



2025–2026 Impact Report

The value of CMHA to its members and persons served by its members: CMHA accomplishments in 2025-2026

Member organizations of the Community Mental Health Association of Michigan (CMHA) and the persons served by and stakeholders of those member organizations receive many important benefits, centered around the five strategy platforms of CMHA:

-  **Government Relations and Advocacy**
-  **Education and Training**
-  **Media and Public Relations**
-  **Policy and Fiscal Analysis**
-  **Representing & linking members with dialogue and co-development venues, information, resources, partnerships**



Government Relations and Advocacy

CMHA’s government relations and advocacy work is composed of many components including:

- Testifying on behalf of membership in various legislative settings, serving as the spokesperson for the Association’s members.
- Tracking legislative, policy and appropriations changes impacting our membership, including providing comments on behalf of members on state policy changes.
- Developing and maintaining relationships with key legislative & administration leaders, developing trust and credibility, serving as sound content source and advocate.
- Regularly communicating with CMHA members on a range of legislation and policy issues:
 - » Weekly Update (CMHA’s electronic newsletter)
 - » CMHA’s electronic Action Alert system
 - » Speaking at local CMH/PIHP/Regional board meetings
 - » Developing infographics and talking points on key issues important to our members
- Managing the CMH Political Action Committee (PAC) & Education & Advocacy Fund.
- Coordinating efforts and message with a well-recognized multi-client lobbying firm on contract with CMHA.

Examples of advocacy successes by CMHA over the past year include:

LEGISLATION

CMHA supported bills moving through the legislative process:

- Continuing to advocate for legislation which will support the behavioral health workforce
 - » SBs 845 & 846, which would modify Michigan’s social work licensure requirements and creates additional pathways toward licensure and establish a social worker scholarship program.
 - » HB 4591 & HB 6017, authorizing Michigan to join the Counseling Compact and the School Psychologist Interstate Licensure Compact, allowing licensed professional counselors and school psychologists to practice across participating states, including via telehealth where permitted. The legislation helps address behavioral health workforce shortages and expands access to school-based behavioral health services.
- Supporting Certified Community Behavioral Health Clinics (CCBHC)
 - » SB 1000 & 1001, which would codify the Certified Community Behavioral Health Clinics (CCBHC) into state law.
- CMHA is advocating in opposition:
 - » HB 6022, which would make significant changes to Michigan’s preadmission screening process as part of the broader Mental Health Framework proposal.

APPROPRIATIONS

CMHA has successfully advocated for the following items:

- Direct Care Wage Funding – included funding in the FY26 & FY27 to retain the \$3.40 per hour wage add-on, as well as additional funding to recognize increased minimum wage and sick-leave requirements – \$351.8 million.
- Added language to reduce administrative burdens – FY26 & FY27 budget included boilerplate Section 994 to allow CMHSPs, PIHPs, and provider agencies accredited by a recognized national behavioral health accrediting organization to satisfy certain state program review and audit requirements, reducing duplicative oversight while maintaining compliance with state and federal law.
- Crisis Stabilization Unit Funding – included \$5 million of one-time funding for crisis stabilization units (CSU).
- Continued funding of Certified Community Behavioral Health Clinics Demonstration sites – FY26 & 27 budget included \$916,062,700 in funding for the CCBHC sites.

ADVOCACY

PIHP RFP

Led the statewide advocacy effort in opposition to the Michigan Department of Health and Human Services’ proposed Prepaid Inpatient Health Plan (PIHP) Request for Proposals (RFP), educating policymakers, mobilizing CMHA members, and advocating to preserve Michigan’s locally governed public behavioral health system.

Built and coordinated a broad coalition of statewide stakeholders—including the Michigan Association of Counties, NAMI Michigan, the Michigan Sheriffs’ Association, The Arc Michigan, the Mental Health Association in Michigan, provider organizations, and others—to express concerns regarding the proposed PIHP RFP, the Mental Health Framework, and related legislation that would privatize or fragment the public behavioral health system.

Developed and executed a comprehensive public advocacy campaign utilizing statewide polling, Action Alerts, legislative testimony, press releases, infographics, social media, myth-versus-fact materials, and member advocacy resources to educate policymakers and the public about the importance of maintaining a locally accountable public behavioral health system.

Protecting Medicaid

CMHA is a steering committee member of the Protect MI Care Coalition, which engages the Michigan Legislature and Governor’s Office throughout the state budget process to advocate for protecting Medicaid funding, preserving access to care, and minimizing the impact of federal Medicaid cuts on Michigan’s health care system.

MDHHS Mental Health Framework

CMHA is collaborating with a broad coalition of stakeholders, including all major behavioral health advocacy organizations, in opposition to the MDHHS mental health framework proposal and is coordinating advocacy efforts to communicate shared concerns.

Federal HR 1

CMHA opposed the passage of HR 1 due to concerns about its potential impact on the Medicaid program. CMHA is now focused on educating members about the law’s implementation, the potential risks to Medicaid, and strategies to prepare for upcoming changes.

Education and Training

CMHA’s education and training efforts, unlike many state associations, are broad in scope and audience reach, deep in the level of knowledge provided to participants, and diverse in their content.

CMHA has a team of skilled Conference and Event Managers who provide CMHA members with access to some of the state’s, Great Lakes regions, and nation’s leading subject matter experts.



Examples of this work by CMHA over the past year include:

1. Over 300 training courses and conferences are offered reaching over 14,000 individuals on a wide range of evidence-based and promising practices, often with a focus on specific populations.
2. Continued long-standing educational partnership with the Michigan Department of Health and Human Services is supported by a \$15 million federal grant dollar that underwrites the cost of over 175 training and seminars. Over 7,900 Michiganders were able to broaden their education and skills through this federal grant.
3. Provided access to high-quality educational offerings – via virtual trainings, conferences, webinars, and virtual roundtables – at a discount to CMHA members, provided by the National Council for Mental Wellbeing (NatCon) and the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD’s Legislative and Policy Conference).
4. Completed recording of the **Boardworks 2.0 on-demand series**, an online, asynchronous learning program designed to equip the Boards of Directors of CMHA member organizations with the knowledge and tools needed to provide effective organizational governance.
5. Educational partnership with: the SAMHSA-funded Center for Mental Health Implementation Support (in partnership with the University of Wisconsin and Stanford University)
6. CCBHC-focused learning sessions:
 - » To foster understanding of CCBHC by the leadership of Michigan’s CMHSPs and PIHPs
 - » To foster understanding of ability of CCBHCs to serve rural communities (jointly with the National Council)
 - » To serves as a resource hub for Michigan’s CCBHCs and organizations interested in becoming CCBHCs
 - » The CMHA CCBHC Technical Assistance (TA) Hub is designed to support the growth, implementation, and long-term sustainability of CCBHCs across Michigan
7. Continued educational partnerships with:
 - » Community Mental Health Authority of Clinton, Eaton, Ingham Counties
 - » IMPART Alliance- Michigan State University
 - » Kevin’s Song
 - » Michigan Developmental Disabilities Council
 - » Michigan Health Endowment Fund
 - » Michigan State Police, Michigan Department of Education, and MDHH
 - » Mid-State Health Network



Media and Public Relations

In partnership with the CMHA Public Relations Committee and LLYC, CMHA’s public relations agency of record, CMHA carries out substantial communications tactics regarding issues of focus by CMHA and its members.

Examples of this work by CMHA over the past year include:

1. **Strong media presence and strategic design** (carried out in partnership with LLYC and the CMHA Public Relations Committee). These efforts secured 44 media clips from targeted pitches and op-eds. Highlights include:
 - » Editorials placed in The Detroit News regarding privatization and mental health impacts by Kevin Fischer, privatization myths by R. Sheehan, and the mental health framework by A. Bolter.
 - » Press releases distributed statewide announcing leadership and team updates (A. Bolter as the new CEO, D. Lowe joining the team), as well as the 2026 poll results.
 - » A robust suite of infographics developed to visually communicate opposition to HB 6022, statewide opposition to privatization (2026 poll results), and the “What’s at Stake” competitive procurement process.
 - » Brand and design updates, including the 2023-24 CMHA Impact report and a new presentation slide deck template for consistent organizational branding.

2. **Social media growth and issue advocacy:** From January 2025 through July 2026, CMHAM shared 71 targeted social posts that achieved a 5.4% engagement rate. Compared to the previous period (June 2023 through December 2024), impressions increased by 55% and engagements by 122%.
 - » Created dedicated content calendars for Medicaid defense, HB 6022, 2026 poll results, and two separate series on Myth vs. Fact.
 - » Developed multimedia content, including the 2026 Summer Conference photo album and a video featuring an individual sharing what receiving care from CMHs means to him.
3. **PIHP Specific Efforts, Press Conference, and Walk A Mile Rally:** Comprehensive planning and execution of the annual Walk A Mile rally and an accompanying PIHP press conference, featuring keynote speaker Sen. Stabenow.
 - » Managed extensive event logistics, including a comprehensive run-of-show, speaker coordination, A/V support, and onsite press management.
 - » Designed and printed physical collateral, including six unique Walk A Mile poster designs for rally participants and Myth vs. Fact posters.
 - » Distributed targeted media advisories and follow-ups that secured eight onsite reporters and generated 34 total media clips. Following the event, footage was edited into four distinct highlight videos for continued messaging.
 - » Distributed a media alert featuring a quote from R. Sheehan praising CMHs for filing a relevant lawsuit.
4. **Paid and organic media campaigns against competitive procurement:**
 - » Launched a paid media campaign utilizing traditional media, LinkedIn, and banner advertisements on Michigan’s capitol news services, MIRS and Gongwer, highlighting key voices against the competitive procurement process for PIHPs.
 - » Executed a highly successful organic social media campaign (August through October 2025) featuring Myth vs. Fact materials and media coverage. This focused campaign generated 113 new followers and over 24,416 total impressions across 24 posts.
5. **Partnership of CMHA and a number of CMHA members with the Issue Media Group (IMG),** built around the concept of “solutions journalism” – providing dozens of news stories, annually, centered around the innovative and concrete ways that CMHA member organizations are serving their communities.
6. **New CMHA Digital Magazine:** CMHA developed a new digital magazine to highlight the innovative work, programs, successes, and activities of member organizations across Michigan. Three editions will be published each year, with each edition released in advance of CMHA’s annual conferences, providing a platform to share member stories and showcase the impact of Michigan’s public behavioral health system.



Policy and Fiscal Analysis

The CMHA carries out a range of policy and fiscal analysis initiatives with the aim of fostering wise decision making and advocacy around a range of issues that impact the members of the Association, and the persons and communities served by the Association’s members.



Examples of this work by CMHA over the year include:

1. Developed and issued a number of white papers, by the Association’s Center for Healthcare Integration and Innovation (CHI2), on topics of vital importance to the Association’s members.
 - » Healthcare Integration and Coordination – 2024/25 Update: Survey of Initiatives of Michigan’s Public Mental Health System
 - » Investigation of Michigan Residents Crossing Wisconsin Border to Seek Inpatient Mental Healthcare
 - » Behavioral Healthcare Workforce Shortage Survey Analysis 2025
 - » Accurate Picture Initiative: Statewide Satisfaction Survey Report 2025
2. Carried out in-depth and accessible fiscal analysis related to a number of financing and policy issues:
 - » Monthly analysis of actual Medicaid revenues to the system in comparison to projected revenue
 - » Fiscal analysis in support of effort to raise the wages of Michigan’s Direct Care Workers
3. With support from the Michigan Health Endowment Fund, developed a set of recommendations for reducing the administrative and paperwork burdens experienced by persons served and clinicians.

Past CHI2 white papers have included and can be found at the CMHA CHI2 webpage.

4. Developed, in partnership with the CMHA Rural Caucus, a set of policy and practice recommendations designed to meet the unique needs of rural communities.
5. Developed, in partnership with the CMHA CCBHC Caucus, a set of policy and practice recommendations for the continual refinement of Michigan’s CCBHC system.
6. CMHA organized statewide member review and advocacy regarding MDHHS’s proposed Intensive Crisis Stabilization Services policy. Through the Legislative & Policy Committee, CMHA collected implementation concerns from members and provided coordinated feedback to the state regarding operational, clinical, and policy implications.
7. CMHA provided leadership in evaluating proposed Assisted Outpatient Treatment legislation (HBs 4412-4414), identifying concerns related to mediation requirements, court processes, treatment timelines, and funding impacts. CMHA facilitated member input and shared recommendations with policymakers to help ensure clinically appropriate and fiscally sustainable implementation.
8. Autism Behavioral Health Treatment (ABA/BHT) Policy – CMHA prepared a detailed response to MDHHS Project 2613-BCCHPS. CMHA raised concerns regarding:
 - » Medical necessity standards
 - » Expansion of eligibility criteria
 - » Discharge criteria
 - » Removal of physical examination requirements before treatment
 - » Service hour expectations
 - » Duplication of school-based services

The comments reflected significant policy analysis and formal recommendations to MDHHS.

9. CMHA helped develop strategies and guidance related to PIHP procurement, future RFPs, and protecting Michigan’s public behavioral health governance structure. Committee records reference CMHA’s effort to develop a stakeholder guidance group and advocacy framework to strengthen and preserve the public system.



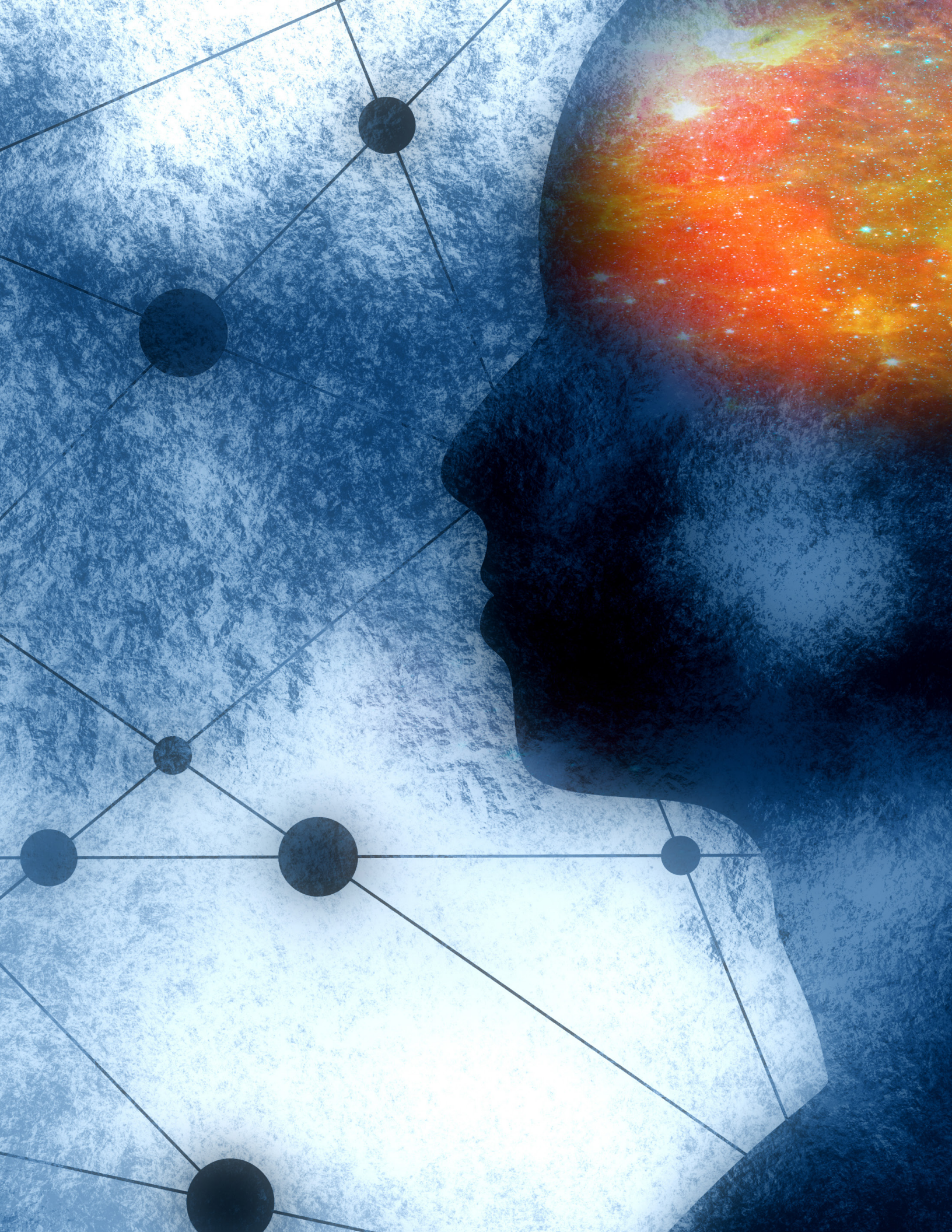
Representing & linking members with dialogue and co-development venues, information, resources, partnerships

Formed the Rural and Frontier Caucus to foster the development of policies and practices designed The CMHA links its members to key resources while representing and drawing its members into a range of decision making and dialogue venues with key decisionmakers at state and national levels.

Examples of this work by CMHA include:

1. Published the CMHA Weekly Update providing over 1,600 readers with up-to- date information on a range of topics: News related to Association’s members and CMHA, state legislative and policy activity, federal legislative policy activity, educational offerings sponsored by the Association and other reliable sources.
2. Posted a series of first-person podcasts in a series, “Connections”, replacing the electronic journal
3. Partnered with MDHHS and the Michigan Department of Treasury in promotion of MiABLE (Innovative, benefit-protecting, savings/investment program for persons with disability).
4. As part of Mi Kids Now initiative, partnered with MDHHS and a number of CMHA members to refine Michigan’s mental health services to children, adolescents, and families and to foster the coordination of the state’s child welfare and mental health systems.
5. Negotiated, through the Association’s CMH Contract Negotiation Team, on behalf of the CMH system, the CMH contract with MDHHS – leveraging the solidarity across the membership that leads to better outcomes to these negotiations.

6. Spoke at dozens of meetings of the Boards of directors and/or senior leadership of Association members on a range of issues, including state and national developments.
7. In partnership with NASW-Michigan, Public Sector Consultants, Michigan Association of Deans and Directors of Graduate Schools of Social Work, and with funding from the Michigan Health Endowment Fund, design and implemented the initiative “Practice-based Path to Social Work Licensure.
8. Worked in partnership with the Robert Wood Johnson Foundation Cost and Coverage Collaborative to protect and improve access to health care for Michiganders and all Americans.
9. Hosted quarterly meetings and annual retreat of the CEOs of the state’s CMHSPs and PIHPs, with representatives of CEOs of CMHA Provider Alliance.
10. Served as mental health advisor to Michigan’s Rural Health Transformation Program (RHTP) and grant administrator for several mental health components of the RHTP initiative.
11. Refined and supported the CMHA Persons Served Advisory Group – made up of and led by persons served-to ensure that persons served have a strong voice in setting the direction of CMHA.
12. Built and sustained strong partnership roles with major statewide advocacy organizations, including NAMI Michigan, Arc Michigan, Association for Children’s Mental Health, Mental Health Association in Michigan, Disability Rights Michigan, Michigan Disability Rights Coalition, and Autism Alliance of Michigan. Convened regular CEO and advocacy group meetings with CMH leadership and advocate leaders to strengthen system understanding, foster collaboration, and drive continuous system improvement.
13. Developed, maintained, and provided leadership in statewide coalitions focused on behavioral health, workforce development, healthcare access, licensure, suicide prevention, and injury prevention. Recruited and engaged Association members to serve as representatives and leaders in key coalitions, including the Direct Care Wage (DCW) Coalition, Protect MI Care Coalition and Steering Committee, NASW Licensure Coalition, Michigan Health Endowment Fund Behavioral Health Stakeholders Group, With One Voice, Kevin’s Song Suicide Prevention Coalition, Firearm Injury Prevention Clinical Coalition, and the Behavioral Health Learning Collaborative.
14. Children’s Services, MichiCANS, and Home-Based Services: Coordinated and participated in multiple statewide workgroups with MDHHS, CMHSPs, PIHPs, providers, advocates, and family representatives focused on strengthening children’s behavioral health services. Supported ongoing MichiCANS refinement efforts, helped identify and engage subject matter experts, and collaborated on revisions to home-based service models to improve consistency, access, quality, and outcomes for Michigan children and families.
15. Continued strong partnerships with national organizations, including:
 - » **National Council for Mental Wellbeing:** Link to national legislative and policy efforts, regular dialogue with National CCBHC technical assistance center, support for CMHA efforts to fight privatization and related erosion of the system, large number of CMHA member staff and Board members attend, at a discount, National Council conference, several representatives CMHA members serving on Board of Directors
 - » **National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD):** link to national legislative and policy efforts specifically linked to the work of county-based systems, access to high level federal health care administrators





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The Community Mental Health Association of Michigan is the state association representing Michigan's public Community Mental Health (CMH) centers, the public Prepaid Inpatient Health Plans (PIHP – public health plans formed and governed by CMH centers) and the private providers within the CMH and PIHP provider networks. **FOR MORE INFORMATION, PLEASE VISIT CMHAM.ORG OR CALL 517-374-6848.**