

# Consumer Handbook

An Orientation to Services



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***The Southwest Michigan Urban and Rural Consortium***

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- ★ Allegan County Community Mental Health Services
  - ★ Cass County Community Mental Health  
*Woodlands Behavioral Healthcare Network*
  - ★ Kalamazoo Community Mental Health and Substance Abuse Services
  - ★ Community Mental Health of St. Joseph County
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## TABLE OF CONTENTS

<b>TOPIC</b>	<b>PAGE</b>
Welcome to the Southwest Affiliation	3
What is Customer Services?	3
Important Safety Information	4
Contact Information for the CMH's of the Southwest Affiliation	5-8
Allegan County Community Mental Health Services	5
Cass County Community Mental Health - Woodlands Behavioral Healthcare Network	6
Kalamazoo Community Mental Health and Substance Abuse Services	7
Community Mental Health of St. Joseph County	8
Glossary or Definition of Terms	9-11
Emergency Services	11-12
Service Eligibility	11
Types of Services available	13-18
Service Notification	18
Person-Centered Planning – Including Independent Facilitation	19-20
Medical Advance Directives	20
Psychiatric Advance Directives	20
Crisis Plan	20
Self Determination	20
Consent for Treatment	21
Services Available through Medicaid (for beneficiaries of Medicaid)	21
Medicaid Health Plans	22
Coordination with Health Care	21
Accommodations to Receive Services	22-23
Discharge from Services	23
Fees for Services	24
Privacy of Mental Health and Substance Abuse Service Information	25
Rights and Responsibilities	25-28
Filing Complaints about Services	29-30
Recovery and Resiliency	30
Providing Input / Expressing Opinions about Care	31
Managed Care	32
Provider Network	32
Choosing a Provider	32
Suspected Violations	33
Community Resources	34-35

## Welcome to Community Mental Health and Substance Abuse Services

This handbook gives you important information about Community Mental Health and Substance Abuse Services in the counties of Allegan, Cass, Kalamazoo, and St. Joseph. These counties are working together as a Pre-Paid Inpatient Program to provide quality mental health and substance abuse services in Southwest Michigan. In this book we will refer to this affiliation of counties as the *Southwest Consortium*.

Please see pages 5-8 for information about how to contact each CMH.

Please read this handbook carefully. It will help you understand your rights and responsibilities as a consumer of mental health and/or substance abuse services. The handbook will answer questions you may have. The information will also help you make decisions about the services and supports you and your family will receive.

The Mission of the Southwest Consortium is to promote mental health and substance abuse services that empower people to succeed.

### The Southwest Consortium

- ✓ values the provision of creative approaches that are driven by consumer needs and desires and are person/family centered and strength based
- ✓ values a high quality, effective, efficient consumer driven service system
- ✓ values partnerships with the community and between consumers, families and providers so that the experience and wisdom of all concerned is recognized, respected and included
- ✓ strives to ensure that services delivered within the system are accessible, timely, appropriate, caring, respectful and efficient
- ✓ does not participate in any physician incentive plans – either as an affiliation, partner CMH, or at any service provider level
- ✓ all affiliation member CMH's are accredited organizations by the Commission of Accreditation of Rehabilitation Facilities (CARF).
- ✓ The programs and services of the Southwest Consortium are funded in part by the State of Michigan Department of Community Health.

## WHAT IS CUSTOMER SERVICES?

Our customer service staff are available to answer your questions and help you:

- Review the content of this handbook
- Find out more about our services and supports
- Get answers to your questions
- Understand more about your benefits
- Learn how to get services
- Find a provider
- Understand your rights
- Make a complaint

You can contact customer services staff as outlined on pages 5-8 or you can call 1-888-553-7160. You can leave a message at that number any time our offices are closed. We will call you back at a time that is convenient for you. You can also contact customer services any time through [www.kazoocmh.org](http://www.kazoocmh.org).

## Important Safety Information:



**Smoking** is prohibited within facilities of the Southwest Consortium. Each building has designated smoking areas. You will find ashtrays in these areas.

Possession of any of the following items is prohibited in any of our facilities:



**Alcohol** in any form (beer, wine and liquor).



**Illegal drugs** prohibited from sale or distribution by federal and state laws.



**Illegal Weapons** including guns, knives, bombs and any other item designed to inflict harm.  
(*Public Safety Officers required to carry weapons are exempted.*)



For the health and safety of the people served, each program site has evacuation maps, fire extinguishers, and first aid kits available if they are needed. If you have any questions, please ask the staff working with you. Staff can review safety precautions, procedures and rules with you. In the event of a drill or actual emergency situation, everyone is expected to cooperate with directions that are given.



Allegan CMH offices are open 8:00 am to 5:00 pm Monday through Friday. (Excluding Holidays).

Some services have evening hours. Staff can share specific hours of operations with you.

**VISION:** Allegan County Community Mental Health Services works in collaboration with the community to create an environment where support and encouragement are available for those who are confronting the challenges of life.

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

**GUIDING VALUES:**

- ▶ Person Centered Focus
- ▶ Dignity and Respect
- ▶ Community Collaboration
- ▶ Accessibility
- ▶ Diversity
- ▶ Responsiveness
- ▶ Commitment to Quality

How to contact us:

**Administrative Offices**  
**Contract Management**  
**Reimbursement/Billing**  
**Training Center**

3283 122<sup>nd</sup> Avenue / PO Drawer 130  
Allegan MI 49010  
269-673-3384

**Customer Services**  
3283 122<sup>nd</sup> Avenue  
269-686-5124 or 1-800-795-6617 ext. 2720

**Supports Coordination**  
**Adult Community Connections**  
**Career Concepts**  
**Benefits Management**  
277 North Street  
Allegan MI 49010  
269-673-5092

**Medical Director**  
**Access to All Services**  
**Services for Adults with Mental Illness**  
**Prevention Services**  
**Services for Children w/ Severe Disturbance**  
**Substance Abuse Services**  
3285 122<sup>nd</sup> Avenue / PO Drawer 130  
Allegan MI 49010  
269-673-6617 or 1-800-795-6617  
TDD: 269-673-0565

**Recipient Rights**  
269-628-5715

For Emergency Services, please call 269-673-6617 or 1-800-795-6617.  
Emergency services are available 24 hours a day, 365 days a year.



www.woodlandsbhn.org

**BEHAVIORAL HEALTHCARE NETWORK**  
Community Mental Health Services of Cass County

Woodlands' offices are open 8:30 am to 5:00 pm  
Monday through Friday (excluding holidays)

Some services have evening hours by appointment

**Mission:**

*Woodlands encourages people to realize their potential.*

**Vision:**

*Woodlands will continue to be the local provider of quality behavioral health services.*

**Values:**

- *Woodlands supports people who have behavioral healthcare needs.*
- *Woodlands depends on competent and enthusiastic staff.*
- *High quality is critical.*
- *Woodlands will maintain a productive work environment.*
- *Community involvement is important.*

**Administrative Offices:**

- **Recipient Rights**
- **Medical Director**
- **Reimbursement/Billing**
- **Contract Management**
- **Prevention Services**
- **Access to Services**
- **Customer Services**
- **Services for Adults with Mental Illness**
- **Services for Children with Severe Emotional Disturbances**
- **Services for Persons with Developmental Disabilities**

960 M-60 East

Cassopolis, MI 49031

269-445-2451 or 1-800-323-0335

fax: 269-445-3216

**Substance Abuse Services**

17321 M-60 East

Vandalia, MI 49095

269-476-9781

fax: 269-476-9783

**For Emergency Services, please call 269-445-2451 or 1-800-323-0335.**

Emergency services are available 24 hours a day, 365 days a year.

**TTY 1-800-323-0335**



[www.kazoocmh.org](http://www.kazoocmh.org)

KCMHSAS offices are open 8:00 am to 5:00 pm Monday through Friday. (Excluding Holidays)  
Some services may have extended evening hours.

**VISION:** To demonstrate excellence in providing and managing the integrated behavioral healthcare system in order to serve a broad spectrum of individuals and families.

**MISSION:** To promote mental health and substance abuse services that empower people to succeed.

**WE VALUE:**

- The provision of creative approaches that are driven by consumer needs and desires, are person/family centered and strength based.
- A high-quality effective, efficient, consumer-driven service system.
- Partnerships with the community and between consumers, families, and providers, so that the experience and wisdom of all concerned is recognized, respected and included.

**Administrative Offices**  
**Recipient Rights**  
**Contract Management**  
**Reimbursement/Billing**  
**Prevention Services**  
**Substance Abuse Coordinating Agency**  
3229 Gull Road 1W 4F  
Nazareth MI 49074  
269-553-8000

**Services for Adults with Mental Illnesses**  
3299 Gull Road 1W 4F – Nazareth MI 49074  
269-553-8000

**Services for People with Developmental Disabilities**  
3299 Gull Road 1W 3F – Nazareth MI 49074  
269-553-8060

**Services for Children**  
432 Crosstown Parkway – Kalamazoo MI 49001  
269-553-8110

**Access to All Services**  
**Peer Support Services**  
418 W Kalamazoo Ave  
Kalamazoo MI 49007  
269-373-6000 or 1-888-373-6200  
TTY 269-382-0847  
**Psychiatric Services**  
**Medical Director**  
269-553-7037  
**Customer Services**  
269-553-7000 or 1-888-553-7160  
**Training Center**  
269-553-7148

For Emergency Services, please call 269-373-6000 or 1-888-373-6200.  
Emergency services are available 24 hours a day, 365 days a year.

COMMUNITY MENTAL HEALTH OF ST. JOSEPH COUNTY

210 SOUTH MAIN STREET  
THREE RIVERS, MI 49093  
269-273-5000



**VISION:** Community Mental Health of St. Joseph County will be the public mental health agency, providing an excellent system of care for citizens in need.

**MISSION:** We enhance the lives of citizens we serve by providing a range of individualized mental health services.

**VALUES:** We believe in:

- a positive healing organization;
- customer centered services;
- community based services;
- accessible services;
- quality outcome based services;
- employee competence, friendliness, helpfulness.

**Administration Offices**

206 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 315

**Customer Services**

210 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 307

**Contract Management**

210 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 308

**Services for Adults with Mental Illness**

**Medical Director**

210 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 323

**Access to All Services**

210 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 340

**Recipient Rights**

206 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 412

**Reimbursement/Billing**

206 South Main Street  
Three Rivers, MI 49093  
269-273-5000 ext. 360

**Services for Children with Severe  
Emotional Disturbances**

677 E. Main  
Centreville, MI 49032  
269-467-4810

St. Joseph County CMH offices are open:  
8:00am to 5:00pm Monday thru Friday (excluding holidays)  
Some services may have extended evening hours.

For Emergency Services, please call 1-800-622-3967, available 24 hours a day.

## Glossary or Definition of Terms

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

**Adult Benefits Waiver:** Michigan health care program for certain low-income adults who are not eligible for the Medicaid program. Contact Customer Service 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.

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

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

**CA:** An acronym for Substance Abuse Coordinating Agency. The CAs in Michigan manage services for people with substance use disorders. Kalamazoo Community Mental Health and Substance Abuse Services is the CA for our affiliated county agencies.

**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. *All of our 4 affiliated county agencies are CMHSP’s.*

**Fair Hearing:** A state level review of beneficiaries’ disagreements with health plans’ 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.

**Deductible (or Spend-Down):** A term used when individuals qualify for Medicaid coverage even though their countable incomes are higher than the usual Medicaid income standard. Under this process, the medical expenses that an individual incurs during a month are subtracted from the individual’s income during that month. Once the individual’s income has been reduced to a state-specified level, the individual qualifies for Medicaid benefits for the remainder of the month.

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

birth to age five, a substantial developmental delay or a specific congenital or acquired condition with a high probability of resulting in a developmental disability.

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

**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/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.

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

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

**PIHP:** An acronym for Prepaid Inpatient Health Plan. There are 18 PIHPs in Michigan that manage the Medicaid mental health, developmental disabilities, and substance abuse services in their geographic areas. All 18 PIHPs are also community mental health services programs. *Together, our affiliated counties form a PIHP.*

**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.

**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.

**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.

**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.

## Who is eligible to receive services?

If you are having problems in any of the following areas you may be eligible for mental health or substance abuse services:

- emotional distress
- substance abuse
- developmental disability (as defined by the Michigan Mental Health Code)
- issues that interfere with relationships or daily functioning
- risk of suicide
- behavioral
- family or marital

If you think you need mental health or substance abuse services, call your local CMH. Staff will help you get started. See pages 5-8 for phone numbers.

## How can I get services in an emergency or crisis?

If you have a life-threatening emergency always call 9-1-1 right away.

A "mental health emergency" is when a person is experiencing a serious mental illness, or a developmental disability, or a child is experiencing a serious emotional disturbance and can reasonably be expected in the near future to harm him/herself or another, or because of his/her inability to meet his/her basic needs is at risk of harm, or the person's judgment is so impaired that he or she is unable to understand the need for treatment and that their condition is expected to result in harm to him/herself or another individual in the near future.

You have the right to receive emergency services at any time, 24-hours a day, seven days a week, without prior authorization for payment of care.

If you have a mental health emergency, you should seek help right away.:

- Call the emergency number for your CMH office

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Emergency Assistance is ALWAYS available:

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Allegan	269-673-6617 or 1-800-795-6617
Woodlands	269-445-2451 or 1-800-323-0335
Kalamazoo	269-373-6000 or 1-888-373-6200
St Joseph	269-273-5000 or 1-800-622-3967

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*You can walk-in to any CMH office during business hours*

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- Go to any hospital or other setting that offers emergency care

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Area Hospitals you can go to:

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Allegan General	555 Linn Street in Allegan (269) 673-8424
Bronson Methodist	601 John Street in Kalamazoo (269) 341-7654
Borgess Medical Center	1521 Gull Road in Kalamazoo (269) 226-7000
Sturgis Hospital	916 Myrtle Street in Sturgis (269) 651-7824
Three Rivers Health	701 S. Health Parkway in Three Rivers (269) 278-1145
Holland Community	602 Michigan Avenue in Holland (616) 394-3507
Borgess/Lee Memorial	420 W. High Street in Dowagiac (269) 782-8681
Lakeland Regional Health System	31 N. St. Joseph Avenue in Niles (269) 683-5510

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Even though you do not need prior authorization for emergency care, you need know that if you use emergency services at a hospital, you may be responsible to pay for the services you get from the emergency room doctors while you are there. Also, you may be asked to pay any co-pays you have with your Medicaid or other insurance coverage.

### **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.

## What types of services are available?

### MENTAL HEALTH MEDICAID SPECIALTY SUPPORTS AND SERVICES DESCRIPTIONS

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

Before services can be started, you will take part in an assessment to find out if you are eligible for services. It 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, and not all services are available to everyone we serve. If a service cannot help you, your Community Mental Health will not pay for it. Medicaid will not pay for services that are otherwise available to you from other resources in the community.

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.

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

[www.mdch.state.mi.us/dchmedicaid/manuals/MedicaidProviderManual.pdf](http://www.mdch.state.mi.us/dchmedicaid/manuals/MedicaidProviderManual.pdf).

**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.

**Assessment** includes a comprehensive psychiatric evaluation, psychological testing, substance abuse screening, or other assessments except for physical health, conducted to determine a person's level of functioning and mental health treatment needs.

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

**Behavior Management Review:** If a person's illness or disability involves behaviors that they or others who work with them want to change, their individual plan of services

may include a plan that talks about the behavior. This plan is often called a “behavior management plan.” The behavior management 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 that 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.

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

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

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

**Extended Observation Beds (or 23-hour stay units)** are used to stabilize a mental health emergency when a person needs to be in the hospital for only a short time. An extended observation bed allows hospital staff to observe and treat the person’s condition for up to one day before they are discharged to another community-based outpatient service or admitted to the hospital.

**Family Skills Training** is education and training for families who live with and or care for a family member who is eligible for specialty services or 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 things like mental health therapy, crisis intervention, service coordination, or other supports to the family.

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

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

**Intermediate Care Facility for Persons with Mental Retardation (ICF/MR)** provide 24-hour intensive supervision, health and rehabilitative services and basic needs to persons with developmental disabilities. The state of Michigan has one ICF/MR called the Mt. Pleasant Center.

**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 medicines used to treat a person’s mental health condition, their effects, and the need for continuing or changing their medicines.

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

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

**\*Occupational Therapy** includes the evaluation by an occupational therapist of an individuals’ 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.

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

**\*Physical Therapy** includes the evaluation 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.

**\*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.

**Substance Abuse Treatment Services** (descriptions follow the mental health services on page 18)

**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/her choosing in the development and periodic review of the individual plan of services.

**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 Only

Some Medicaid beneficiaries are eligible for special services that help them avoid having to go to an institution for people with developmental disabilities or nursing home. These special services are called the Habilitation Supports Waiver and the Children's Waiver. 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:

**Chore Services (for Habilitation Supports Waiver enrollees)** are provided by paid staff to help keep the person's home clean, and safe.

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

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

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

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

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

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

## Services for Persons with Substance Use Disorders

The Substance Abuse treatment services listed below are covered by Medicaid. These services are available through KCMHSAS.

**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 counseling for the individual, and family and group therapy in an office setting.

**Intensive Outpatient (IOP)** 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 abuse 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.

## How will I know what services I will be getting?

Services you request must be authorized or approved by the CMH you are working with. That agency may approve all, some or none of your requests. Authorizations are made according to medical necessity. 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. If you do not agree with a decision that denies, reduces, suspends or terminates a service, you may file an appeal.

The Notice form you get about any denial, suspension, reduction, or termination of services will tell you:

- The action your CMH or provider agency (if different) has taken or intends to take
- The reasons for the action
- Your right to request a second opinion if we deny services to you at the time you access/start services
- How to exercise your right to file an appeal if additional services are denied
- When and how you can ask for an expedited decision if you file an appeal

## What is Person-Centered Planning?

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

The process begins when you determine whom, beside yourself, you would like at the person-centered planning meetings, such as family members or friends, and which 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 supports, 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.

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 that someone other than the staff working with you conduct your planning meetings. An Independent Facilitator is a person trained to lead meetings. Our affiliation keeps a list of approved facilitators that you can pick from. You have the right to choose from available independent facilitators. The Independent Facilitator will meet with you to plan the meeting topics and to understand the types of things you want and do not want to talk about.

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.

### What if I cannot get the services I asked for?

If your CMH or provider agency cannot give you a specific service, will another service or support help you to reach your goals? Together, you can talk about options.

Are there limits on Person-centered planning? The services offered by your CMH or provider agency are set by best practice guidelines. From the services available, you will be offered a variety of service choices. However, there may be limits on some of your choices:

- Your choices must not do harm to you or someone else
- Your choices must not be illegal

## Topics Covered during Person-Centered Planning

During person-centered planning, you will be told about medical advance directives, 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.

### **Medical Care Advance Directives**

Also referred to as Durable Power of Attorney for Health Care. This advance directive is a tool for you to use to tell people of your wishes for your care. Some of the decisions you can make include, living wills, do not resituate (DNR) orders, or decisions about tissue or organ donation.

### **Psychiatric Advance Directive**

Adults have the right, under Michigan law, to a “**psychiatric advance directive.**” This type of Advance Directive is also referred to as a Durable Power of Attorney for Mental Health Care. 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.

All Advance Directive decisions are voluntary. If you do create an advance directive, you should give copies to:

- All providers caring for you
- People you have named as a Medical or Mental Health Patient Advocate
- Family members or trusted friends who could help your doctors and behavioral health providers make choices for you if you cannot make those choices

### **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 you become unable to make decisions and care for yourself. The crisis plan would give information and direction to others about what you would like done in the time of crisis. Examples are friends or relatives to be called, preferred medicines, or care of children, pets, or bills.

### **Self-determination**

Self-Determination (SD) is a belief that people should have power and control of their lives to make their own choices, be part of their communities, have meaningful relationships. 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.

## What is “consent for treatment”?

You, or your legal guardian, must sign a “consent for treatment” form giving permission for you to begin receiving services from your CMH or chosen provider agency.

To give you certain services, we may need to get your specific permission. You will be given information about the service so you can decide if you want that service or not. An example of this is medication. If the staff working with you think medication will help, they will tell you about the benefits and risks of taking the medication and ask you to sign a consent form if you want to take the medication.

## Is it important to tell my doctor about my mental health or substance abuse services?

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 Customer Services and the staff will assist you in getting a medical provider.

Typically, we contact doctors when you start services, are hospitalized for a psychiatric emergency, have a change in medications we prescribe, or have a change in the services we are providing to you.

## Other Medicaid Covered Services

If you receive Medicaid, you may be entitled to additional medical services that are not listed on page 22. Services necessary to maintain your physical health are provided or ordered by your primary care doctor. If you receive Community Mental Health services, your local community mental health services program will work with your primary care doctor to coordinate your physical and mental health services. If you do not have a primary care doctor, your local community mental health services program will help you find one.

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

County	MDHS phone number
Allegan	269-673-7700
Cass	269-445-0200
Kalamazoo	269-373-5200
St. Joseph	269-467-1200

## 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)
- Transportation to medical appointments
- Lab and X-rays
- Nursing Home Care
- Medical Supplies
- Medicine
- Mental Health
- Physical and Occupational Therapy
- Prenatal Care and Delivery
- Surgery
- Vision

If you already are enrolled in one of the health plans listed below 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 our Customer Services staff for assistance.

PLAN	COUNTIES COVERED	CUSTOMER SERVICES And WEB SITE
Health Plan of Michigan	Kalamazoo, Allegan, Cass, St. Joseph	Member Services 1-888-437-0606 <a href="http://www.hpmich.com">www.hpmich.com</a>
Community Choice Michigan	Kalamazoo, Allegan, Cass, St. Joseph	Service Center 1-800-390-7102. <a href="http://www.ccmhmo.org">www.ccmhmo.org</a>
Great Lakes Health Plan	Kalamazoo, Cass, St. Joseph	Customer Services 1-800-903-5253 <a href="http://www.glhp.com">www.glhp.com</a>
Priority Health	Allegan	Customer Services Department 1-888-975-8102 <a href="http://www.priority-health.com">www.priority-health.com</a>
Molina Healthcare of Michigan	Allegan	Member Services Department 1-888-898-7969 <a href="http://www.molinahealthcare.com">www.molinahealthcare.com</a>

## What if I need help or accommodations to participate in services?

### LANGUAGE ASSISTANCE

If you use a TTY, please contact your local CMH via the TTY numbers listed on pages 5-8. The Michigan Relay Center serves persons who are hearing-impaired, hard-of-hearing, or speech-impaired and use a keyboard device or Teletypewriter (TTY) to contact a Relay Representative. More info avail at [www.michiganrelay.com](http://www.michiganrelay.com) or call them toll-free 800.649.3777 or simply dial 711.

If you need a sign language interpreter, contact the customer services office at your CMH 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 customer services so that arrangements can be made for an interpreter for you. Language interpreters are available at no cost to you.

We work with a variety of providers and agencies to offer interpretation and translation services. If our written materials are not available in your language, we will provide verbal translation of the materials in a language you understand. Some of our materials are available in Braille or audiotape.

## ACCESSIBILITY AND ACCOMODATIONS

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

If you need to request an accommodation on behalf of yourself or a family member or a friend, you can contact customer services. 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.

## TRANSPORTATION

If you are unable to provide your own transportation or use public transportation, please let us know. We can assist you to make arrangements for getting to your appointments.

## When will I be discharged from services?

As part of Person-Centered Planning, your mental health professional will ask you what changes you want or need in your life. The things that you want and need will be part of the services you get. These changes will also be used to know when you are ready to leave services.

Some situations that may result in discharge from services include:

- Meeting your desires and goals
- Not keeping scheduled appointments
- Making threats against staff
- Destroying property
- Bringing illegal drugs to appointments
- Bringing illegal weapons to your appointments
- You move out of the service area.
- No longer meeting clinical status/medical necessity criteria
- You enter a facility that makes you ineligible for services
- A change in your insurance company, policy, or program. Sometimes, we may need to refer you to a provider under your company to cover the services you need. Our staff will help you with referrals to a new service provider if this is necessary.

You will get a notice at least **12** days before services will be reduced, suspended or terminated. Unless:

- You tell your provider on paper that you no longer want services
- Your services are ending as it was written in your Plan of Service
- Your mail is returned and the provider does not know where you are
- You enter a facility that makes you ineligible for services (like jail or a hospital)
- You move and start to get services outside of our CMH's area
- If waiting 12 days will endanger your or someone else's health or safety

## Do I have to pay for behavioral health services I get?

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.

If you are a Medicaid beneficiary with a deductible ("spend-down"), as determined by the Michigan Department of Human Services (DHS), you may be responsible for the cost of a portion of your services.

Michigan law requires your CMH to bill all insurance companies for the services provided. "Insurance" includes Medicaid, Medicare, and any private insurance you may have. Your CMH will bill your insurance company at the full cost of your services. You will be responsible for any balance **not** paid by your insurance company, up to your ability to pay. If you do not want your insurance company billed, you will be asked to pay the full cost of services.

How is my share of the fees determined? The amount you must pay for most services (your "ability to pay") is set based on your state taxable income.

What must I do to help determine my share of the fees? To help set an affordable fee for you, please:

- Provide the information requested to set your fees. This might include pay stubs, income tax records, and proof of expenses.
- Provide information about any health insurance you may have for yourself, your spouse, or your kids.
- Tell us of changes in your insurance or finances.

You must pay your share of your fees up to the cost of services or your ability to pay, whichever is lowest. By law, your fees must be reviewed yearly as long as you or your family members are receiving services.

What if I disagree with the fees that I am asked to pay? If you feel you cannot pay your ability to pay, you may ask for a *redetermination*. A redetermination is a review of your ability to pay. It requires detailed information about your income and expenses. This information will provide a better look at your financial situation. Your ability to pay may be reduced, increased, or remain the same after a redetermination.

If you have questions about service fees, contact your CMH.

## Is my behavioral health information private?

The agencies authorizing and/or providing services to you must follow laws and requirements about Confidentiality and Privacy. These laws and other requirements include:

- Michigan Mental Health Code for Mental Health Services
- Rule 42 of the Central Federal Register (42 CFR Part 2) for Substance Abuse Services
- Health Insurance Portability and Accountability Act (HIPAA)

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 you do not like. 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.

**Family Access to Information.** Family members have the right to provide information about you. However, without a Release of Information signed by you, the staff and agency working with you may not give information about you to a family member. For minor children under the age of 18 years, parents or guardians with legal custody are provided information about their child and must sign a release for information to be shared with others.

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

Under HIPAA (Health Insurance Portability and Accountability Act), you will be provided with an official Notice of Privacy Practices from your community mental health services program. 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 feel your confidentiality rights have been violated, you can call the Recipient Rights Office where you get services.

## What are my Rights and Responsibilities while receiving Mental Health and/or Substance Abuse Services?

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 treatment suited to condition

More information about your many 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 *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.

You may contact your local community mental health services program to talk with a Recipient Rights Officer about any questions you may have about your rights or to get help to make a complaint. Please see pages 5-8 for the contact information of your CMH’s Recipient Rights Office. Or, you can call Customer Services for help with a Recipient Rights issue.

**Freedom from Retaliation.** If you use 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.

## CONSUMER BILL OF RIGHTS

As a recipient of Mental Health or Substance Abuse services,

**You have the right** to be told how much you will be charged for your treatment based on your ability to pay, and you may appeal in the event you disagree with that amount.

**You have the right** to be treated with dignity and respect in a safe and clean treatment environment.

**You have the right** to have assistance in locating and obtaining additional available community resources, such as; shelter, food, clothing, medical care, legal assistance, educational opportunities, recreational opportunities, inpatient services, residential services, psychiatric services, dental services, rehabilitative services, vocational services, transportation services, case management to provide access to needed services, family planning and health information services, and other necessities of life. Referral assistance to available family planning and health information services will be provided on request. Receiving mental health services does not depend on requesting or not requesting family planning or health information services.

**You have the right,** to stop treatment with your CMH at any time, unless your treatment is court ordered.

**You have the right,** to make your own decisions regarding your treatment, release of any information concerning you or your treatment, and to consent to any changes in your treatment.

**You have the right,** to change your mind when you believe anything you have agreed to concerning your treatment is no longer in your best interest.

**You have the right,** to have information about you and your treatment kept private within the requirements of the law. Our privacy practice follows the Health Insurance Portability and Accountability Act and the Michigan Mental Health Code, Rights of Recipients.

**You have the right,** to personally review mental health information in your record, if you have not been appointed a guardian. If a part of the information in your record would be harmful to you or others, the information believed to be harmful may be withheld and you will be told this has been done. You can appeal this decision. You have the right to access all information in your record entered after March 28, 1996. If you or your legal representative believe that your record contains incorrect information, you may insert a statement to clarify the information. You may not remove what is already in the record.

**You have the right,** to not be discriminated against in receiving services at your CMH and/or provider agency, and to have all of the protection of the Americans with Disabilities Act, Federal Fair Housing Act, Michigan Handicappers Civil Rights Act, and section 504 of the Rehabilitation Act.

**You have the right,** to be treated by staff that adheres to a professional code of ethics.

**You have the right,** to complain to the supervisor of the service you participate in, and if not satisfied, to complain to your CMH Customer Services and/or Recipient Rights offices. You can complain in writing or verbally if you think something is wrong with your treatment. You have the right to ask staff for the Customer Service or Recipient Rights Office addresses and telephone numbers without being questioned. You also have the right to pursue the established grievance and appeals process.

**You have the right,** to receive information about the Southwest Consortium and/or your services in your own language or have it translated for you.

**You have the right,** to choose a provider from within the Provider Network. And to ask for a provider outside the network if you feel you need it.

**You have the right,** to be free from restraint and seclusion during the time you are receiving services in the community.

**You have the same civil and legal rights as anyone else in the community.**  
(Unless restrictions have been placed on you by the court.)

**You also have the right** to request and obtain a copy of this handbook - or any of the information in it - at any time. You should have been offered a handbook when you

started services, and when your Person-Centered Plan is completed or updated. You can also ask for a copy from your CMH or provider agency at any time.

Other information that is available to you includes:

- ❖ The Southwest Consortium Provider Directory.
- ❖ The amount, duration and scope of your benefits/services. This is identified in your Person-Centered Plan document.
- ❖ Your Ability to Pay (ATP) for services, if any. You will be asked to give updated information about your finances to your CMH and/or provider agency at least one time per year.
- ❖ Recipient Rights booklet
- ❖ Privacy Notice
- ❖ The structure and operation of our PIHP affiliation of county CMH's. Including information about the boards of directors, organizational charts and annual reports.

## CONSUMER BILL OF RESPONSIBILITIES

As a recipient of Mental Health or Substance Abuse services, **you have the responsibility to:**

- ◆ Give information needed for your care to your providers
- ◆ Show your Medicaid card – or other insurance cards when asked
- ◆ Follow instructions and guidelines from your providers
- ◆ Know the name and contact information of the mental health professionals working with you
- ◆ Schedule appointments during regular office hours when possible limiting the use of emergency services
- ◆ Arrive on time for appointments
- ◆ Tell providers if you have to cancel an appointment before the scheduled time. You may be asked to sign a no-show policy. This will outline any specific policies and procedure that may be in place related to a missed appointment that was not cancelled.
- ◆ Arrive for appointments sober and drug free. Also, do not bring any drugs or alcohol into your appointments.
- ◆ Not bring any unlawful weapons onto service provider property. Your appointment for that day will be cancelled. Weapons may be confiscated, and we may call law enforcement officials.
- ◆ Smoke only in designated areas. Buildings are smoke free. Smoking areas are identified. Please ask staff if you need help to locate a smoking area.
- ◆ Participate in creating your Individual Service Plan
- ◆ Be aware of your rights
- ◆ Participate in your services/recovery
- ◆ Take care of yourself
- ◆ Treat others with respect and work cooperatively with others

## What can I do if I have a complaint about my care?

### GRIEVANCES

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.” Examples of grievances include: if you are not happy with an aspect of how an office is run, or if you are having a problem with the staff working with you and you want a new provider. You can file a grievance **any time** by calling, visiting, or writing to the Customer Services Office. Our customer services staff will help you to file a grievance if you ask.

You will find out the results of your grievance within 60 days. If you do not, your grievance is then considered an “action”. You can then file an appeal about your problem.

### APPEALS

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 two ways you can appeal these decisions. One is a “local appeal” and the other is to appeal our decisions to the state of Michigan. There are also time limits on when you can file an appeal once you receive a decision about your services. Generally, you have 90 days from the day we deny, reduce, suspend or terminate services to ask for an appeal.

You may:

- Ask for a “Local Appeal” by contacting the Customer Service office at your local CMH. Please check pages 5-8 for contact numbers. And/or
- If you are Medicaid beneficiary, you can ask for a “local appeal” from Customer Services at Kalamazoo Community Mental Health and Substance Abuse Services by calling 1-888-553-7160. And/or
- If you are a Medicaid beneficiary, you can ask at any time for a Medicaid Fair Hearing before an administrative law judge (a state appeal).
- If you are not a Medicaid beneficiary, a state of Michigan Dispute Resolution Process is available if you do not like the result of your local appeal.

You may have someone speak for you regarding the appeal:

- This person can be anyone you chose
- This person may request a hearing for you
- This person may also represent you at the hearing
- You must give this person written permission to represent you. You may be asked to write and sign a letter saying this person has your permission to represent you. Or, if the person representing you is your legal guardian, you may be asked to provide a copy of the court order naming this person as your guardian.
- You do not need any written permission if this person is your spouse or attorney

Note about service costs: If you request an appeal, you may choose to have services continue while your case is being reviewed. In some cases you may have to pay for the cost of your services. This may happen if:

- Your state level appeal upholds the action of your CMH
- You withdraw your appeal
- You or the person representing you does not participate

Your appeal will be completed quickly. But, an Appeal can take up to 45 days to be resolved. If you think your life, health or well-being are in danger you can ask for an “expedited” appeal. This will tell staff that you are concerned about your health and safety. Please note that if your request for an “expedited” appeal is denied, we will call and write to you within 3 calendar days.

As part of an appeal, you will have the chance to provide information to the CMH and/or state. You can also ask for information about your case while the appeal is going on.

You may ask for assistance from Customer Services to file an appeal.

Anytime you have a question, concern, want more information, or want to file a grievance or appeal, please call our customer services staff. You can also ask to review our policies and procedures about grievances and appeals.

## What is Recovery? What is Resiliency?

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

**Recovery** is an individual journey that follows different paths and leads to different locations. Recovery is a process that we enter into and is a life long attitude. Recovery is unique to each individual and can truly only be defined by the individual themselves. What might be recovery for one person may be only part of the process for another. Recovery may also be defined as wellness. Mental health supports and services help people with mental illness in their recovery journeys. 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.

## How do I tell you what I think?

It is the goal of the Southwest Consortium to give you services that you are happy with. Aside from talking about your satisfaction at your Person-Centered planning meeting, you may be asked to fill out a satisfaction survey. Your comments are welcome and used to improve services. Surveys are typically done:

- As part of the intake process to start services
- Randomly 2-3 times per year by your service provider
- As part of our follow-up to your care after you have been discharged from services

Our surveys are voluntary. If you want, you can fill them out. You can also choose not to answer. If you do participate, it is up to you if you want to put your name on the survey. If you do, your name will not be used in any way, unless you ask for someone to call you about your comments.

Depending on the type of services you receive, you may be asked to participate in assessments or testing to help tell us how much you have improved since starting services. If you are asked to participate, the staff working with you will go over all of the details. Also, only the person working directly with you will know your individual responses.

The survey and assessment/testing results are reviewed by your CMH as part of a quality improvement program to measure service outcomes. Compiled results are reviewed by service supervisors, consumer groups, CMH board members, state-level reviewers, and outside accrediting agencies. Each time the information is reviewed, your CMH is identifying things that can be changed about the system to improve services for you and the others served.

### Is there an Advisory Group for me to participate in?

Each CMH has a local group of consumers, and/or service providers who meet to talk about the services of the CMH. Members are asked to provide feedback about service satisfaction, effectiveness, and efficiency. The members create meeting schedules and agendas.

In addition to these groups, each CMH has opportunities to participate in regular committee meetings. The committee topics may include quality improvement, customer services, recipient rights and others.

If you are involved with an advisory group or other committee, you have the opportunity to be paid for your active participation. The CMH's currently have a stipend policy to provide payment to consumers who are assisting with the business of the CMH. For information about advisory group or committee opportunities, call your local CMH.

## What is Managed Care?

In Michigan, public mental health and substance abuse services are provided through a Managed Care model. This means that people getting services can choose a provider from within a “network”. Pre-Paid Inpatient Health Plans in the state (like the Southwest Affiliation) have to make sure that services are available to their consumers.

In addition to making sure that services are available, the Southwest Consortium must watch over the quality of care given to consumers and control the costs. Each CMH and the Southwest Consortium as a whole monitors the services and providers in our four county area.

To find out more about Michigan’s public behavioral health service delivery system you can visit the Michigan Department of Community Health at [michigan.gov/mdch](http://michigan.gov/mdch).

## What is a Provider Network?

A provider network is a group of agencies that work with a CMH and provide services to consumers. Your local CMH may contract with another agency to provide your services. This happens more often in Kalamazoo than Allegan, Cass, or St. Joseph counties. Allegan, Cass, and St. Joseph CMH’s typically operate services themselves and do not have a large number of contract agencies.

The Southwest Consortium has completed a Provider Directory of the agencies we work with. A listing of all available providers, their locations, telephone numbers, and languages spoken can be found online at ([kazooomh.org](http://kazooomh.org)). If you do not have access to the Internet at your home, free Internet service is usually available at libraries. You can also get a paper copy of the provider listing any time by asking our customer service staff.

If you have service needs that can not be addressed by the current provider network, you can ask your CMH to get services from a provider outside of the network.

## How do I choose a provider?

The staff working with you at your CMH will help you choose a provider from within the provider network. After you get started with services, you will need to contact the provider to make, change or cancel your appointments.

If you are not happy with the provider you chose, contact your local CMH. Staff can talk to you about the situation and help to find a provider you are comfortable with.

Above and beyond being able to choose your own provider, consumers of substance abuse services need to know a little more: “No provider of substance abuse services receiving Federal funds from the U.S. Substance Abuse and Mental Health Services Administration, including this organization, may discriminate against you on the basis of

religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice.”

If you object to the religious character of this organization, Federal law gives you the right to a referral to another provider of substance abuse services. The referral, and your receipt of alternative services, must occur within a reasonable period of time after you request them. The alternative provider must be accessible to you and have the capacity to provide substance abuse services. The services provided to you by the alternative provider must be of a value not less than the value of the services you would have received from this organization.

## What happens if I move?

If you move, tell your CMH and provider agency if you have one. You may need to change to a new CMH and provider. Your CMH or provider can help you with referrals.

If you are a Medicaid recipient, call the Department of Human Services to let them know that you moved and to give them your new address.

## What if I Suspect Violations?

Consumers and providers need to use services properly. It is considered fraud if a consumer or provider is dishonest in order to get a service or payment for a service not authorized for the consumer. Abuse happens if a consumer or provider causes unnecessary costs to the system on purpose. Some examples are:

- Receiving payment for services that were not provided
- Offering payment for referrals
- Making false records or claims for services
- Requesting and providing services a consumer is not eligible for
- Loaning or selling a Medicaid or other insurance card to someone else

Fraud and abuse are felony crimes and are punishable by legal action against the consumer or provider. If you think that somebody is committing fraud or abuse, contact your local CMH office and ask to speak with the Corporate Compliance Officer.

## What kinds of Community Resources are available?

If you would like to know more about the resources that are available in your community you can contact your local CMH and/or Kalamazoo Community Mental Health and Substance Abuse Services.

*For more information on services for persons with Mental Illness, you may also contact other organizations such as:*

ORGANIZATION, ENTITY	PHONE #
1. National Alliance on Mentally Illness (NAMI)	(800)-950-6264 or www.nami.org (Local K-zoo)#s & Contact Persons: <ul style="list-style-type: none"> <li>▪ 269-343-6952 (Mike Kinney)</li> <li>▪ 269-349-8444 (Ann Bonneviech)</li> <li>▪ 269-344-7543 (Walter Colyer)</li> <li>▪ or www.namikalamazoo.org</li> </ul>
2. Togetherness Group (Support Services for Persons w/ Mental Illness) - Northern Presbyterian Church	(Local K-zoo) 269-349-7276
3. KCMHS Peer Support Department	(Local K-zoo) 269-373-6000
4. NAMI of Michigan	(800) 331-4264 or 517-324-0049
5. American Association of People w/ Disabilities (AAPD)	(800) 840-8844
6. Mental Health Association of MI	(800) 482-9534
7. Michigan Rehabilitation Services	(800) 605-6722 (Local K-zoo) 269-337-3700
8. Depression and Bipolar Support Alliance	(800) 826-3632 (Local K-zoo) Dave Miner 269-343-5896
9. Schizophrenics Anonymous	(800) 482-9534

*For more information on services for persons with Developmental Disabilities, you may also contact other organizations such as:*

ORGANIZATION, ENTITY	PHONE #
1. Handicappers United	(Local) 349-0058
2. Community Advocates for Persons with Developmental Disabilities Allegan Resource Center	Kalamazoo 269-342-9801 Allegan 269-673-8841
3. Michigan Commission for the Blind	(800) 292-4200 (Local K-zoo ) 337-3875
4. Disability Resource Center (Formerly CIL) Lakeshore Center for Independent Living	Kalamazoo 269-345-1516 For Allegan 269-396-5326
5. American Association of People w/ Disabilities (AAPD)	(800) 840-8844
6. Autism Society of Michigan	(800) 223-6722
7. Brain Injury Association of Michigan	(800) 772-4323
8. Learning Disability Association of Michigan	(888) 597-7809
9. Michigan Rehabilitation Services	(800) 605-6722 (Local K-zoo) 337-3700
10. National Adult Literacy & Learning Disabilities	(800) 953-2553
11. United Cerebral Palsy of Michigan	(800) 828-2714

For more information on services for Children, you may contact other organizations such as:

ORGANIZATION, ENTITY	PHONE #
1. Michigan Association for Children w/ Emotional Disorders	(248) 552-0044
2. Family & Children Services (crisis response, parenting and respite & youth enrichment)	(Local K-zoo) 344-0202
3. Association for Children's Mental Health	(800) 782-0883
4. American Association of People w/ Disabilities (AAPD)	(800) 840-8844
5. Autism Society of Michigan	(800) 223-6722
6. Brain Injury Association of Michigan	(800) 772-4323
7. Learning Disability Association of Michigan	(888) 597-7809
8. Michigan Rehabilitation Services	(800) 605-6722 (Local K-zoo) 337-3700
9. Child & Family Services of Western Michigan	(Local Allegan) 269-673-1896
10. United Cerebral Palsy of Michigan	(800) 828-2714
11. Child Trauma Assessment Center	(Local K-zoo) 387-7073
12. Adovacy Services for Kids (ASK)	(Local K-zoo) 343-5896