

January 4, 2019

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CMH Association and Member Activities:

Leadership changes at Northpointe

Jennifer Cescolini has recently taken on the role of CEO of Northpointe Behavioral Healthcare Systems, replacing Jennifer McCarty. We wish Jennifer the best in this new role.

New CEO named at Macomb County CMH

Dave Pankotai has recently been named as the incoming CEO for Macomb County Community Mental Health Services. We wish Dave the best in this role.

CMHAM Committee Schedules, Membership, Minutes, And Information

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

News from Our Corporate Partners:

Documentation, Prove it!

It’s difficult enough to find the resources to stay on top of compliance for a smaller organization. Covered entities also must be prepared to provide proof of compliance at a certain point in time. Are you prepared to provide proof that a virus scan was ran 2 years ago? Or that you had HIPAA awareness posters hung in the hallways a year ago? Documenting that you did something isn’t enough. If audited, OCR wants to see a picture, a log file, etc. to prove that what you documented occurred. Compliance software is available to you through CMHA’s partner Abilita to assist in organizing and retaining that documentation. Reach out to the CMHAM to get help today!

Abilita is the leader in telecommunications consulting and endorsed by CMHAM since 2011 to help members reduce risks, costs and prevent your staff from wasting their time. Abilita evaluates HIPAA technology risks and can insure you are in compliance without wasting your staffs’ time. In addition, we reduce your telecom costs by 29% with no upfront costs or risk. Abilita is an independent consulting company with offices across Michigan and North America! As one of the largest independent Communications Technology consulting firms in America, Abilita has the experience needed to help members by not just identifying, but by managing the

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implementation of recommendations you approve. For additional information, contact: Dan Aylward, Senior Consultant, Abilita at 888-910-2004 x 2303 or dan.aylward@abilita.com.

State and National Developments and Resources:

CMS approves Healthy Michigan Plan Waiver For Another 5 Years

Below is an excerpt from a recent press release announcing the approval, by the Centers for Medicare and Medicaid Services (CMS) of the extension of the Medicaid waiver that supports the Healthy Michigan Plan, Michigan's Medicaid expansion initiative.

The federal government signed off on the state's amended waiver for the Healthy Michigan program, meaning the Medicaid expansion program will continue with the addition of legislatively-imposed work requirements.

Gov. Rick SNYDER's office today announced the approval from the Centers for Medicare and Medicaid Services (CMS) that will mean continued health coverage for the program's 663,000 beneficiaries for the next five years, through Dec. 31, 2023.

State law stipulates that if the federal government rejects the waiver request, or it's determined to be noncompliant with state law, the entire Healthy Michigan program would end.

"The Healthy Michigan Plan has been a success story that can be a model for the entire country on how to assist people in leading healthier lives," Snyder said in a statement. "I am pleased that we will be able to continue this initiative that improves health outcomes for Michiganders and removes barriers to employment and self-sufficiency."

Changes to the waiver go into effect in 2020, and include an increase in cost-sharing and a continued commitment to healthy behaviors, according to the Governor's office. The Healthy Michigan-enabling legislation also created the work requirements that would "closely mirror" current cash and food assistance program work requirements, the Governor's office said.

"I'm thrilled to support Gov. Snyder and his commitment to helping Michigan adults on Medicaid achieve better health and independence through work and community engagement," CMS Administrator Seema VERMA said in a statement. "This renewal and amendment of the Healthy Michigan Plan will also support a comprehensive effort to improve outcomes through their enhanced healthy behavior incentives, and I expect this program may serve as another model for states looking to tackle the drivers of poor health."

5th Annual Michigan Peer Conference call for presentations

MDHHS recently issues the 2019 Call for Presentations for the 5th Annual Michigan Peer Conference that will be at the Lansing Center on May 8-10, 2019 in Lansing, MI. The conference theme is "People, Purpose, and Passion: Celebrating Success" to promote and advance statewide collaboration, partnerships, and connections. Presenters that are selected will receive a complimentary conference registration for the day of their presentation. To obtain an presentation contact MDHHS at billipsr1@michigan.gov, complete the application, and submit it via **email to billipsr1@michigan.gov or fax it to 517-335-1233 by the deadline of February 8th, 2018.**

MIPAD update

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MDHHS recently provided an update on the Michigan Inpatient Psychiatric Admissions Discussion (MIPAD). Excerpts from that update are provided below.

The department has been working on implementing several projects over the last few months that are based upon the workgroup recommendations. MDHHS has made significant progress on several of the recommendations, which are outlined below:

MDHHS worked with the Certificate of Need Commission to convene a workgroup to review the methodology for psychiatric beds and services, and the workgroup has met four times over the last few months and continues to make progress on revising the standard.

MDHHS promulgated a new set of network adequacy standards for specialty behavioral health services which includes standards for Assertive Community Treatment and Crisis Residential services.

MDHHS published a new policy bulletin to require Medicaid providers to accept, honor, and use the standard consent form for sharing behavioral health information for care coordination purposes. MDHHS is also partnering with the Michigan Health Endowment Fund and Altarum Institute to expand education and outreach efforts on privacy laws and regulations around sharing behavioral health information.

MDHHS partnered with the Michigan Health and Hospital Association to establish a workgroup to develop a standard protocol for medical clearance. MDHHS and MHA posted the draft version of the new Medical Appropriateness for Psychiatric Admission Guide for stakeholder input this week.

MDHHS is continuing to work on updating the Hospital Rate Adjustor payment to align with the federal managed care rule and also use more accurate measures of inpatient psychiatric service utilization.

MDHHS has been working with the Michigan legislature to pass legislation to authorize the development of a psychiatric bed registry. The Michigan legislature passed House Bill 5439 yesterday, which supports the development of the registry. MDHHS will continue to work with stakeholders in the new year on the design of the registry.

MDHHS has assigned responsibility for implementing these projects to specific agencies within the department, and the various agencies will continue to work on implementing these projects in 2019. MDHHS has also acquired a significant amount of experience and identified several lessons learned during the initial implementation process, and MDHHS will use this information to guide the implementation of the new Michigan Psychiatric Care Improvement Project and other future statewide efforts to address the crisis. MDHHS will continue to consult and partner with stakeholders on implementing the projects. For more information about the Michigan Psychiatric Care Improvement Project, please visit at the department's website at the link below.

[Michigan Psychiatric Care Improvement Project](#)

MDHHS and MHA announce development of draft framework for medical assessment of psychiatric patients

Below are excerpts from a recent announcement, by MDHHS, of an effort to standardize the medical clearance practices in the process of admitting persons to inpatient psychiatric units.

The Michigan Department of Health and Human Services (MDHHS) and Michigan Health & Hospital Association (MHA) today announced they are seeking feedback on guidelines designed to standardize the process of

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evaluating emergency department patients in psychiatric crisis and reduce barriers to accessing inpatient psychiatric services.

The guidelines for the Medical Appropriateness for Psychiatric Admission Guide were developed as part of a larger statewide effort known as Michigan Inpatient Psychiatric Admissions Discussion (MIPAD). The document provides a framework for the medical assessment of individuals who are in psychiatric crisis and present at the emergency department.

“Securing inpatient psychiatric services for individuals presenting in emergency departments has become increasingly complex and time consuming over the last decade,” said Dr. George Mellos, MDHHS’s director of Behavioral Health and Developmental Disabilities Administration. “As part of a growing trend in Michigan and across the nation, psychiatric patients most in need of inpatient services often face the longest wait to transition to an appropriate care setting.”

The trend, commonly referred to as emergency department boarding, occurs for a host of reasons. In Michigan, the MIPAD workgroup identified medical clearance – the clinical process of performing a medical, surgical and/or psychiatric evaluation on an individual presenting in an emergency department – as one of the barriers to timely access to inpatient psychiatric services. Upon further evaluation, the MIPAD workgroup reached the following conclusions:

The requirements for the medical clearance process vary significantly from hospital to hospital. Disagreements between emergency department clinicians and admitting providers over whether an inpatient psychiatric unit can provide appropriate and safe care to individuals with co-occurring conditions frequently leads to breakdowns in the admissions process.

To address the medical clearance barrier, MDHHS and MHA convened a multidisciplinary clinical workgroup comprised of nurses, doctors and specialists in emergency medicine, psychiatry, psychology and pediatrics, along with administrative experts in hospital management and state policy officials. The workgroup studied literature and research on medical clearance and its impact on psychiatric care and gathered input from other state experts to develop the draft framework issued today.

Feedback is currently being sought on the guide. Once finalized, MDHHS, MHA and the workgroup will work to support the adoption of standardized practices related to medical assessment across emergency departments and hospitals with psychiatric units.

Going forward, MDHHS will work to coordinate these efforts with other statewide activities for addressing behavioral health services and care under the Michigan Psychiatric Care Improvement Project (MPCIP). Additional information about the Medical Clearance Workgroup and the MPCIP.

MPAS Names new CEO

Michelle Roberts was named the new executive director of the Michigan Protection & Advocacy Service, Inc. (MPAS), replacing Elmer Cerano, who is retiring. Roberts currently serves as the MPAS deputy executive director and began her new tenure Jan. 1. Roberts has served in the mental health field as a support coordinator for Community Mental Health, a psychiatric care specialist for a private psychiatric hospital, and a provider running independent living programs for adults with mental illness.

NHSC Loan Repayment Program (NHSC LRP) announces application process

The National Health Service Corps recently announced the next round of applications were being accepted for its loan repayment program.

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The NHSC Loan Repayment Program (NHSC LRP) (https://nhsc.hrsa.gov/loan-repayment/nhsc-loan-repayment-program.html?utm_campaign+=2019+NHSC+Loan+Repayment+Program+is+Open&utm_medium+=+email&utm_source+=+govdelivery+) offers licensed primary care clinicians in eligible disciplines the opportunity to receive loan repayment up to \$50,000. In exchange, participants serve for at least two years at an NHSC-approved site in a designated Health Professional Shortage Area (HPSA).

New in 2019: Substance Use Disorder Program

To combat the nation's opioid crisis, the Substance Use Disorder Workforce Loan Repayment Program (SUD Workforce LRP) (https://nhsc.hrsa.gov/loan-repayment/nhsc-sud-workforce-loan-repayment-program.html?utm_campaign+=2019+NHSC+Loan+Repayment+Program+is+Open&utm_medium+=+email&utm_source+=+govdelivery+) offers eligible clinicians up to \$75,000 in student loan repayment in exchange for a three-year commitment to provide substance use disorder treatment services at NHSC-approved sites. This program is available to more professionals, including pharmacists and registered nurses.

Applicants will receive priority if they:

Have a DATA 2000 waiver;

Serve in an opioid treatment program; or

Are licensed or certified in substance use disorder interventions, such as master's-level substance use disorder counselors

NHSC LRP & SUD Workforce LRP Application Webinar

Thursday, January 10

2:30 - 3:30 PM ET

Webinar [Access Link](#)

Dial-in: 888-950-7563

Passcode: 3172361

NHSC LRP & SUD Workforce LRP Application Q & A Session #1 (online & by phone)

Thursday, January 24

2:30 - 3:30 PM ET

Webinar [Access Link](#)

Dial-in: 888-950-7563

Passcode: 3172361

NHSC LRP & SUD Workforce LRP Application Q & A Session #2 (online & by phone)

Thursday, February 7

2:30 - 3:30 PM ET

Webinar [Access Link](#)

Dial-in: 888-950-7563

Passcode: 3172361

The deadline to apply is February 21, 2019.

Work of NIMH to address opioid crisis discussed by NIMH Director

The following are excerpts from a recent message from Dr. Joshua A. Gordon, M.D., Ph.D., the Director of the National Institute for Mental Health.

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Our country is currently in the middle of an opioid crisis, with an average of 115 people dying every day from an opioid overdose. While the opioid epidemic has been widely covered in the news, something that has been less publicized is the role that mental illnesses play in this public health crisis.

Adults with mental illnesses receive more than half of all opioid prescriptions dispensed each year in the U.S. and a 2016 Substance Abuse and Mental Health Services Administration report revealed that 1 in 10 adults with a mental disorder had misused opioids in the past year. Individuals with mental illnesses' use and misuse of opioids is particularly concerning as [research](#) suggests that people who regularly use opioids are about 75 percent more likely to make suicide plans and are twice as likely to attempt suicide as people who did not report any opioid use.

Although these statistics are troubling, research is helping advance the fight to prevent and better diagnose and treat opioid use disorder (OUD). Earlier this year, NIH launched the [HEAL \(Helping to End Addiction Long-termSM\) Initiative](#), an aggressive, trans-agency effort to speed scientific solutions for countering the pain and opioid crisis in this country. The HEAL InitiativeSM seeks to support research across NIH to help [prevent addiction through enhanced pain management](#) and [improve treatments for OUD and addiction](#).

The NIMH is actively working to support this effort. In partnership with other NIH institutes, the [NIMH will support research](#) testing the use of collaborative care models to treat individuals with OUD and co-occurring mental disorders in primary care settings (where many of these individuals already seek care). [Related NIMH-funded research, under the Zero Suicide initiative](#), is examining how changes in opioid prescribing practices are impacting suicide in a large, nationwide network of healthcare systems. I look forward to sharing more details over the course of the next year as NIMH and NIH efforts to address the opioid crisis progress. In the meantime, thank you for your continued efforts to share NIMH research and resources with those who can most benefit from them.

Federal Healthy People 2030 seeking comments

The US Department of Health and Human Services recently announced that the Healthy People 2030 objectives are now open for public comment through January 17th, 2019.

Measures that may be of interest to your organizations include the following:

Disability and Health <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives/disability-and-health>

Early and Middle Childhood <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives/early-and-middle-childhood>

Hearing and Other Sensory or Communication Disorders <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives/hearing-and-other-sensory-or-communication-disorders>

Maternal, Infant, and Child Health <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives/maternal-infant-and-child-health>

Mental Health and Mental Disorders <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives/mental-health-and-mental-disorders>

There are many other topics such as Heart Disease and Stroke, Physical Activity, Preparedness, Older Adults, Arthritis etc. that are cross-cutting and also may be of interest for review/comment – the entire list can be found here: <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Public-Comment/topics-objectives>

Per the Department of Health and Human Services announcement, “previous public comments on the proposed Healthy People 2030 framework helped shape the vision, mission, foundational principles, plan of action, and

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overarching goals for Healthy People 2030. In this public comment period, we would like your input on the proposed Core, Developmental, and Research objectives.

Please read the objective selection criteria prior to reviewing and commenting on the proposed objectives.”

In Rehab, ‘Two Warring Factions’: Abstinence vs. Medication

Below are excerpts from a recent New York Times article on the current debate, within the substance use disorder community, over the use of medication assisted treatment.

In Rehab, ‘Two Warring Factions’: Abstinence vs. Medication: A reluctant evolution is taking place in residential drug treatment for opioid addiction. Here’s a look at one center’s wary shift

MURFREESBORO, Tenn. — Just past a cemetery along a country road, an addiction treatment center called JourneyPure at the River draws hundreds of patients a month who are addicted to opioids and other drugs. They divide their days between therapy sessions, songwriting, communing with horses and climbing through a treetop ropes course. After dinner, they’re driven into town in white vans for 12-step meetings.

It is a common regimen at residential treatment programs, but as the opioid epidemic persists, JourneyPure is evolving. Though its glossy [website](#) doesn’t mention it, the company is ramping up its use of medications to blunt the torturous withdrawal symptoms and cravings that compel many with opioid addiction to keep using.

There is [substantial evidence](#) backing this approach, which is supposed to be used in tandem with therapy. But because two of the three federally approved medicines are opioids themselves, it is spurned by people who believe taking drugs to quit drugs is not real recovery.

Addiction experts say such resistance is obstructing efforts to reduce overdose deaths and help addicted Americans get their lives back on track, even as many drain their savings or go into debt paying for repeated stints in [residential rehab](#). Two-thirds of the patients admitted to JourneyPure’s program here over the last three months said it wasn’t their first time in treatment.

“I’m watching the dominoes fall on our industry,” said David Perez, JourneyPure at the River’s new chief executive, who has helped lead the push toward using more [medication-assisted treatment](#). “People are dying, and we are feeling more and more impotent to stop it. That is what’s shifting beliefs, more than anything.”

The full article can be found at:

<https://www.nytimes.com/2018/12/29/health/opioid-rehab-abstinence-medication.html>

2018 in Review: CHCS’ Top 10 Publications

In 2018, CHCS published a wide range of publications focused on advancing innovations in health care delivery for low-income Americans. The ten most popular are listed below.

[Addressing Social Determinants of Health through Medicaid Accountable Care Organizations](#) - This blog post explores how states are shaping Medicaid accountable care organization efforts to address social determinants of health.

[Complex Care Innovation in Action Series](#) - This profile series spotlights pioneering health care organizations within a diverse range of delivery system, payment, and geographic environments that are enhancing care for individuals with complex needs.

[Laying the Groundwork for Trauma-Informed Care](#) - This brief outlines practical recommendations for health care organizations interested in taking steps toward becoming more trauma-informed.

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[Medicaid is Not Just for Doctor's Visits: Innovative Early Childhood Funding Strategies](#) - This blog post explores opportunities for Medicaid to support families through engaging in cross-sector efforts in education, supportive housing, child welfare, and home visiting.

[Addressing Social Determinants of Health via Medicaid Managed Care Contracts and Section 1115 Demonstrations](#) - This report examines 40 Medicaid managed care contracts and 25 section 1115 demonstrations to identify themes in state approaches to promoting activities related to social determinants of health.

[Promoting Better Health Beyond Health Care](#) - This report explores the many ways that states are collaborating across agencies to improve population health while accomplishing reciprocal goals in areas like transportation and education.

[Using Pay for Success in Medicaid Managed Care and Value-Based Purchasing Initiatives](#) - This blog post explores what Pay for Success can bring to Medicaid and how it can be integrated into managed care and value-based purchasing.

[Strengthening Medicaid Long-Term Services and Supports in an Evolving Policy Environment: A Toolkit for States](#) - This toolkit provides concrete policy strategies, operational steps, and federal and state authorities that states may use to advance long-term services and supports reforms.

[Blueprint for Complex Care: A Strategic Plan for Advancing the Field](#) - This report assesses the current state of the complex care field and outlines actionable recommendations to help the field reach its full potential.

[How States Can Better Engage Medicaid Patients](#) - This blog post shares practical, insightful suggestions from experts regarding how state Medicaid agencies can better engage patients in the policymaking and implementation process.

State Legislative Update:

MI Senate Restructures Committees and Announces Chairs

This week Senate Majority Leader Mike Shirkey announced the restructuring of several Senate committees and the creation of a few new committees including one charged with overseeing the chamber's advice and consent authority. Shirkey also released the chairs for all of the committees in 2019-20. Every Republican member of the Senate received a committee chair position this year with the exception of Sen. Ruth Johnson (R-Holly), most recently the Secretary of State, and Sen. Michael MacDonald (R-Sterling Heights), the only caucus member to have never served in the Legislature before.

Committee structure changes include the following:

- The Banking and Financial Institutions Committee is being combined this term with the Insurance Committee.
- The Senate Commerce Committee and Senate Economic Development and International Investment Committee are being combined to form an Economic and Small Business Development Committee.
- The Veterans, Military Affairs and Homeland Security Committee is being combined with Families, Seniors and Human Services to form a Families, Seniors and Veterans Committee.
- The Elections and Government Reform and Michigan Competitiveness Committees are no more.

The Appropriations subcommittees for the Department of Corrections, State Police and Military and

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Veterans Affairs is being rolled into one committee.

- The Community Colleges and Higher Education subcommittees are now one committee

The Department of Environmental Quality and Department of Natural Resources budget will be handled by one subcommittee.

- A separate subcommittee was created for Talent, Economic Development and the Michigan Education Development Corporation. It no longer will be taken care of in the General Government budget.

Committee Chairs:

Advice and Consent – Sen. Pete Lucido (R-Shelby Twp.)
Agriculture -- Sen. Kevin Daley (R-Arcadia Twp.)
Economic and Small Business Development -- Sen. Ken Horn (R--Frankenmuth)
Education and Career Readiness -- Sen. Lana Theis (R-Brighton)
Energy and Technology -- Sen. Dan Lauwers (R-Brockway Twp.)
Environmental Quality -- Sen. Rick Outman (R-Six Lakes)
Families, Seniors, and Veterans -- Sen. John Bizon (R-Battle Creek)
Finance -- Sen. Jim Runestad (R-White Lake)
Government Operations – Sen. Mike Shirkey (Jackson)
Health Policy -- Sen. Curt VanderWall (R-Ludington)
Insurance and Banking -- Sen. Lana Theis (R-Brighton)
JCAR -- Sen. Pete Lucido (R-Shelby Twp.)
Judiciary and Public Safety -- Sen. Pete Lucido (R-Shelby Twp.)
Local Government – Sen. Dale Zorn
Natural Resources -- Sen. Ed McBroom (R-Vulcan)
Oversight -- Sen. Ed McBroom (R-Vulcan)
Regulatory Reform -- Sen. Aric Nesbitt (R-Lawton)
Transportation and Infrastructure -- Sen. Tom Barrett (R-Pottersville)

Appropriations and Sub-Committee Chairs

Appropriations -- Sen. Jim Stamas (R-Midland)
Agriculture and Rural Development -- Sen. Roger Victory (R-Hudsonville)
Capital Outlay -- Sen. Ken Horn (R--Frankenmuth)
General Government -- Sen. Jim Stamas (R-Midland)
Health and Human Services – Sen. Peter MacGregor (R-Rockford)
Justice and Public Safety -- Sen. Tom Barrett (R-Pottersville)
K-12 and Michigan Department of Education -- Sen. Wayne Schmidt (R-Traverse City)
Licensing and Regulatory Affairs (LARA) -- Sen. Aric Nesbitt (R-Lawton)
Natural Resources and Environmental Quality -- Sen. Jon Bumstead (R-Newaygo)
Talent and Economic Development/MEDC -- Sen. Ken Horn (R--Frankenmuth)
Transportation -- Sen. Wayne Schmidt (R-Traverse City)
Universities and Community Colleges -- Sen. Kim LaSata (R-Bainbridge Twp.)

Federal Update:

What to Watch in Health Care in 2019

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The 116th Congress began on Thursday amid a government funding lapse that has shut down roughly 25 percent of the federal government. Democrats are set to lead the House chamber for the first time since 2010, while Republicans remain in control in the Senate. While legislation may be move less quickly in the new divided Congress, lawmakers will still face a number of “must-pass” bills that include health care priorities. Additionally, the Trump Administration will continue to shape the health care landscape with Medicaid waivers and potential payment reforms. Here is a preview of what’s ahead in health policy in 2019.

FY 2020 Budget: FY 2020 will see the return of scheduled funding cuts, known as “sequestration”, on non-defense discretionary spending, which includes health care programs. Established by the 2011 Budget Control Act, sequestration could result in major funding cuts to discretionary spending across the board. The National Council will be urging Congress to lift the caps to avoid harmful cuts to vital health programs. If Congress does not lift the caps this Spring, [recent FY 2019 funding increases](#) for mental health and addiction programs would be in danger of being lost.

ACA Legal Challenge: While attempts to “repeal and replace” the Affordable Care Act are likely dead with a Democratic-controlled House, the ACA now faces a new threat in the legal system. In late December, Judge Reed O’Connor found the Affordable Care Act (ACA) to be unconstitutional following Congress’ repeal of the individual mandate penalty in 2017. Legal experts are overwhelmingly skeptical that Judge O’Connor’s ruling will be upheld through the appeals process and during this time the ACA remains the law of the land. Nonetheless, the ruling injects a new round of uncertainty in the health insurance marketplace, and for the health care sector more generally. This will be an issue to watch closely in 2019. [Read more about O’Connor’s decision here.](#)

Medicaid Waivers: Since assuming office, Centers of Medicare and Medicaid Services (CMS) Administrator Seema Verma has promoted state-based control and flexibility over Medicaid programs and individual insurance marketplaces, largely through the use of waivers. Many of these new waivers, like Medicaid work requirements, are [opposed by the National Council](#) for restricting beneficiaries’ access to behavioral health services. CMS has also directed states [on new pathways for bypassing the ACA](#). At the same time, CMS has released new opportunities for states to increase access to services, including their [recent announcement about mental health services](#).

With a divided Congress, expect the Trump Administration to focus more energy on shaping health policy through waivers and other executive action. House Democrats may also use their new oversight authority to investigate the Trump Administration’s actions to undermine the ACA and implement work requirements.

More Opioid Legislation: Following the [2018 Opioid Package](#), some Democrats expressed concern that the package “did not go far enough” to address the ongoing opioid crisis. The package included a number of important provisions for providers that were the direct result of National Council advocacy, including: a new loan repayment program for addiction treatment professionals, behavioral health IT incentivizes, and expanded access to telemedicine. However, the [National Council was disappointed](#) that the package lacked meaningful, long-term investment in our nation’s addiction treatment system by not including an expansion of the Certified Community Behavioral Health Clinics (CCBHCs) program. The National Council remains hopeful that Congress will find bipartisan compromise once again and pass legislation to address the addiction crisis early on in the new year.

Payment Reform: The drive toward value-based payments will continue into 2019. Expect CMS to continuing pursuing the alternative payment models that started under the Affordable Care Act including bundled payments and more accountable care organizations.

Education Opportunities:

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CMHAM & Michigan Health Endowment Fund Present New Training Series: Managed Care Contracting from a Position of Strength!

Many behavioral health agencies mistakenly believe that they lack leverage with the MCOs to negotiate fair provisions in their participation agreements, overlooking legal protections available under state and federal law. In addition, many behavioral health agencies fail to position themselves to participate under value-based payment arrangements with MCOs, foregoing potential revenue streams. This full-day training will assist behavioral health agencies negotiate favorable participation agreements with MCOs. The training will address the following topics:

- Preparing for contract negotiations by identifying and assessing potential leverage points, such as regulatory leverage, market power, and competing on value;
- Evaluating managed care contracts using a team-based approach, considering an MCO's operational and financial stability;
- Negotiating strategies and tips to make the most persuasive case; and,
- Understanding common contract terms and what language is most advantageous.

FEATURING: ADAM J. FALCONE, JD, MPH, BA, PARTNER, FELDESMAN TUCKER LEIFER FIDELL, LLP
Based in Pittsburgh, PA, Mr. Falcone is a partner in FTLF's national health law practice group, where he counsels a diverse spectrum of community-based organizations that render primary and behavioral healthcare services. He counsels clients on a wide range of health law issues, with a focus on fraud and abuse, reimbursement and payment, and antitrust and competition matters.

WHO SHOULD ATTEND:

- Nonprofit mental health providers and those mental health providers serving within the public mental health network interested in negotiating contracts with managed care organizations
- You may send more than 2 attendees from your agency

REGISTRATION: \$100 per person. The fee includes training materials, continental breakfast and lunch.

ADDITIONAL INFO: <https://macmhb.org/education>, cward@cmham.org; or 517-374-6848.

TO REGISTER, CLICK ON YOUR DATE & LOCATION:

[January 15, 2019 - Detroit Marriott, Livonia](#) *(full – registration closed)*

[January 16, 2019 - Holiday Inn & Suites, Mt. Pleasant](#) *(11 spots left)*

[January 23, 2019 - Drury Inn & Suites, Grand Rapids](#) *(full – registration closed)*

[January 24, 2019 - West Bay Beach Holiday Inn](#) *(20 spots left)*

Registration Open CMHAM Annual Winter Conference

The CMHAM Annual Winter Conference, "Together...We All Win!"

February 4, 2019: Pre-Conference Institutes

February 5 & 6, 2019: Full Conference

Radisson Plaza Hotel, Kalamazoo

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

PRE-CONFERENCE INSTITUTES:

Human Trafficking

February 4, 2019 from 1:00pm – 4:00pm (registration at 12:30pm)

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Member Fee: \$37

Non-Member Fee: \$44

[CLICK HERE TO REGISTER FOR HUMAN TRAFFICKING](#)

This class offers a clear and comprehensive view of human trafficking in the United States. Develop a broader understanding of human trafficking as a whole; who are traffickers, victims and how are they trapped in this victimization. Understand how the culture is nurturing this crime and feeding the demand for modern day slavery. Learn how to recognize signs and symptoms of a victim, a perpetrator and how to respond. Understand a basic over view for the physical, mental and emotional outcome of a victim. Additionally, realize the complexity of resolving the human trafficking cycle including the challenges of a victim becoming a survivor by examining their mental health, the recovery process, existing recovery challenges and outcomes.

Presenter: Jennifer Mason

Jennifer Mason is the Grant Administrator for The Salvation Army Anti-Human Trafficking Initiative. The Initiative offers intensive case management, education, awareness and training, and we strive to bring collaboration and overarching support to the Tri-County area anti-human trafficking realm. Jennifer is also the Founder of The Alabaster Gift and for the past 5 years was the Executive Director. Established in 2013, The Alabaster Gift is a nonprofit 501(c)3 anti-human trafficking organization providing services to victims of sexual and labor trafficking including exploitation through a Drop In Center model. She is a pastor, currently transferring her license to the Assemblies of God Church, working toward Ordination. She served previously for 9 years as a staff pastor in the Wesleyan Church within the traditional ministry realm. Jennifer is certified through FFAST (Faith Alliance Against Slavery and Trafficking) as a Train the Trainer; completed Michigan Human Trafficking Task Force as Train the Trainer; certified by The Human Trafficking Training Institute; completed Ascent 121's Build Beyond Trauma Training and What About Boys Trauma Training; completed Trauma-Informed Care by No Boundaries International/Lori Basey; certified as a Mental Health First Aid Responder; accomplished CCDA Immersion Training (Christian Community Development Association) and affiliated with the WJN (Wesleyan Justice Network).

Wearing the HIPAA Hat

February 4, 2019 from 1:00pm – 3:00pm (registration at 12:30pm)

There is no fee to attend this Pre-Conference Institution, but registration is REQUIRED.

[CLICK HERE TO REGISTER FOR WEARING THE HIPAA HAT](#)

Have you had the HIPAA Compliance Officer role added to your duties or is your organization considering you for this role? If so, this training is for you! In this training, we'll discuss what needs to be done throughout the year and annually to maintain compliance. The training will cover ways to efficiently manage your time needed for this role by scheduling tasks and delegating duties to other departments. We'll also dive deeper into how to identify what data needs to be protected, who needs to sign a BAA, end user HIPAA training, and the breach notification process. By the end of this training, you'll be more competent with your HIPAA Compliance Officer role. Skill level: Beginner – Intermediate

Presenter: Sean C. Rhudy, Abilita

CMHAM is pleased to offer this training partnership with Abilita to help free staff's time and reduce operating expenses for CMH, PIHP and Providers. Abilita is the leader in telecommunications consulting and endorsed by CMHAM since 2011 to help members reduce risks, costs and prevent your staff from wasting their time. Abilita evaluates HIPAA technology risks and can ensure you are in compliance without wasting your staffs' time. In addition, they reduce your telecom costs by 29% with no upfront costs or risk.

TO RESERVE YOUR HOTEL ROOM:

Radisson Plaza Hotel & Suites, 100 W. Michigan Ave., Kalamazoo, MI 49007

2019 Room Rates: \$132 plus taxes (Single/Double)

When making your reservations, you will be charged one-night NON-REFUNDABLE deposit. There will be NO PHONE reservations.

CMHA WEEKLY UPDATE

To Make Your Reservations: Visit: www.radissonkz.com

Enter: check in and check out dates (conference dates only)

Click: more search options

Select: promotion code for rate type

Enter: **CMHA19** for code

Click: search and **Complete reservation**

Deadline for Reduced Rate: January 13, 2019

Cancellation Deadline: Guests have until 24 hours prior to arrival to cancel without penalty. If a reservation is canceled prior to the 24 hours the one-night non-refundable charge will still apply but there will not be any additional charges. If a guest cancels within 24 hours prior to arrival, in addition to the one-night non-refundable charge, a one-night stay fee will apply.

CMHAM Annual Spring Conference

Save the Date: The CMHAM Annual Spring Conference will be held on:

June 10, 2019: Pre-Conference Institutes

June 11 & 12, 2019: Full Conference

Suburban Collection Showplace

Novi, Michigan

Note: Hotel reservation and Conference registration are not available at this time.

Administration for Community Living (ACL) announces HCBS resource

Below is a recent announcement from the federal Administration for Community Living (ACL) regarding a set of newly developed HCBS resources.

As you may know, the Administration for Community Living (ACL) is putting on a series of webinars on topics related to the HCBS Settings Rule. The second in the three-part series took place on November 29th. If you were unable to participate, we want to make sure you have access to the slide deck used for the webinar. You will also see links to other resources, and a reminder regarding the third and final webinar, in the ACL message below.

Dan Berland; Director of Federal Policy; NASDDDS

Recap of Webinar 2 of 3: "Promising State Strategies for Working with Providers to Meet the HCBS Settings Criteria & Promote Optimal Community Integration" (November 29, 2018)

For those that participated in the 11/29/2018 webinar, please complete the following 3-minute survey: <https://www.surveymonkey.com/r/P25Z8TR>. We value your feedback, and it helps ACL strengthen its technical assistance offerings in the future.

We have attached an accessible copy of the power-point presentation, and a recording of the webinar may be downloaded over the next two weeks through the following instructions:

Click on the link below, or if your email program does not allow linking, copy and past the link into the address field of your Internet Browser.

<https://resnet-garm.webex.com/resnet-garm/lsr.php?RCID=b43e4856e1175bf97995a2e37d4588c8>

CMHA WEEKLY UPDATE

Once you have been redirected to the Download page, select the "Download" button. When given the option to "Open" or "Save" the file; select the arrow next to the "Save" button then select "Save As".

Once the "Save As" window appears, choose the location where you would like to save the FTP file and select the "Save" button.

Please find the link to a copy of Minnesota's "[Provider's Guide to Putting the HCBS Rule Into Practice](#)".

A written transcript is also available upon request. These materials, along with additional written technical resources, will also be shared on ACL's website by January 2019.

IPSSR announces next in series to focus on opioid abuse and suicide

Michigan State's University's Institute for Public Policy and Social Research (IPSSR) will host its first 2019 luncheon public policy forum on January 16, 2019 from 11:30 a.m. to 1:30 p.m. in downtown Lansing.

Two leading causes of death in Michigan, highest among males, are opioid overdose and suicide. While the conversation is a difficult one to have, professionals who are working with those who are vulnerable to these tragic endings, and their families, are eager to discuss possible policy changes that are likely to help curb, if not prevent, the trending crises.

Please join us for IPSSR's January forum, **Lending Light to Michigan's Double Crisis – Opioid Use and Suicide**, taking place in the Anderson House Office Building, 124 N. Capitol Ave., directly across from the Michigan Capitol grounds in downtown Lansing. As previously noted, the forum discussion will run from 11:30 a.m. to 1:30 p.m. and is free and open to the public. Pre-registration is strongly encouraged online at <http://bit.ly/IPSSRForum> as open seats and lunch is on a first-come, first-serve basis. January's panel includes:

Jennifer E. Johnson, PhD, C. S. Mott Endowed Professor of Public Health; Professor of OBGYN, Psychiatry and Behavioral Medicine with the College of Human Medicine at Michigan State University
Juli Liebler, Ph.D., Assistant Professor and Director of Outreach with Michigan State University School of Criminal Justice, Former Chief of Police for the City of East Lansing, and FBI National Academy Graduate

In addition to the January 16 forum, IPSSR also will host Public Policy Forums on February 13, March 13, April 17, and May 8. Previous forums may be viewed on the IPSSR website. We hope you will take this opportunity to learn, contribute, and network with others who have interest in forum topics.

Social determinants of health to be focus of MSU Colleges of Medicine and Nursing seminar

SAVE THE DATE

Michigan State university's College of Human Medicine and College of Nursing present:
Social Determinants of Health: A Call to Action
Speaker: Dr. Mona Hanna-Attisha

Conrad Auditorium
Polycom G029 DMC, UC3 208 Macomb, 120 Secchia Grand Rapids
Wednesday, January 16, 5–7:30 p.m.
Dinner 5-6 p.m., Program 6-7:30 p.m.
RSVP to: <https://bit.ly/2Lc7gpQ>

CMHA WEEKLY UPDATE

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.

- *Training Full:* 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

Miscellaneous News and Information:

Job Opportunity: Executive Director of Michigan Certification Board for Addiction Professionals

The Executive Director has responsibility and authority for the day-to-day management of the Michigan Certification Board for Addiction Professionals (MCBAP) business except those areas specifically reserved to the MCBAP Board of Directors. The Executive Director is responsible for maintaining communication with the Board of Directors to keep the body fully informed of activities, issues and organizational goals. The Executive Director is responsible for Administering the credentialing program, long-range planning, financial, human resource management, operations, public relations and marketing. Salary range: \$57,000 to \$73,000, commensurate with experience. Email resume and cover letter to info@mcbap.com by 1-31-19.

CMH Association's Officers and Staff Contact Information:

CMHAM Officers Contact information:

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

CMHA WEEKLY UPDATE

President: Joe Stone Stonejoe09@gmail.com; (989) 390-2284
First Vice President: Lois Shulman; Loisshulman@comcast.net; (248) 361-0219
Second Vice President: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124
Secretary: Cathy Kellerman; balcat3@live.com; (231) 924-3972
Treasurer: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451
Immediate Past President: Bill Davie; bill49866@gmail.com; (906) 226-4063

CMHAM Staff Contact information:

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

Alan Bolter, Associate Director, abolter@cmham.org
Christina Ward, Director of Education and Training, cward@cmham.org
Monique Francis, Executive Secretary/Committee Clerk, mfrancis@cmham.org
Jodi Johnson, Training and Meeting Planner, jjohnson@cmham.org
Nakia Payton, Data-Entry Clerk/Receptionist, npayton@cmham.org
Dana Ferguson, Accounting Clerk, dferguson@cmham.org
Michelle Dee, Accounting Assistant, acctassistant@cmham.org
Chris Lincoln, Training and Meeting Planner, clincoln@cmham.org
Carly Sanford, Training and Meeting Planner, csanford@cmham.org
Annette Pepper, Training and Meeting Planner, apecpper@cmham.org
Bethany Rademacher, Training and Meeting Planner, brademacher@cmham.org
Anne Wilson, Training and Meeting Planner, awilson@cmham.org
Robert Sheehan, CEO, rsheehan@cmham.org