



# COMMUNITY MENTAL HEALTH PARTNERSHIP

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of **Southeast Michigan**

## Guide to Services

**A Prepaid Inpatient Health Plan Serving those with Mental Health and  
Substance Use Disorders**

The Community Mental Health Partnership of Southeast Michigan (CMHPSM)

consists of the following partners:

<b>Lenawee County</b>	Lenawee Community Mental Health Authority
<b>Livingston County:</b>	Livingston County Community Mental Health Authority
<b>Monroe County:</b>	Monroe Community Mental Health Authority
<b>Washtenaw County:</b>	Washtenaw County Community Mental Health



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## The Purpose of this Guide to Services

The Guide to Services was created to help people who receive services, their families, friends, and people who support them.

The Guide will provide:

- General information about services and your rights
- Information that is unique or specific to each Community Mental Health (CMH) within the region
- If you have questions, please call the Customer Service Department at 1-877-779-9707

## Overview of the Community Mental Health Partnership of Southeast Michigan

**Vision:** The CMHPSM will be a comprehensive system of care working in an integrated fashion with substance abuse and primary healthcare systems so that care and services provided better meet consumer needs in a more efficient and cost effective manner.

**Mission:** To provide quality behavioral health care that promotes recovery and wellness, fosters resilience and supports self-determination and empowerment so that individuals serviced in our four-county region are successful in achieving their personal goals and dreams.

- Values:**
- Respect the diversity of our communities and the people we serve
  - Zero Tolerance for stigma
  - Coordinated and continuous care between and across healthcare systems and providers
  - Meaningful partnerships with consumers and community stakeholders
  - Learning organization disciplines of systems thinking, team learning, shared vision, personal mastery, and mental models
  - Data based decision making
  - Innovation and creativity
  - Provide the best quality services to the most people at the best cost.

## We Are Here for You

### **Customer Services:**

Each Community Mental Health (CMH) has a Customer Service Department with staff happy to help with the following:

- Explaining services and systems
- Understanding benefits or any problems relating to benefits, any charges, co-pays or fees
- Complaints or problems with received services
- Accessing transportation services needed for medically necessary services. This includes specialty services identified by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program
- Informing about service providers accepting new consumers

- Accessing information about the regional CMHPSM partners (annual reports, organizational charts, lists of board members, minutes, and meeting schedules)

**Customer Service hours are from 8:30 a.m. to 5:00 p.m. (apart from holidays) and evening by appointment.**

<u>County</u>	<u>Phone</u>	<u>Toll Free/24 Hour</u>	<u>TDD/TTY</u>
Lenawee	517-263-8905	800-664-5005	800-649-3777
Livingston	517-546-4126	800-615-1245	800-649-3777
Monroe	734-243-7340	800-886-7340	800-649-3777
Washtenaw	734-544-3050	800-440-7548	800-649-3777

### **Language Assistance**

For persons whom are deaf or have difficulty hearing have options:

- Call the **Michigan Relay Center (MRC)** at **7-1-1** to be linked to the phone number of the CMHPSM, CMH or service provider of your choice
- Call Customer Services at the **TTY** phone number **800-649-3777**. TTY is a tool to help persons communicate by typing messages back and forth instead of talking or listening. (TTY is required at both ends of the communication).
- If a sign language interpreter is needed, call Customer Service at **877-779-9707** to receive this free service. (Call soon so an interpreter can be made available).

For persons whom do not speak English:

- Call Customer Services at **877-779-9707** to receive free language interpreter services

### **Recovery and Resiliency**

“Mental health recovery is a journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her potential.”

Recovery is an individual journey that follows different paths and leads to different locations. Recovery is a process that we enter into and is a life-long attitude. Recovery is unique to each individual and can only truly be defined by the individual themselves. What might be recovery for one person may be only part of the process for another. Recovery may also be defined as wellness. The person centered planning process is used to identify the supports needed for individual recovery.

In recovery there may be relapses. A relapse is a challenge rather than a failure. A relapse can be overcome if it is prepared for and the tools and skills that have been learned throughout the recovery journey are used. It takes time and that is why recovery is a process that will lead to a future that holds days of pleasure and the energy to persevere through the trials of life.

**Resiliency** and development are the guiding principles for children with serious emotional disturbance. Resiliency is the ability to “bounce back” and is a characteristic important to nurture in children with serious emotional disturbance and their families. It refers to the individual’s ability to become successful despite challenges they may face throughout their life.

## Qualifying for Services

The CMHPSM serves persons with Medicaid insurance, or persons enrolled in the MIChild or Healthy Michigan Plan (HMP), or individuals who have no insurance and cannot pay for services. The CMHPSM refers most persons who have other insurance to agencies that are connected to their insurance group. Under special situations, some persons who have insurance will be served.

Michigan has a managed care delivery system for mental health and substance use disorder services. The State of Michigan Department of Health and Human Services (MDHHS) sets rules and regulations that we must follow. This includes the types of services that are provided and the criteria used to determine if someone qualifies to receive services.

Persons with Medicaid are guaranteed to get medically necessary services. Persons without insurance cannot be guaranteed services, if there is no money to provide services. The CMHPSM must provide services to as many people as possible within its available funds. Persons with Medicaid will not be put on a waiting list. Persons without Medicaid may be put on a waiting list, if the CMH does not have enough money to pay for the service, or if there are no openings for a recommended program.

In very rare cases, a CMH within the region may be able to help pay for services from an agency that does not have a contract with the CMH. In those cases, the CMH would approve services at that agency and agree to pay for those services. This only happens when a treatment need cannot be provided by agencies under current contract with the CMH. Access staff can help make arrangements.

### **Mental Health**

Each CMH is responsible for providing mental health services to people who:

- Live in the county where they are requesting services, AND
- Have Medicaid Insurance, OR
- Are enrolled in the MIChild Program, OR
- Healthy Michigan Plan Insurance
- Cannot afford the cost of services

To be eligible for services, a person must be an adult with a serious mental illness, a child or adolescent with a serious emotional disturbance, or a person of any age with a developmental disability.

### **Substance Use Disorder (SUD)**

The CMHPSM works with SUD Providers. They provide substance use disorder services to people who:

- Live in the county where they are requesting services, AND
- Have Medicaid Insurance, OR
- Are enrolled in the MIChild Program, OR
- Healthy Michigan Plan Insurance
- Cannot afford the cost of services

## Types of Services Available

The Michigan Department of Health and Human Services has a contract with the CMHPSM. In that contract, the Department of Health and Human Services defines different types and levels of services, depending on whether or not a person has Medicaid.

### For persons with Medicaid, Healthy Michigan Plan or MICHild:

- There is eligibility for a wide array of services.
- For a medically necessary service, a person cannot be put on a waiting list without consent.

### For persons without Medicaid:

- The list of required services to be given is not as large compared to the list for those who have Medicaid.
- The list of available services is explained in the section of this guide labeled, "MICHild or Those Who Don't have Medicaid and Cannot Afford to Pay for Services".
- If the CMH does not have enough money to pay for the service being recommended, or if there are no openings in a recommended program, a person may be put on a waiting list.
- In very rare cases, a CMH within the region may be able to help pay for services from an agency that does not have a contract with the CMH. In those cases, the CMH would approve services at that agency and agree to pay for those services. This only happens when you have a treatment need that cannot be provided by the agencies that currently contract with the CMH.
- Access staff may help you make these arrangements.

## Priority for Services

Some people receive priority for services. This means each CMH within the region must meet the needs of these groups first. After that happens, the CMH can fund services for other people who meet treatment criteria.

### Persons will get priority for mental health services:

- If s/he has no insurance and have the most severe forms of serious mental illness, serious emotional disturbance or developmental disability, or
- Are in an urgent or emergency situation.

### Persons will get priority for substance use disorder services:

- If she is pregnant and injects drugs
- If she is pregnant and a substance user
- If s/he inject drugs
- Parent(s) with a child removed from their home, or may soon be removed from their home, under the Michigan Child Protection Laws.

This region believes it is important to coordinate mental health, substance use disorder, and primary physical health care services in order to provide quality services. If a person receives services at the CMH, the region strongly encourages the person to give written consent for their medical doctor and

mental health staff, and/or substance use disorder staff, so they can talk with each other about treatment.

### Service Authorization

Services requested by a person must be authorized or approved by CMH. The CMH may approve all, some or none of the requests. A person will receive a written notice of a decision within 14 calendar days, after the person requested the service during person-centered planning, or within 3 business days, if the request requires a quick decision.

Any decision that denies a service request, or denies the amount, scope or duration of the service requested will be made by a health care professional with appropriate clinical expertise in treating the condition. Authorizations will be made according to medical necessity. If a person does not agree with a decision that denies, reduces, suspends or terminates a service, an appeal may be filed.

### Payment for Services

For persons enrolled in Medicaid, HMP or MIChild and meet the criteria for the specialty mental health and substance use disorder services, the authorized treatment will be covered and no fees will be charged. For a Medicaid beneficiary with a deductible (“spend-down”) as determined by the Michigan Department of Health and Human Services (MDHHS), s/he may be responsible for a portion of the service costs.

No one will be denied services because s/he cannot afford it. Persons will meet with a client accounts representative to review financial information. During the first appointment, an ability to pay will be established, based on the person’s income and family size. Fees will be assessed on a sliding scale made by the MDHHS. Any deductible or co-pay a person is responsible for will not exceed ability to pay. Ability to pay will be reviewed throughout the time services will be received. (This will be done to ensure services are affordable among the region). If a person disagrees with the amount asked to pay, s/he has the right to appeal the amount, or ask for it to be reduced. If a person wishes to make an appeal, s/he may call their local Customer Service department.

It is suggested to read the payment agreement regarding ability to pay. If there are any changes in your status, income, or insurance, please immediately contact the client accounts representative. If you do not provide the information needed to determine your ability to pay, or if you do not provide insurance information, you will be at risk for being charged the full amount for services.

Services will be provided only by persons approved by the CMH or Medicaid. The CMH will not pay for services received that have not been approved ahead of time, except for emergency mental health services. **If you are having a mental health emergency, go to your local or closest emergency room or call 911.** The CMH will be financially responsible for your emergency and urgently needed service, whether you are in the county you live in or outside of it. For more information regarding Emergency Services, please see the ***Crisis and Emergency Care*** section in this *Guide to Services*.

### For persons with Medicaid:

- The client accounts representative will verify the type of Medicaid.



- A deductible or “spend down” will be met before services are covered by Medicaid.
- A client accounts representative will answer your questions.

Private Insurance Coverage: If you have private insurance that pays for your local CMHSP services, the benefits will be used to cover the service cost. The charge for the deductible or co-pay will not exceed your Ability to Pay amount or actual cost of the service

Questions about deductibles and co-pays will be answered by the client accounts representative.

### Medical Necessity

Services authorized for treatment must be medically necessary. This means that the services provided are needed in order to assure there is appropriate assessment and treatment of a mental illness, developmental disability and/or substance use disorder.

Medical necessity also means that the amount (how much of a service you get), scope (who provides the service and how), and duration (how long the service will last) of your services are enough to meet those needs related to a mental illness, developmental disability and/or substance use disorder.

Services that are considered ineffective, not helpful, experimental, or inappropriate will not be approved.

### How to Get Services

For each county there is a central entry point for anyone seeking Mental Health and Substance Use Disorder Services. When you call Access you can also receive health information, referrals to community resources, and screening appointments for mental health and/or substance use disorder programs from an Access Professional.

You may call your Community Mental Health organization or your MHP about starting services or for information regarding service authorization. To get services or information about services, call the office in your county:

<u>Access</u>	<u>Phone</u>	<u>Toll Free/24 Hour</u>	<u>TDD/TTY</u>
Lenawee	517-263-8905	800-664-5005	800-649-3777
Livingston	517-546-4126	800-615-1245	800-649-3777
Monroe	734-243-7340	800-886-7340	800-649-3777
Washtenaw	734-544-3050	800-440-7548	800-649-3777
Dawn Farm	734-669-8265	800-440-7548	800-649-3777
Home of New Vision	734-975-1602	800-440-7548	800-649-3777

\*If you do not qualify for local CMH services, Access staff will assist you to find other community agencies who may be able to help.

Your needs may change throughout treatment. If this happens, staff will assist you to re-assess your plan of service and authorize changes in the plan.

Your input is important: If you disagree with a decision about:

- Eligibility to receive services and/or
- Amount and type of services authorized, you have the right to file an appeal.  
(Please refer to the *Due Process Rights* section in this *Guide to Services*).

## Crisis and Emergency Care

### **Emergency and After-Hours Access to Services**

A “mental health emergency” is when a person is experiencing symptoms and behaviors that can reasonably be expected in the near future to lead:

- S/he to harm self or another; or
- Risk of harm because of his/her inability to meet his/her basic needs; or
- Person’s judgment is so impaired that s/he is unable to understand the following:
  - 1) The need for treatment
  - 2) Their 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 per day and seven days a week, without prior authorization for payment of care).

\*If you have a **mental health emergency** you should seek **help right away by calling 911**.

\*At any time during the day or night call:

<u>Local CMH</u>	<u>Phone</u>	<u>Toll Free/24 Hour</u>	<u>TDD/TTY</u>
Lenawee CMH	517-263-8905	800-664-5005	800-649-3777
Livingston	517-546-4126	800-615-1245	800-649-3777
Monroe	734-243-7340	800-886-7340	800-649-3777
Washtenaw	734-544-3050	800-440-7548	800-649-3777

**Please note:** Depending on your insurances status, you may be billed and responsible for paying for health care services received in a hospital emergency room. Customer Services will answer questions about these bills.

### **Post-Stabilization Services**

After you receive emergency mental health care and your condition is under control, you may receive mental health services to ensure 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 to coordinate your post-stabilization services.

## Receiving Services

To make sure you receive quick services, the following will help you be prepared for your visit:

- Bring your Medicaid or insurance card and identification to each appointment
- If you have children, and they are not participating in service, staff cannot be responsible for watching children.
- For appointment cancellations and rescheduling, please call CMH at least 24 hours in advance
- A Supports Coordinator may be assigned to assist with your Person-Centered Treatment Planning. S/he will explain treatment options and authorize the agreed services

*Free sign language and/or language interpreter services are available by contacting Customer Services at 877-779-9707.*

### **Accessibility and Accommodations**

In accordance with federal and state laws, all CMH buildings and programs are required to be physically accessible to individuals with all qualifying disabilities. Any individual who receives emotional, visual, or mobility support from a service animal (such as a dog) will be given access, along with the animal, to all buildings and programs of the CMH.

*Contact Customer Services at 877-779-9707 for more information about accessibility or service/support animals*

If you need to request an accommodation on behalf of yourself, a family member or a friend, you may contact Customer Services at 877-779-9707. They will explain how to request it and will identify who is responsible for handling accommodation requests.

### **Person-Centered Planning**

The process used to make an individual plan of mental health supports, service, or treatment is called “Person- Centered Planning (PCP).” PCP is your right protected by the Michigan Mental Health Code. The process includes the following:

- It begins when you determine whom, beside yourself, you would like at the Person-Centered Planning meetings, including family members, friends and staff from your CMH.
- You will decide when and where the planning meetings will happen.
- You decide what assistance you need to participate in and understand the meetings.
- During planning you will be asked to identify your hopes and dreams. This will help to develop and achieve goals or outcomes. The people attending this meeting will help you decide what supports, services or treatment you need. They will also help you to decide the service provider(s), frequency of service, and location of services. Under federal and state laws you have a right to a choice of providers.
- After beginning services, you will be occasionally asked how you feel about the supports, services or treatment you are receiving and whether changes need to be made.
- You have the right at any time to ask for a new meeting, to discuss changing your plan of service.
- You have the right to “independent facilitation” for the planning process. This means you may request someone other than CMH staff to conduct the planning meetings. You have the right to choose from available independent facilitators.

- Children under the age of 18 with developmental disabilities or serious emotional disturbance also have the right to Person-Centered Planning. However, PCP must recognize the importance of the family and the fact that supports and services impact the entire family. The parent(s) or guardian(s) of the children will be involved in pre-planning and PCP using “family-centered practice” in the delivery of supports, services and treatment for their children.

### **Topics Covered during Person-Centered Planning**

Information about psychiatric advance directives, a crisis plan, and self-determination (see the descriptions below). You have the right to choose to develop all, any or none of these options.

#### **Psychiatric Advance Directive**

Adults have the right under Michigan law to a “**psychiatric advance directive.**” A psychiatric advance directive is a tool for making decisions before a crisis happens, in which you may become unable to make a decision about the kind of treatment you want or do not want. This lets other people, including family, friends, and service providers know what you want when you cannot speak for yourself. If you do not think you have received appropriate information regarding Psychiatric Advance Directives from your CMH, please contact Customer Services to file a grievance.

#### **Crisis Plan**

You have the right to develop a “**crisis plan.**” A crisis plan is intended to give direct care, if you begin to have problems managing your life or you become unable to make decisions and care for yourself. The crisis plan would give information and direction to others about what you would like done in the time of crisis. Examples are friends or relatives to be called, information about medication and medication reactions, care of children, pets, or bills.

#### **Self-Determination**

Self-determination is an option for payment of medically necessary services you might request, if you are an adult beneficiary receiving Michigan mental health services. It is a process that would help you to design and exercise control over your own life by directing a fixed amount of dollars that will be spent on your authorized supports and services, often referred to as an “individual budget.” You would also be supported in your management of service providers, if you choose to manage.

#### **Individual Treatment Plan Process for Consumers of Substance Use Disorder Services**

The service provider will help you develop a plan based upon an assessment of individual needs. The Individualized Treatment Plan must:

- Meet your needs
- Use clear and concise statements of the objectives you will be attempting to achieve
- Include a realistic time schedule for achieving your objectives.
- Define the received services, the therapeutic activities that you will be expected to participate in, and the order in which services will be provided.
- Include any referral for services you might need that are not available from the provider.
- The provider will review the plan with you on a regular basis and whenever there are changes to the plan.

## Service Array

### Mental Health Medicaid Specialty Supports and Services Descriptions

Note: If you are a Medicaid beneficiary and have a serious mental illness, serious emotional disturbance, developmental disability, or substance use disorder, you may be eligible for some of the Mental Health Medicaid Specialty Supports and Services listed below.

Before services start, you will take part in an assessment to determine, if you are eligible for services. The assessment will also identify the services that best meet your needs. Please note that not everyone is eligible. There are services that are not available to everyone we serve. If a service cannot help you, your CMH will not pay for it. Medicaid will not pay for services that are available to you from other community resources.

During the PCP process, CMH will help you determine the medically necessary services needed, as well as the amount, scope, and duration required. You will also be able to choose who provides your supports and services. You will receive an individual plan of service that provides all of this information.

In addition to meeting the medically necessary criteria, services listed below marked with an asterisk (\*) require a doctor's prescription.

Note: the Michigan Medicaid Provider Manual contains complete definitions of the following services as well as eligibility criteria and provider qualifications. The manual can be accessed at [http://www.michigan.gov/mdhhs/0,4612,7-132-2945\\_42542\\_42543\\_42546\\_42553-87572--,00.html](http://www.michigan.gov/mdhhs/0,4612,7-132-2945_42542_42543_42546_42553-87572--,00.html)

*Customer Service staff can help you access the Medicaid Provider Manual and/or information from it.*

**Assertive Community Treatment (ACT)** provides basic services and supports essential for people with serious mental illness to maintain independence in the community. An ACT team will provide mental health therapy and help with medications. The team may also help access community resources and supports needed to maintain wellness and participate in social, educational, and vocational activities. ACT may be provided daily for individuals who participate.

**Assessment** includes a comprehensive psychiatric evaluation, psychological testing, substance abuse screening, or other assessments to determine a person's level of functioning and mental health treatment needs. Physical health assessments outside of the scope of psychiatric care are not part of CMH service.

**\*Assistive Technology** includes adaptive devices and supplies that are not covered under the Medicaid Health Plan or by other community resources. These devices help individuals to better take care of themselves, or to better interact in the places where they live, work, and play.

**Behavior Treatment Review:** If a person's illness or disability involves behaviors that they or others who work with them want to change, their individual plan of services may include a plan that talks about the behavior. This plan is often called a "behavior treatment plan." The behavior treatment

plan is developed during Person-Centered Planning then approved and reviewed regularly by a team of specialists to ensure it is effective, dignified, and continues to meet the person's needs.

**Clubhouse Programs** are programs where members (consumers) and staff work side by side to operate the clubhouse and to encourage participation in the greater community. Clubhouse programs focus on fostering recovery, competency, and social supports, as well as vocational skills and opportunities.

**Community Inpatient Services** are hospital services used to stabilize a mental health condition in the event of a significant change in symptoms or in a mental health emergency. Community hospital services are provided in licensed psychiatric hospitals and in licensed psychiatric units of general hospitals.

**Community Living Supports (CLS)** are activities provided by paid staff that helps adults with either serious mental illness or developmental disabilities live independently and participate actively in the community. Community Living Supports may also help families who have children with special needs such as developmental disabilities or serious emotional disturbance.

**Crisis Interventions** are unscheduled individual or group services aimed at reducing or eliminating the impact of unexpected events on mental health and well-being.

**Crisis Residential Services** are short-term alternatives to inpatient hospitalization provided in a licensed residential setting.

**\*Enhanced Pharmacy** includes doctor-ordered nonprescription or over-the-counter items (such as vitamins or cough syrup) necessary to manage your health condition(s) when a person's Medicaid Health Plan does not cover these items.

**\*Environmental Modifications** are physical changes to a person's home, car, or work environment that are of direct medical or remedial benefit to the person. Modifications ensure access, protect health and safety, or enable greater independence for a person with physical disabilities. Note that other sources of funding must be explored before using Medicaid funds for environmental modifications.

**Family Support and Training** provides family-focused assistance to family members relating to and caring for a relative with serious mental illness, serious emotional disturbance, or developmental disabilities. "Family Skills Training" is education and training for families who live with and/or care for a family member who is eligible for the Children's Waiver Program.

**Fiscal Intermediary Services** help individuals manage their service and supports budget and pay providers if they are using a "self-determination" approach.

**Health Services** include assessment, treatment, and professional monitoring of health conditions that are related to or impacted by a person's mental health condition. A person's primary doctor will treat any other health conditions they may have.

**Healthy Michigan Plan** is an 1115 Demonstration project that provides health care benefits to individuals who are: aged 19-64 years; have income at or below 133% of the federal poverty level under the Modified Adjusted Gross Income methodology; do not qualify or are not enrolled in Medicare or Medicaid; are not pregnant at the time of application; and are residents of the State of Michigan. Individuals meeting Healthy Michigan Plan eligibility requirements may also be eligible for mental health and substance abuse services. The Michigan Medicaid Provider Manual contains complete definitions of the available services as well as eligibility criteria and provider qualifications. The Manual may be accessed at [http://www.michigan.gov/mdhhs/0,4612,7-132-2945\\_42542\\_42543\\_42546\\_42553-87572--,00.html](http://www.michigan.gov/mdhhs/0,4612,7-132-2945_42542_42543_42546_42553-87572--,00.html)

**Home-Based Services for Children and Families** are provided in the family home or in another community setting. Services are designed individually for each family and can include things like mental health therapy, crisis intervention, service coordination, or other supports to the family.

**Housing Assistance** is assistance with short-term, transitional, or one-time-only expenses in an individual's own home that his/her resources and other community resources could not cover.

**Intensive Crisis Stabilization** is another short-term alternative to inpatient hospitalization. Intensive crisis stabilization services are structured treatment and support activities provided by a mental health crisis team in the person's home or in another community setting.

**Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)** provides 24-hour intensive supervision, health and rehabilitative services, and basic needs to persons with developmental disabilities.

**Medication Administration** is when a doctor, nurse, or other licensed medical provider gives an injection, oral medication, or topical medication.

**Medication Review** is the evaluation and management of a person's mental health and other related conditions by a psychiatric provider (psychiatrist, psychiatric nurse practitioner, etc.) in order to provide treatment recommendations including medication prescribing, monitoring, and adjusting based on effects.

**Mental Health Therapy and Counseling for Adults, Children and Families** includes therapy or counseling designed to help improve functioning and relationships with other people.

**Nursing Home Mental Health Assessment and Monitoring** includes a review of a nursing home resident's need for and response to mental health treatment, along with consultations with nursing home staff.

**\*Occupational Therapy** includes the evaluation of an individuals' ability to do things in order to take care of themselves every day by an occupational therapist and treatments to help increase these abilities.

**Partial Hospital Services** include psychiatric, psychological, social, occupational, nursing, music therapy, and therapeutic recreational services in a hospital setting under a doctor's supervision. Partial hospital services are provided during the day – participants go home at night.

**Peer-Delivered and Peer Specialist Services** Peer-delivered services such as drop-in centers are entirely run by consumers of mental health services. They offer help with food, clothing, socialization, housing, and support to begin or maintain mental health treatment. Peer Specialist services are activities designed to help persons with serious mental illness in their individual recovery journey and are provided by individuals who are in recovery from serious mental illness. Peer mentors help people with developmental disabilities.

**Personal Care in Specialized Residential Settings** assists an adult with mental illness or developmental disabilities with activities of daily living, self-care, and basic needs while they are living in a specialized residential setting in the community.

**\*Physical Therapy** includes the evaluation of a person's physical abilities (such as the ways they move, use their arms or hands, or hold their body) by a physical therapist and treatments to help improve their physical abilities.

**Prevention Service Models** (such as Infant Mental Health, School Success, etc.) use both individual and group interventions designed to reduce the likelihood that individuals will need treatment from the public mental health system.

**Recovery Coach** who has lived experience in receiving services and/or supports for a substance use condition. They serve as a guide to initiate, achieve and sustain long-term recovery from addiction including medication assisted, faith based, 12 step and other pathways to recovery. Recovery coaches provide connections in navigating recovery supportive systems and resources including professional and non-professional services.

**Respite Care Services** provide short-term relief to the unpaid primary caregivers of people eligible for specialty services. Respite provides temporary alternative care, either in the family home or in another community setting chosen by the family.

**Skill-Building Assistance** includes supports, services, and training to help a person participate actively at school, work, volunteer, or community settings, or to learn social skills they may need to support themselves or to get around in the community.

**\*Speech and Language Therapy** includes the evaluation of a person's ability to use and understand language, communicate with others, or to manage swallowing or related conditions by a speech therapist. Therapy also includes treatments to help enhance speech, communication, or swallowing.

**Supports Coordination or Targeted Case Management:** A Supports Coordinator or Case Manager is a staff person who helps write an individual plan of service and makes sure the services are delivered. His or her role is to listen to a person's goals and to help find the services and providers



inside and outside the local community mental health services program that will help achieve these goals. A supports coordinator or case manager may also connect a person to resources in the community for employment, community living, education, public benefits, and recreational activities.

**Supported/Integrated Employment Services** provide initial and ongoing supports, services, and training at the job site to help adults who are eligible for mental health services find and keep paid employment in the community.

**Transportation** may be provided to and from a person's home in order for them to take part in a non-medical Medicaid covered service.

**Treatment Planning** assists the person and those of his/her choosing in the development and periodic review of the individual plan of services.

**TTY** is a tool which helps people who are deaf, hard of hearing or speech-impaired to use the phone to communicate by typing messages back and forth instead of talking or listening. (A TTY is required at both ends of the conversation in order to communicate).

**Wraparound Services for Children and Adolescents** with serious emotional disturbance and their families that includes treatment and supports necessary to maintain the child in the family home.

### Services for Only Habilitation Supports Waiver (HSW) and Children's Waiver Participants

Some Medicaid beneficiaries are eligible for special services that help avoid going to an institution for people with developmental disabilities or nursing home. These special services are called the Habilitation Supports Waiver and the Children's Waiver. People with developmental disabilities need to be enrolled in either of these waivers in order to receive these services. The availability of these waivers is very limited. People enrolled in the waivers have access to the services listed above as well as these listed here:

**Goods and Services** (for HSW enrollees) is a non-staff service that replaces the assistance staff would be hired to provide. This service, used in conjunction with a self-determination arrangement, provides assistance to increase independence, facilitate productivity, or promote community inclusion.

**Non-Family Training** (for Children's Waiver enrollees) is customized training for the paid in-home support staff who provide care for a child enrolled in the Waiver.

**Out-of-Home Non-Vocational Supports and Services** (for HSW enrollees) is assistance to gain, retain or improve in self-help, socialization, or adaptive skills.

**Personal Emergency Response Devices** (for HSW enrollees) help a person maintain independence and safety in their own home or in a community setting. These are devices are used to call for help in an emergency.

**Prevocational Services** (for HSW enrollees) include supports, services, and training to prepare a person for paid employment or community volunteer work.

**Private Duty Nursing** (for HSW enrollees) is individualized nursing service provided in the home, as necessary, to meet specialized health needs.

**Specialty Services** (for Children's Waiver enrollees) are music, recreation, art, or massage therapies that may be provided to help reduce or manage the symptoms of a child's mental health condition or developmental disability. Specialty services might also include specialized child and family training, coaching, staff supervision, or monitoring of program goals.

### Services for Persons with Substance Use Disorders

The substance use disorder treatment services listed below are covered by Medicaid and made available through the CMHPSM.

**Access, Assessment, and Referral (AAR)** determines the need for substance use disorder services and will assist in getting to the right services and providers.

**Outpatient Treatment** includes therapy/counseling for the individual and family/group therapy in an office setting.

**Intensive/Enhanced Outpatient (IOP or EOP)** is a service that provides more frequent and longer counseling sessions each week and may include day or evening programs.

**Medication Assisted Treatment** is provided to people who have heroin or other opiate dependence. The treatment consists of opiate substitution monitored by a doctor as well as nursing services and lab tests. This treatment is usually provided along with other substance abuse outpatient treatment.

**Sub-Acute Detoxification** is medical care in a residential setting for people who are withdrawing from alcohol or other drugs.

**Recovery Coach** who has lived experience in receiving services and/or supports for a substance use condition. They serve as a guide to initiate, achieve and sustain long-term recovery from addiction including medication assisted, faith based, 12 step and other pathways to recovery. Recovery coaches provide connections in navigating recovery supportive systems and resources including professional and non-professional services.

**Residential Treatment** is intensive therapeutic services which include overnight stays in a staffed licensed facility.

If you receive Medicaid, you may be entitled to other medical services not listed above. Services necessary to maintain your physical health are provided or ordered by your primary care doctor. If you receive CMH services, your local CMH program will work with your primary care doctor to coordinate your physical and mental health services. If you do not have a primary care doctor, your local CMH services program will help you find a doctor.

Note: **Home Help Program** is another service available to Medicaid beneficiaries who require in-home assistance with activities of daily living, and household chores. In order to learn more about this service you may call the local county **Michigan Department of Health and Human Services** number below or contact Customer Services for assistance.

<u>County</u>	<u>Phone Number</u>	<u>TDD Number</u>
Lenawee	517-264-6300	517-263-0607
Livingston	517-548-0200	800-649-3777
Monroe	734-243-7200	800-649-3777
Washtenaw	734-481-2000	734-481-2119

### Services for Persons with Autism Spectrum Disorder

Behavioral Health Treatment (BHT) is a special group of services for Persons under 21 year old with Autism Spectrum Disorder (ASD). These services are available for Medicaid recipients who meet needs based criteria per the Michigan Medicaid Provider Manual.

**Behavioral Assessment** help to understand the behavior in the person with ASD. These assessments are used in the formation of ongoing treatment. The assessments are completed by a Board Certified Behavioral Analyst (BCBA).

**Behavioral Observation and Direction** is a service to provide supervision for the BT. The BCBA observes face-to-face the interactions of the BT and the client. This observation allows the BCBA to make corrections to the BT's interactions with the child.

**Behavioral Intervention** is a set of evidence-based treatments including Applied Behavioral Analysis. The techniques are varied based on the age and functioning level of the individual. The plan for these behavioral services are created and maintained by a BCBA. The services are carried out by a Behavior Technician (BT).

### Medicaid Health Plan Services

If you are enrolled in a Medicaid Health Plan, the following kinds of health care services are available to you when your medical condition requires them.

- Ambulance
- Chiropractic
- Doctor visits
- Family planning
- Health check ups
- Hearing aids
- Hearing and speech therapy
- Home Health Care
- Immunizations (shots)
- Lab and X-ray
- Nursing Home Care

- Medical supplies
- Medicine
- Mental health (limit of 20 outpatient visits)
- Physical and Occupational therapy
- Prenatal care and delivery
- Surgery
- Transportation to medical appointments
- Vision

If you already are enrolled in one of the Medicaid health plans listed below, you can directly contact the health plan for more information about the services listed above. If you are not enrolled in a health plan or do not know the name of your health plan, you can contact Customer Services for assistance.

### **Medicaid Health Plans**

Aetna Better Health of Michigan  
 1333 Gratiot Avenue, Suite 400  
 Detroit, MI 48207  
 1-866-316-3784

Blue Cross Complete  
 2311 Green Rd.  
 Ann Arbor, MI 48105  
 1-800-228-8554

McLaren Health Plan  
 G-3245 Beecher Rd.  
 Flint, MI 48532  
 1-888-327-0671

Midwest Health Plan  
 4700 Schaefer Rd.  
 Dearborn, MI 48126  
 1-888-654-2200

Meridian Health Plan of Michigan  
 777 Woodward Ave., Suite 600  
 Detroit, MI 48226  
 1-888-437-0606

Molina Healthcare of Michigan  
 100 W. Big Beaver Road, Suite 600  
 Troy, MI 48084  
 1-888-898-7969

United Healthcare Community Plan  
 P.O. Box 2127  
 Southfield, MI 48075-4602  
 1-800-903-5253

## MIChild or Those Who Do Not Have Medicaid and Cannot Afford To Pay for Services

### **Persons with Serious and Persistent Mental Illness and Children and Adolescents with Serious Emotional Disturbance**

People without insurance may receive the following services, if the CMH has enough funds to provide medically necessary services:

- Assessment

- Development of a Person-Centered Plan
- Planning, linking, coordinating, follow-up, and monitoring to assist an individual in gaining access to services
- Specialized training, treatment, and support, including therapeutic clinical interactions, socialization, adaptive, and coping skill training, health and rehabilitative services, and pre-vocational and vocational services
- Recipient rights
- Mental health advocacy
- Prevention

### **Persons with Developmental Disability**

People without insurance may receive the following services, if the CMH has enough funds to provide medically necessary services:

- Assessment
- Development of a Person-Centered Plan
- Planning, linking, coordinating, follow-up, and monitoring to assist an individual in gaining access to services
- Specialized training, treatment and support, including therapeutic clinical interactions, socialization, adaptive skill, and coping skill training, health and rehabilitative services, and pre-vocational and vocational services
- Recipient rights
- Mental health advocacy
- Prevention

### **Substance Use Disorder Services**

Anyone asking for substance use disorder treatment, must receive an assessment. The assessment includes the American Society of Addiction Medicine Patient Placement Criteria to determine, if you are eligible for medically necessary services.

Once determination eligibility for services occur, an Individual Treatment Plan is developed. The plan will list your eligible services.

People without insurance may receive the following services, if the CMH has enough funds to provide the medically necessary service:

- Outpatient treatment
- Intensive outpatient treatment
- Detoxification Residential Services
- Medication Assisted Treatment (Methadone, etc.)
- Prevention

People with MIChild Insurance may receive the following substance use disorder services, if there are enough funds to provide these medically necessary services:

- Outpatient treatment
- Residential treatment
- Inpatient treatment

- Laboratory and pharmacy

### **Coordination of Care**

Being able to coordinate with all of your treating health care providers improves your chance for recovery, symptom relief, and improved functioning. To enhance service quality, the CMHPSM wants to coordinate your care with other medical care providers. If you are also receiving substance use disorder services, it is recommended that your mental health care be coordinated with those services. If you do not have a primary care doctor, contact Customer Services and staff will assist in getting a medical provider. You are encouraged to sign a "Release of Information" among your health care providers, so that health information can be shared to coordinate services. Note: You are able to set limits of your choice when releasing or exchanging information.

### **Confidentiality and Family Access to Information**

You have the following rights:

- Your mental health treatment kept private
- For persons receiving substance use disorder services, there is confidentiality specific rights as it relates to those services
- Ability to look at your own clinical records
- If there is something that you disagree with or do not like in your clinical records, you may add a formal written statement to your record
- Information about you can only be given to others with your permission. However, there are times when your information is shared in order to coordinate your treatment or when it is required by law

### **Family Members**

- Have the right to provide information about you to the CMH and/or CMHPSM
- The CMHPSM may not give information about you to a family member without a Release of Information signed by you
- For minor children under the age of 18 years, parents are provided information about their child and must sign a release of information to share their child's information with others

### **Privacy Practices:**

- Under HIPAA (Health Insurance Portability and Accountability Act), you will be provided with an official Notice of Privacy Practices from your CMH services program.
- This notice will tell you all the ways that your information can be used or disclosed. It will also include a listing of your rights provided under HIPAA and how you can file a complaint, if you feel your right to privacy has been violated.

### **Confidential Information About You May be Released:**

- When you, your guardian, or your parent (if you're a minor) signs a Release of Information
- To obtain benefits for you or to get paid for treatment costs
- If you die and your spouse or other close relative needs the information to apply for and receive benefits.

- If you are going to harm yourself and/or another person. In this case, staff may have to tell the police and the person you threatened to harm.
- If staff learns of or suspects that child abuse or neglect is happening. In this case, a report must be made to Children’s Protective Services or local law enforcement.
- If staff suspects or learns that a vulnerable adult is being abused or neglected, Adult Protective Services must be called
- If the information is needed for research or statistical purposes – Your identifying information will still be protected

**Accessing your records**

- CMH keeps a record of your received care. You have the right to see your record. You or your legal representative may ask to see or get a copy of all or part of your record. Your request must be in writing. (There may be a charge for the cost of copying).
- If you are an adult and you do not have a guardian, information put in your record after March 28, 1996, may not be withheld from you.
- If you are denied access to your record, you, or someone on your behalf, may appeal the decision. Contact Customer Services at 877-779-9707.
- If you or your legal representative believes your record contains incorrect information, you or your representative may do the following:
  - Request an amendment or correction to your record
  - Place a statement in your record. ( You may not remove what is already in the record)

\*Additional information regarding rights to privacy and confidentiality is available by calling your local Rights Officer. If you think your confidentiality rights were violated, you may call the local Recipient Rights Office. The phone numbers are provided below.

**Recipient Rights Offices**

<u>County</u>	<u>Phone</u>	<u>Toll Free/24 Hour</u>	<u>TDD/TTY</u>
Lenawee	517-263-8905	800-664-5005	800-649-3777
Livingston	517-546-4126	800-615-1245	800-649-3777
Monroe	734-243-7340	800-886-7340	800-649-3777
Washtenaw	734-544-3050	800-440-7548	800-649-3777

**Recipient Rights**

Every person who receives public mental health services has certain rights. The Michigan Mental Health Code protects some rights which include:

- The right to be free from abuse and neglect
- The right to confidentiality
- The right to be treated with dignity and respect
- The right to treatment suited to condition

More information about your rights is in the booklet titled “Your Rights”. You will be given this booklet and have your rights explained to you when you first start services and then, once per year. You can also ask for this booklet at any time. You may file a Recipient Rights complaint (orally or by writing) at any time, if you think staff violated your rights.

If you receive substance use disorder services, you have rights protected by the Public Health Code. These rights will also be explained to you when you start services and then once per year. You can find more information about your rights while receiving substance use disorder services in the “Know Your Rights” pamphlet.

You may contact your local CMH to talk with a Recipient Rights Officer with any questions you may have about your rights or to get help to make a complaint. Customer Services can also help you make a complaint. You can contact the Office of Recipient Rights or Customer Service at 877-779-9707.

### **Freedom from Retaliation**

If you use public mental health or substance use disorder services, you are free to exercise your rights and to use the rights protection system without fear of retaliation, harassment, or discrimination. In addition, under no circumstances will the public mental health system use seclusion or restraint as a means of coercion, discipline, convenience, or retaliation.

## **Grievance and Appeals Processes**

### **Grievances**

If you are unsatisfied with your services, supports, or the staff who provide them, you have the right to file a “grievance.” You can file a grievance at any time by calling, visiting, or writing to Customer Services. Assistance with the filing process is available by contacting Customer Services. You will be given detailed information about grievance and appeal processes when you first start services and then once per year. You may ask for this information at any time by contacting your local Customer Services office. (Family members may also file a grievance or complaint). If you do not get an answer about your grievance in 60 days, you can then file an appeal.

### **Appeals**

You will be given notice when a decision is made that denies your request for services or reduces, suspends, or terminates services you already receive. You have the right to file an “appeal” when you do not agree with the decision. There are two ways you can appeal these decisions. There are also time limits on when you can file an appeal once you receive a decision about your services. You may:

- Ask for a “Local Appeal” by contacting Customer Service at 877-779-9707.
- Ask for a Local Dispute Resolution Process (a local appeal) by calling local Customer Service department. You have 45 days to ask for a local appeal.
- Ask for a Second Opinion, if you disagree with the decision to deny hospitalization. You have 30 days to ask for a second opinion.
- If you are a Medicaid consumer, you can ask for a Medicaid Fair Hearing before an administrative law judge (a state appeal). You have 90 days to request a fair hearing.



- Or, if you do not have Medicaid, you can ask for a review of the Department of Community Health and Human Services Alternative Dispute Resolution Process (a state appeal). This can only be done after you have done the Local Dispute Resolution Process and you do not agree with the written results of that local appeal.

Your appeal will be completed quickly. You will have the chance to provide information or have someone speak for you regarding the appeal. You may ask for assistance from Customer Services to file an appeal.

You may continue to receive the service, in most circumstances, until we receive the Judge’s hearing decision. If you keep receiving the service because you asked for a hearing, you may be held liable for the cost of those benefits, if the hearing decision upholds the CMH’s action, if you withdraw your hearing request, or if you, or the person asked to represent you, do not attend the hearing.

## Provider List

The Community Mental Health Partnership of Southeast Michigan has a complete Provider Directory. A listing of all available providers, their locations, telephone numbers, and languages spoken can be found online at [www.cmhpsm.org](http://www.cmhpsm.org) or your local CMH’s website. If you do not have access to the internet at your home, free internet service is available at libraries. You can also receive a paper copy of the provider listing any time by contacting Customer Service at 877-779-9707.

<u>County</u>	<u>Phone</u>	<u>Toll Free/24 Hour</u>	<u>TDD/TTY</u>
Lenawee	517-263-8905	800-664-5005	800-649-3777
Livingston	517-546-4126	800-615-1245	800-649-3777
Monroe	734-243-7340	800-886-7340	800-649-3777
Washtenaw	734-544-3050	800-440-7548	800-649-3777

## Important Things to Know

To stop services: If you no longer wish to receive services from your CMH you may sign a form called the Revocation of Consent form. This will stop your services at CMH. If you decide you need services from us in the future, please contact your local CMH.

If you have a complaint about services, you may go to our accrediting body to voice your concern. If you have questions about how to file your complaint, you may contact the Joint Commission in one of the following ways:

- Phone: 800-994-6610, 8:30a.m. - 5:00 p.m., Central Time, Monday through Friday.
- Email: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)
- Mail:  
Office of Quality Monitoring to Joint Commission  
One Renaissance Blvd  
Oakbrook Terrace, IL 60181

You have a right to receive information about available treatment options and other choices in a way or form that you can understand.

Sign language and/or interpreter services are available by contacting Customer Services at 877-779-9707. Sign language and/or interpreters are available at no cost to you.

If you have a disability that affects your ability to hear or read, we can help you. For example, we can give you a sign language interpreter or written materials that are in large print at no cost to you. Please ask staff if you need help. You may also contact Customer Services at 877-779-9707.

No one may be denied services because they cannot afford to pay for services. Your local CMH uses a “sliding scale” fee policy based on your ability to pay. There are no co-pays or deductibles. You will be asked to provide financial information. Your information will be kept confidential. If you disagree with the amount you are asked to pay, you have the right to appeal the amount or ask that it be reduced.

Your local CMH will do everything possible to make sure that you are comfortable with the person who is your primary treatment staff, (for example, your case manager or your therapist). If you want to change your primary treatment staff, you have the right to ask for a change. First speak with your primary treatment staff supervisor or contact Customer Services. We will try to honor your choice and make sure you have a good working relationship with your treatment provider. We may need to limit your right to change, if it would disrupt services or if another provider is not available.

Plans for completing services (also known as discharge planning) begins when your Individualized Treatment Plan is done. You may stop services at any time, unless you are under a court order to receive treatment. Before you decide to stop services, talk with your primary treatment staff. A discharge plan can be developed that will make it easier to start services again, if you change your mind later. Staff can also help you find supports that may be available in the community.

If you find that you need a service, support, or specialty service that is not part of the network benefit package, talk with your primary staff person. Your needs will be reviewed to see, if anything can be arranged. If you are not happy with how these services have been set up for you, you may use one or more of the appeal and grievance methods that are described in the Grievance and Appeals Section of this guide.

We believe it is very important to coordinate your mental health and substance use disorder treatment with other important areas of your life. This could include your family, friends, work, school, and social groups. Your primary treatment staff will work very closely with these groups or people if you give written consent to share information with them. This will provide you with the best service possible.

If you are interested in getting more information about the administrative structure or policies and procedures of your local CMH, please contact the Customer Service Department.

You have the right to have a Durable Power of Attorney for Health Care, a Do-Not-Resuscitate Order according to Michigan Law, and/or a Crisis Plan. These are often called Medical Advanced Directives and Psychiatric Advanced Directives. If you have a guardian appointed by the Probate Court, Michigan law does not allow you or your guardian to have these advanced directives.

While you are receiving services, changes in Federal, State, or local laws or policies could affect the services you are receiving. If you have a question or want information about changes that are happening or being planned, call the Customer Service Department.

## How You Can Get Involved

There are many ways you can get involved and have your voice heard in how we provide programs and services. One way you can get involved in our four-county region is through the Regional Consumer Advisory Committee.

### **Regional Consumer Advisory Committee**

The Community Mental Health Partnership of Southeast Michigan also has a Regional Consumer Advisory Committee (RCAC) representing all four counties. The RCAC is a committee consisting of board appointed consumers from each county within the region. This committee is responsible for providing input, assistance, and feedback on the provision of service, policy development, and many other consumer related activities of the region. For further information about the RCAC and/or other ideas on how you can be involved in your county, contact your local Customer Service department for further information.

## Advocacy Groups

Below is a list of agencies that can also provide information about your benefits, rights, and services. Some of these agencies can help you advocate for yourself. Some of these agencies/groups have ways that you can get involved.

National Alliance on Mental Illness (NAMI)  
921 N. Washington Ave.  
Lansing, MI 48906  
(517) 485-4049  
(800) 331-4264  
[www.namimi.org](http://www.namimi.org)

The ARC Michigan  
1325 S. Washington Ave.  
Lansing, MI 48933  
(517) 487-5426  
(800) 292-7851  
[www.arcmi.org](http://www.arcmi.org)

Association for Children's Mental Health (ACMH)  
6017 W. St. Joseph Hwy., Suite 200  
Lansing, MI 48917  
(517) 372-4016  
[www.acmh-mi.org](http://www.acmh-mi.org)

Michigan Disability Rights Coalition  
3498 E. Lake Lansing Rd, Suite 100  
East Lansing, MI 48823  
(800) 760-4600  
[www.copower.org](http://www.copower.org)

Michigan Protection and Advocacy Services

PARENT HELPLINE

4095 Legacy Parkway, Suite 500  
Lansing, MI 48911  
(517) 487-1755  
(800) 288-5923  
[www.mpas.org](http://www.mpas.org)

Toll Free, 24 hours – 7 days a week  
Confidential and anonymous  
(855) 427-2736  
[www.nationalparenthelpline.org](http://www.nationalparenthelpline.org)

United Cerebral Palsy – Michigan  
4970 Northwind Dr., Suite 102  
East Lansing, MI 48923  
(517) 203-1200  
(800) 828-2714  
[www.ucpmichigan.org](http://www.ucpmichigan.org)

(Please contact your local Customer Service Department for meeting dates and times).

## MENTAL HEALTH GLOSSARY

**Access** — The entry point to the prepaid inpatient health plan (PIHP), sometimes called an “access center,” where Medicaid beneficiaries call or go to request mental health services.

**Amount, Duration, and Scope** — Terms to describe how much, how long, and in what ways the Medicaid services that are listed in a person’s individual plan of service will be provided.

**Appeal** — A request for a review of an adverse action. An adverse action is any time your services are denied or any time services you already have are reduced, suspended, or ended.

**Beneficiary** — An individual who is eligible for and enrolled in the Medicaid program in Michigan.

**CMHSP** — An acronym for Community Mental Health Services Program. There are 46 CMHSP’s in Michigan that provide services in their local areas to people with mental illness and developmental disabilities. May also be referred to as CMH.

**CMHPSM** — An acronym for the Community Mental Health Partnership of Southeast Michigan Prepaid Inpatient Health Plan. This partnership includes Lenawee, Livingston, Monroe, and Washtenaw Counties.

**Deductible (or Spend-Down)** — A term used when individuals qualify for Medicaid coverage even though their countable incomes are higher than the usual Medicaid income standard. Under this process, the medical expenses that an individual incurs during a month are subtracted from the individual’s income during that month. Once the individual’s income has been reduced to a state-specified level, the individual qualifies for Medicaid benefits for the remainder of the month. Medicaid applications and deductible determinations are managed by the Michigan Department of Health and Human Services - Independent of the PIHP service system.

**Developmental Disability** — As defined by the Michigan Mental Health code means either of the following: (a) If applied to a person older than five years, a severe chronic condition that is attributable to a mental or physical impairment or both, and is manifested before the age of 22 years; is likely to continue indefinitely; and results in substantial functional limitations in three or more areas of the following major life activities: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and reflects the need for a combination and sequence of special, interdisciplinary, or generic care, treatment or other services that are of lifelong or extended duration. (b) If applied to a minor from birth to age five, a substantial developmental delay or a specific congenital or acquired condition with a high probability of resulting in a developmental disability.

**Eligible Minor** — An individual who is less than 18 years of age who is recommended in the written report of a multi-disciplinary team under rules formerly made public by the Department of Education to be classified as either severely mentally impaired or severely multiply impaired.

**Emergency Situation** — A condition or situation in which an adult or child is experiencing a crisis and one of the following applies;

- The individual can reasonably be expected in the near future to physically injure himself/herself or another individual either intentionally or unintentionally.
- The individual is unable to provide himself/herself with food, clothing, shelter, or to attend to basic physical activities such as eating, toileting, bathing, grooming, dressing, or ambulating and this inability may lead in the near future to harm to the individual or another individual.
- The individual's judgment is so impaired that he or she is unable to understand the need for treatment and, in the opinion of the mental health professional, his or her continued behavior as a result of mental illness, developmental disability, or emotional disturbance can reasonably be expected in the near future to result in physical harm to the individual or another.
- It is not an emergency if safety can be assured and the situation can be handled during regular business hours.

**Fair Hearing** — A state level review of beneficiaries' disagreements with CMHSP or PIHP denial, reduction, suspension, or termination of Medicaid services. State administrative law judges who are independent of the Michigan Department of Health and Human Services perform the reviews.

**Grievance** — A complaint filed by a consumer or his or her representative regarding any adverse action or any practice of the managed care organization that has an impact on the consumer's access to, satisfaction with, or quality of services or treatment.

**Health Insurance Portability and Accountability Act of 1996 (HIPAA)** — This legislation is aimed, in part, at protecting the privacy and confidentiality of patient information. "Patient" means any recipient of public or private health care, including mental health care services.

**Healthy Michigan Plan** – An 1115 Demonstration project that provides health care benefits to individuals who are: aged 19-64 years; have income at or below 133% of the federal poverty level under the Modified Adjusted Gross Income methodology; do not qualify or are not enrolled in Medicare or Medicaid; are not pregnant at the time of application; and are residents of the State of Michigan. Individuals meeting Healthy Michigan Plan eligibility requirements may also be eligible for mental health and substance abuse services.

**Legal Representative** — A court-appointed guardian or a parent who has legal custody of a minor.

**MDHHS** — An acronym for Michigan Department of Health and Human Services. This state department, located in Lansing, oversees public-funded services provided to people with mental illness, developmental disabilities, and substance use disorders in local communities and state facilities.

**Medicaid Enrollee** — An individual who is covered by Medicaid and who is receiving services from a community mental health managed care plan.

**Medically Necessary** — A term used to describe one of the criteria that must be met in order for a beneficiary to receive Medicaid services. It means that the specific service is expected to help the beneficiary with his/her mental health, developmental disability, substance use, or any other medical

condition. Some services assess needs and some services help maintain or improve functioning. PIHP's are unable to authorize or pay for provide services that are not determined to be medically necessary.

**Michigan Mental Health Code** — The state law that governs public mental health services provided to adults and children with mental illness, serious emotional disturbance, and developmental disabilities by local community mental health services programs and in state facilities.

**MiChild** — A Michigan health care program for low-income children who are not eligible for the Medicaid program. This is a limited benefit. Contact Customer Services for more information.

**Person Centered Planning** — A treatment and supports planning process to assist an individual in identifying and planning for his or her current and future needs and desires. All people receiving mental health services are entitled to receive Person Centered Planning.

**PIHP** — An acronym for Prepaid Inpatient Health Plan. A PIHP is an organization that manages Medicaid mental health, developmental disabilities, and substance use disorder services in their geographic area under contract with the State. There are 10 PIHPs in Michigan and each one is organized as a Regional Entity or a Community Mental Health Services Program according to the Mental Health Code.

**Psychiatric Hospital** — A facility that provides inpatient diagnostic and therapeutic services 24 hours a day. This service is for persons who are not safe in other environments due to acute mental illness. Hospital stays may be as short as 24 hours. After discharge, treatment will be arranged with the local community mental health provider.

**Recovery** — A journey of healing and change allowing a person to live a meaningful life in a community of their choice, while working toward their full potential.

**Resiliency** — The ability to “bounce back” is an important characteristic to nurture in children with serious emotional disturbance and their families. It refers to the individual's ability to become successful despite challenges they may face throughout their life.

**Responsible Party** — The consumer, parent, or guardian who is responsible for payment of any fees associated with the services provided.

**Specialty Supports and Services** — A term that means Medicaid-funded mental health, developmental disabilities, and substance use disorder supports and services that are managed by the pre-paid inpatient health plans.

**Serious Emotional Disturbance (SED)** — Defined by the Michigan Mental Health Code as a diagnosable mental, behavioral, or emotional disorder affecting a child that exists or has existed during the past year for a period of time sufficient to meet diagnostic criteria specified in the most recent Diagnostic and Statistical Manual of Mental Disorders; and has resulted in functional impairment that substantially interferes with or limits the child's role or functioning in family and/or school or community activities.

**Serious Mental Illness** — Defined by the Michigan Mental Health Code as a diagnosable mental, behavioral, or emotional disorder affecting an adult that exists or has existed within the past year for a period of time sufficient to meet diagnostic criteria specified in the most recent Diagnostic and Statistical Manual of Mental Disorders; and that has resulted in functional impairment that substantially interferes with or limits one or more major life activities.

**Substance Use Disorder (or substance abuse)** — Defined by the Michigan Public Health Code as the drinking alcohol or use of other (legal and non-legal) drugs at dosages that place an individual's social, economic, psychological, and physical welfare in potential hazard or to the extent that an individual loses the power of self-control as a result of the use of alcohol or drugs, or while habitually under the influence of alcohol or drugs, endangers public health, morals, safety, or welfare, or a combination thereof.

**Urgent Situation** — A situation in which the individual is determined to be at risk of experiencing an emergency situation in the near future if he or she does not receive treatment or care.





## Lenawee Community Mental Health Authority

Welcome to Lenawee Community Mental Health Authority (LCMHA). We are here to serve you. We hope this information is helpful for you in making good decisions about the care and services you receive.

### **Mission**

To promote positive outcomes by creating a path to resilience, recovery, wellness and self-determination.

### **Values**

We believe in the importance of:

- Ensuring priority is given to individuals with the most severe forms of mental illness, emotional disturbance, developmental disabilities, and substance use disorders
- Community education, prevention, and consultation with our collaborative partners
- The value of a community that supports the needs and abilities of all individuals who reside there
- All people whom we come in contact with feel welcomed, understood, respected, and valued
- Offering a comprehensive array of services and supports to ensure improved health and well-being of the whole person
- Being accountable to consumers, funding sources, regulatory bodies, and the community
- Conducting ourselves with integrity, respect, and in an ethical manner
- A community that feels a responsibility to assist individuals in discovering their value and contribution to society

### **Agency Information**

#### **To Call Us**

- Phone Number: 517-263-8905
- TDD/TTY Phone Service: 800-649-3777
- Executive Director: Sandy Keener
- Medical Director: Dr. Moina Hassan

#### **Emergency Services (Calls are accepted 24 hours a day 7 days a week):**

- Access Team: 517-263-8905 or 800-664-5005

**To Write Us**

Attention: Customer Services  
Lenawee Community Mental Health Authority  
1040 South Winter Street, Suite 1022  
Adrian, MI 49221

Please include your name, address, phone number, Medicaid number (if you are a Medicaid recipient), as well as other insurance information.

**Agency Website:** <http://www.lcmha.org>

**To Visit Our Offices**

Lenawee Community Mental Health Authority  
1040 S. Winter Street (First Floor)  
Adrian, MI 49221

Please note: Our agency building located near the HOPE Community Center in the Lenawee County Human Services Building

**Office Hours**

- Regular business hours are Monday through Friday from 8:30 a.m. to 5:00 p.m.
- During business hours, a receptionist will direct your call to appropriate staff.
- After regular business hours, your call will be automatically directed to Emergency Services staff.

**Emergency Services**

- Available 24 hours a day, 7 days a week to all adults and children of Lenawee County experiencing urgent situations.
- Service is always available by calling 517-263-8905 or 1-800-664-5005.

**How to Access Services in Lenawee County**

- Please call and ask to speak with an Access Services professional who will help you decide, if mental health services are what you need and how we can help you.

**Substance Use Disorder Services**

- The Community Mental Health Partnership of Southeast Michigan (CMHPSM) believes in the Recovery Oriented Systems of Care (ROSC). This model is designed to build an array of services that can be made available to individuals based on their readiness for change and medical necessity.
- Lenawee residents shall call 517-263-8905.

**Provider List**

- You may obtain a complete provider list by contacting Customer Service at 517-263-8905.

## **Financial Responsibility for Mental Health Services**

- Please see “Payment for Services” in the regional section of this manual for specific information about any financial responsibility for services.

## **Accommodations**

- Our offices and sites are barrier free.
- If you need additional assistance, please let us know.
- English is the primary language spoken by our staff. Interpreters for other languages, including Spanish and American Sign Language, are available upon request at no cost.

## **Transportation**

- If you are enrolled in a Medicaid Health Plan, transportation to medical appointments is available.
- For assistance, call your Medicaid Health Plan or Customer Services 517-263-8905 or 800-664-5005.

## **Customer Service Hours**

- Customer Services will answer your questions or concerns Monday through Friday.
- Business hours are from 8:30 a.m. to 5:00 p.m. (Evening hours are available by appointment)
- Call Customer Service at 517-263-8905 or 800-664-5005.

## **Recipient Rights**

- If you have questions about your rights or you want to make a complaint, including a confidentiality complaint, call the Office of Recipient Rights. To speak with a rights officer, request a complaint form, or to get more help/information, please call:

Office of Recipient Rights  
1040 S. Winter Street, Suite 1022  
Adrian, MI 49221  
517-263-8905 or 800-664-5005

## **Consumer Action Committee**

- The mission of the **LCMHA Consumer Action Committee** serves to fully integrate consumers and their families into decision-making processes throughout the Lenawee Community Mental Health Authority.
- The committee is made up of people receiving mental health services, substance use disorder services, developmental disability services, LCMHA board members, and staff appointed by the LCMHA Board.
- For more information or to become a participant on the committee, please call Customer Services:

LCMHA Consumer Action Committee  
1040 S. Winter St. Suite 1022  
Adrian, MI 49221  
517-263-8905



## Livingston County Community Mental Health Authority

Welcome to Community Mental Health Services of Livingston County (LCCMHA). We are here to serve you. We hope this information is helpful for you in making good decisions about the care and services you receive.

### **Mission Statement**

Our mission is to build resilience, facilitate recovery, and enhance self-reliance for people challenged by a mental illness, developmental disability, or an emotional disturbance.

### **Vision Statement**

Our vision is for a more rewarding life in the community for everyone.

### **Service Values**

- Dignity and Respect
- Easy Access to Service
- Collaboration
- Responsiveness
- Building and Creating Support Networks
- Resource Management
- Community Integration
- Continuous Improvement

### **Agency Information**

#### **To Call Us**

- Phone number: 517-546-4126 or 1-800-615-1245
- Fax number: 517-546-1300
- Executive Director: Constance Conklin
- Medical Director: Dr. Frank X. Colligan, M.D.

#### **To Write Us**

Attention: Customer Service  
Community Mental Health Services of Livingston County  
2280 East Grand River  
Howell, MI 48843

Please include your name, address, phone number, Medicaid number (if you are a Medicaid recipient), as well as, other insurance information.

**Website:** <http://www.cmhliv.org>.

### **To Visit Our Offices**

- Our main administrative office is located at 2280 East Grand River, Howell, MI 48843
- Our other service locations are at the following sites:

#### **2280 Building**

2280 East Grand River  
Howell, MI 48843  
517-546-4126  
1-800-615-1245  
Fax: 517-546-1200

Service site for the following programs:

- Intake and Emergency Service
- Substance Abuse Access Services
- Medication Clinic
- Outpatient Therapy
- Programs for People with Mental Illness or Developmental Disabilities

Office Hours:

- Monday 8:00 a.m. – 5:00 p.m.
- Tuesday 8:00 a.m. - 8:00 p.m.
- Wednesday-Friday 8:00 a.m. - 5:00 p.m.
- Closed Weekends and Holidays

#### **Miller Building**

622 East Grand River  
Howell, MI 48843  
517-548-0081  
1-800-615-1246  
Fax: 517-548-0498

Service site for the following programs:

- Prevention and Child and Adolescent Services
- Administrative Services

Office Hours:

- Monday 8:00 a.m. – 6:00 p.m.
- Tuesday-Thursday 8:00 a.m. – 8:00 p.m.
- Friday 8:00 a.m. – 5:00 p.m.
- Closed Weekends and Holidays

**Genesis Clubhouse**  
501 West Grand River  
Fowlerville, MI 48836  
517-223-1393  
Fax: 517-223-1398

### **Office Hours**

- Office hours depend on the site.
- Hours for the 2280 Building: Monday, Wednesday, Thursday and Friday from 8:00 a.m. - 5:00 p.m. On Tuesdays, hours are from 8:00 a.m. - 8:00 p.m.
- Miller Building hours: Monday, 8:00 a.m. - 6:00 p.m. Tuesday through Thursday 8:00 a.m. - 8:00 p.m. Friday 8:00 a.m. - 5:00 p.m.

### **After Hours Emergencies**

- 24 Hour Emergency Services are available face to face and by telephone for people in crisis. (This might include arranging inpatient treatment or other urgent services).
- Call 517-546-4126 or 800-615-1245.

### **How to Access Services in Livingston County**

- Please call and ask to speak with an Access Services professional who will help you decide, if mental health services are what you need and how we can help you.

### **Substance Use Disorder Services**

- The Community Mental Health Partnership of Southeast Michigan (CMHPSM) believes in the Recovery Oriented Systems of Care (ROSC). This model is designed to build an array of services that can be made available to individuals based on their readiness for change and medical necessity.
- Livingston County residents shall call 517-546-4126.

### **Provider List**

- You may obtain a complete provider list by contacting Customer Service at 517-546-4126.

### **Financial Responsibility for Mental Health Services**

- Please see “Payment for Services” in the regional section of this manual for specific information about any financial responsibility for services.

### **Accommodations**

- Our offices and sites are barrier free.
- If you need additional assistance, please let us know.
- English is the primary language spoken by our staff. Interpreters for other languages, including Spanish and American Sign Language, are available upon request at no cost.

### **Transportation**

- If you are enrolled in a Medicaid Health Plan, transportation to medical appointments is available.
- For assistance, call your Medicaid Health Plan or Customer Services at 517-546-4126.

### **Customer Service Hours**

- Customer Services will answer your questions or concerns Monday through Friday.
- Business hours are from 8:30 a.m. to 5:00 p.m. (Evening hours are available by appointment)
- Call 517-546-4126 or send an email to [lhall@cmhliv.org](mailto:lhall@cmhliv.org).

### **Recipient Rights**

- If you have questions about your rights or you want to make a complaint, including a confidentiality complaint, call the Office of Recipient Rights. To speak with a rights officer, request a complaint form, or to get more help/information, please call:

Recipient Rights Officer  
2280 East Grand River  
Howell, MI 48843  
517-546-4126 or 1-800-615-1245

### **Consumer Advisory Committee**

- A committee called the Consumer Action Panel meets monthly to identify how to continuously improve services for consumers and their families. This committee brainstorms new and innovative ideas. This group sponsors our Consumer Leadership Program and other advocacy efforts.
- The Consumer Action Panel meets the first Friday of the month at 4:00 p.m. at 2280 Building, 2280 East Grand River, Howell 48843.

### **Consumer Leadership**

- This is an on-going training offered to consumers that teaches three areas of advocacy skills: personal leadership, community leadership, and political leadership. These trainings teach how to resolve conflict, solve problems, and impact your community, as well as, your interpersonal relationships.
- There are a many other ways you can make a difference. For more information on committees, consumer leadership, and other ways you can get involved, please call Customer Services.



## Monroe Community Mental Health Authority

The Monroe Community Mental Health Authority is here to serve you. When you have questions regarding services, benefits, or claims, please call, write, or visit our offices.

### **Mission Statement**

Enrich lives and promote wellness

### **Vision Statement**

To be a valued and active partner in integrated systems of care that improve the health and wellness of our community.

### **Service Values**

- **Consumerism** – We adhere to the principles of Person Centered Planning, self-determination, inclusion, and consumer satisfaction to guide our decision-making.
- **Diversity** – We respect that strength comes from embracing and building on the unique qualities of individuals in our community.
- **Community** – We believe that by working together we can build an excellent system of care, which strengthens our community.
- **Accountability** – We answer to our community and to our customers for our actions and results.
- **Access to Care** – We are committed to providing services that are available and easily accessible.
- **Quality** – We pursue excellence by using nationally recognized standards to improve our performance.
- **Leadership** – We are committed to providing leadership through cooperative partnerships.

### **Agency Information**

#### **To Call Us**

- Calls are accepted 24 hours a day at 734-243-7340 or toll free at 800-886-7340.
- Customer Services Manager: Bridgitte Gates – 734-243-7340
- Executive Director: Lisa Jennings – 734-243-7340
- Medical Director: Dr. Audrey Newell – 734-243-7340



**Website:** <http://www.monroecmha.org>

### **To Write Us**

Monroe Community Mental Health Authority  
1001 South Raisinville Road  
P.O. Box 726  
Monroe, MI 48161

Please include your name, address, phone number, Medicaid number (if you are a Medicaid recipient), as well as, other insurance information.

### **To Visit Our Offices**

- Our main office building is located in Monroe Township at 1001 South Raisinville Road, just south
- of M-50 (South Custer Road). Locations of Other Service Sites:

#### **Assertive Community Treatment (ACT)**

1001 South Raisinville Road  
Monroe, MI 48161

#### **Crossroads Clubhouse**

##### **Office Hours**

207 North Monroe Street  
Monroe, MI 48162

### **Office Hours**

- Regular business hours are Monday through Friday from 8:30 a.m. to 5:00 p.m. (A receptionist will help you direct your calls to the appropriate staff member).
- Evening and Saturday appointments are available on a pre-arranged basis.

### **After Hours Emergencies**

- Help is available 24 hours per day, seven days a week.
- A mental health professional can be reached after regular business hours by calling 734-243-7340 or 800-886-7340.

### **How to Access Services in Monroe County**

- To access services, please contact the Monroe Community Mental Health Authority. You will speak with a professional in our Access Department who will help you decide, if mental health services are what you need and how we can help you.

### **Substance Use Disorder Services**

- The Community Mental Health Partnership of Southeast Michigan (CMHPSM) believes in the Recovery Oriented Systems of Care (ROSC). If you want or need a Substance Use Disorder Service and are a Monroe County resident, call 734-243-7340 or 1-800-886-7340. (Ask to speak with our Substance Use Disorder screener).

### **Provider List**

- You may obtain a complete provider list by contacting Customer Service or by visiting our website.

## **Financial Responsibility for Mental Health Services**

- We are required to charge for the cost of services provided. We have adopted a Fee Assessment and Ability to Pay Policy based on income and family size as required by the Michigan Mental Health Code. (It is your right to review this policy and to request a rate schedule at any time.)
- Please see “Payment for Services” in the regional section of this manual for specific information about any financial responsibility for services.

## **Accommodations**

- All offices and sites are barrier free. If you need assistance, please let us know.
- Monroe Community Mental Health Authority is on the direct line bus route of Lake Erie Transit (LET) Authority. (Call LET at 734-242-6672 for the route schedule and fare information).
- English is the primary language spoken by our staff. Interpreters for other languages, including Spanish and American Sign Language, are available upon request at no cost.

## **Transportation**

- If you are enrolled in a Medicaid Health Plan, transportation to medical appointments is available.
- For assistance, call your Medicaid Health Plan or Customer Services at 734-384-8780.

## **Customer Service Hours**

- Customer Services will answer your questions or concerns Monday through Friday.
- Business hours are from 8:30 a.m. to 5:00 p.m. (Evening hours are available by appointment.)
- Call 734-384-8780 or send an email to [bgates@monroecmha.org](mailto:bgates@monroecmha.org).

## **Recipient Rights**

- If you have questions about your rights or you want to make a complaint, including a confidentiality complaint, call the Office of Recipient Rights. To speak with a rights officer, request a complaint form, or to get more help/information, please call:

Recipient Rights Officers  
Monroe Community Mental Health Authority  
Post Office Box 726 -1001 South Raisinville Road  
Monroe, MI 48161-0726  
734-243-7340 or 800-886-7340

## **Consumer Advisory Committee**

- The Monroe Community Mental Health Authority provides the opportunity to provide input and offer recommendations regarding programs and services through the Consumer Advisory Committee.
- Monthly meetings are held on the second Tuesday at 1:00 p.m. at 1001 S. Raisinville Rd., Monroe, MI. (Meetings are open to the public).
- For information on becoming a member, please contact Customer Service at 734-384-8780.



## Washtenaw County Community Mental Health

### **Mission Statement**

Individuals of all ages will have universal access to high quality, integrated healthcare.

### **Vision Statement**

To provide leadership for the development and implementation of unique, effective models of integrated (mental health, substance abuse, physical health) healthcare that create medical homes for Medicaid and indigent consumers.

### **Service Values**

- Have a Shared Vision & Shared Mission
- Consumer Involvement in all areas of the Region
- Diversity
- Being a Leader within our own Communities and within the State
- Continuous Learning and Improvement
- Meaningful Outcomes from the services provided

### **Agency Information**

#### **To Call Us**

- Washtenaw Community Mental Health Access at 734-544-3050
- 24 Hour Access at 800-440-7548
- TDD/TTY number is: 800-649-3777
- Executive Director: Trish Cortes – 734-544-3050
- Medical Director: Dr. Timothy Florence - 734-544-3050

**Website:** [www.ewashtenaw.org](http://www.ewashtenaw.org)

#### **To Write Us**

Washtenaw CMH  
555 Towner, PO Box 915  
Ypsilanti, MI 48197

#### **To Visit Our Offices**

Our administrative offices are located at 555Towner, Ypsilanti, MI 48197

Other Washtenaw CMH service sites/offices are:

**Adult Services Clinics, Ypsilanti**

555 Towner  
Ypsilanti, MI 48197  
734-544-6820

**Adult Services Clinics, Annex**

110 N. Fourth Ave. Ann Arbor, MI 48107  
734-222-3750

**Services for Persons with Developmental Disabilities**

2140 E. Ellsworth  
Ann Arbor, MI 48108  
734-222-3400

**Youth and Family Services**

2140 E. Ellsworth  
Ann Arbor, MI 48108  
734-971-9605  
Tues/Thurs - 8:30 a.m. - 8:00 p.m.  
Mon/Wed/Fri - 8:30 a.m. - 5:00 p.m.

**Office Hours**

- Regular business hours are Monday through Friday from 8:30 a.m. to 5:00 p.m. Some sites may be open for extended hours. (We are not open on County holidays).

**After Hours Emergencies**

- Help is available 24 hours per day, seven days a week.
- Call Access at (734) 544-3050 or 1-800-440-7548.

**How to Access Services in Washtenaw County**

- Access/Crisis Services Department is the central entry point for anyone wanting Mental Health and/or Substance Abuse services.
- Call and ask to speak with the Access/Crisis Services team. They will assist you with connecting to a full array of community information and support. Depending on your request, you may receive referrals to community services, schedule a face to face assessment for community mental health services, and/or connect you directly to professional who can assist you with any immediate crisis needs.
- Access/Crisis Services are available 24/7, 365 days per year by calling: 734-544-3050 or 1-800-440-7548.

**Substance Abuse Services**

- The Community Mental Health Partnership of Southeast Michigan (CMHPSM) believes in the Recovery Oriented Systems of Care (ROSC). This model is designed to build an array of services that can be made available to individuals based on their readiness for change and medical necessity.
- Washtenaw County residents may contact their core provider directly. Residents will be assigned a core provider by birth month.
- Core Provider: Dawn Farm at 734-669-8265 (Birth months: January, March, May, July, September and November)
- Core Provider: Home of New Vision at 734 975-1602 (birth months: February, April, June, August, October, and December).

## **Provider List**

- You may obtain a complete provider list by contacting Customer Service or by visiting our website.

## **Financial Responsibility for Mental Health Services**

- Please see “Payment for Services” in the regional section of this manual for specific information about any financial responsibility for services.

## **Accommodations**

- Our offices and sites are barrier free.
- If you need additional assistance, please let us know.
- English is the primary language spoken by our staff. Interpreters for other languages, including Spanish and American Sign Language, are available upon request at no cost.

## **Transportation**

- If you are enrolled in a Medicaid Health Plan, transportation to medical appointments is available.
- For assistance, call your Medicaid Health Plan or Customer Services at 734-544-3050.

## **Customer Service Hours**

- Customer Services will answer your questions or concerns Monday through Friday. (We are not open on County holidays).
- Business hours are from 8:30 a.m. to 5:00 p.m. (Evening hours are available by appointment.)
- Call Customer Service at 734-544-3050 or send an email to [customer-service@ewashtenaw.org](mailto:customer-service@ewashtenaw.org)

## **Recipient Rights**

- If you have questions about your rights or you want to make a complaint, including a confidentiality complaint, call the Office of Recipient Rights. To speak with a rights officer, request a complaint form, or to get more help/information, please call:

Recipient Rights Officer:  
Washtenaw CMH  
555 Towner, PO Box 915, Ypsilanti, MI 48197  
734-544-3050 or 800-886-7340

## **Consumer Advisory Committee**

- Washtenaw CMH seeks consumer partnership and input about our programs and services. One of these ways is through local consumer advisory committees. The **Consumer Advisory Council** meets around the local services and supports system for people with a developmental disability, mental illness, and serious emotional disturbances.
- Meetings are held on the second Wednesday of the month, 12:30 p.m. - 2:00 p.m. at 2140 E. Ellsworth, Ann Arbor, MI 48108. ( Meetings are open to the public).
- For information on the council or becoming involved, please contact Customer Service at 734-544-3000.

## Future Updates to the Guide to Services

**Original Publication 2007**  
**Revised January 2013, April 2016**