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## **CMH Association Activities:**

### **CMHAM Committee Schedules, Membership, Minutes, And Information**

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

## **State and National Developments and Resources:**

### **Additional Michigan CCBHC Award Recipient's Named**

Earlier this month, the federal Substance Abuse and Mental Health Services Administration (SAMHSA) announced the designation of additional Certified Community Behavioral Health Centers (CCBHC) award recipients, including a number in Michigan. With these additional award recipients, all of which are members of this Association, Michigan now boasts 7 CCBHCs. We look forward to the work of these organizations, and CCBHCs across the country, in ensuring access to care and high quality mental health services.

The Michigan CCBHC award recipients include:

- Community Mental Health Authority of Clinton, Eaton & Ingham Counties
- Community Network Services, Inc.
- Easter Seals-Michigan
- Healthwest
- Guidance Center
- Kalamazoo Community Mental Health And Substance Abuse Services
- West Michigan Community Mental Health System

### **Opportunity to Receive Grant-Funded Consultation on Rate Restructuring to Support Competitive Integrated Employment For Persons With IDD:**

The State of Michigan has established an Employment First policy priority. In the FY 2018 and 2019 State of Michigan budgets, funds for this policy priority are appropriated to support the objectives stated in Executive Order No. 2015-15 titled Employment First in Michigan. Part of the fund are targeted to assist CMHSPs with rate restructuring that can advance Employment First. In FY 2016 Oakland Community Health Network was chosen to participate in a rate restructuring initiative that was part of Michigan's involvement with the US Department of Labor Office of Disability Employment Policy (ODEP) Employment First State Leadership Mentoring Program (EFSLMP). This work was replicated with four (4) other interested CMHSPs in FY2018 and will now be continued in FY2019. This creates an opportunity for up to six (6) new CMHSPs to receive no-cost technical assistance for rate restructuring to support the Employment First philosophy.

Follow is the link of the Employment in Michigan page. All of the information and forms for the Rate Restructuring technical assistance opportunity for CMHSP's:

[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_4868\\_4897-370719--,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_4868_4897-370719--,00.html)

RFP due: October 31, 2018

# CMHA WEEKLY UPDATE

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Submit the documents attached to:

Michigan DD Council  
320 South Walnut Street, Lansing, MI 48910  
Attention: Yasmina M. Bouraoui, Deputy Director

Questions should be directed to Yasmina M. Bouraoui, at E-mail: [bouraoui@michigan.gov](mailto:bouraoui@michigan.gov);  
(517) 284-7291.

## MDHHS Seeks Comment on Proposed Policies

The following proposed policies, relevant to the work of this Association's members, have been issued for public comment. The proposed policy and the method for submitting comments are available by clicking on the links, provided below:

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### Notices of Proposed Policy

Comment Due Date	Notice Number	Subject
November 8, 2018	<a href="https://www.michigan.gov/documents/mdhhs/1841-PE-P_635099_7.pdf">1841-PE https://www.michigan.gov/documents/mdhhs/1841-PE-P_635099_7.pdf</a>	Enforcement of Medicaid Provider Enrollment Requirement for Medicaid Health Plan and Dental Health Plan Typical Providers
November 6, 2018	<a href="https://www.michigan.gov/documents/mdhhs/1838-Eligibility-P_634843_7.pdf">1838-Eligibility: https://www.michigan.gov/documents/mdhhs/1838-Eligibility-P_634843_7.pdf</a>	Guardianship/Conservator Fee
November 1, 2018	<a href="https://www.michigan.gov/documents/mdhhs/1836-BH-P_634373_7.pdf">1836-BH: https://www.michigan.gov/documents/mdhhs/1836-BH-P_634373_7.pdf</a>	Standard Consent Form
October 19, 2018	<a href="https://www.michigan.gov/documents/mdhhs/1835-HMP-P_633433_7.pdf">1835-HMP: https://www.michigan.gov/documents/mdhhs/1835-HMP-P_633433_7.pdf</a>	Rescinding the MI Marketplace Option
September 12, 2018	<a href="https://www.michigan.gov/documents/mdhhs/L_18-48_632858_7.pdf">L 18-48: https://www.michigan.gov/documents/mdhhs/L_18-48_632858_7.pdf</a>	Centers for Medicare & Medicaid Services (CMS) Extension of Transition Period for Compliance with the Home and Community-Based Settings (HCBS) Requirement

### EVV Policy Released

L 18-53 - Electronic Visit Verification.

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This letter has been sent to Home Health, MI Choice, Integrated Care Organizations, Community Mental Health Service Programs, Prepaid Inpatient Health Plans, Home Help Agency and Individual Providers.

RE: Electronic Visit Verification

The purpose of this letter is to inform affected Medicaid providers of changes related to the passage of the 21st Century Cures Act (Public Law 114-255, Section 12006 (b)). Federal law mandates Medicaid agencies implement an Electronic Visit Verification (EVV) system for personal care services (PCS) and home health care services (HHCS). Medicaid providers will be required to use an EVV system for in-home visits rendered to Medicaid beneficiaries effective January 1, 2020, for PCS and January 1, 2023, for HHCS. EVV applies to PCS provided under Sections 1905(a)(24), 1915(c), 1915(i), 1915(j), 1915(k), and Section 1115; and (HHCS) provided under Section 1905(a)(7) of the Social Security Act or a waiver. This federally-mandated requirement is for the prevention of fraud, waste, and abuse.

PCS are provided for individuals who need assistance with Activities of Daily Living (ADL) such as bathing, dressing, toileting, mobility, or feeding. PCS can also include assistance with Instrumental Activities of Daily Living (IADL) such as personal hygiene, light housework, laundry, meal preparation, transportation, grocery shopping, using the telephone, medication and money management. IADL may be performed specific to each program. These services are provided by individual caregivers or agency providers.

HHCS are provided for individuals who require limited part-time or intermittent medically necessary care as ordered by the physician certifying the need for home health services. These services are provided on an intermittent basis through a Medicare-certified home health agency.

There are six required data elements that the EVV system must verify:

- Type of service performed;
- Individual receiving the service;
- Date of the service;
- Location of service delivery;
- Individual providing the service; and
- Times the service begins and ends.

The Michigan Department of Health and Human Services (MDHHS) has identified the following programs that will be affected by EVV:

- Home Help
- Home Health
- Children's Waiver\*
- Habilitation Supports Waiver\*
- Waiver for Children with Serious Emotional Disturbances\*
- MI Choice Waiver
- MI Health Link

\*These programs provide Behavioral Health Community Living Supports services.

EVV Exemptions:

The Centers for Medicare & Medicaid Services (CMS) has identified the following exemptions to EVV.

- PCS provided to inpatients or residents of a hospital, nursing facility, intermediate care facility for individuals with intellectual disabilities, or an institution for mental diseases;

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- PCS provided in congregate residential settings where 24-hour service is available;
- Program of All-Inclusive Care for the Elderly (PACE); and
- Congregate settings that utilize per diem reimbursements.

MDHHS made the decision that the EVV system used for Michigan Medicaid will be an open vendor model, which is a hybrid model. In other words, MDHHS will develop an EVV product based on existing functionality of the Medicaid claim system that will be available to providers but will also accept input from systems that providers might already have in place. MDHHS will operate its own EVV system. Providers will have the option of using the MDHHS system or continuing to use their own EVV technology, meaning the open vendor model allows providers with existing EVV technology the flexibility to maintain use of their current systems.

MDHHS has not made any decisions on the specifics on the EVV system such as:

- What the system might look like;
- How it will operate;
- What standards external systems must meet; or
- How EVV data might be shared with MDHHS from external systems.

At this time, no action is needed by providers or agencies. MDHHS will reach out to stakeholders for input. Providers are encouraged to stay informed and follow updates regarding EVV in Michigan through the website [www.Michigan.gov/EVV](http://www.Michigan.gov/EVV).

Questions regarding EVV can be submitted to MDHHS by email to [MDHHS-EVV@Michigan.gov](mailto:MDHHS-EVV@Michigan.gov). The MDHHS Medical Services Administration (MSA) notifies affected providers of policy changes and updates based on contact information in CHAMPS. Providers currently enrolled in CHAMPS may verify contact information by logging into CHAMPS and navigating to "Provider Basic Information" and "Primary Practice Location" to view email addresses. For steps on changing contact information; visit [www.Michigan.gov/Medicaidproviders](http://www.Michigan.gov/Medicaidproviders) >> Provider Enrollment. For questions regarding or problems with changing contact information; Home Help providers should call 1-800-979-4662. All other providers should call the CHAMPS Provider Support Hotline at 1-800-292-2550.

An email ListServ is also available for providers wanting to receive automated announcements regarding the Michigan Medicaid Program (i.e., changes to policy, training opportunities, etc.). Providers may access subscription instructions on the MDHHS website at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> click "ListServ Instructions" under Hot Topics. ListServ instructions are also attached to this correspondence.

### **Michigan Rehabilitation Services Recognizes Champions who Show Value of Hiring Employees who have Disabilities**

Below is an excerpt from a recent press release recognizing a number of Michigan employers for their work with employees with disabilities.

A former Michigan Career and Technical Institute student from Allegan County who works as a welder and an Adrian man who earned a cyber security degree were among the honorees today at the annual Champions Award ceremony.

Champions of outstanding commitment to Michigan's public vocational rehabilitation programs for people with disabilities gained recognition at the annual event.

Michigan Rehabilitation Services (MRS) within the Michigan Department of Health and Human Services collaborated with the Michigan Council for Rehabilitation Services to recognize employers, partners and customers. MRS presented its 10th annual Champion Awards at an event at the Anderson House Office Building in Lansing.

MRS offices around the state nominated champion candidates. The consistent theme from those nominated was demonstration of the value of hiring and retaining vocational rehabilitation customers.

The event is part of Investing in Abilities Month in October, as proclaimed by Gov. Rick Snyder to encourage employers to hire qualified people with disabilities while focusing on their abilities and increasing the public's awareness of the contributions and skills of Michigan workers with disabilities. The 2017 MRS Champion Award recipients are:

**Customers (including youth) who are motivated and committed to finding and keeping jobs:**

- Keegan Linton, Plainwell, who is a welder at Schupan & Sons in Kalamazoo. Linton studied machine technology at the Michigan Career and Technical Institute, an MRS school in Barry County for adults with disabilities to explore job training in specialized fields.
- David Mayne, Adrian, a single father of four who became disabled in 2013 and later attended Jackson College, receiving associate degrees in cyber security and general studies and a networking specialist certificate.

**Business partners from large businesses that are working in innovative ways with MRS and its customers:**

- Walgreens – Southfield and Flint.
- S. Forest Service Ottawa National Forest – Ironwood.

**Business partners from small businesses that are working in innovative ways with MRS and its customers:**

- Right Brain Brewery – Traverse City.
- Morley – Saginaw.

**Community partners who have demonstrated a strong commitment to empowering individuals with disabilities to take charge of their futures:**

- Lakestate Industries – Escanaba.
- Sickle Cell Disease Association – Detroit.

**Statewide Community Partners who have demonstrated a strong commitment to empower individuals with disabilities to take charge of their futures:**

- Joe Quick – Michigan Works!, Lansing.

MRS assists individuals with disabilities to achieve competitive employment and self-sufficiency. This is the 98<sup>th</sup> anniversary of the vocational rehabilitation program in Michigan.

For more information about MRS or the Michigan Career and Technical Institute, visit [www.michigan.gov/MRS](http://www.michigan.gov/MRS) or [www.michigan.gov/MCTI](http://www.michigan.gov/MCTI).

### **Michigan-based Poet Celebrates World Mental Health Day**

October 10 was World Mental Health Day, celebrated around the world by organizations including the World Health Organization, underscoring the importance of mental health to the wellbeing of individuals, families, and communities around the world. Closter to home the following poem, in

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celebration of this day, was written by Michigan-based poet and social worker, Kelsey Janaye Lehman. Because it speaks to the issues central to the work of this Association, we are reprinting this poem here

If you've felt the pain  
Of heart-pounding, chest-crushing  
Breath-stealing panic

If you've battled lies  
Wrestled against your own mind  
Grasped for truth's freedom

If you've felt pressed down  
Exhausted by existing  
Hope wearing thin

If you've gotten trapped  
In the snares of fear and dread  
Helpless to face it

If you've gotten stuck  
In your mind's darkest corners  
And can't find the light

If you've lost loved ones  
Who didn't have the patience  
Couldn't understand

If you've ever heard  
"Are you even trying? Stop!!  
Just get over it!"

If you've been consumed  
By parasites of the mind  
Stealing from your life

If you've ever wept  
Praying and pleading for peace  
Desperate for relief

If you've ever thought  
"Nobody will accept me,  
I'm just not enough."

If you've felt alone  
Stigmatized, rejected, lost  
Today is for you

You are brave, dear one  
A fierce, mighty warrior  
Stronger than you know

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Waging wars unseen  
Battling internal storms  
Fighting for freedom

Some haven't felt it  
So they believe it's not real  
But they don't matter

Here today I say:  
You are seen and you are heard  
You are strong. So strong.

You are not alone  
And you are not defenseless  
It will get better

Everybody needs  
To take care of their own selves  
Your needs matter too

Just because your care  
Looks different from someone else  
Doesn't mean it's wrong

Therapy is cool  
Getting help is courageous  
Medicine can help

Let go of the shame  
Stop holding yourself hostage  
In your cell of "shoulds"

I know that it's hard  
Sometimes you want to give up  
But please remember

Your mental illness  
Is never telling the truth  
About who you are

We would be amazed  
If we could physically see  
All that you've conquered

You, dear one, are more  
Than your illness, than your fears  
More than your struggles

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You are so much more  
Than diagnoses, labels,  
And stupid stigmas

You are brave, dear one  
A fierce, mighty warrior  
Stronger than you know

[#ahaikuaday2018](#) [#worldmentalhealthday](#) [#mentalhealth](#) [#mentalhealthmatters](#) [#beatthestigma](#)

### **Behavioral Healthcare Workforce Takes Center Stage**

Below is an excerpt from a recent blog, by Ron Manderscheid, Executive Director, NACBHDD and NARMH, carried in Behavioral Healthcare Executive on the recognition, by a growing number of policy makers and healthcare industry observers, of the mental health workforce shortage.

Within a single month this fall, the behavioral health workforce will have been the subject of three conferences. These include the annual National Dialogue on Behavioral Health in New Orleans later this month, as well as a pair of recently completed events—a Kaiser Permanente Health Policy Forum (Sept. 27 in Washington, D.C., and a US Department Health and Human Services Health Resources and Services Administration (HRSA) meeting (Oct. 1 in Rockville, Maryland). The burning question is why all of this attention to a topic that only usually receives short shrift at best.

It will come as no surprise to you that the behavioral health workforce has been moving toward a crisis for almost a decade. Baby boomers, who have comprised a very large segment of this workforce, now are retiring in very large numbers. At the opposite end, millennials are having difficulty establishing careers for themselves in the field. And in between, some Generation Xers are experiencing the trauma of moving from the role of clinician to that of manager.

But why all of this attention right now?

Read more at: <https://www.behavioral.net/blogs/ron-manderscheid/policy/behavioral-healthcare-workforce-takes-center-stage>

### **CVS's \$69 Billion Merger with Aetna is Approved in Deal that Could Transform Health-Care Industry**

Below is an excerpt from a recent news story on the changing healthcare landscape.

Antitrust officials gave CVS the green light on Wednesday to purchase Aetna, the nation's third-largest health insurance company, in a \$69 billion deal that could potentially transform the health-care industry and change how millions of Americans receive basic medical services.

The Justice Department approved the deal on the condition that the companies sell off Aetna's Medicare Part D prescription drug business.

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The tie-up will allow CVS — whose retail pharmacy business serves 5 million customers a day — to turn more of its brick-and-mortar locations into front-line clinics for basic medical services and patient monitoring. By deepening its knowledge of and relationships with patients, CVS has said the combination could help Americans stick with medication regimens and stay out of the hospital.

Driving that new approach to care will be the immense amounts of data generated not only by CVS's 9,800 retail outlets and 1,100 MinuteClinics but also from Aetna's 22 million medical members.

The result could make CVS a destination for more than flu shots and treatment of minor illnesses.

"Our focus will be at the local and community level," CVS chief executive Larry Merlo said in a statement, "to intervene with consumers to help predict and prevent potential health problems before they occur."

Much of the U.S. health-care system revolves around fixing costly ailments. But in trying to head off the worst cases, CVS and Aetna are aiming to become a part of the nation's social fabric, using the local retail pharmacy as both a window into people's lives beyond the doctor's office and assuming the role of a health-care assistant.

The full article can be found at:

[https://www.washingtonpost.com/technology/2018/10/10/justice-department-approves-cvss-billion-merger-with-insurance-giant-aetna/?utm\\_term=.10a8c4fafca4](https://www.washingtonpost.com/technology/2018/10/10/justice-department-approves-cvss-billion-merger-with-insurance-giant-aetna/?utm_term=.10a8c4fafca4)

## **State Legislative Update:**

### **General Fund Revenues \$454M Above Projections For FY18**

Income, business and other tax revenue that gets steered into the state's General Fund was up \$87.7 million beyond projections in September, meaning the state's coffers are \$454 million more than expected for FY18, according to House Fiscal Agency (HFA) data released this week.

The revenues going into the School Aid Fund was \$20.4 million below projections in September, FY18 year-to-date revenue collections at \$14.1 million below projections. The reason is lagging lottery transfers, State Education Tax (SET) and liquor tax revenue, according to the HFA.

Although Sept. 30 was the end of FY18, Michigan uses accrued accounting. October revenues will accrue back to FY18 and a final total on how much extra is in the General Fund until book closing in mid-December.

Collections from Michigan's major taxes, penalties and interest, and lottery transfers totaled \$2.65 billion in September, \$53.4 million more than September 2017.

For FY18, collections are \$1.02 billion or 4.8 percent higher than during FY17. September net income tax revenue totaled \$1.03 billion and are through September are 7.6 percent higher than the same period

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during FY17.

Business taxes are \$44.1 million higher through September than a year ago. Michigan Business Tax (MBT) collections are \$86.5 million ahead of last year. However, Corporate Income Tax (CIT) revenue through September is \$72.5 million below last year's collections -- CIT growth is less negative than projected, the HFA reported.

Revenue from consumption taxes, which consist of the sales tax, the use tax, beer and wine taxes, liquor taxes, and tobacco taxes, totaled \$915.7 million in September and are collectively \$255.1 million higher than FY17 year-to-date.

Year-to-date sales tax revenue remains above FY17 -- although the growth rate is still below the May 2018 consensus projection. In contrast, use tax revenue has already exceeded the consensus estimate.

Although liquor tax collections appear to be lagging last year's amounts, it can likely be attributed to timing issues in recording collections as opposed to reflecting a persistent decline.

### **Federal Update:**

#### **Congress Passes Major Opioid Package**

House and Senate leaders announced an agreement on legislation to address the nation's opioid addiction crisis. The bipartisan agreement ([H.R. 6](#)) supports many National Council priorities, including expanding access to treatment, strengthening the behavioral health workforce and supporting behavioral health information technology. The package also reveals the fate of controversial measures on the Institutions for Mental Disease (IMD) rule and the privacy of substance use disorder (SUD) treatment records that Congressional lawmakers and staff have worked through over the last several weeks.

#### REACTION

While the National Council for Behavioral Health (National Council) is pleased to see many important policy changes included in the final opioid package, it ultimately falls short on providing desperately needed long-term investments in prevention, treatment and recovery services. In particular, the National Council is disappointed that Congress missed this opportunity to expand the current eight-state, two-year [Certified Community Behavioral Health Clinic \(CCBHC\)](#) program via the Excellence in Mental Health and Addiction Treatment Expansion Act. This program has shown [tremendous results](#) in expanding access to comprehensive addiction services in a sustainable way.

#### WHAT'S IN?

Throughout Congress' efforts to address the opioid crisis, the National Council has been advocating for a number of important measures, many of which have been included in the final compromise bill:

The National Council was pleased to see the following measures in the package:

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- The Special Registration for Telemedicine Clarification Act will remove barriers to accessing medication-assisted treatment (MAT) for opioid use disorders via telemedicine in rural and frontier areas and is a direct result of National Council advocacy efforts.
- The Substance Use Disorder Workforce Loan Repayment Act will create incentives for students to pursue addiction treatment careers, increasing timely access to treatment for individuals living with addiction. This legislation was introduced as a result of education and advocacy by the National Council and the Association for Behavioral Healthcare in Massachusetts.
- Improving Access to Behavioral Health Information Technology Act incentivizes behavioral health providers to adopt electronic health records (EHRs). The National Council has been working for passage of this legislation since 2009, when behavioral health was left out of a law that created financial incentives for providers and hospitals to implement EHR systems to improve patient care.
- Ensuring Access to Quality Sober Living Act requires the Substance Abuse and Mental Health Services Administration to disseminate best practices for operating recovery housing to states and help them adopt those standards. The National Council has been a longtime supporter of imposing more robust standards. To this end, in partnership with the National Alliance for Recovery Residences, we recently issued *Building Recovery: State Policy Guide for Supporting Recovery Housing* to assist states with the creation of recovery housing certification programs that standardize recovery housing operations to protect and support residents.
- Improving Access to Mental Health Services Act will allow behavioral health National Health Service Corps participants to work in schools and other community-based settings, thereby lowering barriers to access, particularly for rural and frontier communities.
- MAT Prescribing Expansions: The package pulls a provision from the TREAT Act and the Addiction Treatment Access Improvement Act to expand access to medication-assisted treatment (MAT), which is considered the gold standard of opioid use disorder treatment. Together, these measures will: 1) eliminate the sunset date for nurse practitioners' (NPs) and physician assistants' (PAs) prescribing authority for buprenorphine (a MAT medication), 2) temporarily expand the definition of "qualifying practitioner" to prescribe buprenorphine to include nurse anesthetists, clinical nurse specialists, and nurse midwives, 3) permit a DATA-2000 waived-practitioner to start immediately treating 100 patients at a time with buprenorphine (in lieu of the initial 30 patient cap) if the practitioner meets certain requirements, and 4) codify a change that expanded the number of patients that a physician can treat with buprenorphine at any one time to 275 patients, up from 100 patients. A separate provision would also ensure physicians who have recently graduated in good standing from an accredited school of allopathic or osteopathic medicine, and who meet the other training requirements to prescribe MAT, can obtain a waiver to prescribe MAT.
- Medicare SUD Treatment Access: The bill creates a demonstration project that would allow Medicare beneficiaries to receive MAT and certain wraparound services at an Opioid Treatment Program (OTP), also known as a methadone clinic. Currently, OTPs are not recognized as Medicare providers, meaning that Medicare beneficiaries receiving MAT at OTPs must pay out-of-pocket.

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- **IMD Rule Changes:** The National Council was pleased to see a provision to temporarily repeal the Institutions for Mental Disease (IMD) exclusion, a policy that prohibits Medicaid payment for residential SUD and mental health care in facilities with more than 16 beds, broadened to cover residential treatment of all substance use disorders, rather than just opioid use disorders. The repeal would last for five years, and cover patient stays of up to 30 days within the previous 12 months. The provision also contains strict maintenance-of-effort requirements. Again, the National Council is disappointed to see little investment in community-based services that ensure patients can maintain a successful recovery after exiting inpatient treatment.

A controversial measure to loosen 42 CFR Part 2, the regulation governing the privacy of SUD treatment records, was not included in the final bill.

The final compromise opioid package contains over 70 opioid-related bills. For a more comprehensive summary of the package's provisions, please see the [section-by-section summary here](#).

## **Education Opportunities:**

### **CMHAM Annual Fall Conference**

2018 Annual Fall Conference

FACING THE FUTURE TOGETHER

October 22 & 23, 2018 at the Grand Traverse Resort, Traverse City, Michigan

REGISTER FOR THE CONFERENCE HERE:

<https://cmham.ungerboeck.com/prod/emc00/register.aspx?OrgCode=10&EvtID=5123&AppCode=REG&CC=118041126516>

HOTEL RESERVATION: The Grand Traverse Resort is currently SOLD OUT.

Overflow Hotel Information:

West Bay Beach Hotel

615 E Front St, Traverse City, MI 49686

\$109.95 + taxes

Deadline for this special rate: Tuesday, October 16, 2018

To book your room: call (800) 888-8020 and identify yourself as members of:

Community Mental Health Association of Michigan (CMHAM)

### **Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019**

Community Mental Health Association of Michigan is pleased to offer 6 Ethics for Social Work & Substance Use Disorder Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC.

***This training fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for ethics.***

***This training fulfills the MCBAP approved treatment ethics code education – specific.***

Trainings offered on the following dates.

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- November 7 – Lansing [Click Here to Register for November 7](#) *Full – Registration Closed!*
- January 23 – Lansing [Click Here to Register for January 23](#)
- February 20 – Lansing [Click Here to Register for February 20](#)
- March 13 – Lansing [Click Here to Register for March 13](#)
- April 24 – Troy [Click Here to Register for April 24](#)

Training Fees: (fee includes training material, coffee, lunch and refreshments).

\$115 CMHAM Members

\$138 Non-Members

### **Annual Home and Community Based Waiver Conference: November 13-14**

Registration is open for the 2018 Annual Home and Community Based Waiver Conference November 13-14, 2018 at the Kellogg Hotel and Conference Center in East Lansing.

Click Here to Register:

<https://cmham.ungerboeck.com/prod/emc00/register.aspx?OrgCode=10&EvtID=5208&AppCode=REG&CC=118101003651&REGTYPE=4002-51&REGTYPE=TUESATTENDEE&REGTYPE=4002-22&REGTYPE=4002510>

Who Should Attend: This conference contains content appropriate for case managers, supports coordinators, clinicians, behavior analysts, administrative staff, providers, autism coordinators, people receiving services and family members and social workers at all levels of practice (beginning, intermediate and/or advanced).

Conference Rate: Full Conference is \$170. One day rate is \$100. Rates include breakfast and lunch and materials. (Yes, we will be making photocopies of presentations that we have received).

Special Rate: A special \$20 conference rate will be offered for people receiving waiver services and their family members. A limited number of scholarships are available to people who receive services and their families. Scholarships may cover registration fees, overnight rooms, travel expenses, meals and child care. Deadline to request scholarship: October 17, 2018. To request a scholarship form, contact Anne Wilson at [awilson@cmham.org](mailto:awilson@cmham.org) or 517-374-6848.

Overnight Accommodations: The Kellogg Hotel & Conference Center is located in East Lansing adjacent to Michigan State University. Please call 517-432-4000 and mention that you are attending the C-Waiver Conference, the discount code is 1811DCH&MA. As of the afternoon of October 12, much of the room block has sold out however the Kellogg has other rooms at a higher rate. We are working on an overflow hotel at the State Per Diem Rate. The overflow will be listed on our website.

### **Michigan Developmental Disabilities Council – Upcoming Events**

The Michigan Developmental Disabilities Council is hosting learning opportunities and a train-the-trainer session November 26-28, 2018, at the Kellogg Hotel & Conference Center in East Lansing, MI.

#### **Monday, November 26<sup>th</sup> [Charting the Course to Employment Summit](#):**

Join us to learn about Charting the LifeCourse and the roles we hold in our day-to-day lives to support individuals with Intellectual and Developmental Disabilities (IDD). You will learn about key principles for

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supporting individuals and engaging families to enhance a person-centered approach for planning and supporting life experiences that will provide preparation for employment.

### **Tuesday, November 27<sup>th</sup> [Train-the-Trainer: Family Engagement around Employment and Partnering with Families around employment:](#)**

The Michigan Employment First Initiative has sponsored the creation of two training resources to build the capacity of educators, employment professionals and advocates in Michigan to better engage families around employment. This event will provide curriculums and presenter notes for each.

### **Wednesday, November 28<sup>th</sup> [Charting the LifeCourse Community Wide Event:](#)**

Join us for this interactive, hands-on workshop to learn about tools that can be used at every life stage to enhance a person-centered approach for planning and supporting life experiences that support a person to reach their vision of the life they choose.

The cost to attend each day is \$20. There are scholarships available for self-advocates and family members. Please call the DD Council office at 517-335-3158 to request a scholarship. [Registration](#) deadline is November 16<sup>th</sup>. Space is limited so please register ASAP!

Please contact Yasmina Bouraoui at [bouraouiy@michigan.gov](mailto:bouraouiy@michigan.gov), with questions related the Employment Summit and Family Engagement Train-the Trainer, or Tracy Vincent at [vincentt1@michigan.gov](mailto:vincentt1@michigan.gov) with questions about the Charting the LifeCourse Community wide Event.

### **Crain's Health Care Leadership Summit**

Every year, Crain's Health Care Leadership Summit focuses on one key theme affecting today's health care industry. This year's summit will examine not just how Michigan's \$2 billion in Medicaid mental health funding should flow, but how best to tie together and manage health care for both body and mind across the spectrum of our health care system.

Register: <https://www.crainsdetroit.com/hcsummit>

Crain's Health Care Leadership Summit:  
Body and Mind: How Best to Coordinate Mental and Physical Health

Monday, October 15, 2018  
The Henry, Dearborn, Michigan  
8:00am - 1:00pm

Keynote Speaker:  
Eric Hipple, Director of Outreach, After the Impact Fund Former Detroit Lions Quarterback

### **NASW-Michigan's Legislative Education and Advocacy Day November 1st in Lansing (5.5 CE)**

Join together with hundreds of social justice advocates from around Michigan for the largest annual gathering of social workers in the state! This all-day event features an advocacy oriented keynote address, networking opportunities, social justice forums, and 16 workshops on legislative issues, political action, and advocacy efforts. 5.5 CEs (1 in pain available) will be awarded to social work licensed attendees. The event is held at the Lansing Center November 1 from 9-4:40. Register here: <https://bit.ly/2OTRmED>

## HMA Health Home Webinar

Medicaid Health Homes:

Lessons from the Field for Successful Development, Implementation

Tuesday, October 30

1 to 2 p.m. EDT

Health Homes have been implemented in at least 22 states under the federal Medicaid Health Home state plan option, and initial results illustrate the potential for meaningful improvements in the quality and cost of care associated with serving individuals with chronic physical, mental, or behavioral conditions.

During this webinar, HMA experts will discuss some of the key lessons learned in these early Health Home initiatives, with a special emphasis on the experience in New York and the District of Columbia. The webinar will also provide practical solutions for the successful development, implementation, and refinement of Health Home care models.

Register at:

[https://hlthmgtevents.webex.com/mw3300/mywebex/default.do?nomenu=true&siteurl=hlthmgtevents&service=6&rnd=0.7676331623259461&main\\_url=https%3A%2F%2Fhlthmgtevents.webex.com%2Fec3300%2Feventcenter%2Fevent%2FeventAction.do%3FtheAction%3Ddetail%26%26%26EMK%3D4832534b000000046f8f14a68d20fa9e8f9cc19491cb0c92c8c43252bd1b733a494e509be83e6027%26siteurl%3Dhlthmgtevents%26confViewID%3D108054679401823579%26encryptTicket%3DSDJTSwAAAAT-wTLZTXroGU\\_unq-ett74Gw6YDzKZbHVPphsj6Qk6fw2%26](https://hlthmgtevents.webex.com/mw3300/mywebex/default.do?nomenu=true&siteurl=hlthmgtevents&service=6&rnd=0.7676331623259461&main_url=https%3A%2F%2Fhlthmgtevents.webex.com%2Fec3300%2Feventcenter%2Fevent%2FeventAction.do%3FtheAction%3Ddetail%26%26%26EMK%3D4832534b000000046f8f14a68d20fa9e8f9cc19491cb0c92c8c43252bd1b733a494e509be83e6027%26siteurl%3Dhlthmgtevents%26confViewID%3D108054679401823579%26encryptTicket%3DSDJTSwAAAAT-wTLZTXroGU_unq-ett74Gw6YDzKZbHVPphsj6Qk6fw2%26)

## Miscellaneous News and Information:

### **Job Opportunity: Michigan Healthy Transitions (MHT) Project Director**

**Purpose:** To coordinate a grant-funded initiative to provide the Transition to Independence Process (TIP) model in Kalamazoo and Kent counties by collaborating with the Substance Abuse and Mental Health Services Administration (SAMHSA), MDHHS, the Association for Children's Mental Health (ACMH), the Community Mental Health Services Providers (CMHSPs) in Kalamazoo and Kent counties, Stars Training Academy (TIP model purveyor), the MPHI Evaluation Team and the MHT Leadership Team and stakeholders.

**Experience:** Experience with supervision and oversight of an evidence-based practice. Familiarity with Transition to Independence Process Model preferred. Experience providing community-based mental health services to children and their families. Public mental health system experience preferred. Excellent written and oral communication skills. Demonstrated coordination and organizational skills.

For more information, [Click Here!](#)

**Michigan Protection & Advocacy Service, Inc. (MPAS) is seeking an Executive Director**

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Michigan Protection & Advocacy Service, Inc. (MPAS) is seeking an Executive Director to lead this non-profit organization responsible for providing legally-based protection and advocacy services that advance the rights of individuals with disabilities in Michigan. The position is located in Lansing, MI. MPAS' next Executive Director will continue to advance the high-quality advocacy, legal representation, and connection with the disability rights and social justice communities in the state. Must have a commitment to the mission of MPAS and to the rights of people with disabilities.

### **Minimum Qualifications:**

- Candidates with strong non-profit or legal services experience and a Bachelor's Degree from an accredited college in Business Management, Psychology, Social Work, Public Administration, or another human service related field with minimum of ten years of experience, or Master's Degree or JD and seven years' experience.
- A minimum of seven to ten years of leadership experience in a complex organization that includes engaging in strategic planning, management, development and supervision of personnel, financial planning, and monitoring internal controls for a multi-funded budget.

### **Application Process:**

- Candidates should send a current resume and cover letter detailing the candidate's interest in the position, describing any experience with people with disabilities, and noting relevant leadership experience to [mbrand@mpas.org](mailto:mbrand@mpas.org)
- Electronic submissions are preferred. Mailed submissions may be addressed to Michele Brand, Michigan Protection & Advocacy Service, Inc., 4095 Legacy Parkway, Suite 500, Lansing, MI 48911 or via fax at 517-487-0827.
- MPAS offers a competitive salary and benefits package. Position is open until filled.
- MPAS is an equal opportunity employer with a commitment to diversity. People with disabilities are encouraged to apply.

For more information, please visit our website: <https://www.mpas.org>.