

MIHEALTH LINK CHANGES

As of January 1, 2023, Southwest Michigan Behavioral Health (SWMBH) will no longer manage your behavioral health plan for MIHealth Link. You will continue with either Aetna Better Health Premier Plan or Meridian Complete. Southwest Michigan Behavioral Health is working very closely with Aetna and Meridian to make sure this transition has the lowest impact to its members who receive behavioral health services for their MIHealth Link benefit.

If you do not currently receive behavioral health services managed by SWMBH, then you will not be affected by this change. If you need to seek behavioral health services after January 1, 2023, please contact your health plan, Aetna or Meridian. You can reach them at the phone numbers on the back of the new insurance card that will be issued to you in December.

Please be aware that this change only applies to the Medicare-funded behavioral health services that are provided through the MI Health Link program. SWMBH will continue to manage the Medicaid-funded specialty behavioral health services.

Thank you again for entrusting in us to provide you and your family with high quality value-based care. For more information call SWMBH at 1-800-676-5814 or TTY 711 or see our frequently asked questions by clicking the link below:

<https://www.swmbh.org/providers/mi-health-link/>



MIHEALTH LINK COMPLEX CASE MANAGEMENT

SWMBH complex case management will be ending 12/31/22. Most people with MHL do not get complex case management services. Members working with a SWMBH Integrated Healthcare Specialist for complex case management will transition to a designated care manager at either Aetna or Meridian MI Health Link. The SWMBH Integrated Care Team will work closely with Meridian and Aetna through the month of December to ensure each member case has an individualized warm transfer including updated case information and linking with identified providers to best support member needs.

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Printed with funds received from the Michigan Department of Health and Human Services

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH CUSTOMER ADVISORY COMMITTEE

Southwest Michigan Behavioral Health (SWMBH) has a Customer Advisory Committee. The idea of the committee is to make certain that customers can give input to SWMBH. Members give advice on items which directly or indirectly affect the quality of the behavioral health services and supports offered within the SWMBH region. The region is made up of Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren Counties. Committee members are responsible for but not limited to:

A. Reviewing and giving feedback on documents as prepared for use all over the SWMBH network such as Customer Handbook and other informational materials.

B. Reviewing questions asked in questionnaires, surveys, and the like, in which customers will be asked to take part.

C. Reviewing Satisfaction

Survey results and regional plans for change.

D. Reviewing results of the Performance Improvement Projects and regional plans for change.

E. Reviewing results of Michigan Department of Community Health (MDCH) and Health Services Advisory Group (HSAG) reviews and regional plans for change.

F. Review of any other state or federal documents as requested by SWMBH for feedback.

If you currently have Medicaid or Healthy Michigan as your insurance, are a primary or secondary customer (advocate) of Mental Health/ Developmentally Disabled or Substance Use Disorder services and would be interested in learning more about the SWMBH Customer Advisory Committee please contact your local Customer Service Department (contact information included in this newsletter) or SWMBH Customer Service Department at 1-800-890-3712 or customerservice@swmbh.org



988 SUICIDE & CRISIS LIFELINE

Earlier this year the National Prevention Suicide Lifeline began operating a nationally known statewide system to connect people in mental health crisis. Anytime, Anywhere, you can call or text 988 and speak with a mental health professional 24/7 hours, 7 days a week. If you are experiencing a mental health emergency or have thoughts of suicide. Help is available. Here in Michigan, are dedicated to assisting and serving the needs of individuals across the state. Calling 988 does not replace the National Suicide Prevention Line 1 (800) 273-TALK or the Veterans Crisis Text 838255.

2022 SOUTHWEST MICHIGAN BEHAVIORAL HEALTH SUCSESSES AND ACCOMPLISHMENTS

SWMBH 2022 Accomplishment Highlights

- SWMBHs most recent 2021-2022 Consumer Satisfaction Survey showed significant improvements in important areas, such as; ‘Improved Outcomes’ for Adults and ‘Improved Functioning’ for Children.
- SWMBH has achieved an Unqualified Audit Opinion for Fiscal Year (FY) 21, which means SWMBH was found to be in full compliance with managing resources. This also shows that; the auditors agree with the processes and the way SWMBH handles and manages funds for all business lines.
- SWMBH conducted the annual Cultural Accelerator survey to measure employee engagement and staff satisfaction, showing a positive improvement in both areas for FY22.
- Completed 37 Trainings with a total attendance of 981- an increase of 647 training participants from last year. Topics included: SIS Assessment Orientation, Patients in Crisis: Life Threatening Risks of Opioids, Medical Marijuana, Vaping, safeTalk, Human Trafficking. Implicit Bias Training, Social Work Ethics Pain Management, Methamphetamine Prevention, Transgender Mental Health, Suicide Risk Assessment, Person Centered Thinking, EMDR, and Mindfulness.
- 99.7% of (710) available Habilitation Supports Waiver slots provided by the State have been filled for FY22 (from October 1, 2021 through September 30, 2022). SWMBH has continued to have the best HSW slot utilization rate throughout the State of Michigan over the past 5 years.
- SWMBH supported 845 Autism Client Cases (up from 668 in 2021) and worked with Community Mental Health Service Providers to close out cases that had been left open unnecessarily to reflect proper enrollment numbers.
- Utilization Management completed 29,056 total authorizations for service; 17,839 Prospective Review Substance Use Disorder (SUD) events; 1,828 individuals who were admitted for psychiatric hospitalizations or crisis residential stays and 14,752 incoming SUD calls with an average phone queue time of 7 seconds or 98.68% of calls were answered in 30 seconds or less.
- SWMBH Veteran Service Navigator conducted meetings with approximately 120 new Veterans or Veteran Family Members and participated in over 15 Veteran Community Events, providing education on services and programs available for our Veterans to take advantage of.
- There was a 43.9 % reduction in Emergency Room claims and 73.3% reduction in inpatient episodes, for the six months prior to Integrated Care Team (ICT) involvement versus six months post ICT involvement. Overall, there were less emergency room claims this year than in years prior (65.1% decrease).
- SWMBH has trained 2,365 community members on the use/administration of naloxone. A total of 2,694 naloxone rescue kits have been distributed, resulting in 89 reversals by community members and 121 reversals by First Responders.
- SWMBH achieved a 96% Compliance Score on the Michigan Department of Health and Human Services 2021-2022 Performance Bonus Incentive Program (PBIP) Metrics; translating into a \$2,174,845 achieved bonus award for the Region.
- SWMBH performed very well on the most recent 2022 Health Service Advisory Group (HSAG) – Performance Measure Validation Audit; with 37 out of 37 total elements evaluated, receiving a designation score of “Met,” “Reportable” or “Accepted,” which represents 100% compliance.

(Please see the full list of 2022 Accomplishments by clicking on the link below):

[The Latest News from Southwest Michigan Behavioral Health | Southwest Michigan Behavioral Health](https://www.swmbh.org)

(swmbh.org)

2023-2024 SWMBH BOARD ENDS METRICS

Fiscal and Calendar Year Metrics (Board Approved on: November 11, 2022)

Metric	Description	Deliverable/Goal	Date Range & Current Status
Strategic Imperative Category: Quality of Life <small>Persons with Intellectual Developmental Disabilities (IDD), Serious Mental Illness (SMI), Serious Emotional Disturbances (SED), Autism Spectrum Disorders (ASD), and Substance Use Disorders (SUD) in the SWMBH region see improvements in their quality of life and maximize self-sufficiency, recovery and family preservation.</small>			
Metrics 1-5 are from the 2023 Performance Bonus Incentive Program			
1. Achieve 95% of Veteran's Metric Performance -Based Incentive Program monetary award based on FY23 MDHHS specifications. (25 pts. via MDHHS Contract) *1 point will be awarded for successful completion. Confirmation via MDHHS official PBIP report received in December 2023. SWMBH Metric Owner: Sarah Ameter and Natalie Spivak	This metric is in direct alignment with the 2023 Performance Bonus Incentive Program (PBIP) (P.1, PA 107 sec 105d) Identification of beneficiaries who may be eligible for services through the Veteran's Administration.	a. Timely submission of Veteran Services Navigator collection form by the last day of the month following the end of each quarter. b. Submit BH TEDs data quality monitoring narrative report by 1/1/2023. c. Submit VSN – BH TEDs comparison narrative report by 7/1/2023.	Pending Reporting Period 10/1/23 – 9/30/23 Metric Board Report Date: October 13, 2023
2. Achieve 95% of Increased Data Sharing Performance Bonus Incentive Program (PBIP) monetary award based on MDHHS specifications. *1 point will be awarded for successful completion. Confirmation via MDHHS official PBIP report received in December 2023. SWMBH Metric Owner: Natalie Spivak	This metric is in direct alignment with the 2023 Performance Bonus Incentive Program (PBIP) (P.2, PA 107 sec 105d) Sending ADT messages for purposes of care coordination through health information exchange.	SWMBH will submit to MDHHS a narrative report by 7/31/2023, listing CMHSP's sending ADT messages, and barriers for those who are not, along with remediation efforts and plans. In the event that MiHIN cannot accept or process contractor's ADT submissions this will not constitute failure on Contractor's part.	Pending Reporting Period 10/1/23 – 9/30/23 Metric Board Report Date: October 13, 2023
3. SWMBH will achieve the FY23 Initiation and Engagement State Specified benchmarks and participate in DHHS led data validation activities. SWMBH Metric Owner: Joel Smith Supporting SL's: Jonathan Gardner Alena Lacey	This metric is listed under section P.3, PA 107 sec 105d in the 2023 MDHHS PBIP specification table. This metric is also utilized for the 2023 PBIP, CCBHC and OHH bonus incentive programs. The percentage of adolescents and adults with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following: 1. Initiation of AOD Treatment: The percentage of beneficiaries who initiate treatment within 14 calendar days of the diagnosis. 2. Engagement of AOD Treatment: The percentage of beneficiaries who initiated treatment and who had two or more additional AOD services or Medication Assisted Treatment (MAT) within 34 calendar days of the initiation visit.	a. The PIHP must participate in DHHS planned and DHHS-provided data validation activities and meetings. PIHPs will be provided IET data files by January 31 each year, and within 120 calendar days, return their data validation template, completed, to DHHS. 1 point b. CCBHC Goal – Participating CCBHC sites achieve IET-14-day metric at 42.5% and the IET-34-day metric at 18.5% per state indicated benchmarks. ½ point each	Pending Data Collection Period 10/1/22 – 9/30/23 Metric Board Report Date: November 10, 2023
Metric	Description	Deliverable/Goal	Date Range & Current Status
4. SWMBH will submit a qualitative narrative report to MDHHS receiving no less than 90% of possible points; by November 15, 2023, summarizing prior FY efforts, activities, and achievement of the PIHP and CMHSPs, specific to Patient-Centered Care activities and programs throughout the PIHP region. *1 point will be awarded for successful completion. Confirmation via MDHHS official PBIP report received in December 2023. SWMBH Metric Owner: Jonathan Gardner Supporting SL's: Alena Lacey	This metric is in direct alignment with the 2023 Performance Bonus Incentive Program (PBIP) (P.4, PA 107 sec 105d) Points for Narrative Reports will be awarded on a pass/fail basis, with full credit awarded for submitted narrative reports, without regard to the substantive information provided. The State will provide consultation draft review response to the Contractor by January 15th. The Contractor will have until January 31st to reply to the State with information.	The Contractor must submit a narrative report of no more than 10 pages by November 15, 2023 summarizing prior FY efforts, activities, and achievements of the Contractor (and component CMHSPs if applicable) to increase participation in patient-centered medical homes. The specific information to be addressed in the narrative is below: 1. Comprehensive Care 2. Patient-Centered 3. Coordinated Care 4. Accessible Services 5. Quality & Safety	Pending Reporting Period 10/1/23 – 9/30/23 Metric Board Report Date: February 9, 2024

Metric	Description	Deliverable/Goal	Date Range & Current Status
5. Achieve Compliance (based on MDHHS specified benchmarks) on Follow-up After Hospitalization for Mental Illness within 30 days (FUH) for beneficiaries six year of age and older and show a reduction in disparity with one minority group. SWMBH Metric Owner: Alena Lacey	This metric is in direct alignment with the 2023 Performance Bonus Incentive Program (PBIP) (J.2, PA 107 sec 105d) The points will be awarded based on MHP/Contractor combination performance measure rates. The total potential points will be the same regardless of the number of MHP/Contractor combinations for a given entity.	a. Plans will meet set standard for follow-up within 30 days for each rate (ages 6-17) and (18 and older). Plans will be measured against the adult minimum standard of 58% and child minimum standard of 70%. The measurement period will be calendar year 2022. b. Data will be stratified by race/ethnicity by MDHHS and delivered to PIHPs. PIHP's will be incentivized to reduce a disparity between the index population and at least one minority group. The measurement will be a comparison of calendar year 2021 with calendar year 2022.	Pending Data Collection Period 1/1/23 – 12/31/23 Metric Board Report Date: February 9, 2024
Strategic Imperative Category: Exceptional/Access to Care <small>Persons and families served are highly satisfied with the services they receive.</small>			
6. 2023 Customer Satisfaction Surveys collected by SWMBH are at or above the 2022 results identified in (a & b) and performance improvement areas/plans are identified. SWMBH Metric Owner: Jonathan Gardner Supporting SL's: Sarah Ameter, Anne Wickham and Mila Todd	This metric is in direct alignment with Section V of the 2023 MDHHS-PIHP contract "Member Experience with Services" a. The survey methodology must include a quantitative assessment (e.g., surveys) of member experience with services. b. The methodology must include a qualitative assessment (e.g., focus groups) of member experience with services.	a. Mental Health Statistic Improvement Project Survey (MHSIP) tool. <i>(Improved Functioning – baseline: 84.1%)</i> 1 point b. Youth Satisfaction Survey (YSS) tools. <i>(Improved Outcomes – baseline 81.3%)</i> 1 point c. Complete a series of Consumer oriented focus groups and work with the Consumer Advisory Committee to document, understand and act upon potential improvement efforts that impact overall Consumer Satisfaction. 1 point d. Ensure that each CMHSP partner reviews site specific survey results and formulates Corrective Action Plans to drive identified or potential improvement areas.	Pending Survey Collection Period 10/1/23 – 12/30/23 Metric Board Report Date: February 9, 2024
7. Michigan Mission Based Performance Indicator System (MMBPIS) Data, Tracking and Analysis SWMBH Metric Owner: Jonathan Gardner Supporting SL: Joel Smith Alena Lacey	As directed by the 2023 MDHHS-PIHP contract "Performance Indicators": The PIHP must include performance measures established by MDHHS in the areas of access, efficiency and outcomes. The PIHP must track and perform analysis to ensure each performance indicator is meeting the minimum performance benchmark/standard. Currently (7) Indicators have targeted benchmarks.	a. 24/28 indicators meet the State Benchmark, throughout all FY23 for 4 consecutive quarters 1 point b. Indicator 3a,b,c & d achieve a 3% combined improvement (through FY 23 all 4 Quarters) over 2022 baseline (1/2 pt. each) 2 points.	Pending Data Collection Period 10/1/22 – 9/30/23 MMBPIS Performance Indicator Descriptions Metric Board Report Date: February 9, 2024
8. 2023 CCBHC Program Customer Satisfaction Surveys collected by SWMBH represent an 85% First Year "in agreement" Satisfaction rate average across all categories measured. SWMBH Metric Owner: Jonathan Gardner and Ella Philander	Per the 2022 CCBHC codebook section 13.B.2 and 13.B.3; the PIHP is responsible for evaluation and overall member satisfaction of the CCBHC program. The survey and assessment should consider availability and accessibility to services for eligible consumers, not just those being served. Focus groups, satisfaction surveys or advisory councils should be reviewed to determine appropriateness of service site locations.	a. SWMBH will administer an annual CCBHC consumer satisfaction survey, collecting responses from CCBHC participants using a hybrid MHSIP and YSS survey tool approved by MDHHS. ½ point b. SWMBH will complete analysis and reports for MDHHS and CCBHC locations, delivering results and identified areas/opportunities for improvement by June 2023. ½ point	Pending Data Collection Period 10/1/22 – 3/30/23 Metric Board Report Date: July 14, 2023

Review and Approval Timeline:

- ✓ Quality Management Committee (QMC): October 22, 2022
- ✓ Clinical Practices Committee (CPC): October 10, 2022
- ✓ Operations Committee Endorsement: October 26, 2022
- Board Review and Approval: November 11, 2022

Metric Results Key: (Achieved) – (Pending) – (Not Met)

Strategic Imperative Category: Quality and Efficiency The SWMBH region is a learning region where quality and cost are measured, improved, and reported.			
Metric	Description	Deliverable/Goal	Date Range & Current Status
9. 2023 Health Service Advisory Group (HSAG) External Quality Compliance Review (EQR) Results and Improvement Strategies SWMBH Metric Owner: All SL's with contributor's dependent on Standards selected for review during specified Fiscal Year	As directed by the 2023 MDHHS PPHP contract Attachment P 7.7.1.1 – Amendment 1 – Medicaid Managed Specialty Supports Services/Programs, the PPHP must adhere to annual audits of the following categories: Member Rights, Emergency Services, Availability of Services, Assurances and Capacity of Services, Coordination of Care, Provider Selection, Confidentiality, Grievance and Appeals System, Sub contractual Delegation, Practice Guidelines, Health Information Systems and Quality Assessment and Performance Improvement Programs.	a. All standards or corrective action plans reviewed, will receive a score of 90% compliance, or designation that the standard has been “Met” or “Accepted” or SWMBH will be within the top 2 scoring Michigan PPHP's. 1 Point.	Pending Data Collection Period 10/1/22 – 9/30/23 Metric Board Report Date: November 10, 2023
10. 2023 HSAG Performance Measure Validation (PMV) Audit Results and Improvement Strategies SWMBH Metric Owner: Natalie Spivak SL Contributors: Jonathan Gardner and other contributor's dependent on Standards selected for review during specified Fiscal Year	As directed by the 2023 MDHHS PPHP contract Attachment P 7.7.1.1 – Amendment 1 – Medicaid Managed Specialty Supports Services/Programs, the PPHP must adhere to annual audits of the following categories: Data Integration, Data Control, Data Accuracy and Performance Indicator Validation.	a. All standards or corrective action plans reviewed, will receive a score of 90% compliance, or designation that the standard has been “Met” or “Accepted” or SWMBH will be within the top 2 scoring Michigan PPHP's. 1 Point.	Pending Data Collection Period 1/1/23 – 6/30/23 Metric Board Report Date: November 10, 2023

Strategic Imperative Category: Improved Health Individual mental health, physical health and functionality are measured and improved			
Metric	Description	Deliverable/Goal	Date Range & Current Status
11. SWMBH will achieve CCBHC Demonstration Year 1 Quality Bonus Payment Metrics (QBP's), against the States FY23 indicated Benchmarks. SWMBH Metric Owner: Ella and Jonathan CMHSP Contributions/Owners: ISK and St. Joe	As directed by the 2023 CCBHC Handbook under Table 1, A.1 – QBP Metrics and Benchmarks. The Regional PPHP will work with CMHSP-CCBHC participant programs to define processes and strategies for collection and reporting data. The PPHP will be the primary liaison for the submission of all required reports and follow-ups as directed by MDHHS. SWMBH will submit reports based on the identified metrics to MDHHS within 6 months of DY 1 or by 3/31/2023.	1. Child and Adolescent Major Depressive Disorder, Suicide Risk Assessment (SRA-BHC - 23.9%) 2. Major Depressive Disorder, Suicide Risk Assessment (SRA-AD - 12.5%) 3. Adherence to Antipsychotic Meds for Individuals with Schizophrenia (SAA-AD - 58.5%) 4. Follow-up after Hosp. for mental illness, ages 18+ (FUH-AD - 58%) 5. Follow-up after Hospitalization for Children (FUH-CH - 70%) 6. Initiation and Engagement of Alcohol and other drugs (IET-14 - 42.5% & IET-34 - 18.5%)	Pending *5 bonus point for each metric (1-6) successfully achieved. Data Collection Period 10/1/22 – 3/30/24 Metric Board Report Date: November 10, 2023
12. SWMBH will retain 60% of (OHH) enrollees, enrolled after 9/30/22. Program Enrollees must maintain 'enrolled' status for at least 6 months. SWMBH Metric Owner: Joel Smith	The retention metric is defined within the OHH handbook for Performance Year 2 goals (10/1/22 through 9/30/23). Further guidance on the metric can be found by clicking on the resource below: www.michigan.gov/OHH .	a. 334 Enrollees in the OHH Program as of 9/30/22 b. OHH retention Metric: 60% of enrollees enrolled after 9/30/22 will remain in “enrolled” status for at least 6 months. (200 enrolled members by March 31, 2023) 1 point	Pending Data Collection Period 10/1/22 – 3/31/23 Metric Board Report Date: May 12, 2023
13. SWMBH will meet or exceed the Behavioral Health Treatment Episode Data Set (BH TEDS) compliance benchmarks established by MDHHS for FY23. SWMBH Metric Owner: Natalie Spivak	As directed by the 2023 MDHHS-SWMBH contract, performance metrics table, SWMBH shall maintain a 95% compliance rate within the applicable Mental Health, Substance Use Disorder and Crisis BH TEDS fields. Each element (MH, SUD and Crisis) must have a matching and accepted BH TEDS record, as confirmed by the MDHHS quarterly status report.	a. 97% of applicable MH served clients (with an accepted encounter) will have a matching and accepted BH TEDS record, as confirmed by the MDHHS quarterly status report. 1 point b. 97% of applicable SUD served clients (with an accepted encounter) will have a matching and accepted BH TEDS record, as confirmed by the MDHHS quarterly status report. 1 point c. 97% of applicable Crisis served clients (with accepted encounter) will have a matching BH TEDS record, as confirmed by MDHHS quarterly status report. 1 point	Pending Data Collection Period 1/1/23 – 12/31/23 Metric Board Report Date: January 12, 2024

Strategic Imperative Category: Mission and Value Driven CMHSPs and SWMBH fulfill their agencies' missions and support the values of the public mental health system.			
Metric	Description	Deliverable/Goal	Date Range & Current Status
14. SWMBH will meet or exceed FY23 contractual Critical Incident Reporting timeliness and efficiency benchmarks utilizing the new DHHS Customer Management System (CRM) SWMBH Metric Owner: Jonathan Gardner SL Contributors: Alena Lacey and SWMBH Chiefs	As of 10/1/2022, DHHS is requiring PPHP's to report through its new CRM system. The PPHP must meet the timeliness reporting standards to DHHS of: Immediate Events – 48 hours after becoming aware of the incident, Sentinel Events and Critical Incidents – 30 days after the end of the month in which the event occurred. The new CRM system requires that the PPHP provides timely updates as requested/assigned by DHHS.	a. SWMBH will submit all required incidents, meeting the identified benchmarks for Immediate, Sentinel and Critical Events. Final status will be provided through DHHS annual review results. 1 point b. SWMBH will provide annual CI site review audits on CMHSP's to ensure; timely reporting of Critical Incidents, appropriate documentation, involving the appropriate personnel, and using the information to address quality of care at their sites. ½ point c. SWMBH will convene the internal Immediate/Sentinel Event review task force, as needed; to ensure root cause analysis and other required elements were in compliance with contractual policy standards.	Pending Data Collection Period 10/1/22 – 9/30/23 Metric Board Report Date: November 10, 2023
15. SWMBH will meet or exceed MDHHS FY23 Autism Benefit Waiver Access to Care and Timeliness Standards SWMBH Metric Owner: Alena Lacey	SWMBH and MDHHS have placed emphasis on the underserved Autism population during 2023 and providing increased access and timeliness of services for those who have been waiting longer than 90 days for IPOS development and over 48 hours from referral to first scheduled appointment. The following metrics are State sponsored and targeted towards improving access and timeliness of service for consumers with an autism diagnosis.	a. Targeting Underserved Population: 30% improvement completing IPOS for consumers with Autism diagnosis who do not currently have an active IPOS in managed care system, or valid reason for inactivity listed in their record. (baseline 125 – 37 completed IPOS by 9.30.23). ½ point b. Decrease rate of overdue (over 90 days) autism 're-evaluations' within the SWMBH region by 10% by (9.30.23). Current rate of overdue evaluations is 20% (86/859)=10%. ½ point	Pending Data Collection Period 10/1/22 – 9/30/23 Metric Board Report Date: November 10, 2023

LEGEND: COMPLETED GOAL/ON TARGET: GREEN GOAL NOT MET/BEHIND SCHEDULE: RED PENDING: BLUE

Pending: could represent that;

- More information is needed.
- The event/program/intervention has been scheduled, but not taken place (i.e., audits or final data submissions).
- Data has not been completed yet (i.e., due quarterly or different time table/schedule).
- The Metric is on hold until further information is received.

Not Met: could represent that;

- The proof is behind its established timeline for being completed.
- Reports or evidence for that proof have not been identified.
- The identified metric proof has passed its established timeline target.

Achieved:

- Evidence/proof exists that the Metric has been successfully completed.
- The Metric has been presented and approved by the SWMBH Board.

COMMISSIONED TO THE OPIOID ADVISORY COMMITTEE

Brad Casemore has been appointed to the Opioid Advisory Commission (OAC) by House Democratic Leader Donna Lasinski. The OAC was created following the National Opioid Settlement allocation of funding to Michigan of ~800M. The commission is charged with establishing priorities to address SUD and co-occurring mental health conditions, recommend funding initiatives to the legislature, and recommend additional legislation if needed. The Subcommittee on Current Funding and Programmatic Impact was created during the OAC's first monthly meeting on August 31, 2022, which Brad has volunteered to serve on. To subscribe for OAC meeting notifications please visit <http://council.legislature.mi.gov/Council/OAC>.

WYATT'S LAW UPDATES TO CHILD ABUSE AND NEGLECT REGISTRY NOW IN EFFECT TO PROTECT CHILDREN, EMPOWER PARENTS

Changes improve registry to track offenders more accurately, keep kids and communities safe

Governor Gretchen Whitmer announced that stronger protections are now in place for kids, thanks to changes resulting from Wyatt's Law to Michigan's Central Registry for Child Abuse and Neglect. In May, the governor signed the bipartisan bill to allow parents and child-caring employers, such as schools and childcare facilities, to get information more easily on individual's history so they can better protect children. The law goes into effect today.

"As governor, there is no greater responsibility than keeping our kids safe," said Governor Whitmer. "Earlier this year, I signed the bipartisan Wyatt's Law, which improves this statewide registry to protect kids from abuse. Today, Michigan's registry for child abuse is easier for the public to access so they can keep their kids safe at home, at school, and everywhere in between. I am proud that we got this done, and it is proof of what's possible when we work across the aisle to keep our kids and communities safe. Let's keep collaborating to protect public safety and help our kids succeed."

"MDHHS will continue to work tirelessly to protect the safety and well-being of Michigan children," said Elizabeth Hertel, director of the Michigan Department of Health and Human Services. "Parents should not have to worry that their children are in danger when they are with another caregiver."

"It is with the hard work of so many people, both across the aisle and across many years, that this law takes effect," said Rep. Kevin Hertel (D-St. Clair Shores). "I am so grateful to have been able to do my part. I want to take a moment to say thank you to Erica Hammel, Wyatt's mother, who worked tirelessly for change and a better and more secure Michigan. The health and well-being of the people I represent is my top concern. Michigan children, communities and families will be safer because of Wyatt's Law."

Wyatt's Law is named after Wyatt Rewoldt, a child who was abused by his father's girlfriend, who had a previous history of child abuse. His mother, Erica Hammel, has worked to get the law passed since 2014 so that parents could be made aware of past abuse by caregivers of their children. The law provides greater access to the Central Registry for Child Abuse and Neglect, maintained by the MDHHS Children's Services Agency.

- Authorized organizations, such as schools and child care centers that seek employees or volunteers who work with children, will be able to get confirmation that a prospective employee or volunteer is on the registry if that person gives permission for the clearance. Prior to the changes in Wyatt's Law, MDHHS could only notify a requester if the person was not on the registry and could not confirm that someone was on it.
- A parent or person responsible for a child who has reason to believe that another caregiver may place the child at risk can seek confirmation as to whether that person is on the registry. The request must be made to the appropriate local Friend of the Court office if the person has an active case. If the requester does not have a Friend of the Court case, details will be available soon on the Central Registry page on the MDHHS website about how to make a request. The new law allows for someone to confirm registry placement for the child's parent, caregiver, or other person responsible.

Beginning November 1, 2022, the new improvements to the Central Registry for Child Abuse and Neglect will ensure the system is frequently updated to include those who meet the criteria for inclusion on the list, such as people with confirmed histories of serious abuse and neglect, sexual abuse, sexual exploitation, and/or methamphetamine production. Additionally, the system would ensure changes to the registry to keep it current with the new, stronger guidelines.



SWMBH'S 7TH ANNUAL REGIONAL HEALTHCARE POLICY FORUM: *WORKING TOGETHER*

Southwest Michigan Behavioral Health (SWMBH) is a Regional Entity, state-designated Community Mental Health Entity, and Medicaid Prepaid Inpatient Health Plan. Our Region spans 8 counties including Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren. SWMBH and its eight Community Mental Health Service Programs provide mental health, substance abuse, autism spectrum and intellectual and developmental disorder services to over 23,000 persons annually. The need and demand for these services is greater than ever before.

On Friday, October 7, SWMBH hosted their 7th Annual Regional Healthcare Policy Forum at the Four Points by Sheraton in Kalamazoo. This annual event provides an opportunity to bring community leaders and service providers together to share successes as well as challenges surrounding service delivery and ultimately, to connect, educate, inform, and inspire attendees. Stakeholders from all eight counties were invited including: physical and mental health service providers; substance abuse treatment providers; senior executives from hospitals and health systems; federally qualified health centers; community mental health authorities; Michigan Department of Health & Human Services (MDHHS); schools; county court systems, and other community agencies and advocates.

A continental breakfast was served, and the event began with Jeff Patton, Chief Executive Officer of Integrated Services of Kalamazoo (ISK), honoring Congressman Fred Upton an appreciation award for his lifetime of service to Michiganders and, more specifically, his support of those our region serves and their service providers.

Afterwards, a panel discussion centering on the current state of public behavioral healthcare and integrated care took place with panelists including Alan Bolter, Community Mental Health Association of Michigan (CMHAM); Kevin Fischer, National Alliance on Mental Illness Michigan (NAMI); Sean Harris, Recovery Institute of Southwest Michigan (RI); and David Schneider, Health Management Associates (HMA). (Sherri Boyd of Arc Michigan was slated to participate on the panel, but she had been unavoidably detained and was unable to attend.)

A delicious lunch of heavy hors d'oeuvres was enjoyed by all followed by a separate portion of the day, a Meet the Candidates event, which took place from 1:00 – 3:00 pm.

Incumbent and challenger candidates running for county, state, and national offices were invited; foremost, to learn more about the vital need for services and the current challenges in providing those services. Candidates shared their individual health and Medicaid policy priorities along with campaign materials.

Each county had a designated table where candidates representing, or hoping to represent, that specific county gathered to speak with attendees individually and in groups.

This year's event was well attended and another positive example of our regions' commitment and dedication to exceptional service provision in Southwest Michigan. Be sure to hold the date for SWMBH's 8th Annual Regional Healthcare Policy Forum on October 6, 2023.

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH AWARDS FRED UPTON

At its 7th Annual Health Policy Forum held October 7, 2022, SWMBH Board and Management presented Representative Fred Upton with a Proclamation and Award honoring his decades of public service and Policy leadership in health, behavioral health, and other issues. Representative Upton is retiring from the US Congress at the end of the session in 2022. Representative Upton made poignant and moving remarks to a rapt audience and greeted well-wishers afterwards.



SSI RECIPIENTS ELIGIBLE FOR DISCOUNTED INTERNET SERVICES

Earlier this year, the Federal Communications Commission (FCC) launched a program aimed at reducing cost barriers for internet access for eligible American households. The Affordable Connectivity Program (ACP) provides discounts on internet service up to \$30 per month for eligible households and up to \$75 per month for households on qualifying Tribal lands. Households can also receive a one-time discount of \$100 when purchasing a laptop, desktop computer, or tablet. Any individual within a household that receives Supplemental Security Income (SSI) is eligible for this program. In addition, other individuals may be eligible for ACP discounts if they receive assistance from programs such as Supplemental Nutrition Assistance Program (SNAP), Medicaid, and Federal Housing Assistance.

EMERGENCY SERVICES

If you are experiencing a life-threatening or medical emergency, unable to transport yourself to an emergency room, or if you are experiencing a life-threatening or medical emergency after hours, always call 9-1-1 right away.

A “mental health emergency” is when a person is experiencing symptoms and behaviors

- that can reasonably be expected in the near future to lead him/her to harm self or another;
- his/her inability to meet his/her basic needs he/she is at risk of harm;
- the person’s judgment is so impaired that he/she is unable to understand the need for treatment and that his/her condition is expected to result in harm to him/herself or another individual in the near future

You have the right to receive emergency services at any time, 24-hours a day, seven days a week, without prior authorization for payment of care.

If you have a mental health emergency, you should seek help right away. You can call the emergency number for your CMH office, you can go to any hospital that offers emergency care, or you can call 911.

Emergency Assistance is available 24 hours a day, 7 days a week from CMH:

Barry County	269-948-8041 or 1-800-873-0511	Cass County	269-445-2451 or 1-800-323-0335
Berrien County	269-925-0585 or 1-800-336-0341	Kalamazoo County	269-373-6000 or 1-888-373-6200
Branch County	517-279-1193 or 1-888-725-7534	St Joseph County	269-467-1000 or 1-800-622-3967
Calhoun County	269-966-1460 or 1-800-632-5449	Van Buren County	269-657-5574 or 1-800-922-1418

You can walk-in to any CMH office during business hours and ask for assistance with an emergency.

Post-Stabilization Services

After you receive emergency mental health care and your immediate needs are met, you may receive ongoing mental health services to make sure your condition continues to stabilize and improve. Examples of post-stabilization services are crisis residential, case management, outpatient therapy, and/or medication reviews. Prior to the end of your emergency-level care, your local CMH will help you to coordinate your post-stabilization services.

PUBLIC HEALTH EMERGENCY COMING TO AN END FOR BENEFICIARIES

During the federal COVID-19 Public Health Emergency (PHE), many changes were made to the Medicaid program’s eligibility, administration, and policies to ease rules for providers and prevent Medicaid beneficiaries from losing their healthcare coverage. It is anticipated that the US Department of Health and Human Services will soon announce the end of the current federal PHE. Michigan will restart Medicaid eligibility renewals and certain waived policies that were in place during the pandemic when the federal PHE ends.

The Michigan Department of Health and Human Services is preparing for the end of the federal PHE. This website will be continually updated with the latest information as the department restarts processes and releases updated policies. For more information and a list of frequently asked questions visit <http://www.michigan.gov/mdhhs/end-phe>.



RESOURCES

Crisis/Suicide Hotlines: 1-800-SUICIDE (1-800-784-2433)

Suicide & Crisis Lifeline: 988 (Call or text)

Suicide Prevention Hotline: 1-800-273-TALK (1-800-273-8255)

Suicide Prevention Hotline for Deaf or Hard of Hearing: 1-800-799-4TTY (1-800-799-4889)

Suicide Prevention Online Chat: www.gryphon.org/services/crisis-services/online-chat

Suicide Prevention Text Line: Text: "Hello" to 741-741

Human Services: (Crisis Situations, food, housing/rent help): **211**

Child Abuse and Neglect Parent Helpline: 1-855-942-4357

National Alliance on Mental Illness (NAMI): 1-800-950-6264 or www.nami.org

National Domestic Violence Hotline: 1-800-799-SAFE (1-800-799-7233), TTY: 1-800-787-3224, Spanish: 1-800-942-6908

National AIDS Hotline: 1-800-342-AIDS (1-800-342-2437)

Alcoholics Anonymous Hotline: 269-467-1107

MI Health Link Ombudsman: 1-888-746-6456

Veteran Crisis Line: 1-800-273-8255 press 1 Text: 838-255

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH CUSTOMER SERVICE OFFICES

Customer Services is a department made up of staff that are available to answer your questions, talk about your concerns, and make sure that you are receiving the services and supports that you need.



Local Community Mental Health Customer Service offices are available to you to address all grievances, appeals and other issues you may have with your local Community Mental Health or service provider. We have included a list of Customer Service representatives as well as their contact information and hours of operation. Please contact them if you have any questions or issues.

For Substance Use Disorder customers, the Customer Service Department is centrally located within Southwest Michigan Behavioral Health. If you wish to file a grievance, appeal or have issues with the services/supports provided to you, please feel free to contact the Customer Services Department at Southwest Michigan

Behavioral Health at the information provided below. You may also wish to talk with your Substance Use Disorder service provider to address any issues you may encounter.

Southwest Michigan Behavioral Health (SWMBH)

Member Services Specialist

5250 Lovers Lane, Suite 200

Portage, MI 49002

Customer Services Toll-Free: (800) 890-3712

Agency Phone: (800) 676-0423

TTY: 711 (MRC)

Fax: (269) 441-1234

Email: customerservice@swmbh.org

Customer Service Hours

M – F 8:00 a.m. - 5:00 p.m.

Excluding Legal Holidays

CUSTOMER SERVICE OFFICES

Our goal is to ensure your service needs are met through dignity, respect, and medically necessary services.

Barry County Community Mental Health Authority Tina Williams, Customer Service Representative	500 Barfield Drive, Hastings, MI 49058 Agency Phone: (269) 948-8041 or (800) 266-4781 TTY: 711 (MRC) Fax: (269) 948-9319 Email: Tiwilliams@bccmha.org Customer Service Hours: M - F 8:00 a.m. - 5:00 p.m. (Excluding Legal Holidays)
Riverwood Center/Berrien Mental Health Authority Leanne Adams, Customer Service Representative	1485 M-139, Benton Harbor, MI 49023 Customer Service Toll-Free: (866) 729-8716 Agency Phone: (269) 925-0585 or (800) 336-0341 TTY: 711 (MRC) Fax: (269) 927-1326 Email: leanne.adams@riverwoodcenter.org Customer Service Hours: M - F 8:30 a.m. - 5:00 p.m. (Excluding Legal Holidays)
Pines Behavioral Health (Branch County) Kammy Ladd, Customer Service Representative	200 Vista Drive, Coldwater, MI 49036 Customer Service Toll-Free: (866) 877-4636 Agency Phone: (517) 278-2129 or (888) 725-7534 TTY: 711 (MRC) Fax: (517) 279-8172 Email: kladd@pinesbhs.org Customer Service Hours: M – F 9:00 a.m. - 5:00 p.m. (Excluding Legal Holidays)
Summit Pointe (Calhoun County) Amy Vincent, Customer Service Representative	175 College St., Battle Creek, MI 49037 Customer Service Toll-Free: (800) 632-5449 Agency Phone: 269-966-1460 TTY: 711 (MRC) Fax: (269) 966-2844 Email: AVincent@summitpointe.org Customer Service Hours: M – F 8:00 a.m. – 5:00 p.m. (Excluding Legal Holidays)
Woodlands Behavioral Healthcare Network (Cass County) Regina Wolverton, Customer Service Representative	960 M-60 East, Cassopolis, MI 49031 Customer Service Toll-Free: (800) 323-0335 Agency Phone: 269-445-2451 or (800) 323-0335 TTY: 711 (MRC) Fax: (269) 445-3216 Email: annh@woodlandsbhn.org Customer Service Hours: M - F 8:30 a.m. - 5:00 p.m. (Excluding Legal Holidays)
Integrated Services of Kalamazoo Teresa Lewis, Customer Service Manager	2030 Portage Road , Kalamazoo, MI 49001 Customer Service Toll-Free: (877) 553-7160 Agency Phone: (269) 373-6000 Or (888) 373-6200 TTY: 711 (MRC) Fax: (269) 364-6992 Email: tlewis@kazooocmh.org Customer Service Hours: M - F 8:00 a.m. - 5:00 p.m. (Excluding Legal Holidays)
Community Mental Health & Substance Abuse Services of St. Joseph County Jarrett Cupp, Chief Compliance Officer and Provider Network Management	677 East Main Street, Suite A, Centreville, MI 49032 Customer Services Toll-Free: (855) 203-1730 Agency Phone: (269) 467-1000 or (800) 622-3967 TTY: 711 (MRC) Fax: (269) 467-3072 Email: jsinger@stjoecmh.org Customer Service Hours: M - F 8:00 a.m. – 5:00 p.m. (Excluding Legal Holidays)
Van Buren Community Mental Health Authority Sandy Thompson, Customer Service Representative	801 Hazen Street, Suite C, P.O. Box 249, Paw Paw, MI 49079 Agency Phone: (269) 657-5574 or (800) 922-1418 TTY: 711 (MRC) Fax: (269) 657-3474 Email: sthompson@vbcmh.com Customer Service Hours: M - F 8:30 a.m. - 5:00 p.m. (Excluding Legal Holidays)



*Principal Office: 5250 Lovers Lane, Portage, MI 49002
Phone: 800-676-0423*

Southwest Michigan Behavioral Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Southwest Michigan Behavioral Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Southwest Michigan Behavioral Health:

- Provides **free** aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, Braille, other formats)
- Provides **free** language services to people whose primary language is not English or have limited English skills, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Customer Services.

If you believe that Southwest Michigan Behavioral Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Customer Services
5250 Lovers Lane, Suite 200
Portage, MI 49002
P: 800-890-3712 (TTY: 711)
F: 269-441-1234
info@swmbh.org

If you are an individual who is deaf or hard of hearing, you may contact the MI Relay Service at 711 to request their assistance in connecting you to Southwest Michigan Behavioral Health. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Customer Services is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. You may also file a grievance electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW., Room 509F, HHH Building
Washington, D.C., 20201
1-800-368-1019.

You have the right to get this information in a different format, such as audio, Braille, or large font due to special needs or in your language at no additional cost.

"ATENCIÓN: Si habla **español**, hay servicios gratuitos de asistencia con el idioma para usted. Llame al 1-800-890-3712 (TTY: 711)".

"انتبه: إن كنت تتحدث العربية، فتوجد خدمات مساعدة لغوية، مجانية، ومتاحة لك. اتصل بـ 1-800-890-3712 (رسالة مبرقة: 711)".

"ACHTUNG: Sollten Sie **deutsch** sprechen, steht Ihnen ein Sprachenhilfe-Service kostenlos zur Verfügung. Sie können uns unter folgender Telefonnummer erreichen: +1-800-890-3712 (TTY: 711)."

"请注意：如果您说中文，您可以利用我们免费提供的语言帮助服务。详情请致电 1-800-890-3712 (TTY: 711) 。”

"OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-800-890-3712 (TTY- 711)."

"UWAGA: Jeśli mówi Pan/Pani **po polsku**, oferujemy bezpłatną pomoc językową. Proszę zadzwonić pod numer 1-800-890-3712 (TTY/tel. dla niesłyszących: 711)."

"VINI RE: Në qoftë se flisni **shqip**, keni në dispozicion shërbim falas për t'ju ndihmuar me gjuhën. Telefononi 1-800-890-3712 (TTY-teletext: 711)."

"ATTENZIONE: Si parla **italiano**, servizi gratuiti di assistenza linguistica, sono a vostra disposizione. Chiamare 1-800-890-3712 (TTY: 711)."

"TALA: Kung kayo ay nagsasalita ng **Tagalog**, ang serbisyo ng tulong sa wika (language assistance services), ay available upang magamit ninyo, nang walang bayad. Tumawag sa 1-800-890-3712 (TTY: 711)."

"**ध्यान दें:** यदि आप **हिन्दी** बोलते हैं, तो आपके लिए भाषा सहायता सेवाएँ मुफ्त में उपलब्ध हैं। 1-800-890-3712 (TTY: 711) पर कॉल करें।"

"주의: 귀하가 **한국어**를 할 경우, 한국어 언어 지원 서비스를 무료로 사용할 수 있습니다. 1-800-890-3712 (TTY 문자 전화기: 711)로 전화하십시오."

"LƯU Ý: Nếu quý vị nói **tiếng Việt**, các dịch vụ hỗ trợ ngôn ngữ được cung cấp cho quý vị miễn phí. Vui lòng gọi số 1-800-890-3712 (TTY: 711)."

"**আপনার দৃষ্টি আকর্ষণ করছি:** আপনি যদি বাংলাভাষী হন এবং যদি আপনার ভাষাগত সাহায্যের প্রয়োজন হয়, তাহলে নিখরচায় সাহায্য পেতে ফোন করুন: ১-৮০০-৮৯০-৩৭১২ (TTY: 711) 1-800-890-3712 (TTY: 711)."

ご注意：日本語で対応しているアシスタンスサービスを無料でご用意しております。

1-800-890-3712 (TTY: 711)へお電話下さい。

«ВНИМАНИЕ! Если вы говорите на **русском** языке, вам предоставляется бесплатное языковое обслуживание. Звоните по тел.: 1-800-890-3712 (телефон с текстовым выходом: 711)».

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH BOARD

Southwest Michigan Behavioral Health (SWMBH) is a Regional Entity created by eight Community Mental Health Authorities (CMH) through the Michigan Mental Health Code 330.1204(b). SWMBH is also a state-designated Community Mental Health Entity and a Prepaid Inpatient Health Plan. SWMBH is governed by an eight-member Board. Each CMH appoints a primary and alternate member from their CMH Board who can attend any time and can vote in the absence of the primary Board member. We are fortunate to have experienced, motivated Board members focused on the needs of persons served and their county citizens. We are taking this opportunity to recognize and thank them.

SWMBH would like to introduce the Board Chair, Vice Chair and Secretary:



Ed Meny
Chair

Berrien County
Primary

Serving as the Chair of the SWMBH Board, Edward is passionate about giving back to the community and serving where needed. He is interested in Community Mental Health and compassionate about the consumers served. He has an extensive history working on numerous boards including the St. Joseph Charter Township Board of Trustees, Berrien County Community Mental Health Board, and St. Joseph Public Schools Board. He attended Michigan State University as well as Western Michigan University.



Tom Schmelzer
Vice-Chair

Branch County
Primary

Applying his Master degree in Clinical Psychology, School Psychology, Master Degree in Clinical and Macro Social Work, as well as his National Certification for School Psychology, Tom advocates for children, adolescents and adults with mental health needs and substance use disorders. Tom is a retired school psychologist. He has served as a Community Mental Health Board member for the past twenty-five years and is currently Chairman of the Board at Pines Behavioral Health.



Susan Barnes
Secretary

Van Buren County
Primary

As a retired educator, Susan devoted her professional career to elementary school age children with special needs. She worked with children in Resource Rooms as well as self-contained Cognitively Impaired Classrooms in the Paw Paw Public School system for 24 years. She holds a Bachelor of Science degree in Education with a K-12 Certification from Central Michigan University. Susan has decided to continue her community support for consumers by serving on both the SWMBH and Van Buren Community Mental Health boards.

Southwest Michigan Behavioral Health (SWMBH)

Member Services Specialist

5250 Lovers Lane,
Suite 200

Portage, MI 49002

Customer Service Toll-Free:

(800) 890-3712

Agency Phone:

(800) 676-0423

TTY: 711 MRC

Fax:

(269) 441-1234

Email: info@swmbh.org

Customer Service Hours M – F

8:00 a.m. – 5:00 p.m.

Excluding Legal
Holidays

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH BOARD MEETINGS 2023

January 13, 2023 – 9:30am to 11:30am

February 10, 2023 – 9:30am to 11:30am

March 10, 2023 – 9:30am to 11:30pm

April 14, 2023 – 9:30am to 11:30am

May 12, 2023 – 9:30am to 11:30am

May 12, 2023 – 12:30 to 3:00pm Board Retreat

June 9, 2023 – 9:30am to 11:30am

July 14, 2023 – 9:30am to 11:30am

August 11, 2023 – 9:30am to 11:30am

September 8, 2023 – 9:30am to 11:30am

October 13, 2023 – 9:30am to 11:30am

November 10, 2023 – 9:30am to 11:30am

December 8, 2023 – 9:30 am to 11:30am

All scheduled meetings take place at the Four Points by Sheraton, 3600 E. Cork St. Kalamazoo, MI 49001

All SWMBH Board Meetings are subject to the Open Meetings Act 1976 PA 267, MCL 15.261-15.275

SWMBH adheres to all applicable laws, rules, and regulations in the operation of its public meetings, including the Michigan Open Meetings Act, MCL 15.261 – 15.275

SWMBH does not limit or restrict the rights of the press or other news media.

Discussions and deliberations at an open meeting must be able to be heard by the general public participating in the meeting. Board members must avoid using email, texting, instant messaging, and other forms of electronic communication to make a decision or deliberate toward a decision and must avoid “round-the-horn” decision-making in a manner not accessible to the public at an open meeting.