planning and a unified, bold strategy for collective mental and behavioral health improvement.

Bennet and Cornyn are proposing establishing a national strategy to modernize the U.S. mental and behavioral health system based on principles designed to:

Integrate mental health more seamlessly throughout delivery and financing options to assume better ease of access; Enhance delivery within local communities through innovative workforce and program modernization and coordination; Update mental and behavioral care programs to improve availability, cost management, and quality; and Improve how federal funds and other resources are planned for and allocated for to increase the return on our nation's investment through better mental and behavioral health outcomes.

The white paper also outlines key steps that Congress must take this year to improve mental and behavioral health.

- Step 1: Rapid Response: Congress needs to act in the short-term to address glaring and obvious needs that communities across the country are struggling to address during a national health emergency that continues to this day.
- Step 2: Relationship Adjustment: Congress should use the legislative process to reimagine the relationship between how the federal government funds and engages with local communities.
- Step 3: Redesign the System: Congress will establish a strategy for redesigning mental and behavioral health services in America, including improved funding mechanisms.
- Step 4: Reevaluate Continuously: Congress can use an annual update process to drive meaningful reform incrementally and improve the feedback loop between the American people's experience and the federal government's response.

To help inform a forthcoming legislative package, Bennet and Cornyn are seeking input from experts, community leaders, and constituents on policies to help achieve intended outcomes laid out in their white paper. Anyone may provide feedback to mentalhealth@bennet.senate.gov by October 8, 2021.

In July, Bennet and Cornyn <u>reintroduced</u> the Suicide and Crisis Outreach Prevention Enhancement Act, which would increase funding for the National Suicide Prevention Lifeline (NSPL) program to \$50 million



per year, provide greater flexibility for participants to raise awareness of the services they offer, and collect vital statistics to help understand and reduce disparities.

In June, Bennet and U.S. Senator Susan Collins (R-Maine) <u>introduced</u> the Medication Access and Training Expansion (MATE) Act to require prescribers of highly addictive medication, like opioids, to complete a substance use training to ensure they have foundational knowledge of addiction prevention, treatment, and medication management.

Read the full white paper **HERE**.

Education Opportunities

Registration Open: CMHA Hybrid Annual Fall Conference – October 25 & 26, 2021

The CMHA Annual Fall Conference, "Together we Thrive," will be held both in-person and virtual (hybrid) on October 25 & 26, 2021 at the Grand Traverse Resort in Traverse City, Michigan.



Safety, Mask & Well-Being information:

The health and safety of our attendees is our top priority. In Grand Traverse County the Community Transmission is HIGH. Per CDC recommendations, everyone in Grand Traverse County, Michigan should wear a mask in public, indoor settings. If you choose to wear a mask, please bring your own mask with you to the conference. CMHA will also have masks available if you choose to wear one. For additional information, visit our website and review the conference brochure by CLICKING HERE!

Hotel Reservations

There will be <u>NO PHONE RESERVATIONS</u>. When making your reservations, you will be charged one-night deposit.

Grand Traverse Resort: 100 Grand Traverse Village Boulevard, Acme, MI 49610-0404

Room Rates: Rates below do not include 6% state tax, 5% city assessment, or \$14.95 nightly resort fee Since it's past the deadline, there is no guarantee that these rates will still be available.



Room Type	Rate	Room Type	Rate
Hotel Guest room	\$143	Tower Guest Room	\$163
Studio Condo	\$143	1 Bedroom Condo	\$178
2 Bedroom Condo	\$208	3 Bedroom Condo	\$248

To make online reservations: https://www.grandtraverseresort.com/promocode?promocode=MHB2021

Deadline for Reduced Rate: Sunday, October 3, 2021

Cancellation Deadline & Policy: If you cancel 3 days prior to your arrival, your reservation is fully

refundable, minus a \$25 dollar processing fee.

Conference Registration:

Register for the Fall Conference by **CLICKING HERE!**

IN-PERSON REGISTRATION FEE (per person)

Full conference registration fee provides you with a program packet, admission to all keynote sessions, all workshops, 2 breakfasts, 2 lunches, welcome reception and all breaks.

	Member	Member After	Non-Member	Non-Member After
	Early Bird	10/15/21	Early Bird	10/15/21
In-Person Full Conference	\$418	\$458	\$500	\$549
In-Person One Day	\$323	\$363	\$387	\$435

VIRTUAL REGISTRATION FEE (per person)

If you choose to attend virtually, the conference will consist of a reduced number of sessions for virtual attendees (at a greatly reduced registration fee). The virtual conference will live-stream all 4 keynote addresses and 8 workshops specifically selected by CMHA for all virtual participants. Continuing education will be available for virtual sessions you fully participate in during the designated LIVE times. You will have access to the recordings for 30 days (no CEs for viewing recordings).

Virtual Conference Fee MEMBER: \$210 NON-MEMBER: \$250

VIRTUAL Ethics for Social Work, Substance Use Disorder, and Recipient Rights Professionals Training – Registration now open!

Community Mental Health Association of Michigan is pleased to offer VIRTUAL Ethics for Social Work, Substance Use Disorder, and Recipient Rights Professionals Trainings presented by Stephanie M Huhn MA, LLP, CBIS, CAADC, CCM, ACCTS 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:

- November 9th, 2021 (Register Here)
- January 18th, 2022 (Register Here)
- February 15th, 2022 (Register Here)
- March 15th, 2022 (Register Here)
- April 13th, 2022 (Register Here)
- April 19th, 2022 (Register Here)

Agenda:

Log into Zoom: 9:45am

Education: 10:00am – 12:30pm Lunch Break: 12:30pm – 1:00pm Education: 1:00pm – 4:30pm



Training Fees: \$130 CMHA Members \$153 Non-Members

VIRTUAL Pain Management Essentials: A Psychotherapeutic Approach – Registration now open!

Community Mental Health Association of Michigan is pleased to offer Pain Management Trainings presented by Stephanie M Huhn MA, LLP, CBIS, CAADC, CCM, ACCTS 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.

Agenda:

Log into Zoom: 12:45 pm

Education: 1:00pm - 3:00pm

Dates:

- October 19th, 2021 (Register Here)
- November 12th, 2021 (Register Here)
- January 25th, 2022 (Register Here)
- March 24th, 2022 (Register Here)
- April 27th, 2022 (Register Here)

Training Fees: \$53 CMHA Members \$61 Non-Members

Rural Michigan Opioid and Substance Use Disorder Summit

The Michigan Center for Rural Health is pleased to invite you to the Rural Michigan Opioid and Substance Use Disorder Summit in Traverse City, Michigan. This one-day event will allow participants to collaborate to increase their awareness of Rural Health best practices in the prevention, treatment, and recovery aspects of Opioid Use Disorder (OUD) and Substance Use Disorder (SUD).

Draft agenda can be found here.

When: Thursday, October 21, 2021 from 8:00 AM to 4:00 PM EDT

Where: Park Place Hotel-Traverse City

300 East State Street, Traverse City, MI 49684

HOTEL RESERVATIONS Park Place Hotel 231.946.5000

Block Code: Michigan Center for Rural Health or MIRH

Register here.

Benefits to Work Coaching Training – November 1-3, 2021 (Virtually)

This Benefit-to-Work Coach training begins with 9 self-paced online lessons which provide an overview of Benefit-to-Work Coach services, an overview of the Michigan specific Disability Benefits 101 (MI DB101) website (www.mi.db101.org), basic information about the benefits and program rules covered



on MI DB101, and procedures for verifying benefits. Upon successful completion of the self-paced lessons, the training proceeds to the live instructor-led training presented via Zoom. The live training is an interactive opportunity to reinforce and heighten clarity of the information from the self-paced lessons and focus on the role and skills needed to deliver Benefit-to-Work Coach services. This training is a specialized training and applications are available on the CMHA website here.

Behavioral Telehealth Resource Center

Telehealth Resource Center

Michigan's Behavioral Telehealth Resource Center serves to provide current information on telehealth policies, training, and engagement opportunities. Please visit the <u>Telehealth Resource Center webpage</u> to see new information and updated format. If you have content suggestions, please contact Amy Stagg at <u>astagg@cmham.org</u>.

New! Telefraud vs. Telehealth

In September, the Department of Justice (DOJ) <u>filed formal charges</u> against 138 defendants in multiple health care fraud cases. The largest fraud, resulting in \$1.1 billion in allegedly false claims, has been categorized as 'telemedicine fraud'. The actual fraud involved telemedicine companies paying doctors and nurse practitioners to order unnecessary durable medical equipment (DME) and other patient testing without patient interaction or based on a brief telephonic conversation. The fraud appears to be unrelated to the telehealth visit itself, and more to do with ordering of DME and testing. Earlier this year, the US Department of Health and Human Services (HHS) Office of Inspector General (OIG) released a <u>statement</u> that it is important to differentiate between 'telefraud' and telehealth.

Differentiating between telefraud and telehealth is important as policymakers look a making certain COVID-19 telehealth policies permanent, especially if there is a perception that recent fraud charges are directly related to those policy expansions. Inaccurate or mischaracterized information could lead to the creation of policies that treat and monitor telehealth services differently than other health care services, potentially limiting its use and reducing access to service for some patients. Telehealth services can be monitored and regulated in the same manner as other health care services. The difficulty in evaluating telehealth services often arises due to the inconsistent ways of tracking modality of care delivery. This is more of a data collection shortcoming rather than a monitoring issue. The HHS-OIG reports noted below highlights opportunities and challenges in providing and evaluation telehealth services.

Health and Human Services-Office of Inspector General (HHS-OIG) Report Release

The HHS-OIG has released two new telehealth reports, both related to the use of telehealth to deliver behavioral health services to Medicaid beneficiaries. HHS-OIG breaks up the study into two reports:



<u>Challenges with Using Telehealth to Provide Behavioral Health Services to Medicaid Enrollees</u>. This report highlights that additional provider and enrollee training, stable internet connectivity, addressing technology costs and policies around privacy of personal information will address challenges and help States meet the behavioral health needs of Medicaid enrollees.

<u>Opportunities to Strengthen Evaluation and Oversight of Telehealth for Behavioral Health in Medicaid</u>. This evaluation report takes a closer look at state data collection and evaluation efforts and notes that only a few states have evaluated the effects of telehealth on behavioral health services.

Both reports are based on surveys the HHS-OIG conducted with Medicaid Directors from 37 states and stakeholders in 2020. The HHS-OIG will apply the findings to support understanding and recommendations to the CMS around post-pandemic telehealth policy.

The lack of evaluation efforts around behavioral telehealth underscores the importance of the Behavioral Telehealth Resource Center (BTRC) survey efforts noted below. The BTRC is currently conducting a statewide telehealth satisfaction survey of persons served. We need all CMHA stakeholders to share the survey link and encourage participation in this important data collection tool. The consumer telehealth survey data will be used to provide statewide insights on behavioral telehealth usage and will inform CMHA's policy advocacy activities, including telehealth reimbursement. This survey is anonymous and does not ask for protected health information, ensuring the confidentiality and privacy of clients who respond to the survey.

Reminder! Action Requested: Telehealth Experience Survey Distribution by CMHs, PIHPs and Provider Alliance Members

CMHA wants to learn about client telehealth experiences. This information will help us provide the best support possible to local community mental health centers. An email has been sent to the CEOs of CMHs, PIHPs and Provider Alliance members asking for their help to **distribute this electronic survey**. Click here to view a flyer that can be distributed to clients and describes how to complete the survey electronically. This project is part of the Telehealth Resource Center and is supported by a grant from the Michigan Health Endowment Fund. The **Provider/Supervisor Telehealth survey is complete**, click here to view the report.

Telehealth Guide for Critical Access Hospitals

The Northwest Regional Telehealth Resource Center (NRTRC) and the National Rural Health Resource Center recently released the <u>Telehealth Guide</u> to provide practical guide to implement and sustain telehealth. This comprehensive guide includes expertise related to billing and reimbursement, vendor selection, health equity barriers and how to engage key stakeholders and assess privacy and legal issues.

Telehealth and Clinical Trials: Improving Diversity in Clinical Trials and Data Collection

The pandemic has magnified disparities within the healthcare system, including those related to clinical trial processes. The increased use of telehealth to improve access to care may have the ability to decrease disparities in clinical trial research. A recently introduced bill in Congress (H.R.5030Diverse



<u>Trials Act</u>) seeks to address this very issue. This bill would include a recommendation to: <u>"Include how to appropriately use digital health, such as telemedicine, to support clinical trials."</u>

Center for Connected Health Policy Trend Maps & Webinar Registration

The CCHP has updated its Policy Trend <u>maps</u>, which provide a snapshot of key telehealth reimbursement policies. These policies can also be compared by state.

\$500 Million in Emergency Rural Health Care Grants Available

The United States Department of Agriculture (USDA) is offering \$500 million in grants to help rural health care facilities and communities expand access to vaccines, **telehealth**, and various health care services. There are two types of grants available: <u>Recovery Grants</u> and <u>Impact Grants</u>. Use these links to learn more.

Education & Training Resources from Great Lakes MHTTC

CMHA's partnership with SAMHSA funded Great Lakes MHTTC



CMHA is the Michigan partner of the Greatly 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 <u>can be found here</u>.

The Great Lakes MHTTC products and educational offerings can be found at its <u>Products and Resources</u> <u>webpage</u>. This section of the MHTTC website hosts all Great Lakes MHTTC products along with products developed with their partner TTCs within the region and across the country.

New! Caring for Ourselves as We Care for Each Other

An extension of: Listening to Scientists and Our Grandmothers: Taking Care of Human Beings

October 20, 2021 - 3:00pm (*Eastern Time*)



The tightening pressures at work and at home can make caring for ourselves (and each other) as humans feel like a luxury so out of reach, it's naïve to consider. It may feel unsophisticated or outside of what we recognize as health or mental health standards of care. Caring for ourselves is not naïve or unsophisticated. It's our own social emotional learning work. It's cutting edge science.

In July 2021, the Southeastern Mental Health Technology Transfer Center (SEMHTTC; part of the national network of SAMHSA-funded Centers of which CMHA is the Michigan partner) released a video series presenting seven evidence-based self-care strategies currently most recommended to promote health and mitigate the impacts of stress.

To support the work of school staff and community partners during this difficult year of continuing pandemic stressors, SEMHTTC offers an interactive, virtual workshops integrating the video series with featured speakers and activities. In each two-segment session, we will review the evidence and best practice of a self-care strategy, and then engage with experts in the field to apply the practice in our own lives and teach the practice to others.

Register for this event here.

SAMHSA: Advancing Comprehensive School Mental Health Systems

As children go back to school, SAMHSA is also elevating mental health resources for supporting students and staffs, created by SAMHSA's grantees through its Mental Health Technology Transfer Centers, that address mental health and resiliency in school settings:

The <u>Back to School After COVID-19: Supporting Student and Staff Mental Health Toolkit (PDF | 4 MB)</u> helps guide conversations to include a trauma-informed, equitable, and compassionate lens to providing mental health supports to every member of the school community.

Behavioral Health Impacts During & After COVID-19: What to Expect and Ways to Prepare for the Return to In-Person Learning (PDF | 4 MB) presents information on the impact of COVID-19, what to expect as students return to school, and ways to prepare at the staff, building, and district levels.

<u>Strengthening School Communities for a Safe, Supportive Return: Part 2</u> covers strategies and best practices for school systems to promote student and staff resilience, wellbeing, and success, following COVID-related school closures. It also promotes cross-state networking and shared learning about best practices, successes, and challenges during learning modality transitions.

View more back-to-school resources.

SAMHSA training and technical assistance related to COVID-19 recovery and resilience

As part of CMHA's partnership with the SAMHSA-funded Mental Health Technology Center (MHTTC) provides Michiganders with access to a number of resources on how we all can recovery from and ensure resiliency as the state and nation comes out of the pandemic. These resources can be <u>found</u> <u>here</u>.



News from Our Preferred Corporate Partners

Relias: Understanding and Addressing Racial Trauma in Behavioral Health

Behavioral health professionals are trained to provide competent, effective, compassionate services. However, most have not been adequately educated on the impacts of racial discrimination, systemic oppression, and historical trauma, nor their profound implications for clinical practice.

Our course, <u>Understanding and Addressing Racial Trauma in Behavioral Health</u>, moves beyond the discussion of diversity and cultural competence by exploring current research and best practices for identifying implicit bias, understanding cultural contexts, and effectively addressing racial trauma with clients.

Watch a preview of the course to see the training in action here: https://bit.ly/2XosbA3

Abilita: Top Ten Times for a Communications Review

It's never a bad time to review your organization's communications technology expenses, and never a better time to enlist the help of a specialist. That's because there are certain milestones when not having a good handle on spending and inventory can result in the greatest financial risk.

Here are our top 10 scenarios for a Communications technology expense review and inventory update:

- Before a Move
- After an acquisition or merger with another company
- Upon Contract Renewal with Communications Service Providers (before and after)
- After Closing a Site
- When there are changes in Regulatory Charges
- When moving from Premise to Cloud-Based Services
- When Transforming Network Technology
- When a New Person is taking over responsibility for Communications Technology Management
- When changing to a new Data Center Provider
- When Employees Work from Home

For more details and what you might want to consider, download Abilita's Top 10 Times newsletter here. To get started now, contact your Abilita Advisor, Dan Aylward, at daylward@abilita.com for a zero-risk review of your technology systems and services.

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

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one



traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals move beyond trauma. Click here to request a demo.

CMH Association's Officers & Staff Contact Info

CMHA Officers Contact Information:

The Officers of the CMH Association of Michigan, in their commitment to fostering dialogue among the members of the Association with the Association's leaders, post their contact information below. 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.

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; <u>balcat19@live.com</u>; (231) 924-3972 Treasurer: Randy Kamps; <u>randyk@4iam.com</u>; (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:

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