Meeting Participants: Anastasia Miliadi (Region 4), Angie Smith-Butterwick (MDHHS), Brenda Stoneburner – Chair (MDHHS), Brittany Pietsch (Region 1/NorthCare Network), Carrie Chanter (Genesee Health Systems), Cathy Hart (Region 4/Southwest Michigan BH), Cindy Eckert (Region 10), Crystal Mosby (Region 8/Oakland County CMHA), Deb Willard (CEI CMH), Kelsey Quigley (Region 3), Leslie Pitts (MDHHS), Lorianne Fall (MDHHS), Mary Baukus (Region 5/Saginaw County CHMA), Matina Fabian (Region 7), Michelle Boudreaux (MDHHS), Michelle Dickinson (TTI), Nicole Adelman (Region 6/Community Partnership of Southeast Michigan), Nicole Gabriel (Region 9), Robert Compton (Region 7/Detroit Wayne), Steve Batson (MDHHS MIFAST Contractor)

### Welcome and Introductions

Welcome and introductions were made

Review of Previous Minutes – Go to www.improvingMIpractices.org No Changes

## MDHHS Updates

New Evidence-base Specialist – Brenda Stoneburner

Brenda introduced Michelle Boudreaux, Community Practices and Innovation's new Evidence-based Specialist

- She will be facilitating future meetings for this group
- Michelle introduced herself to the group
- Let her know on EBPs if there is a need so she knows and can focus her needs and resources

Working Remotely - Brenda Stoneburner

MDHHS and Central staff of BHDDA continue working remotely until July 12<sup>th</sup>

- Starting July 12<sup>th</sup> there will be a phased in return to work and that will vary for each individual
- Some individuals will be returning full-time or have a hybrid schedule

Virtual Training – Brenda Stoneburner

MDHHS will continue to do all trainings virtually through the fiscal year (September 30,2021) but could still be the calendar year depending on the rollout and how the phased in return to work goes as well

Past Upcoming Trainings – Michelle Boudreaux

Michelle shared the trainings in the last 3 months . . .

- 2 Stage Match Treatment for Co-occurring Disorders
- 2 IDDT 101
- 2 COD and Pain
- 2 Recovery Based COD Trainings
- 7 Motivational Interviewing ranging from basic, advanced, and supervisory and one MIFAST review
- 5 MIFAST reviews scheduled

<u>Training Opportunities Through FY21</u> – Michelle Boudreaux

- COD College Delta Conference Center Kalamazoo May 25
- Advance MI June 28 & 29
- IDDT 101 July 15
- MI College Basic (2-day) July 26 & 27
- MI College Advanced (2-day) July 29 & 30
- MI College Teaching MI (2-day) August 2 & 3
- MI College Supervisory August 5
- COD & Pain in Behavioral Health Treatment August 11
- Recovery-based COD August 24
- Stage Match Treatment for Co-occurring Disorders Needs August 31

Office of Recovery Oriented Systems of Care (OROSC) Update - Angie Butterwick-Smith

<u>Supplement Grants</u> - OROSC is the recipient of two supplemental block grant funds from SAMHHA on the substance use disorders (SUD) and mental health side

- The SUD side has had to submit revisions on the 1<sup>st</sup> supplemental one related to COVID-19 which they are still waiting for approval on the plan
- They just received instructions on the 2<sup>nd</sup> supplemental one related to the American Rescue Program Act (ARPA) and have to submit a plan by July 2 to SAMHSA
- OROSC wants the PIHPs to identify some activities that will expand and be able to remain in effect after the supplemental grants go away
- The 1<sup>st</sup> supplemental grant they have through the middle of March 2023 and the 2<sup>nd</sup> one through September 2025

<u>SOR Ending</u> - State Opioid Response (SOR) is ending on September 29<sup>th</sup> (their 1<sup>st</sup> and 2<sup>nd</sup> opioid grants) some programming will be going away but they will still have the State Opioid Response 2020 grant – they will be entering project year 2 on September 30<sup>th</sup>

Other Projects Ending - Some other projects will be going away: Primarily because the administration has chosen to reallocate a large chunk of funds to building the Emergency Department Medication Assisted Treatment Bridge Program: one of the programs ending is Quick Response Teams that they have funded

 OROSC is still trying to figure out how they are going to fund the Medication Assisted Treatment (MAT) that is going on in the prisons

<u>American Society of Addiction Medicine (ASAM) Continuum</u> – ASAM training (information to come out from the PHIPs) will start July 12 which is about 6 weeks later than anticipated and wanted but they needed to finish the integration at the PIHP level before they can roll a training out

- They do not want to train any clinician that will not be immediately using it
- There will be about 3 trainings a week

- After the first week of training, they will pause to refresh to see if they need to tweak any part of the training and then they will restart it the 1<sup>st</sup> week of August and will have 3 trainings a week through the 1<sup>st</sup> week of September until they are done
- The training will only be available to SUD folks and contractors
- This will not be shared with anyone else yet because they have about 1,400 clinicians to get trained by October 1<sup>st</sup>
- For COD folks, it all depends on your relationship with the PIHP and how they
  are billing: if they are billing mental health then they would not be included but if
  they are billing the PIHP SUD / Medicaid they would be included in the training

HH Modifier (Update on LARA) – Angie Smith Butterwick

LARA is finishing a revision to the policy and that should be available in a couple of weeks

• If they do not address the issue on the language then the department will have to address that in our contracts

## Info from last meeting

- SUD licensing and the change from LARA on whether a SUD license is needed or not to use the HH code for the co-occurring modifier within the programs
- > Effective January 1, 2021 there is no need for a SUD license
- SAMHSA does track Co-Occurring Disorders (COD) services as priority; MDHHS wants providers to continue using the HH modifier (for now) for COD services, but do not need a SUD license to use it
- CMHAM and some other advocates have requested that the licensing change be reconsidered through LARA
- One of the goals is to have the language changed that reads "they are not allowed to hold a license", to "we cannot require them to hold a license"; this would still allow government entities to hold a license just not say they are required to hold do so
- That request has been submitted by CMHAM and advocates and there have been no further updates to date

## HHTG Modifier – Update - Brenda Stoneburner

This is on paused for now and we are waiting on the LARA revision to come out

## Info from last meeting

- The Medicaid Provider Manual will be updated so the language is taken out requiring ACT teams to have a SUD license to use the COD modifier for IDDT
- This will be completed once PIHP and CMHSP contract changes occur reflecting the current licensure requirements and issuers

## TA Needs or Issues (Helpful Resources)

- If you are interested in a MIFAST visit, send an email to MDHHS-MIFAST@michigan.gov
- The IMP website address is <a href="www.ImprovingMIPractices.org">www.ImprovingMIPractices.org</a> which has tons of materials, resources, training, and many courses that have CEUs attached to them plus it is free to sign up
  - Supervisors are now able to view, track course content, and assign and check completion of courses
- Brenda mentioned the department is in the process of looking at FY22 for the October 1<sup>st</sup> start date in terms of work plans, projects, and how we want to formulate those for the next fiscal year
- Any TA or trainings needed to write that into their work plans
- Other areas of interest: RSA; Motivational Interviewing; DBT trainings; Secondary Trauma; a need for IDDT training for new teams; overall MIFAST with ACT / IDDT; overall arching of staff overturns across the board; ASAM training for clinicians and people they support (once the SUD folks are trained); cognitive training by Shelly; harm reduction training for recovery coaches and peer support; continuation of virtual options for trainings especially for shorter ones; EBP group models like the Matrix Model and Seeking Safety; any kind of EBP that is treatment related; and IDDT California model

## Regional Reports

- Region 8
  - Crystal Mosby
    - As of May 1<sup>st</sup>, they have a service model that they have enacted and are paying their providers additional premium for residential services - 3 initiatives for every quarter that they can make additional funding for and it has been a longtime in the works
    - They had to change contracts and had to review to move some outcomes forward
      - One outcome: ensuring peer services are embedded; want to see more documentation; and usage on residential services – ensuring that clients are connected with additional services they need before they leave
      - Prevention they are doing a needs assessment
      - They are having their workgroups weekly and hopefully they will have some wonderful outcomes within the next month
      - American Society of Addiction Medicine (ASAM) Continuum looking at October 1<sup>st</sup> to having that all done
- Region 7
  - Robert Compton (DWIHN)
    - They had the NCQA review and was granted a 3 year accreditation

- They have a new SUD director, and they were able to promote from within the agency
- Hoping to get some programs back up and running internally like SUD, MET providers, and recovery coaches to improve their motivational interviewing skills
  - They started off with the VAS-R tool and are trying to get a baseline on competencies and skills plus have some internal trainings around MI
  - Using the VAS-R tool for before and after to see growth within it
  - They will be pushing that out to MI but will start with SUD first
- Their annual co-occurring mini conference not sure if it will happen this year or not

### Matina Fabian

They just had a meeting on Opioid Health Home stuff that they will be doing in October

### Region 6

Nicole Adelman (Community Partnership of Southeast Michigan)

- She learned today that recover self-assessment is not required and what other people are using instead of the RSA or if they are still using it
- They are looking for a trainer for secondary trauma

### Region 5

Mary Baukus (Saginaw CMH)

- They are trying to get their IDDT teams where they need to be and has had a lot of staff changes with a lot getting MSWs and moving on
- o Focusing on credentials
- They are still looking to fill the SUD posting and it has been posted twice internally and externally

### Deb Willard (CEI CMH)

- Their COD workgroup is working on various items: training; policy; procedures; and an adult consult group mental health services up and running
- IDDT training with Jennifer Harrison which most of their ACT team staff attended and case management as well
- Upcoming MIFAST review with Lena
- o Other programs need MIFAST reviews and technical assistance
- One of their ACT Team leads just got her supervisor credential through MCBAP
  - ➤ Their ACT team is exploding right now with COD and have seen an uptick in it as well as the severity of it
- They are managing staff turnover and the phase-in
- Their outreach team has been providing services all along based on what people need
- o She is looking forward to the technical assistance conversion

## Region 4

Cathy Hart (Southwest Michigan Behavioral Health)

- Cathy introduced Anastasia Miliadi, SUD Treatment Specialist to the group
- The COVID supplemental grants they have applied for adults with mental illness and COD to provide outreach workers at all of their CMHs
  - They received the grant application, and it is approved
  - ➤ They intend to contract with the CMHs and have them contract people with some kind of lived experience in COD or SMI issues
  - ➤ They intend on over the 2 year period of the grant to that they get certified as a peer support specialist or a recovery coach if they have not qualified for those services then at least a community outreach worker or someone who could continue in the field and work with them will kick off in June
  - Within the same grant they asked for crisis training per region and planning to do some CTI community training or for individuals but will start with outreach workers first
  - They hope to run a warmline with the grant

### Region 3

Kelsey Quigley (HealthWest)

- They are getting ready for their 1<sup>st</sup> MIFAST Review on June 9<sup>th</sup>
- Region 1

**Brittany Pietsch** 

 Their prevention coordinator Jerri has retired but they do still have her on as a part-time contact for a short time

## Future Agenda Items

None identified at this time

**Future Meetings** 

August 19, 2021