

Walk a Mile in My Shoes Event

Mila Todd, Interim Chief Executive Officer

With the procurement process currently moving forward to change Michigan's Behavioral Health System, Southwest Michigan Behavioral Health staff took to Lansing to show our efforts in opposition to the State's plan to competitively procure the PIHP system and otherwise deconstruct the public behavioral health system.

U.S. Senator Debbie Stabenow was in attendance as a keynote speaker, and was joined by Michigan legislators, and other leaders and agencies to voice their opposition to the Michigan Department of Health and Human Services.

This rally has been held for 21 years, and this year was particularly important to address the negative impacts of favoring private insurance companies taking over the system.

Pictured below from left to right, Garyl Guidry, Mila Todd, Kimberly Whittaker and Sarah Ameter at the Walk-a-Mile in My Shoes event.

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Integrated Healthcare Coordination Program

Leah Mitchell, Clinical Quality Specialist

Did you know that Southwest Michigan Behavioral Health (SWMBH) is a Pre-paid Inpatient Health Plan (PIHP) that partners with local Medicaid Health Plans (MHPs) to coordinate care for beneficiaries with complex mental health and physical health needs?

SWMBH's Integrated Healthcare Coordination Program is designed to improve health outcomes, enhance functional capacity, and support self-management by removing barriers and fostering collaboration between behavioral and physical health providers. The program emphasizes patient-centered care with a focus on reducing avoidable emergency department (ED) visits and inpatient (IP) admissions among high-risk beneficiaries, preventing duplication of services, lowering overall healthcare costs, and promoting the use of appropriate services within the behavioral health system.

How are individuals identified? Adult and child beneficiaries who would benefit from PIHP/MHP care coordination are identified using Michigan Department of Health and Human Services (MDHHS) Easy Risk Stratification tools.

The Adult Risk Stratification tool automatically displays individuals who, within the past six (6) months, have:

Received one (1) or more PIHP services

Four (4) or more emergency department (ED) visits, and

Diagnoses consistent with two (2) or more CareConnect360 physical health chronic conditions listed in Table 1:

Table 1: Adult Physical Health Chronic Conditions*		
✦ Asthma	✦ Atrial Fibrillation	✦ Breast Cancer
✦ Chronic Kidney Disease	✦ Chronic Obstructive Pulmonary Disease	✦ Colorectal Cancer
✦ Congestive Heart Failure	✦ Diabetes	✦ Hyperlipidemia
✦ Hypertension	✦ Ischemic Heart Disease	✦ Lung Cancer
✦ Obesity	✦ Osteoporosis	✦ Prostate Cancer
✦ Rheumatoid Arthritis Osteoarthritis	✦ Stroke	

As with the Adult Risk Stratification tool a similar process applies to assessing the needs of children who would benefit from PIHP/MHP care coordination.

The Child Easy tab automatically displays beneficiaries who, within the past six (6) months, have:

Received one (1) or more PIHP service

Two (2) or more ED visits

Diagnosis consistent with at least one (1) CareConnect360 physical health condition as identified in Table 2:

Continued on next page.

Integrated Healthcare Coordination Program Continued

Leah Mitchell, Clinical Quality Specialist

Table 2: Child Physical Health Chronic Conditions*

✦ Asthma	✦ Cerebral Palsy	✦ Cerebral Palsy Paralytic Syndromes
✦ CNS Congenital Malformation	✦ Congenital Heart Disease	✦ Congenital Syphilis
✦ Cystic Fibrosis	✦ Diabetes	✦ Hepatitis C
✦ HIV	✦ Hypertension	✦ Obesity
✦ Rheumatoid Arthritis Osteoarthritis	✦ Sickle Cell Disease	✦ Seizure Epilepsy

What happens after a beneficiary is identified?

Once a beneficiary is identified through risk stratification, the Integrated Healthcare Team (ICT) prepares case findings based on the individual's care coordination needs. The ICT is composed of representatives from Southwest Michigan Behavioral Health (SWMBH), Medicaid Health Plans (MHPs), Community Mental Health Service Providers (CMHSPs), Primary Care Providers (PCPs), and other providers as needed. This team meets monthly to review cases and collaborate on person-centered care plans aimed at improving health outcomes.

Beneficiaries may be included in their own ICT meetings upon request, or participation may be facilitated when it is likely to enhance their health outcomes. The length of each case review depends on the complexity of the beneficiary's needs. During these reviews, the team discusses individuals with significant behavioral health conditions and complex physical comorbidities, and together they develop coordinated care management strategies tailored to each member.

What positive impacts have we seen? The Integrated Healthcare coordination program has been able to impact the following (these are not all inclusive):

- Reduction in Emergency Department utilization.
- Reduction in Inpatient Utilization/Readmissions (Medical, Behavioral and SUD).
- Improved alignment to Primary Care Services.
- Improved medication adherence.
- Improved coordination in transitions of care post inpatient discharge.
- Reduction of barriers to accessing care – Social Determinates of Health (SDoH).



If you would like to learn more about SWMBH's complex care coordination, please reach out to SWMBH's integrated care line at (800) 676-0423, ext. 7.

Call Center Corner

Beth Guisinger, Director of Utilization Management

Level of Care and Medical Necessity Criteria

Southwest Michigan Behavioral Health (SWMBH) is committed to ensuring each Medicaid beneficiary receives the services best designed to meet their individual needs as identified through the Level of Care assessment process. Any individual requesting treatment services are screened for the most appropriate level of care based on their presented needs.

The current level of care placement tools used as required by Michigan's Department of Health & Human Services (MDHHS) are the following:

- LOCUS (Level of Care Utilization System) for adult mental health, ages 18+
- ASAM-PPC (American Society for Addiction Medicine – Patient Placement Criteria) for substance use disorders, adults ages 18+
- MichiCANS (Michigan Child and Adolescent Needs and Strengths) for infants, toddlers, children, youth, and young adults ages birth to 21
- CAFAS/PECFAS (Child and Adolescent Functional Assessment Scale/Preschool and Early Childhood Functional Assessment Scale) for 1915 (i) and SEDW eligibility determinations
- MCG (Milliman Care Guidelines) for emergent/

urgent inpatient hospitalization, partial hospitalization, and crisis residential medical necessity determinations, all ages

The SIS (Supports Intensity Scale) has not been replaced by MDHHS since the contract lapsed for use in 2022. The current MDHHS plan to implement the use of WHODAS (World Health Organizations Disability Assessment Schedule) is not scheduled to begin until SFY26, October 1, 2025.

To ensure adequate and uniformed benefits for members, SWMBH utilizes medical necessity criteria to ensure service authorization requests are appropriate based on level of care principles and ensure the intensity of services provided are consistent with the severity of illness. The current medical necessity criteria being utilized through SWMBH's Central Care Management and Outlier Management processes are MCG (Milliman Care Guidelines) for emergent behavioral health services and ASAM-PPC for substance use services. MCG and ASAM-PPC medical necessity criteria may be obtained by providers by request, if needed. To obtain the most current medical necessity criteria, **please contact the Utilization Management Provider line at (800) 676-0423. Press prompt 1 for Providers.**

King Media Gambling Campaign

Joel Smith, Director of Substance Use Disorder Services

SWMBH's Gambling Prevention Campaign won the dotCOMM award. Key campaign highlights include a strategic approach, audience-centric design, platform-specific execution, creative impact, performance and optimization, and message resonance.

This Platinum recognition from the 2025 dotCOMM Awards celebrates the innovation and impact of the Know When to Stop campaign in the Digital Marketing Campaign category. It affirms Southwest Michigan Behavioral Health's commitment to addressing problem gambling among young adults through culturally relevant, engaging, and strategically timed outreach. The award highlights the campaign's ability to connect with its audi-

ence, inspire self-reflection, and promote responsible gambling behaviors across the region.

Congratulations to SWMBH on this outstanding achievement – let's continue creating meaningful, results-driven digital campaigns that make a lasting difference.



<https://www.kingmedianow.com/awardlist/>

SWMBH Network Changes

Community Healing Centers announces closure of Inpatient Withdrawal Management and Residential Services

For decades, Community Healing Centers has been proud to provide Withdrawal Management (Detox) and Residential Substance Use Disorder (SUD) treatment at the Gilmore inpatient facility, located at 1910 Shaffer Street in Kalamazoo. These services have been a vital part of their mission to heal individuals from the traumas of addiction, child abuse, and mental health disorders. Together with their dedicated staff, partners, and supporters, they have helped thousands of individuals take important steps toward recovery from alcohol, opioids, and other drugs.

Today, the financial reality faced by the organization compels the difficult but necessary decision that effective immediately, Community Healing Centers will no longer provide Withdrawal Management or Residential SUD treatment. This unfortunate reality comes despite our best efforts to save this critical programming. We regret the negative impact these funding cuts will have on those who continue to struggle with addiction in our community. Any clients currently in treatment will be supported in completing their program with Community Healing Centers or will be transferred to another facility of their choosing.

"This decision was not made lightly," said Alisa Otto, CEO. "In recent years—especially in the changing nonprofit funding landscape since COVID—many organizations have had to evaluate sustainability. Despite every effort to bridge the gap, the reimbursement rates for these services cover only about half the true cost of providing care. The current funding climate also means that our community cannot sustain services in this space, and we are grateful that other trusted organizations will continue to offer these services locally."

"Community Healing Centers celebrates and honors the Gilmore inpatient treatment program, the lives it has touched, and the incredible dedication of their staff over the years," says Board President, Lori Foor. While this chapter closes, Community Healing Centers' commitment to the health and well-being of the community remains strong. By stepping away from services that are financially unsustainable, they will bring stability to the organization while focusing resources where they can have the most lasting impact: The Children's Advocacy Center, Infant Mental Health, case management, outpatient services, afterschool and summer programs, substance use and violence prevention, and recovery housing and engagement services.

Community Healing Centers remains deeply committed to serving children, families, and individuals across Southwest Michigan. By focusing on the programs that are sustainable and most impactful, the organization will continue to provide hope, health, and healing for generations to come.



SOUTHWEST MICHIGAN BEHAVIORAL HEALTH

Quality and Excellence through Partnerships

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WE'RE ON THE WEB!

WWW.SWMBH.ORG

Check out the SWMBH Provider Manual and Provider Directory, on our SWMBH website: www.swmbh.org. The website contains information about the SWMBH policies and procedures as well as helpful information on topics such as provider responsibilities, customer rights, utilization management and other helpful material.



Do you wish to stay up-to-date on SWMBH Trainings? If YES, please submit your name and the organization you work for to traininginfo@swmbh.org with a request to be added to the training email list. This will allow SWMBH to send to you information on all the latest and greatest training/webinar opportunities.

Southwest Michigan Behavioral Health (SWMBH) is the Prepaid Inpatient Health Plan (PIHP) for eight Michigan counties, and is in partnership with the Community Mental Health (CMH) agencies of these counties. SWMBH, in partnership with the CMH's and local providers, provides mental health services to adults with severe and persistent mental illness, children with severe emotional disturbance, individuals with developmental disabilities, and individuals with substance use disorders. As the manager of services, SWMBH will make sure that services are provided to you based on your needs and goals and are within the guidelines set by the state of Michigan. SWMBH strives to ensure that you and your family members are treated with dignity and respect.



If you have a compliance-related question or concern, or to file a compliance report, you can do so in the following ways. Contact Mila Todd, SWMBH's Chief Compliance Officer, email Compliance at swmbhcompliance@swmbh.org or report anonymously by calling 1-800-783-0914. You can also file a report directly with the MI Office of Inspector General, by using the information on their website: <https://www.michigan.gov/mdhhs/inside-mdhhs/office-of-inspector-general/contact-us>