



Michigan Association of **COMMUNITY MENTAL HEALTH Boards**

September 1, 2017

FRIDAYFACTS

TO: CMH and PIHP Executive Directors
Chairpersons and Delegates
Provider Alliance
Executive Board

FROM: Robert Sheehan, Chief Executive Officer
Alan Bolter, Associate Director

RE:

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WORK AND ACCOMPLISHMENTS OF MACMHB MEMBER ORGANIZATIONS

Leadership changes at DWMHA

Tom Watkins, President and CEO of the Detroit Wayne Mental Health Authority (DWMHA) left his post at DWMHA on August 31, 2017, as was announced earlier this year. A recent announcement from DWMHA outlines that, "He (Tom) extends his thanks and appreciation to our great staff and community partners-- together we have made significant strides in service to people in need. Collectively we have pursued our goal of being: Consumer and community focused, Data driven and Evidence-based."

We wish Tom the best in his future endeavors.

With Tom's leaving, DWMHA has announced that, "Dana Lasenby has been named Interim CEO effective September 1, 2017. She currently serves as the Acting Chief Operating Officer and has been a valued member of the Detroit Wayne Mental Health Authority (DWMHA) leadership team for nearly 10 years. Her experience includes serving for two years as the Director of Utilization Management for DWMHA where she oversaw annual evaluations and reviews, compliance with federal, state and regulatory requirements. Dana Lasenby has more than twenty-five years of experience working in both the public and private sector of the behavioral health field and her desire to see continued growth and improved quality of service for mental health consumers are paramount. She is a Limited License Psychologist. She also earned a Master of Business Administration from the University of Phoenix; Master of Arts in Counseling Psychology from Western Michigan University and a Bachelor of Arts in Psychology from Michigan State University."

We welcome Dana and wish her the best in her new role.

STATE AND NATIONAL DEVELOPMENTS AND RESOURCES

Section 298 update issued by MDHHS

Recently, MDHHS provided an update on the Section 298 initiative to stakeholders throughout the state. While the update was distributed to a large number of stakeholders, we are providing it, below, to ensure that you see it. As you know, MACMHB has been tracking the 298 developments and underscoring the need for MACMHB, its members, persons served, and a range of stakeholders to be involved in this effort. As we learn more on the status of the 298 initiative, we will pass it onto you.

Dear stakeholders,

Over the last two years, the Michigan health care community has been engaged in a statewide discussion on improving the coordination of physical health and behavioral health services. This discussion is known as the Section 298 Initiative. This initiative is based upon Section 298 in the Public Act 268 of 2016. Under Section 298, the Michigan Legislature directed the Michigan Department of Health and Human Services to develop a set of recommendations "regarding the most effective financing model and policies for behavioral health services in order to improve the coordination of behavioral and physical health services for individuals with mental illnesses, intellectual and developmental disabilities, and substance use disorders." MDHHS submitted a final report with recommendations for the Michigan Legislature on March 15, 2017.

The Michigan legislature approved a revised version of Section 298 as part of Public Act 107 of 2017. Under the revised Section 298, the Michigan legislature directed the Michigan Department of Health and Human Services to develop and implement up to three pilots and one demonstration model to test the integration of physical health and behavioral health services. The department will be working with stakeholders across the Michigan health care community to develop and implement the pilots and demonstration model over the next few years.

Under the revised Section 298 language, the Michigan legislature also directed the department to recruit a project facilitator to assist with the development and implementation of the pilots and demonstration model. The department has designated the Michigan Public Health Institute as the project facilitator for the Section 298 Initiative. The Michigan Public Health Institute will provide support to the department with supporting stakeholder discussions and managing the development and implementation process. Jo Anna Trierweiler will serve as the main project facilitator, and Jane Pilditch will serve as the co-facilitator.

The department will be working with the project facilitator to announce the next phase of the Section 298 discussion in September 2017. The next phase will focus on (1) the development of the structure of the pilot(s) and demonstration model and (2) the development of the evaluation process. The department will be also be

contracting with one of Michigan's research universities to support the evaluation process. The department will provide additional information about the next phase of the Section 298 Initiative in the near future.

We look forward to continuing to work with you on improving the coordination of physical health and behavioral health services for Michiganders. If you have any questions about this email or the Section 298 Initiative, please send an email to MDHHS-298@michigan.gov.

Sincerely, The Section 298 Team; Michigan Department of Health and Human Services

Governor creates COPE council

In follow up to recommendations from the Michigan Prescription Drug and Opiate Abuse Commission, Governor Snyder recently created the Council on Opioid and Prescription Drug Enforcement (COPE), to be chaired by Lieutenant Governor Brian Calley. The letter announcing the formation, makeup, and purpose of COPE can be found at: <https://tinyurl.com/ycqe4scf>

The National Association of State Mental Health Program Directors policy statement on tobacco cessation in all behavioral health treatment settings

The National Association of State Mental Health Program Directors (NASMHD) recently approved a policy statement on tobacco treatment in all behavioral health treatment settings making their campuses tobacco free. Tobacco use among people with mental health and substance use disorders is about twice the rate as the general population. Because of the devastating impact on their health (NASMHD) is asserting that all behavioral health settings must be tobacco free and integrate tobacco treatment.

ACMH announces annual conference

The Association of Children's Mental Health (ACMH) has recently announced the details of its annual conference. This announcement is provided below.

ACMH's "There is No Place Like Home" 2017 Conference Registration is now available online!

ACMH Annual Conference "There is No Place Like Home"
When: September 21, 2017
Time: 9:00 – 4:00 p.m.
Radisson Hotel & Conference Center
111 Grand Avenue - Lansing, MI

Conference registration is a bargain at \$40.00 and includes materials and lunch!

ACMH is thrilled to announce that Lorrin Gehring, a national expert in youth & family engagement, will be helping us to kick off our plenary session at this year's conference! Lorrin is a passionate leader and advocate with over 15 years of experience working within youth & family serving systems. At 14 she began advocating for youth voice and choice within the systems that serve them. Lorrin has served in a variety of roles as a national consultant on issues of youth engagement and has provided support to system of care communities throughout the country helping them build and support youth engagement & leadership for the young people they serve. Lorrin has also worked for the National Federation of Families for Children's Mental Health where she planned the Federation's first ever youth advocacy track at their annual conference. We are so pleased to have Lorrin join our program and know you won't want to miss this opportunity.

ACMH is pleased to welcome our friends from DHHS at this year's conference for their presentation "Families as Leaders in Children's Mental Health~ Following Parents & Youth Down the Yellow Brick Road."

Register today to take part in this and other great learning opportunities! <http://www.acmh-mi.org/events/acmh-annual-conference/>.

A limited number of family & youth scholarships will also be available. If you would like to request a scholarship to cover the cost of registration simply select the 'Parent & Youth Scholarship Request' ticket option on the registration page and complete the booking form.

Questions? Call the ACMH State Office at: 1-888-226-4543 or email: acmhterri@scbglboal.net

MMRMA offers training for mental health professionals and law enforcement on managing mental health crises

Below is a recent announcement from the Michigan Municipal Risk Management Authority (MMRMA) of its upcoming training on managing a mental health crisis.

Managing a Mental Health Crisis
September 26-27, 2017
8:00 a.m. – 5:00 p.m.
Doubletree Hotel – Bay City Riverfront
One Wenonah Park Place
Bay City, MI 48708
989-891-6000

Program Overview: This course is designed to provide participants with a better understanding of mental illness as it relates to law enforcement. Managing a Mental Health Crisis is a culmination of knowledge and skills developed by law enforcement and mental health professionals with the intention of promoting effective and high quality responses to mental health related incidents.

This course is designed as a “Train-the-Trainer” course that will allow participants to train other law enforcement professionals in their communities. This training is specifically designed for law enforcement and mental health professionals to train as a team and develop skills in which to train coworkers and members of other departments.

- Designed specifically for Michigan
- Allows for all officers to be trained
- Provides greater operational tools than many other training programs
- Endorsed by the State of Michigan’s Mental Health Diversion Council MCOLES approved and meets with MCOLES recommended annual officer trainings

Presenters: Dori-Ann Ference, Curriculum Development Coordinator
Massachusetts Police Training Commission – Programs & Standards Unit

Dr. Debra A. Pinals, Medical Director of Behavioral Health and Forensic Programs
Michigan Department of Health and Human Services
Director, Program in Psychiatry, Law and Ethics, University of Michigan

No Lodging Required

MMRMA Member \$25 per attendee

Lodging Included (2 nights - 9/25 and 9/26)

MMRMA Member \$75 per attendee

Breakfast, lunch and breaks will be provided each day. Participants will be on their own for dinner. Space is extremely limited – Non-members will be accommodated on a space available basis.

Registration: To register, please contact Sarah Pogorzelski at 734-513-0300 or spogorzelski@mrrma.org. Training teams should consist of 1 person from law enforcement and 1 person from community mental health. Partners should be identified prior to registration. For additional information on the content of training or the concept of training teams, please contact Tom Cremona at 313-670-3594 or tcremona@mrrma.org

MLPP announces annual policy forum on federal developments

The Michigan League for Public Policy (MLPP) recently announced its annual policy forum. MACMHB members and partners have found the League's annual policy forums to be both timely and valuable in making sense of the political and policy landscape in which they work. MACMHB is a co-sponsor of this year's policy forum and will be serving as a panelist following the keynote speaker's address. The MLPP announcement of the forum is provided below:

WHAT: What Happens in Washington Doesn't Stay in Washington

DATE: Wednesday, October 4, 2017

TIME: 1 – 4 p.m.

WHERE: Radisson Hotel, 111 N. Grand Avenue, Lansing, MI 48933

Please join us for our annual public policy forum, which will include a keynote address followed by breakout sessions.

As we all struggle to grasp the impact of federal policy decisions on people's lives here in Michigan, it is vital that we come together to share information and chart a course forward. Policies coming out of Washington, D.C., will have powerful consequences for our lives and work, and they will undoubtedly exacerbate inequities already present in our communities. We are excited to share that our keynote speaker will be Bob Greenstein, president of the Center for Budget and Policy Priorities, a nonpartisan research and policy institute in Washington, D.C. Bob will talk about the federal budget, policies being adopted in Washington and how those decisions will affect Michigan. He will specifically address anti-poverty programs that impact children and families.

Following Bob's keynote, we will break into three panel discussions on Education, Healthcare and Preserving Basic Needs. Our panelists represent a wide range of professional and personal experience in these topic areas.

Following Bob's keynote, we will break into three panel discussions:

- The Health of Healthcare featuring Laura Appel, Senior Vice President and Chief Innovation Officer, Michigan Health & Hospital Association; Bob Sheehan, Executive Director, Michigan Association of Community Mental Health Boards; Dizzy Warren, Executive Director, Enroll Michigan. Moderator: Jay Greene, Crain's Detroit Business.
- Preserving Basic Needs featuring Kate White, Executive Director, Michigan Community Action; Kait Skwir, Deputy Director, Food Bank Council of Michigan; Hassan Jaber, Executive Director, ACCESS. Moderator: Gilda Jacobs, CEO, Michigan League for Public Policy.
- Poverty, Racial Equity and Education featuring Tonya Allen, President & CEO, Skillman Foundation; Marijata Daniel-Echols, Director of the Center for Health Equity Practice, Michigan Public Health Institute; Brian Whiston, State Superintendent, Michigan Department of Education. Moderator: Erin Einhorn, Senior Correspondent, Chalkbeat Detroit.

Register for this free event at: <http://www.mlpp.org/presentations/public-policy-forum-online-registration>

Mental Health and Aging Project announces OCD training

The Mental Health & Aging Project will present a regional training at Saginaw Valley State University in Saginaw on Friday, September 22, 2017.

Laura M. Lokers, LMSW, will present "Identifying and Treating Obsessive Compulsive Disorder." The presentation will run from 10:00 AM to 4:00 PM with a one-hour break for lunch.

Registration deadline is September 15th. Click here to see the brochure:

http://www.lcc.edu/mhap/PROGRAMS/SAGINAW_SEPTEMBER_22_2017_WEB_FINAL.pdf

and Click here to register online: http://www.lcc.edu/mhap/forms/SAGINAW_regional_regis_9_22_2017.aspx

Continuing education hours are available for social workers and nurses. The registration fee is \$90.00 and includes continental breakfast, lunch and printed materials.

Note: Community Mental Health staff responsible for PASRR evaluations are eligible for reimbursement (to their agency) for the costs of attending this training, using the regular PASRR billing process through the MDCH Office of Nursing Homes/OBRA Programs.

Questions? Contact Matt Beha at BEHAM@LCC.EDU

IPPSR announces Policy Forum on Early Childhood Education

Below is a recent announcement, from the Institute for Public Policy and Social Research (IPPSR) at Michigan State University, on the upcoming public policy forum of interest of MACMHB members and partners who work in the field of early childhood development.

You are invited to join the Institute for Public Policy and Social Research (IPPSR) at Michigan State University for the first in a fall series of luncheon policy forums. On Wednesday, September 13, IPPSR will host a discussion of research-based policy options to consider for early childhood education that are focused on improving the odds for success among at-risk children.

Early Childhood Education for At-Risk Children: Discussions regarding early childhood education in Michigan are heard far outside of the classroom these days. Legislative deliberations focus on access to early education for the most vulnerable, on funding early education that specifically supports at-risk families, and on raising the bar on quality education as new research directs training for those working with Michigan's youngest citizens. The stakes are high as decades of research find that investment in childhood development improves young people's life outcomes and family well-being while saving tax dollars in the long run.

These research experts are invited to join us as panelist:

Bethany Wilinski, Assistant Professor, Department of Teacher Education, Michigan State University; Examines early childhood workforce experiences among teachers, volunteers, parents – and their impact on early learners. Author of "When Pre-K Comes to School: Policy, Partnerships, and the Early Childhood Education Workforce" (2017).

Amy Parks, Associate Professor, Teacher Education, Michigan State University; Focuses on young children's mathematical experiences, the resources parents draw on when supporting their children in mathematics, connections between emotional relationships and content learning in primary classrooms, and early, informal mathematical engagement.

Claire Vallotton, Associate Professor, Human Development & Family Studies, Michigan State University; Studies early development and integration of cognitive-linguistic and social-emotional skills provided through caregiver-child relationships, family structure, and culture. Focuses on improving training for the early child care professional and effective parental tools that support children's development.

The September forum will run from:

11:30 am to 1:30 pm

September 13, 2017

5th Floor Mackinac Room

Michigan's Anderson House Building

124 N. Capitol Avenue
Lansing,

A light lunch is provided on a first-come, first-serve basis. There is no charge to attend, but registration is required and seating is limited. Online registration is fast and easy at: <http://ippsr.msu.edu/public-policy/public-policy-forums/schedule-registration>

This forum is generously co-sponsored by The W.K. Kellogg Foundation. The foundation supports children, families and communities as they strengthen and create conditions that propel vulnerable children to achieve success as contributors to the larger community and society.

SAMHSA offers wellness measurement webinar

Below is a recent announcement, from the federal Substance Abuse and Mental Health Services Administration (SAMHSA) of an upcoming webinar on methods for customizing wellness tools to meet the needs of the cultures within our communities:

Webinar Announcement:

Customizing Wellness Tools for the Cultures in Your Community

Do You Know How to Customize Wellness Tools
to Meet the Needs of Your Community?

1:00 pm

September 14, 2017

If you work in the behavioral health field, you know there are many wellness tools available for helping improve outcomes for individuals with serious mental illness. Yet, for many provider organizations, the question remains: How do I customize this tool for my organization, my community, and the people I work to serve? Age, race, gender, sexual identity, geographic area, and other factors influence the uptake of a practice or policy at any organization.

Join SAMHSA's Program to Achieve Wellness on September 14 at 1pm ET for *Customizing Wellness Tools for the Cultures in Your Community* to hear from nationally-recognized experts about some of the best practices in modifying tools and evidence-based practices (EBPs) for specific populations. Webinar participants will hear about real world implementation experiences and outcomes from the use of culturally customized wellness tools, and have the opportunity to ask leading experts questions about the processes involved.

Moderated by Deborah Dennis, MA, Senior Consultant for Policy Research Associates, Inc., this webinar will feature:

- Deborah Altschul, Ph.D., University of Mexico, Department of Psychiatry and Behavioral Sciences, Division of Community Behavioral Health
- Poka Laenui, J.D., Hawaiian Perspectives
- Alan Rabideau, First Nations Behavioral Health Association

Register at:

https://princevents.webex.com/mw3200/mywebex/default.do?nomenu=true&siteurl=princevents&service=6&rnd=0.7436255024445271&main_url=https%3A%2F%2Fprincevents.webex.com%2Fec3200%2Feventcenter%2Fevent%2FeventAction.do%3FtheAction%3Ddetail%26%26%26EMK%3D4832534b0000004b7f41d9089ef23b7c0655e79f5b8f426c7a168199b63d0b77391b5a83d597c00%26siteurl%3Dprincevents%26confViewID%3D70554740851769332%26encryptTicket%3DSDJTSwAAAAThx6KKs-ZPbAxx27IOcqvq_GgLQZKwarP3djoel9qICq2%26

MHEF announces behavioral health award recipients

Below are excerpts from a recent press release from the Michigan Health Endowment Fund (MHEF) announcing the awarding of over \$6 million in grant dollars to projects focused on behavioral health and efforts to stem the opioid crisis.

Michigan Health Endowment Fund awards over \$6 million to address behavioral health, opioid crisis: The Michigan Health Endowment Fund (Health Fund) has awarded more than \$6 million dollars to 16 organizations across the state of Michigan, with a special focus on projects addressing the opioid crisis. Aimed at improving behavioral health services for children and older adults, the grants range in amounts from around \$150,000 to \$500,000. The awardee organizations serve communities in every region of Michigan, from Metro Detroit to Houghton County in the western Upper Peninsula.

Several of the grants support innovative approaches to addressing the opioid crisis and key issues around substance abuse, especially how they affect children. For example, the Michigan Public Health Institute (MPHI) was awarded \$412,347 to support mothers and babies struggling with Neonatal Abstinence Syndrome, caused when a newborn experiences withdrawal from a substance in the mother's system during pregnancy. Focusing on prevention, screening, and coordinating care, MPHI will develop the program in Saginaw and Marquette counties, using initial results to develop a replication guide that can be used in other communities.

"The opioid crisis is a statewide challenge in Michigan," said Health Fund Senior Program Officer Becky Cienki, who oversees the Behavioral Health Initiative. "No community or demographic is immune—Upper or Lower Peninsula, urban or rural, wealthy or economically struggling. We must develop evidence-based solutions that work for all populations."

The full press release, which includes the full list of grant award recipients, a good many of which are MACMHB members and partners, can be found at:

<http://healthendowmentfund.org/michigan-health-endowment-fund-awards-6-million-address-behavioral-health-opioid-crisis/>

Google announces efforts to distribute depression screening tool

Below is a recent press release on the announcement, by Google, of its effort to make the PHQ-9 (one of the most commonly accepted depression screening tools) available to its users who search for issues related to depression.

On August 23, 2017, Google, the world's most popular search engine, announced it would begin providing a validated mental health screening tool (ie widely accepted by science and medicine), called the PHQ-9, to internet users who search online for information on depression.

The PHQ-9 ("Patient Health Questionnaire-9" has 9 questions for patient to answer. It is widely used by doctors in primary care practices to screen for depression. And is in fact recommended by national health experts (U.S. Preventative Services Task Force, 2016) as one of several screening tools that can be considered for ALL adults over 18.*

Research shows the PHQ-9 does a good job of identifying people who are at risk of having depression, a highly treatable mental health condition. It allows doctors to measure levels of depression symptoms. Patients who complete the PHQ-9 receive a score indicating the severity of their symptoms which can then help a doctor's diagnosis and treatment plan if needed.

There are effective treatments for depression. NHMH - No Health w/o Mental Health highly recommends that those who complete the PHQ-9 online, then take their questionnaire results to their primary care doctor and discuss it with him/her to find out what it means and how you can be helped. Get a diagnosis and treatment in

the clinical setting. There are effective treatments for depression and other common mental disorders and the PHQ-9 will help speed you toward care and full functioning!

** PHQ-9 Questions:*

- 1. Little interest or pleasure in doing things?*
- 2. Feeling down, depressed or hopeless?*
- 3. Trouble falling or staying asleep, or sleeping too much?*
- 4. Feeling tired or having little energy?*
- 5. Poor appetite or overeating?*
- 6. Feeling bad about yourself -- or that you are a failure or have let yourself or your family down?*
- 7. Trouble concentrating on things, such as reading the newspaper or watching tv?*
- 8. Moving or speaking so slowly that others could have noticed? Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual?*
- 9. Thoughts that you would be better off dead or of hurting yourself in some way?*

SAMHSA convenes group to develop model continuum of care for adults with serious mental illness

Below is a recent article in Behavioral Healthcare, by Ron Manderscheid, the Executive Director of NACBHDD and NARMH (MACMHB is a member of both organizations), describing the work of SAMHSA to develop a model continuum of care for adults with serious mental illness.

Earlier this week, the SAMHSA Center for Mental Health Services convened about two dozen representatives from the field. The purpose was to provide advice to the agency on the development of a model continuum of care for adults with serious mental illness. Participants included representatives from states, counties, managed care, accreditors, the disciplines, providers, academia, the family and consumer communities, and other federal offices.

To a person, all members of the group concurred that such an effort is very important and that the center should undertake this work. Broad consensus also was expressed that the continuum should be developed as a set of principles and guidelines, and that the agency should help to implement these guidelines in the field.

The need for such guidelines is obvious. Currently, the nature and quality of care for persons with serious mental illness varies dramatically from place to place in the United States, at the same time that new demands are being placed on local systems almost every day. Moreover, services frequently are very fragmented, poorly coordinated, and almost always incomplete. Many rural areas offer no care at all.

Read more at: <https://www.behavioral.net/blogs/ron-manderscheid/model-continuum-care-adults-serious-mental-illness>

2017 PAC Campaign Update

Earlier this year we announced our 2017 CMH PAC campaign with the goal of increasing member participation. This year's campaign exceeded last year's contribution levels, but participation remained about the same. Last month we held the drawing for the Detroit Tiger box suite tickets donated by Muchmore Harrington Smalley Associates and the winner was... Lapeer CMH.

Congratulations to Lapeer CMH and thank you to all who generously contributed to the CMH PAC.

Just because the Tiger drawing has been completed does not stop the need for CMH PAC support. If you would still like to support our PAC efforts please mail your contribution to our office, below are the details:

Make checks payable to: CMH PAC ~ 426. S. Walnut St. ~ Lansing, MI 48933 (no corporate checks, please)

Thank you. Please feel free to contact Bob or Alan with any questions.

MDHHS DIRECTOR'S AWARDS FOR RECIPIENT RIGHTS

Since 2000, the Director of the Michigan Department of Health and Human Services has recognized the outstanding contributions of Recipient Rights staff, offices, or affiliate organizations on the overall impact on Michigan's Recipient Rights Protection system. Recognition is awarded in three categories:

Director's Award for Innovation in Rights Protection

Nominees for the innovation award will have created a new or different way of enabling the vision of recipient rights or of a rights office. This may include creating a valuable new process or product, constructing a different way of approaching old problems, creating a new solution for systemic problems, etc. As a result of this innovation, there has been an increased ability to better provide rights services either directly (such as when performing standard rights activities) or indirectly (such as if the innovation improves or enhances the operation of the rights office.) The nominee will also have shown a demonstrated willingness to share the innovation with others when possible.

Director's Award for Advocacy on Behalf of Mental Health Recipients

Nominees for the Advocacy Award will have made an outstanding contribution toward, or have gone to extraordinary means, to advocate on behalf of people receiving mental health services. This may include exceptional effort or initiative by the nominee directly advocating on behalf of an individual consumer or a group of consumers. It may also include extraordinary indirect advocacy, such as a rights office acting as a catalyst for positive change, inspiring other entities or systems within or outside of mental health, to realize their roles in championing the rights or needs of recipients.

Director's Award for Consumer Empowerment

A nominee for the Consumer Empowerment Award will have made a profound or uniquely positive difference in the lives of consumers, so that consumers are empowered to transcend the "world of disability" and live a life of self-advocacy. Due to the initiative or effort of the nominee, consumers will now be able to advocate for themselves, to the fullest extent possible, in the protection of their own rights, creating hope, control of their own lives, and a valuable place in society.

Nominees may be either: 1] Individuals, 2] Recipient Rights offices operated by MDHHS, CMHSP, or Licensed Private Hospitals/Units (LPH/U), or 3] Programs/projects contracted with, or associated with those agencies. Use the link below to download the nomination form. Deadline for nominations is August 15th. The honorees will be recognized during the Recipient Rights Conference in Kalamazoo on September 22nd. [MDHHS Director's Award Nomination Form](#)

Register now: Annual Recipient Rights Conference!

The 24th Annual Recipient Rights Conference, "United in Rights", will be held from September 19th-22nd at the Radisson Plaza Hotel and Suites in Kalamazoo.

The Pre-Conference session on Tuesday, September 19th will feature Lena Sisco, the author of "You're Lying! Secrets from an Expert Military Interrogator to Spot the Lies and Get to the Truth," and "Marine Scout Snipers; True Stories From U.S. Marine Corps Snipers". She is a former Department of Defense certified military interrogator and Naval Intelligence Officer. Entities she has trained and currently trains include: Naval Special Warfare, Customs and Border Protection, Drug Enforcement Administration, Department of Homeland Security, Defense Intelligence Agency, United States Marine Corps, United States Navy, United States Coast Guard, local and federal Law Enforcement Agencies, International Association of Arson Investigators, and numerous private sector companies. She trains people to "Be a Detecting Deception Expert, Be a R.E.B.L.E.™." The acronym R.E.B.L.E. stands for her 5-step detecting deception program that will teach you how to enhance your detecting deception skills and your confidence in detecting deception with the most accuracy a human can possess. Registration for the pre-conference session will be available for anyone

interested in body language skills, investigations, etc. The content will be appropriate for rights staff, APS and CPS investigators, hospital administrative staff, local and state police, etc.

The Conference's opening keynote speaker will be author and ethics expert Chuck Gallagher. Chuck's practical tested and time proven methods will enhance your personal and professional performance. What Chuck shares in his presentations, are understandings of not only "how to", but also "what motivates behavior"—behavior of individuals that can create personal and professional success. Some of the 26 conference breakout sessions include:

- Creating Inclusive Spaces for LGBTQ+ Community
- Medication, What Every Rights Officer Needs to Know
- Confidentiality and Recipient Rights: The Intersection of Federal and State Laws Impacting Patient Privacy
- AFC Licensing Issues

Details about the conference can be found at: [24th Annual Recipient Rights Conference](#)

LEGISLATIVE UPDATE

Bill Would Add Fetuses to Child Abuse Law

Legislation introduced by Rep. Daniela Garcia would protect fetuses under the state's child abuse law in certain situations. The bill, HB 4877, which was referred to the House Law and Justice Committee, would close a legal loophole created by a Court of Appeals decision that determined the use of narcotics while pregnant was not a crime, a statement from Ms. Garcia (R-Holland) said.

The bill would provide affirmative defenses to expectant mothers, allowing them to avoid prosecution if they enroll in a recovery program before giving birth. The bill would allow a second defense of completing a court-ordered drug treatment program.

"My ultimate goal is to help these women who are addicted to controlled substances, which will help the babies they are carrying," Ms. Garcia said. "We have to protect all children from abuse, regardless of age or the type of abuse, and that includes working with the expectant mothers."

She said the bill was inspired by an Ottawa County law enforcement official expressing frustration because of limited options when a mother takes a controlled substance that harms or kills the fetus. The bill would also increase flexibility for law enforcement to decide on charges involving drugs and unborn children.

Opioid Antagonist Rules Update

The Department of Licensing & Regulatory Affairs has published proposed permanent rules for a statewide standing order for dispensing opioid antagonists. (There is currently an emergency rule set in place until November.)

This standing order was issued pursuant to Michigan law which allows the chief medical executive to issue a standing order that does not identify particular patients at the time it is issued, for the purpose of a pharmacist dispensing the opioid antagonist naloxone.

This standing order is intended to ensure that individuals within the State of Michigan who are at risk of experiencing an opioid-related overdose, or who are family members, friends or other persons who are in a position to assist a person at risk of experiencing an opioid-related overdose, are able to obtain naloxone.

There will be a public hearing on these proposed rules, although that date is not yet set. As required by law, there is also a published "regulatory impact statement" for the proposed rules, which is also below.

http://w3.lara.state.mi.us/orr/Files/AdminCode/1714_2017-039LR_AdminCode.pdf

NATIONAL UPDATE

National Council Submits Comments on New Medicare Payment Rule

Last week, the National Council submitted comments to the Centers for Medicare and Medicaid (CMS) on a proposed rule that will make changes to Medicare's Quality Payment Program (QPP) in 2018. The QPP, which went into effect on January 1, 2017, includes two paths to payment for eligible clinicians who bill Medicare using the Physician Fee Schedule: The Merit-based Incentive Payment System (MIPS), and Advanced Alternative Payment Models (APMs). By moving from volume-based payment to payment for quality and value, both systems change the way behavioral health providers are reimbursed under Medicare Part B.

The 2018 proposed rule included several changes to QPP that will benefit behavioral health providers, including increasing the QPP low-volume threshold, which will exempt solo practitioners and smaller Medicare practices from participation. The 2017 low-volume threshold exempts individual clinicians and clinician groups that serve 100 or fewer Medicare beneficiaries, or bill Medicare \$30,000 or less per year. The National Council expressed its support for the proposed increase in this threshold, which would exempt individual clinicians and groups who serve fewer than 200 Medicare beneficiaries or charge Medicare less than or equal to \$90,000 in 2018.

The National Council also praised CMS's proposal to award bonus points for small practices (defined as fewer than 15 clinicians), rural practices, clinicians who practice in a medically underserved area, and practices that serve high-risk populations. The National Council was also pleased to note that the proposed rule applies an adjustment of 1 to 3 bonus points by adding the average Hierarchical Conditions Category (HCC) risk score to eligible clinicians' final MIPS score, which will benefit behavioral health providers who serve a disproportionately high risk patient population.

The National Council also expressed support for the establishment of "virtual" clinician groups, defined as a combination of two or more Tax Identification Numbers (TINs) composed of a solo practitioner or a group with fewer than 10 eligible clinicians. The National Council believes that the ability to form virtual groups will enable solo behavioral health providers and those in small practices to share resources, and will reduce their reporting burden. In their first year, the proposed rule states that virtual groups will not be limited in size, and may define their own composition, without restrictions on geography or specialty.

The National Council also recommended modifications to each MIPS performance category, including the addition of behavioral health-related measures. While the National Council strongly supported CMS's expansion of the Mental/Behavioral Health specialty measure set from 10 measures to 25 measures in last year's final rule, we encouraged CMS to consider expanding the measure set by adding the following behavioral health quality measures in 2018:

- Follow-up after Discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence (National Quality Forum (NQF) #2605)
- Alcohol Screening and Follow-up for People with Serious Mental Illness (NQF #2599)
- Tobacco Use Screening and Follow-up for People with Serious Mental Illness or Alcohol or Other Drug Dependence (NQF #2600)
- Body Mass Index Screening and Follow-Up for People with Serious Mental Illness (NQF #2601)
- Controlling High Blood Pressure for People with Serious Mental Illness (NQF #2602)

- LDL Screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications (NQF 1927)
- Diabetes screening for people with schizophrenia or bipolar disorder who are using antipsychotic medications (NQF 1932)
- Adherence to mood stabilizers or people with bipolar I disorder (NQF 1880)
- Use of multiple concurrent antipsychotics (HEDIS 2016)
- Follow-Up After Emergency Department (ED) Visit for Mental Illness (HEDIS 2017)
- Follow-Up After Emergency Department Visit for Alcohol and Other Drug Dependence (HEDIS 2017)

18th Annual Substance Use and Co-Occurring Disorder Conference

To register for the conference go to <https://tinyurl.com/ya5qgh6f>

To register for the Pre-Conference Institute #1: Improving Outcomes for Youth with Opioid Use Disorders - click on to the following link: <https://tinyurl.com/y9cnvzqo>

To register for the Pre-Conference Institute #2: Nebraska Collegiate Consortium: Reducing College Students High-Risk Drinking and Related Harms with a Multi-institutional Data Driven Network - click on to the following link: <https://tinyurl.com/y9m79ja3>

This event is sponsored by the Michigan Department of Health and Human Services, Behavioral Health & Developmental Disabilities Administration, Office of Recovery Oriented Systems of Care, and facilitated by the Community Mental Health Association. If you have questions, please contact Annette Pepper at apepper@macmhb.org or call 517-374-6848.

Payment will be required prior to attendance. Payment methods available in advance and onsite: credit card, check or exact cash. If payment has not been received prior to the event, fees will be collected at registration the day of the event unless alternate arrangements are pre-approved by MACMHB. NOTE: Purchase orders are not considered payment. All no shows will be invoiced the full registration amount. All checks can be made out to MACMHB and sent to MACMHB, 426 S. Walnut, Lansing, MI 48933.

Cancellation Policy: Cancellations must be received in writing at least 10 business days prior to the conference for a full refund less a \$15 administrative fee. If cancellation is received less than 10 business days prior to the training, no refund will be given and the full charge will be incurred. Substitutions are permitted at any time.

Continuing Education Credits:

Social Work: The Michigan Association of Community Mental Health Boards (MACMHB), provider #1140, is approved as a provider for social work continuing education by the Association of Social Work Boards (ASWB) www.aswb.org, through the Approved Continuing Education (ACE) program. MACMHB maintains responsibility for the program. ASWB Approval Period: 10/10/2016 to 10/10/2019. Social workers should contact their regulatory board to determine course approval. Social workers participating in this course will receive 14 Clinical Continuing Education Clock Hours. Course Delivery Method: Face-to-Face conference. Social Workers participating in the pre-conference institutes (9/24/17) will receive 3 credit

hours. Social workers may receive a maximum of # PENDING continuing education clock hours for participating in the full conference (9/25-26/17).

Substance Abuse Professionals: MACMHB is approved by Michigan Certification Board for Addiction Professionals (MCBAP). MACMHB maintains the responsibility for the program and content. Substance Abuse Professionals participating in the pre-conference institutes (9/24/17) will receive 3 Specific contact hours. Substance Abuse Professionals participating in this full conference (9/25-26/17) may receive a maximum of # PENDING contact hours.

Certificate Awarded: At the conclusion of this conference, turn in your Verification of Attendance form to the MACMHB Staff to be initialed. You will turn in the top sheet and retain the bottom sheet which serves as your certificate of participation.

Who Should Attend: This conference attracts more than 1,000 attendees including board members, oversight policy board members, administrators, financial directors, medical directors, clinical directors, prevention, treatment and recovery professionals, case managers, recovery coaches and those with lived experience. This educational opportunity is intended for publicly and privately funded providers in the substance use and co-occurring disorders field at all levels of practice (beginning, intermediate and/or advanced).

Register for Hill Day 2017

The time to protect our nation's most vulnerable populations is now, and we know that our voices are louder together.

Join us at Hill Day 2017, October 2-3, the nation's largest behavioral advocacy event, to stand up and be heard on mental health and addictions.

[Register today.](#)

Fired up and ready to go now? Start honing your advocacy skills by taking action today on our [Unite4BH page](#).

MACMHB committee schedules, membership, minutes, and information go to our website at <https://www.macmhb.org/committees>

Have a Great Weekend!