

Adequate Funding and Anti-Stigma Efforts, Not Unfounded Conclusions, Key to Michigan Mental Health

Recent mass shootings across the United States have left devastated Americans wondering what can be done to prevent such violent acts and keep our children and families safe from harm. While it's clear there is much we need to learn as a society as to what causes violence and how best to prevent it, we must not resort to unfounded conclusions about those in our society with mental health needs.

Many people are not aware that adults and children with mental health needs are more likely to be victims of violence than perpetrators. Numerous studies have been done to confirm this simple fact, including one study by North Carolina State University in 2014. This study found that 30.9 percent of participants with mental health needs had been the victim of violence in the past six months.

Often, in incidences of violence by an individual with a mental illness, those who knew the person tend to make sweeping generalizations such as, "If I had known, I would have expelled him from school," or, "If I had any idea, she would have been fired from her job long ago." In reality, such actions would only further isolate that individual and would do nothing to help them avoid harm to themselves or others. Rather than punish an individual for a crime they've yet to, or may never commit, we should be supporting those with mental health needs and helping them to

seek essential treatment. We must work together as a society to break down the stigma that stands in the way of providing care for those with mental health needs. Such stigma makes people feel ashamed for seeking mental health treatment, while seeking treatment for physical health issues is seldom questioned.

If those with mental health needs are repeatedly exposed to the message that admitting to a mental health condition or seeking treatment for a mental health need would result in the loss of employment, expulsion from school, or other losses, they will be less likely to come forward to seek help.

Rather than discouraging individuals with mental health needs from seeking treatment, we should focus on increasing the funding allotted to help individuals receive the treatment and support they need to live healthy, productive lives. A great advocate for such funding at the federal level is Michigan's U.S. Senator Debbie Stabenow.

Sen. Stabenow's Excellence in Mental Health Act passed in 2014. It set in motion a series of opportunities to strengthen mental health and addiction care. The act also established a new path to integrating these services with physical health care to improve access to high-quality care for those in need. The funding set aside as a result of the legislation will allow

Michigan, along with other states, to develop a comprehensive plan for the integrated care of behavioral health and intellectual and developmental disabilities. Only through adequate funding of our mental health system and the elimination of hurtful stigma surrounding mental health will we be able to provide a clear path forward for those with mental health needs in our state. It's incumbent on all of us to get involved in the legislative process by encouraging Michigan's legislators to support adequate mental health funding.

Robert Sheehan is chief executive officer of the Michigan Association of Community Mental Health boards.

SWMBH Newsletter

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Did You Know?

That stigmatizing attitudes towards people with mental health problems are wide-spread and commonly held?

A number of people hold negative beliefs about mental illness with and without prior knowledge of mental illness and its effects on individuals and his/her families. Stigmatizing beliefs about individuals with mental health problems are held by a wide range of individuals within society, regardless of whether they know someone with a mental health problem, have a family member with a mental health problem, or have knowledge and experience with mental health problems.

What factors cause stigma?

Throughout history people with mental health issues have been treated differently, excluded, and even brutalized within society. This treatment may come from the misguided views that people with mental health issues are more violent or unpredictable than people without such problems. None of these beliefs are fact based. Stigma embraces both prejudicial attitudes and discriminating behavior towards individuals with mental health problems. The social effects of stigmatizing include: exclusion, poor social support, poorer quality of life, and low self-esteem. Stigma effects the quality of daily living and also has a detrimental effect on treatment outcomes which hinder recovery from mental health problems.

That Stigma can be divided into two categories?

The first category is social stigma. It is characterized by prejudicial attitudes and discriminating behavior towards individuals with mental health problems. The other is self-stigma. This is the internalization by the person with mental illness of his/her own perceptions of discrimination. Self-stigma can significantly effect feelings of shame, hopelessness, and lead to poorer treatment outcomes and effect recovery.

How can we eliminate stigma?

Much work still needs to be done to fully understand the magnitude of prejudice against people with mental illness. The key is to advocate, educate, and challenge the stereotypes. One of the organizations that are on the forefront of fighting stigma is the National Alliance on Mental Illness (NAMI). Some of what they do is advocate to "Promote acceptance and actively challenge social stereotypes. Through powerful words and actions, we [can] shift the social and systemic barriers for those living with mental health conditions and encourage acceptance and understanding." To take the pledge against stigma and learn more about NAMI go to www.nami.org/stigmafree.

References: Psychology Today, Mental Health and Stigma by Graham C. L. Davey, Ph.D., NAMI (National Alliance on Mental Illness)

Grievance & Appeal

What is a “Grievance”?

A grievance can be filed either orally or in writing about anything you are not happy about at the place you are receiving your mental health services. If you are a substance abuse customer please file your grievance by contacting Southwest Michigan Behavioral Health (SWMBH).

We want to know if you are having problems so that we can ensure that you get the best care possible. You can file a grievance with the Customer Service Representative listed in this newsletter at any time. Your Customer Service Representative will make sure the right people are aware of your grievance and make changes and/or fix the problem if they are able to. You will receive a letter acknowledging your grievance. You should receive acknowledgement of the outcome of your grievance within 60 days of filing.

What is a local “Appeal”?

A local Appeal is a process that you can go through at your local CMHSP (Community Mental Health Services Provider) or SWMBH, if there is an action against you.

For example, if you are unhappy that services you were previously receiving were terminated or reduced, or you requested a service and you are told you cannot get it, or your services are suspended. It may also be if you were not told within 14 days from the date that you request a service whether you were going to get that service or not. It may also be that services you agreed upon during your person centered plan had not begun within 14 days from the agreed upon date. You may also file an appeal if you filed a grievance and it has been more than 60 days and you have not gotten an answer about



your grievance.

A decision will be made as quickly as possible, but no longer than 45 calendar days from the date you filed it. You may also ask for an “expedited appeal” if taking the time for a standard resolution could seriously jeopardize your health or ability to attain, maintain, or regain maximum function. In this case we will resolve the appeal as quickly as possible but no longer than 3 days from the date you requested the expedited appeal.

What is a “State Fair Hearing Appeal”?

You can file a request for a State Fair Hearing Appeal with the state of Michigan, Administrative Tribunal, if you have Medicaid and your CMHSP or substance abuse provider has taken an action against you.

You can file for both a local appeal and State Fair Hearing at the same time. You must ask the state for this hearing within 90 days from receiving a “Notice of Action.” Call your local Customer Service Representative if you have questions about this process, or would like help filing a request for a State Fair Hearing Appeal. You may also refer to the Southwest Michigan Behavioral Health Handbook

that you were given at the time you started receiving services. If you would like another copy of this handbook, contact your local Customer Service Representative or call SWMBH’s Customer Services Coordinator at 1.800.890.3721.

In filing a grievance, local appeal, or State Fair Hearing, your local CMHSP or Southwest Michigan Behavioral Health will provide reasonable assistance including assistance with filling out forms, providing interpreter services and toll free numbers that have adequate TTY/TTD and interpreter capability.

Updates on Policies

In 2015, SWMBH updated some of their policies in the following areas: Quality Assurance and Performance Improvement, Claims, Compliance, Coordinating Agency and MI Health Link. To review the policies you can visit our website at www.swmbh.org.

SWMBH Quality Corner

SWMBH 2015 QAPI Evaluation

As part of Southwest Michigan Behavioral Health's (SWMBH) benefit management organization responsibilities, the SWMBH Quality Assurance and Performance Improvement (QAPI) Department conducts an annual QAPI Evaluation to assure it is meeting all contractual and regulatory standards required of the Regional Entity, including its PIHP responsibilities.

Overall the objectives for FY 2015 were met. SWMBH and Quality Management Committee (QMC) developed a structure that can be adapted as changes in regulations and business lines continue. In many areas, such as: Michigan Mission Based Performance Improvement System (MMBPIS) data collection, Performance Improvement Project results and Customer Satisfaction Surveys SWMBH outperformed recommended State and National

benchmarks and consistently ranked among the top 3 in comparison to other PIHPs. There are areas that still need to be strengthened. The QAPI Department will continue to work on areas that need to be strengthened through continuous quality improvement activities such as MMBPIS reporting, tracking and communication of results to all impacted parties including stakeholders, providers, CMHAs and SWMBH staff.

Summary of Achievements/ Performance of the QAPI:

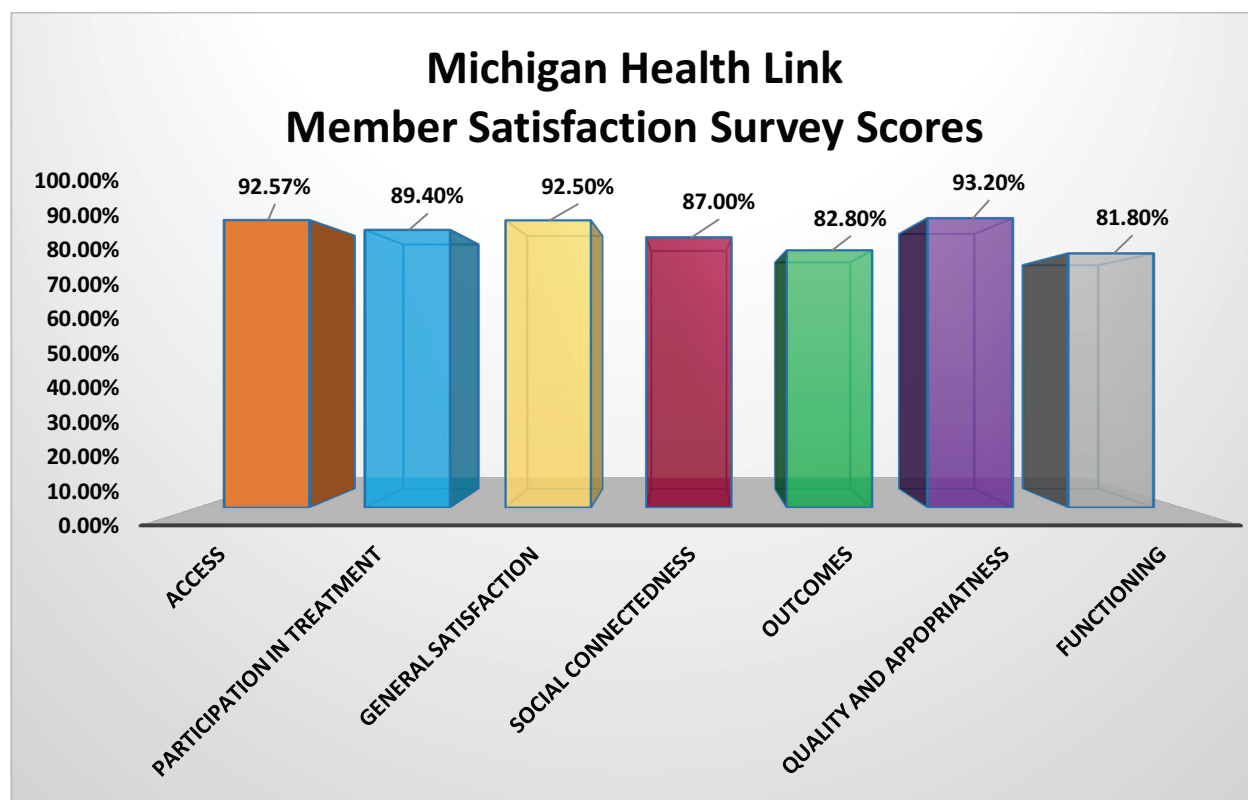
- ✓ Successful management of the Health Services Advisory Group External Quality Review, Performance Improvement Projects, Michigan Department of Health and Human Services and Performance Measures Validation Audits.
- ✓ Successful submission of data elements: Jail Diversion, Behavioral Treatment Review Committee Minutes, Michigan Mission Based Performance

Improvement System, and Critical Incidents to Michigan Department of Health and Human Services.

- ✓ Successful completion of the QAPI Program Objectives for FY 2015.
- ✓ Successful completion of MI Health Link contract reporting requirements.

Michigan Mission Based Performance Improvement System 2015 Results:

The Michigan Mission-Based Performance Indicator System (MMBPIS) is an indicator system used by the State to monitor SWMBH, CMHSP and provider performance. SWMBH monitors performance standards related to access, adequacy, efficiency and outcomes. Seventeen of these measures are monitored within MMBPIS. Data is submitted to the State of Michigan quarterly on a variety of topics and internally SWMBH tracks the various measures and make adjustments if the system or a specific participant CMH is not meeting the standards.



Medicaid Autism Behavioral Health Treatment/ Applied Behavior Analysis Services

As of January 1, 2016, coverage of Applied Behavior Analysis (ABA) services is provided for Medicaid eligible children under 21 years of age who are diagnosed with Autism Spectrum Disorder (ASD) and who meet medical necessity criteria. ABA is a Medicaid covered service under the Behavioral Health Treatment “umbrella” within the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit.

Applied Behavior Analysis (ABA) is a recommended service for children with Autism Spectrum Disorder. It has been researched for over 30 years and endorsed by the Surgeon General. ABA services can be used to address skills and behaviors relevant to children with Autism Spectrum Disorder. ABA services commonly address areas including, but not limited to, the following:

- Language skills
- Social skills
- Communication skills
- Following instructions
- Peer interactions
- Following daily routines
- Self-help and daily living skills
- Behavior challenges

To receive Medicaid ABA services, families engage their local Community Mental Health Services Providers (CMHSP) to gain access. Community Mental Health agencies are the only providers that can assess and work with the State of Michigan to determine eligibility. This process to become eligible and receive services includes:

1. Screening
2. Referral
3. Comprehensive Diagnostic

Evaluation and Determination of Medical Necessity

4. Develop the Plan of Care
5. Begin ABA Services

Information on the Behavioral Health Treatment/Applied Behavior Analysis benefit can be reviewed on the Michigan Department of Health and Human Resources (MDHHS) website at: www.michigan.gov/autism The MDHHS website includes resources, contact information, and general information regarding

Customers as members of SWMBH Committees

Southwest Michigan Behavioral Health (SWMBH) has established various committees and workgroups to assure that participant members, including customers, have input into the PIHP by advising Southwest Michigan Behavioral Health on items which directly or indirectly affect the quality of the behavioral health services and supports provided within the SWMBH affiliation of Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren Counties. Southwest Michigan Behavioral Health strives to have meaningful customer participation in our workgroups and committees.

SWMBH strives for:

- Representation of each of the participant Community Mental Health Agencies

as well as the Substance Use Disorder providers when possible;

- Diverse and cultural representation;
- Customers who are expected to provide meaningful participation and have one (1) equal vote.

SWMBH will ensure:

- Orientation to committees will be provided to each customer serving on a committee
- Each customer will be provided a mentor from either the CAC, a staff member or PSS on staff on the committee to assist with review of materials and support.
- Each customer/parent participant will be paid a stipend and reimbursement for mileage as applicable.

Each participant must meet criteria for membership:

- Customers must have a primary insurance that is a SWMBH line

of business. (i.e. Medicaid, Healthy Michigan, MI Health Link)

- They must be a current customer of the CMH/SUD system (or parent/guardian/advocate of a minor/dependent adult in the system)

The various committees include:

- Customer Advisory Committee
- Customer Service Committee
- Finance Committee
- Information Technology Committee
- Provider Network Committee
- Quality Management Committee
- Utilization Management Committee

If you are interested in learning more about serving on a SWMBH committee please contact your local Customer Service Department (contact information provided on page 12) or SWMBH Customer Service Department at 1-800-890-3712.

Van Buren Community Mental Health has been accredited by CARF International (Commission on Accreditation of Rehabilitation Facilities) for a period of three years for its continuum of services for adults and youth. This represents the highest level of accreditation that can be awarded. An organization receiving a Three-Year Accreditation exemplifies that services are of the highest quality, measurable, and accountable.

CARF is an independent, not-for-profit organization whose mission is to promote and advance the quality of services used to meet the needs of persons served for the best possible outcomes. This worldwide accrediting organization establishes consumer-focused standards to help other organizations measure and improve the quality of their programs and services.

CARF provides accreditation services at the request of health and human service providers. They are focused on services for rehabilitation for a disability, treatment for addiction and substance abuse, home and community services, retirement living, or other health and human services. Providers that meet certain CARF standards have demonstrated their commitment to being among the best available.

Summit Pointe in Calhoun County is pleased to announce they have embedded their Peer Support Specialists into their organization! They have had Peers join them throughout January and February to enhance the communication between teams and customers. They have hired many individuals who already have the Peer Certification, as well as hiring new individuals who are working to obtain their endorsement. This has been a great learning opportunity for Summit Pointe and they will continue to assist their customers in gaining skills. In following along with their Mission, they are “MAKING LIFE WORK” for their customers, and are looking forward to their program growing.

Kalamazoo Community Mental Health and Substance Abuse Services also recently received a 3-year accreditation from CARF. KCMHSAS is proud to work with a dedicated team of staff to provide high quality services to our customers. KCMHSAS is accredited in the programs of: Assessment and Referral, Case Management/Services Coordination, Prevention, Crisis Intervention, and Intensive Family-Based Services.

On February 20, 2016 the Prevention Department of **Community Mental Health & Substance Abuse Services of St. Joseph** County along with the St. Joseph County Substance Abuse Task Force hosted a Prescription Drug Take-Back Day. During this campaign residents were encouraged to bring unwanted, unused, and expired medications to drop boxes located at the Three Rivers Police Department, Sturgis Police Department and the Sheriff's Department. On hand for the event were Sheriff Brad Balk, Three Rivers Chief of Police Tom Bringman and Director of Public Safety Geoffrey Smith. Initial weigh-in shows a total of nearly 40 pounds of medication collected during a span of just a few hours.

The goal of this campaign was to raise awareness about the locations of the drop boxes, which are available 24 hours a day, 7 days a week and to remind the public about the risks related to misuse and abuse of prescription drugs. Research has consistently shown that one of the greatest risk factors for prescription drug abuse is access to medication. It is the hope of the St. Joseph County Task Force to continually work with our community to combat this risk factor through education and by making disposal of these drugs quick and easy.

Upcoming Events

KCMHSAS 2016 Mental Health

Breakfast is scheduled for Thursday, May 12, 2016 at the Radisson Hotel. Featured speaker this year is Christy Buck from the Mental Health Foundation of West Michigan. The Foundation is working with KCMHSAS to “gift” their Be Nice program to one school within the community. Be Nice stands for Notice, Invite, Challenge, Empower, and is a mental health awareness, bullying and suicide prevention initiative that focuses on school-wide change through simple, daily actions.

The 2nd Annual Michigan Peer

Conference will be held at the Lansing Center on May 24, 25 & 26 in Lansing, MI. “The conference celebrates the peer community and provides an opportunity for learning more about evidence-based best practices in the communities of individuals with lived experience. [They]

will have several dynamic keynote presentations, space devoted to health and wellness practices and a variety of microenterprises displaying their artistic talents. The cost of the event is \$99.00 for all 3 days. The conference is open to anyone interested in attending.”

This year’s **Walk a Mile** will be held at The Capital Building in Lansing, on May 18, 2016. The Advocacy Walk starts at 12:30pm and the Rally is from 1:30pm to 3:00pm. The purpose of the Rally is to create public awareness. Legislators need to know that Mental Health Matters. The goal is to put an end to the stigma related to mental illness and developmental disabilities. Michigan does not have equality between mental health and physical health care coverage. The Rally is designed to help promote mental health and wellness. Together, we can make a difference.

2016 NAMI Michigan State Conference

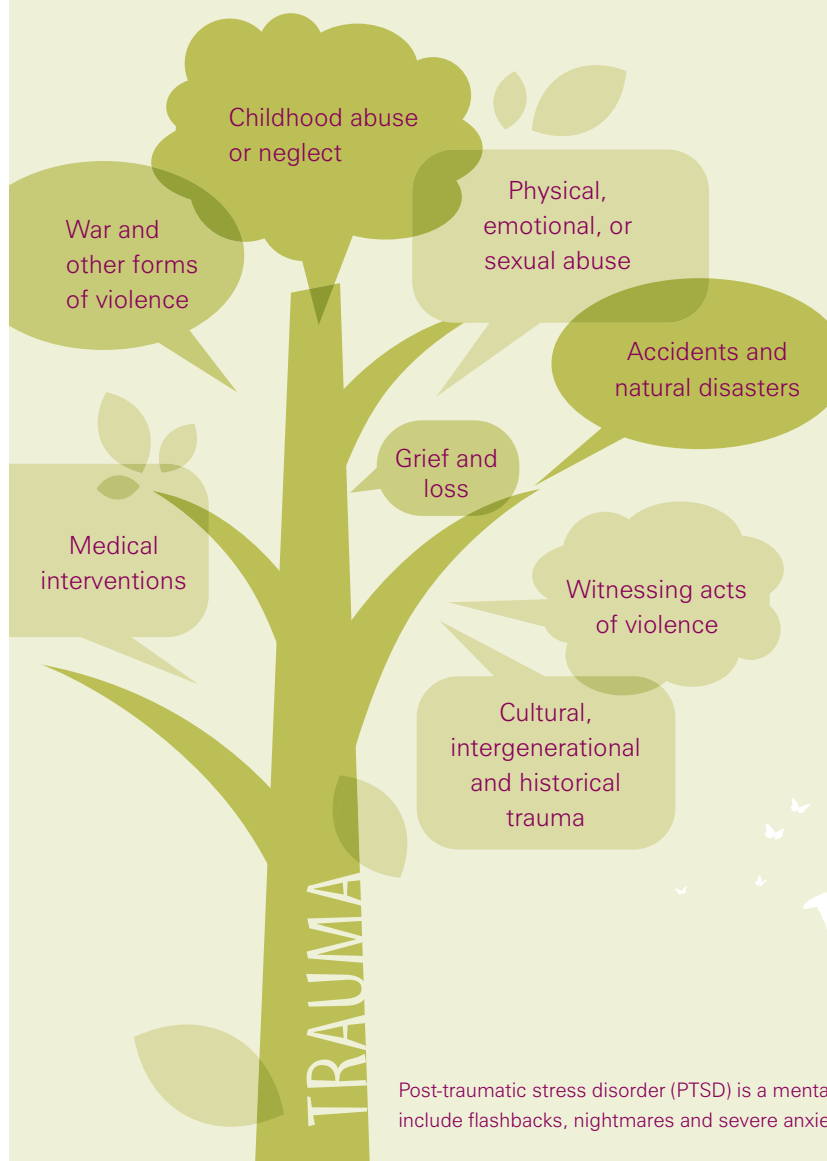
will be held May 19- May 21, 2016 at the Detroit Marriott Livonia. 17100 Laurel Park Drive North, Livonia, MI 48152. The conference is for persons currently diagnosed with, or providing care for someone living with mental illness or substance abuse issues. It is also recommended for mental health care professionals, educators, students, law enforcement officials, faith leaders, legislators or any per-sons curious about mental healthcare. The conference will offer more than 40 workshops with speakers and presentations focused on the mental health care needs of individuals, family members, and professionals.



How to Manage Trauma

Trauma occurs when a person is overwhelmed by events or circumstances and responds with intense fear, horror, and helplessness. Extreme stress overwhelms the person's capacity to cope. There is a direct correlation between trauma and physical health conditions such as diabetes, COPD, heart disease, cancer, and high blood pressure.

TRAUMA CAN STEM FROM



HOW COMMON IS TRAUMA?

70% of adults in the U.S. have experienced some type of traumatic event at least once in their lives. That's **223.4 million people**.



+90%

In public behavioral health, **over 90%** of clients have experienced trauma.

Trauma is a risk factor in nearly all behavioral health and substance use disorders.

In the United States, a woman is **beaten every 15 seconds**, a forcible rape occurs every 6 minutes.

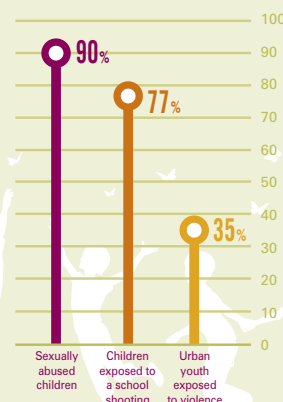


33%



More than **33% of youths** exposed to community violence will experience Post Traumatic Stress Disorder, a very severe reaction to traumatic events.

Nearly all children who witness a parental homicide or sexual assault will develop Post Traumatic Stress Disorder. Similarly, 90% of sexually abused children, 77% of children exposed to a school shooting, and 35% of urban youth exposed to community violence develop Post Traumatic Stress Disorder.



Post-traumatic stress disorder (PTSD) is a mental health condition that's triggered by a terrifying event. Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.

*People can and do
recover from trauma*



SYMPTOMS OF TRAUMA CHECKLIST

- Headaches, backaches, stomachaches, etc.
- Sudden sweating and/or heart palpitations
- Changes in sleep patterns, appetite, interest in sex
- Constipation or diarrhea
- Easily startled by noises or unexpected touch
- More susceptible to colds and illnesses
- Increased use of alcohol or drugs and/or overeating
- Fear, depression, anxiety
- Outbursts of anger or rage
- Emotional swings
- Nightmares and flashbacks — re-experiencing the trauma
- Tendency to isolate oneself or feelings of detachment
- Difficulty trusting and/or feelings of betrayal
- Self-blame, survivor guilt, or shame
- Diminished interest in everyday activities

HOW TO TALK TO YOUR DOCTOR

- Make your doctor aware that you have experienced trauma, past or recent
- Help them understand what is helpful to you during office visits, i.e., asking permission to do a procedure, staying as clothed as possible, explaining procedures thoroughly, or having a supporter stay in the room with you
- Ask for referrals to therapy and behavioral health support



HELPFUL COPING STRATEGIES

- Acknowledge that you have been through traumatic events
- Connect with others, especially those who may have shared the stressful event or experienced other trauma
- Exercise — try jogging, aerobics, bicycling, or walking
- Relax — try yoga, stretching, massage, meditation, deep muscle relaxation, etc.
- Take up music, art, or other diversions
- Maintain balanced diet and sleep cycle
- Avoid over-using stimulants like caffeine, sugar, or nicotine
- Commit to something personally meaningful and important every day
- Write about your experience for yourself or to share with others

ASK YOUR HEALTHCARE PROFESSIONAL ABOUT TREATMENTS

TRADITIONAL TREATMENTS

Cognitive Behavioral Therapy
Eye Movement Desensitization and Reprocessing (EMDR) Therapy
Talk Therapy
Exposure Therapy
Group Therapy

ALTERNATIVE TREATMENTS

Energy Processing
Hypnotherapy
Neuro-Linguistic Programming
Massage Therapy
Pet or Equine Therapy
Trauma and Recovery Peer Support Groups
Wellness Recovery Action Planning (WRAP)



NATIONAL COUNCIL
FOR COMMUNITY BEHAVIORAL HEALTHCARE



For more information, interviews, and research on trauma check out the National Council's magazine edition on the topic

www.TheNationalCouncil.org

A Recovery Bill of Rights for Trauma Survivors

By Thomas V. Maguire, Ph.D.

BY VIRTUE OF YOUR PERSONAL AUTHORITY YOU HAVE THE RIGHT TO...

Manage your life according to your own values and judgment.

Direct your recovery, answerable to no one for your goals or progress.

Gather information to make intelligent decisions about your recovery.

Seek help from many sources, unhindered by demands for exclusivity.

Decline help from anyone without having to justify the decision.

Believe in your ability to heal and seek allies who share your faith.

Trust allies in healing so far as one human can trust another.

Be afraid and avoid what frightens you.

Decide for yourself whether, when, and where to confront fear.

Learn by experimenting, that is, make mistakes.



TO GUARD YOUR PERSONAL BOUNDARIES YOU HAVE THE RIGHT TO...

Speak or remain silent, about any topic and at any time, as you wish.

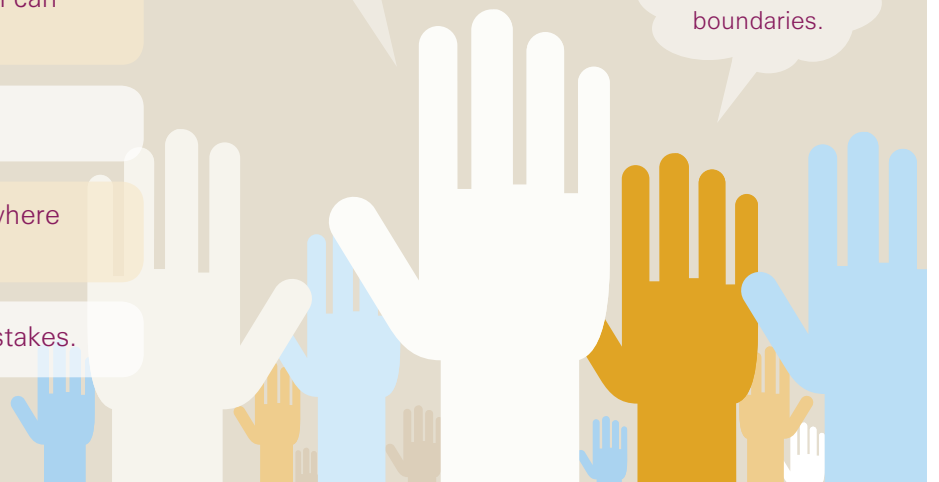
Choose to accept or decline feedback, suggestions, or interpretations.

Ask for help in healing, without having to accept help with everything.

Be touched only with, and within the limits of, your consent.

Take action to stop a trespass that does not cease when challenged.

Challenge any crossing of your boundaries.



FOR THE INTEGRITY OF YOUR PERSONAL COMMUNICATION YOU HAVE THE RIGHT TO...

Ask for explanation of communications you do not understand.

Express a contrary view when you do understand and you disagree.

Acknowledge your feelings, without having to justify them.

Ask for changes when your needs are not being met.



Speak of your experience, without apology for your uncertainties.

Resolve doubt without deferring to the views or wishes of anyone.

FOR SAFETY IN YOUR PERSONAL DEPENDENCY IN THERAPY YOU HAVE THE RIGHT TO...

- Hire a therapist or counselor as coach, not boss, of your recovery.
- Receive expert and faithful assistance in healing from your therapist.
- Know that your therapist will never have any other relationship with you— business, social, or sexual.
- Be secure against any disclosure by your therapist, except with your consent or under court order.
- Hold your therapist's undivided loyalty in relation to all abusers.
- Obtain informative answers to questions about your condition, your therapist's qualifications, and any proposed treatment.
- Have your safety given priority by your therapist, to the point of readiness to use all lawful means to neutralize an imminent threat to your life or that of someone else.
- Receive a commitment from your therapist that is not conditional on your "good behavior" (habitual crime and endangerment excepted).
- Make clear and reliable agreements about the times of sessions and of your therapist's availability.
- Telephone your therapist between scheduled sessions, in urgent need, and receive a return call within a reasonable time.
- Be taught skills that lessen the risk of re-traumatization:
 - containment (boundaries for recovery work);
 - control of attention and mental imagery;
 - systematic relaxation.
- Enjoy reasonable physical comfort during sessions.



NATIONAL COUNCIL
FOR COMMUNITY BEHAVIORAL HEALTHCARE

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Customer Services Department

The Customer Services department is here to help the members (persons who are receiving services) of Southwest Michigan Behavioral Health (SWMBH). If you have questions about your benefits, how to find a provider that is closer to your home, or you want to file a complaint, you can call us and we will work to make sure that you get your questions answered or your problem resolved.

We are also available if you want to file an appeal about a service decision you don't like or help you to work with your provider to make sure that you are getting the services you need. As a member of SWMBH you have many rights to which you are entitled. A full list of these rights can be found in your SWMBH Member Service Handbook, along with what benefits may be available to you. A list of mental health and substance abuse providers who are able to help you are also included in the handbook. Please contact us if you have questions or complaints. Your Customer Service Representatives are here to help you.

Servicios de Atención al Cliente,

El departamento de Servicios de Atención al Cliente existe para ayudar a los miembros (personas que reciben servicios) de Southwest Michigan Behavioral Health (SWMBH). En el caso de que usted tenga preguntas sobre beneficios y derechos que acompañan los servicios, o como encontrar agencias que presten servicios cerca de donde usted vive, o como presentar una queja, no dude en ponerse en contacto con nosotros. Nosotros trabajaremos con usted y nos esforzaremos para contestar sus preguntas y solucionar problemas que puedan ocurrir.

Usted puede también utilizar nuestros servicios para presentar un recurso o apelación en contra de decisión sobre su servicio con la cual usted no esté de acuerdo, o para trabajar con la agencia que le esté prestando servicios con el fin de asegurar que usted esté recibiendo los

<p>Barry County Community Mental Health Authority Mental Health and Substance Abuse Services Deb Brice, Customer Services Representative 915 W. Green Street, Suite 201 Hastings, MI 49058 Agency Phone: (269) 948-8041 TTY: 711 (MRC) Fax: (269) 948-9319 Email: debrice@bccmha.org Customer Service Hours M - F 8:00 a.m. - 4:30 p.m.</p>	<p>Berrien Mental Health Authority Melissa Ludwig, Customer Service Representative 1485 M-139 P.O. Box 547 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: mjl@riverwoodcenter.org Customer Service Hours M - F 8:30 a.m. - 5:00 p.m.</p>
<p>Pines Behavioral Health (Branch County) Shirley Nystrom, Customer Service Representative 200 Orleans Boulevard Coldwater, MI 49036 Customer Service Toll-Free: (866) 877-4636 Agency Phone: (517) 279-8404 TTY: 711 (MRC) Fax: (517) 279-8172 Email: mail@pinesbhs.org Customer Service Hours Monday, Wednesday - Friday 8:00 a.m. - 5:00 p.m. Tuesday 8:00 a.m. - 7:00 p.m.</p>	<p>Summit Pointe (Calhoun County CMH) Customer Service Representative 140 W. Michigan Avenue Battle Creek, MI 49017 Customer Service Toll-Free: (877) 275-5887 Agency Phone: 269-966-1460 TTY: 711 (MRC) Fax: (269) 966-2844 Customer Service Hours M - F 8:00 a.m. - 5:00 p.m.</p>
<p>Woodlands BHN (Cass County CMH) Mary Munson, Customer Service Representative 960 M-60 East Cassopolis, MI 49031 Customer Service Toll-Free: (800) 323-0335 Agency Phone: 269-445-2451 TTY: 711 (MRC) Fax: (269) 445-3216 Email: marym@woodlandsbhn.org Customer Service Hours M - F 8:30 a.m. - 5:00 p.m.</p>	<p>Kalamazoo Community Mental Health/SA Services Teresa Lewis, Customer Services Manager 2030 Portage St. 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@kazoocmh.org Customer Service Hours M - F 8:00 a.m. - 5:00 p.m.</p>
<p>Community Mental Health & Substance Abuse Services of St. Joseph County Michelle Heffner, Customer Services Coordinator 677 East Main Street, Suite A Centreville, MI 49032 Customer Services Toll-Free: (855) 203-1730 Agency Phone: (269) 467-1000 TTY: 711 (MRC) Fax: (269) 467-3072 Email: mheffner@stjoecmh.org Customer Service Hours M - F 8:00 a.m. - 5:00 p.m.</p>	<p>Van Buren Community Mental Health Authority Lisa Whelan, Customer Service Representative 801 Hazen Street, Suite C P.O. Box 249 Paw Paw, MI 49079 Agency Phone: (269) 657-5574 TTY: 711 MRC Fax: (269) 657-3474 Email: lwhelan@vbcmh.com Customer Service Hours M - F 8:00 a.m. - 5:00 p.m.</p>

servicios que necesita. Como miembro de SWMBH usted tiene derechos que le están garantizados. Usted puede encontrar una lista completa de tales derechos en su copia del Manual de Servicios para el Cliente de SWMBH (Member Service Handbook), así como una lista de otros beneficios a los cuales usted pueda acceder. Una lista de prestadores de servicios para la salud mental and

para problemas del abuso de drogas está incluida en el Manual de Servicios para el Cliente. Por favor póngase en contacto con nosotros en caso de preguntas o quejas. El personal de Servicios de Atención al Cliente existe con el propósito de servirle.

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
Berrien County	269-925-0585 or 1-800-336-0341
Branch County	517-279-1193 or 1-888-725-7534
Calhoun County	269-966-1460 or 1-800-632-5449
Cass County	269-445-2451 or 1-800-323-0335
Kalamazoo County	269-373-6000 or 1-888-373-6200
St Joseph County	269-467-1000 or 1-800-622-3967
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 condition is under control, 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.

Please note: If you utilize a hospital emergency room, there may be health-care services provided to you as part of the hospital treatment that you receive. Depending on your insurance status, you may receive a bill and may be responsible for paying the charges for some other medical services provided by the hospital. These services may not be part of the SWMBH emergency services you receive. Customer Services can answer questions about such bills.



Southwest Michigan Behavioral Health Board Meetings & Roster

(January 2016--December 2016)

All meetings take place from 9:00a.m. to 11:00a.m. on the following dates:

January 8, 2016	July 8, 2016
February 12, 2016	August 12, 2016
March 11, 2016	September 9, 2016
April 8, 2016	October 14, 2016
May 13, 2016	November 11, 2016
June 10, 2016	December 9, 2016



All scheduled meetings take place at the Principal Office, unless otherwise communicated. Board meetings are open to the public.

The Principal Office is located at 5250 Lover's Lane, Suite 200, Portage, MI, 49002

www.SWMBH.org

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

Barry County

Robert Nelson
Alternate Pending

Calhoun County

Kathy-Sue Dunn
Richard 'Trae' Allman (Alternate)

St. Joseph County

Barbara Parker- Vice Chair
Robin Baker (Alternate)

Berrien County

Randy Hyrns-Chair
Ed Meny (Alternate)

Cass County

Robert Wagel
Mary "Mae" Myers (Alternate)

Van Buren County

Susan Barnes
Angie Dickerson (Alternate)

Branch County

Tom Schmelzer
Robert Montgomery (Alternate)

Kalamazoo County

Moses Walker
Patricia Guenther (Alternate)

SUD-OPB Board Member Roster

Barry County

Ben Geiger VACANT

Berrien County

Andy Vavra

Deb Panozzo

Branch County

Randall Hazelbaker

Vacant

Calhoun County

Carla Reynolds

Jim Haadsma

Cass County

Tara Smith

Robert Wagel

Kalamazoo County

George Cochran-Chair

Patrick Forseman

St. Joseph County

John Dobberteen

Allen Balog

Van Buren County

Richard Godfrey

Don Hanson

SWMBH SUD Staff and Support

Bradley P. Casemore, MHSA, LMSW, FACHE, Executive Officer

Brad.Casemore@swmbh.org

269-488-6956

Mindie Smith, MA, LLP, CAADC, Director, Substance Abuse Treatment and Prevention Director

Mindie.Smith@swmbh.org

269-488-6959

Joel Smith-, LMSW, SUD, Treatment Specialist

Joel.Smith@swmbh.org

269-488-6958

Achilles Malta, BA, CPS, SUD, Prevention Specialist

Achilles.Malta@swmbh.org

269-488-6925

Jamie White, MBA, Financial Analyst

Jamie.White@swmbh.org

269-488-6980

Mary Ann Bush, Senior Operations Specialist

Mary.Bush@swmbh.org

269-488-6453



Resources

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

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

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

The 2016 MI Health Link Handbook is available. Contact Customer Services (800-676-5814) for your copy or download it directly at: www.SWMBH.org

**Member Triage and
Engagement Specialists**
5250 Lovers Lane, Suite 200
Portage, MI 49002

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

Agency Phone:
(800) 676-0423
711 MRC

Fax:
(269) 883-6670

www.swmbh.org

Customer Service Hours
M – F 8:00 a.m. – 5:00 p.m.



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. You may also wish to talk with your substance use disorder service provider to address any issues you may encounter.

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