

April 26, 2019

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## **CMH Association and Member Activities:**

### **2019 Walk A Mile Rally scheduled for Thursday, May 9, 2019!**

The Walk A Mile rally, held annually on the front lawn of the Michigan Capitol, draws over 3,000 persons served, families, advocates, and CMH, PIHP, and provider staff from all of Michigan’s 83 counties, state legislators and policy makers. May is designated as Mental Health Awareness Month nationwide, and this rally is the largest statewide effort to bring attention to the important issues that persons and families served dedicate themselves to daily.

[Click here to view the full Walk A Mile Packet of information!](#)

### **Monroe CMH leads strong advocacy effort**

Below are excerpts from a recent press release, issued by Monroe Community Mental Health Authority, as part of their advocacy effort in support of a fiscally sound public mental health system.

Mental Health Funding Gaps Foreshadow Crises in Michigan  
Summary report predicts homelessness, poverty, increased incarceration and deaths

Monroe Community Mental Health Authority (MCMHA) is asking the public to attend a Town Hall on Monday, April 29 at 3 p.m. to learn more about how Monroe County is being impacted by the systemic underfunding of Michigan’s Public Mental Health System.

Earlier this month, the Community Mental Health Association of Michigan (CMHAM) released a new analysis, “Systemic Underfunding of Michigan’s Public Mental Health System,” which studies the longstanding underfunding of Michigan’s public mental healthcare system. The study cites a \$150 million gap between the cost of health care and the funding provided to Michigan’s public mental health system.

Monroe Community Mental Health Authority alone provided nearly \$4 million dollars in medically necessary services to individuals with mental illnesses and developmental disabilities for which their annual capitated funding did not cover, leaving them struggling to keep up with payments to contracted agencies who have already provided these services.

“The state of Michigan has a great vision for the way individuals with mental illnesses, developmental disabilities, serious emotional disturbances, and substance use disorders should be able to live, work, and play in their communities,” said Monroe CMHA Executive Director Lisa Jennings. “Unfortunately, their funding model does not allow us to fully support that vision. We are not allocated the necessary funding to do everything that the state mandates us to do, and that we want to do to fulfill our mission and support the vulnerable residents of our county.”

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“Michiganders do not face the same mental health and substance use disorder needs that they had 20 years ago,” said Robert Sheehan, the CEO of the CMHAM (formerly the Michigan Association of Mental Health Boards). “There are new demands, new crises and new conditions in every community throughout Michigan, which the original financing structure did not account for. These include the opioid crisis, incarceration of those with mental health needs, the recognition of the prevalence of autism, increased homelessness and more—yet the system is still operating from a decades old funding structure. This is the reality that the public mental health system in Michigan has faced for decades. Without moving toward the ambitious vision outlined by the Association and addressing this outdated funding structure, Michiganders will continue to live without the mental health care that they need and expect.”

The CMHAM analysis makes five concrete recommendations to address the current crises in unmet mental health and substance use disorder needs – recommendations that, if followed, will stem homelessness, poverty, incarceration and the premature death of Michiganders with intellectual and developmental disabilities, mental illness, and substance use disorders.

The vision CMHAM outlines as a solution for a world class, public mental health system in Michigan through the report, “A Vision for a World-Class Public Mental Health System,” includes a five-point financial modernization plan to revise and prioritize funding for the public managed care plans. These public managed care plans have demonstrated financing practices best-positioned to meet community demands and real costs of care. The plan is as follows:

- Set Medicaid rates to match demands and costs
- Make it so that Medicaid rates include contributions to risk reserves
- Allow for the public mental health system to hold sufficient risk reserves
- Remove the local match draw-down obligation, Section 928, in the appropriations boilerplate
- Restore General Fund dollars to the public mental health system

Since 1997, Michigan has been the only state in the nation to have a publicly managed care system for all four major behavioral health populations regardless of income levels (adults with mental illness, children and adolescents with emotional disturbances, persons with intellectual/developmental disabilities and those with substance use disorders), which reach:

- About 300,000 people with mental healthcare needs
- 50,000 people employed by the public mental healthcare system
- 2 million people statewide who are impacted by one of the 300,000 people served (family, friends, neighbors and co-workers)

The public community mental health centers (CMH) in Michigan strive to serve as many individuals as possible, but only four percent of the funding provided to the CMH system is available to serve Michiganders without Medicaid who need mental health services.

In addition to new service demands, the state has not complied with the federal requirement for state support for the development of risk reserves – a key component in the design of any managed care system, especially one that is built to serve the most vulnerable residents and maintain community safety nets. Lawmakers and community members may argue the public system has been functioning well despite funding gaps, but CMHAM warns that the current underfunded system is not sustainable long-term.

MCMHA’s Town Hall will be held at their building, located at 1001 S. Raisinville Rd., Monroe, MI 48161. More information on how you can advocate for an increase in funding can be found at

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[www.CMHAM.org](http://www.CMHAM.org) ; [www.monroecmha.org](http://www.monroecmha.org) ; and Monroe Community Mental Health Authority's FaceBook page.

## Macomb CMH and Suicide Prevention Coalition pursue outreach efforts

The Suicide Prevention Coalition of Macomb County, of which Macomb County CMH is a key member, have recently kicked-off an outreach to funeral directors, to enlist their involvement in providing support to the family and friends of persons dying as a result of suicide. Excerpts from the letter that accompanied an educational packet that was sent, by the Coalition, and the listing of the contents of the packet, are provided below.



### Funeral Director

Youth suicide has become the second leading cause of death for 15-24 year olds. Macomb County Suicide Prevention Coalition along with Macomb Intermediate School District, Suicide Free Schools is working to educate the community and integrate suicide prevention awareness into existing programs.

Funeral Directors play a vital role with survivors of suicide loss. Therefore it is our hope to collaborate and offer support when dealing with the families who have lost a loved one to suicide. A suicide differs from other deaths and is often complicated for family and friends.

Macomb County Suicide Prevention Coalition (MCSPC) would like to equip you with materials that may assist and support you when dealing with a person who has died by suicide. If you would like additional materials or information, please contact Dave Mansfield (586-557-7904), Lynda Zott (586-218-5271.) or email [macombcountyspc@gmail.com](mailto:macombcountyspc@gmail.com).

Thank you for your support and partnership.

### 2017 Funeral Director Packets

#### Right Side of Folder

- Letter to Funeral Director
- USDHHS Supporting Survivors of Suicide Loss – a Guide for Funeral Directors

#### Left Side of Folder

- Wallet Cards
- National Suicide Prevention Lifeline
- Break a Secret – Save a Life
- How Blue are You?
- My Safety Plan

#### Pamphlets

- Suicide Free Schools – Parent/Community
- Survivors of Suicide
- My Safety Plan Instructions
- Talking Points for Students and Staff After a Suicide

## Don't Forget About the 2019 PAC Campaign

Earlier this year we announced our 2019 CMH PAC campaign. We must increase our participation, last year we only had 15 boards participate in our PAC campaign. Please take some time over the next couple of board meetings to encourage your board and staff to participate in our 2019 PAC efforts. As you know, our CMH PAC is a key component to our overall advocacy efforts – the need to upgrade our PAC is greater today than ever before.

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For those members who qualify for the drawing for the Tiger game suite (minimum 6 contributions per agency), this year's game is on Sunday, July 21 at 1:10pm vs. Toronto Blue Jays. Members should forward the results of their campaign and donations to the CMHA office by June 28, 2019 in order to be in the drawing for the Tiger tickets if eligible.

**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.

### **CMHA Committee Schedules, Membership, Minutes, and Information**

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

## **News from Our Corporate Partners:**

### **Fostering Mindfulness-Based Resilience Among Consumer & Staff Populations**

Work, money and health concerns rank as the top 3 stressors for American adults today. Research finds 63% of people report significant impact to their behavioral health comes from on-the-job stress, while 80% of individuals report functional impairment related to their depression.

Employers and providers can use resiliency-building mindfulness tools to not only reduce care costs, increase productivity, and reduce missed work, but also help individuals:

- Diminish anxiety, stress, chronic pain and insomnia symptoms
- Improve heart health and reduce blood pressure
- Feel more satisfied in life and at work through more purpose and commitment
- More effectively deal with adversity
- Form more successful relationships with others

REQUEST A DEMO

myStrength's digital Mindfulness and Meditation program offers evidence-based resources for consumers and staff, including diverse approaches that accommodate any schedule and lifestyle. And since even a quick 60-second activity can open the door to the benefits of mindfulness, these activities can be convenient to work into a daily routine. They also complement myStrength's self-care programs for stress, anxiety, depression, substance use (including opioid recovery), chronic pain, insomnia, and balancing intense emotions to offer a single, integrated platform that addresses a range of behavioral health conditions.

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

**MDHHS changes direction on management of Medicaid for unenrolled in 298 pilot**

# CMHA WEEKLY UPDATE

MHDHHS recently revised its thinking relative to the management of the unenrolled Medicaid population in the Section 298 pilot communities. That revised thinking is reflected in a recent memo from MDHHS on this issue, excerpted below:

From: Jeffery L. Wieferich MA, LLP, Director JV Bureau of Community Based Services  
Re: Management of the Unenrolled Population Update

The Michigan Department of Health and Human Services (MDHHS) is committed to an October 1, 2019 start for the 298 Pilot Projects. One of the many variables that impact this project is the management of the unenrolled population in the Pilot regions. MDHHS has been working diligently with the internal state processes for preparing and releasing the request for proposal (RFP) to procure a Prepaid Inpatient Health Plan (PIHP) for that population. Due to various delays in our efforts to release the RFP and concerns about being able to stand up a successful bidder in timely manner, MDHHS has made the decision to stop the RFP process and keep the unenrolled population with their current PIHP in the Pilot regions. This decision will ensure there will be no disruption in service availability for this population. We appreciate your understanding, patience and support that you have provided as we navigated this process. MDHHS firmly believes that removing this potential barrier brings us closer to realizing the October 1, 2019 start for the 298 Pilot Project.

## State Legislative Update:

### FY20 Senate Budget Proposal

#### Specific Mental Health/Substance Abuse Services Line items

	<u>FY'19 (final)</u>	<u>FY'20 (executive budget)</u>	<u>FY'20 (Senate)</u>
-CMH Non-Medicaid services	\$125,578,200	\$125,578,200	\$125,578,200 Medicaid
Mental Health Services	\$2,319,029,300	\$2,478,086,100	\$2,478,086,100
-Medicaid Substance Abuse services	\$67,640,500	\$66,200,100	\$66,200,100
-State disability assistance program	\$2,018,800	\$2,018,800	\$2,018,800
-Community substance abuse (Prevention, education, and treatment programs)	\$76,956,200	\$107,754,700	\$107,754,700
-Children's Waiver Home Care Program	\$20,241,100	\$20,241,100	\$20,241,100
-Autism services	\$192,890,700	\$221,718,600	\$208,181,100
-Healthy MI Plan (Behavioral health)	\$299,439,000	\$346,548,100	\$346,548,100

#### Other FY20 Senate Budget Decisions:

- Reduced the actuarial soundness increase for Autism services (Governor 5.75%) to 3% - Gross reduction of \$6,581,500/\$2,365,400 GF
- Savings from autism cost containment language – Gross reduction of \$6,956,000/\$2,500,000 GF
- Added a \$100 point of difference on local match draw, section 928 of \$100 (to keep discussion open on issue)

#### Boilerplate Sections Included:

- **Section 298** – Revises boilerplate language to lengthen pilot from 2 years to 3, clarify HMOs contracting outside of CMH network and allowing for statewide implementation if measures are achieved.
- **NEW Section 235** – Adds a new Care Coordination Pilot. (1) Allows the department to work with PIHPs and CMHSPs to create a service level integration pilot. (2) Contracts under this pilot shall require the use

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of the department's Care Connect 360 platform to achieve shared care coordination between PIHPs and Medicaid HMOs.

- **NEW Section 908** – Adds new language that requires the department to work with an actuarial firm to reexamine the behavioral health Medicaid rates to ensure that the rates reflect the actual and projected growth in demand and costs of providing services.
- **Section 928** – Retains local match draw down requirement from past years minus \$100 item of difference.
- **Revised Section 959** – Senate modified language to require that the Department to continue coverage for autism services that were covered on January 1, 2018, specifies cases in which a second opinion is needed, and requires a report on cases requiring a second opinion.
- **NEW Section 964** – Adds new language that requires the department to develop and implement a Medicaid behavioral health fee schedule by January 1 and create network adequacy standards to be used in all contracts.
- **Revised Section 1061** – Specifies that funds appropriated for Care Mental Health Center only be used at the existing site and that capital outlay funding only be used at the Caro site.
  
- **Section 1696 – Traditional Medicaid to HMP Migration Restriction** – It is the intent of the legislature that, beginning in the fiscal year beginning October 1, 2019, if an applicant for Medicaid coverage through the Healthy Michigan Plan received medical coverage in the previous fiscal year through traditional Medicaid, and is still eligible for coverage through traditional Medicaid, the applicant is not eligible to receive coverage through the Healthy Michigan Plan.

### **Boilerplate Sections NOT included in Executive Recommendation:**

- **Removed: Section 925 – Non-Medicaid Dollars** – From the funds appropriated in part 1 for community mental health non-Medicaid services, each CMHSP is allocated not less than the amount allocated to that CMHSP during the previous fiscal year.
- **Section 961** – department shall allocate \$150,000 to administer an electronic inpatient psychiatric bed registry consistent with the requirements in section 151 of the 19 mental health code, 1974 PA 258, MCL 330.1151.
- **Section 1010 – Court Ordered Treatment** – From the funds appropriated in part 1 for behavioral health program administration, up to \$2,000,000.00 shall be allocated to address the implementation of court-ordered assisted outpatient treatment as provided under chapter 4 of the mental health code, 1974 PA 258, MCL 330.1400 to 330.1490.

## **Federal Update:**

### **National Council Continues Push for Behavioral Health Telehealth Solutions**

The National Council has been a longtime advocate for changing federal regulations that restrict how behavioral health medications that are controlled substances can be prescribed via telemedicine.

Recognizing the urgent need to expand access to medication-assisted treatment (MAT) and other behavioral health medications, the National Council worked closely with Members of Congress to secure a provision in the [opioid legislative package](#) (SUPPORT Act) that would address this problem. The Drug Enforcement Administration (DEA) now has until October 1, 2019 to clarify when the agency can issue prescribers a special registration that would enable them to treat patients for the first time via telemedicine.

### **BACKGROUND**

Current regulations, established as the result of the Ryan Haight Act, prohibit the prescribing of controlled substances over the internet with narrow exceptions for telemedicine. In practice, meeting these exceptions typically requires that a patient being treated via telemedicine be physically located in a facility registered

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through the Drug Enforcement Administration (DEA) in order to receive a prescription for a controlled substance. These regulations stand as a barrier for many mental health and addiction treatment clinics as they may not meet the narrow requirements for registration with the DEA in all states. Thus, this leaves clinics unable to offer patients access to much-needed medications to treat certain mental illnesses and addictions via telemedicine.

### **NATIONAL COUNCIL ADVOCACY EFFORTS**

The National Council recently wrote a letter to the DEA urging the agency to act immediately to resolve medication access issues by using their existing regulatory authority or through the new special registration process mandated by the 2018 SUPPORT Act. While the SUPPORT Act's special registration provision is a step in the right direction for allowing more providers to administer MAT via telemedicine, the final decision of which provider types will be included falls to the DEA and no draft guidance has yet been released. The National Council continues to work closely with the DEA on developing a registration pathway to be more inclusive of community mental health and addiction treatment providers across the country.

Additionally, the National Council is aiming to bolster the actions already taken within the SUPPORT Act by reintroducing the Improving Access to Remote Behavioral Health Treatment Act of 2018. This bill, introduced in the last Congress by Representatives Gregg Harper (R-MS) and Doris Matsui (D-CA), would specifically name community mental health centers and addiction treatment centers as eligible sites to register with DEA to offer patients access to MAT and other medications via telemedicine. Although the DEA may choose to include these sites under the provisions included in the SUPPORT Act, this bill would ensure their inclusion regardless of the DEA's final regulations.

## **Education Opportunities:**

### **NIATx Change Leader Academy**

**Wednesday, May 22, 2019**

**9:00am – 3:30pm (8:30am Registration)**

**Holiday Inn & Suites, 5278 East Pickard, Mt. Pleasant, MI**

**Registration Fee:** \$140 per person (The fee includes training materials, continental breakfast and lunch.)

*Limited number of attendees!* [TO REGISTER, CLICK HERE!](#)

*CMHAM and the Great Lakes MHTTC is proud to present a new training:*

The NIATx Change Leader Academy (CLA) is a one-day face-to-face workshop followed by three months of peer networking and support from a NIATx coach. The CLA trains change leaders in the *NIATx model of process improvement*: a structured, team-based approach to change management for organizations large and small. Attendees learn how to select a change project, set a project aim, engage senior leaders and staff in the change process, and achieve measurable, sustainable improvements. Following the CLA face-to-face workshop, participants commit to carrying out a three-month change project focusing on one of the following areas: *Medication-Assisted Treatment; Recovery Oriented Systems of Care; Access to and Retention In Treatment*; or a different focus area of their choosing.

Who should attend: Anyone interested in leading change or improving service delivery in their organization: Senior leaders, managers, supervisors and front-line staff from behavioral healthcare, recovery services, criminal justice, and social services. The CLA provides both beginners and those with some experience in process improvement with the tools to lead change projects and teams within their organization.

4.5 CEs for Substance Abuse Professionals



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## Improving Outcomes Conference – June 6 & 7, 2019 – Traverse City

The Improving Outcomes Conference is a grassroots conference focused on supporting and improving the public behavioral health system in Michigan. Target audience for this conference is leadership and key staff from CMHSPs, PIHPs and Provider Organizations with specific focus on Information Technology, Quality Improvement, Finance, and Provider Network Management.

The conference is on 6 & 7, 2019 at the Grand Traverse Resort in Traverse City.

[Click Here for More Details and to Register!](#)

## 2 New Dates Added: Ethics for Social Work & Substance Use Disorder Professionals & Psychologists Trainings

Community Mental Health Association of Michigan is pleased to offer 6 Ethics for Social Work & Substance Use Disorder Professionals & Psychologists 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 date.

**July 17, 2019 – Lansing [Click Here To Register!](#)**

**August 21, 2019 – Lansing [Click Here To Register!](#)**

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

\$115 CMHA Members

\$138 Non-Members

## 21st Annual Wraparound Conference

DHHS/CMHA hosts the 21<sup>st</sup> Annual Wraparound Conference, "Innovating a Classic!" will be held on June 12-14, 2019 at the Great Wolf Lodge, Traverse City.

[For More Details on the Wraparound Conference & To Register Click Here!](#)

## Practicing Effective Management: A Two-Day Training for Improving Relationships and Results

TBD Solutions is hosting its next Practicing Effective Management Training May 8th & 9th at the Grand Rapids Chamber of Commerce. This training provides practical guidance for enhancing relationships and improving results through structured supervision, effective feedback, delegation, interviewing, time management, and employee development. This dynamic, interactive training is relevant for all levels of management.



Since 2016, TBD Solutions has proudly trained over 250 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, maintaining a 98% satisfaction rate.

Cost for this two-day training is \$500, and lunch is provided. Group discounts are also available.

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To learn more or register for the training, visit [www.eventbrite.com/e/practicing-effective-management-training-registration-58010345505](http://www.eventbrite.com/e/practicing-effective-management-training-registration-58010345505). For questions about the training, email [training@TBDolutions.com](mailto:training@TBDolutions.com).

### **CMHA Annual Spring Conference**

The CMHA 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.*

### **Dialectical Behavior Therapy (DBT) Trainings for 2018/2019**

#### **5-Day Comprehensive DBT Trainings**

- This training is designed for CMH, CMH service providers, PIHP, and PIHP service provider staff who are directly responsible for delivering DBT.
- Due to the fact DBT is a comprehensive treatment that treats high-risk individuals, one's core training ought to be comprehensive as well.
- IT IS EXPECTED THAT ALL PARTICIPANTS WILL MAKE A FULL COMMITMENT TO ATTEND ALL 5 DAYS mindfully and will participate fully in discussion, role-plays and complete daily homework assignments.
- Participants are asked to bring a copy of "Cognitive Behavioral Treatment of Borderline Personality Disorder" by Marsha Linehan, PhD, with them to the training.
- COMPLETION OF A 2-DAY INTRODUCTION TO DBT TRAINING OR EQUIVALENT IS A PRE-REQUISITE FOR ATTENDING THIS TRAINING.
- This is NOT a training that teaches DBT skills. There will be very little focus on DBT skills. The majority of the focus of this training will be to help clinicians on how to conduct individual DBT sessions. If your goal is to come to this training in order to learn DBT skills, do not attend. By attending, you understand and consent to knowing this ahead of time.

#### Training Fee:

\$250 per person. Fee includes training materials, continental breakfast and lunch for 5 days.

#### Dates/Locations:

May 20-24, 2019 | Detroit Marriott Livonia | [REGISTER HERE](#)

June 3-7, 2019 | Best Western, Okemos | [REGISTER HERE](#)

August 12-16, 2019 | Great Wolf Lodge, Traverse City | [REGISTER HERE](#)

### **2019 DBT Summit – Still Time to Register**

The Michigan Department of Health and Human Services & the Community Mental Health Association of Michigan are pleased to host a statewide training opportunity for practitioners interested in advancing their Dialectical Behavioral Therapy skills. Dialectical Behavioral Therapy is an evidence-based method that targets the conditions and symptoms of persons who have Borderline Personality and other character disorders. This unique training opportunity will focus on program development, implementation, sustainability, and impact.

#### Who Should Attend?

This summit is for attendees who have interest in the learning and dissemination of Dialectical Behavior Therapy (DBT) in a Community Mental Health Service Provider (CMHSP) or Pre-Paid Inpatient Health Plan (PIHP) setting or an agency who is a provider for CMHSPs or PIHPs. This includes administrators, clinical

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directors, case managers, clinicians, and peer support specialists. This educational opportunity is intended for publicly funded providers at all levels of practice (beginning, intermediate and/or advanced).

Date/Location:

May 1, 2019

Kellogg Hotel & Conference Center | 219 S Harrison Rd, East Lansing, MI

Conference Fee:

\$125 per person. The fee includes training materials, continental breakfast and lunch.

[CLICK HERE](#) for more information and to register now!

### **Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019**

Course Description:

Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. This co-prevalence has been studied since the 1980s, yet despite this substantive increased risk, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated services offer superior outcomes to parallel or sequential treatments and call on providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Recovery-oriented care requires changes at a systems and individual practitioner level in areas including assessment, treatment planning, and delivery. Integrated co-occurring providers will learn about the research on integrated care including evidence-based practices (EBP), and ways to develop stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders.

**This training fulfills the annual requirement for persons who are part of an IDDT team, as well as for persons providing COD services in Adult Mental Health outpatient services.**

Training Fee:

\$65 per person. The fee includes training materials, continental breakfast and lunch.

Dates/Locations:

June 19, 2019 | Okemos Conference Center | [REGISTER HERE](#)

### **Motivational Interviewing College Trainings for 2018/2019**

#### **4 Levels of M.I. Training offered together at 4 convenient locations!**

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

New This Year! We are excited to add a new 2-Day TNT: Teaching Motivational Interviewing training to the lineup.

Remaining Dates/Locations:

June – Holiday Inn Marquette

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Basic: Monday & Tuesday, June 10-11, 2019

Advanced: Monday & Tuesday, June 10-11, 2019

Supervisory: Monday, June 10, 2019

TNT: Teaching MI: Wednesday & Thursday, June 12-13, 2019

Training Fees: (The fees include training materials, continental breakfast and lunch each day.)  
\$125 per person for all 2-day trainings (Basic, Advanced)  
\$69 per person for the 1-day Supervisory training.

[CLICK HERE](#) for full training details, CE information, overnight accommodations and registration links.

### **Register Now for Fetal Alcohol Spectrum Disorder Trainings**

Register now for three Fetal Alcohol Spectrum Disorder Trainings with presenter Dan Dubovsky, MSW – a National FASD Specialist. Registration online at [www.CMHA.org](http://www.CMHA.org) -

May 6 – Mackinaw City

May 8 – Ann Arbor

May 9 – Kalamazoo (FILLED TO CAPACITY)

### **Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings**

- April 30-May 1, 2019 – Drury Inn & Suites, Grand Rapids
- June 18-19, 2019 – Holiday Inn, Marquette
- July 16-17, 2019 – Best Western/Okemos Conference Center, Okemos
- August 13-14, 2019 – Hilton Garden Inn, Detroit
- August 27-28, 2019 – Radisson Plaza Hotel, Kalamazoo
- September 24-25, 2019 – Great Wolf Lodge, Traverse City

Visit [www.CMHA.org](http://www.CMHA.org) for more information.

### **CALL FOR PRESENTATIONS: 20th Annual Substance Use and Co-Occurring Disorders Conference**

The Annual Substance Use Disorder/Co-Occurring Disorder Conference brought in over 1,300 attendees last year. We would love for you to join us by sharing your expertise, research or showcasing a successful program!

20th Annual Substance Use Disorder/Co-Occurring Disorder Conference

“Innovative Strategies for Today’s Challenges”

September 15, 2019: Pre-Conference Institutes

September 16 & 17, 2019: Full Conference

Cobo Center, Detroit, MI

[Click Here to Download the Presentation Submission Form.](#)

Submit your completed form to Alexandra Risher [arisher@CMHA.org](mailto:arisher@CMHA.org) by **Friday, May 10, 2019**.

*Note: Hotel reservations and Conference registration is not available at this time.*

## **Miscellaneous News and Information:**

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### **Job Opportunity: CEO of Rose Hill Center**

Kittleman & Associates is pleased and honored to announce the search for the next President & CEO of Rose Hill Center in Holly, Michigan, and I wanted to make sure that you saw the attached Position Guide.

As one of the nation's leading long-term mental health facilities, Rose Hill Center in Holly, Michigan offers comprehensive psychiatric treatment and residential rehabilitation programs for adults, 18 and over, on 400 serene acres close to major amenities offered by Ann Arbor and the greater Detroit region. With an emphasis on Recovery, the programs offered by Rose Hill provide individuals with the insights, life skills, attitudes, opportunities and medication management needed to manage their illness and live fulfilling lives. Rose Hill provides five levels of mental health treatment that are supported largely through private pay with financial assistance provided through the Rose Hill Foundation as well as through Community Mental Health (Medicaid) and commercial insurance. <https://www.rosehillcenter.org/>

### **Job Opportunity: Executive Director of Network 180**

Network180 is seeking its next Executive Director to direct the management and delivery of a complete array of mental health, intellectual /developmental disability, and substance abuse services to the citizens of Kent County, Michigan. With an annual budget of over \$140 million, Network180 annually serves over 18,000 individuals in Kent County through a network of over 30 non-profit providers. Interested candidates can apply through our website at: <http://www.network180.org/en/employment/employment-opportunities>.

### **Job Opportunity: Healthy Transitions Youth/Young Adult Peer Coordinator at ACMH**

Association for Children's Mental Health (ACMH) is currently accepting applications for a Healthy Transitions Youth/Young Adult Peer Coordinator. To apply, mail or email a cover letter and resume to: Jane Shank, Executive Director | 6017 W. St. Joe Hwy, Suite 200, Lansing, MI 48917 [acmhjane@sbcglobal.net](mailto:acmhjane@sbcglobal.net)

To learn more see the complete job posting below or download it here: [Healthy Transitions Posting final](#)

## **CMH Association's Officers and Staff Contact Information:**

### **CMHA Officers Contact Information:**

The Officers of the CMH Association of Michigan recently proposed, in their commitment to fostering dialogue among the members of the Association with the Association's leaders, that their contact information be shared with the Association membership. While this dialogue will not take the place of the regular dialogue and decision making that occurs during the meetings of the Association's 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:

President: Joe Stone [Stonejoe09@gmail.com](mailto:Stonejoe09@gmail.com); (989) 390-2284

First Vice President: Lois Shulman; [Loisshulman@comcast.net](mailto:Loisshulman@comcast.net); (248) 361-0219

Second Vice President: Carl Rice Jr; [cricejr@outlook.com](mailto:cricejr@outlook.com); (517) 745-2124

Secretary: Cathy Kellerman; [balcat3@live.com](mailto:balcat3@live.com); (231) 924-3972

Treasurer: Craig Reiter; [gullivercraig@gmail.com](mailto:gullivercraig@gmail.com); (906) 283-3451

Immediate Past President: Bill Davie; [bill49866@gmail.com](mailto:bill49866@gmail.com); (906) 226-4063

### **CMHA Staff Contact Information:**

## ***CMHA WEEKLY UPDATE***

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

Alan Bolter, Associate Director, [abolter@CMHA.org](mailto:abolter@CMHA.org)

Christina Ward, Director of Education and Training, [cward@CMHA.org](mailto:cward@CMHA.org)

Monique Francis, Executive Secretary/Committee Clerk, [mfrancis@CMHA.org](mailto:mfrancis@CMHA.org)

Nakia Payton, Data-Entry Clerk/Receptionist, [npayton@CMHA.org](mailto:npayton@CMHA.org)

Dana Ferguson, Accounting Clerk, [dferguson@CMHA.org](mailto:dferguson@CMHA.org)

Michelle Dee, Accounting Assistant, [acctassistant@CMHA.org](mailto:acctassistant@CMHA.org)

Anne Wilson, Training and Meeting Planner, [awilson@CMHA.org](mailto:awilson@CMHA.org)

Chris Lincoln, Training and Meeting Planner, [clincolin@cmham.org](mailto:clincolin@cmham.org)

Carly Sanford, Training and Meeting Planner, [csanford@CMHA.org](mailto:csanford@CMHA.org)

Bethany Rademacher, Training and Meeting Planner, [brademacher@CMHA.org](mailto:brademacher@CMHA.org)

Jodi Johnson, Training and Meeting Planner, [jjohnson@CMHA.org](mailto:jjohnson@CMHA.org)

Alexandra Risher, Training and Meeting Planner, [arisher@CMHA.org](mailto:arisher@CMHA.org)

Robert Sheehan, CEO, [rsheehan@cmham.org](mailto:rsheehan@cmham.org)