

Integrated Healthcare Pilot Program for Older Adults



Southwest Michigan Behavioral Health (SWMBH), in partnership with Kalamazoo Community Mental Health and Substance Abuse Services (KCMHSAS) and Family Health Center (FHC), is excited to announce they have been awarded a grant from the Michigan Health Endowment Fund for a two year pilot project aimed at aiding older adults (ages 55+) in Kalamazoo County who have Medicaid but are not enrolled in a Medicaid Health Plan and have a mental illness and one or more chronic medical conditions. This voluntary program will merge the participants' physical health requirements with their mental health needs by coordinating services into one integrated health care plan. Participants will receive a community-based Community Health Worker and Social Work Care Coordinator services, consumer-assistive technology, and Nurse Care Coordinator expertise, supported by a team of allied health specialists. The funds from the grant will help SWMBH, KCMHSAS and FHC work together to align:

- assessments
- care planning,
- healthcare data analytics
- personalized interventions, and
- objective evaluation into one central location for project participants.

The goal of this unique and important partnership is to improve management of behavioral and physical health disorders, reduce avoidable health services, reduce healthcare expenses, enhance Participant functioning, provide symptom reduction and improve the overall quality of life. This partnership will target chronic medical conditions including Type 2 Diabetes, COPD, Heart Disease and Stroke, and/or Chronic pain. Participation will not be solely limited to these chronic conditions and any individuals with a mental illness and chronic condition can be accepted into the program.

The Michigan Health Endowment Fund works to improve the health and wellness of Michigan residents and reduce the cost of healthcare, with a special focus on children and seniors. You can find more information about the Health Fund at mihealthfund.org. For more information about the grant awarded to SWMBH through the Michigan Health Endowment Fund grant please contact Alona Wood at (269) 488-6441.

SWMBH Newsletter Table of Contents

Integrated Healthcare Pilot Program for Older Adults.....	1
Did you know? Changes to Filing An Appeal, Healthy Michigan.....	2
National Council Members Article.....	3
Youth Services Survey for Family....	4
Crisis Intervention Training International Award, I Peer Training.....	5
CMH Corner, CAC Spotlight, SWMBH Member Services Specialist.....	6
KCMH Announces New Name.....	7
SWMBH Customer Advisory Committee.....	8
Upcoming Events, Coming Together Conference.....	9
Emergency Services.....	10
Transforming Systems for Safer Care Zero Suicide.....	11
Jail Diversion Programs.....	12
Michigan Career Technical Institute.....	13
Federal Compliance.....	14
Resources.....	16

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DID YOU KNOW?

If you do not agree with a decision we have made, you have the right to file an appeal.

Decisions could deny, close, reduce, or temporarily stop (suspend) your services.

- When there is a decision, you should get a notice (“Adverse Benefit Determination”).
- You must file an appeal within 60 days of the notice.
- An appeal includes a review of the decision that we made.
- You can file an appeal by calling or writing to your customer service staff.
- If you call, we will need to confirm your appeal with a written, signed statement from you.
- You can ask for a copy of your records.
- You can name someone as your representative for the appeal. **
- You can ask for a quick (expedited) appeal if you feel your mental health is at risk. **
- You can ask to keep your services without change during the appeal. **

**For these requests, there are certain requirements you need to meet and/or know about. Call customer services to find out what those are. Call SWMBH at (800) 890-3712. We can connect your call to your local customer service staff.

CHANGES TO FILING AN APPEAL

It has always been a rule but never required. When your Community Mental Health Service Provider (CMHSP) or Southwest Michigan Behavioral Health (SWMBH) decides to reduce, suspend or stop your services, you have the right to appeal. In other words, you can ask for them to review this decision again. This is so you can keep the services the CMHSP is trying to reduce, suspend or stop. If you ask for an appeal/review, you will now need to provide a written request. Before, you could just call and verbally ask for an appeal/review and SWMBH or the CMHSP would process that request. You must now submit a written request after making the verbal request. If you do ask for an appeal/review, your customer service representative will talk with you about filling out a form. You can also submit a letter or email if that is easier. It just needs to be something in writing. If you do not provide a written request for the appeal/review, the CMHSP or SWMBH will not process the appeal/review. If you have questions about this rule, please contact your local Customer Service Department or SWMBH Customer Service at 1-800-890-3712.



WORK REQUIREMENTS COMING SOON!!!

Starting January 1, 2020, Michigan law will require some people in Healthy Michigan Plan (HMP) to tell them each month about 80 hours of work or activities like job search. If you think you should be exempt because you have a documented medical condition, are disabled or pregnant, mail completed form back by the deadline January 31, 2020.



Members,

I want to give all of you a heads up about an important paper we just released.

“Mass Violence in America: Causes, Impacts and Solutions” provides important insights into the link between mental illness and mass violence. The National Council’s Medical Director Institute authored the report.

In light of the tragic shootings recently, “Mass Violence in America: Causes, Impacts and Solutions” is both timely and relevant, and I’m confident it will add to the national conversation underway about the link between mental illness and mass violence in the wake of the El Paso and Dayton shootings.

According to the report, “people with serious mental illness are responsible for less than 4 percent of all violence and less than one-third of mass violence.” Statistics bear out that most people who commit mass violence do not have a serious mental illness.

What’s in the report:

- The report delves into the research on mental illness, substance use disorder (SUD) and mass violence and it does find a link, particularly when there is a person with untreated mental illness who has a co-occurring SUD.
- That said, it also reveals that the link is limited – other factors such as demographics and isolation from society play a critical role.
- “While there is a modest link between mental illness and violence, there is no basis for the generalized fear of people with a mental illness.”
- It continues to be tragically true that people with mental illness are more at risk of harming themselves than others, and this cannot be overlooked in debates about mental illness and violence.

The report’s recommendations:

- Creation of threat assessment teams with members from human resources, law enforcement, legal teams, security departments and behavioral health clinicians.
- Enactment of state extreme-risk protection orders (also known as red flag laws) allow for the temporary removal of guns from individuals who are known to pose a high risk of harming others or themselves in the near future.
- Involve mental health professionals in threat assessments conducted by law enforcement and implementation of red flag laws.
- The requirement of training on violence risk assessment for all clinicians.
- Training staff within schools, law enforcement and communities with high-risk groups in Mental Health First Aid, which teaches skills to respond to the signs of mental and substance abuse disorders.
- Reexamination of the effectiveness of zero-tolerance policies and security measures like bulletproof glass and metal detectors in schools.

Thanks,

Chuck Ingoglia
President and CEO

Youth Services Survey for Family (YSS – F) Survey Information

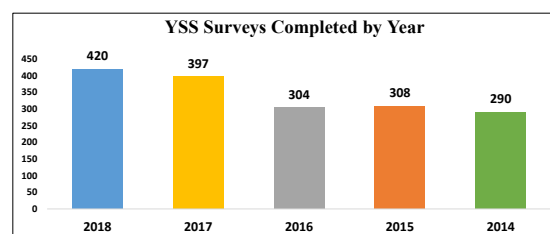
The 2018 consumer satisfaction surveys were completed using a telephonic process. One of the survey tools used was a modification of the MHSIP survey for adults, the Youth Services Survey for Family (YSS-F) assesses caregivers' perceptions of behavioral health services for their children aged 17 and under. The YSS measures concerns that are important to consumers of publicly funded mental health services in (6) different areas including:

1. Social connectedness
2. Outcomes
3. Appropriateness
4. Cultural sensitivity
5. Participation in treatment
6. Access

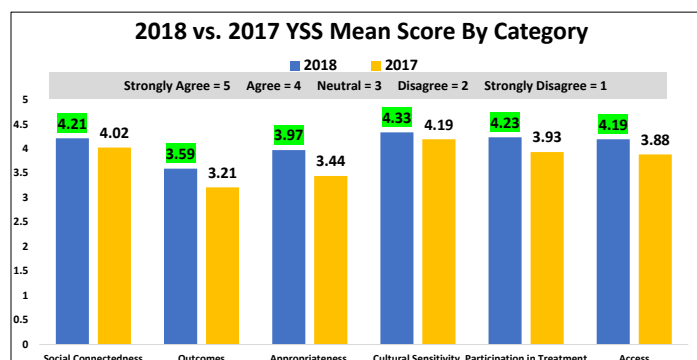
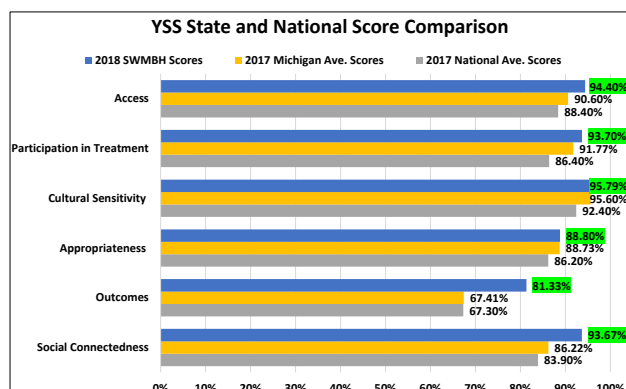
The YSS consists of 46 questions. The use of the YSS survey tool is a contractual requirement by MDHHS (42 CFR 438.230). The primary goal in completing the annual consumer satisfaction surveys is to gain valuable feedback from consumers on the services they have received. After the analysis of the survey scores and consumer feedback is completed, the SWMBH Quality Team presents the data to the primary Regional Committees including the: Regional Consumer Advisory Committee, Regional Utilization Management Committee, Regional Operations Committee, Regional Compliance Committee and the Regional Quality Management Committee, for review and feedback. SWMBH takes the consumer feedback they receive very seriously and works directly with providers and Community Mental Health Service Providers (CMHSP) to help improve Mental Health and Substance Abuse services and programs throughout the 8-county service region. SWMBH's survey preparation and processes have improved tremendously over the past 5 years and this is directly attributed to the feedback received from the Regional Committees and Consumers we serve.

YSS Results

- ❑ 2018 Aggregate Score: 91.28%
- ❑ 2017 Aggregate Score: 88.90%
- +2.38% Percent Improvement over 2017 Scores**



If you would like further information on the annual consumer satisfaction survey projects, please don't hesitate to contact the SWMBH Quality Assurance Department at: 269-488-8922.



CRISIS INTERVENTION TRAINING INTERNATIONAL AWARD

Chief Jim Blocker of Battle Creek Police Department was awarded with the Crisis Intervention International award for the Department's efforts to improve outcomes for those with mental illness. Crises Intervention Training (CIT) International selected Chief Jim Blocker as their 2019 Police Chief of the Year. CIT International says that Blocker made the choice to "actively pursue a partnership with local mental health professionals to help provide specialized training and education to law enforcement" in 2015 after two incidents involving police and those with mental health needs.

Since Crisis Intervention Team Training started, 61 officers in Calhoun County law enforcement have completed the course. Since 2017 there have been 450 CIT contacts with these officers, resulting in only eight people going to jail. All other incidents have been resolved at the scene or lead to those involved getting the help they needed.



I-PEER TRAINING

The Interprofessional Peer Education and Evidence for Recovery-I-PEER is in their 3-year of programming. I-PEER provides enhanced interdisciplinary education for social workers, occupational therapists and peer specialists in evidence-based practices in behavioral health. The long-term goal of I-PEER is to provide workforce training in best practices to better serve rural and medically underserved communities in state psychiatric hospitals and community mental health providers in medically underserved and rural Southwest Michigan. To learn about Fall and Winter training opportunities contact Western Michigan University College of Health and Human Services or email Jennifer Harrison at Jennifer.harrison@wmu.edu and Ann Chapleau ann.chapleau@wmich.org.



CMH CORNER

Summit Pointe is pleased to announce they were awarded a Three-Year Accreditation from The Commission on Accreditation of Rehabilitation Facilities (CARF) in June. This is the first attempt at CARF accreditation that Summit Pointe has pursued and is the highest level of accreditation that can be awarded. This recognition applies to all of Summit Pointe's Case Management Programs, Outpatient Treatment Services, and their Assertive Community Treatment Program. Additionally, all three of their Crisis Intervention programs have been accredited including Mobile Crisis, Intensive Crisis Stabilization, as well as their Recovery Center which has also provided social detox services since opening in March 2017.

Woodlands Behavioral Healthcare Network received its 3 full-year Accreditation to continue to provide quality services to its members and families. WBHN is pleased to announce to the public, 10 of its core programs received accreditation. Assessment and Referral Adult, Assessment and Referral Children and Adolescent, Case Management and Coordination, Crisis Intervention for adult and children, Intensive Family Based Services, Treatment for Alcohol and other Addictions, Outpatient Treatment Mental Health, Prevention Services. CARF surveyors indicated that "Services, personnel and documentation clearly indicate an established pattern of conformance to standards. This achievement is an indication of Woodlands' dedication and commitment to improving the quality of lives for adults, children and families served.



Six years ago, Sharon was homeless and struggling with addiction. Today, she is celebrating over five years of recovery with a good job and her own place. She is committed to giving back and helping others. Sharon is a true blessing and a valuable member of the SHARE Center community. She leads weekly support groups for Women, Bi-Polar Disorders, and Narcotics Anonymous. Additionally, she serves as the Secretary of the SHARE Center Board of Directors. Sharon is employed at Summit Point as a Peer Support with the hope of becoming certified through Michigan Department of Health and Human Services. We are pleased to welcome Sharon to the SWMBH Customer Advisory Committee.

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: 71 1(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



Kalamazoo Community Mental Health & Substance Abuse Services announces new name: Integrated Services of Kalamazoo

As of Oct. 1, 2019, the agency known as Kalamazoo Community Mental Health & Substance Abuse Services (KCMHSAS) will take on a new name: Integrated Services of Kalamazoo (ISK).

For more than 30 years, KCMHSAS has served youth, families and adults with mental health challenges, intellectual and developmental disabilities and substance use disorders in Kalamazoo County. From Oct. 1, 2017 through Sept. 30, 2018, KCMHSAS served nearly 8,000 individuals, either directly through KCMHSAS service programs or through a network of provider agencies that contract with KCMHSAS. The agency is one of 46 Community Mental Health Services Programs in Michigan.

Jeff Patton, CEO of KCMHSAS, said the new name will better reflect the agency's expanded programming beyond traditional community mental health services. "In recent years, we've extended our services to include comprehensive housing assistance and outreach to homeless persons, crisis response to opioid overdoses, veteran services, stigma-reduction efforts and community training in Mental Health First Aid," Patton explained. "Integrated Services of Kalamazoo' builds on our agency's current name-recognition and reflects our ongoing collaboration with community partners."

When considering options for a new name, the agency sought input from the people KCMHSAS serves, as well as staff and providers. Without singling out any specific conditions (like mental illness or substance use disorders), the new name conveys wider access to a range of resources, Patton said. In addition, it retires the term "substance abuse," which has been recognized as stigmatizing.

SOUTHWEST MICHIGAN BEHAVIORAL HEALTH CUSTOMER ADVISORY COMMITTEE

Southwest Michigan Behavioral Health (SWMBH) has established a Customer Advisory Committee to assure that customers are able to provide input for SWMBH. Customers are briefed and provide advice on items that may directly or indirectly affect the quality of the behavioral health services and supports provided within the SWMBH region of Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren Counties.

Committee members are responsible for, but not limited to:

- Reviewing and providing feedback on documents as prepared for distribution throughout the SWMBH network such as the Customer Handbook and other informational materials

- Reviewing questions asked in questionnaires, surveys, and the like, in which customers will be asked to participate

- Reviewing Satisfaction Survey results and regional plans for change

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

- Reviewing results of Michigan Department of Health and Human Services (MDHHS) and Health Services Advisory Group (HSAG) reviews and regional plans for change

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

If you currently have Medicaid, Healthy Michigan Plan, or MI Health Link as your form of insurance, are a primary or secondary customer (advocate) of Mental Health/ Intellectual and Developmental Disability 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.



SWMBH is on Facebook. Check us out!!! We'd like to hear from you. Leave a message and let us know how we are doing. For immediate assistance contact Customer Service at (800) 870-3712.

UPCOMING EVENTS

Project Connect Veteran Stand Down October 18, 2019 9 a.m.-1 p.m. at Full Blast, Battle Creek, MI

7th Annual Trunk or Treat Saturday October 19, 2019 at Great Lakes Autism Treatment and Research Center located at 9616 Portage Rd. Portage, MI

Kalamazoo Project Connect October 23, 2019 12pm-4pm at the Kalamazoo Expo Center.

Berrien County Health Department presents Community Roundtable on October 25, 2019 from 8am-12noon located at the Berrien County Conference Center 2149 E. Napier Avenue, Benton Harbor, MI

Adult MHFA October 22, 2019 8:00 a.m.-5:00 p.m. Location 418 West Kalamazoo Ave.

Youth MHFA Friday November 15, 2019 8:00a.m.-5:00 p.m. Location 418 West Kalamazoo Ave.

Adult MHFA Friday December 6, 2019 8:00 a.m-5:00 p.m. Location 418 West Kalamazoo Ave.

To learn more about Mental Health First Aid contact Julie Helmer at (269) 364-6950 or to RSVP Email:jhelmer@kazooemh.org.

Woodlands Behavioral Health and Cass County Courts will present “Holden On” a 2019 Recovery Film Festival, Friday November 8, 2019, 7:00 p.m. at the Beckwith Theatre 100 New York Avenue, Dowagiac, MI

SAVE THE DATE



COMING TOGETHER CONFERENCE & COMMUNITY EVENT

October 22 & 23, 2019

Comingtogetherkalamazoo.com

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 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.



Transforming Systems for Safer Care

Suicide deaths for patients at risk of suicide in health and behavioral health systems are preventable. For systems dedicated to improving patient care and outcomes, the Zero Suicide framework presents both an aspirational challenge and a way forward.

Zero Suicide Approach

People who die by suicide are touching the health care system: 83% of those who die by suicide have seen a health care provider in the year before their death (Ahmedani et al., 2014). Only 29% of those who died in the past year were seen in outpatient behavioral health (Luoma et al., 2002).

Across health and behavioral health care settings, there are many opportunities to identify and provide care to those at risk for suicide. Before that can happen, suicide prevention must first be seen as a core responsibility of health care.

The Zero Suicide framework is defined by a system-wide, organizational commitment to safer suicide care in health and behavioral health care systems.

It is a culture shift away from fragmented suicide care toward a holistic and comprehensive approach to patient safety and quality improvement—the most fundamental responsibility of health care—and to the safety and support of the staff who do the demanding work of treating and caring for suicidal patients.

Elements of Zero Suicide

- 1** **Lead** system-wide culture change committed to reducing suicides
- 2** **Train** a competent, confident, and caring workforce
- 3** **Identify** patients with suicide risk via comprehensive screenings
- 4** **Engage** all individuals at-risk of suicide using a suicide care management plan
- 5** **Treat** suicidal thoughts and behaviors using evidence-based treatments
- 6** **Transition** individuals through care with warm hand-offs and supportive contacts
- 7** **Improve** policies and procedures through continuous quality improvement

What is a Jail Diversion Program?

A Jail Diversion program diverts individuals with serious mental illness (and often co-occurring substance disorder) or developmental disability in contact with the justice system from custody and/or jail and provide linkages to community-based treatment and support services. The individual thus avoids or spends a significantly reduced time period in jail and/or lockups on the current charge.

Depending on the point of contact with the justice system at which diversion occurs, the program may be either a pre-booking or post-booking diversion program. Jail diversion programs are intended for individuals alleged to have committed misdemeanors or certain, usually non-violent, felonies and who voluntarily agree to participate in the diversion program.

How do we track and utilize the data from Jail Diversion Programs?

The Southwest Michigan Behavioral Health Quality Department collects, monitors and reports on jail diversion data to help prevent incarceration of individuals with serious mental illness or developmental disability who encounter the criminal justice system. The data is collected from our partner Community Mental Health Service Providers (CMHSP) on a quarterly basis. Monitoring of this data also help identify significant trends, that might be occurring within the legal and mental health systems.

What do the results look like?

As you can see; a declining trend is noted over the 5 years of data analysis. Affiliate input suggests administration at jails may be a factor in utilization of jail diversion programs. Therefore, all the diversions may not be documented and reported by the jails. At least two Community Mental Health Service Providers (CMHSP) have received additional grant funding to enhance their respective diversion programs, for which a higher level of participation is expected. This will also help educate the community on how important and valuable this data is.

Jail Diversion Definitions:

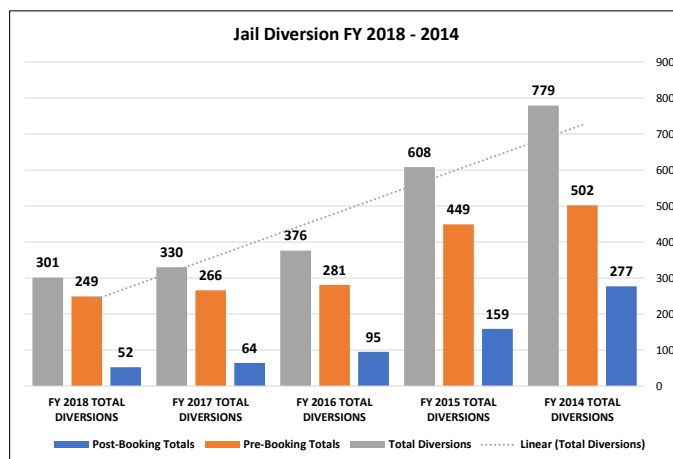
Pre-booking:

An activity by a behavioral health care worker or police officer that diverts a person from immediate incarceration or arrest (based on the potential of an actual charge) due to the existence of a behavioral health condition and referral for screening and/or new or continued treatment.

Post-booking Diversion:

An activity by a behavioral health care worker which influences a criminal justice professional to release an individual from incarceration after booking. Two conditions must be met: the person must have a diagnosable behavioral health condition and the behavioral health worker must state the intervention that influenced the outcome. Examples include (1) treatment as a condition of bail; (2) deferred prosecution; (3) deferred sentencing; and (4) pleading guilty with treatment as a condition of probation.

Jail Diversion Trends over the past 5 years:





Michigan Career Technical Institute (MCTI) celebrated its 75th anniversary while the Graduating Class of 2019 celebrated their accomplishments. Michigan Career Technical Institute is operated by Michigan Rehabilitation Services (MRS) within the Michigan Department of Health and Human Services (MDHHS), MCTI provides vocational training in 13 careers. It is the second largest rehabilitation training center in the country. “MCTI puts Michiganders with disabilities on the road to opportunity by helping them maximize their talents,” said Gov. Gretchen Whitmer. “Investing in skills training is vitally important to the state’s economy and its residents.” Students can be enrolled in technical training programs in automotive technology, cabinet making/millwork, certified nurse assistant (CNA), culinary arts, custodial, electronics, graphic communications, grounds maintenance/landscaping, machine technology, office automation, pharmacy services, retail marketing and construction. This year MCTI had 172 students graduate. “We are proud of the achievements of these students,” said MDHHS Director Robert Gordon. “MCTI students demonstrate that providing opportunities to all Michiganders brings positive results – for students who are able to pursue their career interests and for employers who benefit from the skills and work ethic that MCTI graduates bring to the table.” Michigan Career Technical Institute also offers health, psychological and social work services, sports and activities, housing, student government and much more. To learn more about career options for people with disabilities contact www.michigan.gov/MCTI.

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, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Member Services Specialist.

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:

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

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, we are 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 electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone.

U.S. Department of Health and Human Services
200 Independence Avenue SW., Room 509F, HHH Building
Washington, D.C., 20201
1-800-368-1019, 1-800-537-7697 (TDD).
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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 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

The 2018 MI Health Link Handbook is available. Contact Customer Services (800-676-5814) for your copy or download it directly at: www.SWMBH.org

**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**



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 in your SWMBH Customer Handbook. 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.

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