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CMH Association and Member Activities:

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.

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.cmham.org/committees>

News from Our Preferred Corporate Partners:

Relias Highlights Recent Posts for Children’s Services Providers

Below is a recent announcement from Relias, a longtime Preferred Corporate Partner of CMHA: The past two months we’ve been focusing on children’s issues and celebrating providers through awareness themes like Child Abuse Prevention Month, Children’s Mental Health Awareness Day, and Foster Care Month.

We post a variety of topics every month on different issues impacting human services providers, healthcare in general, and workforce development for managers. Here are a few of the recent posts

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focused on children's services that you may have missed (don't worry, they're still there!):

https://www.relias.com/blog?utm_source=marketo&utm_medium=email&utm_campaign=eb_2019-05-15_hhs-blog-roundup_childrens-mental-health&mkt_tok=eyJpIjoiTWpkaVpXRTRabVZoWkRReSlInQiOiJqdzJFYWFTY1U3NWVWMkRLNTBHZzFXNTZyMVZuU3IWT29abG5jcGZJeVlVjg1Zm1ZZGdHbnljT3NocmZlNmdXN0psZzVZM0s5Z3VTQkVDejNPRTF4cFwvck9XcnFGdDdBelgySTRTdFUxUURFSW1Hb0o4cmp6NDR1QjhFeG5Ub20ifQ%3D%3D

- 16 Ways to Stop Burnout Among Children's Services Providers
- April is Child Abuse Prevention Month
- Spotlight on Children's Mental Health Awareness Day

Thanks for the work you and your staff do every day to improve the lives of those you serve.

myStrength: 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

[Click Here to 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 appoints new Medicaid director

Below are excerpts from a recent press release announcing the hiring of Kate Massey as the Michigan's Medicaid Director.

Michigan's new deputy director for Medical Services Administration and Medicaid director has a wealth of experience leading successful health care initiatives in both the public and private sector.

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Kate Massey has been appointed to the position, Michigan Department of Health and Human Services (MDHHS) Director Robert Gordon announced today. She begins her new post on June 7.

Massey most recently was chief executive officer for Magellan Complete Care of Virginia. She previously served as vice president for Medicaid and Medicare for Kaiser Permanente of the Mid-Atlantic States, overseeing the launch of two Medicaid managed care organizations in Virginia and Maryland. She also worked for Amerigroup, where she established its Public Policy Institute and served as executive director.

She dedicated her early career to government service and public policy. She worked at the White House Office of Health Reform, overseeing implementation of provisions in the Affordable Care Act related to Medicaid, Medicare and public health. Prior to that, she served as unit chief of the Low-Income Health Programs and Prescription Drugs Unit in the Congressional Budget Office. She began her career in public service working for the federal Office of Management and Budget, leading a team focused on Medicaid, CHIP and private health insurance market programs.

"Kate's health care leadership skills will serve MDHHS well as the department works to keep the Healthy Michigan Plan strong, address the social determinants of health, improve health outcomes and increase healthy equity for the Michiganders we serve," Gordon said. "I am confident that her unique qualifications make her the perfect fit to lead our Medical Services as we improve healthcare outcomes for Michiganders."

As Michigan's Medicaid director, Massey will oversee several health care programs, including MICHild and the Healthy Michigan Plan. She will report to the Chief Deputy Director for Health, Dr. Joneigh Khaldun, and support the advancement of public health policy efforts for the state. Michigan Medicaid covers nearly 1.8 million people and there are more than 650,000 Healthy Michigan Plan beneficiaries.

Massey has a master's degree in public affairs from the Lyndon B. Johnson College of Public Policy at the University of Texas at Austin and a bachelor's degree from Bard College in New York. Kathy Stiffler, who has been acting as deputy director of Medical Services and Medicaid director, will resume her previous post as director of the MDHHS Bureau of Medicaid Care Management and Customer Service and deputy Medicaid director.

Michigan emergency rooms are jammed. Identifying mental illness can help.

Below are excerpts from a recent press story on one of the initiatives within the State Innovation Model (SIM) projects, in communities across the state, in which Michigan's Community Mental Health organizations are deeply involved as co-leaders.

The 60-year-old man had become a familiar sight in the Ann Arbor emergency room. Suffering from depression, anxiety and heart disease, he showed up more than a dozen times a month complaining of dizziness and weakness and seeking opiates for pain.

Michigan Health Watch is made possible by generous financial support from the Michigan Health Endowment Fund, the Michigan Association of Health Plans, and the Michigan Health and Hospital Association. The monthly mental health special report is made possible by generous financial support of the Ethel & James Flinn Foundation. Please visit the Michigan Health Watch 'About' page for more information.

Last September, a nurse convinced him to try something new. He was put in touch with a therapist who could help him gain insight into panic attacks that had plagued him for years. Volunteers kept in touch, providing the man transportation to medical appointments and to ensure he stayed current on medications.

He now has a primary care doctor who he calls first before thinking about visiting the ER, which is far more expensive for medical services. In the eight months since the nurse intervened, the man has visited an emergency room just once.

That's the goal of a federally-funded project targeted at frequent emergency room patients in Washtenaw and Livingston counties, many of whom suffer from mental health or substance abuse issues – or both. More than 3,500 patients cycled through emergency rooms in these counties at least five times in 2018. By identifying their underlying issues, the project seeks to match them with appropriate medical or social services treatment while reducing the stress on hospital emergency departments.

The full story can be found at: <https://www.bridgemi.com/michigan-health-watch/michigan-emergency-rooms-are-jammed-identifying-mental-illness-can-help>

CMS issues bulletins on Medical Loss Ratio (MLR) Requirements Related to Third-Party Vendors and SMI/SED demonstration opportunity

The federal Centers for Medicare and Medicaid (CMS) recently issued two bulletins on issues of interest to CMHA members.

The first is a bulletin designed to provide additional clarification and specific examples of the regulatory requirements for determining the amounts that can be included as incurred claims in the medical loss ratio (MLR), particularly when a Medicaid or CHIP managed care plan uses a third-party vendor in a subcontracted arrangement. That bulletin can be found at:

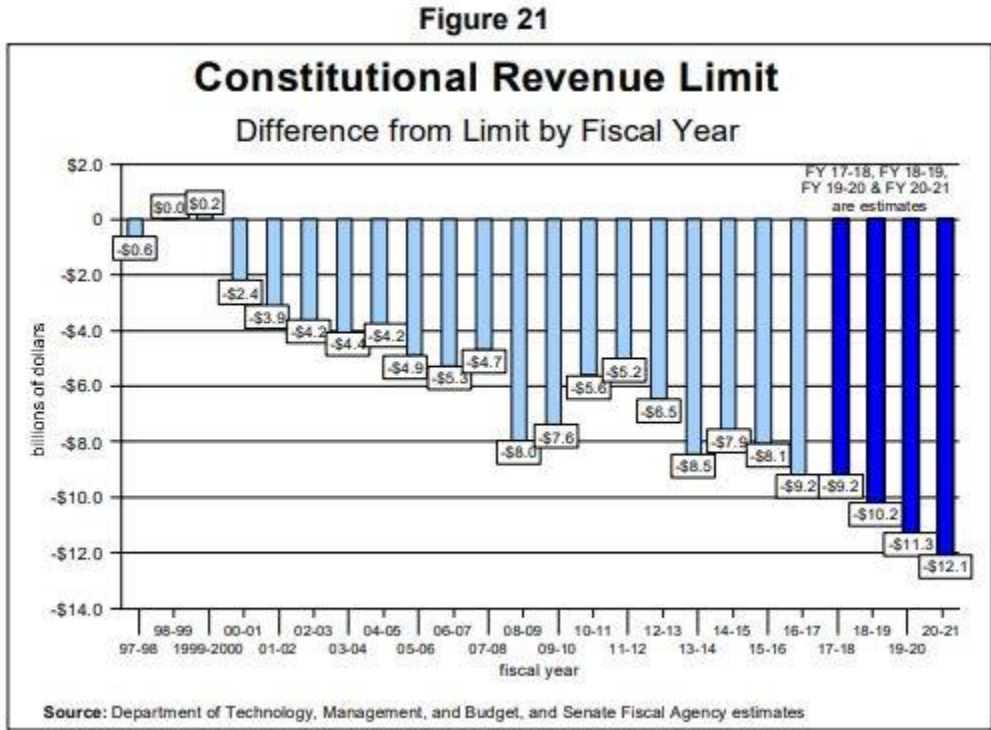
<https://www.medicaid.gov/federal-policy-guidance/downloads/cib051519.pdf>

The second is a bulletin that provides technical assistance questions and answers related to the CMS Serious Mental Illness (SMI) and Serious Emotional Disturbance (SED) Demonstration Opportunity. That bulletin can be found at: <https://www.medicaid.gov/federal-policy-guidance/downloads/faq051719.pdf>

Feel overtaxed? Michigan \$10B below tax, fee limit

Below are excerpts from a recent Detroit News article on one of the causes of fiscal pressure on many of Michigan’s publicly funded systems, including the state’s public mental health system.

As Gov. Gretchen Whitmer pushes for a \$2.5 billion fuel tax increase, new data from non-partisan fiscal agencies shows Michigan residents and businesses are paying \$10 billion less in state taxes and fees than they did in 1977 when measured as a percentage of total personal income.



The Whitmer administration argues stagnant state revenues make it nearly impossible to fix Michigan’s crumbling roads without some form of new taxes or fees, but critics fear any significant increase could derail the state’s ongoing economic recovery.

“The reason that we have these needs is that we have not provided the resources that we need to be able

to fix our roads, to improve our schools and protect our water,” Budget Director Chris Kolb told reporters Friday after a bi-annual Consensus Revenue Estimating Conference.

Michigan voters in 1978 approved a constitutional amendment that limited the amount of tax and fee revenue state government is allowed to collect in any given year, establishing a cap of 9.49 percent of total personal income — the same ratio as 1977.

CHCS offers webinar “Integrating a Trauma-Informed Approach into Substance Use Disorder Treatment”

Experiencing trauma — events such as parental divorce, living with a family member who is substance dependent, abuse, and neglect — strongly correlate to health-risk behaviors later in life, including substance use. With this understanding, many providers are seeking ways to acknowledge and address trauma as a hidden, underlying risk in patient’s lives.

This webinar, cosponsored by the Center for Health Care Strategies and ACEs Connection, will highlight how two providers operating in vastly different settings have incorporated a trauma-informed approach to care into their day-to-day practices for treating substance use disorder, and how doing so has shaped the experiences of their patients and staff. Daniel Sumrok, MD, DFASAM, ABAM, ABPM, family physician and addiction specialist, who formerly led the University of Tennessee Health Science Center’s (UTHSC) College of Medicine’s Center for Addiction Science, will discuss the challenges of treating substance use disorder in a rural setting and his approach to helping patients break the cycle of what he calls “ritualized, compulsive comfort-seeking.” Rosalind De Lisser, MS, FNP, PMHNP, is an associate clinical professor at University of California San Francisco (UCSF) and director of integrated behavioral health services at UCSF’s Women’s HIV Program. She will discuss UCSF’s efforts to build a clinical model for individuals with HIV, substance use, and mental health disorders, and the importance of taking a trauma-informed approach for this population. Health care providers, administrators, and other interested stakeholders are invited to join this 90-minute webinar. Made possible by the Robert Wood Johnson Foundation, this webinar is a product of Advancing Trauma-Informed Care, a national initiative aimed at understanding how trauma-informed approaches can be practically implemented across the health care sector.

The webinar is scheduled for

June 4, 2019
2:00-3:30 PM ET



For more information on this webinar go to:

<https://www.chcs.org/resource/integrating-trauma-informed-approach-into-substance-use-disorder-treatment/>

State Legislative Update:

June 1 Budget Deadline to be Missed

During the prior administration, then-Gov. Rick Snyder would often boast about finishing the new state budget in or around June 1. But with June now about a week away, House Appropriations Committee Chair Shane Hernandez (R-Port Huron) observed today "It's pretty safe to say we will not make" a June 1 finish date for the Fiscal Year (FY) 2020 budget.

First, keep in mind Gov. Gretchen Whitmer introduced her first budget in March. Snyder gave his first in mid-February. Another complicating factor is all the attention Speaker Lee Chatfield (R-Levering) has devoted to no-fault car insurance reform. Because of that, "it is taking longer" and as for another target deadline, "We've never set an artificial final date." Also, three House budgets -- Higher Education, K-12 and Transportation -- haven't emerged from a committee or subcommittee, yet, and no appropriations bills have moved out of the full House.

Up until now it appeared the House would not adopt the so-called omnibus approach to bundling all of the budget measures into two bills -- one for the General Fund and a second for the School Aid Fund. On going that route, Hernandez said, "We'll keep those options open (while) we continue to move as separate bills . . . We'll see as the process goes on if that is necessary."

Slowing Economy Flattens Projected State Revenues

Last week, state economic leaders gathered for the semi-annual Consensus Revenue Estimating Conference. This review and forecast of the state's economic health is an important step toward establishing budget targets, and completing budget bill negotiations, for the coming year.

Generally, the forecast for the next two years is flat, with no immediate cause for current budget reductions but little room for increased or new spending. Income tax revenue is high, which benefits the state General Fund. But sales tax revenue is down, which impacts the School Aid Fund.

Anticipated revenues for the current fiscal year were revised upward slightly from the January forecast: General Fund revenue will increase by \$151 million, and School Aid Fund revenue will decrease by \$68.2 million.

For Fiscal Year 2019-2020, General Fund revenue is forecast to decrease \$74.8 million from the January forecast, and School Aid Fund revenue to increase \$357.5 million.

Below are links to documents providing more detail:

http://www.house.mi.gov/hfa/PDF/Revenue_Forecast/Consensus_Revenue_Agreement_Exec_Summary_May19.pdf

http://www.house.mi.gov/hfa/PDF/Revenue_Forecast/Economic_Outlook_and_Revenue_Estimates_May19.pdf

Federal Update:

Bipartisan Bill Introduced to Train More Doctors to Combat Opioid Epidemic

U.S. Representatives Brad Schneider (D-IL), Susan W. Brooks (R-IN), Annie Kuster (D-NH), and Elise Stefanik (R-NY) introduced bipartisan legislation to train more doctors equipped to combat the opioid epidemic.

H.R. 2439, the Opioid Workforce Act of 2019, would create 1,000 additional residency positions over five years to hospitals with addiction medicine, addiction psychiatry, or pain management programs.

This legislation to expand graduate medical education (GME) aims to alleviate the worsening physician shortage, which is anticipated to be as high as 121,000 physicians by 2032 according to a study by the Association of American of Medical Colleges. This shortage is particularly acute in the field of addiction

medicine and substance use disorder (SUD) treatment. This shortfall of doctors threatens to harm our efforts to reverse the opioid epidemic.

“Turning the tide on the opioid crisis requires treating addiction like the disease that it is, and to do that, we need doctors,” said Schneider. “Our medical professionals on the frontlines of this epidemic are already stretched too thin. Our bipartisan legislation aims to educate more physicians equipped with the latest training in addiction medicine and psychiatry to help the estimated 20 million Americans who need substance use treatment get much needed care.”

“In order to combat the devastating opioid, heroin and fentanyl epidemic that continues to plague communities across our country, a critically important piece of the puzzle is to ensure we have more trained professionals, particularly physicians, who can prevent and treat addiction and substance abuse disorder,” said Brooks. “This bipartisan bill will help provide more residency positions to hospitals that have programs focused on addiction medicine, addiction psychiatry or pain management. The opioid crisis will not stop taking innocent lives overnight, but without more trained doctors ready to help people who are struggling because of substance abuse, drug and opioid related overdose deaths will continue to claim more lives in Indiana and beyond.”

“The opioid epidemic is impacting communities across New Hampshire and the country,” said Kuster. “We know that to address this crisis we must bolster the capacity to treat individuals with substance use disorder and our bill will increase the number of physicians who can take on this challenge. The opioid epidemic requires an all-hands-on-deck response and our legislation will help to step up efforts on the frontlines to get individuals the help they need.”

“Every single person knows of a family that has been devastated by the opioid crisis, and deaths related to overdoses have outpaced car accidents as the number one killer of young people,” said Stefanik. “The number of health care professionals focused on the treatment and prevention of opioid abuse directly translates to the number of people who can be saved. In my district, so many families are suffering due to the wide-spread impact of this public health crisis, which is why I’m co-leading this bipartisan and life-saving bill.”

The Opioid Workforce Act is endorsed by the Association of American Medical Colleges, the Greater New York Hospital Association, the American Hospital Association, American Society of Addiction Medicine, American College of Academic Addiction Medicine, and Indiana University.

[The text of H.R. 2439 is available online.](#)

Sen. Warren, Rep. Kennedy Reintroduce Bill to Strengthen Parity

Earlier this week, Senator Elizabeth Warren (D-MA) and Representative Joe Kennedy III (D-MA) reintroduced the Behavioral Health Coverage Transparency Act (H.R. 2874/S. 1576) with the aim of strengthening Americans’ access to mental health and substance use disorder (SUD) treatment. Specifically, the bill would increase oversight and enforcement of the federal parity law, which requires that insurance coverage of mental health and SUD services be equal to the coverage of medical and surgical health services.

BACKGROUND

The Mental Health Parity and Addiction Equity Act of 2008 established parity between the coverage of behavioral health and medical/surgical benefits. While the law has led to gains in behavioral health coverage, many individuals and families continue to report being denied or charged more for necessary mental health and SUD treatments by their health care plan. A [survey by the National Alliance on Mental Illness \(NAMI\)](#)

found that respondents experienced a rate of denials for mental health care that was nearly twice the rate of denials for general medical care. The bill's reintroduction also comes on the heels of a [federal judge's ruling](#) that found that the nation's largest insurer, UnitedHealth, unlawfully denied beneficiaries access to mental health and SUD treatment in an effort to cut costs.

BILL SUMMARY

The Behavioral Health Coverage Transparency Act (H.R. 2874/S. 1576) would require insurance providers to disclose the analysis they utilize in making parity determinations as well as the rates and reasons for mental health/SUD claims denials versus medical/surgical denials. It also would require the Department of Health & Human Services, the Department of Labor and the Department of Treasury to undertake a minimum of 12 random audits of health plans per year to discourage noncompliance with existing parity laws. The results of the audits would be made public. Finally, it would establish a Consumer Parity Unit, giving individuals a centralized online clearinghouse to get information about their rights and to submit complaints with assurance of timely responses.

"Patients with behavioral health concerns deserve the same access to care as patients with physical health conditions, but for far too long, insurance companies have unfairly denied behavioral health care services to cut costs," said [Senator Warren in a statement](#). "Our bill would put a stop to these discriminatory practices and make sure patients get the treatment they need."

REACTION FROM THE FIELD

The bill has received widespread support from mental health and addiction advocacy organizations, including the National Council for Behavioral Health and Massachusetts behavioral health provider association, the Association for Behavioral Healthcare (ABH). Vic DiGravio, President and CEO of ABH explained why his organization supports the legislation saying, "As providers of behavioral health services, our members see first-hand the difficulty their clients face in accessing timely treatment because of insurance barriers. Our members frequently note that these barriers are in sharp contrast to when their clients are seeking physical health care. Senator Warren and Congressman Kennedy are right to fight to strengthen parity laws. Behavioral health care must be made as accessible as physical health care."

The National Council echoed support for the bill as part of the Mental Health Liaison Group (MHLG), a nonpartisan, nationwide coalition of mental health and addiction advocacy organizations, in [this letter](#) sent to bill sponsors.

Education Opportunities:

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!](#)

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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

CMHA Annual Spring Conference Registration Open!

Registration Open for 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

Hotel for Conference Attendees Overnights:

Hampton Inn & Suites

49025 Alpha Drive, Wixom, MI 48393

2.7 miles from Suburban Collection Showplace

Room Rate: \$109 plus taxes (includes hot breakfast buffet)

Reservations can be made by calling 248-348-0170, Hit 0 to go to the Novi property

Mention Code: MHS for discounted rate.

Country Inn & Suites

21625 Haggerty Rd, Novi, MI 48375

25.5 miles from Suburban Collection Showplace

Room Rate: \$109 plus taxes (includes hot breakfast buffet)

Reservations can be made by calling 248-596-9800

Mention "Mental Health Association Spring Conference" for the discounted rate.

Additional hotels will be added as necessary. Watch www.cmham.org for additional details. CMHA will provide transportation between hotels and Conference Facility.

Spring Pre-Conference & Conference Registration:

[TO REGISTER FOR THE PRE-CONFERENCE INSTITUTE, CLICK HERE!](#)

[DETAILS & TO REGISTER FOR THE SPRING CONFERENCE, CLICK HERE!](#)

Pre-Conference Institute: A Mindfulness Approach to Clinical Social Work

- Monday, June 10, 2019 from 8:45am – 4:00pm

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- \$125 CMHA members
- \$148 Non-Members

Keynote Presentations:

- Keynote: Passive Victim to Resilient Warrior! Transforming the Way You Think About Trauma Informed Care
 - Shari Simmons, LCSW, Executive Director of Fire Mountain Treatment Center; Adjunct Professor
- The MDHHS Behavioral Health and Developmental Disabilities Administration (BHDDA): An Overview
 - George E. Mellos, MD, Senior Executive Psychiatrist Director, Deputy Director for Behavioral Health and Developmental Disabilities, Michigan Department of Health and Human Services
- Keynote: Update from Washington
 - Charles Ingoglia, MSW, Incoming President and CEO, National Council for Behavioral Health

Educational Workshops:

- Putting It All Together: The Need to Belong - An Effective Paradigm Shift for Addressing Mental Health, Physical Health, and Substance Abuse Crises Facing Our Consumers and Communities
- Update on Statewide Efforts for Improving the Medical Assessment of Psychiatric Patients in Emergency Department
- "Shattering Silos and Building Bridges": A Community Approach to Early Intervention for Children and Families with Mental Health Needs
- Supporting LGBTQ+ Individuals Through Affirmative Practices
- Implementing the Trauma Policy
- An Analysis of Parent Support Partner Services in Michigan
- Boardworks 2.0: Board Member Orientation & the Role of Board Members in the Rights Protection Process
- Value-Based Payment Practice Transformation Academy
- The Tri County LifeSavers: Replicable Steps to Building a Community Youth Suicide Prevention Coalition
- Jail Diversion Efforts Across Michigan: Challenges and Successes
- Examining Initial Outcomes of Peer Coaching/Specialized Detoxification Program – Developing a Research Based Curriculum for Integrated Care
- Building a Trauma Informed CMH System
- Boardworks 2.0: Leadership - Participatory Governance and Ethical Implications (formerly Character)
- Trauma and Resilience: Using ACE Surveys, Screenings, and Interventions to Address and Improve Individual and Community Outcomes (Lessons Learned and Outcomes Shared)
- Treatment Foster Care Oregon (TFCO): Community-based Mental Health Treatment for Hospital Level-of-Care Children
- Criminal Justice, Homelessness and Mental Health: How Cross-System Collaboration Assists with Successful Transitions Across Intercepts
- Beyond Case Management: Scaling Team-Based Behavioral Health Homes and an Alternative Payment Model to Achieve the Quadruple Aim Across a Community
- Why Understanding Benefits Is So Important!
- Boardworks 2.0: Management – System
- Making a Home in Higher Education: Expanding the Continuum of Care for Students in Recovery on a College Campus
- Crises in the Emergency Department: System Issues in the Care of People with Developmental Disabilities
- Empathy and Effectiveness in the Recognition and Treatment of Human Trafficking Victims and Survivors
- Understanding Adverse Childhood Experiences (ACEs) and the Impact of Trauma
- Criminal Justice Connection to Care Model

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- Integrative Healthcare for Older Behavioral Health Clients
- Fully Present: The Importance of Self-Care and Mindfulness in Our Work

11th Annual Anti-Stigma Event Day – July 25, 2019 at LCC Downtown

The 11th Annual Anti-Stigma Event Day will be held Thursday, July 25, 2019 at the Lansing Community College - Downtown Lansing Campus in the Gannon Building. The event will be held from 9:00am to 4:00pm. Do you have anti-stigma initiatives at your CMHSP? Please contact Colleen Jasper jasperc@michigan.gov or 517-373-1255 to present your anti-stigma program. Or just come, and we will have time for CMHSPs initiative updates that very day. Registration is open online at <https://cmham.org/events/?EventId=5302>

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:

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

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

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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 | **This training is now full, contact Bethany at brademacher@cmham.org to be placed on the waiting list.**

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

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.

Co-Occurring College Save-the-Date!

The 2019 Co-Occurring College will be held Tuesday, July 30th at the DoubleTree Bay City. More information including hotel reservations and registration links coming soon!

Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings

- 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.cmham.org for more information.

20th Annual Substance Use Disorder and Co-Occurring Disorder Conference Save-the-Date!

“Innovative Strategies for Today’s Challenges”

Pre-Conference Workshops: September 15, 2019

Full Conference: September 16-17, 2019

Cobo Center, Detroit, MI

More information including hotel reservations and registration links coming soon!

45th Annual National Association for Rural Mental Health Conference

August 26-29, 2019

45th Annual National Association for Rural Mental Health Conference

La Fonda on the Plaza Hotel

Santa Fe, New Mexico

The National Association for Rural Mental Health (NARMH) invites you to attend the 2019 NARMH Annual Conference. Registration is now open and you can register online at www.narmh.org.

About Our Conference: The National Association for Rural Mental Health (NARMH) Annual Conference is the premier interdisciplinary mental health event for rural families and peers, community members, clinicians, researchers, administrators and policy professionals. Now in its 45th year, the NARMH Annual Conference provides a collaborative environment for all participants across professions to learn and network on a myriad of vital issues concerning mental health practice, research, policy and advocacy in rural and remote populations.

Our Conference Theme: The 2019 NARMH Annual Conference theme is “From Surviving to Thriving: Embracing Connections”. NARMH “rode the winds of change” in Santa Fe in 2002, and now we return in 2019 to see what we have learned, what has changed, and where we are headed. We want to learn from communities who have gone from surviving to thriving and how that impact is maintained and enhanced. We want to get to know each other and have fun together.

There are over 60 breakout sessions with topics focusing on the following areas: Surviving to Thriving, Workforce Issues, Innovations in Service Delivery, Dilemmas in Addressing Trauma, Rural and Frontier Workforce Development Strategies, Embracing the Reality of Behavioral Health in Rural Communities – Struggles, Responses and Successes, Co-Occurring Substance Use Disorders and Other Topics. The plenary sessions include: 1) The Path to Thriving: Strategic Doing and Rural Mental Health; 2) From Surviving to Thriving in American Indian Communities: Transcending Historical Trauma; 3) Introducing the MHTTC- A New Workforce Development Resource; and 4) The Very Large Array of Youth and Adult Peer Support. The conference also features a Reception with Flamenco Dancing as well as a NARMH Night at the Movies showing the film: The Providers.

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There is no better place to do that than the City Different, Santa Fe, New Mexico. Bienvenidos! Visit the NARMH website at www.narmh.org to explore the details of the 2019 NARMH Annual Conference. We look forward to seeing you in Santa Fe!

Questions & General Information: If you need additional information after visiting the NARMH 2019 conference website at www.narmh.org, please contact Brenton Rice, NARMH Event Planner, by email at brenton@togevents.com or by phone at 651.242.6589.

Miscellaneous News and Information:

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
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

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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; (989) 390-2284
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

CMHA 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
Nakia Payton, Data-Entry Clerk/Receptionist, npayton@cmham.org
Dana Ferguson, Accounting Clerk, dferguson@cmham.org
Michelle Dee, Accounting Assistant, acctassistant@cmham.org
Anne Wilson, Training and Meeting Planner, awilson@mham.org
Chris Lincoln, Training and Meeting Planner, clincoln@cmham.org
Carly Sanford, Training and Meeting Planner, csanford@cmham.org
Bethany Rademacher, Training and Meeting Planner, brademacher@cmham.org
Jodi Johnson, Training and Meeting Planner, jjohnson@cmham.org
Alexandra Risher, Training and Meeting Planner, arisher@cmham.org
Robert Sheehan, CEO, rsheehan@cmham.org