



NorthCare News

January 2023

NorthCare Network

1230 Wilson Street

Marquette, Michigan 49855

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A message from NorthCare

NorthCare Network announces the departure of its CEO, Timothy J. Kangas, PhD, so that he may pursue other professional ventures.

NorthCare appreciates the service that Dr. Kangas has provided over the last 4 years and wishes him well in his future endeavors. January 12, 2023, was Tim’s last day of service.

Megan Rooney, NorthCare’s Chief Financial Officer, has been appointed as Interim CEO while NorthCare pursues a replacement.

Megan has been with NorthCare for 7 years as the CFO. She has been involved in the public behavioral health system throughout her entire career.

MISSION STATEMENT

NorthCare Network ensures that every eligible recipient receives quality specialty mental health and substance use disorder services through the responsible management of regional resources.



OUR VISION

NorthCare Network envisions a full range of accessible, efficient, effective and integrated quality behavioral health services and community based supports for residents of Michigan’s Upper Peninsula.

CONTACT NORTHCARE NETWORK

If you or someone you know is seeking mental health, or substance use disorder services, please contact NorthCare at:

1-888-906-9060 for Mental Health Services

1-800-305-6564 for Substance Use Disorder Services.

For all other questions, concerns, or complaints, please contact NorthCare's Customer Service at **1-888-333-8030**.

Regional Customer Service Staff

Copper Country CMH: Sarah Rousseau

Gogebic CMH: Kristina Potesta

Hiawatha Behavioral Health: Jenni Sweet

Northpointe Behavioral Health: April McCarthy

Pathways CMH: Faye Witte

NorthCare Network: Kayti Lancour-Valiquette

Give Us Feedback



Your feedback is important to us. Scan the QR code with your smartphone to take the Satisfaction Survey.

Know Your Rights as a Medicaid Recipient:

- 1. Providers offer Non-English Language services.**
- 2. A list of service provider restrictions on freedom of choice (none in the U.P.).**
- 3. Information on grievances, appeals, and the fair hearing process.**
- 4. Explanation of benefits and authorization.**
- 5. Procedures for obtaining benefits from out of network providers.**
- 6. Directions on how to obtain benefits from our Network Providers.**
- 7. Information on after-hours and emergency coverage.**
- 8. Request Policies on referrals for specialty care and other benefits not provided by your Primary Care Provider (PCP).**
- 9. Your Medicaid benefit will determine if you will have to pay any cost-sharing responsibilities.**
- 10. Benefits that are available under the state plan but are not covered under contract.**
- 11. Written information on advance directives.**
- 12. Additional information on the structure and operation of NorthCare Network.**

The information above can also be found in NorthCare's Customer Handbook, which is given to individuals at the start of services and annually thereafter. The handbook can also be found on our website at: www.northcarenetwork.org

Annual Performance Reports and Provider Directories

NorthCare and the five Community Mental Health Service Programs (CMHSPs) publish annual performance reports. The reports provide information on how the CMHSPs performed during the year in many different areas. All of the annual performance reports are available online at your local CMHSPs' website. You can also call your local customer service number listed below, to have a copy mailed to you.

Provider Directories should be given to individuals at the time of their first appointment and annually thereafter. The Provider Directories for NorthCare and our CMHSPs can be found on each of their websites listed below. Our Substance Use Disorder (SUD) Provider Directory can be found on NorthCare's website at www.northcarenetwork.org. If you would like a paper copy, please call the customer service number for the provider listed below, and they will mail you a copy within three business days of your request.

NorthCare Network: www.northcarenetwork.org 1-888-333-8030

Copper Country Community Mental Health: www.cccmh.org 1-800-526-5059

Gogebic Community Mental Health: www.gccmh.org 1-800-348-0032

Hiawatha Behavioral Health: www.hbhcmh.org 1-800-839-9443

Northpointe Behavioral Health Systems: www.nbhs.org 1-800-750-0522

Pathways Community Mental Health: www.pathwaysup.org 1-888-728-4929

Online Resources

Did you know that NorthCare Network has fliers about various health-related topics that you may find helpful? Information is provided about COVID-19, the Flu Shot, Physical Activity, Smoking Cessation, Diabetes, and more. These flyers can be accessed at www.northcarenetwork.org/customer-service.html (Scroll down to Integrated Health Care)

Also, NorthCare offers access to MyStrength for the entire community. MyStrength is a free online personal wellness service. A wide array of health information and tutorials are available on the site.

Our Clinical Practice Guidelines are also available on our website. These guidelines include MDHHS policy, NorthCare policy, and various resources about treatment areas.

If you are interested in learning more, visit www.northcarenetwork.org to see all our website has to offer.

Sign Up Today for MyStrength

1. Visit www.mystrength.com and click on "Sign Up."
2. Enter Access Code: NCNCommunity
3. Complete the myStrength sign-up process and personal profile.

HOW TO ACCESS SERVICES THROUGH NORTHCARE NETWORK

Behavioral Health Services

NorthCare Network Access clinicians provide phone screenings to determine if people meet criteria for referral to their local Community Mental Health Service Program (CMHSP) for an intake assessment. Because these agencies provide specialty services, not everyone will qualify. The CMHSPs are set up to provide intensive services to adults with Severe Mental Illnesses (SMI), children with Serious Emotional Disturbances (SED), or individuals with Intellectual or Developmental Disabilities (I/DD) that are present prior to age 22. If you are interested in receiving services at your local CMHSP, you or your guardian will need to participate in a phone screening that takes 20 to 30 minutes to complete. Questions will include information about prior treatments, current symptoms, substance use, ability to function with daily activities, and risk of harm to self/others.

If you would like to complete a screening or if you have any questions about access to mental health services in the Upper Peninsula, please call NorthCare Access at (906) 225-4433 or 1-888-906-9060, Monday through Friday 8am to 5pm Eastern Time.

If you do not appear to qualify for the intensive services through the CMHSP, NorthCare's Access Clinicians will provide you with information about other counseling options in your county. This screening is for non-emergency ongoing services only. If you feel you are in a crisis and/or in need of hospitalization, please contact your local CMHSP and ask to speak to a crisis worker, go to your local ER, or call 911.

CMHSP Crisis Numbers

Copper Country: 1-800-526-5059

Gogebic: 1-800-348-0032

Hiawatha: 1-800-839-9443

Northpointe: 1-800-750-0522

Pathways: 1-888-728-4929

Substance Use Disorder (SUD) Services

For Outpatient Services: Contact NorthCare Network for a list of outpatient Substance Use Providers. You can call a provider in your area and make an appointment to start outpatient services at any time.

For Intensive Inpatient Services: If you feel you need a more intensive level of care, such as residential treatment, call and schedule a screening/referral appointment by contacting: NorthCare SUD Services at (906) 225-7222 or 1-800-305-6564, available Monday through Friday 8am-5pm Eastern Time. You will be scheduled an appointment to call back and have a SUD screening and referral with one of our NorthCare SUD clinicians.

NorthCare's SUD service is not an emergency service. If you feel you need medical attention, you should go to your local hospital. Eligible clients include individuals with Healthy Michigan, Medicaid, or MI Health Link coverage, or those who meet the NorthCare Network SUD sliding fee scale.

Individuals with private insurance should contact their insurance carrier for referral information.

988 & Crisis Supports

In July 2022, the National Suicide Prevention Lifeline became the 988 Suicide and Crisis Lifeline. This change made the typical 10-digit number into an easy to remember and easy to dial 3-digit number. There are over 200 crisis centers that help 988 callers. Calls are confidential and are routed by area code of the caller. Therefore, callers calling from phone numbers with the 906 area code will be routed to a Michigan crisis center. If, for some reason, the Michigan crisis center can't answer the phone, the call will then "bounce" to another center. There is also the option to text the 988 number.

You are welcome to call the 988 number, however you can also still call your local CMH and access their after-hour crisis supports provided via the Michigan Crisis and Access Line (MiCAL) through Common Ground. MiCAL is also a call center for the 988 number. The main difference is what number you call and what information is provided back to the CMH. If you call via the CMH crisis line, Common Ground can provide the CMH information that they received a call. This can be helpful if you want the CMH to know about your call. You still choose how much information to tell Common Ground staff, and you do not have to provide your name if you do not want to. MiCAL is also managing the Michigan Warmline. This line is answered by certified peer support specialists and peer recovery coaches from 10AM – 2AM seven days a week at 888-PEER-753. For more information about MiCAL, visit: <https://mical.michigan.gov/s/> The website also lists resources to other hotlines specific to situation such as LGBTQ youth, Domestic Violence, Gambling, Veterans, or Tribal resources.

For more information about 988: <https://www.fcc.gov/988-suicide-and-crisis-lifeline>

For complaints regarding 988: <https://nycwell.cityofnewyork.us/en/grievance/#::~:~:text=Notify%20any%20staff%20member%20of,www.mhaofnyc.ethicspoint.com>

Crisis numbers

Copper 800-526-5059	Gogebic 800-348-0032	Hiawatha 800-839-9443
Northpointe 800-750-0522	Pathways 888-728-4929	NorthCare 888-333-8030

Trauma Self-Assessment

NorthCare Network is aiming to be trauma informed. Trauma-Informed Care (TIC) is an approach in the human service field that assumes an individual is more likely than not to have a history of trauma. It involves being aware of how clients who are affected by traumatic experiences may perceive and respond to an organization's practices and services. It also aims at ensuring environments and services are welcoming to consumers and staff. Trauma-Informed Care is best practice.

NorthCare's Trauma Informed Committee completed an internal agency self-assessment to assess how trauma informed we are as an agency including all staff. NorthCare is developing recommendations based on the completion of this self-assessment and will be bringing recommendations to the Leadership Team. Each CMH and SUD provider also completed similar assessments at their agencies. We hope that by completing this work, all staff within an agency will be more trauma-informed, will be better able to serve individuals who have experienced trauma, and will be better able to mitigate the effects of secondary trauma.

NorthCare Network Finances

NorthCare Network receives Medicaid funding to support quality specialty behavioral health services through a contract with the Michigan Department of Health and Human Services (MDHHS). NorthCare Network contracts with five Community Mental Health Service Programs (CMHSPs) and Substance Use Disorder (SUD) providers to ensure that every eligible Medicaid recipient receives specialty behavioral health services.

Substance Use Disorder Providers

NorthCare Network contracts on a fee for service basis with an extended network of SUD providers across all fifteen counties of the Upper Peninsula. In addition to receiving Medicaid funding to support SUD services, NorthCare Network also manages Block Grant funding passed through the MDHHS to develop new programming and support Medicaid recipients who are currently receiving treatment, as well as assisting uninsured and underinsured individuals in the community to gain access to SUD treatment services and supports.

Community Mental Health Service Programs by County

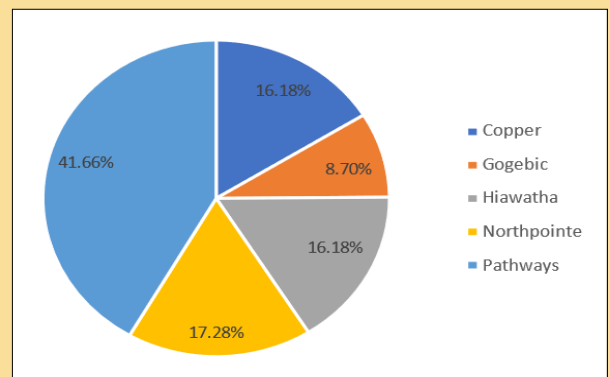
Copper Country	Gogebic	Hiawatha	Northpointe	Pathways
Baraga	Gogebic	Chippewa	Dickinson	Alger
Houghton		Mackinac	Iron	Delta
Keweenaw		Schoolcraft	Menominee	Luce
Ontonagon				Marquette

Medicaid funding comes in multiple forms: the “State Plan,” Habilitation Supports Waiver, Children’s Waiver, SED Waiver, Healthy Michigan Plan, Autism Benefit Waiver, and DHIP (which is for children in foster care or child protective services). From October 1, 2021 to September 30, 2022 the Upper Peninsula received over \$128 million in Medicaid funds.*

Some program funding is based on county of service, those dollars are sent directly to the responsible CMHSP. The State Plan accounts for the majority of funding that NorthCare Network is responsible for managing. NorthCare Network distributes State Plan funding based on percentages to its member CMHSPs on a prepaid basis. The percentages are calculated by a blend of historical costs and current expenditure trends.

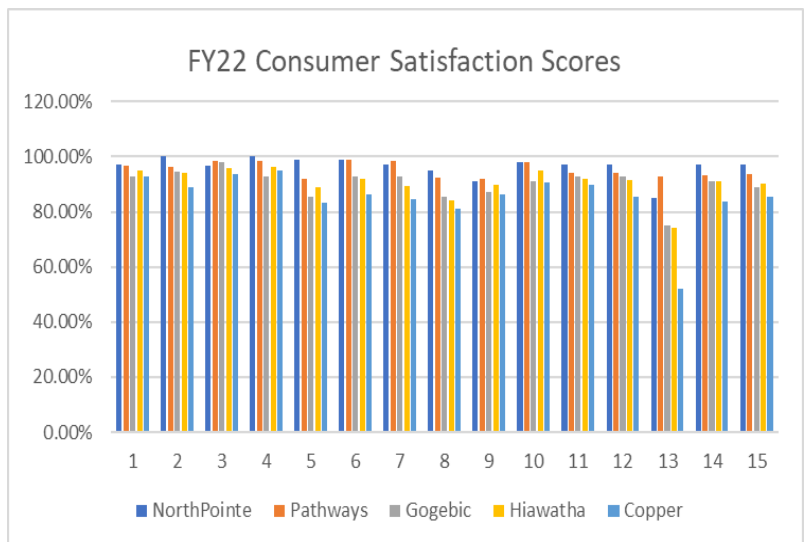
*(*Preliminary data based on year-end estimates includes Direct Care Worker premium revenues subject to separate cost settlement with MDHHS)*

For FY2022, Medicaid “State Plan” funds are allocated across the Upper Peninsula as shown in the graph.



2022 Consumer Satisfaction Survey

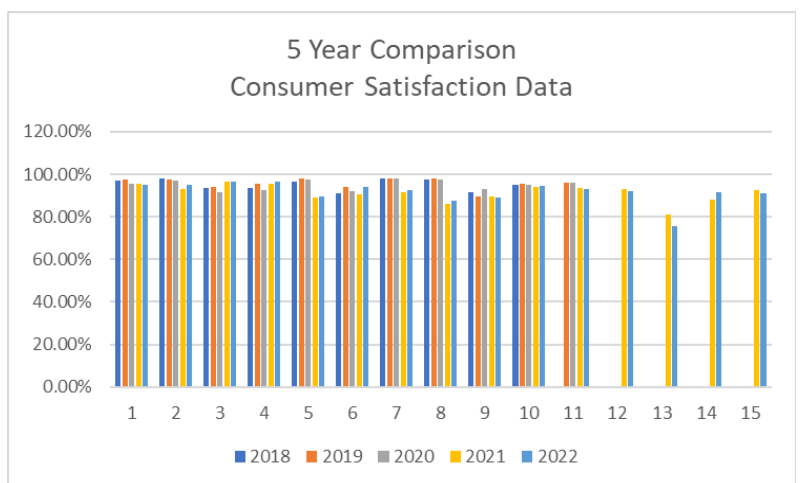
1. Appointments are scheduled at time that work best for me.
2. I am informed of my rights as a CMH/ SUD service recipient.
3. I feel welcomed and comfortable where I receive services.
4. Staff speak in ways I can understand easily.
5. I know what to do if I have a concern or complaint.
6. Staff are sensitive to my cultural/ ethnic and spiritual background.
7. Staff are sensitive when I am discussing my past.
8. I am aware of the types of services available.
9. I was able to get the type of services I feel I needed.
10. My wishes about who is given information about my treatment are respected.
11. I feel involved in my care and included in the decision-making process regarding my services.
12. I feel staff see me as a whole person and address all my needs.
13. I am satisfied with the telephone crisis service, when calling the crisis line after 5pm on weekdays or on weekends.
14. I am able to communicate with my CMH/ SUD provider easily.
15. I would recommend these services to a friend or relative.



The graph above represents the percentage of consumers that reported overall satisfaction with their CMH.

Questions one, three, four, and ten all scored above 90%.

Questions two, five, six, seven, eight, nine, eleven, twelve, fourteen, and fifteen all scored above 80%. With question thirteen having scores lower than 80%.



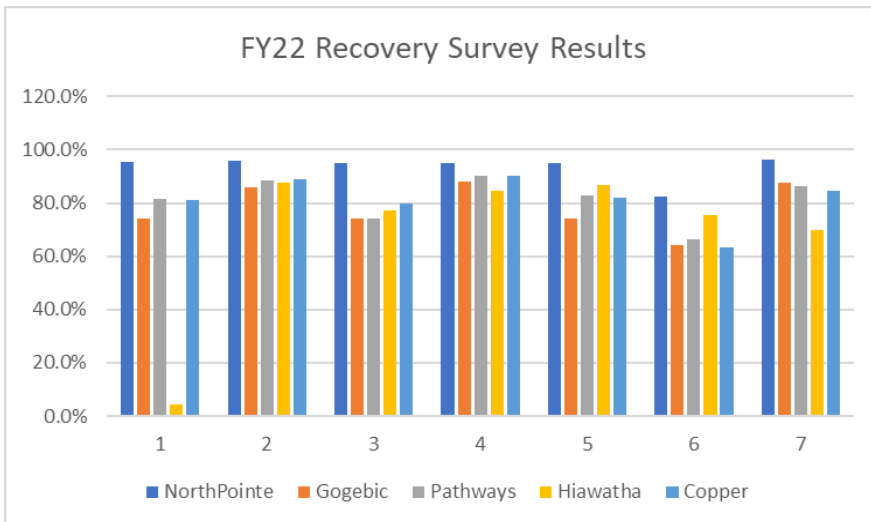
The graph above shows a comparison of consumer satisfaction data for the region over the past five (5) years.

Questions twelve through fifteen were added in 2021.

Overall satisfaction for every question from 2021 to 2022 have increased except for question number thirteen.

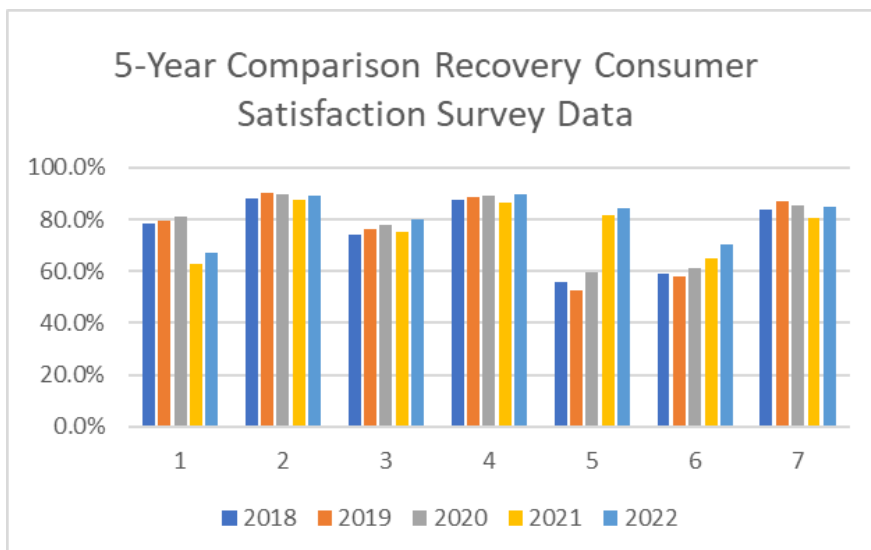
2022 Recovery Survey

1. I am hopeful about my future.
2. I am willing to ask for help.
3. I believe that I can meet my current personal goals.
4. I have people I can count on.
5. I feel coping with my mental illness is easier to do now, than it was when I began services.
6. My symptoms interfere less and less with my life.
7. My services and supports from my CMH/SUD provider are helping me in my recovery.



The graph to the left is from Part B of the 2022 Consumer Satisfaction Survey.

This graph represents the percentage of consumers who overall agreed to the recovery questions, indicating that they feel supported in their recovery and hopeful about their future.



The graph to the left is a comparison of Recovery Question data over the past five years.

There has been an increase in overall satisfaction for every question from 2021 to 2022. Overall rates of satisfaction remained steady.

New to NorthCare!

Kayleigh Babcock, BS, CADC —Integrated Care Specialist

Kayleigh joined NorthCare in June 2022. She was born and raised in Marquette, MI. Growing up Kayleigh was exposed to many different walks of life which greatly impacted the way she not only saw the world, but people as individuals. Kayleigh attended Marquette Alternative High School and continued her education at Northern Michigan University where she majored in Criminal Justice and minored in Native American Studies. Kayleigh started her professional career at Great Lakes Recovery Centers, Adult Residential Services. During her time at GLRC, Kayleigh became a Certified Drug and Alcohol Counselor and was the Men's Case Manager. Kayleigh's passion for changing lives and striving to advance her career led her to NorthCare Network. In her spare time, Kayleigh is a freelance makeup artist, enjoys weight lifting and spending time with her significant other and two dogs.

Jennifer Ahonen—Senior Accountant

Jennifer was born in Stevens Point, Wisconsin and moved to Michigan during her high school years. She graduated from Wakefield High school and attended Gogebic Community College receiving two Associate Degrees, one in Commercial Art & Graphics and the other in Business Administration. She completed her Bachelor's Degree in Accounting from the University of Wisconsin-Superior. Her CMH career began at Gogebic CMH in Wakefield starting as their Accountant, adding Human Resources Coordinator and then Finance Director to her roles. She spent the last four years working for Gogebic Community College as their Controller. She is currently the Clerk for Wakefield Township. Jennifer is very excited to have the opportunity to join the NorthCare Network team. She feels her experience in the local CMH system will lead her to be a strong player at the regional level, making a positive impact on Mental Health and Substance Use Disorder services in the U.P.! Jennifer's free time is spent with her family, husband, two daughters, and two dogs camping, snowshoeing, and whatever adventures they can find!

Madison Crawford —SUD Grant Coordinator

Madison joined NorthCare in August 2022. She was born and raised downstate in Flint, Michigan. She played the bassoon for 7 years and has a signed copy of Rainn Wilson's "The Bassoon King" on her desk at home. She attended college in the Upper Peninsula where she continued to play bassoon and volunteer at various nonprofits. NMU did not have a public health program when she enrolled, so she earned her BS in English Writing and studied Biology as well. Prior to NorthCare, Madison worked with the SUD population in other capacities (such as making referrals to treatment centers and managing shelters) and loved it. Madison is excited to embark on a new adventure with NorthCare and understand public health from a larger perspective.

Elizabeth Wayne LLMSW —Managed Care Clinical Specialist

Elizabeth is a Marquette Native, Yooper through and through. She lives in South Marquette with her husband, two teenage boys, and their dog and cat. She attended NMU and obtained her BSW in 2016. Elizabeth attended MSU and obtained her MSW in 2021. She has a social work background in child welfare, Native American family systems, and hospice/end of life care. Elizabeth is Native American and finds her culture very important. She enjoys spending her time hiking, connecting with nature, gardening, and spending time with her family, while enjoying the Detroit Tigers.

Peer Supports

Peer Services are an important component to the service array. Peer Supports have lived experience and therefore can provide a unique perspective to the treatment team and can bridge the barrier between consumers and professional staff. There are 5 types of peers.

- Youth Peer Supports are young adults ages 18-28 who support youth with Serious Emotional Disturbances (SED).
- Parent Support Partners are parents of children with SED or I/DD who assist other parents.
- Peer Mentors are individuals with Intellectual and/or Developmental Disabilities (I/DD) who support others with I/DD.
- Peer Support Specialists are adults with Serious Mental Illness (SMI) who assist others with SMI.
- Peer Recovery Coaches are adults with a history of Substance Use Disorder (SUD) who assist others with SUD, employed by SUD Providers.

Depending on their position description, which is developed specifically by each individual agency, services that peer support specialists provide may include:

Sharing their story	Co-facilitation of goal creation	Development of wellness plans	Advocating and assisting with self-directed care
Facilitating support groups	Providing support during and after crisis	Helping complete advance directives	Navigating challenging systems of care
Linking to community resources	Promoting whole health and self- management	Housing support	Engagement efforts

Peers do go through training provided by the MDHHS. Prior to attending training, peers would be employed by Provider agencies. Requirements include, but may not be limited to:

Be 18+ years old	Firsthand experience	Be employed by CMH or SUD Provider
High school diploma or GED	Recipient of treatment for at least 1 year	Have a mental health diagnosis; or substance use diagnosis if applying for peer recovery coach

If you are interested in employment as a Peer, please contact your local Provider.

Recovery Conference 2023!

Who should attend: Individuals receiving services currently or in the past from a CMH or SUD Provider, Individuals recovering from a mental illness, Peer Support Specialists, CMH professionals, and anyone interested in recovery from mental illness and/or substance use disorder.

The recovery conference will be held on June 1, 2023 at Northern Michigan University.

Registration Starts April 1, 2023!

Call NorthCare to register at: 906-225-7254 or 1-888-333-8030

Population Health Initiatives

NorthCare Network continued our great work in addressing physical health conditions in the population of people served by our network providers in Fiscal Year (FY) 2022. As a region, the Upper Peninsula excels in catching diabetes early, monitoring blood sugar levels at least annually, and creating programs to help people who are on mental health medications to prevent a trio of conditions known as Metabolic Syndrome. In addition to Diabetes, Heart Diseases like high blood pressure and high cholesterol and Obesity are the other conditions commonly experienced by people who take medications for mental health conditions. By implementing programs like INShape at Pathways CMH, and FIT Together at Copper Country CMH, we can prevent these negative side effects. Every CMH offers supports for dietary changes, physical health, and care coordination with primary care physicians and medical specialists aimed at helping those we serve be as healthy as possible.

NorthCare also put forth special efforts to coordinate access to an annual Dental Exam for all of the people we serve who have Healthy Michigan Plan (HMP), or who have their Medicaid health care benefit through the Upper Peninsula Health Plan (UPHP). People enrolled in either HMP or UPHP have greater access to dental providers, as more dentists accept that insurance. Your Community Mental Health or Substance Use Disorder provider can assist in linking you to a dentist who accepts your coverage. NorthCare Network and UPHP will continue to work on ensuring that all eligible people receiving care through either of our networks have a dental exam at least once every two years, although an exam every year is a covered benefit.

Other efforts to improve the health and wellbeing of our population in FY2022 included breast cancer and colorectal cancer screenings, and Hepatitis C testing and treatment for all people eligible through care coordination with primary care physicians and UPHP.

Opioid Health Home

In October of 2020, the Opioid Health Home (OHH) program became available to consumers in the Upper Peninsula who struggle with an opiate addiction.

A "health home" is not a place to live but rather it's a model of care that will address and coordinate services for physical, behavioral, and social healthcare needs. Those who enroll in the OHH receive person-centered, integrated, and comprehensive care to address the complexities of addiction from a team of healthcare providers tailored to each person's unique situation.

Since its launch, nearly 450 people have enrolled and utilized the enhanced services that the OHH has to offer, including:

- Comprehensive Care Management
- Care Coordination
- Health Education
- Comprehensive Transitional Care
- Individual & Family Support
- Referrals to Community & Social Support Services

Participating in the OHH program is voluntary and does not limit existing health care coverage or appeal rights. Currently, there are three OHH Partners with multiple locations across the U.P. including Great Lakes Recovery Centers with eight locations, Upper Great Lakes Family Health Centers with two locations, and recently we welcomed Sacred Heart Rehabilitation Centers with one location in St. Ignace.

Please call us at 1-888-333-8030 for more information on the Opioid Health Home program.

Behavioral Health Home

Since October 1, 2021, NorthCare Network and our member CMHSPs have been participating in the Behavioral Health Home (BHH) program. The BHH is not a place or location, but a way of receiving health care that includes all aspects of a person coordinated to create the best possible treatment plans and outcomes. The BHH is open to people with all levels of certain behavioral health conditions, meaning that a person does not have to qualify for specialty mental health in order to receive BHH program care. The BHH has 6 core services, all aimed at increasing coordination of care around an individual's unique needs. Those services are Comprehensive Care Management, Care Coordination, Health Promotion (programs like INShape, FIT Together), Comprehensive Transitional Care (helping navigate hospitalizations, discharges, changes in living environment, establishing care with a new physician), Individual and Family Support, and Referrals and Coordination with Community and Social Services.

All ages of Medicaid beneficiaries are potentially eligible for the BHH. Diagnoses that are eligible include Attention-Deficit Hyperactivity Disorders, Bipolar Disorder, Depression, Generalized Anxiety, Post-Traumatic Stress Disorder, Schizophrenia, and Schizoaffective Disorders. The BHH program is especially geared towards helping people who have other physical health conditions like high blood pressure, obesity, diabetes, high cholesterol, cancer or a history of it, and any other health condition which impacts a person's mental well-being. NorthCare Network believes that a person's physical and mental health are intertwined and to effectively help a person reach recovery, all domains of health must be addressed. Sometimes this includes social domains like not having enough food, clothing, social supports, involvement in the community, adequate housing, challenges with parenting, etc. It is the role of the BHH coordinator to help a BHH enrollee to identify areas that can improve their quality of life and use a team approach to meet the enrollee's personal goals. The program uses a team approach with a physician or other prescriber, nurse care manager, mental health therapist, dietician, peer support or community health workers, and any other professionals who specialize in care and treatment of individually identified conditions and health goals.

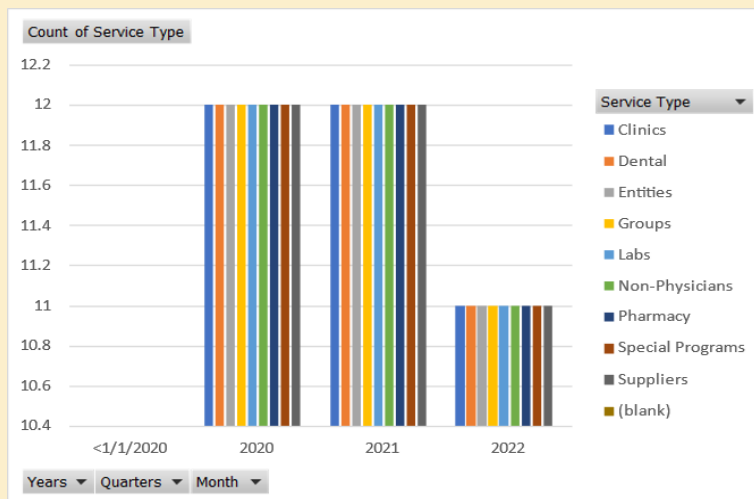
For FY2021 and FY2022, our BHH providers were the 5 CMHSPs. In FY2023, we will be expanding to include additional partners. Health Care providers eligible to be BHH providers also include: Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Clinical Practices or Clinical Group Practices (places where multiple physicians and professionals practice together), and Community/Behavioral Health Agencies, in addition to CMHSPs. NorthCare Network serves as the lead entity for the program under the Michigan Department of Health and Human Services and is responsible for making sure the program is delivered in the best way possible to create wholistic pathways to recovery for the people we serve. If you are interested in receiving BHH services, talk to your case manager or physician about how the program could benefit you.

Payer– to– Payer Integrated Care Team

Individual in their 20's

This individual was opened in February 2021 as requested by the PIHP due to 2 psychiatric admissions within three months and high utilization of CMH crisis services. Their diagnosis' include Borderline Personality Disorder, Dependent Personality Disorder, Autism Spectrum Disorder, Eating Disorder, Collagen Disorder, GERD and chronic shoulder pain. Issues identified included working with their CMH on weight loss, budgeting and life skills. Physical health issues identified included sleep latency/hypersomnia and addressing the eating disorder.

To address the concerns listed above, the CMH began coordinating with the individual's Primary Care Physician. The MHP was able to approve services for an Orthopedic provider located in Wisconsin and coordinate a referral to University of Michigan for shoulder pain. University of Michigan ultimately ordered nerve tests and CT scans. The individual was able to make significant progress towards the CMH treatment plan goals, improving quality of mental health and ability to make positive lifestyle changes. The individual was able to obtain steady employment in Wisconsin and was provided with a smooth transition to a new therapist. The individual was mutually closed in ICT due to improvement in utilization and dropping off the health plan.

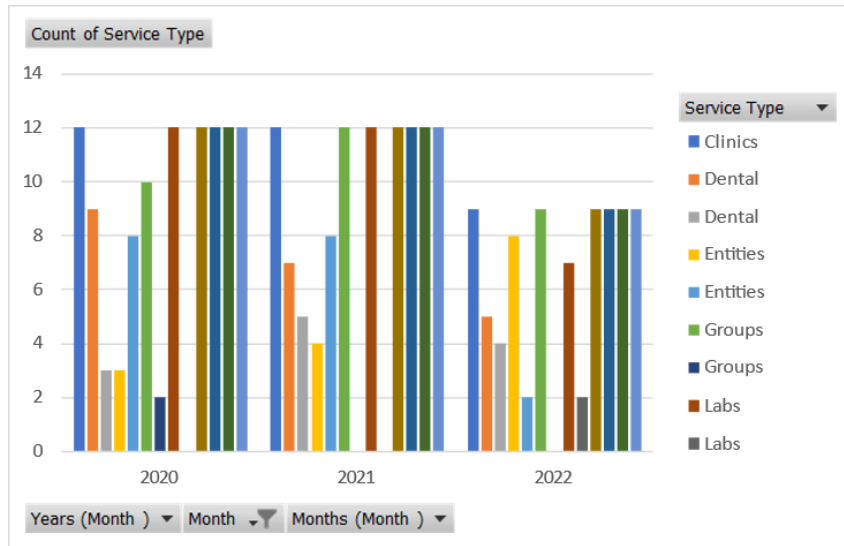


Individual in their 40's

This individual was opened in May of 2021 after being identified through CC360 Risk Stratification due to high ER utilization. Diagnosis' include PTSD, Bipolar 1, Co-Occurring Disorder, Hashimoto's, and chronic back pain. Identified issues include a motor vehicle accident causing chronic pain, high blood pressure, and medication compliance.

To address concerns listed above, the CMH added additional therapy, weekly medication drops, dietary/exercise counseling, coordinating with Primary Care Physician on blood pressure/thyroid testing and the individual was placed in the Benefits Monitoring Program to provide structure. Through Integrated Care, this individual's ER utilization had dropped significantly. The individual states they are doing much better with mental health symptoms and continues to make progress towards physical health. Weekly medication drops have decreased to bi-weekly, the goal is to begin taking medications independently again.

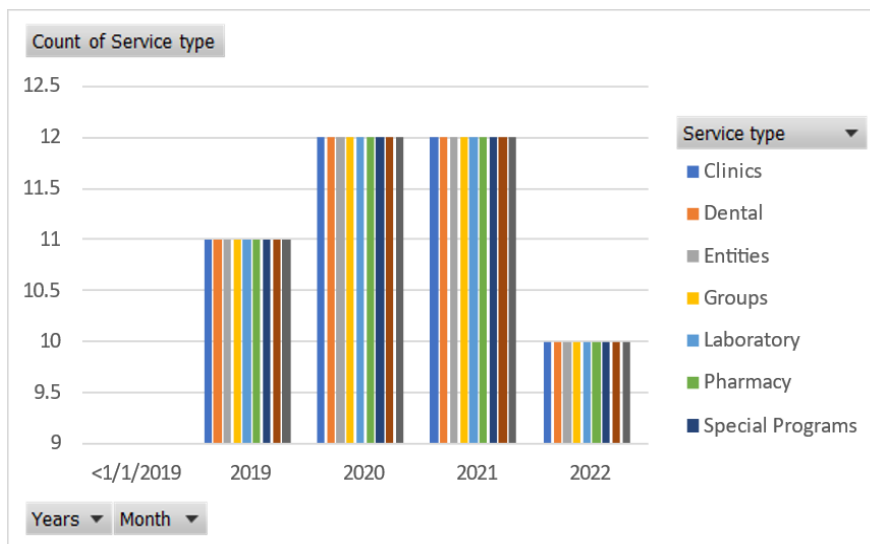
(continued on next page)



Individual in their 20's

This individual was opened in January 2020 after being identified in CC360 Risk Stratification due to high ER utilization and complex needs due to high-risk pregnancy. This individual was receiving Maternal-Infant Health services through MHP and encouraged to re-engage in CMH services to provide Integrated Care. The individual's diagnosis' include Borderline Personality Disorder, Bipolar 1, PTSD, Hernia, Asthma and GERD.

To address the above issues, the consumer increased CMH contact by re-engaging in therapy and beginning medication management with a psychiatrist. The CMH began coordinating care with OSF, tribal supports, and the health department. The individual was placed in the Benefits Monitoring Program to help provide structure. A referral was made to a GI specialist for abdominal pain and received treatment. A referral was also made for Bariatric surgery, which became a root cause of physical health issues. Once surgery is completed, the CMH plans to increase contact to provide additional support. Overall, this consumer has made strides in reducing ER utilization by reaching out to the Benefits Monitoring Program coordinator and scheduling appointments to address physical health needs.



Conflict Free Access and Planning

Conflict Free Access and Planning (CFAP) is a new MDHHS initiative to protect beneficiary choice in service delivery. The goal is to come into compliance with the 1915 waivers and Code of Federal Regulation language which states:

- Providers responsible for evaluation of eligibility, assessment, or development of the IPOS cannot have financial interest in any direct provider: 42 CFR 441.730(b)
- Providers of direct services must not provide case management or develop the IPOS: 42 CFR 441.301(c)(1)(vi)

By March 2023, MDHHS hopes to have selected a model of Conflict Free Access and Planning that each PIHP region will have to determine how to implement. MDHHS policy will be going through public comment. This model will be universally applied for most individuals, regardless of program or population. It isn't clearly determined if there can be variance for some specialty programs. More information can be found on the MDHHS website: <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/conflict-free-access-and-planning-workgroup>

Family Psychoeducation Family Guidelines

The following are useful guidelines for family members to follow when interacting with a loved one living with mental illness.

1. Go Slow

Recovery takes time. Rest is Important. Things will get better in their own time.

2. Create Barriers To Over Stimulation

Enthusiasm is normal. Tone it down. Disagreements are normal. Tone it down too.

3. Give Each Other Space

Time out is important for everyone. It's okay to reach out. It's okay to say "no".

4. Set Limits

Everyone needs to know what the rules are. A few good rules keep things clear.

5. Ignore What You Can't Change

Let some things slide. Don't ignore violence.

6. Keep It Simple

Say what you have to say clearly in the fewest words, calmly and in positive terms.

7. Follow Doctor's Orders

Take Medications as they are prescribed. Take only medications that are prescribed.

8. Carry-On With Business As Usual

Reestablish family routines as quickly as possible. Stay in touch with family and friends.

9. No Street Drugs or Alcohol, moderate caffeine use and smoking

They make symptoms worse, can cause relapse and prevent recovery.

10. Pick Up On Early Signs

Note changes. Consult with your family and treatment team.

11. Solve Problems Step- By- Step

Make changes gradually. Work on one thing at a time.

12. Lower Expectations Temporarily

Use a personal yardstick. Compare this month to last month rather than this year to last year.

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Are you a Veteran? Do you or anyone you know need help with Veteran services?



Contact your NorthCare Network
Veteran Navigator, Jason Wallner
at (906) 936-6863 or 1-888-333-8030.

Veteran Navigator Services

Every warrior needs support at some point. That's why the Michigan Department of Health and Human Services (MDHHS) has a Veteran Navigator who can advocate and connect you to resources and services as a Veteran, Service Member, or Military Family Member.

Your regional Veteran Navigator will guide you through the many resources of Veterans Affairs. Navigators are well informed on current changes through the Department of Veterans Affairs by maintaining close relationships with federal, state, and county Veteran organizations. Your Navigator can assist with many of the challenges you might be facing such as healthcare services, assistance with food, housing, and other local resources.