

## MEDICAID ELIGIBILITY REDETERMINATION PACKETS WILL START TO BE MAILED TO BENEFICIARIES DEPENDING ON RENEWAL DATE

Medicaid beneficiaries will have to renew their coverage this year, starting in June, as Michigan resumes Medicaid eligibility redeterminations to comply with federal legislation.

During the federal COVID-19 Public Health Emergency, Congress enacted the Families First Coronavirus Response Act that required state Medicaid agencies continue health care coverage for all medical assistance programs, even if someone's eligibility changed. Michigan's Medicaid caseload grew by more than 700,000 people during the public health emergency. This requirement was ended by the federal Consolidated Appropriations Act of 2023 signed Dec. 29, 2022.

Michiganders who no longer qualify for Medicaid will receive additional information about other affordable health coverage options available, including on HealthCare.gov. Affected Michiganders will be able to shop for and enroll in comprehensive health insurance as they transition away from Medicaid, and many Michiganders can purchase a plan for less than \$10 per month.

Renewals for traditional Medicaid and the Healthy Michigan Plan will take place monthly starting in June 2023 and run through May 2024. Monthly renewal notices will be sent three months prior to a beneficiaries' renewal date starting with June renewal dates. Beneficiaries can check their renewal month at [www.michigan.gov/MIBridges](http://www.michigan.gov/MIBridges).

"MDHHS is strongly committed to ensuring Michiganders who are eligible for Medicaid coverage remain enrolled," said Elizabeth Hertel, Michigan Department of Health and Human Services director. "More than three million Michiganders, including one million Healthy Michigan enrollees, have benefitted from keeping their Medicaid coverage without redeterminations on eligibility during the COVID-19 pandemic. MDHHS is preparing to assist residents who will be affected by changes in their coverage.

Here is what Michigan Medicaid beneficiaries need to do to prepare:

1. Make sure your address, phone number and email address are up to date at [Michigan.gov/MIBridges](http://Michigan.gov/MIBridges). You can also call your [local MDHHS office](#). If you do not have an online account for MI Bridges to access your Medicaid case or report changes, visit [www.michigan.gov/MIBridges](http://www.michigan.gov/MIBridges) to sign up for an account. You can also locate organizations that can help you by [searching for community partners](#).
2. Report any changes to your household or income. You can report changes at [Michigan.gov/MIBridges](http://Michigan.gov/MIBridges) or by calling your [local MDHHS office](#).
3. If you get a renewal packet, be sure to fill it out, sign the forms and return it by the due date with any proof needed. NOTE: If you do not complete and return the renewal, you may lose Medicaid coverage.

"The Michigan Department of Insurance and Financial Services (DIFS) is committed to working with MDHHS and our partners nationwide to help impacted Michiganders get the affordable, comprehensive health insurance they need," said DIFS Director Anita Fox. "DIFS stands ready to answer questions about purchasing a health insurance plan. Call DIFS at 877-999-6442, Monday through Friday from 8 a.m. to 5 p.m. or visit [Michigan.gov/HealthInsurance](http://Michigan.gov/HealthInsurance) to learn more."

To ensure beneficiaries are aware of upcoming federal redetermination requirements and help them keep their coverage if eligible, MDHHS is launching a multi-media advertising campaign. This will include radio, audio streaming, outdoor, mobile and social media ads, including minority media outlets and stakeholder communications.

More information about the how benefits connected to the COVID-19 Public Health Emergency are changing can be found at [www.Michigan.gov/2023BenefitChanges](http://www.Michigan.gov/2023BenefitChanges).

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Michigan Department of Health and  
Human Services*

You have the right to have information about your behavioral health treatment kept private. If you receive substance use services, you have specific rights related to the confidentiality of substance use records. Southwest Michigan Behavioral Health (SWMBH) has a Notice of Confidentiality and Privacy Practices that describes your rights and how we can use your health information. This Notice is available to you on our website at [www.swmbh.org/members/member-documents-from-swmbh/](http://www.swmbh.org/members/member-documents-from-swmbh/). You can also request a copy of the Notice be sent to you by calling SWMBH Customer Services at 800-890-3712 or sending an email to [customerservice@swmbh.org](mailto:customerservice@swmbh.org).

You have the following rights:

- You have the right to review and to get a copy of your health records.
- You can ask us to restrict or limit the way we use or disclose your health information. We do not have to agree to your request except in limited circumstances.
- You can ask us to amend or correct information in your health record. We do not have to agree to your request, but if we do not agree we will tell you why in writing.
- You can request confidential communications.
- You can request a list of who we have shared your health information with. We are not required to track this information for certain types of uses and disclosures.
- You have a right to choose someone to act for you.
- You have a right to get a Notice of Privacy Practices from any provider where you receive services.
- You have a right to file a complaint if you believe your privacy rights have been violated.

Some common reasons why SWMBH may use or disclose (share) your health information are to:

- Help manage your health care treatment
- Run our organization
- Pay for your health services
- Administer your health plan
- Help with public health and safety issues
- Do research
- Comply with the law
- Comply with your requests under a Release of Information that you signed

If you have questions about the privacy of your health information, you can call SWMBH's Compliance department at 800-783-0914 or send an email to [swmbhcompliance@swmbh.org](mailto:swmbhcompliance@swmbh.org)



# MENTAL HEALTH AMERICA 2023 REPORT

## 2023 MENTAL HEALTH AMERICA “THE STATE OF MENTAL HEALTH” REPORT

Mental Health America (MHA) is the nation’s leading community-based nonprofit dedicated to addressing the needs of those living with mental illness and promoting the overall mental health of all. MHA’s work is driven by its commitment to promote mental health as a critical part of overall wellness, including prevention services for all; early identification and intervention for those at risk; and integrated care, services, and supports for those who need them, all with recovery as the goal.

- Overall, aggregate of 15 measures 17
- Adult Ranking, aggregate of 7 measures 11
- Youth Ranking, aggregate of 7 measures 35
- Prevalence of Mental Illness, aggregate of 6 measures 25
- Access to Care, aggregate of 9 measures 20
- Adults With Any Mental Illness 32, 22.33%, 1,729,000
- Adults With Substance Use Disorder in the Past Year 27, 16.72%, 1,295,000
- Adults With Serious Thoughts of Suicide 22, 4.84%, 375,000
- Youth With at Least One Major Depressive Disorder in the Past Year 18, 15.99%, 119,000
- Youth With Substance Use Disorder in the Past Year 40, 7.14%, 53,000
- Youth With Severe Major Depressive Disorder 24, 11.30%, 83,000
- Adults With Any Mental Illness Who Did Not Receive Treatment 15, 49.40%, 870,000
- Adults With Any Mental Illness Reporting Unmet Need 14, 25.90%, 455,000
- Adults With Any Mental Illness Who Are Uninsured 11, 6.70%, 117,000
- Adults Reporting 14+ mentally Unhealthy Days a Month Who Could Not See a Doctor Due to Costs 6, 16.83%, 205,536
- Youth With Major Depressive Episode Who Did Not Receive Mental Health Services 37, 60.30%, 71,000
- Youth With Severe Major Depressive Episode Who Received Some Consistent Treatment 34, 23.60%, 19,000
- Youth With Private Insurance That Did Not Cover Mental or Emotional Problems 31, 9.60%, 42,000
- Students (K+) Identified With Emotional Disturbance for an Individualized Education Program 23, 7.63%, 10,702
- Mental Health Workforce Availability 21, 330:1

*....article continued from page 1*

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# 2022 ANNUAL CONSUMER SATISFACTION SURVEY RESULTS AND ANALYSIS

PLEASE CLICK ON THE LINK TO ACCESS THE FULL SURVEY ANALYSIS REPORT:

<https://www.swmbh.org/members/quality-surveys/>

## Survey Description

The QAPI Department has completed the 2022 annual Member Experience Satisfaction Survey. The primary objective of the survey is to improve scores in comparison to the previous year's results and identify opportunities for improvement at the CMHSP and PIHP levels. During the 2022 survey project, SWMBH ensured the incorporation of individuals receiving long-term supports or services, case management services, CCBHC services, and Medicaid services into the review and analysis of the information obtained from quantitative and qualitative methods.

During FY22 Survey Project, SWMBH utilized a hybrid Mental Health Statistics Improvement Program (MHSIP), Youth Surveillance Survey (YSS) and the Experience of Care and Health Outcomes Survey (ECHO) to gauge member experience of care. The Quality Department's goal was to collect 1500 completed surveys. The Region was able to reach that goal and achieved 1574 valid surveys, encompassing a validated survey process and consumer feedback from all eight of the CMHSPs. This was a tremendous improvement over the previous year's survey completion volume of only 747 valid surveys.

In efforts to improve survey accessibility during FY22 and FY23, consumers could complete the survey via QR codes or tablets in the CMHSP lobby areas, through the SWMBH website, text message, email, or by paper copy. The diverse options improved the response rates, and the targeted volume was achieved during FY22. The results of the annual survey are shared with MDHHS as a PIHP contractual obligation, the SWMBH Board of Directors, and Regional Committees (Operations Committee, Quality Management Committee, Consumer Advisory Committee, etc.) who have stake in the results/improvement efforts.

## Improvement Efforts Made in FY22

During the 2022 survey project, the following significant improvement efforts were implemented:

### The survey tool:

- Goal: Shorten the length of the survey by 30% to ease survey fatigue and increase response rates.
  - Average survey response times were decreased from 28 minutes to 5 minutes.
- A factor analysis was conducted to determine if any core survey items were redundant.
  - MHSIP tool was revised from 36 core items to 24 core items (in addition to open ended and demographic questions) while combining some constructs that were redundant.
  - YSS tool was revised from 26 core items to 23 core items (in addition to open ended and demographic questions).
- Item response options were changed from a 5pt scale with neutral option to a 4pt scale with no neutral option.
  - Previously, a "neutral" response was interpreted as a positive outcome.
  - The new scale forced respondents to respond either positively or negatively.
  - "Somewhat" labels were added to mid-scale positive and negative options, which offered a more accurate measure of overall satisfaction.

### Priority population enhancements:

- New demographic questions were added for long-term support services and CCBHC to the survey. This allows responses to be filtered for those specialized populations and target performance improvement interventions as needed.
- A target of 300 completed surveys were established for the two CCBHC sites. ISK achieved this target at 386 and St. Joe fell short at 279.
- Data from each program (CCBHC, LTSS and CMHSP specific response) were cleaned and separated into distinct data sets and available to filter to identify common denominators or trends in responses.



# SWMBH ANNUAL QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT PLAN AND EVALUATION REPORTS

The Michigan Department of Health and Human Services (MDHHS) requires that each specialty Prepaid Inpatient Health Plan (PIHP) has a documented Quality Assurance and Performance Improvement Program Plan (QAPIP) that meets the required federal regulations: the specified Balanced Budget Act of 1997 as amended standards, 42 CFR § 438, and requirements outlined in the PIHP contract(s), specifically attachment P.6.7.1.1. and schedule ‘E’ of the PIHP reporting requirements.

As part of Southwest Michigan Behavioral Health’s (SWMBH) benefit management organization responsibilities, the SWMBH QAPI Department conducts an annual QAPIP Evaluation to evaluate whether all contractual and regulatory standards required of the Regional Entity, including the PIHP responsibilities, were met and to determine where improvement efforts should be focused over the following fiscal year.

This annual evaluation includes the following components:

- Improvement initiatives undertaken by SWMBH from October 2021 through September 2022 for Medicaid Services and Consumers.
- Resources utilized by the SWMBH QAPI department
- The goal, responsible department, monitoring frequency and status of each identified Quality Plan/Evaluation objective.

The following Activities/Programs and Metric Analysis are included in the 2023 QAPI Work Plan:

Activities/Programs Covered in 2023 Work Plan Include ( <i>18 categories</i> )	
<b>Annual Department and Regional Committee Goals and Objectives</b>	<b>Consumer, Provider Experience Surveys, and other annual survey analysis</b>
<b>Oversight of External Audits/Reviews</b> (MDHHS, HSAG, NCQA, ICOs)	<b>Specialty Population Monitoring and Metrics</b> Long Term Support Services (LTSS) and Waiver related services/programs (HSW-CWP-SEDW)
<b>Michigan Mission Based Performance Indicators (MMBPIS)</b>	<b>Customer Grievances and Appeals Tracking and Monitoring</b>
<b>Critical Incident, Sentinel Event and Risk Event Tracking/Reporting</b>	<b>Access to Care Timeliness Tracking/Monitoring</b> -Urgent – Preservice – Routine – Nonurgent – Retro/Postservice

<b>Utilization Management and Customer Services</b>	<b>Certified Community Behavioral Health Clinic Quality Bonus Payment Measures and Reporting</b>
<b>Behavior Treatment Review Data Monitoring</b>	<b>Performance Improvement Projects (PIPs)</b>
<b>2022 Board Ends Metrics and Key Performance Metric Analysis and Reporting</b>	<b>Communication of Data and Outcomes to Internal and External Stakeholders</b>
<b>Verification of Medicaid Services Analysis</b>	<b>Provider Network/Administrative and Delegated Function Site Reviews</b>
<b>Credentialing and Re-Credentialing</b>	<b>Clinical Practice Guidelines</b>

The formulation of the QAPIP goals and objectives includes incorporating numerous federal, state, and accreditation principles. This includes Health Service Advisory Group (HSAG) standards, National Committee for Quality Assurance (NCQA) standards, MDHHS contract requirements, and other Center for Medicaid Services (CMS) and best practice standards. Additionally, more information related to the QAPIP standards can be found in SWMBH policies and procedures and other departmental plans. SWMBH's QAPIP is designed to promote high quality customer service and outcomes by systematically monitoring key performance indicators integrated with system-wide approaches to continuous quality improvement efforts.

The authority of the SWMBH QAPI Department and the Quality Management Committee (QMC) is granted by SWMBH's Executive Officer (EO) and the Board of Directors. SWMBH's Board retains the ultimate responsibility for the quality of the business lines and services assigned to the regional entity, and they review and approve the SWMBH QAPIP Evaluation and QAPIP Plan on an annual basis.

- The full 2023 Quality Assurance and Performance Improvement Plan and full 2022 Quality Assurance and Performance Improvement Evaluation Report can be accessed for review on SWMBH's website by clicking this link: <https://www.swmbh.org/members/quality-surveys/>. The documents will also be provided upon request.

## THE SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD

In addition to the Board of Directors that were highlighted in our last Member newsletter, SWMBH is required to also have the Substance Use Disorder Oversight Policy Board (SUDOPB). This Board has up to two appointees by each County Commission. Members are often County Commissioners, but they do not need to be. Their statutory authority is for the PA 2 funds often also referred to as liquor tax funds. These funds are collected from packaged liquor sales at point of purchase then forwarded to the counties. Counties are then obligated to forward 50% of these funds to SWMBH for us in the county of origination of the tax revenue. 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

The Michigan Department of Health and Human Services (MDHHS) &  
the Community Mental Health Association of Michigan (CMHAM)

Present:

## 2023 Self-Determination Conference

May 24 & 25, 2023

Lansing Center, Lansing, Michigan

**Who Should Attend:**

This conference contains content appropriate for all individuals who receive services, family members, case managers, supports coordinators, clinicians, community mental health (CMH) administrative and clinical staff, providers, Home and Community-Based Services (HCBS) and waiver coordinators, fiscal intermediaries, and independent facilitators.

**Conference Format:** In-person conference.

Sessions will be recorded for viewing at a later date.

**Continuing Education:** Continuing Education will be available for *in-person attendees only*. Individuals viewing the recordings are not eligible for CEs.

**Conference Registration: \$50/Person**

**Attendees with lived experience and their family members are complimentary.**

*MDHHS, through CMHA, has provided funding for this initiative through a  
Federal Community Mental Health Block Grant.*

# PACT ACT

The PACT Act is a new law that expands VA health care and benefits for Veterans exposed to burn pits and other toxic substances. This law helps us provide generations of Veterans—and their survivors—with the care and benefits they've earned and deserve.

The Act (1) expands and extends eligibility for VA health care for Veterans with toxic exposures and Veterans of the Vietnam era, Gulf War era, and Post-9/11 era, and (2) expands eligibility for benefits for Veterans exposed to toxic substances.

## **What new or expanded presumptions will the Act create and when will they be in effect?**

Veterans and survivors can file claims for all conditions outlined in the pact act immediately.

### **For Gulf War and post 9-11 Veterans, that includes:**

Brain cancer, Glioblastoma, Respiratory (breathing-related) cancer of any type, Gastrointestinal cancer of any type, Head cancer of any type, Lymphoma of any type, Lymphatic cancer of any type, Neck cancer, Pancreatic cancer, Reproductive cancer of any type, Kidney cancer, Melanoma, Asthma (diagnosed after service), Chronic rhinitis, Chronic sinusitis, Constrictive bronchiolitis or obliterative bronchiolitis, Emphysema, Granulomatous disease, Interstitial lung disease (ILD), Pleuritis, Pulmonary fibrosis, Sarcoidosis, Chronic bronchitis, Chronic obstructive pulmonary disease (COPD).

**For Vietnam Veterans and other Veterans exposed to tactical herbicides, that includes two Agent Orange presumptive conditions:** Monoclonal gammopathy of undetermined significance (MGUS), High blood pressure (hypertension).

### **What are the PACT Act key components?**

- The Act expands and extends eligibility for VA health care for Veterans with toxic-exposures and Veterans of the Vietnam era, Gulf War era, and Post-9/11 era.
- VA will improve the decision-making process for determining what medical conditions will be considered for presumptive status.
- Every enrolled Veteran will receive an initial toxic exposure screening and a follow-up screening every five years. Veterans who are not enrolled, but who are eligible to enroll, will have an opportunity to enroll and receive the screening.
- VA health care staff and claims processors will receive toxic exposure-related education and training.
- The Act requires research studies on mortality of Veterans who served in Southwest Asia during the Gulf War, Post-9/11 Veteran health trends, and Veteran cancer rates.
- The Act will help VA build a stronger, more skilled workforce to meet the growing demand for benefits and services.
- The Act authorizes 31 new medical facilities across the country, providing greater access to VA health care.

### **How can a Veteran file a claim?**

Veterans who would like to file a claim must complete VA Form 21-526EZ to apply for benefits and submit any supportive evidence.

To learn about standard VA disability claims, supplemental claims, secondary claims, and more visit: [VA.gov/disability/how-to-file-claim/when-to-file](https://www.va.gov/disability/how-to-file-claim/when-to-file).

### **How can Veterans apply for VA health care?**

Apply online at [VA.gov/health-care/apply/application/introduction](https://www.va.gov/health-care/apply/application/introduction).

Call our toll-free hotline at 877-222-8387, M-F, 8am.– 8pm.

Mail a completed, signed Application for Health Benefits ([VA Form 10-10EZ](https://www.va.gov/health-care/apply/application/introduction)).

Bring a completed, signed VA Form 10-10EZ with you to your [nearest medical center or clinic](#) or get help through your states' Department of Veteran Affairs Services Office.

Get help filing your claim by working with an accredited representative.



## MEET SWMBH'S TRANSITIONAL CARE NAVIGATORS

The SWMBH Integrated Care Team has three Transition Navigators ready to help our members access recovery supports for both mental health and substance use needs. What is a Transition Navigator? They provide care coordination for members in our region that may benefit from added support.



Hello, my name is Kimberly. I am the Priority Population Transition Navigator here at SWMBH. It is my role to help those with substance use issues who qualify as priority populations (pregnant, pregnant and injecting, injecting user, parents at risk of losing children, MDOC involvement) gain access to treatment. I have a background in the health care field and working with those who are dually diagnosed. It is a passion of mine to be able to help others in need, to be the person who stopped to listen without judgment. You can reach me directly at 269-391-0485. I hope to hear from you soon!!!



My name is Jackie, I am a Level of Care Transition Navigator. I have a passion to help others during some of the most difficult times of their lives. I connect people to services that provide ongoing support. I have worked in both the medical and mental health care field for many years. I have a non-judgmental approach, because like so many, I've had my own lived experiences as well. I am here to help! My focus is to help with your transition from an inpatient psychiatric setting to outpatient care. Some things I can assist with are discharge planning, to identify and provide resources for transportation and other community needs, schedule check-ins, coordinate care with local CMH's, and help with barriers. If you or someone else you may know, think you may benefit from any assistance I can offer, you can call me directly at 269-391-3764.



I'm Vince Miller (Vinnie). I am a Level of Care Transition Navigator with SWMBH. I support co-occurring members stepping down from SUD residential treatment to outpatient services. I am also a person in long term recovery and have spent nearly 30 years as part of the recovery community in West Michigan. I'm a working musician. I share music every day in groups, detox & residential treatment centers, and for recovering addicts all over the state and have even performed for recovery communities in some other countries. I believe music to be the global medicine that can heal and bring peace, relief, and happiness to all who experience it. I can be reached at my office 269-488-6929 or cell phone 269-391-3723

## FIND OUT IF YOU CAN GET HELP WITH YOUR INTERNET SERVICE COSTS YOU

If you or someone you know needs help paying for internet service, you may qualify for a monthly discount on a new or existing internet service plan through a government program called the Affordable Connectivity Program (ACP).

You may also qualify for a one-time device discount of up to \$100, to buy a laptop, desktop computer, or tablet from participating providers.

Do I qualify?

To apply, visit [AffordableConnectivity.gov](https://AffordableConnectivity.gov) or call 1-877-384-2575 to request an application. Once your application is approved, you can contact a [participating internet service provider](#) to start receiving your monthly discount. Only one monthly service discount and one device discount is allowed per household.

[Research](#) suggests increased broadband Internet access is associated with improved health outcomes. Broadband makes it easier for people to take advantage of information on [Medicare.gov](#), like comparing the quality of nursing homes and hospitals, or finding the health plan that's best for you.

# SAVE THE DATE!



JUNE 6<sup>TH</sup> — 8<sup>TH</sup>

LANSING CENTER

333 E. MICHIGAN AVE.  
LANSING, MI 48933





*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](mailto: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-teletekst: 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 হ'ন 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)».

## 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](http://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](http://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

## PROVIDER DIRECTORY

Southwest Michigan Behavioral Health (SWMBH) is committed to providing members with the most current information about its in-network providers and the array of services available to you. For a list of in-network providers and resources by county visit <https://www.swmbh.org/providers/provider-directory/>

**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](mailto: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

**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.