



*Michigan Association of Community Mental Health Boards is now  
Community Mental Health Association of Michigan.*

March 30, 2018

FRIDAY FACTS

TO: CMH and PIHP Executive Directors  
Chairpersons and Delegates  
Provider Alliance Members  
Executive Board Members

FROM: Robert Sheehan, Chief Executive Officer  
Alan Bolter, Associate Director

RE:

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**New e-mail addresses for Association staff:** The Michigan Association of CMH Boards is now the COMMUNITY MENTAL HEALTH ASSOCIATION OF MICHIGAN.

Please update your email address for CMHAM staff:

Alan Bolter, Associate Director: [abolter@cmham.org](mailto:abolter@cmham.org)  
Chris Ward, Administrative Executive: [cward@cmham.org](mailto:cward@cmham.org)  
Dana Owens, Accounting Clerk: [dowens@cmham.org](mailto:dowens@cmham.org)  
Michelle Dee, Accounting Assistant: [acctassistant@cmham.org](mailto:acctassistant@cmham.org)  
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Robert Sheehan, CEO: [rsheehan@cmham.org](mailto:rsheehan@cmham.org)

**Association soon to announce new membership opportunities:** In response to requests for a broader range of membership options and a fuller list of benefits of each membership type, the CMH Association of Michigan will soon be announcing several new membership opportunities for organizations and individuals. Look for the revised Association membership brochure to be available in November.

**Friday Facts to become a members-only electronic newsletter:** Note that the receipt of this electronic newsletter will become a members-only benefit sometime in the next few months. While there will be another electronic newsletter for a wider range of non-members, it will not contain the depth or breadth of information contained in this newsletter. **So, if you find the information in this newsletter useful and are not an Association member, consider becoming a member when the new membership opportunities are announced.**

## WORK, ACCOMPLISHMENTS, AND ANNOUNCEMENTS OF CMH ASSOCIATION MEMBER ORGANIZATIONS

### **SWMBH receives public health award**

Southwest Michigan Behavioral Health (SWMBH) has been selected to receive a 2018 Hometown Hero Award from the Michigan Public Health Week Partnership in celebration of National Public Health Week. The Michigan Public Health Week Partnership is comprised of 10 public entities in the State of Michigan, just a few of which include the Michigan Department of Health and Human Services, Michigan Public Health Association, Michigan Public Health Institute as well as many state university public health departments.

This award recognizes individuals and organizations across the state working to improve the health of their local communities. SWMBH was nominated for the award in recognition of their Naloxone/Narcan training and distribution opioid overdose prevention program that since 2016 has trained law enforcement and community members on the administration of Naloxone/Narcan. Over 1482 free kits have been distributed to law enforcement in their eight county region and training has occurred for 59 participating Law Enforcement/Fire Fighting agencies and 2,052 community members. At the time of the nomination the program had reversed 202 known overdoses.

Congratulations to our colleagues at SWMBH.

## STATE AND NATIONAL DEVELOPMENTS AND RESOURCES

### **Responses to Section 298 Pilot RFI posted**

The Michigan Department of Health and Human Services (MDHHS) is providing another update on the Section 298 Initiative today. The Section 298 Initiative is a statewide effort to improve the coordination of physical health services

and behavioral health services in Michigan. This initiative is based upon Section 298 in the Public Act 268 of 2016. The Michigan legislature approved a revised version of Section 298 as part of Public Act 107 of 2017.

MDHHS has received several requests for the responses from the Request for Information (RFI) process. MDHHS used a RFI to select the pilot sites for the Section 298 Initiative. MDHHS has posted all of the responses that were received by the department to the project webpage. The responses can be accessed through the following link:

Link to the RFI Responses: [http://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_76181\\_82736---,00.html](http://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_76181_82736---,00.html)

MDHHS has also published an updated version of the weekly update to the project webpage ([www.michigan.gov/stakeholder298](http://www.michigan.gov/stakeholder298)). The Section 298 Action Team will develop and publish a weekly set of updates on the Section 298 Initiative throughout the implementation process.

For more information on the Section 298 Initiative, visit [www.michigan.gov/stakeholder298](http://www.michigan.gov/stakeholder298).

### **HCBS Heightened Scrutiny resurvey underway**

MDHHS recently announced that the Home and Community Based Services (HCBS) rules Heightened Scrutiny survey would be re-issued, this week (on or around March 29). The round of surveys will go only to those providers and participants who did not respond during the first Heightened Scrutiny survey round.

Providers will have one week to complete the survey and no exceptions will be provided. Participants will have two weeks to complete the surveys.

The Department indicated that the state's PIHPs have made their CMHs aware as they have been assisting in gathering and verifying the email information to send the resurveys out.

### **Immunization records now available online for Medicaid beneficiaries through myHealthPortal and myHealthButton**

Below is a recent press release the ability of Medicaid beneficiaries to access their immunization records.

Medicaid beneficiaries can now access their immunization records both online and via a mobile app, the Michigan Department of Health and Human Services (MDHHS) announced today.

Research has shown that engaging individuals in their own healthcare can lead to healthier behaviors and better health outcomes. To help empower Michigan residents in managing their own health, MDHHS has made it possible for Medicaid, Healthy Michigan Plan and MICHild beneficiaries to download and view immunization records available from the Michigan Care Improvement Registry (MCIR).

Prior to this enhancement, beneficiaries had to contact their primary healthcare provider or local health department in order to get their immunization information. Through the web application myHealthPortal and mobile app myHealthButton, they will now be able to view their immunization history online, download a copy of their record and even determine recommended immunizations.

"MDHHS continues to explore and implement innovative ways for Michigan citizens to obtain their health information directly," said Eden Wells, MDHHS chief medical officer. "Having secure access to our health information, including our immunization records, allows us to better work with our physicians on improving our health."

MDHHS and MCIR are continuing work to make immunization information more easily available to all Michigan residents. Both the online portal and the mobile app require users to provide information to protect the health privacy of residents and ensure that access is given to the correct beneficiaries.

Current Medicaid, Healthy Michigan Plan, MIChild and Children's Special Healthcare Services members can create myHealthPortal or myHealthButton accounts at <https://myHB.state.mi.us>.

### **NAMI Michigan announces annual conference.**

Below is a recent announcement of the Annual Conference of NAMI Michigan.

NAMI Annual State Conference

May 9<sup>th</sup>-11<sup>th</sup>, 2018

"Achieving Integrated Care in Michigan"

Grand Traverse Resort & Spa

100 Grand Traverse Village Blvd. Acme, MI 49610

Come experience our new informative, engaging, relaxed format. This year's conference promises to be our best-ever. Panel discussions, presentations and workshops, such as:

Crisis Intervention Training (CIT)

Nursing Workshops

Ask the Doctor

NAMI Affiliate Development

Assisted Out-Patient Treatment

Clubhouse Resources

Genetic Testing for Medications

Early Intervention for Psychosis

Keynote Speakers

- 2018 Candidates for Governor: Panel Discussion
- Integrated Healthcare: Panel Discussion
- Lynda Zeller: MDHHS Update (298 Pilot, Psychiatric Beds, etc.)
- Milton Mack: Decriminalization of Mental Illness: Fixing a Broken System
- Erin Barbossa: Mental resilience and health in the workplace
- Dr. Farha Abbasi: Cultural Mental Healthcare

Members: \$175.00

Members (w/golf): \$225.00

Non-members: \$250.00

Non-members (w/golf): \$300.00

Social Work and Nursing CEU's included!

REGISTRATION RATES INCREASE BY \$50.00 AFTER APRIL 13, 2018 -- End of Business

NO REFUNDS AFTER APRIL 20, 2018

Room rate is \$129.00/night + tax and \$16.95 daily resort fee

Reserve your rooms now: (800) 968-7352

Register at: [www.namimi.org/events](http://www.namimi.org/events)

### **NAMI Washtenaw County's Lifesavers Gala announced**

Below is a recent announcement, from NAMI Washtenaw County, of its upcoming Lifesavers Gala.

Sunday May 6th, 2018, 6:00-9:00 pm.

Portage Yacht Club

8930 Dexter Pinckney Rd.

Pinckney, MI 48169

Spend an evening helping us reach 3,000 more students, teachers and parents with NAMI suicide prevention programs. Join us for a night at the yacht club enjoying views of the lake. Guests will enjoy a lovely event in support of our mental health awareness programs featuring a variety of hot and cold appetizers, wine and beer, dessert items and a silent auction.

Please consider helping in one of the following ways:

- Sponsorship: donate \$500, \$1000, \$2500, \$5000
- Donation of gift cards for anything in the self-care category (such as massages, meals out, spa packages etc.)
- Purchase event tickets \$100 per person.

To order tickets, donate and for more details: <https://www.eventbrite.com/e/nami-washtenaw-county-lifesavers-gala-tickets-44230203730>

## 2018 Michigan Suicide Prevention Community Technical Assistance Meeting

Below is a notice from the Michigan Association for Suicide Prevention and MDHHS.

This is a *friendly reminder* that the registration deadline for the 2018 Michigan Suicide Prevention Community Technical Assistance Meeting (CTAM) is fast approaching. Spots are filling up fast – so register today! Registration is online again this year making it quick and easy.

This Technical Assistance Meeting will take place at:

May 2 – May 4, 2018  
Ralph A. MacMullan Conference Center  
102 Conservation Drive  
Roscommon, Michigan

This is a great opportunity to network with your peers and to learn from national experts, as well as “boots on the ground” folks in Michigan. In an effort to keep the spirit of the conference one that is intimate and provides rich opportunities for networking, registration is limited to 100 people. See the attached handout for more information about the meeting, as well as a link to the registration site. Please note the firm deadline for registration is April 16th.

We have another terrific group of presenters lined up this year, including plenary speakers you won't want to miss including:

- *David Litts*; co-leader of the Faith Communities Task Force of the National Action Alliance for Suicide Prevention
- *Colleen Creighton*; Executive Director of the American Association of Suicidology.
- *Kate Hardy*; President and CEO of Six Feet Over

This year there will also be a variety of breakout sessions covering key topics such as: Crisis services/Crisis lines; Suicide death review ; Safety planning; Secondary traumatic stress; Advocacy; Implementing the key elements for comprehensive community-based suicide prevention in your community; The spectrum of suicide prevention

Additionally, there will be the opportunity to share information on any suicide prevention-related activities, big or small, that you have been working on. Displays or materials (it doesn't have to be anything fancy!) can be laid out first thing in the morning on Thursday and left out all day.

## Registration

Registration is \$75.00 and includes up to two nights lodging (double occupancy) and six meals. In an effort to keep the spirit of the conference one that is intimate and provides rich opportunities for networking, registration is limited to 100 people.

The registration deadline is April 16th. Register online at: <http://tiny.cc/CTAM2018>

## 2018 Rural Healthcare Symposium

The Rural Healthcare Symposium is a focused policy discussion on the past, present, and future of rural healthcare, with an emphasis on possible solutions. We're excited to host the following local and national experts to lead that discussion on Thursday, April 5th:

Maggie Elehwany, JD; Government Affairs and Policy Vice President, National Rural Health Association  
Ron Manderscheid, PhD; Executive Director, National Association for Rural Mental Health  
Paul Force-Emery Mackie, PhD; Immediate Past President, National Association for Rural Mental Health  
Judy Fitzgerald; Commissioner, Georgia Dep't of Behavioral Health and Developmental Disabilities  
Sarah Vinson, MD; Morehouse School of Medicine  
Kalyn Lane, MD; Unison Behavioral Health  
Robert E. Gordon, Jr., JD; UGA Archway Partnership  
Talbot "Mac" McCormick, MD; Eagle Telemedicine

Elizabeth G. NeSmith, PhD, RN; Augusta University  
Robin Rau; CEO, Miller County Hospital (GA)  
Lou Semrad; CEO, Jefferson Hospital (GA)  
Vicki Lewis; CEO, Coffee Regional Medical Center (GA)  
Roger Forgey; CEO, Stephens County Hospital (GA)  
Tyler Williams; Director, Operational Support, Habersham Medical Center (GA)

This event is free to attend, but please RSVP in advance to secure your spot. Only two weeks away!  
<http://www.bolingandcompany.com/rhs>

## SAMHSA announces RFA for integrated care practice improvement

Request for Applications Announced for Four Innovation Communities: A Rapid-Cycle Improvement Opportunity to Transform your Integrated Health Practices

In this rapidly changing healthcare environment, it is imperative that organizations know how to keep pace.

For 2018, the SAMHSA-HRSA Center for Integrated Health Solutions (CIHS) is providing a cost-free opportunity for qualified organizations to take part in rapid-cycle improvement processes to innovate services through involvement in an Innovation Community.

Innovation Communities are expert-facilitated groups of up to 15 organizations who come together to focus on an area of behavioral and primary healthcare integration innovation. Organizations learn from experts and each other during an intensive four-month period.

This year, the topics of innovation are:

- Building Integration in Pediatric Care Settings - <https://form.jotform.com/80865384879982>
- Implementing Team Based Care - <https://form.jotform.com/80865659479983>
- Implementing Pain Management Guidelines in Integrated Care Settings- <https://form.jotform.com/80866325179971>
- Preparing for Value-Based Payment in Behavioral Health and Primary Care- <https://form.jotform.com/80865428379976>

Each Innovation Community is facilitated by two CIHS staff and up to three additional subject matter experts. Teams from participating organizations set goals specific to their integration needs and then build skills and strategies throughout the Innovation Community to address these goals. Participating teams come from a variety of organizations who offer integrated primary and behavioral health care services and will receive the knowledge and skills necessary to effectively implement the innovation topic at their organization.

Requirements & Structure: Organizations admitted into an Innovation Community are required to have executive leadership support in order to commit adequate staff time (i.e., approximately 1.5 hours/week) to participate in all Innovation Community activities. The summer innovation community cohort will run from May to August 2018.

Each participating organization is required to:

- Attend monthly webinars
- Develop a workplan
- Attend monthly group and individual coaching calls
- Briefly present your findings in a closing report-out webinar

Ready to Get Started?

Don't miss out on this opportunity - there are no direct costs to participate, only staff commitment and active engagement. Apply by Wednesday, April 11, 2018.

Apply Now: [www.integration.samhsa.gov/about-us/innovation\\_communities\\_2018](http://www.integration.samhsa.gov/about-us/innovation_communities_2018)

For more information, please visit the 2018 Innovation Communities webpage (above) or contact [MadhanaP@TheNationalCouncil.org](mailto:MadhanaP@TheNationalCouncil.org).

### **CHCS announces webinar: Beyond Cost and Utilization: Rethinking Evaluation Strategies for Complex Care Programs**

Center for Health Care Strategies

Beyond Cost and Utilization: Rethinking Evaluation Strategies for Complex Care Programs

Date: April 9, 2018, 2:00 – 3:30 pm (ET)

As organizations across the country seek to enhance care management programs for low-income individuals with complex medical and social needs, it is critical to identify which models are effective. However, relying solely on cost and utilization to assess program effectiveness may overlook other positive impacts, such as improving quality of life, achieving housing stability, or generating savings to other public systems.

This webinar, cosponsored by the Center for Health Care Strategies' *Complex Care Innovation Lab* and the National Center for Complex Health and Social Needs (National Center), will review the merits and limitations of traditional complex care evaluation approaches and explore new ways to effectively evaluate these programs. This webinar is made possible by Kaiser Permanente Community Health. It is part of a quarterly series on complex care, hosted by the Policy Committee of the National Center.

Register at:

[https://www.chcs.org/resource/beyond-cost-utilization-rethinking-evaluation-strategies-complex-care-programs/?utm\\_source=CHCS+Email+Updates&utm\\_campaign=3ed77c3aa8-EMAIL\\_CAMPAIGN\\_2018\\_03\\_19&utm\\_medium=email&utm\\_term=0\\_bbc451bf-3ed77c3aa8-152144421](https://www.chcs.org/resource/beyond-cost-utilization-rethinking-evaluation-strategies-complex-care-programs/?utm_source=CHCS+Email+Updates&utm_campaign=3ed77c3aa8-EMAIL_CAMPAIGN_2018_03_19&utm_medium=email&utm_term=0_bbc451bf-3ed77c3aa8-152144421)

### **National Association of Rural Mental Health opens nominations for awards**

The National Association of Rural Mental Health recently announced that nominations are being accepted for a number of national recognition awards. The call for nominations is provided below:

**Ann Schumacher Rural Clinical Practice Award:** The Ann Schumacher award recognizes and memorializes the significant contribution of Ann Schumacher, LCSW, past president elect to the National Association of Rural Mental Health. The award is presented annually to an experienced practitioner who has demonstrated excellence, innovation, professional development and who has worked with domestic violence. The award will be presented during the award ceremony at the NARMH Annual Conference. The 200 word submission deadline is May 7, 2018. Email nominations to Lu Ann Rice at [luann@togevents.com](mailto:luann@togevents.com).

Criteria for Ann Schumacher Award: Practices in a rural area; Leads or participates in an innovative or cutting edge project; Demonstrates a knowledge of working in a rural setting where the environment is often resource deprived and distanced challenged; Attends workshops and /or works toward certification, licensure or an advanced degree; Works with domestic violence issues; Experienced clinician (more than two years); Cross generational experience in all ages and diverse ethnicity; Faith as critical part of life and practice without discriminating against other beliefs; and Family involvement and community involvement.

**Peter G. Beeson Rural Arts Award:** The National Association for Rural Mental Health established the Rural Arts Award in 2007 to honor the life-long contributions of Peter G. (Pete) Beeson to both rural mental health and the rural arts. Pete has been a long time member of NARMH, also a member of its board of directors as well as a Howery Award winner. Pete is recognized within the association for his masterful writing about rural life and his beautiful photography both of which have graced the pages of many NARMH publications. The board established the award and recognized Pete as the inaugural recipient at a plenary session during the 2007 NARMH Annual Conference in Kansas City.

Rural Arts Award Nominations: Nominees will have been recognized for their contributions to the arts that highlight aspects of rural life as a central focus of their work. Using five hundred words or less, describe the nominee, their preferred art form and the way in which it depicts rural life.

Submit your nominations via email to the Lu Ann Rice at [luann@togevents.com](mailto:luann@togevents.com). A committee will review the nominees to select the recipient. Nominations must be received by May 7, 2018. If the first choice recipient is not able to attend the conference to receive the award, an alternate choice will be contacted.

## LEGISLATIVE UPDATE

### Shirkey Gaining Support On Healthy Michigan Boilerplate Change

Two key lawmakers said they are supportive of Sen. Mike Shirkey's attempt to effectively require beneficiaries of Healthy Michigan to pay more in co-pays and annual premiums if they don't move out of the expanded Medicaid program to the individual insurance market after four years.

Both chairs of the appropriations subcommittees overseeing the Department of Health and Human Services (DHHS) budget said they like the idea of inserting a provision in the Fiscal Year (FY) 2019 spending plan to clarify that Michigan's 2013 Healthy Michigan law required recipient buy-in and that's not what they see is happening.

Instead, Rep. Ned Canfield (R-Sebewaing), a medical doctor by profession, said two-thirds of recipients don't pay their contributions and 60 percent don't pay their fair share of co-pays.

"I don't think that was the intent of the law these men and women thought they were passing," Canfield said. "I believe the Legislature that passed Healthy Michigan did a brilliant job of displaying how we can help people and then help them out of Medicaid."

Healthy Michigan is the 2013-passed Medicaid expansion program pushed by Governor Snyder that only passed a reluctant Republican-controlled Legislature after then-Rep. Shirkey and Sen. Roger Kahn (R-Saginaw) required DHHS to get two waivers.

The first required the expanded population of those making between 100 and 133 percent of the federal poverty level to contribute 2 to 5 percent of their income for service. The second required this population to pay up to 7 percent of their

income after four years or find insurance on the health exchange.

A reluctant Centers for Medicare and Medicaid Services (CMS) under President Obama was among the reasons the waiver ended up getting implemented in a way that nobody is getting moved off the benefit, Shirkey said. "I believe the Department had some headwind, but I also believe it's not in the nature of the Department to design a system by which people go off the benefit," Shirkey said.

The result is that the program is not running consistent with statute and either the program needs to change or the statute. Neither Shirkey or Sen. Peter MacGregor (R-Rockford), chair of the Senate DHHS Appropriations Subcommittee, said they're interested in changing the statute. "What we passed in 2013 and what we've implemented is running in opposite directions," MacGregor said. "Something needs to change." For MacGregor, the point is not about saving the state money, it's about encouraging able-bodied recipients to begin training for the numerous skilled trades available in Michigan's job market. "I see this as a win-win," he said. He also noted Healthy Michigan was designed to push recipients to lead healthier lives. He's not sure that's being pushed either.

Shirkey said he understands that as it's currently being run, moving the expanded Medicaid population to the health insurance exchange would cost more money, but that's because the program isn't being run the way the law intended. "The department has to resubmit the waiver so it aligns with the statute," Shirkey said.

Sen. Curtis Hertel (D-East Lansing), a Democratic member on the DHHS Appropriations Subcommittee, said he's not convinced Shirkey is barking up the right tree with the boilerplate addition. Hertel commended Shirkey for the courage it took to move the Healthy Michigan program in 2013, but the law is written vaguely and is open to interpretation. "If you don't believe the Department is following the statute, there's a process for that and that's the courts," Hertel said. "This is up for interpretation, but I don't think a new legislature can interpret the meaning of an old Legislature and then try to put in boilerplate what a different law means."

While Shirkey was in the room when the law was written, that doesn't mean it's "his baby," Hertel said. "So while I have an enormous amount of respect for Sen. Shirkey and the work he did on the law, I think saying that his interpretation is the right interpretation gives him a lot more power than I'm comfortable with him having," he said.

Asked about earlier this month about Shirkey's concerns and if the state intended for this to unfold the way it has with the way it crafted the waiver, DHHS spokesperson Lynn SUTFIN said the transition to the exchange is being implemented in compliance with federal law. In addition, Sutfin said Shirkey "has made us and the Governor's office aware of his concerns and our legal teams are reviewing."

## NATIONAL UPDATE

### Stabenow Unveils New Legislation to Lower Cost of Prescription Drugs

U.S. Senator Debbie Stabenow (D-MI) this week unveiled new legislation aimed at lowering the cost of prescription drugs. Americans pay – by far – the highest prices in the world for prescription drugs. Prices for the most popular brand-name drugs have risen 208% from 2008 to 2016, according to AARP.

Stabenow is announcing three pieces of legislation that will combat rising prescription drug costs:

- The bipartisan ***Know the Lowest Price Act (S.2553)*** cracks down on outrageous gag clauses that stop pharmacists from telling customers that they could pay less for their prescription if they pay out of pocket.

- The ***Empowering Medicare Seniors to Negotiate Drug Prices Act (S.1688)*** would allow the Secretary of Health and Human Services to directly negotiate with drug companies for price discounts of their drugs, which is banned under current law.

And the *Affordable and Safe Prescription Drug Importation Act (S. 469)* authorizes the Secretary of Health and Human Services to issue regulations permitting wholesalers, licensed U.S. pharmacies, and individuals to import drugs from licensed Canadian sellers that are manufactured at facilities inspected by the Food and Drug Administration. Currently, Americans pay about 40 percent more on prescriptions per person than Canadians do.

More details on Senator Stabenow's prescription drugs legislation may be found at:  
<https://www.stabenow.senate.gov/about/issues/lowering-costs-of-prescription-drugs>

Below is the press release of Senator Stabenow's Lansing press conference on this package of bills, at which the CMH Association staff was part of the panel

### Stabenow Unveils New Legislation to Lower Cost of Prescription Drugs

U.S. Senator Debbie Stabenow (D-MI) today unveiled new legislation aimed at lowering the cost of prescription drugs during an event at Sparrow Health Center Lansing. Americans pay – by far – the highest prices in the world for prescription drugs. Prices for the most popular brand-name drugs have risen 208% from 2008 to 2016, according to AARP.

"I continue to stand up to the drug lobbyists and special interests because it is morally wrong to keep prices for your medications so high," said **Senator Stabenow**. "The passage of my legislation would make a major difference for Michigan families."

"The Know the Lowest Price Act is one important step that everyone can agree on to help address the issue of rising prescription drug prices," said **Stacey Pearl, Pharm. D, Director, Sparrow Pharmacy Plus**. "Sparrow is absolutely committed to helping the region and patients receive the best quality care and that includes making sure they get the medicine they need at the most affordable price."

"I rely on prescription medication to stabilize my diabetes and prevent heart attacks," said **Linda Addis, a 69-year-old senior living in Lansing**. "Last year, the price of just one of my medications tripled from \$683 to \$2,236 with zero warning. Another, my inhaler for asthma, went from \$367 to \$1,182. If I took all medications as prescribed, I would have reached the coverage gap for Medicare Part D at the end of February. I live on a fixed income of \$900 in Social Security and \$700 in pensions. I desperately need this medication and don't know what else to do but to only take the expensive medications sparingly."

"Access to psychotropic, or mental health, medications is critical for all of those in our country with mental health needs," said **Robert Sheehan, CEO Community Mental Health Association of Michigan**. "For many people, recovery and the maintenance of stable healthy relationships, meaningful employment, and academic success are contingent upon access to highly affective psychotropic medications. Access to these psychotropic medications is dependent on ensuring that the costs of these medications remain reasonable and that persons using these medications have the information needed to make decisions to keep these costs reasonable. We appreciate Senator Stabenow's longstanding leadership on these issues and her efforts to address the rising costs of prescription drugs."

Pharmaceutical and health product lobbying reached \$279 million last year, more than any other industry. Stabenow is announcing three pieces of legislation that will combat rising prescription drug costs:

- The bipartisan *Know the Lowest Price Act (S.2553)* cracks down on outrageous gag clauses that stop pharmacists from telling customers that they could pay less for their prescription if they pay out of pocket.
- The *Empowering Medicare Seniors to Negotiate Drug Prices Act (S.1688)* would allow the Secretary of Health and Human Services to directly negotiate with drug companies for price discounts of their drugs, which is banned under current law.

- And the *Affordable and Safe Prescription Drug Importation Act (S. 469)* authorizes the Secretary of Health and Human Services to issue regulations permitting wholesalers, licensed U.S. pharmacies, and individuals to import drugs from licensed Canadian sellers that are manufactured at facilities inspected by the Food and Drug Administration. Currently, Americans pay about 40 percent more on prescriptions per person than Canadians do.

## ETHICS FOR SOCIAL WORK & SUBSTANCE USE DISORDER PROFESSIONALS TRAININGS FOR 2018

Community Mental Health Association of Michigan is pleased to offer 6 Ethics for Social Work & Substance Use Disorder Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC.

*This training fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for ethics. This training fulfills the MCBAP approved treatment ethics code education – specific.*

Trainings offered on the following dates.

- April 25 - Lansing
- May 30 - Lansing
- June 27 –Kalamazoo
- July 11 - Troy
- August 22 – Lansing

Training Fees: (fee includes training material, coffee, lunch and refreshments.

\$115 CMHAM Members

\$138 Non-Members

To register: [https://cmham.ungerboeck.com/prod/emc00/PublicSignIn.aspx?&SessionID=fa7fe5ej2fe8fc5&Lang=\\*](https://cmham.ungerboeck.com/prod/emc00/PublicSignIn.aspx?&SessionID=fa7fe5ej2fe8fc5&Lang=*)

## CMHAM ANNUAL SPRING CONFERENCE:

The CMHAM Spring Conference, "Collaboration & Innovation: A Formula for Success," will be held on:

Full Day Pre-Conference: Monday, April 30, 2018

Full Conference: Tuesday, May 1, 2018 & Wednesday May 2, 2018

Conference Location:

The Diamond Center at Suburban Collection Showplace

46100 Grand River Ave, Novi MI 48374

Conference and overnight materials will be out next week!

## DBT SUMMIT

Register for the DBT Summit held on Thursday, April 19, 2018, at the Kellogg Hotel & Conference Center in East Lansing. The Summit has been approved for up to 12 Social Work CEs.

This summit is for attendees who have interest in the learning and dissemination of Dialectical Behavior Therapy (DBT) in a Community Mental Health Service Provider (CMHSP) or Pre-Paid Inpatient Health Plan (PIHP) setting or an agency who is a provider for CMHSP or PIHP. This includes administrators, clinical directors, case managers, clinicians, and peer support specialists. This educational opportunity is intended for publicly funded providers at all levels of practice (beginning, intermediate and/or advanced).

The cost \$125 per person. The fee includes training materials, continental breakfast and lunch. Deadline for Hotel room block is April 7, 2018. Call the hotel directly for reservations for reserved block of rooms. Registration is only available online: [https://cmham.ungerboeck.com/prod/emc00/PublicSignIn.aspx?&SessionID=fa1fe7ejnfe3fd2&Lang=\\*](https://cmham.ungerboeck.com/prod/emc00/PublicSignIn.aspx?&SessionID=fa1fe7ejnfe3fd2&Lang=*)

## **MOTIVATIONAL INTERVIEWING FOR CHILDREN'S TRAINERS – May 3-4 in Lansing**

Motivational Interviewing (MI) is a person-centered counseling style for addressing the common problem of ambivalence about change. It is an empirically-supported treatment (EST) with established benefit across a wide variety of ages, cultures, socio-economic conditions, and diagnoses. Essential constructs of MI include avoiding confrontation while demonstrating empathic listening and eliciting an individual's own reasons for contemplating and committing to making a change. Motivational Interviewing is often drawn upon when initially meeting and engaging with clients to help with creation of a change plan, but can benefit the cyclical course of commitment to change as is typical throughout a service episode. MI is compatible with most other forms of treatment and service settings, including in schools, juvenile centers, home-based treatment, and family therapy. Who Should Attend: This course is appropriate for any direct-service staff who work with youth or families in a mental or physical health service setting and who encounter individuals who struggle with their commitment to making life changes. Supervisors and administrators may also benefit from learning course content in order to coach staff and advise organizational practices. Limited to 40 participants. Registration is only available online: <https://www.macmhb.org/save-the-date/basic-skills-motivational-interviewing-conversations-youth-and-families-increasing-0>

## **SMOKING CESSATION LEADERSHIP ANNUAL COLLECTIONS: 2016 AND 2017 RECORDED WEBINARS**

In celebration of the SCLC's 15th Anniversary, we are giving away FREE CME/CEs, *for a limited time*, for two webinar collections: 2016 & 2017 recorded webinars.

- **2017:** This Collection of recorded webinars from SCLC includes all 10 webinars released during 2017, for a total of 13.50 CE credits. Topics include lung cancer screening, engaging health professionals, state and community approaches to tobacco control, quitlines, behavioral health, smoking mothers, cessation efforts in public housing community health centers, smokeless tobacco, behavioral health/public health partnerships, young adult smokers, and tobacco harm reduction.

For more information and to register for this collection:

<https://cmecalifornia.com/Activity/6245474/Detail.aspx#Ink6245474>

Use the discount code SCLC@15 to waive the \$65 fee.

- **2016:** This Collection of recorded webinars from SCLC includes all nine webinars released during 2016, for a total of 14.0 CE credits. Topics include social smoking among young adults; social media interventions for cessation; tobacco use among African-Americans; pharmacotherapy; tobacco use among the homeless; smokers with mental health conditions; thirdhand smoke; and example smoking cessation programs from Kaiser Permanente and the Truth Initiative.

For more information and to register for this collection,

<https://cmecalifornia.com/Activity/6244262/Detail.aspx#Ink6244262>

Use the discount code SCLC@15 to waive the \$65 fee.

Expires 03/31/2018

Note: You are still able to take an individual webinar if you wish, however, payment will be due to receive the CE credit. If you register for a Collection, it will be complimentary, and you don't have to take all of the webinars in the Collection to receive credit.

**CMH ASSOCIATION COMMITTEE SCHEDULES, MEMBERSHIP, MINUTES, AND INFORMATION:** go to our website at <https://www.macmhb.org/committees>

*Have a Great Weekend!*

