

Section:	Policy Name:	Policy Number:
Substance Abuse Treatment &	Wait List and Capacity Management for Substance	11.02
Prevention	Use Disorder Services	
Owner:	Reviewed By:	Total Pages:
Substance Use, Prevention &	Joel Smith	4
Treatment Director		
Required By:	Final Approval By:	Date Approved:
☐ BBA ☒ MDHHS ☐ NCQA	Tool 1 Court 1 Chilles	
☐ Other (please specify):	Joel A. Smith, LSMW	Jul 15, 2022
	Joel A. Smith, LSMW (Jul 15, 2022 15:57 EDT)	,
Application:	Line of Business:	Effective Date:
⊠ SWMBH Staff/Ops	☐ Medicaid ☐ Other (please specify):	1/1/2014
☑ Participant CMHSPs	☐ Healthy Michigan	
SUD Providers	⊠ SUD Block Grant	
☐ MH/IDD Providers	☐ SUD Medicaid	
☐ Other (please specify):	☐ MI Health Link	
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Policy: In accordance with the Michigan Department of Health and Human Services (MDHHS) contract, Southwest Michigan Behavioral Health (SWMBH), which is the regional entity for Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph and Van Buren counties (herein after referred to as SWMBH), providers will maintain a waiting list for persons who cannot be served immediately or who are underserved, when resources are unavailable.

Purpose: To communicate the requirements for:

- a. Maintaining substance use disorder services waiting lists for indigent-funded persons (this policy does not apply to persons with Medicaid, MI Child or Healthy Michigan benefits; no individual with Medicaid, MI Child or Healthy Michigan benefits will be placed on a waiting list for medically necessary services)
- b. Reporting requirements for federal priority population individuals placed on a waiting list for services
- c. Reporting requirements for agencies that serve injecting drug users and reach 90% capacity to admit new individuals

This policy applies to all substance use disorder treatment providers, including the Access Management System.



Scope: The policy impacts SWMBH, SWMBH contracted substance use treatment providers, and participant CMHSPs that serve priority population individuals.

Responsibilities: Substance use disorder treatment providers, participant CMHSPs and SWMBH are responsible for assuring components of this policy are met.

Definitions: Priority Population (Substance Use Disorder Services Only)

Persons who present for services at any access management system (AMS) and are: (i) Pregnant women who are injecting drug users; (ii) Pregnant substance abusers; (iii) Injecting drug users (who have injected in the past 30 days); (iv) and parents whose children have been removed from the home or are in danger of being removed from the home. Such persons are considered priority individuals and should not be placed on a wait list for medically necessary SUD services.

Standards and Guidelines:

- A. It is the preference of SWMBH that all eligible persons be admitted into substance use disorder services upon request. Individuals seeking services will be screened for financial eligibility by the AMS and for medical necessity and referred for services within the timeframes established for their priority population level (see exhibit A).
- B. Eligible federal priority populations (not including persons with Medicaid, MI Child or Healthy Michigan) will be placed on a waiting list for the requested service when there is not sufficient program capacity for admission or when the person cannot be admitted to treatment within the specified number of days according to his/her priority population status.
- C. Providers will assure interim services are provided for customers who are placed on a wait list as outlined by the MDHHS master contract.
- D. Providers will complete the Federal Priority Population Waiting List Certification (Attachment A) to report persons with Priority Codes 1, 2 and/or 3, who are placed on a waiting list for treatment by SWMBH. Reports are due by the 15th of the month *following* the month in which a deficiency occurred.
- E. SWMBH, and providers as needed, will follow the Priority Populations Waiting List Deficiencies reporting requirements (Attachment A).
- F. Providers who serve Injecting Drug Users must report to SWMBH when they reach 90% capacity to admit individuals to the program and when the program capacity decreases below 90%.
 - a. Providers will complete the Injecting Drug Users 90% Capacity Report (Attachment B) to report capacity issues.
 - b. Providers will follow the Injecting Drug Users 90% Capacity Report, Report



Instructions (Attachment B).

- c. SWMBH will notify MDHHS of providers who reach 90% capacity as outlined in the MDHHS master contract.
- G. SWMBH will continuously monitor provider waiting lists reported by providers for all populations and consult with the SWMBH SUD Director regarding any provider trends or exceptions.

References: MDHHS Master Contract

Attachments:

- A. 11.02A Injecting Drug Users 90% Capacity Treatment Report
- B. 11.02B Cover Letter/SA WL/Counseling and Education



Revision History

Revision # Revision Date		Revision Location	Revision Summary	Revisor	
Initial	7/24/19	ALL	Converted document to new template	Alona Wood	
1	7/6/21	Scope and responsibilities	Composed scope and responsibilities	Anastasia Miliadi	
2	6/21/22	Various sections	Removed OROSC language and replaced with MDDHS, added SWMBH reporting requirements for 90% capacity, added interim services requirement.	J. Smith	
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11.02 Wait List and Capacity Management for Substance Use Disorder Services

Final Audit Report

2022-07-15

Created:

2022-07-15

By:

Jody Vanden Hoek (jody.vandenhoek@swmbh.org)

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"11.02 Wait List and Capacity Management for Substance Use Disorder Services" History

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Michigan Department of Health and Human Services Behavioral Health & Development Disabilities Administration

Injecting Drug Users 90% Capacity Treatment Report

Fiscal Year:				
Prepaid Inpatient Health Plan Name:				
Contact Person:				
Contact Person's Email Address:				
Report Quarter:				
IDU Providers Reached 90% Capacity During the Quarter:	YES NO			
Column A	Column B	Column C	Column D	Column E
Names of Providers Serving Injecting Drug Users at or Above 90% Capacity During the Quarter	Start Date of Being at 90% Capacity	End Date of Being at 90% Capacity	License Number	Inventory of Substance Abuse Treatment Services Number (I-SATS #)

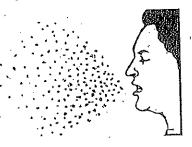
Tuberculosis: Get the Facts!

What is tuberculosis?

Tuberculosis (TB) is a disease that usually affects the lungs. TB sometimes affects other parts of the body, such as the brain, the kidneys, or the spine. TB disease can cause death if untreated.

How is TB spread?

TB germs are spread from person to person through the air. TB germs are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, laughs, or sings. TB is NOT spread by sharing silverware or cups, sharing cigarettes, or sharing saliva when kissing someone.



What are the symptoms of TB? People with TB disease often feel weak or sick, lose weight, have fever, and have night sweats. If their TB disease is in the lungs, they may also cough and have chest pain, and they might cough up blood. Other symptoms depend on what part of the body is affected.

What is the difference between TB disease and TB infection?

People with TB disease are sick from the large number of TB germs that are active in their body. They usually have one or more of the symptoms of TB disease. These people may pass the TB germs to others. TB disease can cause permanent body damage and death. Medicines which can cure TB disease are given to these people.

People with TB infection also have the germs that cause TB in their body. But they are not sick because there are not as many of the germs, and the germs lie dormant (sleeping) in their body. They cannot spread the germs to others. However, these people could develop TB disease in the future, especially if they are in one of the high-risk groups listed under "Who gets TB disease?" People with TB infection can take medicine to prevent them from developing TB disease.

Who gets TB disease?

Once a person has TB infection, he or she has a higher chance of getting TB disease if the person:

- · Has HIV infection.
- Has been recently infected with TB germs (in the last 2 years).
- Has other health problems, like diabetes, that make it hard for the body to fight germs.
- Abuses alcohol or illegal drugs.
- Was not treated correctly for TB infection in the past.

How can I tell If I have TB?

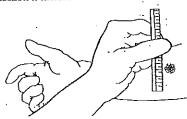
Get a TB skin test or blood test. If you have a positive reaction to either of the tests, you will probably be given other tests to see if you have TB infection or TB disease.

Where can I get a TB skin test or blood test?

You can get a TB skin test or blood test from your doctor or local health department.

How are the TB tests given?

For a TB skin test, a health care worker uses a small needle to put some testing material, called ruberculin, just under your skin. This is usually done on the lower inside part of your arm. After you get the test, you must return in 2 to 3 days to see if there is a reaction to the test. If there is a reaction, the size of the teaction is measured.



If the blood test is available at your local health department, some of your blood will be taken to do the test. You will be instructed on how to get the results of your test.

What if the test is negative?

A negative skin test usually means you are not infected. However, the test may be falsely negative if you were infected recently. It usually takes 2 to 10 weeks after exposure

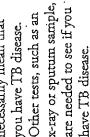
falsely negative if your immune system is not test to react as positive. The test may also be to a person with TB disease for your skin working properly.

A negative blood test usually means you are not infected.

What if the test is positive?

A positive skin test or blood test usually

been infected with the necessarily mean that TB germ. Ir does not means that you have





What if I had the BCG vaccine?

vaccine, you will need a TB skin test or blood against TB. You may still get TB infection or BCG vaccine does not usually protect adults BCG is a vaccine for TB. This vaccine is not often given to infants and small children in other countries where TB is common. The TB disease. Even if you have had the BCG test to see if you may have TB infection or widely used in the United States, but it is [B disease.

What should I do if I have TB infection or TB disease?

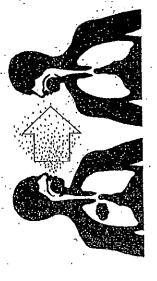
Get the required follow-up tests. Follow your doctor's advice and take

the medicine as prescribed. Today, both TB infection rreated and cured with and TB disease can be medication.

For further information on TB, local health department. contact your

Tuberculosis Elimination www.cdc.gov/tb CDC Division of Website at Or visit:

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Get the Facts!



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Counseling and Education Information From Southwest Michigan Behavioral Heath

Please review the enclosed information about counseling and education opportunities that are available in your community.

County County	Health Department contact information				
Barry 	Barry/Eaton District Health Department 330 W. Woodlawn Ave. Hastings, MI 49058 269-945-9516				
Berrien	Berrien County Health Department 769 Pipestone Road, Benton Harbor, MI 49023 269-926-7121				
	Berrien County Health Department 1205 N. Front Street, Niles, MI 49120 29-684-2800				
	Berrien County Health Department 21 N. Elm Street, Three Oaks, MI 49128 269-756-2008				
Branch	Branch-Hillsdale-St. Joseph Community Health 570 N. Marshall Road, Coldwater, MI 49036 517-279-9561				
Calhoun	Calhoun County Public Health Dept. 190 E. Michigan Ave., Battle Creek, MI 49014 269-966-1489				
	Calhoun County Public Health Dept 101 N. Albion St., Albion, MI 49224 517-629-9434				
	Calhoun County Public Health Dept 315 West Green Street, Marshall, MI 49068 269- 781-0700				
Cass	Van Buren Cass District Health Department 201 M-62 Cassopolis, 49031 269-445-5280				
Kalamazoo	Health and Community Services				
	3299 Gull Road, Kalamazoo, MI 49048 269-373-5200				
St. Joseph	Branch-Hillsdale-St. Joseph Community Health 1110 Hill Street, Three Rivers, MI 49093 269-273-2161				
Van Buren	Van Buren Cass District Health Department 57418 CR 681 Hartford, MI 49057 269-621-3143				

Emergency Services are available 24 hours a day, 365 days a year. If you feel that you need Emergency Services, please contact us at our Access Center numbers: (269) 373-6000 or 1-888-373-6200.