



STATE OF MICHIGAN

DEPARTMENT OF COMMUNITY HEALTH
LANSING

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GOVERNOR

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March 5, 2008

TO: Executive Directors of Prepaid Inpatient Health Plans (PIHPs),
Community Mental Health Services Programs (CMHSPs), and
Substance Abuse Coordinating Agencies (CAs)

FROM: Patrick Barrie, Deputy Director
Mental Health and Substance Abuse Administration

Donald Allen, Director 
Office of Drug Control Policy

SUBJECT: Integrated Treatment Committee (ITC)

The Michigan Department of Community Health (MDCH) supports a recovery-based system of care for adults with mental illness and/or substance use disorders and is making efforts to improve practices so that consumers may select and receive the best services possible. For the last several years, MDCH has made federal Mental Health Block Grant funding available to individual PIHPs and CMHSPs to support the development of integrated treatment. As a result of these activities, all 18 PIHPs and most of the CAs have been working on integrated treatment for individuals with co-occurring mental health and substance use disorders.

The purpose of this memo is to let you know that the scope of the COD Subcommittee that was formed three years ago to oversee the implementation of the evidence-based practice for people with co-occurring serious mental illness and substance use disorders has been expanded. The work of the Subcommittee has included broader system change to support a comprehensive system of care for people with co-occurring disorders. Developing a co-occurring-capable system of care is essential to promote the individual recovery of each individual with co-occurring needs.

We have asked the expanded committee (ITC) to address the needs of individuals with mental illness at all levels of severity (mild, moderate, and serious) and co-occurring substance disorder. These individuals include all those served in the public substance abuse system as well as the public mental health system. Recommendations from the ITC to the department will be handled by the Internal Integrated Treatment Group (IITG), which we chair.

The ITC is comprised of consumers, university representatives, administrators and clinicians, department staff, and others. Recently, additional representatives from the substance abuse network have been added to the group. Also, representatives from the Medicaid Health Plans have joined us as we address the needs of Medicaid beneficiaries who have mental health benefits outside of the PIHP/CMHSP mental health system.

The statewide Change Agent Team Training that began in January 2008 is meant to assure that integrated services and systems that support them become firmly embedded throughout the

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state. These regional groups will be instrumental in developing the needed multi-level system change in which all consumers with co-occurring disorders have access to co-occurring competent services. We encourage your participation and support in this important transformation.

The purpose of the ITC is to ensure the public system of care addresses co-occurring substance abuse and mental health needs whether the individual seeks assistance from the mental health or substance abuse system.

This combined Mental Health and Substance Abuse Administration (MHSA) and Office of Drug Control Policy (ODCP) effort will be lead by the following individuals.

1. Patty Degnan, Manager, Service Innovation and Consultation Section, MHSA. Ms. Degnan may be contacted at (517) 373-2845, or at degnanp@michigan.gov.
2. Deborah Hollis, Administrator, Division of Substance Abuse and Gambling Services, ODCP. Ms. Hollis may be contacted at (517) 335-6572, or at hollisd@michigan.gov.
3. Jane Konyndyk, Deputy Director, network180 PIHP. Ms. Konyndyk may be contacted at (616) 336-3765, or at janek@network180.org.
4. Dennis Priess, Executive Director, Northern Michigan Substance Abuse Services, Inc. Mr. Priess may be contacted at (989) 732-1791, or at dpriess@nmsas.net.

The charge for the ITC is as follows:

- Incorporate all the stakeholders to develop a Continuous, Comprehensive Integrated System of Care for all the individuals served by the public mental health and substance abuse systems
- Develop consensus in addressing co-occurring disorder services for people at all levels of severity (all four quadrants in the model)
- Work with the local change agent groups to address areas where system change is necessary to ease implementation
- Identify and address barriers
- Oversee the implementation of Integrated Dual Disorders Treatment (IDDT) at the PIHPs
- Address performance improvement, quality improvement and outcome monitoring

Meetings are held monthly in Lansing. The stakeholder group consists of consumers, family members, PIHP, CMHSP, CA and provider staff, university staff, and MHSA and ODCP staff.

The IITG will provide oversight to the ITC. The ITC will provide the IITG written progress regarding the above charges on a monthly basis. The IITG will make the final decision on matters that cannot be resolved by the ITC.

Tison Thomas is the department specialist assigned to this initiative. Mr. Thomas can be reached at (517) 241-2616, or at thomasti@michigan.gov. It is our continuing mission to promote the development of integrated treatment capacity within the state's public substance abuse and mental health systems. We look forward to working together to optimize services for people with co-occurring mental health and substance use disorders.