

**Substance Use Disorder (SUD)
Oversight Policy Advisory Board Meeting
October 19, 2022 ~ 4:00 p.m.**

This meeting will be held at a physical location with appropriate social distancing and/or masking requirements

*Community Mental Health Association of Michigan
507 S. Grand Ave.
Lansing, MI 48933*

Members of the public and others unable to attend in person can participate in this meeting via Zoom Videoconference

*Meeting URL: <https://us02web.zoom.us/j/5624476175>
and Teleconference*

Call 1.312.626.6799 Meeting ID: 5624476175#

- 1) Call to Order.
- 2) Roll Call
- 3) **ACTION ITEM:** Approval of the Agenda for October 19, 2022
- 4) **ACTION ITEM:** Approval of Minutes of August 17, 2022 *(Page 4)*
- 5) Public Comment
- 6) Board Chair Report
 - A. Welcome to new Board Member, Justin Peters (Bay County), Alternate-David Pohl (Clinton County) and Alternate-Margery Briggs (Ionia County)
- 7) Deputy Director Report *(Page 9)*
- 8) Chief Financial Officer Report
 - A. FY22 PA2 Funding & Expenditures by County *(Page 16)*
 - B. FY22 PA2 Use of Funds by County and Provider *(Page 18)*
 - C. FY22 SUD Financial Summary Report of August 2022 *(Page 20)*
 - D. FY23 Budget Overview *(Page 21)*
- 9) **ACTION ITEM:** FY23 Substance Use Disorder PA2 Contract Listing *(Page 25)*

**MSHN SUD Oversight Policy
Advisory Board Officers**

Chair: John Hunter (Tuscola)
Vice-Chair: Deb Thalison (Ionia)
Secretary: Bruce Caswell (Hillsdale)

MEETING LOCATION:

Community Mental Health
Association of Michigan
507 S. Grand Ave.
Lansing, MI 48933

VIDEOCONFERENCE:

<https://us02web.zoom.us/j/5624476175>
Meeting ID: 5624476175

TELECONFERENCE:

Call 1.312.626.6799
Meeting ID: 5624476175#

Should special accommodations be necessary to allow participation, please contact MSHN Executive Assistant, Sherry Kletke, at 517.253.8203 as soon as possible.

**UPCOMING FY23
SUD OVERSIGHT POLICY
ADVISORY BOARD MEETINGS**

December 21, 2022
CMHAM
507 S. Grand Ave
Lansing, MI 48933

February 15, 2023
CMHAM
507 S. Grand Ave
Lansing, MI 48933

All meetings will be held from
4:00-5:30 p.m.

MSHN Board Approved Policies
May be Found at:
<https://midstatehealthnetwork.org/provider-network-resources/provider-requirements/policies-procedures/policies>

- 10) SUD Operating Update *(Page 28)*
 - A. FY2022 Q3 SUD County Reports *(Page 31)*
- 11) Other Business
- 12) Public Comment
- 13) Board Member Comment
- 14) Adjournment

FY23 MSHN SUD Oversight Policy Board Roster

Last Name	First Name	Email 1	Email 2	Phone 1	Phone 2	County	Term Expiration
Ashley	Lisa	ashleyl@clareco.net		989.630.5256		Gladwin	2025
Badour	Nichole	nbadour@gihn-mi.org		989.264.5045	989.466.4124	Gratiot	2025
Bristol	Sandra	toadhall2@hotmail.com		989.339.7841		Clare	2024
Caswell	Bruce	bcaswell@frontier.com		517.425.5230	517.523.3067	Hillsdale	2022
Glaser	Steve	sglaser@co.midland.mi.us		989.264.4933		Midland	2024
Harrington	Christina	charrington@saginawcounty.com		989.758.3818		Saginaw	2025
Hunter	John	hunterjohn74@gmail.com		989.673.8223	989.551.2077	Tuscola	2025
Kolk	Bryan	bryank@co.newaygo.mi.us		616.780.5751		Newaygo	2024
Luce	Robert	rluce850@gmail.com		989.654.5700		Arenac	2023
Moreno	Jim	jmoreno@isabellacounty.org		989.954.5144		Isabella	2022
Murphy	Joe	jmurphy0504@comcast.net		989.670.1057		Huron	2023
Painter	Scott	spainter@montcalm.us		517.444.1556		Montcalm	2024
Peters	Justin	comicmonkey1@outlook.com				Bay	2022
Schultz	Vicky	vschultz@ccscc.org		810.232.9950 x.118		Shiawassee	2023
Strong	Jerrilynn	jeristrong64@gmail.com		989.382.5452		Mecosta	2024
Tennis	Todd	commissionertennis@gmail.com		517.202.2303		Ingham	2023
Thalison	Deb	dthalison@ioniacounty.org		616.527.5341		Ionia	2025
Thalison	Kimberly	kthalison@eatonresa.org		517.541.8711		Eaton	2025
Turner	David	davidturner49665@gmail.com		231.908.0501		Osceola	2024
Washington	Dwight	washindwi@gmail.com		517.974.1658		Clinton	2023
Woods	Ed	ejw1755@yahoo.com		517.796.4501	517.392.8457	Jackson	2023

Alternates:

Briggs	Margery	briggsmmb@sbcglobal.net		517.647.4747		Ionia-Alternate	2025
DeLaat	Ken	kdelaat1@aol.com		231.414.4173		Newaygo - Alternate	
Howard	Linda	lhoward8305@gmail.com		989.560.8305		Mecosta-Alternate	2024
Jaloszynski	Jerry	jjaloszynski@isabellacounty.org		989.330.4890		Isabella - Alternate	2022
Kroneck	John	jkroneck@mmdhd.org		989.831.3659	616.302.6009	Montcalm - Alternate	
Pohl	David	dwpohl@yahoo.com		517.927.2282	989.593.2688	Clinton - Alternate	2023
Whittum	Jeremy	jwhittum@eatoncounty.org		517.243.5692		Eaton-Alternate	

Administration:

Ittner	Amanda	amanda.ittner@midstatehealthnetwork.org		517.253.7551			
Sedlock	Joe	joseph.sedlock@midstatehealthnetwork.org		517.657.3036			
Thomas	Leslie	leslie.thomas@midstatehealthnetwork.org		517.253.7546			
Kletke	Sherry	sheryl.kletke@midstatehealthnetwork.org		517.253.8203			

Mid-State Health Network SUD Oversight Policy Advisory Board

Wednesday, August 17, 2022, 4:00 p.m.

CMH Association of Michigan (CMHAM)

Meeting Minutes

1. Call to Order

Chairperson John Hunter called the MSHN SUD Regional Oversight Policy Board (OPB) of Directors Organizational Meeting to order at 4:00 p.m.

Board Member(s) Present: Lisa Ashley (Gladwin) – arrived at 4:10 p.m., Sandra Bristol (Clare), Bruce Caswell (Hillsdale), John Hunter (Tuscola), Bryan Kolk (Newaygo), Jim Moreno (Isabella), Vicky Schultz (Shiawassee), Deb Thalison (Ionia), Kim Thalison (Eaton), Ed Woods (Jackson)

Board Member(s) Remote: Nichole Badour (Gratiot), Robert Luce (Arenac)

Board Member(s) Absent: Steve Glaser (Midland), Christina Harrington (Saginaw), Joe Murphy (Huron), Scott Painter (Montcalm), Jerrilynn Strong (Mecosta), Todd Tennis (Ingham), David Turner (Osceola)

Alternate Members Present: Linda Howard (Mecosta)

Staff Members Present: Amanda Ittner (Deputy Director), Sherry Kletke (Executive Assistant), Dr. Dani Meier (Chief Clinical Officer), Leslie Thomas (Chief Financial Officer)

Staff Members Remote: Joseph Sedlock (Chief Executive Officer), Sarah Andreotti (Lead Prevention Specialist), Sarah Surna (Prevention Specialist), Kari Gulvas (Prevention Specialist), Dr. Trisha Thrush (Director of SUD Services and Operations)

2. Roll Call

Secretary Bruce Caswell provided the Roll Call for Board Attendance and informed the Board Chair, John Hunter, that a quorum was not present for Board meeting business. With the arrival of an eleventh OPB member at 4:10 p.m. a quorum was established, and business could be conducted as follows.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

3. Approval of Agenda for August 17, 2022

Board approval was requested for the Agenda of the August 17, 2022 Regular Business Meeting, as presented.

MOTION BY BRYAN KOLK, SUPPORTED BY JIM MORENO, FOR APPROVAL OF THE AUGUST 17, 2022 REGULAR BUSINESS MEETING AGENDA, AS PRESENTED. MOTION CARRIED: 11-0.

4. Approval of Minutes from the June 15, 2022 Regular Business Meetings

Board approval was requested for the draft meeting minutes of the June 15, 2022 Regular Business Meeting.

MOTION BY BRUCE CASWELL, SUPPORTED BY VICKY SCHULTZ, FOR APPROVAL OF THE MINUTES OF THE JUNE 15, 2022 MEETING, AS PRESENTED. MOTION CARRIED: 11-0.

5. Public Comment

There was no public comment.

6. Board Chair Report

Mr. John Hunter informed board members of the upcoming Annual Substance Use and Co-Occurring Disorders Conference scheduled for September 18th – 20th. Ms. Sherry Kletke will email the conference details to the members tomorrow, Thursday August 18, 2022. MSHN will sponsor members interested in attending. The reduced, early bird, rate expires on August 27, 2022, so if members are interested in the conference, please contact Sherry Kletke preferably prior to that date.

Board approval was requested for the FY2023 Board calendar, as presented. Mr. Hunter asked members to note the location change for the upcoming meetings to Community Mental Health Association of Michigan's new address at 507 S. Grand Ave in downtown Lansing.

MOTION BY BRUCE CASWELL, SUPPORTED BY BRYAN KOLK, FOR APPROVAL OF THE FY2023 BOARD CALENDAR, AS PRESENTED. MOTION CARRIED: 11-0.

7. Deputy Director Report

Ms. Amanda Ittner provided an overview of the written report included in the board meeting packet, and available on the MSHN website, highlighting:

- Open Meetings Act – There has been no further updates. MSHN continues to await finalization.
- COVID Update–The Federal Government has indicated they will give states 60 days' notice prior to formally ending the Public Health Emergency (PHE). Therefore, the current PHE notice to Michigan needed to occur by August 14, 2022, which didn't occur. MSHN assumes

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

that means the PHE will be extended another 90 days, pushing it into January 2023. MDHHS has authorized Direct Care Worker Premium Payments to continue through FY23.

- Opioid Health Home – MSHN will implement a pilot program to begin on October 1, 2022 working with Victory Clinical Services that participated in a separate pilot program through another region. An Opioid Health Home is a model of care that provides comprehensive care management and coordination services to Medicaid beneficiaries with an Opioid Use Disorder (OUD).
- Provider Network Adequacy Assessment (NAA) – MDHHS developed parameters for PIHPs to ensure compliance with CFR requirements that includes time and distance standards. After a review of the results, one recommendation MSHN developed is to conduct provider expansion feasibility analysis for SUD residential and withdrawal management services.
- Health Services Advisory Group (HSAG) External Quality Review – HSAG finalized the review of MSHN in July. The results of the review should be available by October 2022. The full report will be shared with the board once available.
- Recovery Housing Supplemental Payment – After analysis and tracking of FY22 expenses, MSHN projects to spend less than our Block Grant allocations and has announced recovery housing providers were eligible for provider stabilization. One payment was distributed in July and anticipate another payment in August.

Board Members expressed interest in understanding more about the services offered through the Opioid Health Homes (OHHs). Ms. Sherry Kletke will distribute more information about services provided through OHHs.

8. Chief Financial Officer Report

Ms. Leslie Thomas provided an overview of the financial reports included in board meeting packets:

- FY2022 PA2 Funding and Expenditures by County
- FY2022 PA2 Use of Funds by County and Provider
- FY2022 Substance Use Disorder (SUD) Financial Summary Report as of June 2022

Board Members raised the question regarding available funds from the taxation on recreational marijuana. MSHN will distribute information regarding the Michigan Regulation and Taxation of Marijuana Act distributed to Michigan municipalities and counties.

9. FY23 Substance Use Disorder PA2 Contract Listing

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

Ms. Leslie Thomas provided an overview and information on the FY23 Substance Use Disorder (SUD) PA2 Contract Listing as provided in the packet.

MOTION BY JIM MORENO, SUPPORTED BY BRYAN KOLK, FOR APPROVAL OF THE FY2023 SUBSTANCE USE DISORDER (SUD) PA2 CONTRACT LISTING, AS PRESENTED. MOTION CARRIED: 8-0; 3 abstained.

10. SUD Operating Update

Dr. Dani Meier provided an overview of the written SUD Operations Report as included in the board meeting packet, highlighting:

- Synar – formal checks to make sure youth are not accessing tobacco products. The FY21 sales rate was over 20%. This year, FY22 was only 8.11% which is a huge improvement.
- MSHN scored 100% compliance on the MDHHS SUD Site review performed on 7/29/22.
- After continuous evaluation of capacity, network adequacy and gaps in service, MSHNs SUD Treatment team has issued an RFI for Montcalm and other underserved counties.
- Mobile Care Unit (MCU) was deployed in 2019. Multiple models have been implemented on the unit, hoping to serve the rural, underserved areas. Utilization rates have remained low despite multiple efforts to increase services. Therefore, MSHN has requested of MDHHS and been approved to re-deploy the MCU to provide Harm Reduction Services beginning in FY23.
- MSHNs Veteran Navigator assisted a local veteran to behavioral health resources after expressing suicidal thoughts. Using Mental Health First Aid to assess the situation, the Veteran Navigator connected the person to care.

11. Other Business

Ms. Amanda Ittner reminded members that have not completed the annual disclosure of ownership, controlling interest and criminal convictions form to complete the form located in their member folder. If the form isn't found in a member folder, that means MSHN has received their completed form. For those members participating by phone and MSHN doesn't have the completed form or complete information, Ms. Sherry Kletke will be reaching out to those members.

12. Public Comment

There was no public comment.

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

13. Board Member Comment

Each Board member gave comments on items of importance to them and initiatives in their respective counties.

Appreciation was expressed to Ms. Sherry Kletke for all her work in supporting the Oversight Policy Board.

14. Adjournment

Chairperson John Hunter adjourned the MSHN SUD Oversight Policy Advisory Board Meeting at 5:19 p.m.

*Meeting minutes submitted respectfully by:
MSHN Executive Assistant*

MINUTES ARE CONSIDERED DRAFT UNTIL BOARD APPROVED

Community Mental Health
Member Authorities

Bay Arenac
Behavioral Health



CMH of
Clinton.Eaton.Ingham
Counties



CMH for Central
Michigan



Gratiot Integrated
Health Network



Huron Behavioral Health



The Right Door for
Hope, Recovery &
Wellness (Ionia County)



LifeWays CMH



Montcalm Care Center



Newaygo County
Mental Health Center



Saginaw County CMH



Shiawassee
Health & Wellness



Tuscola Behavioral
Health Systems

Board Officers

Edward Woods
Chairperson

Irene O'Boyle
Vice-Chairperson

Kurt Peasley
Secretary

**REPORT OF THE MSHN DEPUTY DIRECTOR
TO THE MSHN SUBSTANCE USE DISORDER OVERSIGHT POLICY BOARD
(SUD OPB)**

August/September

MSHN/REGIONAL MATTERS

Substance Use Disorder (SUD) Oversight Policy Board Annual Report

The SUD Oversight Policy board has responsibility to provide oversight and advisement for SUD treatment and prevention operations. Specifically, the approval of any portion of MSHN's budget containing local funding for SUD treatment or prevention, (i.e., PA2 funds) and an advisory role in making recommendations regarding SUD treatment and prevention in their respective counties when funded with non-PA2 dollars.

Annually, MSHN's Boards and Councils provide a report outlining past years accomplishments and upcoming goals for the new year. Attached to this report is a draft of the FY2022 SUD OPB Annual report. MSHN is seeking feedback regarding the content as well as recommendations for FY23 goals.

Please submit feedback to amanda.ittner@midstatehealthnetwork.org or sheryl.kletke@midstatehealth.org by October 31, 2022.

The final report will be included in the Agency's Quality Assurance and Performance Improvement Annual Effectiveness Report.

MSHN Board Approves Proposals to support the Provider Network

At the regional SUD Provider Meeting on Monday, September 12, Mid-State Health Network (MSHN) summarized several proposals it planned to make to the Board of Directors. MSHN is pleased to report that the Mid-State Health Network Governing Board acted to approve the proposals of MSHN administration, as briefly summarized below:

- The FY 23 regional budget was approved, including a 10% Fee-For-Service rate increase for MSHN SUD Providers effective for service dates on and after 10/01/2022, [located here](#).
- FY 23 provider contracts were approved, which include the increased regional rates.
- The provider staffing crisis stabilization program was extended through March 2023, [located here](#).
- The [provider stabilization program](#) and the [Direct Care Worker premium pay](#) initiatives through 09/30/2023.

Mid-State Health Network values our relationships with our provider partners! We have designed these initiatives to support your efforts to ensure high quality, effective, and accessible services and supports across the region. Specific questions on these

initiatives should be directed to the MSHN Chief Financial Officer, Leslie Thomas at leslie.thomas@midstatehealthnetwork.org.

Population Health Expands to Reducing Disparities in Follow-Up After Emergency Department

During FY22 MSHN and its Community Mental Health Service Provider (CMHSP) participants will work to reduce or eliminate disparities in the rates of follow-up after an emergency visit related to alcohol or substance use between White individuals and individuals belonging to racial/ethnic minority groups. The measurement period for FY22 is calendar year 2021 (January 1 – December 31,2021). The baseline period is calendar year 2020 (January 1 – December 31, 2020).

The following table summarizes the follow-up rates and existing disparities between the White population and racial/ethnic minority populations during calendar year 2020 and calendar year 2021.

	Follow-Up Rate 2020	Disparity in 2020	Follow-Up Rate 2021	Disparity in 2021	Did Disparity Increase, Decrease, No Change
White	29.81%	N/A	28.78%	N/A	N/A
Black/African American	15.19%	YES	15.90%	YES	NO CHANGE
Hispanic	20.38%	YES	20.25%	YES	NO CHANGE
American Indian	27.12%	NO	21.43%	NO	NO CHANGE

One of the primary interventions MSHN has implemented to improve follow up care for individuals after they visit the Emergency Department (ED) for alcohol or substance-related issues is Project ASSERT. Project ASSERT is a model of early intervention, screening, and referral to treatment for individuals in hospital and primary care settings. MSHN-funded peer recovery coaches trained in Project ASSERT are currently located in hospital emergency departments in 13 counties in the MSHN region. Individuals who present to the hospital ED with substance-related concerns are offered the opportunity to speak with a Project ASSERT peer recovery coach who offers appropriate referrals and follow-up support.

For more information on reducing disparities and other related population health activities, *see the link below: **FY22Q2 Population Health and Integrated Care Report.***

Utilization Management Update

The MSHN Utilization Management (UM) department provides oversight of access and referral for substance use disorder (SUD) treatment services and authorization of SUD treatment services. The UM department also provides support and technical assistance to the SUD provider network related to these content areas. The purpose of the quarterly report is to:

1. Summarize Quarterly Activity in the areas of utilization review: prospective, concurrent, and retrospective
2. Conduct an Environmental Scan of external and internal factors which may affect the UM Department’s ability to adequately perform responsibilities
3. Plan for Future Initiatives during FY22 and beyond

One of the many content areas in the quarterly report includes an analysis of authorizations that are auto approved as well as those that require a Utilization Management Specialist to review. The table below indicates

the total number of authorizations processed in MSHN’s electronic management system each quarter during FY22.

FY 22	Auto Approved	Concurrent Review	Total	Average Rate of Concurrent Review	Average Number of Concurrent Reviews per Week
Q1	7339	911	8286	11%	76
Q2	7318	876	8274	10.5%	73

For more information on Utilization Reviews, *see the link below: FY22Q2 Utilization Management Department Report.*

STATE OF MICHIGAN/STATEWIDE ACTIVITIES

Gov. Whitmer Expands Opioids Task Force Membership to Bring in Local Perspective, Secure More Resources for Michiganders

Local governments will have enhanced role, task force given authority to direct money won in settlements and bankruptcies

On September 29, Governor Gretchen Whitmer signed an executive order adjusting the membership of the Opioid Task Force she established in 2019. The changes include adding 10 local government representatives to the task force, requiring them to hold four public meetings annually, and giving them power to direct money received from settlements and bankruptcies.

“We need to continue working together to tackle the root causes of the opioid epidemic and help families get the relief and resources they deserve,” said **Governor Whitmer**. “Today’s adjustments to the Opioids Task Force will bring in local voices and authorize the group to direct money received from settlements and bankruptcies. In 2019 alone, the Michigan Opioids Task Force found that opioid overdoses claimed the lives of 1,768 Michiganders—an average of five a day. Getting this done will help resources get out the door and into the community more efficiently to treat opioid use disorder and support our neighbors, family, and friends in treatment and recovery. If you or a loved one need opioid addiction treatment, there are resources to help.”

Changes to the Opioids Task Force

Today’s executive order adds 10 local government representatives, who will be appointed, to the task force. It also requires the task force to hold four public meetings a year and gives them the authority to direct money received from settlements and bankruptcies. In the near future, these changes will help Michigan secure \$37 million from Mallinckrodt Pharmaceutical, one of the largest opioid manufacturers in the country. The company aggressively pursued the expansion of its market share through certain doctors and pill mills. It was sued by thousands of plaintiffs because of its aggressive actions and, as a result filed for bankruptcy. The \$37 million represents Michigan’s share. With the revised structure of the Opioids Task Force, Michigan can continue efficiently distributing bankruptcy funds to local governments, backing ongoing efforts to combat the opioid crisis.

Bipartisan Legislation to Fight the Opioid Crisis

In May, Governor Whitmer signed [three bipartisan bills](#) to invest \$800 million in treatment, prevention, mental health, and other abatement efforts. The \$800 million were Michigan's portion of the \$26 billion national opioid settlement.

Michigan Opioids Task Force

The [Michigan Opioids Task Force](#) is charged with identifying the root causes of the opioid epidemic and implementing response actions to help Michiganders struggling with opioid addiction access the recovery services they need. The task force also works to raise public awareness about the opioid epidemic and the resources available to those impacted by it.

The executive order can be viewed [here](#).

FEDERAL/NATIONAL ACTIVITIES

Congress - Senate Appropriations Committee

The Senate Appropriations Committee has released the 'Chairman's Mark' for FY2023 appropriations which provides highlights of key funding inclusions by high priority topics. Next in the appropriations process will be consideration and mark-up by each Senate Appropriations Subcommittee of that part of the Chairman's Mark within that Subcommittee's jurisdiction. That will be followed by full Committee consideration. Likely of most interest to PIHPs is the following summary for mental and behavioral health.

The entire Labor, HHS and Education summary is available in its entirety at the end of this update. The full Explanatory Statement (report) is available at <https://www.appropriations.senate.gov/imo/media/doc/LHHSFY23REPT.pdf>.

Expanding Access to Mental and Behavioral Health Care: The pandemic intensified the need for behavioral health services and exacerbated the nation's mental health and substance use crises. In 2021, drug overdose deaths continued to climb, reaching a staggering level of 107,622—more than any year on record. Additionally, social isolation and loneliness caused substantial increases in depression and anxiety and a dramatic increase in serious mental health conditions, particularly among children. To address these crises, the bill provides \$9.1 billion for the Substance Use And Mental Health Services Administration (SAMHSA), an increase of \$2.6 billion or nearly 40 percent above fiscal year 2022. This includes \$1.42 billion for the Mental Health Block Grant (MHBG), an increase of \$564 million over fiscal year 2022, including a set-aside for prevention and early intervention and an increase in the crisis care set-aside to 10 percent; \$824 million, an increase of \$625 million, for suicide prevention programs, including \$697 million for 988 and the National Suicide Prevention Lifeline; \$385 million for Certified Community Behavioral Health Centers (CCBHCs), an increase of \$70 million; \$222 million, an increase of \$102 million for Project AWARE, which supports school-based mental health and trauma services to students; \$2.4 billion for the Substance Use Prevention and Treatment Block Grant, an increase of \$500 million over fiscal year 2022, including a set-aside for recovery services; and \$2.025 billion, an increase of \$500 million, for State Opioid Response (SOR) Grants. The bill also eliminates the Needle Exchange Amendment, which prohibited federal funding from being used to support syringe service programs.

Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA has published a Fiscal Year (FY) 2022 Notice of Supplemental Funding Opportunity of intent to award supplemental funding (in scope of the parent award) up to \$20,833 (total costs) for one-year to the *Improving Access to Overdose Treatment* grant recipients for a total of up to \$104,165 (total funding). These recipients were funded in FY 2018 with a project end date of September 30, 2023. The supplemental funding will be utilized specifically to increase the number of health care providers and pharmacists who receive training and technical assistance on the prescribing of drugs or devices approved or cleared under the FDA for emergency treatment of known or suspected opioid overdose. Additional information is available at <https://www.govinfo.gov/content/pkg/FR-2022-09-21/pdf/2022-20436.pdf>.

SAMHSA extends an invitation to a September 29 webinar entitled *How Using Contingency Management Can Support Families Affected by Substance Use Disorders*. The invitation notes that “the 2020 National Survey on Drug Use and Health found that over 5 million people aged 12 and older misused prescription stimulants, while 2.5 million had used methamphetamine within the past year. The good news? There’s more and more research underway to find effective treatment of stimulant use disorders. The only *current* treatment for stimulant use disorders with significant evidence of effectiveness is contingency management, an evidence-based behavioral intervention designed to encourage desired behaviors by providing immediate reinforcing consequences in the form of incentives. The webinar will provide:

- 1) an overview of contingency management including the implementation with different cultural populations,
- 2) the implementation experience of a Regional Partnership Grantee (Montefiore Medical Center (PDF) from New York),
- 3) a closer look at the myths and stigma associated with contingency management, and
- 4) practical strategies for agencies to implement contingency management.”

Registration and additional information are available at <https://cffutures.zoom.us/webinar/register>.

Submitted by:



Amanda L. Ittner

Finalized: 10.7.22

Attachments

SUD OPB Annual Report

Links to Reports:

[FY22Q2 Population Health and Integrated Care Report](#)

[FY22Q2 Utilization Management Department Report](#)

ANNUAL REPORT

TEAM NAME: SUD Oversight Policy Board

TEAM LEADER: Chairman John Hunter, SUD Board Member

REPORT PERIOD COVERED: 10.1.21 – 9.30.22

Purpose of the Board: The Mid-State Health Network (MSHN) Substance Use Disorder (SUD) Oversight Policy Board (OPB) was developed in accordance with Public Act 500 of 2012, Section 287 (5). This law obliged MSHN to “establish a substance use disorder oversight policy board through a contractual agreement between [MSHN] and each of the counties served by the community mental health services program.” MSHN/s twenty-one (21) counties each have representation on the OPB, with a designee chosen from that county. The primary decision-making role for the OPB is as follows:

- Approval of any portion of MSHN’s budget containing local funding for SUD treatment or prevention, i.e. PA2 funds
- Has an advisory role in making recommendations regarding SUD treatment and prevention in their respective counties when funded with non-PA2 dollars.

Annual Evaluation Process:

a. Past Year’s Accomplishments:

- Received updates and presentations on the following:
 - MSHN SUD Strategic Plan
 - MSHN SUD Prevention & Treatment Services
- Approval of Public Act 2 Funding for FY22 & related contracts
- Approved use of PA2 funds for prevention and treatment services in each county
- Received presentation on FY23 Budget Overview
- Received PA2 Funding reports – receipts & expenditures by County
- Received Quarterly Reports on Prevention and Treatment Goals and Progress
- Received Financial Status Reports on all funding sources of SUD Revenue and Expenses
- Provided advisory input to the MSHN Board of Directors regarding the overall agency strategic plan and SUD budget
- Received new written updates from Deputy Director including state and federal activities related to SUD
- Received updates on MDHHS proposed future of Behavioral Health
- Provided input and received information/updates on Block Grant Reduction Strategies
- Received updates on MDHHS State Opioid Response Site Visit Results
- Received information on COVID-19 and Provider Status
- Shared prevention and treatment strategies within region
- Received information and education on opioid settlement and strategies

b. Upcoming Goals for FY23 ending, September 30, 2023:

- Approve use of PA2 funds for prevention and treatment services in each county

- Improve communications with MSHN Leadership, Board Members and local coalitions
- Orient new SUD OPB members as reappointments occur
- Receive information and education on opioid settlement and strategies
- Provide input into COVID related funding specific to Substance Use Disorder Treatment and prevention
- Monitor SUD spending to ensure it occurs consistent with PA 500.

**Mid-State Health Network
FY2022 PA2 Funding Summary by County**

County	Beginning PA2 Fund Balance	Payment Amount	Date Received	Payment Amount	Date Received	Payment Amount	Date Received	Total Amount Anticipated	Total Amount Received	PA2 Balance Available for Expenses
Arenac	78,336	18,575	08.16.22	17,269	08.16.22			38,721	35,844	114,179
Bay	886,059	99,216	05.05.22	92,243	08.10.22			189,737	191,459	1,077,517
Clare	172,289	26,592	05.24.22	24,724	08.31.22			51,428	51,316	223,605
Clinton	467,322	63,681	05.13.22	59,206	08.12.22			121,375	122,887	590,209
Eaton	617,925	113,889	05.24.22	105,886	08.26.22			222,938	219,774	837,699
Gladwin	83,646	18,832	05.31.22	17,509	08.26.22			40,014	36,341	119,987
Gratiot	97,521	22,840	05.06.22	21,235	08.05.22			42,938	44,075	141,596
Hillsdale	161,762	25,837	05.06.22	24,021	08.08.22			50,828	49,858	211,619
Huron	187,359	33,426	05.09.22	31,077	08.12.22			68,510	64,503	251,862
Ingham	947,615	348,457	05.13.22	323,970	08.16.22			643,890	672,426	1,620,041
Ionia	411,104	37,136	05.17.22	34,526	08.08.22			70,234	71,661	482,765
Isabella	581,463	65,700	05.17.22	61,083	08.16.22			119,105	126,782	708,245
Jackson	690,218	170,163	05.11.22	158,205	08.22.22			339,281	328,367	1,018,585
Mecosta	319,791	43,794	05.11.22	40,716	08.09.22			81,503	84,510	404,301
Midland	435,893	86,459	05.06.22	80,383	08.05.22			174,016	166,842	602,735
Montcalm	263,542	50,297	05.27.22	46,762	08.26.22			97,070	97,059	360,600
Newaygo	133,127	40,828	06.13.22	37,959	09.20.22			81,492	78,787	211,914
Osceola	115,952	16,912	05.09.22	15,724	08.09.22			33,294	32,635	148,587
Saginaw	1,807,586	261,182	05.17.22	242,828	08.05.22			531,538	504,010	2,311,596
Shiawassee	443,461	47,493	05.09.22	44,155	08.08.22			93,104	91,648	535,109
Tuscola	218,811	26,751	05.10.22	24,871	08.05.22			53,489	51,622	270,433
	<u>\$ 9,120,783</u>	<u>\$ 1,618,054</u>		<u>\$ 1,504,347</u>		<u>\$ -</u>		<u>\$ 3,144,505</u>	<u>\$ 3,122,401</u>	<u>\$ 12,243,184</u>

**Mid-State Health Network
FY2022 PA2 Expenditure Summary by County**

County	PA2 Balance Available for Expenses	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	YTD Payments	Ending PA2 Fund Balance
Arenac	114,179	6,371	6,655	5,154	5,304	4,747	3,769	57,071	\$ 57,108
Bay	1,077,517	38,525	44,513	42,256	42,695	32,139	47,522	405,698	\$ 671,819
Clare	223,605	6,379	5,156	6,596	4,798	6,159	6,514	58,196	\$ 165,409
Clinton	590,209	17,633	8,952	9,913	26,803	14,665	5,362	127,922	\$ 462,287
Eaton	837,699	40,088	27,806	27,609	42,057	31,947	16,968	330,130	\$ 507,570
Gladwin	119,987	2,281	3,055	4,698	4,315	3,064	3,680	34,489	\$ 85,498
Gratiot	141,596	4,476	9,516	7,173	6,435	5,949	6,800	76,153	\$ 65,443
Hillsdale	211,619	-	-	-	400	141	-	541	\$ 211,078
Huron	251,862	6,268	6,035	5,969	5,824	12,500	13,342	78,556	\$ 173,307
Ingham	1,620,041	34,371	33,186	32,473	42,742	59,668	33,009	420,716	\$ 1,199,325
Ionia	482,765	2,562	17,997	10,367	13,139	8,770	10,514	118,432	\$ 364,333
Isabella	708,245	28,816	27,461	22,259	37,974	33,670	26,756	299,641	\$ 408,604
Jackson	1,018,585	30,020	18,059	55,276	30,890	27,549	38,409	303,302	\$ 715,283
Mecosta	404,301	14,754	14,251	14,313	14,989	14,641	15,282	137,768	\$ 266,533
Midland	602,735	6,294	5,870	20,196	22,758	25,734	7,995	139,543	\$ 463,192
Montcalm	360,600	1,934	2,182	2,098	2,187	2,189	2,205	22,809	\$ 337,791
Newaygo	211,914	6,876	6,611	15,104	4,732	2,218	2,463	53,386	\$ 158,528
Osceola	148,587	6,450	7,728	7,420	8,681	7,901	6,257	74,001	\$ 74,586
Saginaw	2,311,596	35,805	36,224	36,114	45,075	81,227	54,248	568,463	\$ 1,743,133
Shiawassee	535,109	12,943	10,663	15,104	15,388	18,201	15,553	156,198	\$ 378,911
Tuscola	270,433	10,922	10,594	10,526	5,910	19,163	11,000	122,006	\$ 148,427
\$ 12,243,184		\$ 313,767	\$ 302,513	\$ 350,618	\$ 383,095	\$ 412,239	\$ 327,649	3,585,020	\$ 8,658,164

Mid-State Health Network
 Summary of PA2 Use of Funds by County and Provider
 October 1, 2021 through August 31, 2022

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Arenac						
Peer 360 Recovery					29,219	29,219
Recovery Pathways			550			550
Sterling Area Health Center				7,823		7,823
Ten Sixteen Recovery		19,048		431		19,479
Arenac Total		19,048	550	8,254	29,219	57,071
Bay						
Boys and Girls Club Bay Region				92,236		92,236
Neighborhood Resource Center				104,336		104,336
Peer 360 Recovery					78,024	78,024
Recovery Pathways			603			603
Sacred Heart Rehabilitation				15,059		15,059
Sterling Area Health Center				47,441		47,441
Ten Sixteen Recovery					67,999	67,999
Bay Total			603	259,072	146,023	405,698
Clare						
Ten Sixteen Recovery		11,861	2,270	17,845	26,220	58,196
Clare Total		11,861	2,270	17,845	26,220	58,196
Clinton						
Eaton Regional Education Service Agency				112,839		112,839
St. John's Police Department				6,671		6,671
State of Michigan MRS	5,000					5,000
Ten Sixteen Recovery				1,118	2,294	3,412
Clinton Total	5,000			120,628	2,294	127,922
Eaton						
Barry Eaton District Health				6,368		6,368
Eaton Regional Education Service Agency				117,353		117,353
Prevention Network				23,223		23,223
State of Michigan MRS	5,000					5,000
Ten Sixteen Recovery				679		679
Wellness, InX		84,357			93,150	177,507
Eaton Total	5,000	84,357		147,623	93,150	330,130
Gladwin						
Barry Eaton District Health				374		374
Recovery Pathways			150			150
Ten Sixteen Recovery		7,891	3,746	4,358	17,970	33,965
Gladwin Total		7,891	3,896	4,732	17,970	34,489
Gratiot						
Gratiot County Child Advocacy Association				29,434		29,434
Ten Sixteen Recovery		16,496			30,223	46,719
Gratiot Total		16,496		29,434	30,223	76,153
Hillsdale						
LifeWays Community Mental Health Authority				541		541
Hillsdale Total				541		541
Huron						
Huron County Health Department				1,842		1,842
Peer 360 Recovery					76,714	76,714
Huron Total				1,842	76,714	78,556
Ingham						
Child and Family Charities				24,513		24,513
Cristo Rey Community Center				17,873		17,873
Eaton Regional Education Service Agency				20,732		20,732
Ingham County Health Department				12,140		12,140
Lansing Syringe Access, Inc			32,713			32,713
Prevention Network				23,223		23,223
Punks With Lunch Lansing			3,278			3,278
State of Michigan MRS	15,000					15,000
Wellness, InX		138,565			132,679	271,244
Ingham Total	15,000	138,565	35,991	98,481	132,679	420,716
Ionia						
County of Ionia				85,184		85,184
Wedgwood Christian Services						33,248
Ionia Total				85,184	33,248	118,432

Mid-State Health Network
 Summary of PA2 Use of Funds by County and Provider
 October 1, 2021 through August 31, 2022

County and Provider	Case Management	Early Intervention	Outpatient	Prevention	Recovery Support	Grand Total
Isabella						
Addiction Solutions Counseling Center				18,795		18,795
Peer 360 Recovery					56,223	56,223
Recovery Pathways			150			150
Ten Sixteen Recovery		15,050		66,011	143,412	224,473
Isabella Total		15,050	150	84,806	199,635	299,641
Jackson						
Big Brothers Big Sisters of Jackson County, Inc				14,380		14,380
Family Service and Childrens Aid (Born Free)				178,814		178,814
Home of New Vision					110,107	110,107
Jackson Total				193,195	110,107	303,302
Mecosta						
Ten Sixteen Recovery		30,551	2,879	36,740	67,598	137,768
Mecosta Total		30,551	2,879	36,740	67,598	137,768
Midland						
Peer 360 Recovery					56,198	56,198
Recovery Pathways			550			550
Ten Sixteen Recovery		29,679				29,679
The Legacy Center for Community Success				53,116		53,116
Midland Total		29,679	550	53,116	56,198	139,543
Montcalm						
Wedgwood Christian Services		22,809				22,809
Montcalm Total		22,809				22,809
Newaygo						
Arbor Circle				42,439		42,439
Newaygo County RESA				10,947		10,947
Newaygo Total				53,386		53,386
Osceola						
Ten Sixteen Recovery		25,466		48,535		74,001
Osceola Total		25,466		48,535		74,001
Saginaw						
First Ward Community Service				122,818		122,818
Great Lakes Bay Health Center				12,877		12,877
Parishioners on Patrol				5,000		5,000
Peer 360 Recovery					99,944	99,944
Recovery Pathways			550			550
Sacred Heart Rehabilitation				19,775		19,775
Saginaw County Youth Protection Council				133,003		133,003
Ten Sixteen Recovery					114,962	114,962
Women of Colors				59,534		59,534
Saginaw Total			550	353,007	214,906	568,463
Shiawassee						
Catholic Charities of Shiawassee and Genesee				106,615		106,615
Peer 360 Recovery					2,000	2,000
Prevention Network				27,867		27,867
Shiawassee County				14,716		14,716
State of Michigan MRS	5,000					5,000
Shiawassee Total	5,000			149,198	2,000	156,198
Tuscola						
List Psychological Services				47,751		47,751
Peer 360 Recovery					74,255	74,255
Tuscola Total				47,751	74,255	122,006
Grand Total	30,000	401,773	47,439	1,793,369	1,312,439	3,585,020

Mid-State Health Network
Summary of SUD Revenue and Expenses as of August 2022 (91.7% of budget)

	Year to Date Actual	Full Year Budget	Remaining Budget	% to Budget
Revenue				
Block Grant	6,779,058.87	10,032,205.00	3,253,146.13	67.57%
SOR and Other Grants	1,463,962.92	4,051,039.00	2,587,076.08	36.14%
Medicaid	14,626,500.36	15,611,704.49	985,204.13	93.69%
Healthy Michigan PA2	32,470,072.57 3,585,020.09	34,226,713.15 4,774,248.00	1,756,640.58 1,189,227.91	94.87% 75.09%
Totals	58,924,614.81	68,695,909.64	9,771,294.83	85.78%
Direct Expenses				
Block Grant	6,779,058.87	8,835,000.00	2,055,941.13	76.73%
SOR and Other Grants	1,463,962.92	1,800,000.00	336,037.08	81.33%
Medicaid	10,567,090.35	11,960,000.00	1,392,909.65	88.35%
Healthy Michigan PA2	21,139,792.30 3,585,020.09	23,500,000.00 4,774,248.00	2,360,207.70 1,189,227.91	89.96% 75.09%
Totals	43,534,924.53	50,869,248.00	7,334,323.47	85.58%
Surplus / (Deficit)	15,389,690.28			
Surplus / (Deficit) by Funding Source				
Block Grant	-			
SOR Grants	-			
Medicaid	4,059,410.01			
Healthy Michigan PA2	11,330,280.27 -			
Totals	15,389,690.28			

Actual revenue greater than budgeted revenue

Actual expenses greater than budgeted expenses

Surplus/(Deficit) by Funding Source - Please Note: A surplus or deficit listed above only relates to SUD. MSHN uses the amounts above in conjunction with behavioral health surpluses and deficits to determine a regional total. MSHN then applies MDHHS's set formula to calculate the portion of surplus dollars we can retain.



Fiscal Year (FY) 2023 Budget Presentation

Leslie Thomas, Certified Public Accountant (CPA)

Chief Financial Officer (CFO)

Mid-State Health Network

530 W. Ionia Ste F.

Lansing, MI 48933

Joseph Sedlock, Chief Executive Officer (CEO)

Amanda Ittner, Deputy Director (DD)

Budget Development

REVENUE ESTIMATES

- Michigan Department of Health and Human Services (MDHHS) along with Milliman its actuarial firm, provided a Rate Certification letter to PIHPs in July 2022.
- PIHP Finance Staff use details from the letter and appendices to develop revenue estimates based on average past enrollees. Milliman enrollees were estimated at existing Public Health Emergency (PHE) levels. Because the PHE is expected to end at some point in FY 23, with resulting reduced enrollments across the region and State, Finance Council members, consisting of CFOs in the region, determined that the projected revenue figures were likely too optimistic and agreed to adjust the number of enrollees to account for the churn and resulting anticipated revenue reductions after the PHE ends.
- MSHN revenue estimates are reviewed several times throughout the FY to ensure actual amounts received align or are higher than projections and are sufficient to cover anticipated expenditures

Budget Development

EXPENSE FIGURES

- ▶ Community Mental Health Services Programs (CMHSPs) - Expense numbers submitted by several CMHSPs are in excess of projected revenue. MSHN encouraged CMHSPs to report expenses needed to address ongoing state-wide concerns in the following areas:
 - ▶ Staff Retention
 - ▶ Staff Attraction
 - ▶ Temporary Payment Adjustments
 - ▶ Provider Stabilization - Utilization Issues
- ▶ Substance Abuse Prevention and Treatment (SAPT) providers - Expense amounts based on prior year utilization or negotiated contract/cost reimbursement funding levels. In addition, the spending projections include a 10% regional rate increase for the same concerns noted in the CMHSP section. MSHN's SAPT revenue is sufficient to cover provider expenses including a 10% rate increase and a portion of its admin costs.
- ▶ MSHN's region has aggressively implemented fiscal stabilization strategies within its provider networks while also introducing incentives to address internal staffing retention. **We acknowledge and understand consumer care is at risk if we do not take measures noted.**

FY 2023 Regional Budget Summary

CATEGORY	SAPT REVENUE		SAPT EXPENSE		SURPLUS/(DEFICIT)
Medicaid	14,871,832	24.07%	13,864,740	23.44%	1,007,092
HMP	26,450,624	42.82%	25,725,000	43.48%	725,624
Block Grant	15,947,361	25.81%	15,062,361	25.46%	885,000
PA 2	<u>4,506,627</u>	7.30%	<u>4,506,627</u>	7.62%	<u>-</u>
	61,776,444	100.00%	59,158,728	100.00%	2,617,716

**Mid-State Health Network
FY2023 PA2 Funding Recommendations by Provider
October 2022 Oversight Policy Board**

Provider	Provider Funding Total Requested	MSHN Funding Recommended	PA2 Amount Recommended*
Arbor Circle Total	-	-	-
Barry Eaton Health Department Total	(10,065)	(10,065)	(10,065)
Big Brothers Big Sisters of Jackson Total	-	-	-
Boys and Girls Club of Bay County Total	-	-	-
Catholic Charities of Shiawassee and Genesee Counties Total	-	-	-
Child Advocacy Center Total	-	-	-
Child and Family Charities Total	-	-	-
Cristo Rey Community Center Total	-	-	-
Eaton Regional Education Service Agency (RESA) Total	9,870	9,870	9,870
Family Services and Children's Aid Total	-	-	-
First Ward Community Center Total	-	-	-
Great Lakes Bay Health Centers Total	-	-	-
Henry Ford Allegiance Health Total	-	-	-
Home of New Vision Total	-	-	-
Huron County Health Department Total	-	-	-
Ingham County Health Department Total	-	-	-
Ionia County Health Department Total	-	-	-
Lansing Syringe Services Total	-	-	-
Lifeways Community Mental Health Authority Total	-	-	-
List Psychological Services Total	-	-	-
McLaren Bay Region (Neighborhood Resource Center) Total	-	-	-
Michigan Rehabilitation Services Total	-	-	-
Mid-Michigan District Health Department Total	-	-	-
Newaygo Regional Education Service Agency (RESA) Total	-	-	-
Parishioners on Patrol Total	-	-	-
Peer 360 Recovery Total	-	-	-
Prevention Network Total	-	-	-
Sacred Heart Rehabilitation Center Total	-	-	-
Saginaw City Police Total	-	-	-
Saginaw County Health Department Total	-	-	-
Saginaw Youth Protection Council Total	-	-	-
Shiawassee County Court Total	-	-	-
St. Johns Police Department Total	-	-	-
Sterling Area Health Center Total	-	-	-
Ten Sixteen Recovery Network Total	-	-	-
The Legacy Center Total	-	-	-
Wedgwood Christian Services Total	-	-	-
Wellness, Inx Total	-	-	-
Women of Colors Total	-	-	-
GRAND TOTAL	(195)	(195)	(195)

*Refer to *Comparison by County and Provider* report for details by county

**Mid-State Health Network
FY2023 PA2 Funding Recommendations by County**

County	Projected Beginning Reserve Balance	Projected FY2023 Treasury Revenue*	OPB Approved PA2 Provider Funding	MSHN Funding Recommendations October	Projected Ending Reserve Balance
Arenac	65,653	34,942	37,615	-	62,980
Bay	577,671	197,949	401,637	-	373,983
Clare	102,979	51,669	59,000	-	95,648
Clinton	453,521	125,416	139,233	-	439,704
Eaton	463,220	213,308	271,072	(195)	405,651
Gladwin	76,300	37,601	36,500	-	77,401
Gratiot	90,294	42,658	50,165	-	82,787
Hillsdale	173,254	50,511	85,289	-	138,476
Huron	156,250	68,545	99,733	-	125,062
Ingham	1,096,417	714,691	686,898	-	1,124,210
Ionia	306,800	69,514	178,148	-	198,166
Isabella	369,098	134,443	259,116	-	244,425
Jackson	655,958	318,039	403,501	-	570,496
Mecosta	198,809	83,764	136,500	-	146,073
Midland	377,548	170,212	189,633	-	358,127
Montcalm	237,334	96,171	144,834	-	188,671
Newaygo	151,015	72,604	72,669	-	150,950
Osceola	66,246	33,114	36,000	-	63,360
Saginaw	1,384,562	458,148	880,129	-	962,581
Shiawassee	348,561	90,904	254,794	-	184,671
Tuscola	139,549	49,955	84,161	-	105,343
Total	<u>\$ 7,491,040</u>	<u>\$ 3,114,158</u>	<u>\$ 4,506,627</u>	<u>\$ (195)</u>	<u>\$ 6,098,766</u>

Mid-State Health Network
Comparison of FY2022 and FY2023 PA2 by County and Provider

County	Provider	FY2022 OPB Approved PA2 Provider Funding	MSHN Funding Recommendations October	*New Provider / Renewal Contract	Coalition Reviewed; New Providers (Yes/No)	Detail of Services Provided for FY2023 Requests
Eaton						
	Barry Eaton Health Department			Renewal		Prevention: DYTUR/SYNAR activities.
		PA2 9,772	(10,065)			9.12.22 BEDHD Notified MSHN discontinue SUD contract for FY23
		Grants -	-			
		Total 9,772	(10,065)			
	Eaton Regional Education Service Agency (RESA)			Renewal		Prevention: \$5,000 in coalition discretionary funding, CHOICES, in-school probation, Front Line Worker training, behavioral health resource guide development, prevention education, prescription drug disposal, community outreach, Capital Counties Commit, MiPHY; Michigan Model Curriculums for the schools; PALS Program; Parenting Program/Resources; School Consultation; PALS Program.
		PA2 139,078	9,870	New	Yes	Absorbing services from BEDHD (DYTUR)
		Grants 160,000	-			
		Total 299,078	9,870			
	County Total	308,850	(195)			
	PA2 Subtotal	148,850	(195)			
	Grants Subtotal	160,000	-			
	Grand Total	308,850	(195)			

***"Grants" refers to Community Grant, State Opioid Response & COVID Grants
Annual Plans/Budgets not reviewed by Coalitions

*New Provider / Renewal Contract:
New Provider could also indicate that provider did not receive PA2 funds from the identified county in FY2022
Coalition Reviews New Providers

OPB Operational Report October 2022

Several Clinical Team functions and activities are ongoing year-round while others are specific to requirements of that quarter's place in the fiscal year cycle or situation-specific demands prompted by new federal, state, or local mandates or regulations, shifts in epidemiological trends (e.g., COVID surges or rise in stimulant use), etc. The activities below are separated accordingly.

Prevention

- Ongoing implementation of web-based media campaign (My Life My Quit) information for youth vaping prevention with text # for quit support
- Ongoing implementation of web-based media campaign
- Hosted facilitator training for Wellness Initiative for Senior Education (WISE) curriculum that focuses on wellness during aging including mental health, prescription drugs and alcohol use. Fourteen provider staff took part and can begin WISE cohorts.
- Youth Access to Tobacco report was compiled with data from all 21 counties for submission to MDHHS.
- Distributed nearly \$20,000 in provider staffing stabilization payments for Prevention providers.
- MSHN Prevention staff attended the National Prevention Network Conference virtually in August.
- MSHN Prevention staff and many provider staff attended the MDHHS Annual Substance Use and Co-Occurring Conference in September.
- Finalized FY23 plans and budgets for all Prevention providers.
- Hosted provider meeting in September to review FY22 closeout functions and any changes for FY23.
- Ongoing planning for grant projects and spending in FY23.
- Inter-regional coordination ongoing through Prevention Coordinators.
- Review of prevention providers' entries into MPDS (the Michigan Prevention Data System) where prevention providers log their activities, persons served, etc.
- Provision of technical assistance and training to existing providers on best practices for prevention and on how to document those in MPDS.
- Attending coalition meetings across Region 5's 21 counties.
- Continued implementation of FY21-23 SUD Strategic plan.

Treatment

- Support of MDHHS SUD site review for 2022. Received a score of 100% compliance 7-29-2022.
- Continuous evaluation of capacity, network adequacy, and gaps in service. Conducted Request for Interest (RFI) for Isabella and Montcalm counties for ASAM Levels of Care for residential (3.1, 3.3, 3.5, 3.7) and outpatient (1.0, 2.1, & MAT) services. Request for Proposals (RFP) scheduled for release in November 2022.
- Supported coordination and implementation of Opioid Health Home for Region 5. Completed an OHH site review in August 2022 to ensure provider readiness for formal implementation on 10-1-2022. Integrated Care Coordinator was hired to take on primary OHH supportive functions and started 9/5/2022.

- Continued SUD TX Provider annual planning activities with FY23 budget reviews/contract recommendations for August OPB & Sept. BOD.
- Supported Contingency Management Training and implementation with 6 SUD Treatment Providers for FY22 and FY23 continuation.
- Evaluated changes in source of truth standards for QAPI Site Review Tools for SUD Treatment Provider network w. recommendations for FY23.
- Support MDOC collaboration to address process and service needs for individuals transitioning from prison/jail to the community. Adding MAT provider access to Lifeways – Hillsdale location to assist. Awaiting ASAM designation from MDHHS to implement.
- Planning and coordination of training opportunities for SUD provider network. Supported FASD (72 participants attended) and EMDR (60 participants registered) training.
- Utilized grant funds to support SUD provider network participation in MDHHS SUD & Co-occurring Conference in September 2022 – 89 individuals requested and participated.
- Evaluation of Mobile Care Unit (MCU) and ongoing maintenance and repair needs and impacts on service accessibility.
- Monitoring of Public Health Emergency (PHE) unwind with MDHHS to support providers and individuals in services with guidance.
- Ongoing support of technical assistance needs with SUD treatment providers.
- Continued Treatment Team attendance at prevention community coalition meetings.
- Ongoing support of treatment providers’ strategies to stay open and viable during COVID with telemedicine, etc.
- Ongoing evaluation of opportunities to expand services for specialty populations of older adults, adolescents, veterans and military families.
- Ongoing monitoring of progress for FY21-23 SUD Strategic Plan
- Coordinate and facilitate regional ROSC meetings, regional MAT workgroup meetings, regional WSS workgroup meetings, regional WM/residential workgroup, and new outpatient provider meetings

Additional Activities in Q4:

- Ongoing coordination with statewide SUD Directors on consistency on stigma reduction, name changes of SAMHSA, NIDA, et al. and SUDS Directors dropping the word “abuse” from our name
- CCO gathered consensus from the 10 PIHPs for a formal endorsement of harm reduction that’s now been disseminated statewide (see below)
- CCO and Director of UM/CI facilitated ongoing REACH meetings
- CCO coordinated dissemination of implicit bias organizational assessment survey from Michigan Department of Civil Rights (MDCR)
- Meeting with MDCR as follow-up to DEI organizational assessment training
- Ongoing coordination between CCO and DEI Director of Michigan Primary Care Association (MPCA)
- CCO expanded focus on harm reduction and stigma reduction with attention to how stigma plays out differently in different cultural communities
- Meetings with Saginaw’s Women of Colors (WOC) and Michigan Health Endowment Fund on grant to reduce disparities in follow-up for treatment after an Emergency Room visit for SUD medical issue
- Working on lecture series in 2023 related to the opioid epidemic and reducing health disparities
- MCU redeployment to harm reduction
- Oversight and coordination of SUD prevention and treatment teams and all activities listed above



**Harm Reduction: A Consensus Statement of Support
by Michigan's 10 Community Mental Health Entities (Pre-Paid Inpatient Health Plans)**

Michigan has a comprehensive infrastructure of prevention, treatment and recovery services for people living with a substance use disorder (SUD). Individuals living with a SUD, however, often follow a bumpy road to recovery and sobriety. Social stigma, judgment from others and shame are barriers to individuals seeking treatment. Even after people have engaged in treatment, they can stumble on that road and relapse. Most people living with addictions, however, do recover. A 2017 [Harvard study](#) found that while 10% of the U.S. adult population has had a SUD, 9.1% of American adults are in recovery. Despite that, [per the CDC](#), the U.S. exceeded 107,000 drug overdose deaths in 2021 largely related to heroin, methamphetamine and cocaine being laced with synthetic opioids like fentanyl.

Harm reduction is an evidence-based strategy to keep people alive by supporting those struggling with active substance use *wherever they are* in their journey to recovery. If they are still using substances, a harm reduction approach works to lower the chance of overdose or of contracting Human Immunodeficiency Virus (HIV), Hepatitis C (HCV) or other diseases. Harm reduction strategies include distribution of naloxone, the overdose reversal medication that's saved many lives, and Syringe Service Programs (SSPs) which offer education about and connections to treatment pathways as they concurrently safely dispose of used syringes and distribute sterile syringes.

The myth that distributing sterile syringes increases drug use by enabling people to keep using drugs has been thoroughly discredited. In fact, individuals who use syringe service programs are 5 times more likely to engage in treatment and 3 times more likely to quit using drugs than individuals with a SUD that do not use an SSP (per [CDC](#)). Syringe Service Programs are not associated with any increase in crime (per [NIH](#)) and studies show that for every one dollar spent on harm reduction efforts, \$3 is saved in public health costs. Programs have also been shown to result, for example, in a 50% reduction in incidence of HIV and HCV (per [NIH](#)). By any measure, Syringe Service Programs are an effective means to save lives and keep people healthy along their journeys to recovery in our communities.

As the Mental Health Code – designated Community Mental Health Entities, Michigan's Prepaid Inpatient Health Plans (PIHPs), the regional entities that oversee the state's public behavioral health system, strongly endorse evidence-based practices like harm reduction. We are working to create a coordinated seamless continuum of care including prevention, harm reduction, treatment, and recovery. Along those lines, 86 SSP sites have been established around the state. We strongly support the work of Michigan's Syringe Service Programs in helping save lives of people who may be struggling with substance misuse or are in the early stages of recovery. We encourage our community partners to do the same.

**ENDORSED AND ADOPTED BY ALL TEN OF MICHIGAN'S PRE-PAID INPATIENT HEALTH PLANS/
DESIGNATED COMMUNITY MENTAL HEALTH ENTITIES, OCTOBER 4, 2022**

**Substance Use Disorder (SUD) Clinical Team
Narrative Report
FY22– Q3
April - June 2022**

PREVENTION GOALS	RESULTS & PROGRESS
Reduce Underage Drinking	34 programs with multiple activities provided parent and community education/information across the region this quarter. Five different social norming campaigns were conducted and over 20+ events held. One vendor education session took place with quarter. 31 evidence-based programs are in use with over 100+ groups using those EBPs.
Reduce Marijuana Use	24 evidence-based programs are in use with multiple groups/activities occurring using those EBPs. 14 Peer Assisted Leadership groups focus on marijuana misuse also as well as 29 student assistance programs with multiple activities during this quarter. 332 programs address AOD issues (most are Nurturing Parents groups/ activities). Five social norming campaigns across the entire region (all address AOD with inclusive focus on other drugs; anti-stigma).
Reduce prescription and over-the-counter drug abuse, including opiates	23 programs with multiple activities provide education/information on opioid misuse: prescription drug awareness, etc. 43 programs with multiple groups/activities provide recovery support/education in this quarter. Five social media campaigns addressing opioid education were conducted during this period.
Reduce youth access to tobacco	12 programs with multiple activities provide education/information on tobacco and OEND misuse conducted for parents and community members. 20 programs with multiple activities provided to youth across the entire region during this period. 60 vendor education sessions were completed this quarter as well as 7 non-formal SYNAR checks conducted. 111 formal SYNAR checks were conducted with only 9 sales.
Reduce Substance Use in Older Adults	3 programs (Huron and Saginaw counties) with over 40+ focus on increasing awareness and providing education on opioid misuse and the intersection of alcohol misuse with prescription drug misuse. Fifteen drug disposal events conducted this quarter.

TREATMENT GOALS	RESULTS & PROGRESS
Increase women’s specialty service programs	Mid-State Health Network (MSHN) has been working with Recovery Pathways to establish an Enhanced Women’s Specialty (EWS) services program in Shiawassee County. A pre-contract site review will be completed with Recovery Pathways in order to designate them as meeting the requirements for an EWS program. The Regional Women’s Specialty Task Team meets on a quarterly basis to promote continued services and to attract new programs in the region. Trauma Informed treatment trainings have been made available to the Women’s Specialty providers in the region. It is an expectation that all Women’s Specialty services in Region 5 will offer trauma sensitive environments and trauma informed treatment.
Increase array of medication assisted treatment programs	MSHN continues to support medication assisted treatment programs throughout the region. There have been no new programs added in Q3 of FY22. The Regional MAT Workgroup meets twice a year, with a next meeting occurring in May of this quarter.
Expand Stimulant Use Disorder Treatment	MSHN continues to support Stimulant Use Disorder treatment throughout the region. Stimulant use is on the rise, and MSHN has been proactive offering information and support.
Expand Jail Based Services	Recovery Pathways provides services in the Isabella, Midland, Bay, Shiawassee and Gladwin jails. Arbor Circle in Newaygo jail, and Samaritas in Eaton County jail. MSHN continues to look for new partners in the regional county jails.
Expand Trauma Informed Care	MSHN has offered Seeking Safety with Lisa Najavits as well as Healing Trauma with Stephanie Covington trainings in the past few years. For FY22, MSHN will be offering licensed master level clinicians a 6-day EMDR training with the Personal Transformation Institute. The training will take place in October and November of 2022.
Expand penetration rates for adolescents, older adults, and veterans/military families.	<p>The penetration rate for adolescents is .5% from 4/1/2022 through 6/30/2022. MSHN met with PPPS on 5/6/22 to complete the pre-contract site review to add them as ASAM 1.0 through MDHHS certification for adolescent designation. They were approved by the MSHN Treatment Team on 5/10/22. PPPS will need to have clinicians trained on the GAIN-ICore in order to complete MDHHS approved adolescent assessments.</p> <p>The penetration rate for older adults is 16.5% for the period of 4/1/2022 through 6/30/2022.</p> <p>As far as penetration rates for veterans and military: 12 veterans were directly connected to benefits, services, and supports, including finding housing and connection to behavioral health services by the Veteran’s Navigator. A webpage was added to the MSHN website for services and supports available for veterans and military families as well as a veteran and a military family’s resource guide.</p>

FY 22 Quarter 3					
	COP	% COP	Continuing Treatment Transfer	%Continuing Treatment Transfer	Total Discharges
Outpatient	1853	29.80%	678	10.90%	6208
Withdrawal Management (Detox)	184	36.90%	140	28.10%	498
Residential	577	30.50%	533	28.20%	1892

The figures above focus on two out of eleven discharge reason codes; Completion of Treatment (COP) and Continuing in Treatment/Transfer

County:

Arenac

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 6 Served: 32
Residential:	Admitted: 3 Served: 6
Withdrawal Management:	Admitted: 5 Served: 5
Medication Assisted Treatment:	Admitted: 5 Served: 6
Women's Specialty Services:	Admitted: 0 Served: 3

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,675	87
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Bay

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 131 Served: 493
Residential:	Admitted: 40 Served: 54
Withdrawal Management:	Admitted: 54 Served: 64
Medication Assisted Treatment:	Admitted: 25 Served: 115
Women's Specialty Services:	Admitted: 12 Served: 77

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	9,005	875
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Clare

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 38 Served: 142
Residential:	Admitted: 17 Served: 27
Withdrawal Management:	Admitted: 8 Served: 8
Medication Assisted Treatment:	Admitted: 0 Served: 31
Women's Specialty Services:	Admitted: 1 Served: 8

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	555	111
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Clinton

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 26 Served: 113
Residential:	Admitted: 26 Served: 36
Withdrawal Management:	Admitted: 13 Served: 16
Medication Assisted Treatment:	Admitted: 1 Served: 49
Women's Specialty Services:	Admitted: 1 Served: 5

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	394	43
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Eaton

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 73 Served: 270
Residential:	Admitted: 30 Served: 46
Withdrawal Management:	Admitted: 19 Served: 24
Medication Assisted Treatment:	Admitted: 3 Served: 81
Women's Specialty Services:	Admitted: 9 Served: 19

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	944	201
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Gladwin

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 23 Served: 93
Residential:	Admitted: 16 Served: 22
Withdrawal Management:	Admitted: 5 Served: 5
Medication Assisted Treatment:	Admitted: 0 Served: 16
Women's Specialty Services:	Admitted: 2 Served: 5

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	56	11
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Gratiot

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 27 Served: 120
Residential:	Admitted: 14 Served: 18
Withdrawal Management:	Admitted: 7 Served: 7
Medication Assisted Treatment:	Admitted: 7 Served: 43
Women's Specialty Services:	Admitted: 8 Served: 10

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,370	221
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Hillsdale

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 23 Served: 80
Residential:	Admitted: 20 Served: 33
Withdrawal Management:	Admitted: 3 Served: 3
Medication Assisted Treatment:	Admitted: 4 Served: 13
Women's Specialty Services:	Admitted: 8 Served: 12

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	416	74
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Huron

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 20 Served: 83
Residential:	Admitted: 6 Served: 6
Withdrawal Management:	Admitted: 4 Served: 4
Medication Assisted Treatment:	Admitted: 3 Served: 9
Women's Specialty Services:	Admitted: 0 Served: 8

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	2,907	245
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Ingham

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 339 Served: 1333
Residential:	Admitted: 137 Served: 197
Withdrawal Management:	Admitted: 113 Served: 121
Medication Assisted Treatment:	Admitted: 27 Served: 401
Women's Specialty Services:	Admitted: 19 Served: 49

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	3,107	480
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Ionia

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 26 Served: 132
Residential:	Admitted: 22 Served: 31
Withdrawal Management:	Admitted: 9 Served: 9
Medication Assisted Treatment:	Admitted: 8 Served: 20
Women's Specialty Services:	Admitted: 9 Served: 30

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,110	92
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Isabella

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 30 Served: 289
Residential:	Admitted: 16 Served: 24
Withdrawal Management:	Admitted: 7 Served: 8
Medication Assisted Treatment:	Admitted: 3 Served: 113
Women's Specialty Services:	Admitted: 2 Served: 23

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	2850	243
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Jackson

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 176 Served: 682
Residential:	Admitted: 77 Served: 114
Withdrawal Management:	Admitted: 41 Served: 45
Medication Assisted Treatment:	Admitted: 21 Served: 260
Women's Specialty Services:	Admitted: 32 Served: 71

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	10,087	1049
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Mecosta

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 31 Served: 121
Residential:	Admitted: 11 Served: 18
Withdrawal Management:	Admitted: 3 Served: 3
Medication Assisted Treatment:	Admitted: 1 Served: 25
Women's Specialty Services:	Admitted: 3 Served: 12

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	711	147
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Midland

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 56 Served: 222
Residential:	Admitted: 30 Served: 42
Withdrawal Management:	Admitted: 26 Served: 28
Medication Assisted Treatment:	Admitted: 7 Served: 31
Women's Specialty Services:	Admitted: 4 Served: 17

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	3,318	262
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Montcalm

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 50 Served: 231
Residential:	Admitted: 26 Served: 39
Withdrawal Management:	Admitted: 11 Served: 16
Medication Assisted Treatment:	Admitted: 4 Served: 43
Women's Specialty Services:	Admitted: 9 Served: 27

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	1,035	84
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Newaygo

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 32 Served: 126
Residential:	Admitted: 10 Served: 19
Withdrawal Management:	Admitted: 5 Served: 8
Medication Assisted Treatment:	Admitted: 4 Served: 35
Women's Specialty Services:	Admitted: 2 Served: 26

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	574	60
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Osceola

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 22 Served: 90
Residential:	Admitted: 12 Served: 15
Withdrawal Management:	Admitted: 4 Served: 5
Medication Assisted Treatment:	Admitted: 1 Served: 15
Women's Specialty Services:	Admitted: 1 Served: 7

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	629	108
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Saginaw

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 238 Served: 922
Residential:	Admitted: 76 Served: 102
Withdrawal Management:	Admitted: 84 Served: 95
Medication Assisted Treatment:	Admitted: 43 Served: 216
Women's Specialty Services:	Admitted: 23 Served: 104

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	8,294	888
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Shiawassee

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 87 Served: 286
Residential:	Admitted: 19 Served: 31
Withdrawal Management:	Admitted: 20 Served: 23
Medication Assisted Treatment:	Admitted: 7 Served: 29
Women's Specialty Services:	Admitted: 9 Served: 16

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	4,090	807
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide

County:

Tuscola

TREATMENT SERVICE	# of People Served
Outpatient:	Admitted: 35 Served: 195
Residential:	Admitted: 6 Served: 8
Withdrawal Management:	Admitted: 7 Served: 9
Medication Assisted Treatment:	Admitted: 3 Served: 26
Women's Specialty Services:	Admitted: 9 Served: 31

Count of intervention/Prevention programs/activities during the period	Total Attendees	# of Activities
Reduce underage drinking:	3,495	305
Reduce prescription and over-the-counter drug abuse, including opiates:		
Reduce youth access to tobacco:		

Synar	Planning-Results:
	111 formal SYNAR checks completed with only 9 sales region wide