

Lakeshore Region Guide to Services

Specialty Mental Health
Substance Use Disorders
Intellectual/Developmental Disabilities



Community
Mental Health Services
of Muskegon County



NMSAS

Northern Michigan Substance Abuse Services, Inc.



Lakeshore Coordinating Council
For Prevention and Addiction Recovery Services

**Serving Residents of Allegan, Kent, Lake, Mason,
Muskegon, Oceana, and Ottawa Counties.**

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This handbook was created to help you understand what we do, answer any questions you might have, and make the best use of the services that are available to you. Please be sure to read this handbook so that you fully understand the services and rights available to you. We encourage you to keep it for future reference. If you have any questions or comments, please contact your local Customer Services Department at the number listed at the bottom of each page

WELCOME TO THE LAKESHORE REGIONAL ENTITY

The Lakeshore Regional Entity (LRE) serves as the Prepaid Inpatient Health Plan (PIHP) under contract with the Michigan Department of Community Health to manage all Medicaid and Adult Benefit Waiver (ABW) specialty services provided by the following counties: Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa.



The LRE contracts with its partner Community Mental Health (CMH) agencies, Coordinating Agencies (CAs), and other local service providers to provide mental health services to adults with severe mental illness and children with emotional disturbance, substance use disorder services, and services and supports for individuals with a developmental disability. Non-Medicaid specialty services using state general funds, federal block grants, and other funding sources may also be provided.

VISION

The Lakeshore Regional Entity was created with a vision of promoting efficiency and effectiveness by jointly serving as the PIHP for Medicaid Specialty Behavioral Health Services for Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa Counties. The LRE builds upon and maximizes the unique strengths of the individual Member Boards while supporting an essential standard for services. The LRE promotes performance that supports and advocates for and is informed by the needs of the individuals served across the seven counties.

CONTACT INFORMATION

Rich VandenHeuvel, MSW
Chief Executive Officer
12265 James Street
Holland, MI 49424
(231) 342-3379

Gregory Green, M.D.
Medical Director
376 E. Apple Avenue
Muskegon, MI 49442
(231) 724-3699

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568
CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378
CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
Network180 (CMH and CA) - call (866) 411-0690
West Michigan CMH - call (866) 575-2894
Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

CUSTOMER SERVICES

The Lakeshore Regional Entity (LRE) and each local Community Mental Health Services Program (CMHSP) has a Customer Services Department prepared to provide assistance. Here are just some of the ways Customer Services can help you:

- Welcome and orient you to services and benefits available
- Provide further assistance with understanding your available benefits or any problems relating to benefits, along with any charges, co-pays or fees
- Provide information about how to access mental health, substance abuse, primary health, and other community services
- Respond to any complaints or problems with the services you are receiving and provide assistance with filing a grievance or an appeal
- Provide information about LRE operations, including the organizational chart, annual reports, board member lists, board meeting schedules, and board meeting minutes.
- Provide information about Michigan Department of Community Health access standards, practice guidelines, and technical advisories and requirements.

Customer Services staff are available to respond to your call Monday through Friday during business hours, except for holidays, by calling your local Customer Services Department at the number listed below, or you can also call the LRE at (855) 815-5224.

Agency	Customer Services Phone Number(s)
Allegan County CMH	(877) 608-3568 or (269) 686-5124
CMH of Ottawa County	(866) 710-7378 or (616) 494-5545
CMH Services of Muskegon County	(877) 724-4440 or (231) 720-3201
Network180 (Kent County)	(866) 411-0690
West Michigan CMH (Lake, Mason, & Oceana Counties)	(866) 575-2894
Lakeshore Coordinating Council	(866) 846-7311 or (616) 846-4662
Northern Michigan SA Services	(800) 686-0749 or (989) 732-1791

If you call Customer Services outside of business hours and wish to leave a message, please include your name, phone number, brief description of the reason for your call, and the best time to contact you. Customer Services staff will return your call within one business day.

Customer Satisfaction

We want to make sure you are satisfied with your services and supports. From time to time we may ask you to participate in satisfaction surveys, interviews, and focus groups. The answers you provide will tell us how satisfied you are with our services and the staff who provide them. All answers will be kept anonymous and confidential. You have the right to not participate or answer any questions. The services you receive will not change if you choose not to participate.

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568
 CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378
 CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
 Network180 (CMH and CA) - call (866) 411-0690
 West Michigan CMH - call (866) 575-2894
 Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

Consumer Involvement

Your perspective is critical as we work to continually add value to your experience. There are a number of opportunities for you to participate in activities that assist us to improve services. If you are interested in learning more about participating in these opportunities, or if you would like to provide us feedback on the services and supports you receive, please contact your local Customer Services Department, or the LRE at (855) 815-5224.

LANGUAGE ASSISTANCE AND ACCOMMODATIONS

Language Assistance

If you are a person who is deaf or hard of hearing, you can utilize the Michigan Relay Center (MRC) to reach your PIHP, CMHSP or service provider. Please call 7-1-1 and ask MRC to connect you to the number you are trying to reach. If you prefer to use a TTY, please contact your local Customer Services Department at the following TTY/TDD phone number:

Allegan County Community Mental Health	(269) 686-5216
Community Mental Health of Ottawa County	(616) 494-5508
Community Mental Health Services of Muskegon County	(231) 720-3280
Network180	(800) 649-3777
West Michigan Community Mental Health	(800) 790-8326
Lakeshore Coordinating Council	(616) 846-4772
Northern Michigan Substance Abuse Services, Inc.	7-1-1

If you need a sign language interpreter, contact your local Customer Services Department at the number listed at the bottom of this page as soon as possible so that one will be made available. Sign language interpreters are available at no cost to you.

If you do not speak English, contact your local Customer Services Department as soon as possible so that arrangements for an interpreter can be made for you. Language interpreters are available at no cost to you.

Accessibility and Accommodations

In accordance with federal and state laws, all buildings and programs of the LRE are required to be physically accessible to individuals with all qualifying disabilities. Any individual who receives emotional, visual or mobility support from a qualified/trained and identified service animal such as a dog will be given access, along with the service animal, to all buildings and programs of the LRE. If you need more information or if you have questions about accessibility or service/support animals, contact your local Customer Services Department.

If you need to request an accommodation on behalf of yourself or a family member or friend, you can contact your local Customer Services Department at the number listed at the bottom of this page. You will be told how to request an accommodation (this can be done over the phone, in person, and/or in writing) and you will be told who at the agency is responsible for handling accommodation requests.

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CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

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Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

If you need to request written information be made available to you in an alternative format, including enlarged font size, audio version or in an alternate language, contact your local Customer Services Department so arrangements for translation or accommodations can be made. We will provide the information to you as soon as possible, but no later than 30 days from the date of your request. This information will be made available to you at no cost.

SAFETY GUIDELINES/RULES

Building Rules

- ✓ Weapons of any kind are prohibited on the grounds, in buildings or in any vehicles.
- ✓ Keep drugs, abusive language, and damaging behavior out of the treatment setting. Appropriate actions will be taken to ensure your safety and the safety of all consumers.
- ✓ You are responsible for your personal belongings. Please keep them with you at all times.
- ✓ Your personal medications are prescribed for you only. Please keep them with you at all times when you are in the building or riding in one of our vehicles. Do not share any of your medications with anyone else.
- ✓ There is no smoking in any CMH/CA building or vehicle.
- ✓ For reasons of privacy and confidentiality, we appreciate your patience as you stay in the waiting areas until staff come to greet you.

Program Specific Rules

Some programs may place restrictions on persons served. You will receive information about events, behaviors or attitudes that may lead to loss of privileges and the means by which you may regain rights or privileges that have been restricted. Talk to the staff providing your services for more information.

If you are ever terminated from services as a result of a suspected or substantiated violation of program rules, you may be able to return to service after a certain period of time or after you have demonstrated you will no longer violate the rule. Each program may have different criteria for reinstatement and many have agreements that you will be asked to sign when you start services or after an incident occurs. The staff working with you can answer questions about program rules.

EMERGENCY AND AFTER-HOURS ACCESS TO SERVICES

MENTAL HEALTH EMERGENCY

A “mental health emergency” is:

- when a person is experiencing symptoms and behaviors that can reasonably be expected in the near future to lead him/her to harm self or another; and/or
- because of his/her inability to meet his/her basic needs she/he is at risk of harm; and/or
- the person’s judgment is so impaired that he/she is unable to understand the need for treatment and that his/her condition is expected to result in harm to him/herself or another individual in the near future.

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CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

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You have the right to receive emergency services at any time, 24 hours a day, 7 days a week, without prior authorization for payment of care. If you have a mental health emergency, you should seek help right away. At any time during the day or night, call the emergency number for your local CMH office:

CMH	Counties Served	Emergency Phone Number
Allegan County CMH	Allegan	(269) 673-0202 or (888) 354-0596
CMH of Ottawa County	Ottawa	(616) 842-4357 Grand Haven (616) 396-4357 Holland (866) 512-4357 All areas
CMH Services of Muskegon County	Muskegon	(231) 722-4357 (877) 724-4440
Network180	Kent	(616) 336-3909 or (800) 749-7720
West Michigan CMH	Lake, Mason, Oceana	(800) 992-2061

OR call 911

OR go to your nearest hospital emergency room

Post Stabilization Services

After you receive emergency mental health care and your condition is under control, you may receive mental health services to make sure your condition continues to stabilize and improve. Examples of post-stabilization services are crisis residential, case management, outpatient therapy, and/or medication reviews. Prior to the end of your emergency-level care, your local CMH will help you to coordinate your post-stabilization services.

Out of County Emergency Mental Health Care

If you have Medicaid, carry your card with you at all times. You are covered for emergency mental health services anywhere within the State of Michigan. If you have a mental health emergency while you are outside of the county where you receive services, you should contact the CMH office where you are at during the time of the emergency, or go the nearest hospital emergency room. The CMH office where you are during the emergency will contact your local CMH office to arrange for your care.

MEDICAL EMERGENCY

In a “medical emergency,” if you have Medicaid you will not need to pay for emergency services, or for tests or treatment needed to diagnose or stabilize the emergency medical condition. You are also not responsible for payment of ambulance services if other means of transportation would endanger your health. If you do not have Medicaid you may be responsible for costs associated with the treatment you receive. You may go to any hospital emergency room or other setting for emergency services.

If you are having a medical emergency go to the nearest emergency room, or call 911.

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Allegan County CMH - call (269) 686-5124 or (877) 608-3568

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CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311

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Local Hospital Emergency Rooms

<p>Allegan General Hospital 555 Linn Street Allegan, MI 49010 (269) 673-8424</p>	<p>Borgess Medical Center 1521 Gull Road Kalamazoo, MI 49048 (269) 226-7000</p>
<p>Borgess-Lee Memorial Hospital 420 W. High Street Dowagiac, MI 49047 (269) 782-8681</p>	<p>Bronson Methodist Hospital 601 John Street Kalamazoo, MI 49007 (269) 341-7654</p>
<p>Hackley Lakeshore Hospital 72 South State Street Shelby, MI 49455 (231) 861-2156</p>	<p>Holland Hospital 602 Michigan Avenue Holland, MI 49423 (616) 392-5141</p>
<p>Memorial Medical Center 1 Atkinson Drive Ludington, MI 49431 (231) 843-2591</p>	<p>Mercy Health – Hackley Campus 1700 Clinton Street Muskegon, MI 49442 (231) 728-4936</p>
<p>Mercy Health – Mercy Campus 1500 E. Sherman Boulevard Muskegon, MI 49444 (231) 672-3916</p>	<p>Mercy Health – Saint Mary’s Campus 200 Jefferson Avenue SE Grand Rapids, MI 49503 (616) 685-6000</p>
<p>Metro Health Hospital 5900 Byron Center Avenue SW Wyoming, MI 49519 (616) 252-7200</p>	<p>North Ottawa Community Hospital 1309 Sheldon Road Grand Haven, MI 49417 (616) 842-3600</p>
<p>Spectrum Health – Blodgett Campus 1840 Wealthy Street SE Grand Rapids, MI 49506 (616) 774-7740</p>	<p>Spectrum Health – Butterworth Campus 100 Michigan Street NE Grand Rapids, MI 49503 (616) 391-1680</p>
<p>Spectrum Health – Helen DeVos Children’s Hospital 100 Michigan Street NE Grand Rapids, MI 49503 (616) 391-9000</p>	<p>Spectrum Health – Reed City Hospital 300 N. Patterson Road Reed City, MI 49677 (231) 832-7110</p>
<p>Spectrum Health – Zeeland Community Hospital 8333 Felch Road Zeeland, MI 49464 (616) 772-4644</p>	<p>Sturgis Hospital 916 Myrtle Street Sturgis, MI 49091 (269) 651-7824</p>

Please note: If you utilize a hospital emergency room, there may be health care services provided to you as part of the hospital treatment that you receive for which you may receive a bill and may be responsible for depending on your insurance status. These services may not be part of the emergency services you receive. Customer Services can answer questions about such bills.

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 West Michigan CMH - call (866) 575-2894
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SERVICE ELIGIBILITY

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

Services are available to adults and children in our affiliation area who have a serious mental illness, developmental disability, serious emotional disturbance, and/or substance use disorder; and, who have Medicaid, or are uninsured; and who are eligible for services as defined by the Michigan Mental Health Code.

Medical Necessity

Services authorized for treatment of a mental health and/or substance use disorder concern must be medically necessary. You will participate in a screening of your needs to identify the type of services you might be eligible to receive. This means the services to be provided are needed in order to ensure there is appropriate screening, referral, and treatment of mental illness, substance abuse disorder, serious emotional disturbance or developmental disability.

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 your needs.

Medicaid recipients are guaranteed to receive services that are medically necessary. For people who have no insurance, there is no guarantee they will get services if there is not the money to provide those services. The LRE must provide services to as many people as possible within the financial resources that are available. Sometimes people will be placed on a waiting list if there is not enough money to provide services and they do not qualify for Medicaid.

ACCESSING SERVICES

For individuals seeking supports and services for mental illness, developmental disability, serious emotional disturbance, and/or substance abuse, it all starts with a phone call to your local Community Mental Health (CMH) or Coordinating Agency (CA). All calls are private and confidential. Trained and licensed clinicians will talk with you to determine your needs and eligibility.

Each service offered through CMH has criteria established by MDCH. Staff may suggest one or more of the services based on your needs. If you do not qualify for services, our staff will assist you to find other agencies in the community who might be able to help.

To access mental health or substance abuse services, please contact your local CMH or CA using the contact information listed on the next several pages of this handbook.

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CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378

CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311

Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749



3283 122nd Avenue
P.O. Drawer 130
Allegan, MI 49010
(269) 673-6617 or (800) 795-6617 Voice
(269) 673-0202 or (888) 354-0596 24-Hour Crisis
(269) 686-5216 TDD/TTY
(269) 673-2738 Fax
www.allegancounty.org

Marianne Huff Executive Director (269) 673-6617	Nilanjan Gajare, M.D. Medical Director (269) 673-6617	Meghan Launius Recipient Rights Officer (269) 628-5715
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OUR MISSION

We strive to enhance the behavioral health and quality of life of the people of Allegan County through Prevention, Supports, and Treatment.

OUR VISION

To be the provider of choice for integrated behavioral health care.

GUIDING VALES

- ❖ Holistic Person-Centered Care
- ❖ Dignity and Respect
- ❖ Respecting Choice
- ❖ Commitment Excellence
- ❖ Accessibility
- ❖ Responsiveness
- ❖ Diversity

OFFICE LOCATIONS

Access and Emergency Services 3285 122 nd Avenue Allegan, MI 49010 (269) 673-2020 or (888) 354-0596	Services for Persons with Developmental Disabilities 277 North Street Allegan, MI 49010 (269) 673-5092 or (800) 230-0070
Outpatient and Clinic Services 3285 122nd Ave Allegan, MI 49010 (269) 673-6617 or (800) 795-6617	Assertive Community Treatment 3283 122nd Ave Allegan, MI 49010 (269) 673-5854 or (800) 652-1431

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 CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
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 West Michigan CMH - call (866) 575-2894
 Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749



12265 James Street
 Holland, MI 49424
 (616) 392-1873 Voice
 (866) 512-4357 24-Hour Crisis
 (616) 494-5508 TDD/TTY
 (616) 393-5687 Fax
www.miottawa.org/CMH

Lynne Doyle Interim Executive Director (616) 494-5545	Gregory Green, M.D. Medical Director (231) 724-1104	Briana Fowler Recipient Rights Officer (616) 393-5763
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OUR MISSION

Community Mental Health of Ottawa County partners with people with mental illness and developmental disabilities and the broader community to improve lives and be a premier mental health agency in Michigan.

OFFICE LOCATIONS

Ottawa County Access Center 12265 James Street Holland, MI 49424 (616) 393-5681 - Holland Area (877) 588-4357- All Other Areas	Services for People with Developmental Disabilities, Holland and Hudsonville CBS* 12263 James Street Holland, MI 49424 (616) 392-8236
Outpatient Mental Health Services 12265 James Street Holland, MI 49424 (616) 392-1873	Coopersville CBS* 259 Main St., Suite 1 Coopersville, MI 49404 (616) 837-6399
Outpatient Mental Health Services 1111 Fulton Street Grand Haven, MI 49417 (616) 842-5350	Tri-Cities CBS* 17290 Roosevelt Rd. Ferrysburg, MI 49409 (616) 296-0878
Assertive Community Treatment (ACT) 665 136 th Ave., Suite 40 Holland, MI 49424 (616) 786-2643	Lakeshore Clubhouse 490 Century Lane Holland, MI 49423 (616) 355-2207

*Community Based Services (CBS)

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 Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749



**Community
Mental Health Services
of Muskegon County**

**376 E. Apple Avenue
Muskegon, MI 49442
(231) 724-1111 Voice
(231) 722-4357 24-Hour Crisis
(231) 720-3280 TDD/TTY
(231) 724-1300 Fax
www.co.muskegon.mi.us/CMH**

Julia Rupp Executive Director (231) 724-1111	Gregory Green, M.D. Medical Director (231) 724-3699	Garland Kilgore III Recipient Rights Officer (231) 724-1107
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OUR MISSION

To improve the quality of life for individuals with behavioral health needs through quality services, consumer involvement, community collaboration, and resource management.

OUR VISION

We will be a community leader in planning and managing services for individuals with behavioral health needs through best practice and shared resources to promote health, recovery, and support.

OFFICE LOCATIONS

Muskegon County Access Center 376 E. Apple Ave., Muskegon, MI 49442 (231) 720-3200 or (855) 795-1771	Brinks Hall 1890 Apple Ave., Muskegon, MI 49442 Office (231) 724-6040/Residence 724-6044
Assertive Community Treatment (ACT) (231) 724-3300	Club Interactions 1470 Peck St., Muskegon, MI 49442 (231) 724-4495
Clinical Services & Supports Coordination For People with Developmental Disabilities (231) 724-1111	Muskegon Life Skills 97 E. Apple Ave., Muskegon, MI 49442 (231) 724-6090
Supports Coordination and Outpatient Services for Adults with Mental Illness (231) 724-3699	Wesley Roberts Adult Activity 1175 East Wesley, Muskegon, MI 49442 (231) 724-3311
Youth Services 1611 Oak Street, Muskegon, MI 49442 (231) 724-6050	White Lake Community Skill Building 511 East Colby, Whitehall, MI 49461 (231) 894-2202
Autism Program 640 W. Seminole, Norton Shores, MI 49441 (231) 724-1152	

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790 Fuller Avenue NE
Grand Rapids, MI 49503
(616) 336-3909 or (800) 749-7720 Voice
(616) 336-3909 or (800) 749-7720 24-Hour Crisis
(800) 649-3777 TDD/TTY
(616) 336-3593 Fax
www.network180.org

Scott Gilman Executive Director (616) 336-3765	Eric Achtyes, M.D. Behavioral Health Medical Director (616) 336-3765	Corey Waller, M.D. SUD Medical Director (616) 336-3765	Janet Dietsch Recipient Rights Officer (616) 336-3765
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A community leader, Network180 connects individuals and their families to services for mental illness, substance use disorder or developmental disability.

OUR MISSION

Inspiring hope, improving mental health, supporting self determined lives, and encouraging recovery.

OUR VISION

- Promoting community inclusion, combating stigma, and emphasizing prevention.
- Welcoming, accessible, and responsive services in support of the cultures, traditions, and values of all members of our community.
- Creating comprehensive, innovative, and effective services in partnership with provider agencies and the people we serve.
- Being an organization that is valued as a community resource, providing collaborative leadership, and providing compassionate and effective services.

WE VALUE

- The worth and dignity of all persons.
- Diversity and cultural competence – respect and appreciation for the ideas, customs, ethnicity, and traditions of all members of the community.
- Innovative and responsive services that encourage people to reach their potential.
- Upholding the public trust with integrity and accountability.

Network180 serves as the coordinating agency for substance use disorder services in Kent County. Please contact the Access Center for information and/or referral for substance use disorder treatment.

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 Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749



920 Diana Street
Ludington, MI 49431
(231) 845-6294 Voice
(800) 992-2061 24-Hour Crisis
(800) 790-8326 TDD/TTY
(231) 845-7095 Fax

Lisa A. Hotovy, Ph.D. Executive Director (231) 845-6294	Zia Khan, M.D. Medical Director (231) 845-6294	Tina Brown Recipient Rights Officer (231) 845-6294
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OUR MISSION

The mission of West Michigan Community Mental Health (CMH) is to support behavioral health recovery and self-reliance by promoting the abilities and rights of the individuals we serve to be full and participating members of our communities.

OUR VISION

The staff and consumers of WCMCHS will work in partnership with each other and community stakeholders to assure that all individuals living in our communities receive the professional supports and services they need to achieve their desired outcomes and progress on their Recovery journey. Ultimately, the partnerships we create together will greatly reduce the need for professional supports and services by ensuring all individuals are surrounded by strong natural support systems.

OFFICE LOCATIONS

Lake County Office 1090 North Michigan Avenue Baldwin, MI 49304 (231) 745-4659 or (800) 992-2061	Mason County Office 920 Diana Street Ludington, MI 49431 (231) 845-6294 or (800) 992-2061
Oceana County Office 105 Lincoln Street Hart, MI 49420 (231) 873-2108 or (800) 992-2061	

WMCMH GATHERING SITES

Dimensions Unlimited 910 Conrad Industrial Drive Ludington, MI 49431 (231) 843-7380	Progressions Work Center 101 S. Water Street Hart, MI 49420 (231) 873-6496
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TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568
 CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378
 CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
 Network180 (CMH and CA) - call (866) 411-0690
 West Michigan CMH - call (866) 575-2894
 Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311
 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749



Lakeshore Coordinating Council
For Prevention and Addiction Recovery Services

324 Washington Street
P.O. Box 268
Grand Haven, MI 49417
(616) 846-6720 or (866) 846-7311 Voice
(616) 846-4662 or (866) 846-7311 24-Hour Crisis
(616) 846-4772 TDD/TTY
(616) 846-5081 Fax
www.lakeshoreca.org

Kori White-Bissot Executive Director (616) 846-6720	Elaine Beauchamp Recipient Rights Officer (616) 846-6720
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OUR MISSION

The Lakeshore Coordinating Council, as a designated coordinating agency, is charged to maintain and promote effective, regional substance use disorder prevention and treatment services for our diverse communities.

ACCESSING SERVICES

Persons seeking outpatient treatment services can present directly at any outpatient provider in the LCC provider network. Persons seeking residential or sub-acute detoxification services can present at any LCC Designated Entry Provider. Anyone who would like assistance in identifying the provider best able to meet their needs should contact LCC Customer Services at (616) 846-4662 or toll-free at (866) 846-7311.

Designated Entry Providers will conduct pre-screening to determine eligibility for LCC funded services, a full assessment for those eligible, inform the person of the providers available to meet their needs, and make referrals when appropriate.

Designated Entry Providers are listed below. Information about the full provider network is available on our website.

DESIGNATED ENTRY PROVIDERS

Mercy Life Counseling 125 E. Southern Muskegon, MI 49442 (231) 726-3582	West Michigan Therapy 1823 Commerce Street Muskegon, MI 49442 (231) 728-2138
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 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

<p>Catholic Charities West Michigan (adolescent focus) 355 Settler Road Holland, MI 49242 (616) 796-9595, TF: (888) 786-5633</p> <p>1095 Third Street Muskegon, MI 49441 (231) 726-4735</p>	<p>Pathways, MI 217 Hubbard Street Allegan, MI 49010 (616) 842-6710</p> <p>321 S. Beechtree Street Grand Haven, MI 49417 (616) 846-5880</p> <p>412 Century Lane Holland, MI 49423 (616) 396-2301</p>
<p>Ottagon Addiction Recovery (OAR) (offers residential treatment) 700 Washington Avenue Grand Haven, MI 49417 (616) 842-6710</p> <p>483 Century Lane Holland, MI 49423 (616) 396-5284</p>	<p>Eastside (Methadone Treatment) 445 East Sherman Blvd. Muskegon Heights, MI 49444 (231) 739-4359</p>

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 CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
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 Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

NMSAS

Northern Michigan Substance Abuse Services, Inc.

**2136 West M-32
Gaylord, MI 49735
(989) 732-1791 or (877) 255-6226 Voice
7-1-1 TDD/TTY
(989) 732-7052 Fax
www.nmsas.net**

Sue Winter Executive Director (989) 732-1791	Mike Dunn Recipient Rights Officer (989) 732-1791
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OUR MISSION

It is the mission of Northern Michigan Substance Abuse Services to assist and guide every person and community in need to substance abuse disorder services. We will accomplish this mission by developing and maintaining systems that support recovery and by coordinating high quality services. Northern Michigan Substance Abuse Services will be welcoming, innovative, and cooperative, and will respect the dignity of those who we serve...and those with whom we serve.

LOCATIONS

NMSAS Access Center 2136 West M-32 Gaylord, MI 49735 (989) 732-0864 or (800) 686-0749	West Michigan Community Mental Health Atwell Building 1090 N. Michigan Avenue Baldwin, MI 49304 (231) 745-4659
Baldwin Family Health Care 1615 Michigan Avenue Baldwin, MI 49304 (231) 745-2743	Harold E. Madden Center 920 Diana Street Ludington, MI 49431 (231) 845-6294
Eastside (Methadone Treatment) 445 East Sherman Blvd. Muskegon Heights, MI 49444 (231) 739-4359	105 Lincoln Street Hart, MI 49420 (231) 873-2108

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568
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SERVICE AUTHORIZATION

Services you request must be authorized or approved by the LRE. We may approve all, some or none of your requests. You will receive notice of a decision within 14 calendar days after you have 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 you request or denies the amount, scope or duration of the service that you request will be made by a health care professional who has appropriate clinical expertise in treating your condition. Authorizations are made according to medical necessity. If you do not agree with a decision that denies, reduces, suspends or terminates a service, you may file an appeal (see the Grievance and Appeals section for additional information about filing an appeal).

Types of Services Available

The LRE has two contracts with MDCH – Medicaid and Adult Benefits Waiver (ABW) and a separate General Fund contract each CMHSP. These contracts specify the different types and levels of services available based on funding source.

If you have Medicaid:

- You are eligible for a specific set of services based on medical necessity.
- The list of Medicaid services available is explained in the “Mental Health Specialty Supports and Services Medicaid Beneficiaries” section of this handbook.
- You cannot be put on a waiting list for a service considered “medically necessary” unless you are in agreement.

If you have Adult Benefits Waiver (ABW):

- You are eligible for a specific set of services based on medical necessity.
- The list of ABW services available is explained in the “Mental Health and Substance Abuse Services for Adult Benefits Waiver (ABW) Enrollees” section of this handbook.
- You cannot be put on a waiting list for a service considered “medically necessary” unless you are in agreement.

If you do not have Medicaid (General Fund):

- The list of services is not as large as it is for those who have Medicaid. The list of services available for those who do not have Medicaid is explained in the “Services for Individuals who do not have Medicaid or ABW” section of this handbook.
- You can be put on a waiting list if there is not enough funding to provide the service and you do not qualify for Medicaid.

Priority for Services

Some people receive priority for services. This means that the LRE must meet the needs of these individuals first and after that the LRE can fund services for other people who meet criteria for treatment.

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West Michigan CMH - call (866) 575-2894

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Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

You will get priority for mental health services:

- If you have Medicaid or ABW.
- If you have no insurance and you have the most severe forms of serious mental illness, serious emotional disturbance or developmental disability.
- If you are in an urgent or emergency need.

You will get priority for substance use disorder services:

- If you have Medicaid or ABW
- If you are pregnant and you inject drugs.
- If you are pregnant and you have a substance use disorder.
- If you inject drugs.
- If you are a parent and your child was removed from the home, or may soon be removed from the home, under the Michigan Child Protection Laws.

PAYMENT FOR SERVICES

If you are enrolled in Medicaid and meet the criteria for the specialty mental health and substance abuse services, the total cost of your authorized mental health or substance abuse treatment will be covered. No fees will be charged to you. If you are a Medicaid beneficiary with a deductible (“spend-down”), as determined by DHS, or an Adult Benefits Waiver (ABW) enrollee, you may be responsible for the cost of a portion of your services. If you have a “spend-down” amount that must be met before services you receive can be covered by Medicaid, we can discuss this with you and answer any questions you may have.

Make sure that you inform your CMH, CA, and/or service provider of all the insurances that you are covered by, as well as any changes to your insurance. The law states that if you are covered by another insurance plan that insurance will be billed before any state funds, including Medicaid, can be used to cover the services provided to you. It is important that your insurance information is kept current at all times. If you fail to provide insurance information you may be at risk of being charged for services.

If you do not have insurance, payment is based on what you can afford. When you begin treatment, we will work with you to determine what your costs will be and if your insurance will cover any of your treatment. If you believe your fee is beyond your means, we will offer to review your personal and family budget to reassess the fee. Please read your payment agreement for additional details related to your ability to pay. Please notify us of any changes in your status, income or insurance. If you do not provide the information needed to determine your ability to pay, you may be at risk for being charged the full amount for services.

Your Rights:

- You have the right to receive services even if you cannot pay.
- You have the right to know the costs of your services.
- You have the right to request a review of your fee when your income situation changes.
- You have the right to appeal your assessed fee.

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CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

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Your Responsibilities:

- You should bring your Medicaid or insurance information.
- You will be asked to provide financial information and document your income.
- You should make payments at the time of your service, unless you have made other arrangements.
- You must attend all scheduled appointments, or call to cancel at least 24 hours in advance.

SERVICE ARRAY

MENTAL HEALTH SPECIALTY SUPPORTS AND SERVICES FOR MEDICAID BENEFICIARIES

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

Before services can be started, you will take part in a screening to find out if you are eligible for services. This screening will also identify the services that can best meet your needs. You need to know that not all people who come to us are eligible for services, and not all services are available to everyone we serve. If you are not eligible for a service, your CMH will not pay for it. Medicaid will not pay for services that are otherwise available to you from other resources in the community. You will be transitioned from your local CMH services when you no longer meet eligibility criteria or when you have met your desired changes.

During the person-centered planning process, you will be helped to figure out the medically necessary services that you need and the sufficient amount, scope, and duration required to achieve the purpose of those services. 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.

You may request an out of network provider simply by asking your local CMH or you may contact the LRE Customer Services. There will be no cost to beneficiaries for medically necessary services provided outside of the CMH network. A list of local CMH providers, including the services they provide, languages they speak, and any specialty for which they are known will be provided to you. This list is available initially and annually thereafter. The provider list is also available at any time upon request.

By way of your Medicaid Medical Assistance application form with the Michigan Department of Human Services, CMH programs are required, by law, to share necessary information between the Medicaid Health Plans, programs and providers that you (or your child or ward) participate in as necessary to maintain, manage, and coordinate quality health care and benefits. Any necessary referral or treatment for alcohol or other drug abuse will comply with the federal confidentiality law 42 CFR Part 2.

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CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

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In addition to meeting 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 may be accessed at <http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>. Customer Services staff can help you access the 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 conducted to determine a person's level of functioning and mental health treatment needs. Physical health assessments are not part of CMH services.

***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 take better 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 service 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 and then is approved and reviewed regularly by a team of specialists to make sure that it is effective and 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 who help 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.

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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 a 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 and/or enable greater independence for a person with physical disabilities. Note that all other sources of funding must be explored first, 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.

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 such things as 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 or 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 Persons with Mental Retardation (ICF/MR) 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, or an oral medication or topical medication.

Medication Review is the evaluation and monitoring of medications used to treat a person's mental health condition, their effects, and the need for continuing or changing their medications.

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

Nursing Home Mental Health 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 by an occupational therapist of an individual's ability to do things in order to take care of themselves every day, 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. The LRE may also have Peer Specialist Services available for individuals who have a developmental disability, substance use disorder, and/or families of children with serious emotional disturbance. If you have questions about Peer Services, please contact your local Customer Services Department.

Personal Care in Specialized Residential Settings assists adults 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 by a physical therapist of a person's physical abilities (such as the ways they move, use their arms or hands or hold their body), 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.

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.

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***Speech and Language Therapy** includes the evaluation by a speech therapist of a person's ability to use and understand language and communicate with others or to manage swallowing or related conditions, and 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 the 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, usually provided 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 or her choosing in the development and periodic review of the individual plan of service.

Wraparound Services for children and adolescents with serious emotional disturbance and their families that include treatment and supports necessary to maintain the child in the family home.

SERVICES FOR HABILITATION SUPPORTS WAIVER (HSW) AND CHILDREN'S WAIVER PARTICIPANTS

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

Goods and Services (for HSW enrollees) is a non-staff service that replaces the assistance that 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.

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Personal Emergency Response Devices (for HSW enrollees) help a person maintain independence and safety in their own home or in a community setting. These 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.

SUBSTANCE ABUSE SERVICES FOR MEDICAID BENEFICIARIES

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

Outpatient Treatment includes therapy/counseling for the individual, and family and 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.

Methadone and LAAM 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 use disorder outpatient treatment.

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

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 funded services, your local CMH will work with your primary care doctor to coordinate your physical and mental health services. If you do not have a primary care doctor, we will help you find one.

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Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

Lakeshore Coordinating Council (CA) - call (616) 846-4662 or (866) 846-7311

Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

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 your local Department of Human Services (DHS) office at the number listed below, or you can contact your local Customer Services Department.

Local DHS Offices

County	Phone Number
Allegan	(269) 673-7700
Kent	(616) 248-1000
Lake	(231) 745-8159
Mason	(231) 845-7391
Muskegon	(231) 733-3700
Oceana	(231) 873-7251
Ottawa	(616) 394-7200

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 health plans listed on the next page you can contact the health plan directly 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 your local Customer Services Department for assistance.

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568
 CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378
 CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440
 Network180 (CMH and CA) - call (866) 411-0690
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Medicaid Health Plans

Health Plan	Counties Covered	Contact Information
CareSource	Allegan	(800) 390-7102 www.caresource.com
McLaren Health Plan	Kent, Mason, Muskegon, Ottawa	(888) 327-0671 www.mclarenhealthplan.org
Meridian Health Plan	Allegan, Kent, Lake, Mason, Oceana, Muskegon, Ottawa	(888) 437-0606 www.mhplan.com
Molina Healthcare	Allegan, Kent, Lake, Mason, Oceana, Muskegon, Ottawa	(888) 898-7969 www.molinahealthcare.com
Priority Health	Allegan, Kent, Mason, Muskegon, Ottawa	(888) 975-8102 www.priorityhealth.com
UnitedHealthcare Community Plan	Allegan, Kent, Oceana, Muskegon, Ottawa	(800) 903-5253 www.uhccommunityplan.com

MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES FOR ADULT BENEFITS WAIVER (ABW) ENROLLEES

Individuals enrolled in ABW may be eligible for mental health and substance abuse services such as those listed below. An assessment will determine the medical necessity for the services. The ABW enrollee may be required to pay a co-pay for these services.

Note: The Michigan Medicaid Provider Manual contains complete definitions of the following services, as well as eligibility criteria and provider qualifications. The manual may be accessed at <http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>. Customer Services staff can help you access the manual and/or information from it.

Mental Health Services

- Crisis interventions for mental health-related emergency situations and/or conditions.
- Identification, assessment, and diagnostic evaluation to determine the beneficiary's mental health status, condition, and specific needs.
- Inpatient hospital psychiatric care for mentally ill beneficiaries who require care in a 24-hour medically-structured and supervised licensed facility.
- Other medically necessary mental health services:
 - Psychotherapy or counseling (individual, family, group) when indicated;
 - Interpretation or explanation of results of psychiatric examination, other medical examinations and procedures or other accumulated data to family or other responsible persons, or advising them how to assist the beneficiary;
 - Pharmacological management, including prescription, administration, and review of medication use and effects; or
 - Specialized community mental health clinical and rehabilitation services, including case management, psychosocial interventions, and other community supports, as medically necessary, and when utilized as an approved alternative to more restrictive care or placement.

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Substance Abuse Services

- Initial assessment, diagnostic evaluation, referral, and patient placement;
- Outpatient treatment;
- Federal Food and Drug Administration (FDA) approved pharmacological supports for Levo-Alpha-Acetyl-Methadol (LAAM) and Methadone only; or
- Other substance abuse services that may be provided, at the discretion of the CA, to enhance outcomes.

SERVICES FOR INDIVIDUALS WHO DO NOT HAVE MEDICAID OR ABW

Individuals who do not have Medicaid or ABW may be placed on waiting lists for services, depending on the availability of general funding. Once authorized for services covered under general fund, individuals must apply for Medicaid in order to continue receiving CMH funded services. Individuals who do not have Medicaid may receive the following mental health services if determined medically necessary, and if there is sufficient funding:

- Development of an individual plan of service
- 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 and adaptive skill and coping skill training, health and rehabilitative services, and pre-vocational and vocational services
- Recipient Rights services
- Mental health advocacy
- Prevention

Individuals who do not have Medicaid or ABW may receive the following substance abuse services if determined medically necessary, and if the LRE has sufficient funding.

- Outpatient treatment
- Detoxification
- Residential Services
- Pharmacological Supports (Methadone)
- Prevention
- Acupuncture may be used as an adjunct therapy with any of the above

COORDINATION OF CARE

To improve the quality of services we want to coordinate your care with the medical provider who cares for your physical health. If you are also receiving substance abuse services, your mental health care should be coordinated with those services. Being able to coordinate with all providers involved in treating you improves your chances for recovery, relief of symptoms, and improved functioning. Therefore, you are encouraged to sign a Release of Information so that information can be shared. If you do not have a medical doctor and need one, contact your local Customer Services Department and staff will assist you in finding a medical provider.

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RECIPIENT RIGHTS

Every person who receives public mental health services has certain rights. The Michigan Mental Health Code protects some rights. Some of your rights 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 receive treatment suited to condition.

More information about your rights is contained 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 again every year. You can also ask for this booklet at any time.

You may file a Recipient Rights complaint *at any time* if you think staff violated your rights. You can make a rights complaint either orally or in writing.

If you receive substance abuse 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 again every year. You can find more information about your rights while getting substance abuse services in the “Know Your Rights” pamphlet.

Freedom from Retaliation

If you receive public mental health or substance abuse 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.

You may contact your local Office of Recipient Rights (ORR) at the number listed below to talk with a Recipient Rights Officer about any questions you may have about your rights or to get help to make a complaint. You can also contact your local Customer Services Department for help with making a complaint.

Agency	Phone Number
Allegan County CMH	(269) 628-5715
CMH of Ottawa County	(616) 393-5763
CMH Services of Muskegon County	(231) 724-1107
Network180	(616) 336-3765
West Michigan CMH	(231) 845-6294
Lakeshore Coordinating Council	(616) 846-6720
Northern Michigan Substance Abuse Services, Inc.	(989) 732-1791

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CONFIDENTIALITY AND FAMILY ACCESS TO INFORMATION

You have the right to have information about your mental health treatment kept private. You also have the right to look at your own clinical records and add a formal statement about them if there is something with which you do not agree. Generally, 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.

Confidential information about you may be released when you, your guardian or your parent (if you are a minor) signs a release of information.

Confidential information can be released without your consent 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.
- 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.
- Staff learns of or suspects that a vulnerable adult is being abused or neglected. In this case, Adult Protective Services must be called.
- CMH needs to get benefits for you to get paid for the cost of treatment.
- You die and your spouse or other close relative needs the information to apply for and receive benefits.

Family members have the right to provide information about you to your provider. However, without a release of information signed by you, your provider may not give information about you to a family member. For minor children under the age of 18 years, parents/guardians are provided information about their child and must sign a release of information before information can be shared with others.

Under the Health Insurance Portability and Accountability Act (HIPAA), you will be provided with an official Notice of Privacy Practices. This notice will tell you all the ways that information about you 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.

If you receive substance abuse services, you have rights related to confidentiality specific to substance abuse services.

If you feel your confidentiality rights have been violated, call your local Recipient Rights Office.

Accessing your Records

Your service provider keeps a record of the care you receive. You have the right to look at your own clinical records. You or your guardian (parent if you're a minor) can 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.

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If you or your legal representative believes your record contains incorrect information, you or she/he may request that your record be amended or corrected. You may not remove what is already in the record, but you have the right to add a formal statement.

If you are denied access to your record, you, or someone on your behalf should contact your local Office of Recipient Rights.

GRIEVANCE AND APPEALS

Grievances

A **grievance** is an expression of dissatisfaction about service issues. You have the right to say that you are unhappy with your services or supports, or the staff who provide them, by filing a grievance. You can file a grievance *any time* by calling, visiting or writing to your local Customer Services Department. Assistance is available in the filing process by contacting your local Customer Services Department, or you can also call the LRE at (855) 815-5224.

Appeals

An **appeal** is a request to review an adverse action. You will be given notice when a decision is made that denies your request for services or reduces, suspends or terminates the services you already receive. You have the right to file an appeal when you do not agree with such a decision. There are time limits on when you can file an appeal once you receive a decision. There are two levels of appeals – local appeals and state appeals.

1. Local Appeals

You must file a local appeal within 45 calendar days of the date of the notice of action and your request must be confirmed in writing. You will receive written notice of the results of the appeal within 45 calendar days from the date you filed it, unless you have asked for an expedited appeal, in which case you will be told within 3 calendar days. If you believe your life, health or well being is in danger, you can ask for an expedited appeal. This will tell staff that you are concerned about your health and safety. Please note if your request for an expedited appeal is denied, we will call and/or write to you within 3 calendar days.

Your appeal will be completed quickly, and you will have the chance to provide information or have someone speak for you regarding the appeal. You, or your legal representative, also have the right to review your appeal file before and during the appeals process. You may ask for assistance with filing an appeal from your local Customer Services Department.

2. State Appeals

There are two types of state level appeals – Medicaid Fair Hearing and Alternative Dispute Resolution Process.

A. Medicaid Fair Hearing

If you have Medicaid, you can ask for a fair hearing before an administrative law judge (also called a state appeal). You do not have to complete the local appeal

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process before requesting a state appeal. You have 90 calendar days from the date of notice of the “action” to request a hearing. When you receive the notice you should also receive a “Request for Hearing” form. You may use this form or you may submit your hearing request in writing on any paper to and mail it to:

Intake – Request for Hearing
Michigan Administrative Hearing System
P.O. Box 30475
Lansing, MI 48909

Fair hearing requests must be in writing and signed by you or an authorized person. You can represent yourself or have another person represent you:

- This person can be anyone you choose.
- This person may request a hearing for you.
- You must give this person written permission to represent you. You may provide a letter or a copy of a court order naming this person as your guardian or conservator.

Note: You may request to have your previously authorized services continue while the Local Appeal and/or Fair Hearing are pending if you file an appeal within 12 calendar days; if the appeal involves the termination, suspension or reduction of a previously authorized service; and if the original authorization period has not expired. If services are continued, we have the right to ask you to repay the cost of these services if the hearing or appeal upholds the original decision, or if you withdraw your appeal or hearing request, or if you or your representative does not attend the hearing.

B. Alternative Dispute Resolution Process

If you do not have Medicaid, you can ask for an Alternative Dispute Resolution through the Michigan Department of Community Health. This can only be done **after** you have completed a Local Appeal and you do not agree with the written results of that decision. You may submit your request in writing and mail it to:

Michigan Department of Community Health
Division of Program Development, Consultation, and Contracts
Bureau of Community Mental Health Services
ATTN: Request for DCH Level Dispute Resolution
Lewis Cass Building - 6th Floor
Lansing, MI 48913

Second Opinions

If you were denied access to all mental health services, or if you were denied inpatient hospitalization after specifically requesting this service, you may ask for a Second Opinion.

- If access to all mental health services was denied, a Second Opinion will be completed within 5 business days of making the request.
- If a request for inpatient hospitalization was denied, a Second Opinion will be completed within 3 business days of making the request.

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You will be given detailed information about grievance and appeal processes when you first start services and then again annually. You may ask for this information at any time by contacting Customer Services.

PERSON-CENTERED PLANNING

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

The process begins when you determine whom, beside yourself, you would like at the person-centered planning meetings, such as family members or friends, and what staff you would like to attend. You will also decide when and where the person-centered planning meetings will be held. Finally, you will decide what assistance you might need to help you participate in and understand the meetings.

During person-centered planning, you will be asked what are your hopes and dreams, and will be helped to develop goals or outcomes you want to achieve. The people attending this meeting will help you decide what support, services or treatment you need, who you would like to provide this service, how often you need the service, and where it will be provided. You have the right, under federal and state laws, to a choice of providers.

There are no set limits on the amount, scope or duration of services that are available to you as services are authorized suitable to condition and medical necessity. We do not give incentives to any provider to limit your services. We work with you, during your assessment and as part of your person-centered planning process, to determine what services are appropriate to meet your needs.

After you begin receiving services, you will be asked from time to time how you feel about the supports, services or treatment you are receiving and whether changes need to be made. You have the right to ask at any time for a new person-centered planning meeting if you want to talk about changing your plan of service.

You have the right to “independent facilitation” of the person-centered planning process. This means that you may request someone other than the staff conduct your 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, person-centered planning 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 person-centered planning using “family-centered practice” in the delivery of supports, services, and treatment to their children.

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Topics Covered During Person-Centered Planning

During person-centered planning you will be told about psychiatric advance directives, a crisis plan, and self-determination (see the descriptions below). You have the right to choose to develop any, all or none of these.

❖ **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 in which you may become unable to make a decision about the kind of treatment you want and the kind of treatment you 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 choose to create a psychiatric advance directive, you should give copies to all providers caring for you, people you have named as a medical or mental health patient advocate, and family members or trusted friends who could help your doctors and behavioral health providers make choices for you if you cannot make those choices

For more information about advance directives, please refer to *A Guide to Advance Directives and Guardianships in Michigan*, which begins on page 34 of this handbook. If you do not believe you have received appropriate information regarding psychiatric advance directives, please contact Customer Services to file a grievance.

❖ **Crisis Plan**

You also have the right to develop a “**crisis plan.**” A crisis plan is intended to give direct care if you begin to have problems in managing your life or if 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 listing friends or relatives to be called, preferred medications or 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 mental health services in Michigan. 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 providers, if you choose such control.

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 lifelong attitude. Recovery is unique to each individual and can truly only be defined by the individual themselves. What might be recovery

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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 not a failure, rather a challenge. If a relapse is prepared for, and the tools and skills that have been learned throughout the recovery journey are used, a person can overcome and come out a stronger individual. 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.

GLOSSARY

Access: The entry point to the Pre-Paid Inpatient Health Plan (PIHP), sometimes called an “access center,” where Medicaid beneficiaries call or go to request mental health services.

Adult Benefits Waiver (ABW): A Michigan health care program for certain low-income adults who are not eligible for the Medicaid program. Contact Customer Services for more information. This is a narrowly defined benefit that does not entitle you to all of the services and supports described in this handbook. The ABW service array is specifically outlined earlier in this book.

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

Beneficiary: An individual who is eligible for and enrolled in the Medicaid/ABW program in Michigan.

CA: An acronym for Substance Abuse Coordinating Agency. The CAs in Michigan manage services for people with substance use disorders.

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

Consumer: Broad, inclusive reference to an individual requesting or receiving mental health services delivered and/or managed by the PIHP, including Medicaid beneficiaries, and all other recipients of PIHP/CMHSP services.

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.

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Under this process, the medical expenses 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 Human Services – independent of the PIHP/CA service system.

Developmental Disability: Is defined by the Michigan Mental Health code as 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.

Fair Hearing: A state level review of beneficiaries' disagreements with CMHSP, CA or PHIP denial, reduction, suspension or termination of Medicaid services. State administrative law judges who are independent of the Michigan Department of Community Health perform the reviews.

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 services.

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

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 or her mental health, developmental disability or substance use (or any other medical) condition. Some services assess needs and some services help maintain or improve functioning. PIHPs are unable to authorize (pay for) or provide services that are not determined as medically necessary for you.

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 not eligible for the Medicaid program. This is a limited benefit. Contact Customer Services for more information.

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PIHP: An acronym for Pre-Paid Inpatient Health Plan. There are 10 PIHPs in Michigan that manage the Medicaid mental health, developmental disabilities, and substance abuse services in their geographic areas. All 10 PIHPs are also community mental health service programs.

Recipient Rights: The rights afforded to individuals receiving public mental health or substance abuse services in accordance with constitutional rights, the Michigan Mental Health Code, and Public Act 368 of 1978.

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.” This 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.

SED: An acronym for Serious Emotional Disturbance and as defined by the Michigan Mental Health Code means 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, school or community activities.

Serious Mental Illness: Is defined by the Michigan Mental Health Code to mean 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 function impairment that substantially interferes with or limits one or more major life activities.

Specialty Supports and Services: A term that means Medicaid-funded mental health, developmental disabilities, and substance abuse supports and services that are managed by the Pre-Paid Inpatient Health Plans.

Substance Use Disorder (or substance abuse): Is defined in the Michigan Public Health Code to mean the taking of alcohol or other 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.

ADVOCACY ORGANIZATIONS AND RESOURCES

The chart below provides the names and contact information for local, state, and national advocacy organizations and agencies. If you would more information about specific resources that may available in your local community, please contact your local Customer Services Department at the number listed at the bottom of this page.

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568

CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378

CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

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You can also contact 2-1-1's Community Information and Referral Service for information about help with food, housing, employment, health care, counseling, and more.

Agency/Organization	Website	Phone Number
Alcoholics Anonymous	www.aa.org	Visit website for local meeting information
American Red Cross	www.redcross.org	(800) 382-6382
ARC Michigan	www.arcmi.org	(800) 292-7851
Association for Children's Mental Health	www.acmh-mi.org	(800) 782-0883
Autism Society of Michigan	www.autism-mi.org	(800) 223-6722
Brain Injury Association of Michigan	www.biami.org	(800) 444-6443
Bureau of Services for Blind Persons	www.michigan.gov/lara	(800) 292-4200
Childhelp USA: National Child Abuse Hotline	www.childhelpusa.org	(800) 422-4453
Depression and Bipolar Support Alliance	www.dbsalliance.org	(800) 826-3632
Disability Network/Michigan	www.dnmichigan.org	See below for local agency information
<ul style="list-style-type: none"> • Disability Advocates of Kent County • Disability Connection/ West Michigan (Lake, Mason, Muskegon, and Oceana Counties) • Disability Network/ Lakeshore (Allegan and Ottawa Counties) 	www.disabilityadvocates.us www.dcilmi.org www.dnlakeshore.org	(616) 949-1100 (231) 722-0088 (616) 396-5326
Emotions Anonymous	www.emotionsanonymous.org	(651) 647-9712
Eating Disorders Anonymous	www.eatingdisordersanonymous.org	Visit website for local meeting information
Epilepsy Foundation of Michigan	www.epilepsymichigan.org	(800) 377-6226
Learning Disabilities Association of Michigan	www.laofmichigan.org	(888) 597-7809
Medicaid Helpline	www.medicaid.gov	(800) 642-3195
Medicare Helpline	www.medicare.gov	(800) 642-3195

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Michigan Disability Rights Coalition	www.copower.org	(800) 760-4600
Michigan Protection & Advocacy Service	www.mpas.org	(800) 288-5923
Michigan Rehabilitation Services	www.michigan.gov/mrs	(800) 605-6722
Michigan Statewide Independent Living Council	www.misilc.org	(800) 808-7452
Narcotics Anonymous Hotline	www.michigan-na.org	(800) 230-4085
National Alliance on Mental Illness of Michigan	www.namimi.org	(800) 950-6264
National Down Syndrome Society	www.ndss.org	(800) 221-4602
National Empowerment Center	www.power2u.org	(800) 769-3728
National Multiple Sclerosis Society	www.nationalmssociety.org	(800) 344-4867
National Parent Helpline	www.nationalparenthelpline.org	(855) 427-2736
National Rehabilitation Information Center	www.naric.com	(800) 346-2742
National Suicide Prevention Lifeline	www.suicidepreventionlifeline.org	(800) 273-8255
Schizophrenics and Related Disorders Alliance of America	www.sardaa.org	(866) 800-5199
Social Security Administration	www.ssa.gov	(800) 772-1213
United Cerebral Palsy Association of Michigan	www.ucpmichigan.org	(800) 828-2714
Veterans Administration <ul style="list-style-type: none"> • Benefits Hotline • Crisis Hotline • Women Veterans Hotline 	www.va.gov	(800) 827-1000 (800) 273-8255 (855) 829-6636

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A Guide to Guardianships and Advance Directives in Michigan

This booklet provides an overview of the different types of guardianships and advance directives that are available in Michigan.

This is intended only as a summary of guardianship and advance directives as they exist in Michigan. This is not intended to provide legal advice for your specific situation.

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GUARDIANSHIPS

The first few pages of this booklet will look at the different words and phrases which are used to describe guardians. Then, with a common understanding of the role of a guardian, we will look closer at Advance Directives and the role of a Patient Advocate.

Guardianships can be known by many words and phrases:

- Advance Directive
- Conservator
- Court as Guardian
- Durable Power of Attorney (DPA)
- Guardian Ad Litem (GAL)
- Guardian as Fiduciary
- Health Care Proxy
- Limited Guardianship
- Loco Parentis
- Michigan DNR
- Partial Guardianship
- Patient Advocate
- Plenary Guardianship
- Standby Guardian
- Temporary Guardian
- Testamentary Guardian

What is a Guardianship?

A guardianship is a relationship created by the Court. A guardian can be either a person or an organization. The guardian is given the power to make decisions about the care of another person. The court appoints a guardian when the person is legally unable to make some of their own decisions. It is important that you read your Court documents to understand what type of power your guardian has.

What powers can a Court grant your guardian?

A court can grant your guardian the power to:

- make health care decisions for you,
- determine where you live,
- arrange services for you,
- receive money belonging to you, and
- use your money for your care.

What is a Conservator?

A conservator is a type of guardian that is responsible for your financial affairs. A guardian can also have the powers of a conservator.

What is a Plenary Guardian?

A plenary guardian is someone who has the legal rights and powers of a full guardian over you, or your property, or both you and your property.

What is a Partial Guardian?

A partial guardian is someone who has *less* than all the legal rights and powers of a full guardian. The partial guardian's rights, powers and duties are clearly written in a court order. A partial guardian can also be known as a **Limited Guardian**.

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A partial guardian is only granted those powers and only for the amount of time necessary to provide for your specific needs.

A court order creating a partial guardianship will clearly explain the powers and duties of the partial guardian. This will permit the legally incapacitated individual to care for himself and his property as much as their ability will allow.

A legally incapacitated individual who has a partial guardian keeps all their legal and civil rights except those that have been specifically granted to the partial guardian by the court.

When a court appoints a partial guardian it means that the court has decided you cannot make certain decisions. But it is important to understand the court's order. You keep the power to make decisions unless the court gives that power to your guardian.

What is a Guardian ad Litem?

A guardian ad litem is a person appointed by the Court to examine a specific question and report to the Court. A guardian ad litem does not have authority to make decisions for the individual.

What is a Standby Guardian?

A standby guardian becomes a guardian when the original guardian dies or is not able to work as a guardian any more. The powers and duties of the standby guardian are the same as those of the original guardian.

What is a Testamentary Guardian?

A testamentary guardian is appointed by a parent or guardian of their minor or adult child with a developmental disability. This appointment would be made through the parents' or guardian's will.

What is a Temporary Guardian?

A temporary guardian is a guardian whose authority is for a short time only. The temporary guardian is usually appointed in an emergency.

What is Person in Loco Parentis (instead of the parent)?

A person in loco parentis is a person, not the parent or guardian of a child or minor, who has legal custody of the child or minor and is providing support and care for the child or minor.

What does 'Court as Guardian' mean?

The Court may be a temporary guardian under emergency circumstances if necessary for the welfare or protection of an individual if no other guardian has been appointed. The Court may appoint a temporary guardian if it prefers to.

Who may file a Petition for Guardianship and what is contained within it?

A petition for guardianship may be filed by an interested person or entity, or by the individual. The petition needs to describe the relationship and interest of the petitioner, as well as the name, date of birth and place of residence of the individual.

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The petition must also describe the facts and reasons for the need for guardianship. It should also provide the names and addresses of the individual's current guardian, and the individual's heirs.

How long will a Guardianship last?

The court decides how long a guardianship will last. A partial guardian is not appointed for longer than five years. When that five year term expires, a new petition for guardianship may be filed.

What does it mean if the Guardian has fiduciary duties?

When the court appoints a plenary guardian of the estate or a partial guardian with powers or duties for real or personal property, that guardian is considered a fiduciary.

A fiduciary has rights and powers which would normally belong to you. The fiduciary must make decisions that benefit you. A fiduciary must not let anything interfere with making good decisions for you.

Can a Guardian place an individual into a hospital?

A guardian does not have the power to place you into a hospital unless the court has specifically given the guardian that power.

Before the court authorizes placing someone into a hospital, the court will examine the appropriateness of the placement. The court will talk with your CMHSP to make sure the placement offers appropriate treatment and residential programs to meet your needs.

Who has the Power to Consent to Surgery for a Consumer?

A consumer of mental health services can not have surgery performed upon him or her unless consent is obtained from one of the following:

CONSUMER: if they are over 18 and do not have a guardian for medical purposes,

GUARDIAN: if the guardian is legally empowered to execute consent to surgery,

PARENT: who has legal and physical custody of the consumer, if the consumer is less than 18 years of age.

PATIENT ADVOCATE: under a Durable Power of Attorney for health care.

Who has the Power to Consent to Electroconvulsive Therapy (ECT)?

A consumer shall not be given ECT or a procedure intended to produce convulsions or coma unless consent is obtained from one of the following:

CONSUMER: if they are over age 18 and do not have a guardian for medical purposes,

GUARDIAN: if the guardian is legally empowered to execute consent to such a procedure,

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PARENT: who has legal and physical custody of the consumer, if the consumer is less than 18 years of age,

PATIENT ADVOCATE: under a Durable Power of Attorney for health care.

Can the Guardian authorize Medical Treatment?

Yes. A guardian can authorize certain medical treatment for you. For example, a guardian can authorize routine or emergency medical treatment.

Also, your guardian can authorize surgery or extraordinary procedures when the procedure is ordered by the court. Your guardian must consult with your physician. Your guardian must act in good faith and not be negligent.

What is an Extraordinary Procedure?

An extraordinary procedure can include things like:

- sterilization, including vasectomy
- abortion
- organ transplants from the ward to another person, and
- experimental treatment.

Who can make decisions about the donation of body parts?

Sometimes people want to donate their body or organs when they die. A competent adult may make a gift of all or a physical part of his or her body effective upon the individual's death.

Other individuals who may make such a decision are:

- Guardian
- Parent
- Patient Advocate - an adult son or daughter
- Spouse
- Adult Child - an adult brother or sister
- Adult brother or sister

ADVANCE DIRECTIVES

What is an Advance Directive?

As individuals we all value the right to make our own choices. We all want to choose our own health care treatment. But when we become sick, we may not be able to make some choices. An advance directive may help us with those choices. If we create an advance directive when we are healthy, it would help other people understand our choices when we are not healthy. An advance directive helps people understand the choice you want to make.

What are the advantages to having an advance directive?

Each of us has our own values, wishes, and goals. An advance directive provides you with assurance that your personal wishes or desires concerning medical and mental health treatment will be honored when you are unable to express them. Having an advance directive may also prevent the need for a guardianship imposed through Probate Court.

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Do I have to have an advance directive?

No. The decision to have an advance directive is purely voluntary. No family member, hospital or insurance company can force you to have an advance directive. No one can tell you what your advance directive should say if you decide to write one. You cannot be denied health care services because of your choice about an advance directive.

What if I choose not to have an advance directive?

An advance directive is voluntary. Someday you may not be able to make your own choices, but choices may still have to be made for you. Health care providers may make choices for you that do not like. Perhaps the Court will need to appoint a guardian to make choices for you. However, a hospital, nursing home or hospice provider cannot deny you services because you do not have an advance directive.

When should I review my advance directive?

Medical technology is always changing. The choices you make may also change. You should review your advance directive about once a year. When you review your advance directive, you may choose to keep it the same. You may choose to write a new advance directive. You may choose not to have an advance directive anymore. If you keep your original advance directive, you should put your initials and date at the bottom of it.

What are the responsibilities of health care providers?

Health care providers must tell you about your rights.

- You have the right to consent to health care treatment.
- You have the right to refuse health care treatment.
- You have the right to create an advance directive.
- A health care provider cannot force you to create an advance directive.
- If you create an advance directive, the health care provider needs to put a copy in your medical record.

Are there different types of advance directives?

Yes. There are three types of advance directives. Each type of advance directive accomplishes something different. It is important to understand the difference between these three types.

- 1) A **Durable Power of Attorney for Health Care** allows you to appoint someone to make decisions for you if you have a health care crisis. That person can be called an **agent**, a **patient advocate** or a **proxy**. These three names mean the same thing. Michigan courts will honor a durable power of attorney for health care.
- 2) A **Living Will** tells health care providers and the courts about your health care choices if you are not able to tell them yourself. Living wills usually deal with specific situations. Living wills may not be very helpful in all situations. Michigan Courts may look at a living will. But, the courts do not have to follow what a living will says.

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- 3) A **Do-Not-Resuscitate Order** says that you do not want anyone to attempt to help you if your breathing and heartbeat stops. This can also be called a **DNR**.

DURABLE POWER OF ATTORNEY FOR HEALTH CARE (DPA)

What is a Power of Attorney?

A Power of Attorney is a legal document. You would use it to give someone the power to make legal decisions for you. They can make your financial decisions. They can make health care decisions for you. Or, they can make both kinds of decisions for you.

What is a Durable Power of Attorney for Health Care?

A durable power of attorney (DPA) for health care is a legal document. You use it to give someone the power to make medical and/or mental health treatment and other personal care decisions for you, some of which include living wills, DNR orders or decisions about tissue or organ donation. It is also referred to as a **Medical Care Advance Directive**.

A durable power of attorney for health care may also be called a **health care proxy**. The person you appoint to make decisions for you is your **patient advocate** or **agent**. Your patient advocate makes health care decisions for you if you are not able to make them yourself.

What is a Durable Power of Attorney for Mental Health Care?

It is a tool used to make decisions before a crisis happens which may cause you to become unable to make a decision about the kind of mental health 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. It is also referred to as a **Psychiatric Advance Directive**.

Is a DPA for health care legally binding in Michigan?

Yes. Michigan law gives you the right to appoint a patient advocate. Your patient advocate helps make health care decisions for you when you are not able to make them yourself.

Who may create a durable power of attorney for health care?

To make a durable power of attorney, you must be an adult. You must also be legally competent.

What is my decision maker called?

That person is known as your **Patient Advocate.** He could also be called your **agent** or your **proxy**. **These names mean the same thing.**

Who can I appoint as my patient advocate?

Your patient advocate can be any adult. Your patient advocate could be your spouse. Or, your patient advocate could be an adult child or friend.

When can the patient advocate act in my behalf?

Your patient advocate makes health care choices for you only when you are unable to. You make your own choices as long as you are able to.

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What powers can I give my patient advocate?

You can give your patient advocate complete power to make decisions for you. You can give your patient advocate power to accept or refuse medical treatment for you. This can include arrangements for home health care or day care. It can also include decisions about nursing home care. You can give your patient advocate as much power as you want.

Will my patient advocate be able to consent to a forced administration of medication?

Sometimes a doctor may want you to take medication against your will. Sometimes a doctor may want to have you go into a hospital against your will. Your patient advocate cannot give permission for these things unless you have given him that power.

Will my patient advocate have power to handle my financial affairs?

Your patient advocate can handle your money and use your money to pay bills. If you want your patient advocate to handle your money, you should speak with a lawyer.

How do I make a valid durable power of attorney for health care?

A valid durable power of attorney for health care must have three things.

- The paper must be in **writing**.
- You need to **sign the paper**.
- You need to have **two witnesses**.*

* The witnesses cannot be related to you, your patient advocate cannot be a witness, and the witnesses cannot be employed by your health care provider.

Does the Durable Power of Attorney form have to look a certain way?

No. There are many organizations with free forms you can use. Or, you could create your own form. Make sure you type or print clearly (see websites in the back of this booklet).

Can I write my health choices out on my Durable Power of Attorney form?

Yes. For example, you might describe the type of care you want when you are not able to make decisions. You might say that you do not want to be placed in a nursing home. You may say that you prefer a specific placement if it becomes necessary. Your patient advocate has a duty to try to follow your wishes.

Is it important to express my wishes in the durable power of attorney for health care document?

Yes. Your wishes cannot be followed if someone does not know about them. It is harder for your advocate to do their job if they don't know what your wishes are.

What if I do not express any specific wishes?

If you do not tell your advocate what you want, he has to use his best judgment. A probate court may have to help decide what decisions are made for you.

Once I sign a durable power of attorney for health care, may I change my mind?

Yes, absolutely.

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- You may want to choose a different patient advocate.
- You may change your mind about some choices in your document.
- You can sign a new document as long as you are of sound mind.
- If you create a new document, you should destroy the old one.
- You can cancel your durable power of attorney for health care any time you want and in any way you are able to.

What if there is a dispute about how my durable power of attorney for health care should be carried out?

If someone disagrees with the choices your patient advocate makes, the probate court may get involved. If the court believes your patient advocate is not doing their job properly it can remove the patient advocate.

LIVING WILL

What is a Living Will?

A living will is used to tell care-givers and family members **what kind of health care you want**. Living wills are used when a person is not able to communicate their choices about their health care.

Is a living will legally binding in Michigan?

No. Living wills are not legally binding in Michigan. You are allowed to have a living will. However, the courts do not have to obey the directions of a living will.

What is the main difference between a durable power of attorney for health care and a living will?

A living will is like a durable power of attorney, **but living wills do not create a patient advocate**. Living wills only talk about **what your decisions for health care are**.

A living will only works during an end of life illness or during permanent unconsciousness. A durable power of attorney for health care can work even if you are only temporarily unable to make your own health care decisions.

Can my durable power of attorney for health care be similar to a living will?

Yes. Your durable power of attorney can be very similar to a living will. You can guide the choices your patient advocate will make for you. It is a good idea to give your patient advocate written instructions.

DO-NOT-RESUSCITATE ORDER (DNR)

What is a Do-Not-Resuscitate Order (DNR)?

A DNR is a special kind of advance directive. Some people do not want any special care made to prolong their life. A DNR tells care givers not to give you extra care if your heart stops or if your breathing stops.

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Northern Michigan Substance Abuse Services, Inc. (CA) - call (989) 732-1791 or (800) 686-0749

Who may complete a do-not-resuscitate form?

You may complete a DNR if you are **older than 18 and competent** (in other words, the Court has not declared you incompetent). You should also discuss this with your doctor.

Where do I get a DNR form?

The forms are available from most hospices.

What happens to the DNR form after I sign it?

You should keep the DNR form where you can find it. It should become part of your medical record. You should tell your family that you signed a DNR. Tell them where to find it. You may also choose to wear a DNR bracelet.

Can I be forced to sign a DNR?

No, absolutely not.

- No one can force you to sign a DNR statement.
- No one can refuse to provide treatment because you signed a DNR statement.
- No one can refuse to provide treatment because you would not sign a DNR statement.

Can I change my mind after I sign a DNR form?

Yes. Like any type of advance directive, you can change your mind. You may cancel your DNR at any time and in any way you can.

Can my insurance coverage be changed if I sign a DNR?

No. Your insurance will not change because you create a DNR. Your insurance will not change because you choose not to create a DNR.

Have DNRs recently changed?

Yes. In the past you could only have a DNR if you were in the hospital. Now you can have a DNR outside of the hospital. You may choose to wear a DNR bracelet. The bracelet lets people know what your choices are.

Can a guardian of an adult ward sign an advance directive under the Michigan Do-Not-Resuscitate (DNR) Procedure Act?

Only a competent adult can sign a DNR for themselves. A guardian **cannot** sign a DNR for you.

Where should a DNR be kept?

- Your patient advocate should have a copy of the document.
- Your doctor should have a copy.
- You should keep a copy for your personal records.
- Let your care-givers know who you have chosen as your patient advocate.
- Also let your family members know who you have chosen as your patient advocate.
- A copy of your DNR should be kept in your medical record.

TO REACH YOUR LOCAL CUSTOMER SERVICES STAFF

Allegan County CMH - call (269) 686-5124 or (877) 608-3568

CMH of Ottawa County - call (616) 494-5545 or (866) 710-7378

CMH Services of Muskegon County - call (231) 720-3201 or (877) 724-4440

Network180 (CMH and CA) - call (866) 411-0690

West Michigan CMH - call (866) 575-2894

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Is it important to be specific when I write my end of life instructions?

It is very important to be as specific as possible when listing what treatments you do not want. If you are not very clear, there is a danger that a vague description will be misunderstood and you may be denied treatment that you do want.

You should review your choices with your patient advocate to make sure your choices are understood.

For further information regarding advance directives, contact:

State Bar of Michigan at:

<http://www.michbar.org/>

Blue Cross Blue Shield of Michigan at:

http://www.bcbsm.com/member/establishing_advance_directive/advance_directive_faq.shtml

Hospice of Michigan at:

<http://www.hom.org/?s=advance+directive>

Michigan Department of Community Health at:

<http://www.michigan.gov/mdch>

The Will to Live Project (click on "Will to Live") at:

<http://www.nrlc.org/euthanasia/willtolive/>

For further information regarding guardianship options, contact your local Probate Court.

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