

# MENTAL HEALTH SYSTEM STATE COMPARISON

# MICHIGAN



# Introduction

## About NACBHDD

Since 1989, the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) has been the leading voice for county and local authorities. Through our unique perspective informed by the critical role counties and county aligned mental health authorities play in caring for people affected by mental illness, addiction, and developmental disabilities, we work to strengthen the nation's local public behavioral health and I/DD systems. We do this by providing a national forum for state and local collaboration, education, advocacy, and sharing solutions that drive policy.

## A Note on the Case Study

Local mental health authorities have been on the frontlines for managing and providing care in community settings since widespread deinstitutionalization in the 1960s. However, there are wide variations in how states organize their local public mental health authorities. Given the increasing demand for mental health services, the launch of 988, a nationwide behavioral health crisis line, and the growing recognition of community-based approaches to whole person health and human services, the role of local authorities is increasing in importance.

## Why The Measures?

To better understand the existing landscape of local mental health authorities, we compared two states with robust public systems: Texas and Michigan. This case study succinctly identifies current authorities and structures for the behavioral health systems, their relationship with Medicaid-the largest federal payer for mental health services, and how these systems are positioned to interact with the crisis continuum as 988 is built out.

The goal of this case study is to provide a variety of stakeholders with a better understanding of who their local mental health authorities are, how they came to be, and their relevancy to current behavioral health issues.



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# Highlights



## Structure of Public System:

- 46 community mental health service programs (CMHSP) coordinate treatment and services in 83 Michigan counties
- Each CMHSP serves one to six counties.
- CMHSPs are organized in one of three ways: a county community mental health (CMH) agency, a community mental health organization, or a community mental health authority

## Medicaid:

- Total Medicaid and CHIP enrollment in Michigan was 2,439,425 in June 2020.
- Michigan expanded Medicaid for adults in April 2014.
- CMHSPs use 10 Prepaid Inpatient Health Programs (PIHPs) that manage mental health services for persons enrolled in Medicaid.
- Michigan has an integrated Medicaid health home in some counties or Prepaid Inpatient Health Program (PIHP) regions for the specialty behavioral health population.
- In 2020, MDHHS launched its Certified Community Behavioral Health Clinic (CCBHC) Medicaid demonstration program.

## Crisis Response :

- Crisis services system has three primary components: central crisis call center (Michigan Crisis and Access Line or MiCAL/988), mobile crisis intervention units, and crisis stabilization units.
- Michigan operates a Peer Warmline, a statewide warmline that connects individuals with certified peer support specialists who have lived experiences of behavioral health issues.



CMHSPs coordinate local care and provide direct services such as assessments and referrals, case management, crisis intervention, and outpatient care. CMHs are also the screening and authorizing entity for psychiatric inpatient services for children, adults with Medicaid as well as for those with no insurance. A CMHSP will provide immediate care to a person experiencing an emergency. Other services require an individual to go through an assessment process that determines their eligibility for services based on severity of illness. If a person is not eligible to receive services through a CMHSP, they will be directed to community resources that may help.<sup>3</sup>

CMHSPs must provide, at minimum, mental health services that include the following:

- Crisis stabilization and response including a 24-hour, 7-day per week, crisis emergency service that is prepared to respond to persons experiencing acute emotional, behavioral, or social dysfunctions, and the provision of inpatient or other protective environment for treatment.
- Identification, assessment, and diagnosis to determine the specific needs of the recipient and to develop an individual plan of services.
- Planning, linking, coordinating, follow-up, and monitoring to assist the recipient in gaining access to services.
- Specialized mental health recipient training, treatment, and support, including therapeutic clinical interactions, socialization and adaptive skill and coping skill training, health and rehabilitative services, and pre-vocational and vocational services.
- Recipient rights services.
- Mental health advocacy.
- Prevention activities that serve to inform and educate with the intent of reducing the risk of severe recipient dysfunction.
- Any other service approved by the department.<sup>4</sup>

The CMHSPs are overseen by the Behavioral and Physical Health and Aging Services Administration (BPHASA), which is located within the Michigan Department of Health & Human Services. Local County Boards of Commissioners appoint the CMHs' Board, which have a minimum of 12 members. CMH board members establish the policy direction for the program. A minimum of one-third of CMH board members statewide are primary consumers and family members.<sup>5</sup>

CMHSPs receive some support through State General Funds, provided on a formula basis.<sup>6</sup> State general funds are not an entitlement and must be reserved for the most severe and in need first.

# Medicaid

Medicaid is the major source of funding for the publicly funded mental health system in Michigan, and care at CMHs is an entitled benefit under Medicaid. Medicaid recipients are entitled to obtain services that are medically necessary if they have a serious mental illness, serious emotional disturbance, or intellectual/developmental disability. Priority is given to the most serious forms of disability and to those in urgent situations.<sup>7</sup>

Michigan expanded Medicaid for adults in April 2014. The expanded Medicaid program is called Healthy Michigan, and enrollment in expanded Medicaid stood at nearly 652,000 people at the start of 2020.<sup>8</sup> Total Medicaid and CHIP enrollment in Michigan was 2,439,425 in June 2020. Total Medicaid spending in fiscal year 2019 was \$18.4 billion in Michigan; the federal government paid 71.0% of these Medicaid costs.<sup>9</sup>

While the majority of people served by CMHSPs are Medicaid beneficiaries, CMHSPs do serve people with other payment types. The 46 CMHSPs use 10 Prepaid Inpatient Health Programs (PIHPs) that manage mental health services for persons enrolled in Medicaid. PIHPs receive capitated payments for each person in the plan. All CMHSPs belong to a PIHP and contract with their respective PIHP to provide Medicaid-funded services for its members.<sup>10</sup>

Michigan has an integrated Medicaid health home for the specialty behavioral health population - the Behavioral Health Home (BHH) for serious mental illness/serious emotional illness.<sup>11</sup> The Michigan Department of Health and Human Services (MDHHS) administers its Health Home through a contract, which in turn collaborates with designated health home partners (HHPs) to provide health home services. Not all PIHPs are part of the BHH yet. Some CMHSPs have BHH status through Primary Care and Behavioral Health Integration funding from SAMHSA and/or through their Certified Community Behavioral Health Clinic (CCBHC).

Michigan's Behavioral Health Home (BHH) provides comprehensive care management and coordination services to Medicaid beneficiaries with a serious mental illness or serious emotional disturbance. Participation is voluntary, and enrolled beneficiaries may opt-out at any time.<sup>12</sup>

BHH's receives reimbursement for providing the following federally mandated core services:

- Comprehensive Care Management
- Care Coordination
- Health Promotion
- Comprehensive Transitional Care
- Individual and Family Support
- Referral to Community and Social Services

In 2020, MDHHS launched its Certified Community Behavioral Health Clinic (CCBHC) Medicaid demonstration program. Currently, there are 13 CCBHC demonstration sites in Michigan. CCBHCs are designed to provide comprehensive mental health and substance use disorder services to persons in need regardless of their ability to pay, including those who are underserved, have low incomes, are on Medicaid, uninsured, have private insurance and are active-duty military or veterans.<sup>13</sup>



# Crisis System

MDHHS has a crisis services system for all Michiganders. This system has three primary components: central crisis call centers, mobile crisis intervention units, and crisis stabilization units.

## Central Crisis Call Centers:

- Michigan Crisis and Access Line (MiCAL), Michigan's central crisis and access line, coordinates with the national 988 Lifeline that accepts 988 calls, texts, and chats. Individuals in need of information, support, or services reach MiCAL by either calling their direct line or by calling the 988 line. MiCAL is staffed by Common Ground, a 24-hour crisis services agency.<sup>14</sup>
- In Michigan, MiCAL and 988 are not two separately staffed crisis lines. While MiCAL and 988 are two separate numbers, MiCAL is responsible for answering 988 calls in all areas of Michigan. In addition, each CMHSP has its own crisis and access line.
- Some regions use 988 exclusively after hours while other regions tie 988 into the local CMH crisis line.
- In addition, Michigan operates a Peer Warmline, a statewide warmline that connects individuals with certified peer support specialists who have lived experiences of behavioral health issues, trauma, or personal crises, and are trained to support and empower the callers.

## Mobile crisis intervention units:

- Mobile Crisis units primarily exist in the more urban areas of the state. MDHHS' goal is to ultimately expand mobile crisis units across the state for all populations. As part of Michigan's CCBHC demonstration program, CCBHCs are required to provide a set of nine comprehensive services, either directly by the CCBHC or through designated collaborating organizations (DCOs), including crisis mental health services, 24-hour mobile crisis teams, emergency crisis intervention services, and crisis stabilization.<sup>15</sup> Children's Intensive Crisis Stabilization services (ICSS) are also required. State funds have been provided to expand and enhance children's crisis services and to allow customization based on community need.

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**Crisis Stabilization Units:**

- Initiated by hospitals, crisis stabilization units (CSUs) have existed in Michigan for many years.
- In 2020, MDHHS established minimum standards and requirements for certification of CSUs. CSUs are meant to provide a short-term alternative to emergency department and psychiatric inpatient admission for people who can be stabilized through treatment and recovery coaching within 72 hours.
- CSUs must:
  - Ensure linkage and partnership with Michigan Crisis and Access Line (MiCAL)
  - Ensure a pre-admission screening unit is available on a 24-hour basis to provide crisis services on a voluntary basis.
  - Establish and maintain crisis response partnerships with law enforcement, dispatch, EMS, and other mobile crisis response systems in the region.

To encourage participation and creation of CSUs, MI Legislature has designated funding in the FY 2023 budget to account for at least 9 CSUs.

# Conclusion



Michigan's decentralized system is publicly funded and provides mental and behavioral health services through county-level community programs. The 46 Community Mental Health Service Programs (CMHSPs) and the organizations they contract with provide a comprehensive range of mental health services and supports to children, adolescents and adults with mental illnesses, developmental disabilities, and substance use disorders in all 83 Michigan counties.

Medicaid is the primary source for mental health funding and care at Community Mental Health (CMH) agencies, authorities, and organizations are an entitled benefit under Medicaid. Michigan expanded Medicaid for adults in April 2014. The expanded Medicaid program is called Healthy Michigan, and enrollment in expanded Medicaid stood at nearly 652,000 people at the start of 2020.<sup>16</sup> Total Medicaid and CHIP enrollment in Michigan was 2,439,425 in June 2020.

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# State Resources



## Michigan Department of Health and Human Services:

<https://www.michigan.gov/mdhhs>

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## Michigan Medicaid Program:

<https://www.michigan.gov/mdhhs/assistance-programs/medicaid>

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## Community Mental Health Association of Michigan (CMHA):

<https://cmham.org/>

**Thank you to:**  
**Community Mental Health Association of Michigan**  
**Centra Wellness Network**  
**West Michigan Community Mental Health**

# Endnotes

- 1) <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/cmhsp>
- 2) State Notes TOPICS OF LEGISLATIVE INTEREST, An Overview of Community Mental Health Services By Matthew Grabowski, Fiscal Analyst, January/February 2009
- 3) State Notes TOPICS OF LEGISLATIVE INTEREST, An Overview of Community Mental Health Services By Matthew Grabowski, Fiscal Analyst, January/February 2009
- 4) Section 206, Michigan Mental Health Code By Matthew Grabowski, Fiscal Analyst, January/February 2009
- 5) State Notes TOPICS OF LEGISLATIVE INTEREST, An Overview of Community Mental Health Services By Matthew Grabowski, Fiscal Analyst, January/February 2009
- 6) [https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder1/Folder47/LTCconference3\\_23\\_06\\_1.pdf?rev=52033bd58fd146a58870b8b986ef2eca](https://www.michigan.gov/-/media/Project/Websites/mdhhs/Folder1/Folder47/LTCconference3_23_06_1.pdf?rev=52033bd58fd146a58870b8b986ef2eca)
- 7) <https://chrt.org/publication/community-mental-health-cmh-services-coverage-delivery-michigan/#:~:text=Today%2C%20Medicaid%20is%20the%20major,than%20uninsured%20and%20underinsured%20individuals.>
- 8) <https://www.healthinsurance.org/medicaid/michigan/#expansion>
- 9) <https://www.kff.org/medicaid/state-indicator/federalstate-share-of-spending/?currentTimeframe=0&sortModel=%7B%22collId%22:%22Location%22,%22sort%22:%22asc%22%7D>
- 10) [https://www.house.mi.gov/hfa/PDF/HealthandHumanServices/DHHS\\_Subcmte\\_Testimony\\_CMHABehavioralHealth\\_PresentationA\\_Bolter\\_2-27-19.pdf](https://www.house.mi.gov/hfa/PDF/HealthandHumanServices/DHHS_Subcmte_Testimony_CMHABehavioralHealth_PresentationA_Bolter_2-27-19.pdf)
- 11) <https://www.michigan.gov/mdhhs/assistance-programs/medicaid/integrated-health-homes>
- 12) <https://www.michigan.gov/mdhhs/assistance-programs/medicaid/behavioral-health-home/consumer-resources>
- 13) [https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/ccbhc?utm\\_source=google&utm\\_medium=cpc&utm\\_campaign=cchbc](https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/ccbhc?utm_source=google&utm_medium=cpc&utm_campaign=cchbc)
- 14) [https://www.house.mi.gov/Document/?Path=2021\\_2022\\_session/committee/house/standing/health\\_policy/meetings/2021-02-11-1/documents/testimony/021121MDHHS%20MiCAL%20Project%20Update.pdf](https://www.house.mi.gov/Document/?Path=2021_2022_session/committee/house/standing/health_policy/meetings/2021-02-11-1/documents/testimony/021121MDHHS%20MiCAL%20Project%20Update.pdf)
- 15) <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mi-behavioral-health-crisis-services>
- 16) <https://www.healthinsurance.org/medicaid/michigan/#expansion>