



# MI Public Mental Health System

## ● Michigan Mental Health Code

- System of care through Community Mental Health Services Programs (CMHSPs).
- Single point of entry through CMHSP.
- Population to be served:
  - Direct services to individuals who have a serious mental illness, developmental disability, or serious emotional disturbance.
- State General Funds – Provided on formula basis





# Mental Health Code

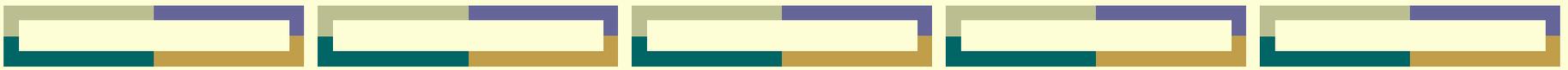
## Populations to be served:

- The department shall give priority to the following services:
    - (i) Services for individuals with the most severe forms of serious mental illness, serious emotional disturbance, or developmental disability.
    - (ii) Services for individuals with serious mental illness, serious emotional disturbance, or developmental disability who are in urgent or emergency situations.
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# Medicaid Program

- Health Plans for physical health care includes mental health benefit with maximum 20 visits.
  - Fee for Service for those not enrolled in health plan. Mental Health Benefit of 10 visits with psychiatrist
  - Specialty Services provided through Prepaid Inpatient Health Plans (PIHPs)
    - 18 PIHPs in the state. All are CMHSPs or regional affiliation of CMHSPs.
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# Medicaid Specialty Services

## Managed by PIHPs

Services for people with developmental disabilities, mental illness, serious emotional disturbance and substance use disorders.

Individuals with mental illness, serious emotional disturbance or developmental disability with needs that require a broad array of mental health services and supports.

Services provided based on medical necessity

Medicaid funds cannot be used to provide room and board.





# FY'04 Data: Mental Health Service Recipients

Community Mental Health Services  
Programs

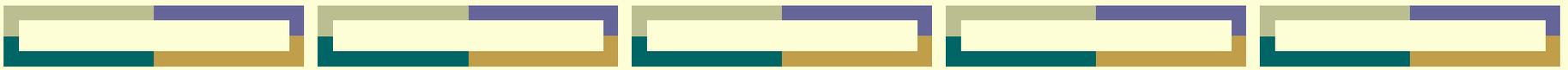
(CMHSPs) served 187,058 people

- 144,435 with mental illness
  - 25,977 with developmental disabilities
  - 6,952 with MI/DD
  - Remainder: substance abuse or unknown disability
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# FY'04 Data: Characteristics of Mental Health Recipients

- People with mental illness:
    - 79% are adults
    - 67.8% Medicaid and/or Medicare
    - 70.8% live “privately” (own home or with relatives)
    - 6.4% live in licensed residential setting
    - 3.4% live in nursing care facility
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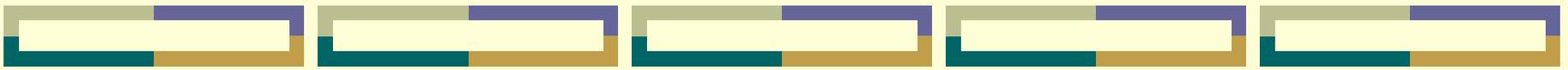
# FY'04 Data: Characteristics of Mental Health Recipients, II

- People with Developmental Disabilities
    - 82% are adults
    - 77% Medicaid, 37% Medicare
    - 53% live “privately” (own home or with relatives)
    - 34% live in licensed residential settings
    - 1% live in nursing care facility
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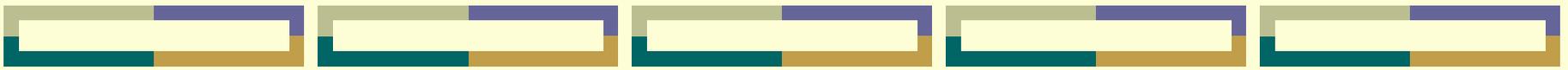
# Medicaid 101

- Medicaid services must be medically necessary
  - Service that individual requests, or that person-centered planning committee selects, must meet medical necessity criteria
  - Pre-paid Inpatient Health Plan (PIHP) determines medical necessity and authorizes the amount, scope and duration of service that will achieve the purpose of the service
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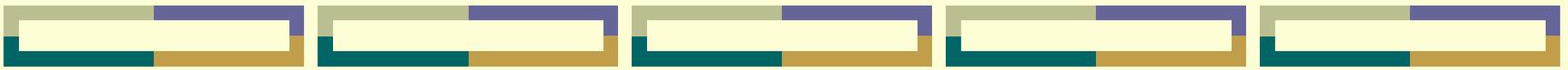
# Medicaid 101

- Medicaid beneficiaries are “entitled” to the services that are medically necessary
  - Denial, termination, reduction or suspension of medically necessary services by a PIHP may be appealed by the beneficiary at the state level
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# Service Array

- Medicaid State Plan Services
    - Primary Health Care Services and Limited Mental Health Care Services are provided by the Medicaid Health Plans
    - Specialty Mental Health Services are provided by the Pre-Paid Inpatient Health Plans
  - Home and Community Based Waiver Services for persons with Developmental Disabilities are provided by the Pre-Paid Inpatient Health Plans
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# Service Array, II

- Additional or 1915(b)(3) Medicaid Services are provided by the Pre-Paid Inpatient Health Plans
  - Designed to support people who want to live independently, work competitively, and participate in community life



## Public Mental Health System in Long Term Care

Location	Funding Source	Service Provider
<b>Nursing Home</b> (Mild MH Problems)	Medicaid Recipient Non-Medicaid Recipient	Nursing Home Private Insurer Some CMHs may provide with GF
<b>Nursing Home</b> (Individuals with serious mental illness or developmental disability.)	Medicaid Recipient  Non-Medicaid Recipient	Nursing Home Prepaid Inpatient Health Plan (PIHP)/ Community Mental Health Service Program (CMHSP) provide specialized services per OBRA requirements Private Insurance
<b>Community</b> (Mild MH Problems)	Medicaid Recipient  Non-Medicaid Recipient	Medicaid Health Plans Or Medicaid Fee for Service Private Insurance
<b>Community</b> (Individuals with serious mental illness or developmental disability)	Medicaid Recipient Non-Medicaid Recipient	PIHP's/CMHSP Private Insurance CMHSP through GF dollars