

Good morning,

My name is Sue Winter and I serve as the Executive Director of Northern Michigan Substance Abuse Services, respectively referred to as "NMSAS". NMSAS is the substance abuse coordinating agency for 30 counties in central and northern-lower Michigan. I am grateful for the opportunity to share with the Commission information to assist you in meeting the charge issued to you by the Governor.

On December 28, 2012 the Governor signed into law Public Act 500. This action amended both the Mental Health and Public Health Codes. Significant to the individuals, families and communities that NMSAS serves, is the removal of substance abuse from the Public Health Code and placement as a responsibility under the Mental Health Code and its system. I am requesting that the Commission be mindful of this action and thoughtfully consider the needs of individuals, families and communities that are impacted by substance abuse in meeting its charge.

In Fiscal Year 2012, NMSAS served over 6500 people in need of treatment services. Approximately 45% of these individuals also had mental health issues, but less than 200 or 3% had issues severe enough to be served by the community mental health system. The remaining 42% of individuals either received services to address their mental health issues in conjunction with their substance use disorder treatment services or they received no mental health treatment at all. It has been my experience in the past 29 years that the Community Mental Health System serves well those individuals who meet its criteria for care. I am here however on behalf of the individuals the mental health system will be serving through Michigan's integration efforts, those with a substance use disorder. As the coordinating agency system will be replaced no later than October 1, 2014 by new entities formed within the community mental health system, it is important that the voice and needs of individuals with substance use disorders are not lost. As the Commission considers policy and other systematic changes, I ask that it distinctly evaluate the impact your recommendations will have on individuals, families and communities in need of substance use disorder treatment, prevention and recovery support services.

Please consider actively seeking input not only from experts in substance use disorder treatment, recovery and prevention, but community partners that have worked well with the current substance use disorder service management and delivery system. These include our partners within the Department of Human Services, Drug and Sobriety Courts, Community Corrections, Public Health, nonprofit service agencies, Michigan Rehabilitation Services, Veteran's Services, physicians, and importantly, people within the recovering community. As they have done so well through the years with me, I trust that they will candidly share with you what, within the current system works and should be maintained and built upon and what

needs to be changed. Good system design and policy is dependent on the maintenance of an open system – one that welcomes new energy and ideas, allowing it to thrive.

Addiction affects everyone.

As you go through this process to meet the charge of the Commission, the system that had traditionally advocated on behalf of individuals, families and communities will be being dismantled and integrated into the mental health system. It is vital therefore that during this dynamic time, your attention and commitment to assuring the needs of individuals, families and communities impacted by substance use disorders are purposely and mindfully considered in your decisions.

Thank you.

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