

COMMUNITY MENTAL HEALTH SERVICES PROGRAMS REPORT

(FY2013 Appropriation Bill - Public Act 200 of 2012)

Section 404: (1) Not later than May 31 of the current fiscal year, the department shall provide a report on the community mental health services programs to the members of the house and senate appropriations subcommittees on community health, the house and senate fiscal agencies, and the state budget director that includes the information required by this section. (2) The report shall contain information for each CMHSP or PIHP and a statewide summary, each of which shall include at least the following information: (a) A demographic description of service recipients which, minimally, shall include reimbursement eligibility, client population, age, ethnicity, housing arrangements, and diagnosis. (b) Per capita expenditures by client population group. (c) Financial information that, minimally, includes a description of funding authorized; expenditures by client group and fund source; and cost information by service category, including administration. Service category includes all department-approved services. (d) Data describing service outcomes that includes, but is not limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment. (e) Information about access to community mental health services programs that includes, but is not limited to, the following: (i) The number of people receiving requested services. (ii) The number of people who requested services but did not receive services. (f) The number of second opinions requested under the code and the determination of any appeals. (g) An analysis of information provided by CMHSPs in response to the needs assessment requirements of the mental health code, 1974 PA 258, MCL 330.1001 to 330.2106, including information about the number of individuals in the service delivery system who have requested and are clinically appropriate for different services. (h) Lapses and carryforwards during the immediately preceding fiscal year for CMHSPs or PIHPs. (i) Information about contracts for mental health services entered into by CMHSPs or PIHPs with providers, including, but not limited to, all of the following: (i) The amount of the contract, organized by type of service provided. (ii) Payment rates, organized by the type of service provided. (iii) Administrative costs for services provided to CMHSPs or PIHPs. (j) Information on the community mental health Medicaid managed care program, including, but not limited to, both of the following: (i) Expenditures by each CMHSP or PIHP organized by Medicaid eligibility group, including per eligible individual expenditure averages. (ii) Performance indicator information required to be submitted to the department in the contracts with CMHSPs or PIHPs. (k) An estimate of the number of direct care workers in local residential settings and paraprofessional and other nonprofessional direct care workers in settings where skill building, community living supports and training, and personal care services are provided by CMHSPs and PIHPs as of September 30 of the prior fiscal year employed directly or through contracts with provider organizations. (3) The department shall include data reporting requirements listed in subsection (2) in the annual contract with each individual CMHSP or PIHP. (4) The department shall take all reasonable actions to ensure that the data required are complete and consistent among all CMHSPs or PIHPs.

*Michigan Department
of Community Health*



Rick Snyder, Governor
James K. Haveman, Director

REPORT FOR
SECTION 404

COMMUNITY MENTAL HEALTH SERVICE
PROGRAMS DEMOGRAPHIC AND COST
DATA
FY 2012

STATE OF MICHIGAN



May 2013

**REPORT FOR
SECTION 404 (2) (3)
COMMUNITY MENTAL HEALTH SERVICE PROGRAMS
DEMOGRAPHIC AND COST DATA
2012**

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May 2013

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SECTION 404 (2)
CMHSP DEMOGRAPHIC AND COST DATA
FY 2012

Introduction

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
REPORT ADDRESSING PA 200 (2012) SECTION 404(2) & 404(3)

Section 404(2)(a, b) requires a report containing information for each Community Mental Health Services Program (CMHSP) or Specialty Prepaid Health Plan (PIHP) with a statewide summary; such a report will give a demographic description of service recipients, including, reimbursement eligibility, client population groups, age, ethnicity, housing arrangements and diagnosis, and per capita expenditures per client population group. This information is provided in the attached document for persons with mental illness (MI), developmental disabilities (DD), dual diagnosis (MI & DD) and substance abuse for each CMHSP or PIHP, as well as statewide.

Information to address these sections is current as of April 2013, from all 46 CMHSP programs for the reporting period October 1, 2011 through September 30, 2012. In FY 2012, there were 191,055 persons with MI, 30,263 persons with DD, 13,470 persons with MI & DD, 1,611 persons who received substance abuse services only, 1,166 persons reported as assessment only and therefore their disability designation could not be determined, and 5,319 persons for whom diagnosis is unknown, for a total 233,139 persons who received services in CMHSPs or PIHPs throughout Michigan. Of those individuals with MI, 40,800 (21 percent) are 17 years or under and 6,473 (21 percent) of the persons with DD are 17 years or younger. Of those persons for whom race or ethnicity are reported, 75,853 (34 percent) are members of a minority group. The total costs reported across the 46 CMHSPs for FY 2012 was \$2,513,749,378. The attached material provides cost information by CMHSP for adults and children with MI, and persons with DD. This section also provides cost information on administration, indirect prevention, and other additional costs like lab and pharmacy services and grant-funded services.

Section 404(2)(c) requires financial information that includes a description of funding authorized, expenditures by client group and fund sources, and cost information by service category including administration. Information to address this section was obtained in February 2012, from all 46 CMHSPs for the period October 1, 2011 through September 30, 2012. The attached report provides a summary of the costs specific groups of services for adults and children with MI, and persons with DD for each CMHSP, as well as statewide.

Section 404(2)(d) requires the reporting of data describing service outcomes which shall include, but not be limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment. In 2012, all beneficiaries enrolled in Assertive Community Treatment (ACT) were asked to complete the 44-item MHSIP Consumer Survey. In addition, all families with a child or adolescent receiving home-based services were also asked to complete the 26-item Youth Satisfaction Survey (YSS) for Families. This information is provided in the attached for each CMHSP and PIHP.

Section 404(2)(e)(i,ii) requires information about access to CMHSPs which shall include, but is not limited to, the number of persons receiving and/or requesting services and the number of people who requested services but did not receive services. The attached report includes information on the number of persons who requested CMHSP services. Details are shown on the disposition of the requests including numbers who met eligibility criteria, numbers referred elsewhere, and numbers placed on a waiting list. This information is presented for each disability designation group by CMHSP.

Section 404(2)(f) requires the number of second opinions requested under the code including the determination of any appeals. This section provides information from the relevant indicators from the Performance Indicator System. Aggregated performance indicator data is submitted quarterly by CMHSPs.

Section 404(2)(g) requires an analysis of information provided by CMHSPs in response to the needs assessment requirements of the Mental Health Code, including information about the number of persons in the service delivery system who have requested, and are clinically appropriate, for different services. In this section, each CMHSP describes current activities and programs and what has changed since last year's CMHSP needs assessment.

Section 404(2)(h) requires lapses and carry forwards for FY 2011-2012. This information is provided in the attached for each CMHSP and PIHP.

Section 404(2)(i)(i, ii, iii) requires information regarding CMHSP or PIHP provider contracts, including amount and rates, organized by type of service provided as well as administrative costs. This information is provided for each CMHSP.

Section 404(2)(j) requires information on the community mental health Medicaid managed care program, including, but not limited to, (i) expenditures by each CMHSP or PIHP organized by Medicaid eligibility group, including per eligible individual expenditure averages and (ii) performance indicator information required to be submitted to the Department in the contracts with CMHSPs or PIHPs. The expenditures by Medicaid eligibility group are provided in this section as are the data for the CMHSP Performance Indicators FY12.

Section 404(2)(k) requires an estimate of the number of direct care workers in local residential settings and paraprofessional and other nonprofessional direct care workers in settings where skill building, community living supports and training, and personal care services are provided by CMHSPs or PIHPs as of September 30, 2012, employed directly or through contracts with provider organizations. This information is provided for each CMHSP.

Section 404(3) requires that the Department shall include data reporting requirements listed in subsection (2) in the annual contract with each individual CMHSP or PIHP. The CMHSP contract for FY12 is included in the attached.

SECTION 404 (2)(a)
DEMOGRAPHIC & DIAGNOSIS
SUMMARY DATA
FY 2012

Statewide Summary & CMHSP Specific

CMHSP Demographic Summary
Numbers and Percentages of Persons with Mental Illnesses and Developmental Disabilities
Who Received Services from CMHSPs
Fiscal Year 2012
State of Michigan

Demographic Characteristics	MI Consumers		DD Consumers		* Substance Abuse Consumers		Dual Diagnosis (MI & DD)		** Assessment Only		Unknown Disability		Total Served	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Gender														
Males	96,024	50.26%	18,098	59.80%	1,053	65.36%	8,071	59.92%	583	50.00%	2,760	51.89%	126,589	52.12%
Females	94,795	49.62%	12,159	40.18%	558	34.64%	5,397	40.07%	583	50.00%	2,550	47.94%	116,042	47.78%
Unknown Gender	236	0.12%	6	0.02%	0	0.00%	2	0.01%	0	0.00%	9	0.17%	253	0.10%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Age														
Age 0 through 3	1,504	0.79%	566	1.87%	0	0.00%	47	0.35%	75	6.43%	74	1.39%	2,266	0.93%
Age 4 through 12	17,914	9.38%	3,661	12.10%	1	0.06%	1,199	8.90%	120	10.29%	454	8.54%	23,349	9.61%
Age 13 through 17	21,382	11.19%	2,246	7.42%	87	5.40%	1,032	7.66%	125	10.72%	628	11.81%	25,500	10.50%
Age 18 through 26	26,464	13.85%	6,433	21.26%	335	20.79%	2,782	20.65%	215	18.44%	1,123	21.11%	37,352	15.38%
Age 27 through 64	114,942	60.16%	15,650	51.71%	1,175	72.94%	7,461	55.39%	568	48.71%	2,775	52.17%	142,571	58.70%
Age 65 and Over	8,849	4.63%	1,707	5.64%	13	0.81%	949	7.05%	63	5.40%	265	4.98%	11,846	4.88%
Unknown Age	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Race/Ethnicity														
White/Caucasian	110,305	57.73%	19,573	64.68%	1,039	64.49%	10,357	76.89%	739	63.38%	2,259	42.47%	144,272	59.40%
African American/Black	43,324	22.68%	6,469	21.38%	372	23.09%	1,632	12.12%	194	16.64%	595	11.19%	52,586	21.65%
American Indian or Alaskan Native	1,533	0.80%	146	0.48%	28	1.74%	102	0.76%	12	1.03%	16	0.30%	1,837	0.76%
Asian	524	0.27%	210	0.69%	3	0.19%	62	0.46%	6	0.51%	20	0.38%	825	0.34%
Native Hawaiian or other Pacific Islander	49	0.03%	9	0.03%	1	0.06%	7	0.05%	0	0.00%	0	0.00%	66	0.03%
Other Race	5,407	2.83%	913	3.02%	41	2.55%	264	1.96%	18	1.54%	135	2.54%	6,778	2.79%
Multiracial	10,614	5.56%	1,864	6.16%	59	3.66%	891	6.61%	69	5.92%	264	4.96%	13,761	5.67%
Unknown/Refused/Missing	19,299	10.10%	1,079	3.57%	68	4.22%	155	1.15%	128	10.98%	2,030	38.17%	22,759	9.37%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Hispanic														
Hispanic or Latino	7,111	3.72%	791	2.61%	70	4.35%	348	2.58%	26	2.23%	168	3.16%	8,514	3.51%
Not Hispanic or Latino	148,492	77.72%	25,119	83.00%	1,263	78.40%	11,356	84.31%	791	67.84%	2,796	52.57%	189,817	78.15%
Unknown/Missing	35,452	18.56%	4,353	14.38%	278	17.26%	1,766	13.11%	349	29.93%	2,355	44.28%	44,553	18.34%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Corrections Status														
In Prison	89	0.05%	1	0.00%	1	0.06%	3	0.02%	12	1.03%	1	0.02%	107	0.04%
In Jail	3,283	1.72%	19	0.06%	91	5.65%	39	0.29%	20	1.72%	44	0.83%	3,496	1.44%
Paroled from Prison	3,829	2.00%	49	0.16%	68	4.22%	44	0.33%	0	0.00%	92	1.73%	4,082	1.68%
Probation from Jail	8,853	4.63%	148	0.49%	200	12.41%	196	1.46%	32	2.74%	199	3.74%	9,628	3.96%
Juvenile Detention Center	871	0.46%	22	0.07%	2	0.12%	11	0.08%	0	0.00%	36	0.68%	942	0.39%
Court Supervision	3,778	1.98%	133	0.44%	51	3.17%	126	0.94%	8	0.69%	41	0.77%	4,137	1.70%
Not in a Correction's Status	141,076	73.84%	28,373	93.75%	897	55.68%	12,722	94.45%	822	70.50%	2,932	55.12%	186,822	76.92%
Awaiting Trial	1,093	0.57%	12	0.04%	30	1.86%	14	0.10%	6	0.51%	21	0.39%	1,176	0.48%
Awaiting Sentencing	1,025	0.54%	21	0.07%	35	2.17%	19	0.14%	8	0.69%	28	0.53%	1,136	0.47%
Minor Referred by the Court	1,105	0.58%	29	0.10%	14	0.87%	27	0.20%	6	0.51%	28	0.53%	1,209	0.50%
Arrested and Booked	330	0.17%	11	0.04%	15	0.93%	10	0.07%	13	1.11%	10	0.19%	389	0.16%
Diverted from Arrest or Booking	164	0.09%	12	0.04%	3	0.19%	12	0.09%	2	0.17%	7	0.13%	200	0.08%
Corrections Status Refused/Unreported	25,559	13.38%	1,433	4.74%	204	12.66%	247	1.83%	237	20.33%	1,880	35.34%	29,560	12.17%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%

CMHSP Demographic Summary
Numbers and Percentages of Persons with Mental Illnesses and Developmental Disabilities
Who Received Services from CMHSPs
Fiscal Year 2012
State of Michigan

Demographic Characteristics	MI Consumers		DD Consumers		* Substance Abuse Consumers		Dual Diagnosis (MI & DD)		** Assessment Only		Unknown Disability		Total Served	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Residence														
Homeless/Homeless Shelter	7,316	3.83%	142	0.47%	148	9.19%	80	0.59%	45	3.86%	125	2.35%	7,856	3.23%
Private - with Relatives	88,315	46.22%	17,988	59.44%	647	40.16%	5,823	43.23%	527	45.20%	1,768	33.24%	115,068	47.38%
Private - non-Relatives	58,695	30.72%	4,627	15.29%	503	31.22%	2,649	19.67%	322	27.62%	695	13.07%	67,491	27.79%
Foster Family	2,519	1.32%	342	1.13%	3	0.19%	171	1.27%	44	3.77%	48	0.90%	3,127	1.29%
Specialized Residential	5,530	2.89%	4,839	15.99%	10	0.62%	3,178	23.59%	1	0.09%	28	0.53%	13,586	5.59%
General Residential	4,157	2.18%	1,134	3.75%	12	0.74%	835	6.20%	3	0.26%	41	0.77%	6,182	2.55%
Prison/Jail/Juvenile Detention	3,241	1.70%	49	0.16%	56	3.48%	49	0.36%	21	1.80%	65	1.22%	3,481	1.43%
Nursing Care Facility	3,017	1.58%	279	0.92%	5	0.31%	194	1.44%	8	0.69%	65	1.22%	3,568	1.47%
Other Institutional Setting	876	0.46%	31	0.10%	20	1.24%	55	0.41%	5	0.43%	5	0.09%	992	0.41%
Supported Independence Program	1,759	0.92%	346	1.14%	9	0.56%	358	2.66%	0	0.00%	9	0.17%	2,481	1.02%
Residential Arrangement Unknown/Unreported	15,630	8.18%	486	1.61%	198	12.29%	78	0.58%	190	16.30%	2,470	46.44%	19,052	7.84%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Total Annual Household Income														
Income Below \$10,000	94,017	49.21%	15,342	50.70%	968	60.09%	6,784	50.36%	708	60.72%	2,754	51.78%	120,573	49.64%
Income \$10,001 to \$20,000	23,860	12.49%	6,080	20.09%	109	6.77%	3,197	23.73%	98	8.40%	227	4.27%	33,571	13.82%
Income \$20,001 to \$30,000	6,710	3.51%	659	2.18%	35	2.17%	335	2.49%	45	3.86%	58	1.09%	7,842	3.23%
Income \$30,001 to \$40,000	2,520	1.32%	305	1.01%	12	0.74%	155	1.15%	16	1.37%	24	0.45%	3,032	1.25%
Income \$40,001 to \$60,000	1,604	0.84%	300	0.99%	6	0.37%	132	0.98%	14	1.20%	21	0.39%	2,077	0.86%
Income Over \$60,000	1,192	0.62%	302	1.00%	1	0.06%	71	0.53%	5	0.43%	19	0.36%	1,590	0.65%
Income Unreported	61,152	32.01%	7,275	24.04%	480	29.80%	2,796	20.76%	280	24.01%	2,216	41.66%	74,199	30.55%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Program Eligibility (Counts Can be More than One Group)														
Adoption Subsidy	410	0.21%	104	0.34%	2	0.12%	64	0.48%	2	0.17%	7	0.13%	589	0.24%
Medicaid	124,060	64.93%	27,669	91.43%	584	36.25%	12,685	94.17%	560	48.03%	2,518	47.34%	168,076	69.20%
	26	0.01%	5,501	18.18%	0	0.00%	2,586	19.20%	1	0.09%	6	0.11%	8,120	3.34%
Medicare	34,591	18.11%	11,588	38.29%	107	6.64%	5,926	43.99%	108	9.26%	396	7.45%	52,716	21.70%
SSA, SSI or SSDI	20,709	10.84%	7,033	23.24%	101	6.27%	4,861	36.09%	71	6.09%	131	2.46%	32,906	13.55%
Commercial Health Insurance	13,850	7.25%	5,231	17.29%	58	3.60%	1,816	13.48%	92	7.89%	350	6.58%	21,397	8.81%
Other Public Sources - not DCH	13,885	7.27%	1,502	4.96%	211	13.10%	1,536	11.40%	41	3.52%	176	3.31%	17,351	7.14%
Not Eligible for Program/Plan	44,156	23.11%	1,745	5.77%	755	46.87%	456	3.39%	423	36.28%	2,497	46.94%	50,032	20.60%
Program Eligibility Unknown/Unreported	3,236	1.69%	1,851	6.12%	11	0.68%	198	1.47%	74	6.35%	153	2.88%	5,523	2.27%
	191,055		30,263		1,611		13,470		1,166		5,319		242,884	

CMHSP Demographic Summary
Numbers and Percentages of Persons with Mental Illnesses and Developmental Disabilities
Who Received Services from CMHSPs
Fiscal Year 2012
State of Michigan

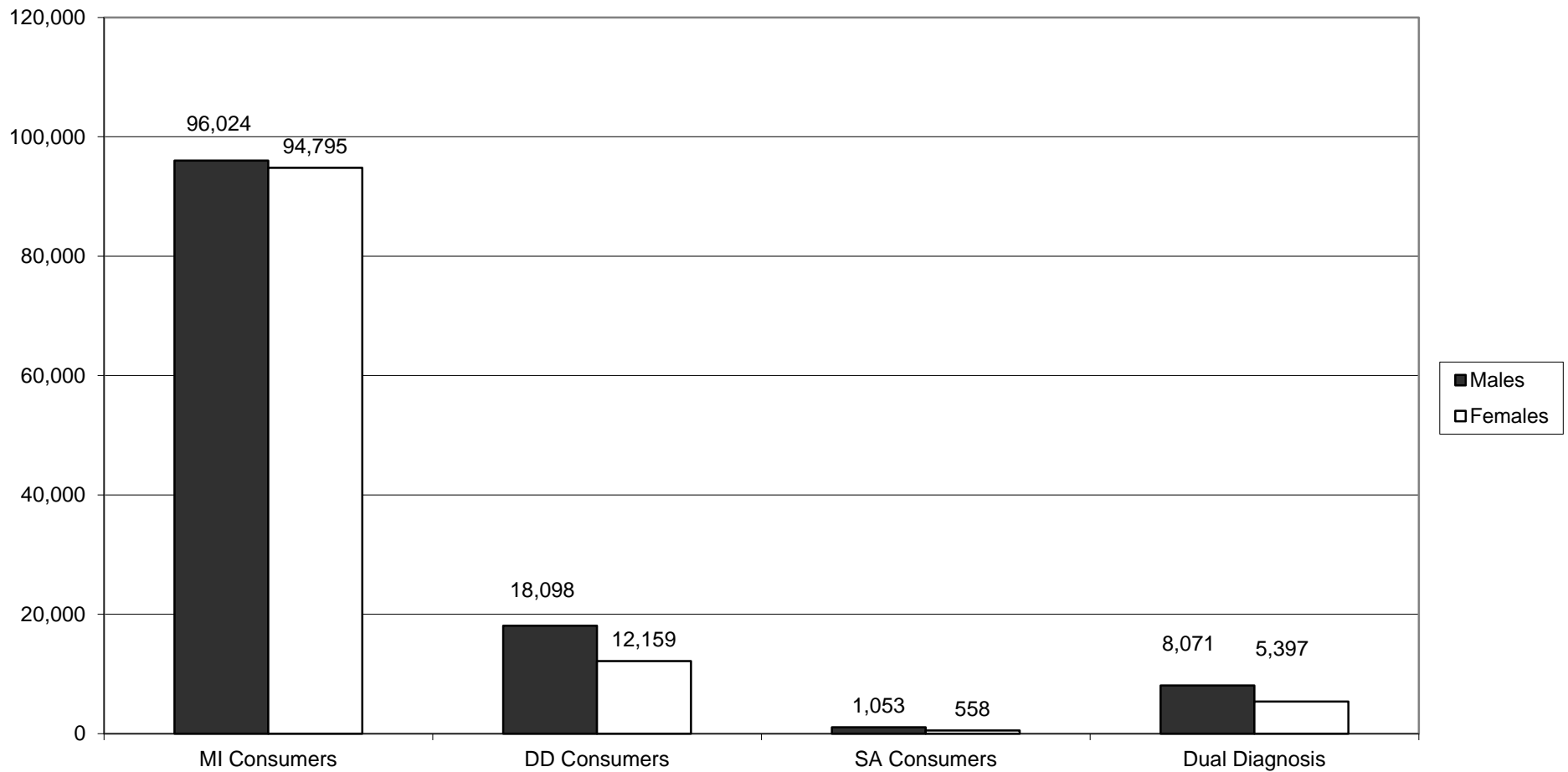
Demographic Characteristics	MI Consumers		DD Consumers		* Substance Abuse Consumers		Dual Diagnosis (MI & DD)		** Assessment Only		Unknown Disability		Total Served	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Employment														
Employed Full Time	6,789	3.55%	210	0.69%	116	7.20%	96	0.71%	76	6.52%	126	2.37%	7,413	3.05%
Employed Part Time (less than 30 hours/week)	10,043	5.26%	1,485	4.91%	103	6.39%	722	5.36%	65	5.57%	145	2.73%	12,563	5.17%
Unemployed - Looking for Work	42,673	22.34%	1,308	4.32%	694	43.08%	892	6.62%	271	23.24%	530	9.96%	46,368	19.09%
Sheltered Workshop/Work Services, Non-Integrated	622	0.33%	3,214	10.62%	3	0.19%	1,553	11.53%	1	0.09%	9	0.17%	5,402	2.22%
In Unpaid Work	370	0.19%	396	1.31%	3	0.19%	154	1.14%	1	0.09%	7	0.13%	931	0.38%
Self-employed	795	0.42%	138	0.46%	17	1.06%	57	0.42%	6	0.51%	16	0.30%	1,029	0.42%
Enclaves/Mobile Crews	253	0.13%	989	3.27%	0	0.00%	346	2.57%	0	0.00%	3	0.06%	1,591	0.66%
Participates in Facility-based Activity Program	477	0.25%	3,471	11.47%	1	0.06%	1,218	9.04%	6	0.51%	18	0.34%	5,191	2.14%
Not in the Competitive Labor Force, includes retired, child, homemaker	114,627	60.00%	17,815	58.87%	447	27.75%	8,276	61.44%	501	42.97%	1,334	25.08%	143,000	58.88%
Employment Status Unknown/Unreported	14,406	7.54%	1,237	4.09%	227	14.09%	156	1.16%	239	20.50%	3,131	58.86%	19,396	7.99%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Education														
Completed Less than High School	33,041	17.29%	4,681	15.47%	343	21.29%	2,892	21.47%	146	12.52%	406	7.63%	41,509	17.09%
Completed High School or More	52,992	27.74%	11,274	37.25%	613	38.05%	5,475	40.65%	312	26.76%	820	15.42%	71,486	29.43%
In School - K to 12	34,903	18.27%	2,553	8.44%	91	5.65%	1,444	10.72%	166	14.24%	579	10.89%	39,736	16.36%
In Training Program	448	0.23%	743	2.46%	4	0.25%	323	2.40%	3	0.26%	8	0.15%	1,529	0.63%
In Special Education	2,708	1.42%	7,012	23.17%	3	0.19%	2,382	17.68%	8	0.69%	67	1.26%	12,180	5.01%
Attended or Attending Undergraduate College	22,984	12.03%	338	1.12%	236	14.65%	227	1.69%	123	10.55%	377	7.09%	24,285	10.00%
College Graduate	7,404	3.88%	125	0.41%	50	3.10%	74	0.55%	29	2.49%	125	2.35%	7,807	3.21%
Education Unreported	36,575	19.14%	3,537	11.69%	271	16.82%	653	4.85%	379	32.50%	2,937	55.22%	44,352	18.26%
	191,055	100.00%	30,263	100.00%	1,611	100.00%	13,470	100.00%	1,166	100.00%	5,319	100.00%	242,884	100.00%
Total Served														
Persons Served by CMHSPs	191,055		30,263		1,611		13,470		1,166		5,319		242,884	

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

**The Assessment Only Consumers in this report represent those consumers who were reported as "Assessment Only" within the disability designation and not having a developmental disability, mental illness, or substance use disorder.

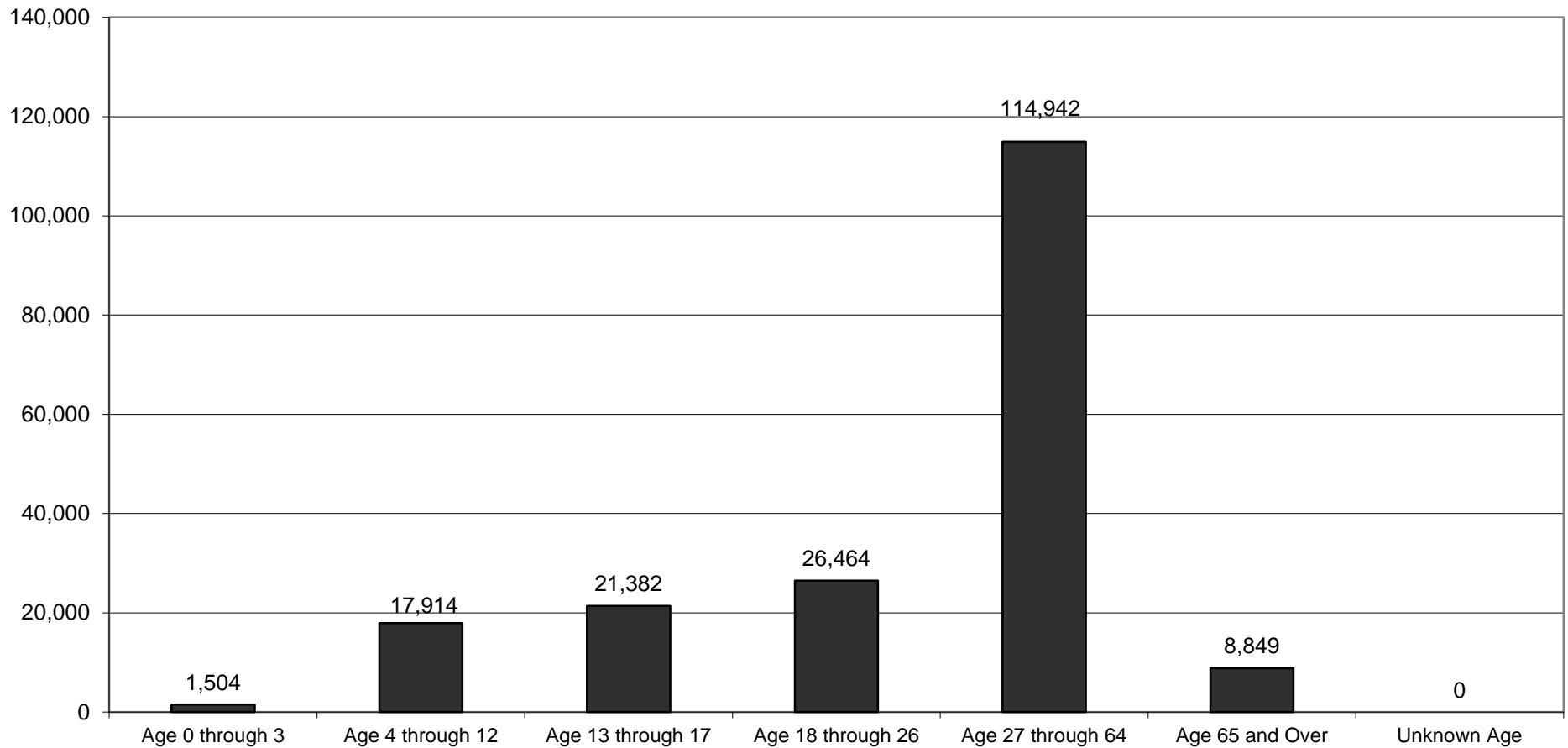
This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

**CMHSP Gender Summary
Fiscal Year 2012
State of Michigan**

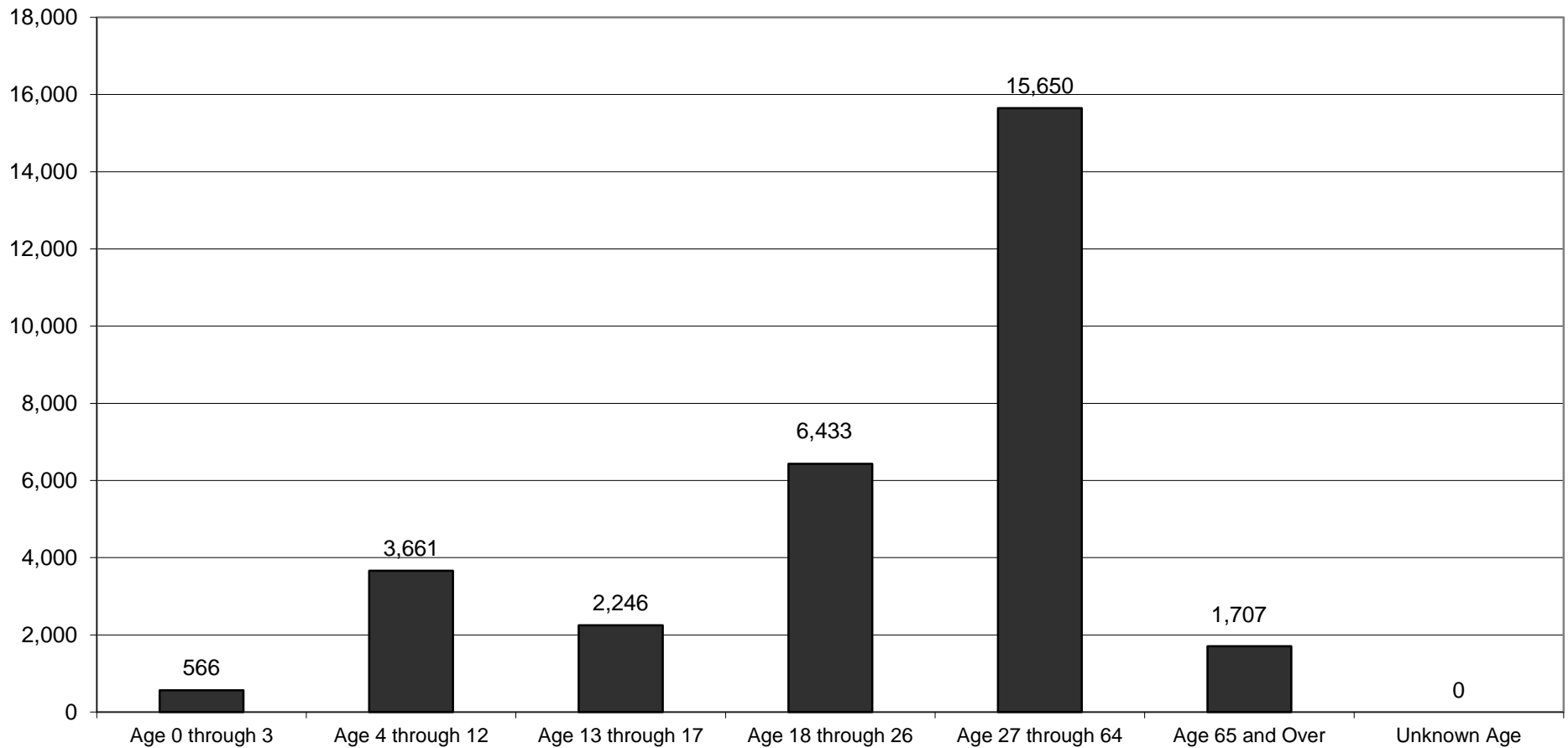


The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

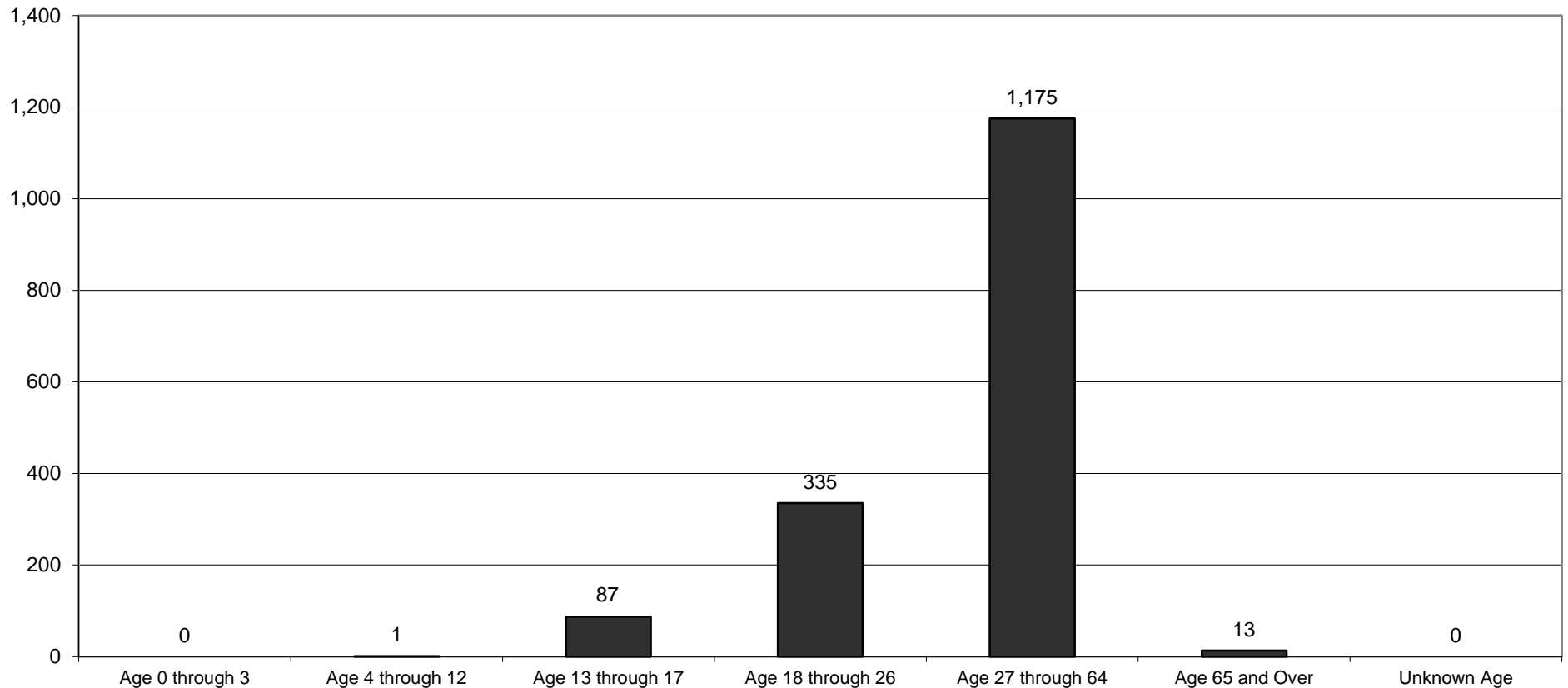
**Persons with Mental Illness
Who Received Services from CMHSPs
Age Summary
Fiscal Year 2012
State of Michigan**



**Persons with Developmental Disabilities
Who Received Services from CMHSPs
Age Summary
Fiscal Year 2012
State of Michigan**

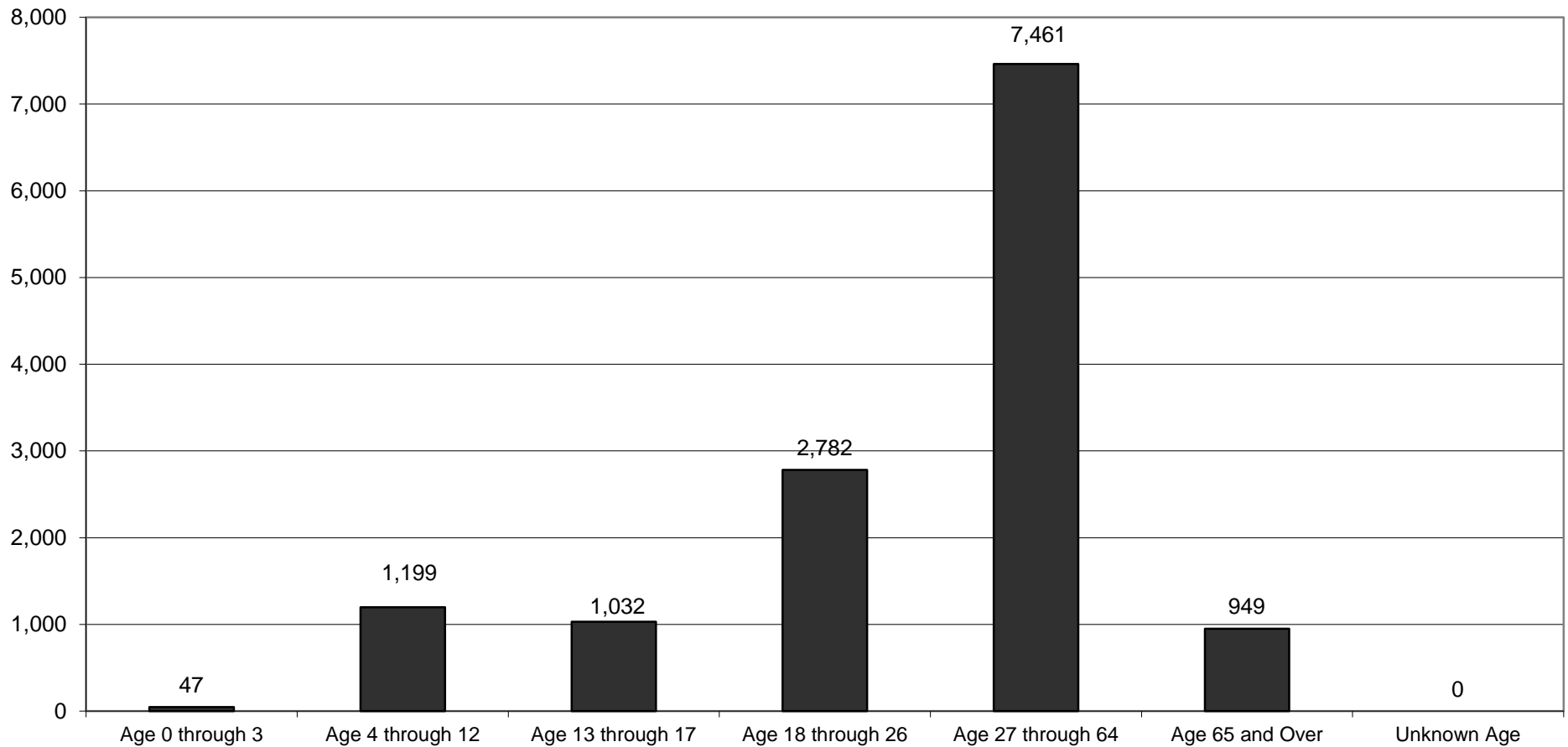


**Persons with Substance Abuse Disorder
Who Received Services from CMHSPs
Age Summary
Fiscal Year 2012
State of Michigan**

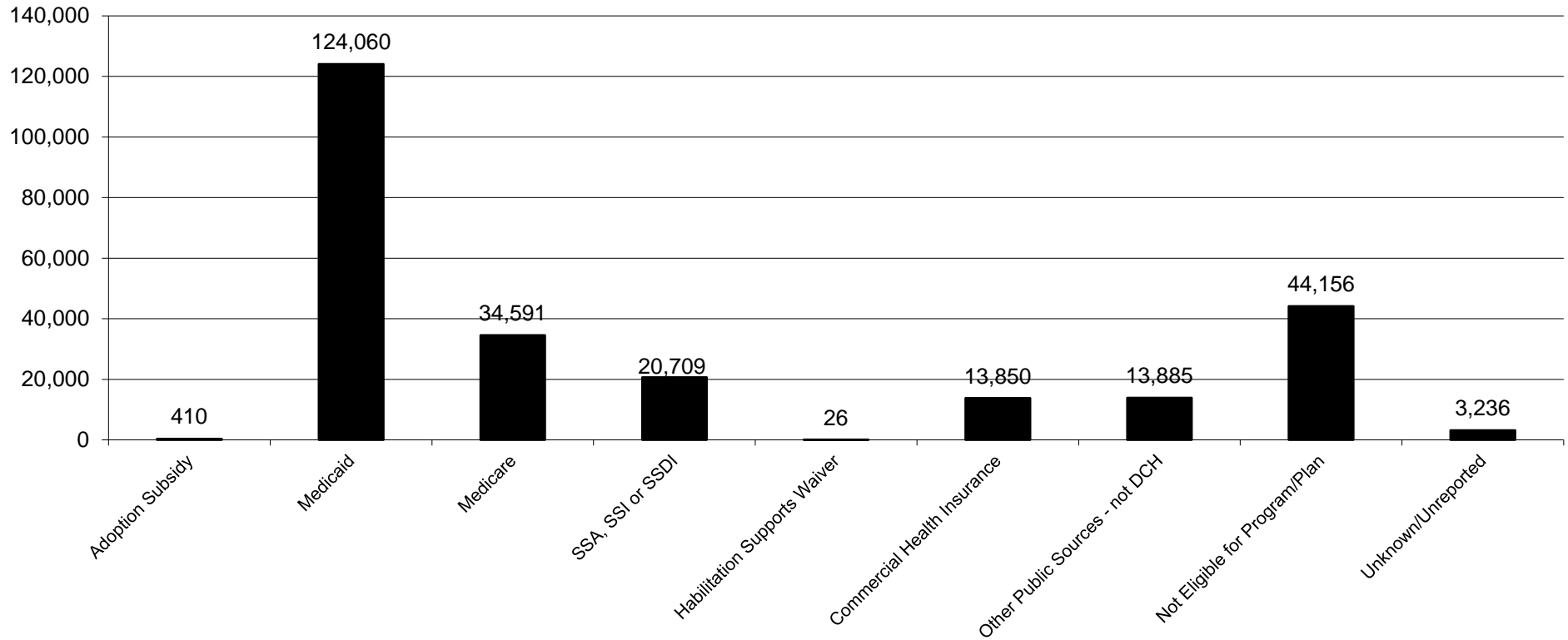


The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

**Persons with Dual Diagnosis
Who Received Services from CMHSPs
Age Summary
Fiscal Year 2012
State of Michigan**

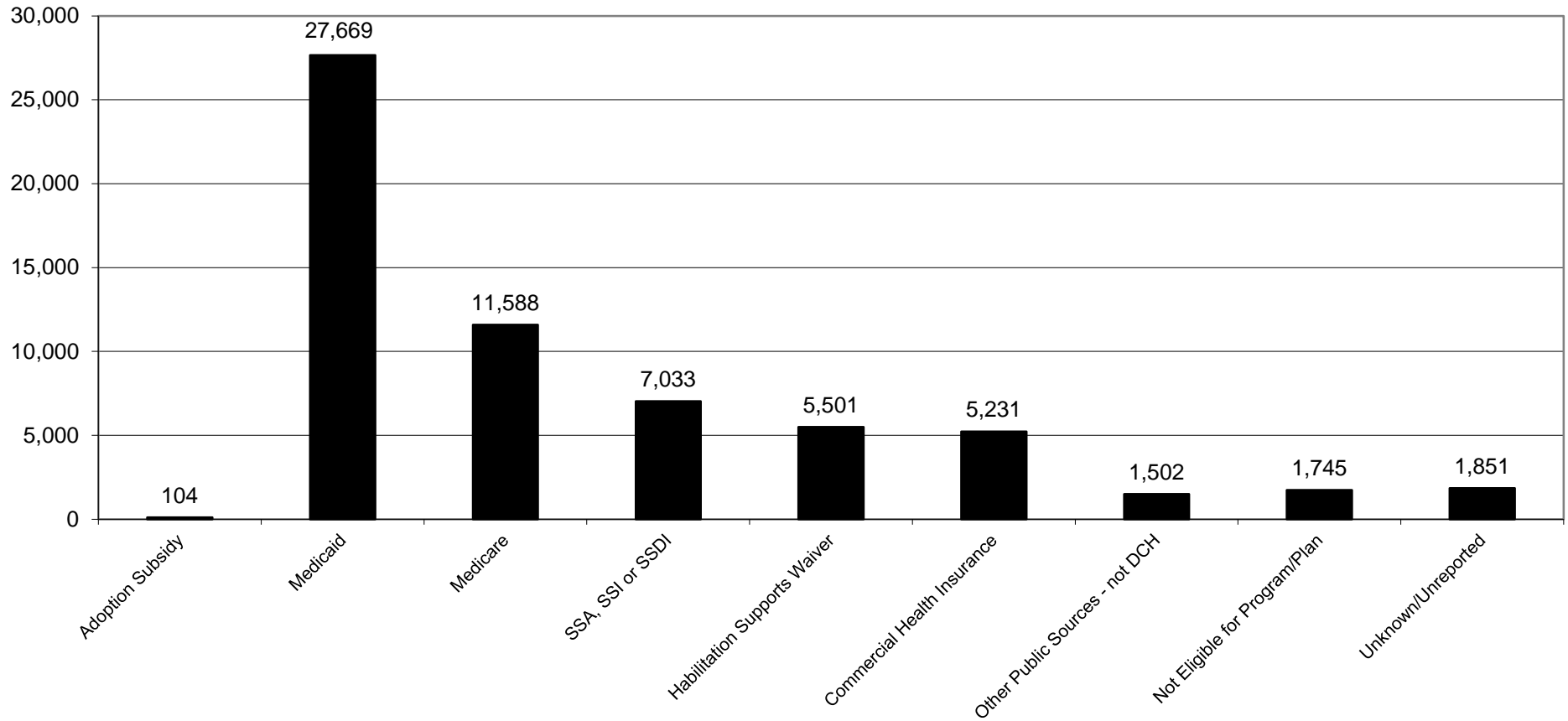


**Persons with Mental Illness
Who Received Services from CMHSPs
Program Eligibility Summary
Fiscal Year 2012
State of Michigan**



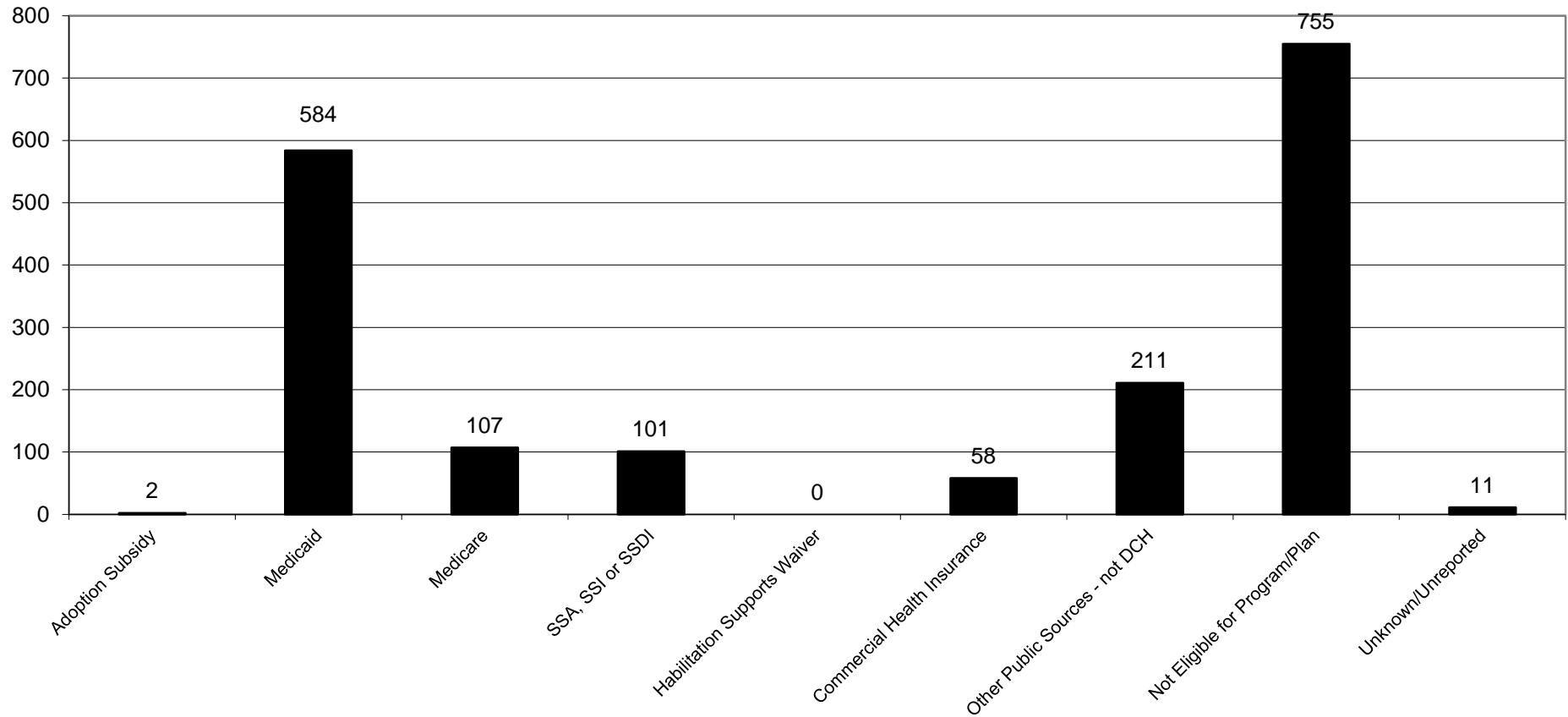
Note: Individuals can be counted in more than one group

**Persons with Developmental Disabilities
Who Received Services from CMHSPs
Program Eligibility Summary
Fiscal Year 2012
State of Michigan**



Note: Individuals can be counted in more that one group

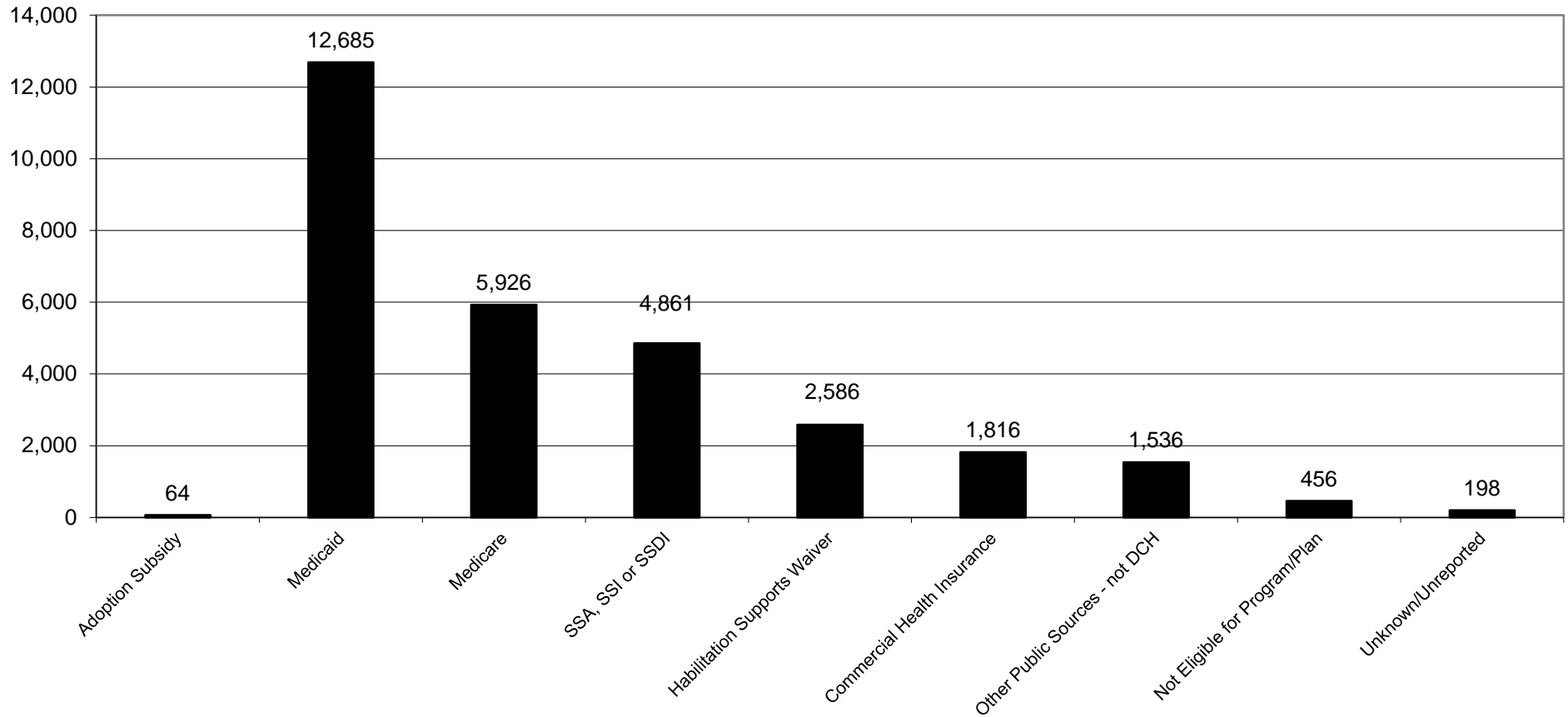
**Persons with Substance Abuse Disorder
Who Received Services from CMHSPs
Program Eligibility Summary
Fiscal Year 2012
State of Michigan**



The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

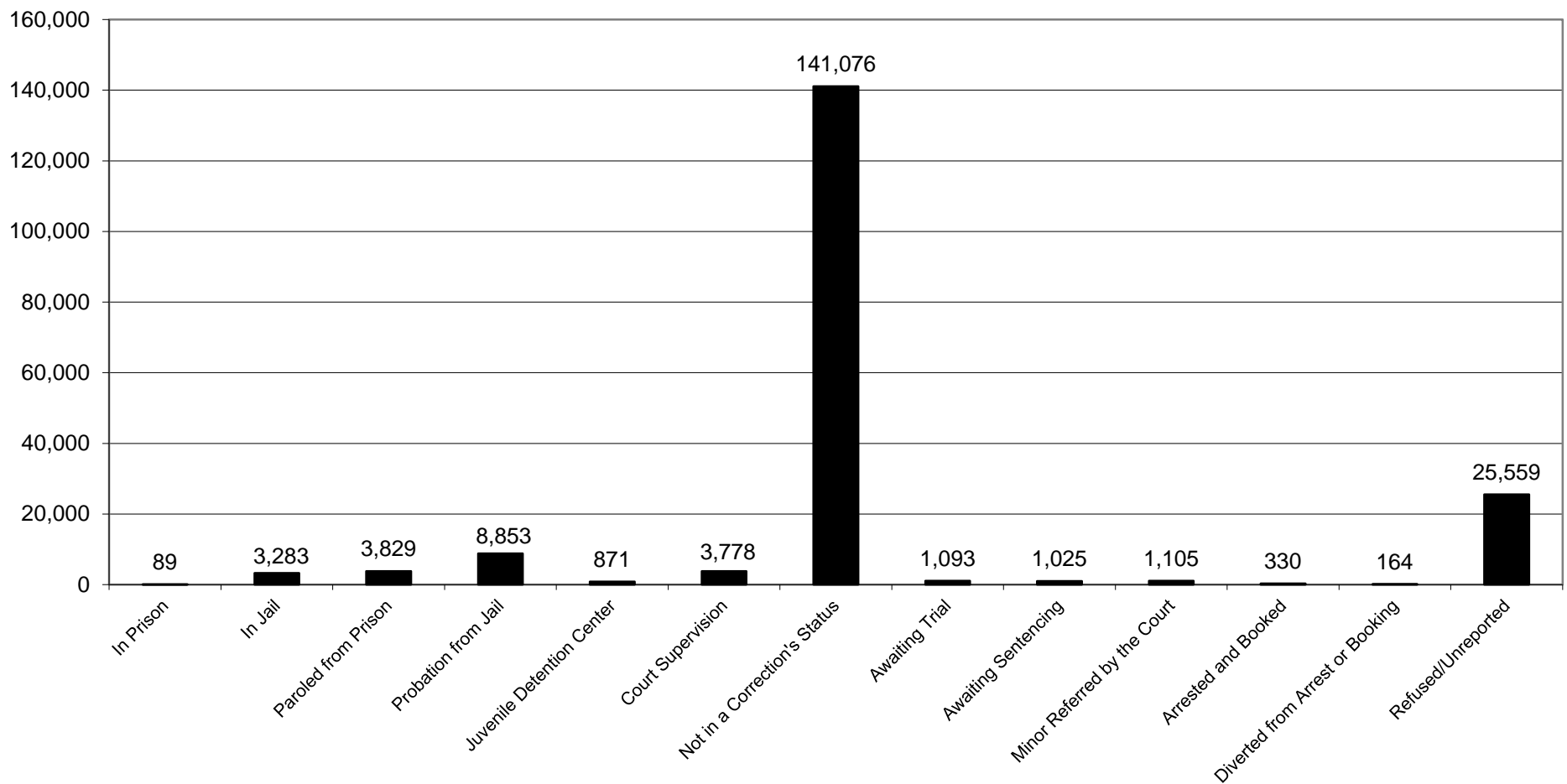
Note: Individuals can be counted in more than one group

**Persons with Dual Diagnosis
Who Received Services from CMHSPs
Program Eligibility Summary
Fiscal Year 2012
State of Michigan**

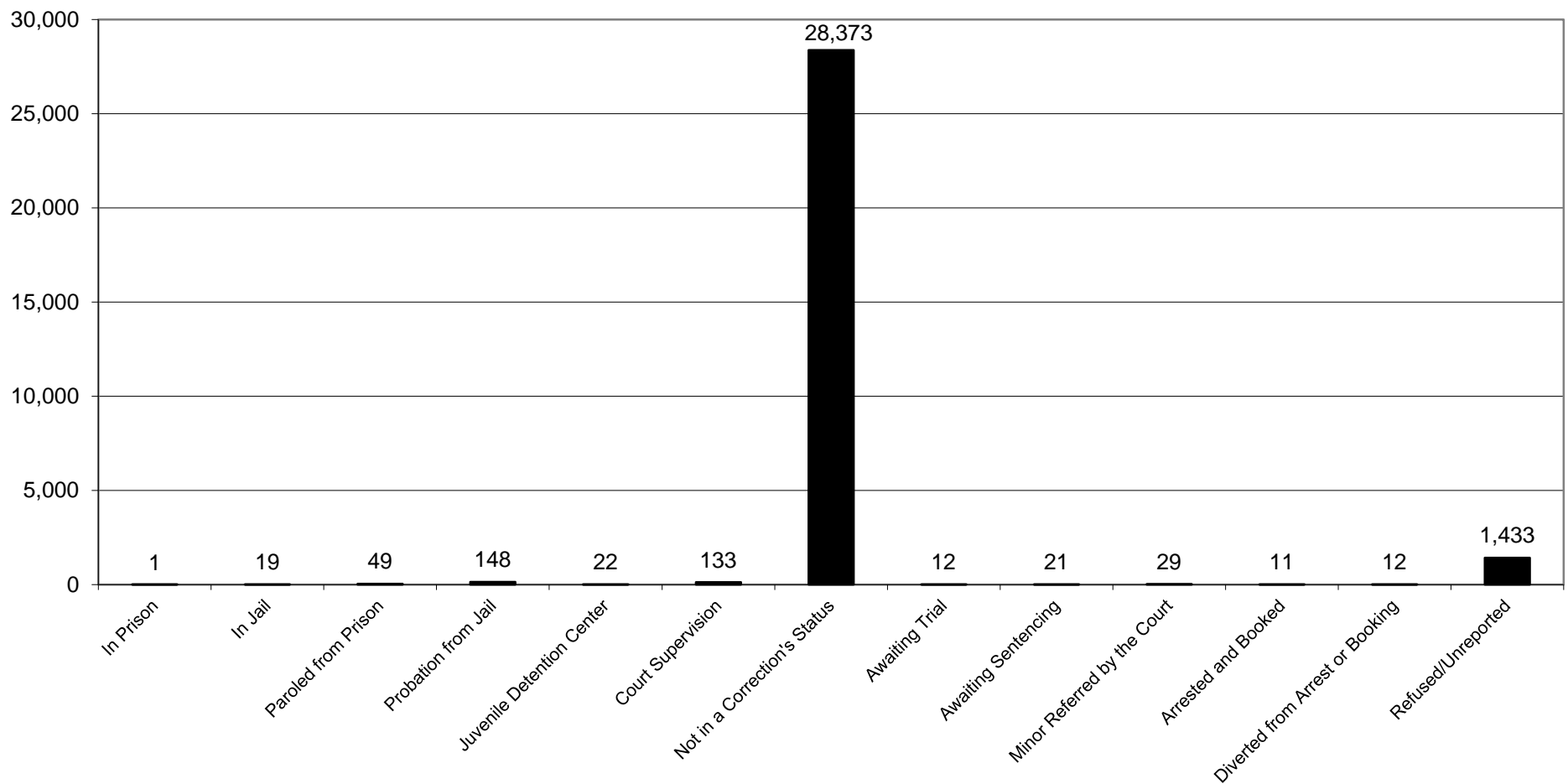


Note: Individuals can be counted in more that one group

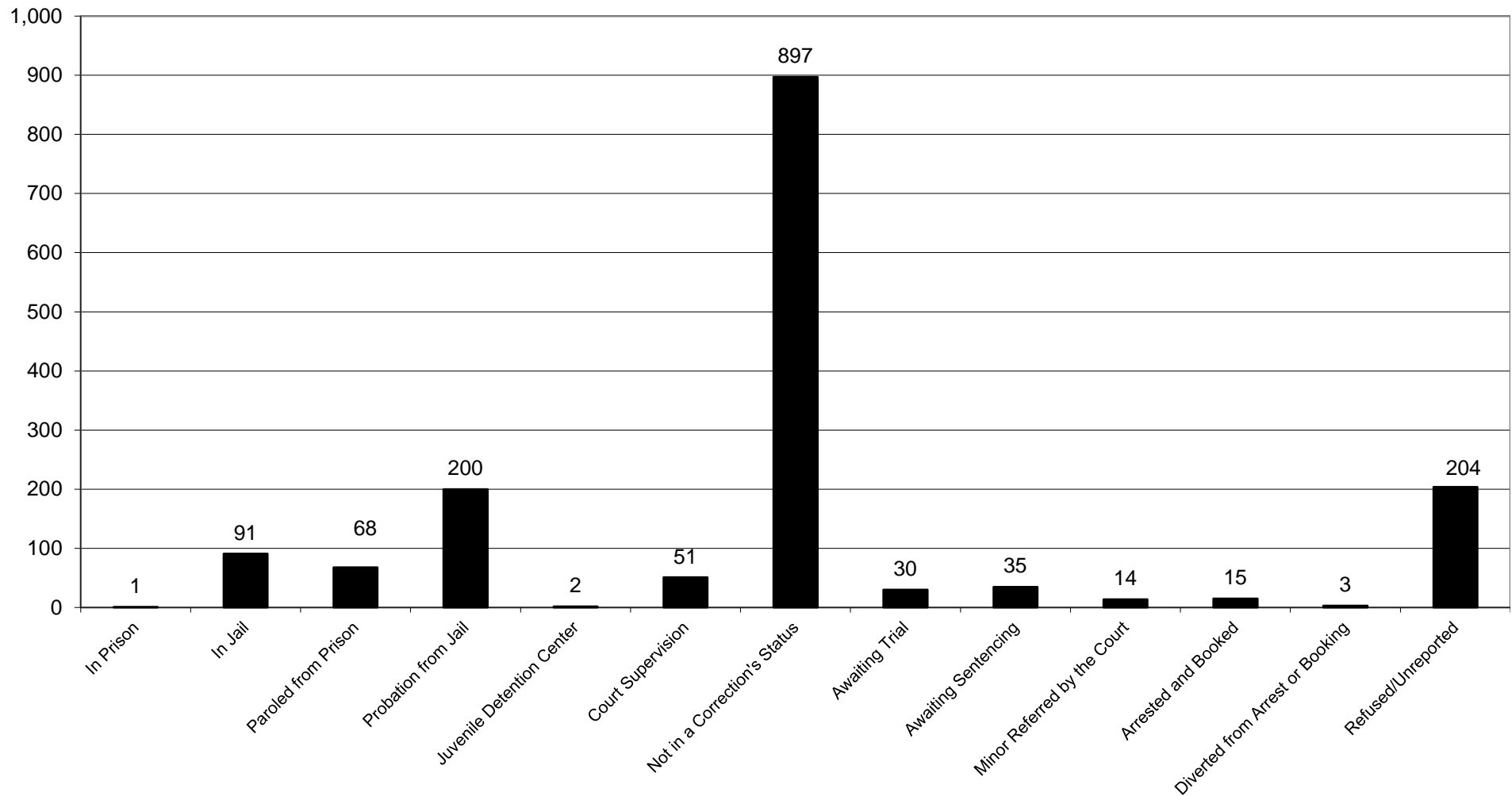
**Persons with Mental Illness
Who Received Services from CMHSPs
Corrections Status Summary
Fiscal Year 2012
State of Michigan**



**Persons with Developmental Disabilities
Who Received Services from CMHSPs
Corrections Status Summary
Fiscal Year 2012
State of Michigan**



**Persons with Substance Abuse Disorder
Who Received Services from CMHSPs
Corrections Status Summary
Fiscal Year 2012
State of Michigan**



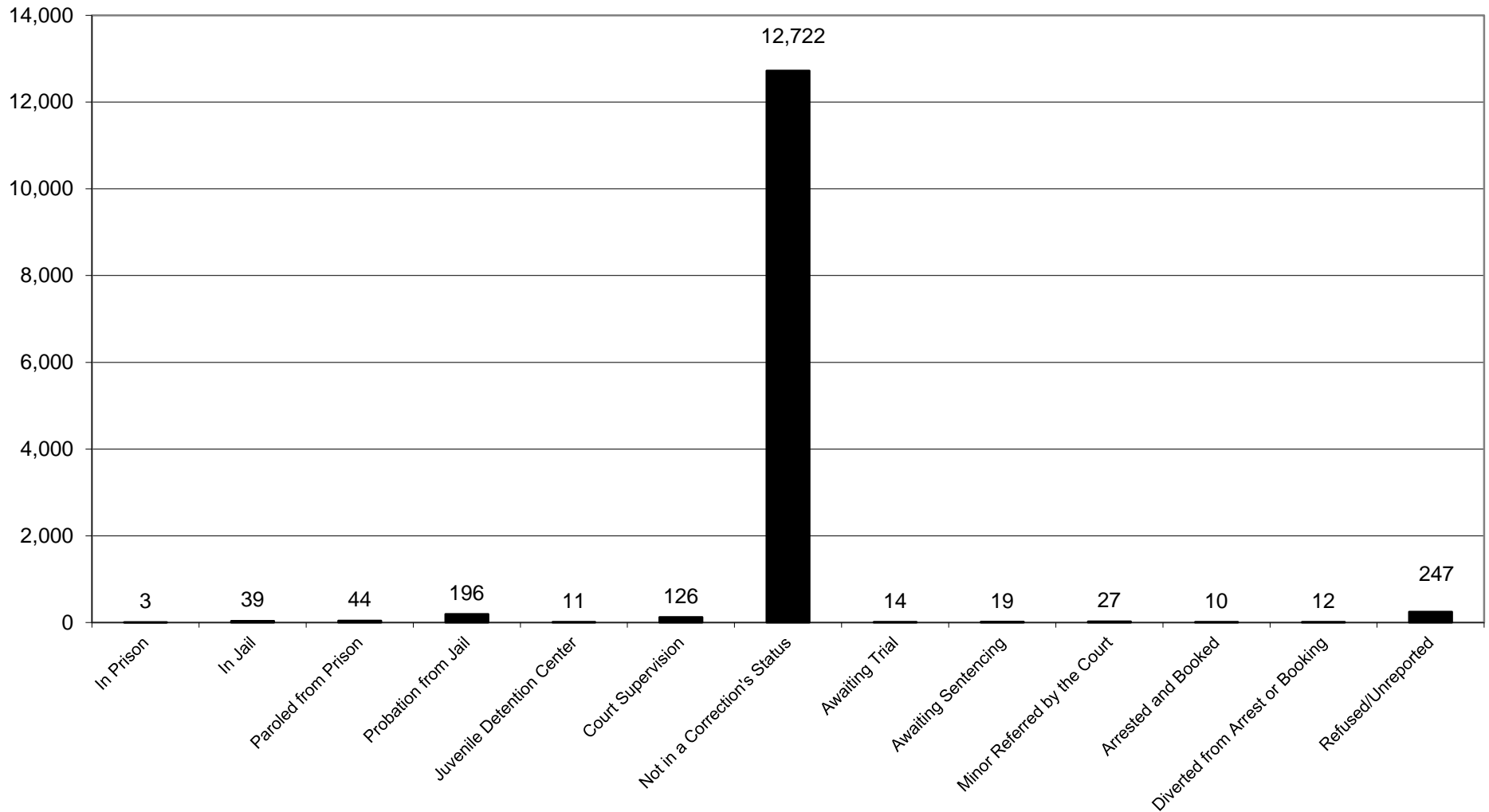
The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder but not a developmental disability or a mental illness.

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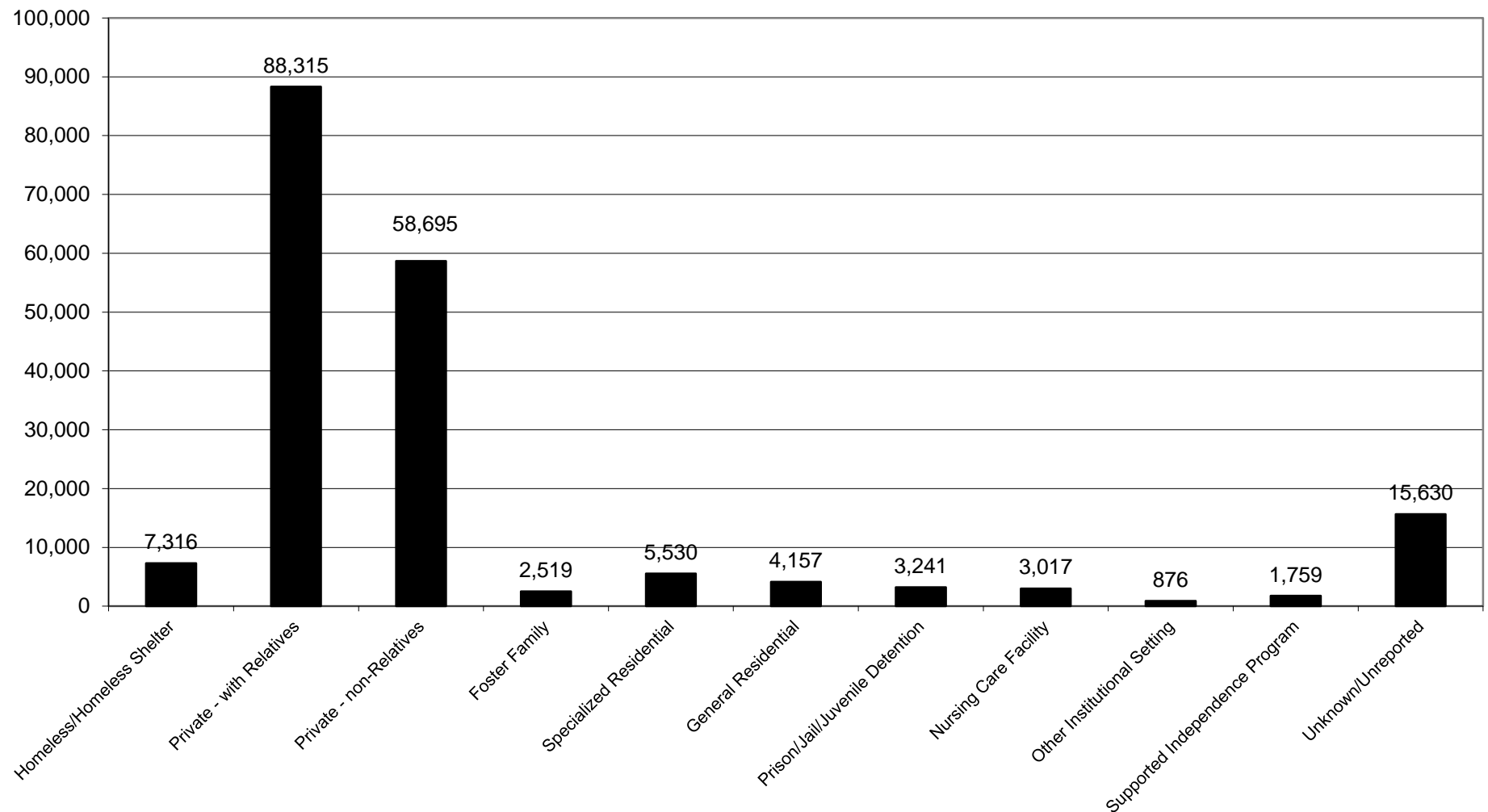
Michigan Department of Community Health

05/31/2013

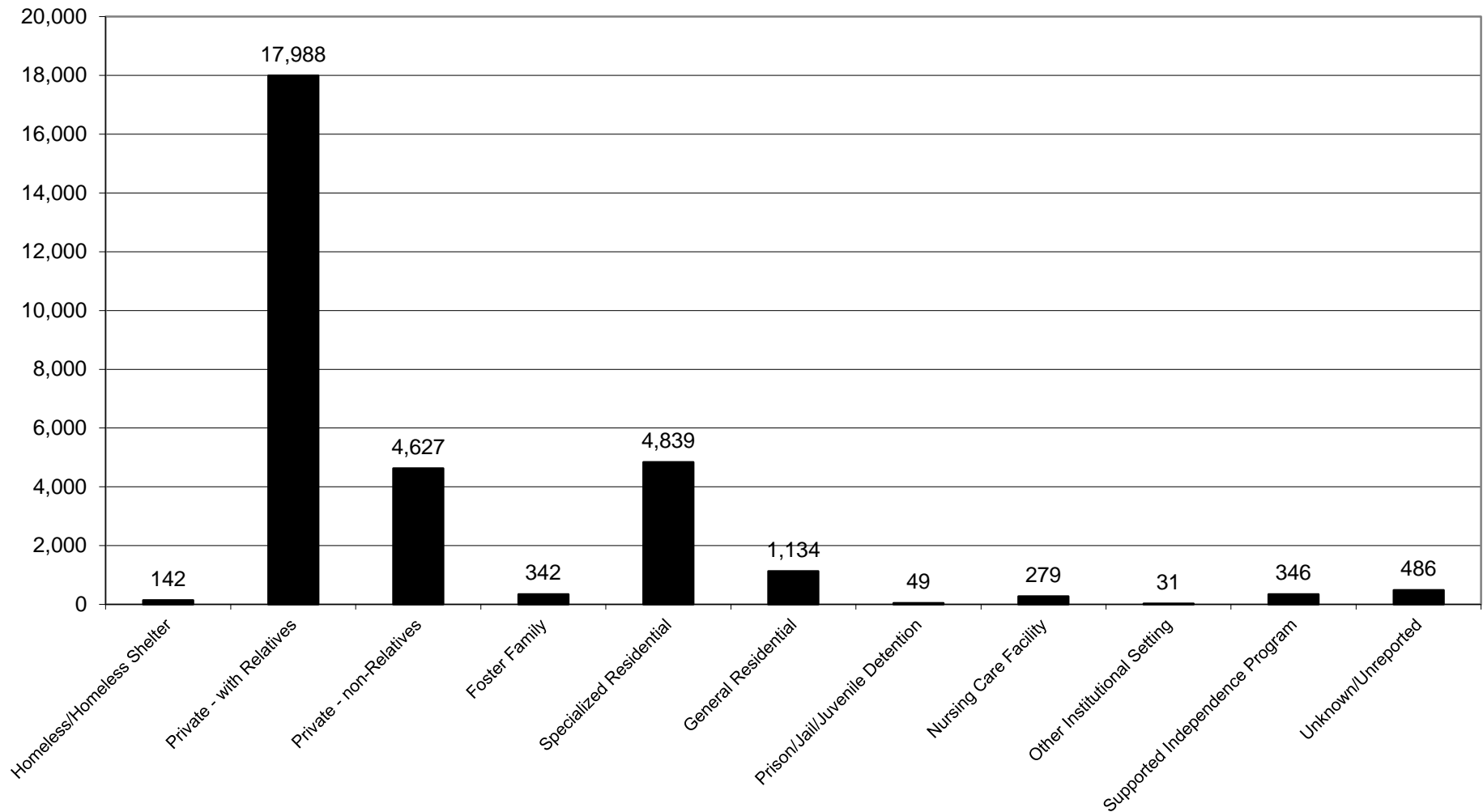
**Persons with Dual Diagnosis
Who Received Services from CMHSPs
Corrections Status Summary
Fiscal Year 2012
State of Michigan**



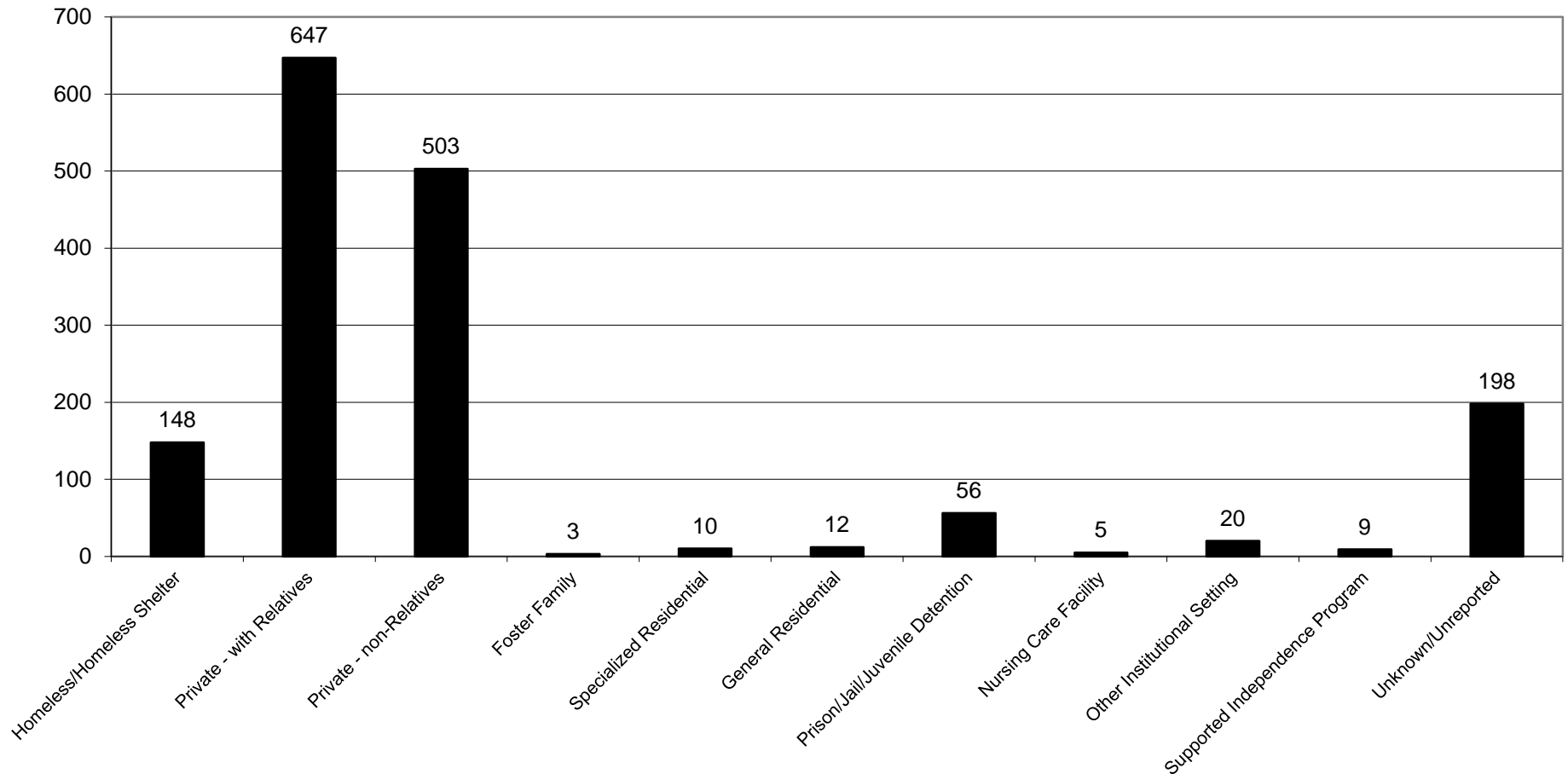
**Persons with Mental Illness
Who Received Services from CMHSPs
Residence Summary
Fiscal Year 2012
State of Michigan**



**Persons with Developmental Disabilities
Who Received Services from CMHSPs
Residence Summary
Fiscal Year 2012
State of Michigan**

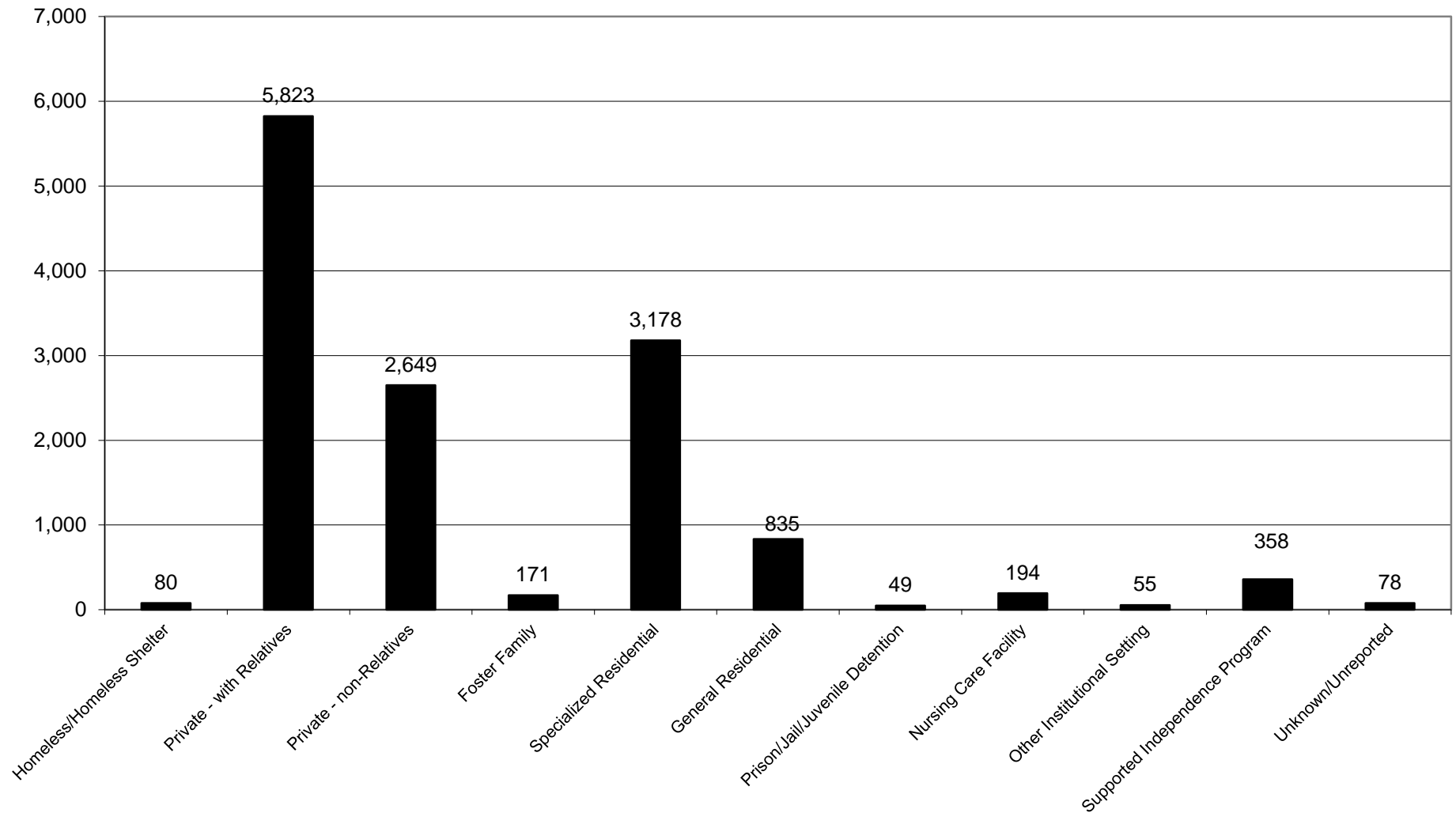


**Persons with Substance Abuse Disorder
Who Received Services from CMHSPs
Residence Summary
Fiscal Year 2012
State of Michigan**



The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

**Persons with Dual Diagnosis
Who Received Services from CMHSPs
Residence Summary
Fiscal Year 2012
State of Michigan**



Number of Persons Receiving Services from CMHSPs
by CMHSP and Gender
Fiscal Year 2012
State of Michigan

CMHSP	Persons with Mental Illness			Developmental Disabilities			Dual Diagnosis			* Substance Abuse Only			Unknown Disability / Assessment Only			Total		
	Male	Female	Unreported	Male	Female	Unreported	Male	Female	Unreported	Male	Female	Unreported	Male	Female	Unreported	Male	Female	Unreported
Allegan	537	606	0	95	86	0	135	114	0	13	3	0	1	0	0	781	809	0
AuSable	855	832	2	121	76	0	13	8	1	3	2	0	11	6	0	1,003	924	3
Barry	515	687	14	43	37	0	35	28	0	3	0	0	4	3	3	600	755	17
Bay Arenac	2,299	2,719	2	225	180	0	153	118	0	12	11	0	97	87	3	2,786	3,115	5
Berrien	1,947	1,972	5	120	90	0	167	122	0	2	1	0	24	16	0	2,260	2,201	5
Clinton Eaton Ingham	2,906	2,398	0	540	330	0	446	305	0	78	37	0	4	2	0	3,974	3,072	0
CMH for Central Michigan	2,917	3,222	0	446	355	0	403	250	0	25	12	0	136	168	0	3,927	4,007	0
Copper	381	397	0	100	61	0	48	32	0	10	7	0	20	9	0	559	506	0
Detroit	30,012	26,614	73	5,584	3,351	3	412	263	1	20	15	0	303	144	0	36,331	30,387	77
Genesee	4,634	4,085	0	825	547	0	289	209	0	262	143	0	213	230	0	6,223	5,214	0
Gogebic	156	165	0	49	26	0	41	18	0	4	5	0	9	8	0	259	222	0
Graiot	512	592	0	46	47	0	72	42	0	11	2	0	5	2	0	646	685	0
Hiawatha	393	398	0	127	75	0	57	37	0	23	11	0	35	43	0	635	564	0
Huron	460	518	1	57	34	0	57	35	0	1	0	0	7	7	0	582	594	1
Ionia	860	915	0	64	39	0	89	45	0	6	2	0	1	1	0	1,020	1,002	0
Kalamazoo	1,836	1,632	2	956	895	2	129	71	0	57	13	0	112	84	1	3,090	2,695	5
Lapeer	574	617	0	174	88	0	85	43	0	5	3	0	1	1	0	839	752	0
Lenewee	721	700	0	125	107	0	28	27	0	1	0	0	42	56	0	917	890	0
Lifeways	2,407	2,334	0	173	150	0	259	148	0	39	34	0	419	557	0	3,297	3,223	0
Livingston	764	808	0	254	141	0	62	61	0	33	28	0	37	32	0	1,150	1,070	0
Macomb	4,543	4,939	0	1,058	660	0	907	607	0	18	8	0	53	49	0	6,579	6,263	0
Manistee-Benzie	548	554	0	51	39	0	66	50	0	4	1	0	0	0	0	669	644	0
Monroe	891	786	0	233	167	0	89	53	0	18	6	0	40	40	0	1,271	1,052	0
Montcalm	438	483	0	40	21	0	71	40	0	1	2	0	7	8	0	557	554	0
Muskegon	1,757	1,746	1	305	246	0	231	174	0	1	2	0	25	23	0	2,319	2,191	1
network180	5,891	5,829	0	732	527	0	566	389	0	154	84	0	191	167	0	7,534	6,996	0
Newaygo	728	818	0	40	32	0	71	44	0	0	0	0	0	0	0	839	894	0
North Country	1,300	1,410	1	329	225	0	127	60	0	33	17	0	60	68	0	1,849	1,780	1
Northeast	793	885	0	123	95	0	125	78	0	1	1	0	56	69	0	1,098	1,128	0
Northern Lakes	2,477	2,495	0	238	154	0	286	186	0	0	0	0	0	0	0	3,001	2,835	0
Northpointe	564	626	0	73	50	0	156	75	0	14	2	0	24	14	0	831	767	0
Oakland	6,479	6,926	0	2,205	1,411	0	722	520	0	32	37	0	1,112	944	0	10,550	9,838	0
Ottawa	997	977	0	260	221	0	97	91	0	8	3	0	34	37	0	1,396	1,329	0
Pathways	747	774	0	253	163	0	125	76	0	13	4	0	18	15	0	1,156	1,032	0
Pines	847	1,062	10	90	50	0	73	53	0	36	9	0	16	13	0	1,062	1,187	10
Saginaw	1,606	1,665	3	295	222	0	252	167	0	46	17	0	71	66	0	2,270	2,137	3
Sanilac	434	491	0	113	51	0	69	65	0	0	0	0	3	1	0	619	608	0
Shiawassee	650	701	0	78	65	0	65	35	0	0	0	0	8	14	0	801	815	0
St. Clair	1,396	1,350	0	494	362	0	231	168	0	7	1	0	4	4	0	2,132	1,885	0
St. Joseph	718	780	0	56	44	0	97	58	0	0	0	0	29	13	0	900	895	0
Summit Pointe	2,287	2,713	22	160	115	1	167	94	0	1	0	0	3	9	2	2,618	2,931	25
Tuscola	465	556	0	85	60	0	54	34	0	0	1	0	6	10	0	610	661	0
Van Buren	814	963	100	57	41	0	121	85	0	0	3	0	13	8	0	1,005	1,100	100
Washtenaw	1,815	1,825	0	478	330	0	176	120	0	56	29	0	63	72	0	2,588	2,376	0
West Michigan	908	1,013	0	68	39	0	115	74	0	0	0	0	0	0	0	1,091	1,126	0
Woodlands	245	217	0	60	54	0	32	25	0	2	2	0	26	33	0	365	331	0
State Totals	96,024	94,795	236	18,098	12,159	6	8,071	5,397	2	1,053	558	0	3,343	3,133	9	126,589	116,042	253

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Age
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Age						Unreported	Total
	0-3	4-12	13-17	18-26	27-64	65+		
Allegan	8	120	142	152	672	49	0	1,143
AuSable	1	276	274	236	837	65	0	1,689
Barry	10	99	144	200	701	62	0	1,216
Bay Arenac	15	540	436	804	2,914	311	0	5,020
Berrien	7	246	519	593	2,301	258	0	3,924
Clinton Eaton Ingham	71	543	639	813	2,966	272	0	5,304
CMH for Central Michigan	32	728	663	1,054	3,483	179	0	6,139
Copper	8	72	60	115	459	64	0	778
Detroit	451	4,951	6,805	7,227	34,941	2,324	0	56,699
Genesee	80	710	806	1,168	5,755	200	0	8,719
Gogebic	1	20	48	42	190	20	0	321
Gratiot	11	200	182	194	486	31	0	1,104
Hiawatha	0	86	116	90	446	53	0	791
Huron	3	92	82	162	544	96	0	979
Ionia	4	157	267	314	979	54	0	1,775
Kalamazoo	13	354	398	465	2,056	184	0	3,470
Lapeer	1	113	140	166	718	53	0	1,191
Lenewee	0	140	147	176	889	69	0	1,421
Lifeways	47	345	554	737	2,815	243	0	4,741
Livingston	12	164	228	240	873	55	0	1,572
Macomb	28	747	823	1,269	6,194	421	0	9,482
Manistee-Benzie	3	253	118	134	538	56	0	1,102
Monroe	3	166	190	277	1,006	35	0	1,677
Montcalm	25	158	134	143	445	16	0	921
Muskegon	25	307	425	548	2,019	180	0	3,504
network180	324	1,532	1,580	1,382	6,522	380	0	11,720
Newaygo	16	204	189	272	837	28	0	1,546
North Country	33	330	357	449	1,415	127	0	2,711
Northeast	1	111	169	227	1,037	133	0	1,678
Northern Lakes	24	528	466	757	2,932	265	0	4,972
Northpointe	13	97	138	181	687	74	0	1,190
Oakland	49	689	948	1,576	9,310	833	0	13,405
Ottawa	10	198	216	333	1,175	42	0	1,974
Pathways	15	136	186	248	875	61	0	1,521
Pines	3	197	199	331	1,091	98	0	1,919
Saginaw	26	244	369	482	1,796	357	0	3,274
Sanilac	5	87	84	137	573	39	0	925
Shiawassee	4	192	150	236	723	46	0	1,351
St. Clair	10	218	319	394	1,723	82	0	2,746
St. Joseph	47	238	181	196	785	51	0	1,498
Summit Pointe	17	608	607	669	2,681	440	0	5,022
Tuscola	2	116	107	158	616	22	0	1,021
Van Buren	2	150	242	241	1,108	134	0	1,877
Washtenaw	41	233	263	475	2,462	166	0	3,640
West Michigan	2	164	218	339	1,100	98	0	1,921
Woodlands	1	55	54	62	267	23	0	462
Total	1,504	17,914	21,382	26,464	114,942	8,849	0	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Age
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Age						Unreported	Total
	0-3	4-12	13-17	18-26	27-64	65+		
Allegan	0	9	8	40	107	17	0	181
AuSable	0	0	1	45	133	18	0	197
Barry	0	11	4	15	46	4	0	80
Bay Arenac	3	38	24	62	246	32	0	405
Berrien	0	15	6	34	143	12	0	210
Clinton Eaton Ingham	7	125	54	176	466	42	0	870
CMH for Central Michigan	5	58	41	129	496	72	0	801
Copper	0	5	9	46	89	12	0	161
Detroit	100	1,234	751	1,993	4,416	444	0	8,938
Genesee	14	117	88	271	802	80	0	1,372
Gogebic	4	13	8	13	32	5	0	75
Gratiot	3	2	6	10	60	12	0	93
Hiawatha	3	31	19	29	104	16	0	202
Huron	0	3	2	13	64	9	0	91
Ionia	2	18	10	27	38	8	0	103
Kalamazoo	23	262	269	309	919	71	0	1,853
Lapeer	0	14	7	42	159	40	0	262
Lenewee	1	6	8	41	156	20	0	232
Lifeways	1	33	21	50	183	35	0	323
Livingston	3	55	30	119	162	26	0	395
Macomb	44	314	109	371	798	82	0	1,718
Manistee-Benzie	1	7	0	10	56	16	0	90
Monroe	3	26	24	93	230	24	0	400
Montcalm	2	6	4	12	35	2	0	61
Muskegon	9	71	53	138	252	28	0	551
network180	3	107	51	232	806	60	0	1,259
Newaygo	0	8	6	19	34	5	0	72
North Country	3	59	46	113	278	55	0	554
Northeast	2	17	9	35	128	27	0	218
Northern Lakes	2	54	37	84	192	23	0	392
Northpointe	0	23	8	26	60	6	0	123
Oakland	23	452	314	1,004	1,682	141	0	3,616
Ottawa	1	49	25	123	262	21	0	481
Pathways	8	67	24	74	216	27	0	416
Pines	3	27	18	18	67	7	0	140
Saginaw	6	71	22	105	286	27	0	517
Sanilac	1	14	7	32	85	25	0	164
Shiawassee	0	8	3	12	111	9	0	143
St. Clair	269	100	39	124	290	34	0	856
St. Joseph	0	6	4	19	61	10	0	100
Summit Pointe	9	36	19	61	136	15	0	276
Tuscola	1	13	5	25	85	16	0	145
Van Buren	0	9	10	23	52	4	0	98
Washtenaw	5	46	32	179	497	49	0	808
West Michigan	1	11	5	11	73	6	0	107
Woodlands	1	11	6	26	57	13	0	114
Total	566	3,661	2,246	6,433	15,650	1,707	0	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Age
Persons with a Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Age						Unreported	Total
	0-3	4-12	13-17	18-26	27-64	65+		
Allegan	1	22	13	62	134	17	0	249
AuSable	0	7	2	2	9	2	0	22
Barry	0	3	2	13	38	7	0	63
Bay Arenac	2	21	14	49	151	34	0	271
Berrien	0	14	19	47	185	24	0	289
Clinton Eaton Ingham	2	40	31	153	479	46	0	751
CMH for Central Michigan	0	56	54	109	381	53	0	653
Copper	0	12	4	22	32	10	0	80
Detroit	1	73	74	224	284	20	0	676
Genesee	7	63	55	104	247	22	0	498
Gogebic	0	13	13	15	16	2	0	59
Gratiot	0	12	9	24	57	12	0	114
Hiawatha	1	19	9	17	41	7	0	94
Huron	0	3	4	15	56	14	0	92
Ionia	1	9	11	37	67	9	0	134
Kalamazoo	0	31	18	30	106	15	0	200
Lapeer	2	33	17	22	50	4	0	128
Lenewee	0	3	2	11	30	9	0	55
Lifeways	1	43	29	84	206	44	0	407
Livingston	0	10	5	41	60	7	0	123
Macomb	3	135	117	316	852	91	0	1,514
Manistee-Benzie	0	7	7	22	64	16	0	116
Monroe	1	19	26	32	61	3	0	142
Montcalm	0	21	14	25	45	6	0	111
Muskegon	0	28	25	93	229	30	0	405
network180	1	51	52	217	580	54	0	955
Newaygo	0	16	15	23	58	3	0	115
North Country	1	25	23	43	82	13	0	187
Northeast	0	5	11	28	128	31	0	203
Northern Lakes	0	27	30	103	276	36	0	472
Northpointe	0	32	27	51	111	10	0	231
Oakland	2	83	92	214	762	89	0	1,242
Ottawa	0	2	2	25	142	17	0	188
Pathways	0	14	11	41	116	19	0	201
Pines	0	24	7	20	67	8	0	126
Saginaw	1	20	15	64	273	46	0	419
Sanilac	0	11	11	33	67	12	0	134
Shiawassee	1	16	10	22	41	10	0	100
St. Clair	13	30	26	66	235	29	0	399
St. Joseph	0	26	19	38	60	12	0	155
Summit Pointe	1	49	17	51	131	12	0	261
Tuscola	0	2	0	14	62	10	0	88
Van Buren	0	26	21	46	101	12	0	206
Washtenaw	4	29	45	65	146	7	0	296
West Michigan	0	12	18	36	109	14	0	189
Woodlands	1	2	6	13	34	1	0	57
Total	47	1,199	1,032	2,782	7,461	949	0	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Age
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Age						Unreported	Total
	0-3	4-12	13-17	18-26	27-64	65+		
Allegan	0	0	1	4	11	0	0	16
AuSable	0	0	0	1	4	0	0	5
Barry	0	0	0	0	3	0	0	3
Bay Arenac	0	0	0	4	19	0	0	23
Berrien	0	0	0	0	3	0	0	3
Clinton Eaton Ingham	0	0	0	24	89	2	0	115
CMH for Central Michigan	0	0	2	8	27	0	0	37
Copper	0	0	1	4	10	2	0	17
Detroit	0	0	2	6	25	2	0	35
Genesee	0	0	2	79	323	1	0	405
Gogebic	0	0	0	4	5	0	0	9
Gratiot	0	0	1	2	10	0	0	13
Hiawatha	0	0	2	7	25	0	0	34
Huron	0	0	0	0	1	0	0	1
Ionia	0	0	0	0	8	0	0	8
Kalamazoo	0	0	0	12	57	1	0	70
Lapeer	0	0	0	2	6	0	0	8
Lenewee	0	0	0	1	0	0	0	1
Lifeways	0	0	1	24	48	0	0	73
Livingston	0	0	4	21	36	0	0	61
Macomb	0	0	1	4	21	0	0	26
Manistee-Benzie	0	0	0	2	3	0	0	5
Monroe	0	0	1	9	14	0	0	24
Montcalm	0	0	0	2	1	0	0	3
Muskegon	0	0	0	0	3	0	0	3
network180	0	1	60	27	149	1	0	238
Newaygo	0	0	0	0	0	0	0	0
North Country	0	0	2	19	29	0	0	50
Northeast	0	0	0	1	1	0	0	2
Northern Lakes	0	0	0	0	0	0	0	0
Northpointe	0	0	0	4	12	0	0	16
Oakland	0	0	0	13	55	1	0	69
Ottawa	0	0	1	3	7	0	0	11
Pathways	0	0	0	4	13	0	0	17
Pines	0	0	1	13	30	1	0	45
Saginaw	0	0	4	20	38	1	0	63
Sanilac	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0
St. Clair	0	0	0	2	6	0	0	8
St. Joseph	0	0	0	0	0	0	0	0
Summit Pointe	0	0	0	0	1	0	0	1
Tuscola	0	0	0	1	0	0	0	1
Van Buren	0	0	0	0	3	0	0	3
Washtenaw	0	0	1	7	76	1	0	85
West Michigan	0	0	0	0	0	0	0	0
Woodlands	0	0	0	1	3	0	0	4
Total	0	1	87	335	1,175	13	0	1,611

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Age
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Age						Unreported	Total
	0-3	4-12	13-17	18-26	27-64	65+		
Allegan	0	0	0	0	1	0	0	1
AuSable	0	4	1	3	3	0	0	11
Barry	0	0	1	1	7	0	0	9
Bay Arenac	1	13	15	33	84	37	0	183
Berrien	0	0	1	0	2	3	0	6
Clinton Eaton Ingham	0	0	0	0	1	0	0	1
CMH for Central Michigan	2	18	16	35	83	5	0	159
Copper	0	0	1	5	8	0	0	14
Detroit	0	3	107	88	210	39	0	447
Genesee	0	2	3	18	71	2	0	96
Gogebic	0	0	2	1	2	1	0	6
Gratiot	0	0	0	0	0	0	0	0
Hiawatha	0	4	6	2	19	4	0	35
Huron	1	0	0	2	7	4	0	14
Ionia	0	0	0	0	0	0	0	0
Kalamazoo	1	4	14	26	78	1	0	124
Lapeer	0	0	0	0	0	0	0	0
Lenewee	0	5	12	30	47	4	0	98
Lifeways	4	92	76	215	546	19	0	952
Livingston	5	6	7	15	35	1	0	69
Macomb	0	3	5	21	43	11	0	83
Manistee-Benzie	0	0	0	0	0	0	0	0
Monroe	0	14	15	17	34	0	0	80
Montcalm	1	1	3	4	6	0	0	15
Muskegon	0	3	3	4	22	16	0	48
network180	5	105	76	40	97	27	0	350
Newaygo	0	0	0	0	0	0	0	0
North Country	2	17	13	18	51	1	0	102
Northeast	0	1	5	10	9	5	0	30
Northern Lakes	0	0	0	0	0	0	0	0
Northpointe	2	0	0	3	7	2	0	14
Oakland	35	102	206	465	1,126	60	0	1,994
Ottawa	1	8	14	17	27	4	0	71
Pathways	0	3	2	5	15	1	0	26
Pines	0	1	0	3	1	0	0	5
Saginaw	0	0	0	0	0	0	0	0
Sanilac	0	0	0	0	1	0	0	1
Shiawassee	0	0	2	3	16	1	0	22
St. Clair	1	0	0	2	0	0	0	3
St. Joseph	3	9	1	4	8	0	0	25
Summit Pointe	0	1	0	0	4	9	0	14
Tuscola	0	0	1	1	8	6	0	16
Van Buren	5	5	2	2	2	0	0	16
Washtenaw	4	15	6	27	81	2	0	135
West Michigan	0	0	0	0	0	0	0	0
Woodlands	1	15	12	3	13	0	0	44
Total	74	454	628	1,123	2,775	265	0	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Race/Ethnicity
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Race/Ethnicity								
	White/ Caucasian	African American/ Black	American Indian	Asian	Native Hawaiian or other Pacific Islander	Other Race	Multiracial	Unknown/ Refused/ Missing	Total
Allegan	1,013	32	2	3	0	47	40	6	1,143
AuSable	1,042	7	5	1	0	5	463	166	1,689
Barry	1,150	10	18	2	0	10	0	26	1,216
Bay Arenac	4,464	181	36	6	1	106	37	189	5,020
Berrien	2,646	1,125	20	11	0	85	0	37	3,924
Clinton Eaton Ingham	3,598	1,052	39	43	4	182	188	198	5,304
CMH for Central Michigan	4,189	100	54	13	1	24	1,638	120	6,139
Copper	692	7	45	2	0	6	20	6	778
Detroit	14,045	24,697	144	51	7	1,658	327	15,770	56,699
Genesee	4,753	2,973	54	17	3	113	463	343	8,719
Gogebic	297	0	4	0	0	1	17	2	321
Gratiot	985	12	7	2	1	50	36	11	1,104
Hiawatha	471	7	151	1	1	7	143	10	791
Huron	950	5	2	1	2	12	5	2	979
Ionia	1,565	17	9	2	1	28	107	46	1,775
Kalamazoo	2,174	993	41	24	0	129	9	100	3,470
Lapeer	1,059	17	2	4	1	22	83	3	1,191
Lenewee	1,293	47	9	2	0	8	56	6	1,421
Lifeways	3,578	540	16	6	1	81	259	260	4,741
Livingston	1,393	15	8	4	4	8	131	9	1,572
Macomb	6,313	976	18	33	1	213	1,482	446	9,482
Manistee-Benzie	920	8	8	1	0	2	126	37	1,102
Monroe	1,479	116	8	3	0	14	52	5	1,677
Montcalm	886	9	0	1	1	11	12	1	921
Muskegon	1,874	823	30	8	1	92	161	515	3,504
network180	6,861	2,889	126	92	7	1,017	686	42	11,720
Newaygo	1,418	42	12	0	1	48	24	1	1,546
North Country	2,488	14	58	5	1	11	75	59	2,711
Northeast	1,491	6	2	3	0	3	171	2	1,678
Northern Lakes	4,529	76	152	10	2	93	61	49	4,972
Northpointe	1,081	10	28	4	0	4	48	15	1,190
Oakland	7,608	2,991	59	63	5	562	2,022	95	13,405
Ottawa	1,679	114	16	32	0	71	20	42	1,974
Pathways	1,323	14	46	3	1	5	109	20	1,521
Pines	1,776	16	32	6	0	55	0	34	1,919
Saginaw	1,261	786	9	3	0	92	957	166	3,274
Sanilac	818	3	8	0	1	12	71	12	925
Shiawassee	1,298	17	7	3	0	23	1	2	1,351
St. Clair	2,318	186	19	6	0	45	141	31	2,746
St. Joseph	1,316	75	10	0	0	28	0	69	1,498
Summit Pointe	3,661	978	120	12	0	131	0	120	5,022
Tuscola	978	10	7	0	0	15	7	4	1,021
Van Buren	1,495	119	59	4	0	61	0	139	1,877
Washtenaw	2,109	1,057	14	30	1	78	308	43	3,640
West Michigan	1,588	92	14	3	0	129	58	37	1,921
Woodlands	380	60	5	4	0	10	0	3	462
Total	110,305	43,324	1,533	524	49	5,407	10,614	19,299	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Race/Ethnicity
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Race/Ethnicity								
	White/ Caucasian	African American/ Black	American Indian	Asian	Native Hawaiian or other Pacific Islander	Other Race	Multiracial	Unknown/ Refused/ Missing	Total
Allegan	163	9	0	0	0	7	1	1	181
AuSable	177	1	0	0	0	0	18	1	197
Barry	77	0	1	0	0	1	0	1	80
Bay Arenac	371	12	3	1	0	14	0	4	405
Berrien	154	47	0	1	0	8	0	0	210
Clinton Eaton Ingham	676	115	3	16	0	22	11	27	870
CMH for Central Michigan	620	26	6	2	0	3	136	8	801
Copper	144	3	8	0	0	0	5	1	161
Detroit	3,271	3,861	6	15	1	229	678	877	8,938
Genesee	940	349	5	6	1	20	41	10	1,372
Gogebic	65	2	3	0	0	1	4	0	75
Gratiot	89	1	1	0	0	2	0	0	93
Hiawatha	138	0	26	1	0	1	36	0	202
Huron	87	1	0	0	0	3	0	0	91
Ionia	96	0	0	0	0	2	5	0	103
Kalamazoo	1,306	374	17	9	0	89	0	58	1,853
Lapeer	244	8	0	0	0	5	5	0	262
Lenewee	208	5	2	1	0	6	10	0	232
Lifeways	264	23	1	2	0	5	21	7	323
Livingston	349	9	1	2	1	9	23	1	395
Macomb	1,224	200	2	21	1	73	194	3	1,718
Manistee-Benzie	83	0	0	0	0	0	6	1	90
Monroe	381	8	1	1	0	2	6	1	400
Montcalm	59	1	0	1	0	0	0	0	61
Muskegon	352	146	0	4	1	16	17	15	551
network180	957	174	3	21	1	64	24	15	1,259
Newaygo	68	1	0	0	0	2	1	0	72
North Country	508	9	13	2	0	1	15	6	554
Northeast	209	2	0	1	0	1	5	0	218
Northern Lakes	357	8	9	3	0	11	3	1	392
Northpointe	113	0	2	0	0	1	7	0	123
Oakland	2,401	664	10	69	1	211	249	11	3,616
Ottawa	438	8	0	8	0	20	1	6	481
Pathways	381	3	6	3	1	1	19	2	416
Pines	130	2	1	1	0	4	0	2	140
Saginaw	235	102	1	1	0	19	156	3	517
Sanilac	153	3	0	1	0	2	5	0	164
Shiawassee	138	0	1	1	0	2	0	1	143
St. Clair	749	49	3	1	0	7	44	3	856
St. Joseph	93	4	1	0	0	1	0	1	100
Summit Pointe	204	58	5	2	0	4	0	3	276
Tuscola	133	5	0	2	0	5	0	0	145
Van Buren	81	8	1	1	0	6	0	1	98
Washtenaw	502	148	1	10	0	26	116	5	808
West Michigan	91	3	2	0	1	6	2	2	107
Woodlands	94	17	1	0	0	1	0	1	114
Total	19,573	6,469	146	210	9	913	1,864	1,079	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Race/Ethnicity
Persons with a Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Race/Ethnicity								Total
	White/ Caucasian	African American/ Black	American Indian	Asian	Native Hawaiian or other Pacific Islander	Other Race	Multiracial	Unknown/ Refused/ Missing	
Allegan	230	5	0	0	1	5	7	1	249
AuSable	17	0	0	0	0	0	4	1	22
Barry	61	1	0	1	0	0	0	0	63
Bay Arenac	247	11	4	0	0	9	0	0	271
Berrien	203	75	3	0	0	6	0	2	289
Clinton Eaton Ingham	601	92	1	8	1	15	8	25	751
CMH for Central Michigan	523	19	5	1	0	3	93	9	653
Copper	75	0	0	2	0	0	3	0	80
Detroit	231	329	4	1	1	20	24	66	676
Genesee	328	132	3	0	0	6	27	2	498
Gogebic	55	1	0	0	0	0	3	0	59
Gratiot	107	1	0	0	0	3	2	1	114
Hiawatha	59	0	11	1	0	0	23	0	94
Huron	89	1	1	0	0	0	1	0	92
Ionia	128	2	0	0	0	3	1	0	134
Kalamazoo	141	45	2	2	0	9	0	1	200
Lapeer	113	0	0	1	0	4	10	0	128
Lenewee	52	1	0	0	0	0	2	0	55
Lifeways	350	21	0	1	0	3	30	2	407
Livingston	107	2	1	0	0	1	12	0	123
Macomb	1,097	146	3	7	0	34	220	7	1,514
Manistee-Benzie	103	1	1	0	0	2	9	0	116
Monroe	132	3	0	1	0	1	5	0	142
Montcalm	102	3	2	0	0	1	3	0	111
Muskegon	302	82	3	0	0	9	8	1	405
network180	720	150	3	11	0	32	25	14	955
Newaygo	108	2	0	1	0	0	3	1	115
North Country	164	0	8	0	0	1	11	3	187
Northeast	190	0	2	0	0	0	11	0	203
Northern Lakes	443	10	11	0	3	4	1	0	472
Northpointe	211	1	1	1	1	4	11	1	231
Oakland	859	195	1	10	0	44	130	3	1,242
Ottawa	180	4	0	2	0	1	1	0	188
Pathways	173	2	9	2	0	0	15	0	201
Pines	119	3	1	0	0	2	0	1	126
Saginaw	198	78	2	0	0	11	129	1	419
Sanilac	130	0	0	0	0	1	3	0	134
Shiawassee	99	0	1	0	0	0	0	0	100
St. Clair	347	29	1	2	0	3	16	1	399
St. Joseph	145	2	0	1	0	0	0	7	155
Summit Pointe	204	42	7	2	0	5	0	1	261
Tuscola	76	7	3	0	0	2	0	0	88
Van Buren	175	23	3	1	0	3	0	1	206
Washtenaw	158	92	2	3	0	8	32	1	296
West Michigan	157	12	3	0	0	9	8	0	189
Woodlands	48	7	0	0	0	0	0	2	57
Total	10,357	1,632	102	62	7	264	891	155	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Race/Ethnicity
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Race/Ethnicity								
	White/ Caucasian	African American/ Black	American Indian	Asian	Native Hawaiian or other Pacific Islander	Other Race	Multiracial	Unknown/ Refused/ Missing	Total
Allegan	14	0	0	0	0	1	0	1	16
AuSable	3	0	0	0	0	0	1	1	5
Barry	3	0	0	0	0	0	0	0	3
Bay Arenac	18	0	0	0	0	1	0	4	23
Berrien	2	1	0	0	0	0	0	0	3
Clinton Eaton Ingham	74	28	1	0	0	2	1	9	115
CMH for Central Michigan	26	1	1	0	0	0	6	3	37
Copper	16	0	0	0	0	1	0	0	17
Detroit	10	22	0	0	0	0	0	3	35
Genesee	237	151	2	0	0	4	7	4	405
Gogebic	7	0	0	0	0	0	2	0	9
Gratiot	11	0	0	0	0	0	0	2	13
Hiawatha	13	0	10	0	1	1	7	2	34
Huron	1	0	0	0	0	0	0	0	1
Ionia	6	1	0	0	0	0	0	1	8
Kalamazoo	41	22	2	0	0	1	0	4	70
Lapeer	7	0	0	0	0	0	0	1	8
Lenewee	1	0	0	0	0	0	0	0	1
Lifeways	59	6	0	0	0	0	2	6	73
Livingston	57	0	1	0	0	0	3	0	61
Macomb	16	1	0	0	0	0	5	4	26
Manistee-Benzie	5	0	0	0	0	0	0	0	5
Monroe	18	4	0	0	0	0	2	0	24
Montcalm	3	0	0	0	0	0	0	0	3
Muskegon	1	2	0	0	0	0	0	0	3
network180	127	71	0	2	0	27	9	2	238
Newaygo	0	0	0	0	0	0	0	0	0
North Country	43	0	3	0	0	0	3	1	50
Northeast	2	0	0	0	0	0	0	0	2
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	15	0	1	0	0	0	0	0	16
Oakland	45	17	0	1	0	1	4	1	69
Ottawa	8	3	0	0	0	0	0	0	11
Pathways	11	0	3	0	0	0	3	0	17
Pines	38	1	3	0	0	1	0	2	45
Saginaw	37	8	0	0	0	1	3	14	63
Sanilac	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0
St. Clair	8	0	0	0	0	0	0	0	8
St. Joseph	0	0	0	0	0	0	0	0	0
Summit Pointe	1	0	0	0	0	0	0	0	1
Tuscola	1	0	0	0	0	0	0	0	1
Van Buren	3	0	0	0	0	0	0	0	3
Washtenaw	47	33	1	0	0	0	1	3	85
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	4	0	0	0	0	0	0	0	4
Total	1,039	372	28	3	1	41	59	68	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Race/Ethnicity
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Race/Ethnicity								Total
	White/ Caucasian	African American/ Black	American Indian	Asian	Native Hawaiian or other Pacific Islander	Other Race	Multiracial	Unknown/ Refused/ Missing	
Allegan	1	0	0	0	0	0	0	0	1
AuSable	7	0	0	0	0	0	2	2	11
Barry	4	0	0	0	0	0	0	5	9
Bay Arenac	113	5	1	0	0	3	0	61	183
Berrien	3	3	0	0	0	0	0	0	6
Clinton Eaton Ingham	1	0	0	0	0	0	0	0	1
CMH for Central Michigan	69	4	1	0	0	0	18	67	159
Copper	13	0	0	0	0	0	0	1	14
Detroit	9	31	0	0	0	2	0	405	447
Genesee	40	27	1	0	0	0	2	26	96
Gogebic	6	0	0	0	0	0	0	0	6
Gratiot	0	0	0	0	0	0	0	0	0
Hiawatha	17	0	2	0	0	0	5	11	35
Huron	13	0	0	0	0	0	0	1	14
Ionia	0	0	0	0	0	0	0	0	0
Kalamazoo	63	39	0	0	0	4	0	18	124
Lapeer	0	0	0	0	0	0	0	0	0
Lenewee	40	1	0	0	0	0	0	57	98
Lifeways	444	52	2	0	0	16	8	430	952
Livingston	52	1	0	0	0	1	2	13	69
Macomb	52	5	0	1	0	3	5	17	83
Manistee-Benzie	0	0	0	0	0	0	0	0	0
Monroe	69	5	0	0	0	1	2	3	80
Montcalm	9	0	0	0	0	0	0	6	15
Muskegon	15	2	0	0	0	1	2	28	48
network180	139	75	1	2	0	42	38	53	350
Newaygo	0	0	0	0	0	0	0	0	0
North Country	96	1	1	0	0	0	2	2	102
Northeast	29	0	0	1	0	0	0	0	30
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	11	0	0	0	0	0	0	3	14
Oakland	726	290	4	13	0	51	174	736	1,994
Ottawa	24	4	0	0	0	2	0	41	71
Pathways	17	0	1	0	0	0	0	8	26
Pines	4	1	0	0	0	0	0	0	5
Saginaw	0	0	0	0	0	0	0	0	0
Sanilac	1	0	0	0	0	0	0	0	1
Shiawassee	18	0	0	0	0	0	0	4	22
St. Clair	3	0	0	0	0	0	0	0	3
St. Joseph	16	4	0	0	0	3	0	2	25
Summit Pointe	5	5	0	1	0	0	0	3	14
Tuscola	16	0	0	0	0	0	0	0	16
Van Buren	13	1	1	0	0	1	0	0	16
Washtenaw	73	38	0	2	0	4	4	14	135
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	28	1	1	0	0	1	0	13	44
Total	2,259	595	16	20	0	135	264	2,030	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Hispanic
Fiscal Year 2012
State of Michigan

CMHSP	Persons with Mental Illness			Developmental Disabilities			Dual Diagnosis			* Substance Abuse Only			Unknown Disability			Total Not		
	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing	Hispanic or Latino	Not Hispanic or Latino	Unknown/ Missing
Allegan	67	1,073	3	7	174	0	6	243	0	1	15	0	0	1	0	81	1,506	3
AuSable	16	1,485	188	2	195	0	0	21	1	0	4	1	0	9	2	18	1,714	192
Barry	27	1,022	167	1	76	3	1	58	4	0	1	2	0	4	5	29	1,161	181
Bay Arenac	318	4,569	133	15	390	0	13	256	2	1	20	2	11	145	27	358	5,380	164
Berrien	112	3,060	752	3	104	103	5	186	98	0	1	2	0	3	3	120	3,354	958
Clinton Eaton Ingham	367	4,663	274	43	825	2	36	714	1	4	95	16	0	1	0	450	6,298	293
CMH for Central Michigan	142	3,718	2,279	6	496	299	4	454	195	0	22	15	4	52	103	156	4,742	2,891
Copper	10	732	36	0	160	1	0	79	1	1	13	3	0	12	2	11	996	43
Detroit	1,197	35,278	20,224	162	7,467	1,309	24	567	85	0	32	3	2	35	410	1,385	43,379	22,031
Genesee	247	4,944	3,528	26	451	895	16	258	224	7	321	77	0	62	34	296	6,036	4,758
Gogebic	4	301	16	1	74	0	2	57	0	0	9	0	0	5	1	7	446	17
Gratiot	85	957	62	3	90	0	7	107	0	0	4	9	0	0	0	95	1,158	71
Hiawatha	14	648	129	3	184	15	1	89	4	2	20	12	0	18	17	20	959	177
Huron	19	951	9	2	88	1	1	91	0	0	1	0	0	10	4	22	1,141	14
Ionia	71	1,622	82	6	97	0	4	128	2	0	7	1	0	0	0	81	1,854	85
Kalamazoo	92	3,249	129	78	1,711	64	9	185	6	1	64	5	2	106	16	182	5,315	220
Lapeer	55	1,129	7	7	255	0	6	121	1	0	8	0	0	0	0	68	1,513	8
Lenewee	143	1,261	17	19	213	0	3	52	0	0	1	0	4	31	63	169	1,558	80
Lifeways	73	4,252	416	7	309	7	3	399	5	1	65	7	6	541	405	90	5,566	840
Livingston	49	1,447	76	13	379	3	1	122	0	0	56	5	3	46	20	66	2,050	104
Macomb	136	8,293	1,053	12	1,436	270	16	1,173	325	0	13	13	0	50	33	164	10,965	1,694
Manistee-Benzie	45	1,014	43	2	86	2	5	111	0	0	5	0	0	0	0	52	1,216	45
Monroe	56	1,594	27	7	393	0	1	140	1	1	21	2	1	73	6	66	2,221	36
Montcalm	20	897	4	0	61	0	2	109	0	0	3	0	0	9	6	22	1,079	10
Muskegon	127	2,870	507	15	522	14	12	391	2	1	2	0	1	19	28	156	3,804	551
network180	1,420	10,000	300	73	914	272	50	636	269	34	201	3	64	221	65	1,641	11,972	909
Newaygo	54	1,490	2	2	70	0	1	114	0	0	0	0	0	0	0	57	1,674	2
North Country	28	2,166	517	3	546	5	0	181	6	0	33	17	0	94	8	31	3,020	553
Northeast	8	1,664	6	1	217	0	0	203	0	0	2	0	0	30	0	9	2,116	6
Northern Lakes	107	4,825	40	13	378	1	6	466	0	0	0	0	0	0	0	126	5,669	41
Northpointe	17	1,072	101	3	119	1	6	222	3	0	12	4	0	11	3	26	1,436	112
Oakland	624	11,287	1,494	97	2,526	993	38	728	476	3	39	27	54	994	946	816	15,574	3,936
Ottawa	219	1,702	53	25	442	14	7	181	0	2	9	0	2	26	43	255	2,360	110
Pathways	28	1,379	114	5	409	2	1	200	0	0	13	4	0	11	15	34	2,012	135
Pines	74	1,675	170	9	121	10	2	119	5	3	39	3	1	4	0	89	1,958	188
Saginaw	247	2,501	526	32	470	15	19	394	6	6	30	27	0	1	0	304	3,396	574
Sanilac	31	880	14	3	161	0	2	132	0	0	0	0	0	0	0	36	1,173	14
Shiawassee	17	1,313	21	3	140	0	0	100	0	0	0	0	0	18	4	20	1,571	25
St. Clair	85	2,556	105	24	822	10	10	380	9	0	8	0	0	3	0	119	3,769	124
St. Joseph	37	1,381	80	1	93	6	0	148	7	0	0	0	3	19	3	41	1,641	96
Summit Pointe	226	3,647	1,149	13	252	11	3	243	15	0	1	0	0	9	5	242	4,152	1,180
Tuscola	35	967	19	5	140	0	3	85	0	0	1	0	0	8	8	43	1,201	27
Van Buren	105	1,572	200	7	86	5	3	199	4	0	3	0	1	15	0	116	1,875	209
Washtenaw	144	3,167	329	24	769	15	14	274	8	2	65	18	8	71	56	192	4,346	426
West Michigan	100	1,784	37	6	99	2	5	184	0	0	0	0	0	0	0	111	2,067	39
Woodlands	13	435	14	2	109	3	0	56	1	0	4	0	1	29	14	16	633	32
Total	7,111	148,492	35,452	791	25,119	4,353	348	11,356	1,766	70	1,263	278	168	2,796	2,355	8,488	189,026	44,204

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Assessment Only consumers have been excluded from this table.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Correctional Status
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Corrections Status													
	Prison	Jail	Paroled from Prison	Probation from Jail	Juvenile Detention Center	Court Supervision	Not in a Corrections Status	Awaiting Trial	Awaiting Sentencing	Minor Referred by Court	Arrested and Booked	Diverted from Arrest/ Booking	Refused/ Unreported	Total
Allegan	0	0	12	47	0	18	1,056	6	1	1	1	1	0	1,143
AuSable	0	55	19	36	5	84	1,418	14	24	27	0	3	4	1,689
Barry	0	15	23	104	0	30	985	5	4	19	4	0	27	1,216
Bay Arenac	3	69	70	152	3	123	4,535	20	21	4	2	1	17	5,020
Berrien	1	0	81	127	42	91	3,017	2	16	111	6	3	427	3,924
Clinton Eaton Ingham	3	436	64	191	38	140	4,123	35	20	42	11	14	187	5,304
CMH for Central Michigan	3	151	101	519	14	96	4,945	67	88	27	9	5	114	6,139
Copper	0	14	5	38	1	27	647	11	3	4	3	0	25	778
Detroit	20	49	1,313	2,062	480	1,058	32,217	145	110	149	18	17	19,061	56,699
Genesee	5	42	226	482	12	117	7,232	53	39	25	32	6	448	8,719
Gogebic	0	1	1	13	1	14	271	5	2	4	1	2	6	321
Gratiot	0	1	9	53	2	15	920	9	15	33	0	2	45	1,104
Hiawatha	0	5	8	20	2	22	673	8	6	4	7	1	35	791
Huron	0	19	5	11	0	8	929	7	0	0	0	0	0	979
Ionia	0	194	24	84	2	36	1,227	21	20	53	4	0	110	1,775
Kalamazoo	3	51	55	154	7	72	2,694	18	27	10	49	3	327	3,470
Lapeer	0	13	11	62	0	27	1,023	16	20	7	3	8	1	1,191
Lenewee	0	1	24	107	13	22	1,228	7	4	4	3	0	8	1,421
Lifeways	1	490	76	223	12	95	3,277	70	24	77	5	8	383	4,741
Livingston	0	1	15	117	0	40	1,335	14	25	14	0	2	9	1,572
Macomb	0	3	178	537	14	147	7,661	57	53	22	8	10	792	9,482
Manistee-Benzie	3	15	6	84	0	21	856	8	17	6	0	0	86	1,102
Monroe	0	41	53	112	4	30	1,373	21	14	1	4	4	20	1,677
Montcalm	0	5	9	25	0	3	866	9	3	0	0	0	1	921
Muskegon	1	87	144	177	72	89	2,831	13	29	20	0	2	39	3,504
network180	0	67	337	607	18	158	9,972	57	77	119	8	3	297	11,720
Newaygo	38	50	12	13	0	2	1,407	2	3	18	0	1	0	1,546
North Country	1	174	29	20	4	114	2,028	12	31	22	11	2	263	2,711
Northeast	0	17	17	47	1	34	1,524	15	14	3	1	0	5	1,678
Northern Lakes	0	365	54	193	18	42	3,914	42	35	27	62	10	210	4,972
Northpointe	0	20	7	76	2	15	993	19	15	5	6	0	32	1,190
Oakland	3	444	339	1,036	30	203	11,000	92	66	72	21	22	77	13,405
Ottawa	0	110	20	24	30	82	1,640	9	20	2	17	2	18	1,974
Pathways	0	7	10	73	6	45	1,280	12	13	5	6	4	60	1,521
Pines	0	25	26	89	0	15	1,635	23	29	7	2	2	66	1,919
Saginaw	1	5	50	78	25	64	1,332	12	15	39	8	5	1,640	3,274
Sanilac	0	12	4	68	0	14	809	5	6	2	2	2	1	925
Shiawassee	0	15	19	76	0	15	1,195	14	13	0	0	2	2	1,351
St. Clair	0	125	52	193	4	93	2,204	22	19	29	1	3	1	2,746
St. Joseph	0	2	29	81	1	38	1,296	19	7	4	5	1	15	1,498
Summit Pointe	0	2	120	134	1	124	4,337	19	24	34	3	2	222	5,022
Tuscola	1	0	37	63	0	5	896	6	6	1	0	0	6	1,021
Van Buren	0	34	33	86	0	48	1,497	1	7	35	1	0	135	1,877
Washtenaw	2	12	70	275	7	161	2,972	41	19	1	3	6	71	3,640
West Michigan	0	39	29	81	0	65	1,453	29	19	7	3	4	192	1,921
Woodlands	0	0	3	3	0	16	353	1	2	9	0	1	74	462
Total	89	3,283	3,829	8,853	871	3,778	141,076	1,093	1,025	1,105	330	164	25,559	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Correctional Status
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Corrections Status														Total
	Prison	Jail	Paroled from Prison	Probation from Jail	Juvenile Detention Center	Court Supervision	Not in a Corrections Status	Awaiting Trial	Awaiting Sentencing	Minor Referred by Court	Arrested and Booked	Diverted from Arrest/ Booking	Refused/ Unreported		
Allegan	0	0	0	0	0	0	181	0	0	0	0	0	0	181	
AuSable	0	0	1	1	0	0	194	0	1	0	0	0	0	197	
Barry	0	0	0	0	0	0	79	0	0	0	0	0	1	80	
Bay Arenac	0	0	1	1	0	1	401	1	0	0	0	0	0	405	
Berrien	0	0	1	0	0	1	207	0	0	0	0	0	1	210	
Clinton Eaton Ingham	0	0	1	1	0	1	864	0	0	0	1	0	2	870	
CMH for Central Michigan	0	1	0	2	0	0	796	0	0	0	0	0	2	801	
Copper	0	0	1	1	0	0	158	0	0	0	0	0	1	161	
Detroit	0	1	10	44	16	73	7,707	3	2	12	0	4	1,066	8,938	
Genesee	1	1	1	5	0	1	1,349	1	0	1	0	1	11	1,372	
Gogebic	0	0	0	0	0	0	75	0	0	0	0	0	0	75	
Gratiot	0	0	1	0	0	0	92	0	0	0	0	0	0	93	
Hiawatha	0	0	0	0	0	0	200	0	0	0	0	0	2	202	
Huron	0	0	1	0	0	3	85	0	0	0	0	0	2	91	
Ionia	0	0	0	1	0	0	102	0	0	0	0	0	0	103	
Kalamazoo	0	8	21	47	5	17	1,532	3	7	5	9	2	197	1,853	
Lapeer	0	0	0	0	0	0	260	0	0	0	0	2	0	262	
Lenewee	0	0	0	1	0	0	231	0	0	0	0	0	0	232	
Lifeways	0	3	0	0	0	2	313	0	0	0	0	0	5	323	
Livingston	0	0	1	1	0	0	392	0	0	0	0	0	1	395	
Macomb	0	0	1	3	0	1	1,704	0	0	2	0	0	7	1,718	
Manistee-Benzie	0	0	0	0	0	0	89	0	0	0	0	0	1	90	
Monroe	0	0	0	1	0	1	396	1	1	0	0	0	0	400	
Montcalm	0	0	0	1	0	0	60	0	0	0	0	0	0	61	
Muskegon	0	2	0	7	0	2	540	0	0	0	0	0	0	551	
network180	0	0	1	3	0	0	1,229	0	0	0	0	0	26	1,259	
Newaygo	0	0	0	0	0	0	72	0	0	0	0	0	0	72	
North Country	0	0	2	2	0	3	544	0	1	0	0	0	2	554	
Northeast	0	0	0	0	0	1	217	0	0	0	0	0	0	218	
Northern Lakes	0	0	0	0	0	0	378	0	0	1	0	0	13	392	
Northpointe	0	0	0	0	0	0	123	0	0	0	0	0	0	123	
Oakland	0	2	3	9	1	13	3,580	2	2	2	0	1	1	3,616	
Ottawa	0	0	0	0	0	1	476	0	1	1	0	0	2	481	
Pathways	0	0	0	2	0	0	411	0	1	1	0	0	1	416	
Pines	0	0	1	0	0	0	139	0	0	0	0	0	0	140	
Saginaw	0	0	1	1	0	3	451	0	0	0	0	0	61	517	
Sanilac	0	0	0	1	0	1	162	0	0	0	0	0	0	164	
Shiawassee	0	0	0	0	0	0	140	1	1	0	1	0	0	143	
St. Clair	0	0	0	3	0	3	848	0	1	0	0	0	1	856	
St. Joseph	0	0	0	0	0	0	99	0	0	0	0	1	0	100	
Summit Pointe	0	0	0	0	0	0	270	0	0	0	0	0	6	276	
Tuscola	0	0	0	0	0	1	143	0	0	0	0	1	0	145	
Van Buren	0	0	0	1	0	0	97	0	0	0	0	0	0	98	
Washtenaw	0	1	0	9	0	2	792	0	3	0	0	0	1	808	
West Michigan	0	0	0	0	0	1	104	0	0	0	0	0	2	107	
Woodlands	0	0	0	0	0	1	91	0	0	4	0	0	18	114	
Total	1	19	49	148	22	133	28,373	12	21	29	11	12	1,433	30,263	

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Correctional Status
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Corrections Status													
	Prison	Jail	Paroled from Prison	Probation from Jail	Juvenile Detention Center	Court Supervision	Not in a Corrections Status	Awaiting Trial	Awaiting Sentencing	Minor Referred by Court	Arrested and Booked	Diverted from Arrest/ Booking	Refused/ Unreported	Total
Allegan	0	0	1	2	0	1	245	0	0	0	0	0	0	249
AuSable	0	0	0	0	0	0	21	0	0	1	0	0	0	22
Barry	0	1	0	1	0	0	61	0	0	0	0	0	0	63
Bay Arenac	0	0	0	3	0	1	267	0	0	0	0	0	0	271
Berrien	0	0	3	1	0	3	274	0	0	1	0	0	7	289
Clinton Eaton Ingham	2	9	0	8	1	3	726	1	0	0	0	1	0	751
CMH for Central Michigan	0	1	1	15	0	8	622	0	1	0	0	0	5	653
Copper	0	1	0	1	0	1	75	0	0	0	2	0	0	80
Detroit	0	0	4	14	1	8	556	0	1	2	1	0	89	676
Genesee	0	0	4	8	0	5	471	0	3	3	0	2	2	498
Gogebic	0	0	0	1	0	1	57	0	0	0	0	0	0	59
Gratiot	0	0	0	0	0	1	111	0	1	1	0	0	0	114
Hiawatha	0	0	0	0	1	0	90	1	0	1	0	0	1	94
Huron	0	0	1	1	0	1	89	0	0	0	0	0	0	92
Ionia	1	1	0	5	0	1	122	0	0	0	1	0	3	134
Kalamazoo	0	1	0	2	1	4	180	1	0	1	0	2	8	200
Lapeer	0	1	2	2	0	0	120	0	1	2	0	0	0	128
Lenewee	0	0	0	2	0	0	53	0	0	0	0	0	0	55
Lifeways	0	0	0	4	2	3	387	1	0	1	0	0	9	407
Livingston	0	0	1	5	0	3	114	0	0	0	0	0	0	123
Macomb	0	1	0	19	0	9	1,469	1	2	1	2	1	9	1,514
Manistee-Benzie	0	0	1	3	0	2	108	0	0	0	0	1	1	116
Monroe	0	2	2	2	0	1	135	0	0	0	0	0	0	142
Montcalm	0	0	2	3	0	0	105	1	0	0	0	0	0	111
Muskegon	0	1	1	3	0	5	394	1	0	0	0	0	0	405
network180	0	2	3	18	0	8	912	2	0	1	0	0	9	955
Newaygo	0	1	0	0	0	0	114	0	0	0	0	0	0	115
North Country	0	1	2	1	0	10	169	0	0	1	1	0	2	187
Northeast	0	0	1	0	0	0	199	0	0	1	2	0	0	203
Northern Lakes	0	3	2	5	1	2	447	0	0	1	0	0	11	472
Northpointe	0	1	0	2	0	4	223	0	0	0	0	0	1	231
Oakland	0	3	1	19	1	11	1,200	0	2	3	0	2	0	1,242
Ottawa	0	2	0	1	0	2	183	0	0	0	0	0	0	188
Pathways	0	2	0	2	0	0	194	0	1	0	0	0	2	201
Pines	0	0	1	0	0	0	121	1	1	1	0	0	1	126
Saginaw	0	0	0	5	0	2	353	1	0	0	0	1	57	419
Sanilac	0	0	0	2	0	1	130	1	0	0	0	0	0	134
Shiawassee	0	1	0	1	0	2	96	0	0	0	0	0	0	100
St. Clair	0	4	1	13	0	10	365	2	2	1	1	0	0	399
St. Joseph	0	0	1	3	0	1	143	0	0	1	0	1	5	155
Summit Pointe	0	0	1	2	0	4	249	0	0	0	0	0	5	261
Tuscola	0	0	0	0	0	0	87	0	1	0	0	0	0	88
Van Buren	0	0	3	2	0	3	195	0	1	1	0	0	1	206
Washtenaw	0	0	4	13	3	3	268	0	2	1	0	1	1	296
West Michigan	0	0	0	2	0	2	182	0	0	0	0	0	3	189
Woodlands	0	0	1	0	0	0	40	0	0	1	0	0	15	57
Total	3	39	44	196	11	126	12,722	14	19	27	10	12	247	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Correctional Status
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Corrections Status													Total
	Prison	Jail	Paroled from Prison	Probation from Jail	Juvenile Detention Center	Court Supervision	Not in a Corrections Status	Awaiting Trial	Awaiting Sentencing	Minor Referred by Court	Arrested and Booked	Diverted from Arrest/Booking	Refused/Unreported	
Allegan	0	0	0	2	0	0	14	0	0	0	0	0	0	16
AuSable	0	0	0	0	0	0	5	0	0	0	0	0	0	5
Barry	0	0	0	1	0	1	1	0	0	0	0	0	0	3
Bay Arenac	0	0	1	3	0	0	19	0	0	0	0	0	0	23
Berrien	0	0	0	0	0	0	1	0	0	0	0	0	2	3
Clinton Eaton Ingham	0	25	8	18	0	2	46	1	0	0	1	1	13	115
CMH for Central Michigan	0	0	0	7	0	1	21	2	2	1	0	0	3	37
Copper	0	4	0	2	0	0	10	0	0	0	0	0	1	17
Detroit	0	0	0	0	0	0	2	0	0	0	0	0	33	35
Genesee	1	1	32	48	0	3	300	5	3	0	2	0	10	405
Gogebic	0	1	0	0	0	0	6	1	0	0	1	0	0	9
Gratiot	0	0	0	0	0	1	2	0	1	0	0	0	9	13
Hiawatha	0	2	0	1	0	0	24	1	1	0	3	0	2	34
Huron	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Ionia	0	2	0	1	0	0	3	0	0	0	0	0	2	8
Kalamazoo	0	5	3	10	0	3	25	1	4	0	4	0	15	70
Lapeer	0	2	0	1	0	0	4	1	0	0	0	0	0	8
Lenexwee	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Lifeways	0	1	2	8	0	1	57	3	1	0	0	0	0	73
Livingston	0	4	2	14	0	1	32	2	5	0	0	0	1	61
Macomb	0	0	0	1	1	0	11	0	0	0	0	0	13	26
Manistee-Benzie	0	0	0	1	0	1	3	0	0	0	0	0	0	5
Monroe	0	7	0	3	0	0	11	1	0	0	0	1	1	24
Montcalm	0	0	0	0	0	0	3	0	0	0	0	0	0	3
Muskegon	0	0	0	0	0	0	3	0	0	0	0	0	0	3
network180	0	6	6	37	0	27	134	4	7	12	1	0	4	238
Newaygo	0	0	0	0	0	0	0	0	0	0	0	0	0	0
North Country	0	16	2	1	0	8	13	1	2	0	1	0	6	50
Northeast	0	0	0	0	0	0	2	0	0	0	0	0	0	2
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Northpointe	0	2	1	1	0	1	9	1	0	0	0	0	1	16
Oakland	0	6	1	3	0	1	32	1	0	0	0	0	25	69
Ottawa	0	3	0	0	1	0	3	1	1	0	2	0	0	11
Pathways	0	0	1	1	0	0	12	0	0	0	0	0	3	17
Pines	0	1	6	15	0	0	15	2	4	0	0	0	2	45
Saginaw	0	0	0	0	0	0	9	0	0	1	0	1	52	63
Sanilac	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0	0	0	0	0	0
St. Clair	0	2	0	1	0	0	4	1	0	0	0	0	0	8
St. Joseph	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Summit Pointe	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Tuscola	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Van Buren	0	0	0	1	0	0	2	0	0	0	0	0	0	3
Washtenaw	0	0	3	18	0	0	57	1	3	0	0	0	3	85
West Michigan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Woodlands	0	1	0	0	0	0	0	0	1	0	0	0	2	4
Total	1	91	68	200	2	51	897	30	35	14	15	3	204	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Correctional Status
Persons with Unknown Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Corrections Status													
	Prison	Jail	Paroled from Prison	Probation from Jail	Juvenile Detention Center	Court Supervision	Not in a Corrections Status	Awaiting Trial	Awaiting Sentencing	Minor Referred by Court	Arrested and Booked	Diverted from Arrest/Booking	Refused/Unreported	Total
Allegan	0	0	0	0	0	0	1	0	0	0	0	0	0	1
AuSable	0	0	0	1	0	1	9	0	0	0	0	0	0	11
Barry	0	2	0	0	0	0	2	0	0	0	0	0	0	9
Bay Arenac	0	0	3	8	0	0	151	0	0	0	0	0	21	183
Berrien	0	0	0	0	0	0	3	0	0	1	0	0	2	6
Clinton Eaton Ingham	0	0	1	0	0	0	0	0	0	0	0	0	0	1
CMH for Central Michigan	0	3	0	6	0	0	77	0	0	4	0	0	69	159
Copper	0	2	0	4	0	0	8	0	0	0	0	0	0	14
Detroit	0	0	1	9	31	3	59	0	0	1	0	0	343	447
Genesee	0	0	4	6	0	1	48	0	0	0	0	0	37	96
Gogebic	0	0	0	1	0	0	4	0	0	0	0	0	1	6
Gratiot	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hiawatha	0	0	1	0	0	1	27	0	0	0	0	0	6	35
Huron	0	0	0	0	0	0	5	0	0	0	0	0	9	14
Ionia	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Kalamazoo	1	1	4	11	0	3	76	1	0	0	0	0	27	124
Lapeer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lenewee	0	0	0	4	0	0	37	0	0	0	0	0	57	98
Lifeways	0	1	38	43	1	5	823	2	9	3	0	2	25	952
Livingston	0	4	0	4	0	1	46	0	0	0	0	1	13	69
Macomb	0	0	0	1	0	0	65	0	0	0	0	1	16	83
Manistee-Benzie	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Monroe	0	1	2	2	0	4	58	0	1	0	0	0	12	80
Montcalm	0	0	0	1	0	0	6	0	0	0	0	0	8	15
Muskegon	0	0	0	1	1	1	17	0	2	0	0	0	26	48
network180	0	0	2	11	0	4	249	0	0	9	1	0	74	350
Newaygo	0	0	0	0	0	0	0	0	0	0	0	0	0	0
North Country	0	2	2	0	0	6	55	1	1	1	1	1	32	102
Northeast	0	0	0	1	0	1	26	0	2	0	0	0	0	30
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Northpointe	0	1	1	0	0	0	10	1	0	0	0	0	1	14
Oakland	0	22	23	74	2	4	876	12	9	8	7	1	956	1,994
Ottawa	0	4	1	0	0	1	14	0	0	0	0	0	51	71
Pathways	0	0	1	0	0	0	19	1	0	1	1	0	3	26
Pines	0	1	1	0	0	0	3	0	0	0	0	0	0	5
Saginaw	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sanilac	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Shiawassee	0	0	1	1	0	0	14	0	0	0	0	0	6	22
St. Clair	0	0	0	2	0	0	1	0	0	0	0	0	0	3
St. Joseph	0	0	2	1	0	0	20	1	1	0	0	0	0	25
Summit Pointe	0	0	0	0	0	0	11	0	0	0	0	0	3	14
Tuscola	0	0	0	1	0	0	0	0	0	0	0	0	15	16
Van Buren	0	0	0	1	0	3	12	0	0	0	0	0	0	16
Washtenaw	0	0	4	5	1	1	75	2	3	0	0	1	43	135
West Michigan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Woodlands	0	0	0	0	0	1	24	0	0	0	0	0	19	44
Total	1	44	92	199	36	41	2,932	21	28	28	10	7	1,880	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Residence
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Residence											
	Homeless/ Shelter	Private - with Relatives	Private - Non- Relatives	Foster Family	Specialized Residential	General Residential	Prison/Jail/ Juvenile Detention	Nursing Care Facility	Other Institutional Setting	Supported Independence Program	Unreported	Total
Allegan	30	456	574	13	21	25	1	23	0	0	0	1,143
AuSable	25	976	571	19	9	5	57	5	2	7	13	1,689
Barry	13	631	450	21	9	11	15	2	0	41	23	1,216
Bay Arenac	189	2,218	2,307	45	52	39	67	74	0	20	9	5,020
Berrien	72	1,631	1,321	121	111	51	29	7	15	232	334	3,924
Clinton Eaton Ingham	290	2,312	1,621	112	134	88	428	105	37	33	144	5,304
CMH for Central Michigan	121	2,915	2,607	49	77	37	145	35	25	15	113	6,139
Copper	8	354	349	13	15	8	10	7	6	1	7	778
Detroit	2,259	25,788	9,290	652	3,186	1,437	469	914	317	422	11,965	56,699
Genesee	521	4,165	2,939	109	165	180	63	13	147	61	356	8,719
Gogebic	5	149	143	7	3	3	0	0	2	1	8	321
Gratiot	5	733	265	21	4	9	0	15	2	3	47	1,104
Hiawatha	14	397	311	3	17	15	5	4	3	1	21	791
Huron	13	188	669	15	4	59	6	23	0	2	0	979
Ionia	57	858	701	10	8	18	39	7	0	0	77	1,775
Kalamazoo	231	1,260	1,409	81	137	53	37	78	5	0	179	3,470
Lapeer	38	619	462	11	28	16	9	1	2	4	1	1,191
Lenewee	33	878	368	20	20	51	18	28	1	0	4	1,421
Lifeways	145	2,165	1,419	32	66	69	497	61	24	17	246	4,741
Livingston	43	1,079	352	31	11	28	1	4	6	7	10	1,572
Macomb	366	4,898	2,761	62	274	110	4	160	54	118	675	9,482
Manistee-Benzie	16	739	255	8	6	9	9	21	1	1	37	1,102
Monroe	68	1,224	243	40	30	41	11	4	8	5	3	1,677
Montcalm	8	308	543	20	5	29	4	2	0	2	0	921
Muskegon	199	1,299	1,404	59	46	84	181	179	8	40	5	3,504
network180	595	5,732	4,319	268	204	262	47	106	26	107	54	11,720
Newaygo	17	457	915	21	6	14	102	11	0	3	0	1,546
North Country	69	1,364	886	50	21	79	25	51	4	7	155	2,711
Northeast	29	464	1,035	4	36	18	19	71	1	0	1	1,678
Northern Lakes	203	2,068	2,230	42	63	125	98	83	7	16	37	4,972
Northpointe	33	528	531	15	11	23	13	10	6	6	14	1,190
Oakland	463	6,809	3,796	82	346	554	497	573	95	143	47	13,405
Ottawa	102	818	906	21	19	38	40	6	0	1	23	1,974
Pathways	75	720	586	14	32	37	9	13	8	1	26	1,521
Pines	77	542	1,176	13	5	12	18	3	1	35	37	1,919
Saginaw	86	1,232	799	46	91	119	34	145	20	37	665	3,274
Sanilac	24	441	392	8	14	29	7	5	2	1	2	925
Shiawassee	31	711	564	5	6	15	14	1	1	0	3	1,351
St. Clair	112	1,236	1,117	41	47	17	126	32	7	9	2	2,746
St. Joseph	31	422	900	79	13	16	23	8	1	5	0	1,498
Summit Pointe	156	2,210	2,079	97	50	118	8	60	21	188	35	5,022
Tuscola	14	462	504	10	5	16	0	4	1	1	4	1,021
Van Buren	12	1,018	528	39	23	10	34	14	3	78	118	1,877
Washtenaw	337	1,793	1,109	39	77	132	8	24	6	81	34	3,640
West Michigan	73	787	853	20	21	38	14	23	1	7	84	1,921
Woodlands	8	261	136	31	2	10	0	2	0	0	12	462
Total	7,316	88,315	58,695	2,519	5,530	4,157	3,241	3,017	876	1,759	15,630	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Residence
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Residence											Total
	Homeless/ Shelter	Private - with Relatives	Private - Non- Relatives	Foster Family	Specialized Residential	General Residential	Prison/Jail/ Juvenile Detention	Nursing Care Facility	Other Institutional Setting	Supported Independence Program	Unreported	
Allegan	0	89	52	2	23	14	0	1	0	0	0	181
AuSable	0	74	78	1	36	4	0	1	0	3	0	197
Barry	0	48	7	0	13	8	0	4	0	0	0	80
Bay Arenac	3	222	64	3	84	17	0	2	0	10	0	405
Berrien	0	109	22	10	45	3	0	1	0	19	1	210
Clinton Eaton Ingham	1	578	84	16	146	20	1	7	1	15	1	870
CMH for Central Michigan	0	353	210	11	185	24	0	2	3	11	2	801
Copper	0	75	35	0	39	12	0	0	0	0	0	161
Detroit	20	5,460	1,490	94	1,151	135	17	148	12	50	361	8,938
Genesee	1	760	82	9	413	82	0	5	1	12	7	1,372
Gogebic	0	44	9	3	18	1	0	0	0	0	0	75
Gratiot	0	44	10	2	12	8	0	1	0	16	0	93
Hiawatha	0	111	24	2	49	15	0	0	0	0	1	202
Huron	1	47	14	0	8	16	0	4	0	0	1	91
Ionia	0	78	10	0	11	4	0	0	0	0	0	103
Kalamazoo	98	927	458	45	148	27	20	28	4	1	97	1,853
Lapeer	0	125	24	8	66	36	0	2	0	1	0	262
Lenewee	0	107	27	1	40	56	0	1	0	0	0	232
Lifeways	1	136	46	2	89	32	3	6	1	5	2	323
Livingston	1	260	57	2	35	14	0	3	0	22	1	395
Macomb	3	1,236	206	24	190	27	0	9	0	17	6	1,718
Manistee-Benzie	0	32	26	5	15	9	0	1	0	0	2	90
Monroe	0	252	71	0	59	10	0	0	0	8	0	400
Montcalm	0	34	13	1	9	3	0	0	1	0	0	61
Muskegon	2	377	48	1	63	49	4	1	0	6	0	551
network180	2	638	118	7	312	148	0	9	3	22	0	1,259
Newaygo	0	38	11	0	17	4	0	2	0	0	0	72
North Country	0	289	78	12	106	49	0	0	0	20	0	554
Northeast	0	115	48	1	51	1	0	2	0	0	0	218
Northern Lakes	1	240	16	3	76	43	0	4	0	9	0	392
Northpointe	0	86	7	1	19	9	0	1	0	0	0	123
Oakland	0	2,426	478	1	660	12	2	9	1	27	0	3,616
Ottawa	0	269	43	2	105	51	0	6	0	4	1	481
Pathways	1	224	65	4	95	21	0	4	0	2	0	416
Pines	0	85	22	2	14	9	0	1	0	7	0	140
Saginaw	0	329	45	0	77	43	0	4	1	16	2	517
Sanilac	0	80	21	0	47	14	0	2	0	0	0	164
Shiawassee	0	74	41	1	17	9	0	1	0	0	0	143
St. Clair	0	627	87	40	90	6	0	1	0	4	1	856
St. Joseph	1	43	24	1	19	9	0	0	2	1	0	100
Summit Pointe	0	161	45	10	37	12	0	0	0	11	0	276
Tuscola	1	77	25	0	32	10	0	0	0	0	0	145
Van Buren	0	65	14	0	10	7	1	0	0	1	0	98
Washtenaw	5	419	243	2	85	40	1	1	1	11	0	808
West Michigan	0	65	13	0	12	11	0	5	0	1	0	107
Woodlands	0	60	16	13	11	0	0	0	0	14	0	114
Total	142	17,988	4,627	342	4,839	1,134	49	279	31	346	486	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Residence
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Residence											Total
	Homeless/ Shelter	Private - with Relatives	Private - Non- Relatives	Foster Family	Specialized Residential	General Residential	Prison/Jail/ Juvenile Detention	Nursing Care Facility	Other Institutional Setting	Supported Independence Program	Unreported	
Allegan	2	89	117	0	29	8	0	3	1	0	0	249
AuSable	0	9	7	0	1	3	0	0	0	2	0	22
Barry	0	23	11	1	15	11	0	2	0	0	0	63
Bay Arenac	4	117	55	2	75	9	0	1	0	8	0	271
Berrien	2	102	51	19	47	16	0	0	0	49	3	289
Clinton Eaton Ingham	7	266	146	9	213	23	12	26	6	43	0	751
CMH for Central Michigan	1	234	174	10	195	15	1	3	5	11	4	653
Copper	0	28	14	3	31	3	1	0	0	0	0	80
Detroit	7	448	91	4	65	10	3	5	3	3	37	676
Genesee	3	264	84	3	108	33	1	0	1	0	1	498
Gogebic	0	38	8	0	8	4	0	0	0	1	0	59
Gratiot	0	47	24	1	23	8	0	1	0	10	0	114
Hiawatha	0	40	15	1	23	10	1	1	2	1	0	94
Huron	0	26	25	1	14	24	0	2	0	0	0	92
Ionia	1	57	27	1	20	27	0	1	0	0	0	134
Kalamazoo	3	80	42	5	40	8	5	8	0	0	9	200
Lapeer	2	80	18	2	15	9	1	0	0	1	0	128
Lenewee	1	15	12	1	16	6	0	2	1	1	0	55
Lifeways	0	156	73	8	92	41	4	13	3	15	2	407
Livingston	2	68	31	1	3	4	0	4	0	10	0	123
Macomb	7	810	226	12	345	26	0	33	9	38	8	1,514
Manistee-Benzie	0	46	36	4	13	6	0	4	2	5	0	116
Monroe	0	98	27	1	7	4	1	0	2	2	0	142
Montcalm	0	42	26	1	30	10	0	0	0	2	0	111
Muskegon	0	176	52	3	121	35	1	2	1	14	0	405
network180	5	366	167	7	269	98	0	22	1	19	1	955
Newaygo	0	56	30	2	16	8	2	0	0	1	0	115
North Country	0	85	31	6	37	19	0	2	1	5	1	187
Northeast	0	54	57	0	84	3	0	4	1	0	0	203
Northern Lakes	3	162	80	1	145	61	1	5	0	14	0	472
Northpointe	0	120	24	3	64	17	0	0	0	3	0	231
Oakland	3	461	325	3	409	10	3	14	3	11	0	1,242
Ottawa	0	40	33	0	73	31	0	1	1	9	0	188
Pathways	1	59	46	0	67	15	1	6	3	1	2	201
Pines	1	50	29	2	28	8	0	3	1	4	0	126
Saginaw	2	129	56	0	117	73	0	2	1	32	7	419
Sanilac	0	59	25	0	36	11	1	2	0	0	0	134
Shiawassee	1	57	25	1	7	8	0	1	0	0	0	100
St. Clair	5	187	95	19	77	5	5	4	0	2	0	399
St. Joseph	0	74	32	7	19	21	0	0	0	2	0	155
Summit Pointe	1	123	62	12	22	25	0	3	1	12	0	261
Tuscola	0	25	6	0	43	8	0	0	0	6	0	88
Van Buren	0	105	38	3	33	20	2	4	0	1	0	206
Washtenaw	16	145	63	2	22	23	3	4	5	11	2	296
West Michigan	0	81	26	1	55	17	0	6	0	2	1	189
Woodlands	0	26	7	9	6	1	0	0	1	7	0	57
Total	80	5,823	2,649	171	3,178	835	49	194	55	358	78	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Residence
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Residence											
	Homeless/ Shelter	Private - with Relatives	Private - Non- Relatives	Foster Family	Specialized Residential	General Residential	Prison/Jail/ Juvenile Detention	Nursing Care Facility	Other Institutional Setting	Supported Independence Program	Unreported	Total
Allegan	0	6	9	0	0	0	1	0	0	0	0	16
AuSable	0	5	0	0	0	0	0	0	0	0	0	5
Barry	0	2	1	0	0	0	0	0	0	0	0	3
Bay Arenac	1	5	10	0	0	1	0	1	0	1	4	23
Berrien	0	0	1	0	0	0	0	0	0	0	2	3
Clinton Eaton Ingham	14	36	27	0	3	0	23	0	2	0	10	115
CMH for Central Michigan	1	14	17	0	0	0	0	0	0	0	5	37
Copper	0	6	7	0	0	0	1	1	0	0	2	17
Detroit	0	1	0	0	0	0	0	1	0	0	33	35
Genesee	63	183	128	0	2	2	4	1	13	1	8	405
Gogebic	0	5	3	0	0	0	1	0	0	0	0	9
Gratiot	0	3	1	0	0	0	0	0	0	0	9	13
Hiawatha	2	17	9	0	1	0	2	0	0	0	3	34
Huron	0	1	0	0	0	0	0	0	0	0	0	1
Ionia	0	2	4	1	0	0	0	0	0	0	1	8
Kalamazoo	13	12	27	0	0	0	5	0	0	0	13	70
Lapeer	0	4	2	0	0	1	1	0	0	0	0	8
Lenewee	1	0	0	0	0	0	0	0	0	0	0	1
Lifeways	4	44	23	0	0	0	1	0	0	0	1	73
Livingston	3	44	12	0	0	0	2	0	0	0	0	61
Macomb	2	4	9	0	0	0	0	0	0	0	11	26
Manistee-Benzie	0	4	1	0	0	0	0	0	0	0	0	5
Monroe	4	17	2	0	0	0	0	0	0	1	0	24
Montcalm	0	0	3	0	0	0	0	0	0	0	0	3
Muskegon	0	1	2	0	0	0	0	0	0	0	0	3
network180	17	105	100	2	2	1	2	0	5	4	0	238
Newaygo	0	0	0	0	0	0	0	0	0	0	0	0
North Country	2	22	11	0	1	0	0	0	0	0	14	50
Northeast	0	0	1	0	1	0	0	0	0	0	0	2
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0	0
Northpointe	0	11	3	0	0	0	0	0	0	0	2	16
Oakland	1	14	11	0	0	2	6	0	0	0	35	69
Ottawa	0	5	6	0	0	0	0	0	0	0	0	11
Pathways	3	5	8	0	0	0	0	0	0	0	1	17
Pines	1	4	36	0	0	1	1	0	0	0	2	45
Saginaw	1	15	4	0	0	0	1	1	0	0	41	63
Sanilac	0	0	0	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0	0	0	0
St. Clair	0	3	2	0	0	0	3	0	0	0	0	8
St. Joseph	0	0	0	0	0	0	0	0	0	0	0	0
Summit Pointe	0	0	1	0	0	0	0	0	0	0	0	1
Tuscola	0	1	0	0	0	0	0	0	0	0	0	1
Van Buren	0	1	2	0	0	0	0	0	0	0	0	3
Washtenaw	15	45	20	0	0	2	0	0	0	2	1	85
West Michigan	0	0	0	0	0	0	0	0	0	0	0	0
Woodlands	0	0	0	0	0	2	2	0	0	0	0	4
Total	148	647	503	3	10	12	56	5	20	9	198	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Residence
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Residence											Total
	Homeless/ Shelter	Private - with Relatives	Private - Non- Relatives	Foster Family	Specialized Residential	General Residential	Prison/Jail/ Juvenile Detention	Nursing Care Facility	Other Institutional Setting	Supported Independence Program	Unreported	
Allegan	0	0	1	0	0	0	0	0	0	0	0	1
AuSable	0	9	2	0	0	0	0	0	0	0	0	11
Barry	0	3	0	0	0	0	0	0	0	1	5	9
Bay Arenac	0	22	30	0	0	1	0	4	0	0	126	183
Berrien	0	1	1	1	0	0	0	1	0	0	2	6
Clinton Eaton Ingham	0	1	0	0	0	0	0	0	0	0	0	1
CMH for Central Michigan	2	57	35	1	1	0	4	0	0	0	59	159
Copper	1	10	2	0	0	0	0	0	0	0	1	14
Detroit	7	20	10	0	3	6	32	41	1	0	327	447
Genesee	5	28	23	0	1	1	0	0	2	0	36	96
Gogebic	0	3	2	0	0	0	0	0	0	0	1	6
Gratiot	0	0	0	0	0	0	0	0	0	0	0	0
Hiawatha	1	15	6	0	1	0	0	0	0	0	12	35
Huron	0	0	3	1	0	0	0	1	0	0	9	14
Ionia	0	0	0	0	0	0	0	0	0	0	0	0
Kalamazoo	21	32	38	2	0	2	3	1	0	0	25	124
Lapeer	0	0	0	0	0	0	0	0	0	0	0	0
Lenewee	4	26	6	0	0	0	0	0	0	0	62	98
Lifeways	20	693	223	3	0	0	2	0	1	5	5	952
Livingston	3	42	7	1	0	1	2	0	0	0	13	69
Macomb	0	35	17	0	11	1	0	4	0	0	15	83
Manistee-Benzie	0	0	0	0	0	0	0	0	0	0	0	0
Monroe	2	65	3	7	0	0	0	0	0	0	3	80
Montcalm	0	4	4	0	0	0	0	0	0	0	7	15
Muskegon	2	9	10	0	0	0	1	0	0	0	26	48
network180	14	203	64	5	4	5	0	0	1	0	54	350
Newaygo	0	0	0	0	0	0	0	0	0	0	0	0
North Country	5	60	30	2	1	1	0	0	0	0	3	102
Northeast	0	12	17	0	0	0	0	1	0	0	0	30
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0	0
Northpointe	0	8	5	0	0	0	0	0	0	0	1	14
Oakland	22	267	82	12	6	17	19	7	0	2	1,560	1,994
Ottawa	0	11	7	0	0	0	1	0	0	0	52	71
Pathways	2	10	4	0	0	0	0	1	0	0	9	26
Pines	0	1	3	0	0	0	1	0	0	0	0	5
Saginaw	0	0	0	0	0	0	0	0	0	0	0	0
Sanilac	0	0	1	0	0	0	0	0	0	0	0	1
Shiawassee	1	7	8	0	0	0	0	0	0	0	6	22
St. Clair	1	2	0	0	0	0	0	0	0	0	0	3
St. Joseph	1	7	11	6	0	0	0	0	0	0	0	25
Summit Pointe	0	1	7	0	0	1	0	2	0	1	2	14
Tuscola	0	2	1	0	0	0	0	0	0	0	13	16
Van Buren	0	14	2	0	0	0	0	0	0	0	0	16
Washtenaw	11	71	25	0	0	4	0	2	0	0	22	135
West Michigan	0	0	0	0	0	0	0	0	0	0	0	0
Woodlands	0	17	5	7	0	1	0	0	0	0	14	44
Total	125	1,768	695	48	28	41	65	65	5	9	2,470	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Income
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Total Annual Household Income							
	Income Below \$10,000	Income \$10,001 to \$20,000	Income \$20,001 to \$30,000	Income \$30,001 to \$40,000	Income \$40,001 to \$60,000	Income Over \$60,000	Income Unreported	Total
Allegan	648	325	103	36	26	5	0	1,143
AuSable	698	145	31	12	12	4	787	1,689
Barry	662	297	98	67	35	26	31	1,216
Bay Arenac	3,046	1,101	251	82	39	37	464	5,020
Berrien	2,685	349	108	45	27	362	348	3,924
Clinton Eaton Ingham	3,304	1,107	294	134	90	55	320	5,304
CMH for Central Michigan	4,515	834	291	100	62	28	309	6,139
Copper	380	168	56	30	9	12	123	778
Detroit	20,862	4,526	917	225	123	93	29,953	56,699
Genesee	7,818	717	96	42	30	16	0	8,719
Gogebic	124	75	21	4	2	5	90	321
Gratiot	498	269	98	28	20	7	184	1,104
Hiawatha	285	135	48	20	16	7	280	791
Huron	597	266	70	28	13	4	1	979
Ionia	1,155	333	132	61	39	18	37	1,775
Kalamazoo	2,649	141	5	2	3	1	669	3,470
Lapeer	1,059	68	27	12	4	5	16	1,191
Lenewee	0	0	0	0	0	0	1,421	1,421
Lifeways	2,476	802	194	70	50	15	1,134	4,741
Livingston	0	0	0	0	0	0	1,572	1,572
Macomb	302	35	12	7	6	2	9,118	9,482
Manistee-Benzie	549	289	99	41	36	26	62	1,102
Monroe	0	0	0	0	0	0	1,677	1,677
Montcalm	398	308	125	55	18	4	13	921
Muskegon	1,392	514	145	59	21	8	1,365	3,504
network180	7,208	2,810	894	375	222	134	77	11,720
Newaygo	804	452	152	58	24	9	47	1,546
North Country	739	381	126	43	38	14	1,370	2,711
Northeast	628	677	203	60	39	16	55	1,678
Northern Lakes	2,600	1,123	299	122	56	24	748	4,972
Northpointe	452	248	91	49	46	27	277	1,190
Oakland	11,053	1,615	410	152	124	51	0	13,405
Ottawa	797	350	110	45	41	5	626	1,974
Pathways	733	330	63	27	21	15	332	1,521
Pines	733	625	268	117	89	63	24	1,919
Saginaw	2,960	158	91	30	26	9	0	3,274
Sanilac	355	258	135	64	41	13	59	925
Shiawassee	499	385	134	49	32	14	238	1,351
St. Clair	1,346	363	126	49	33	10	819	2,746
St. Joseph	961	235	88	16	12	9	177	1,498
Summit Pointe	3,079	654	189	60	53	14	973	5,022
Tuscola	710	179	51	13	10	9	49	1,021
Van Buren	1,552	44	14	20	10	5	232	1,877
Washtenaw	0	0	0	0	0	0	3,640	3,640
West Michigan	352	122	34	8	4	3	1,398	1,921
Woodlands	354	47	11	3	2	8	37	462
Total	94,017	23,860	6,710	2,520	1,604	1,192	61,152	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Income
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Total Annual Household Income							
	Income Below \$10,000	Income \$10,001 to \$20,000	Income \$20,001 to \$30,000	Income \$30,001 to \$40,000	Income \$40,001 to \$60,000	Income Over \$60,000	Income Unreported	Total
Allegan	93	72	10	3	2	1	0	181
AuSable	43	97	0	0	0	0	57	197
Barry	44	28	2	1	3	2	0	80
Bay Arenac	246	101	4	2	2	2	48	405
Berrien	192	12	0	0	1	4	1	210
Clinton Eaton Ingham	441	310	24	22	23	47	3	870
CMH for Central Michigan	692	64	16	6	8	6	9	801
Copper	76	76	5	2	2	0	0	161
Detroit	4,008	2,036	186	53	38	53	2,564	8,938
Genesee	958	364	20	13	10	7	0	1,372
Gogebic	30	35	3	1	1	5	0	75
Gratiot	43	40	5	1	3	0	1	93
Hiawatha	73	91	14	11	5	3	5	202
Huron	61	27	3	0	0	0	0	91
Ionia	53	38	3	6	3	0	0	103
Kalamazoo	981	235	28	8	3	0	598	1,853
Lapeer	251	2	6	1	0	0	2	262
Lenewee	0	0	0	0	0	0	232	232
Lifeways	136	123	13	8	2	1	40	323
Livingston	0	0	0	0	0	0	395	395
Macomb	51	1	0	2	1	3	1,660	1,718
Manistee-Benzie	62	22	1	1	2	0	2	90
Monroe	0	0	0	0	0	0	400	400
Montcalm	23	29	4	2	2	0	1	61
Muskegon	260	169	20	12	8	2	80	551
network180	543	595	45	29	25	22	0	1,259
Newaygo	23	34	7	1	3	1	3	72
North Country	242	168	11	7	3	4	119	554
Northeast	83	124	3	5	2	0	1	218
Northern Lakes	172	158	19	16	13	6	8	392
Northpointe	44	58	9	3	6	2	1	123
Oakland	3,231	183	44	23	50	85	0	3,616
Ottawa	324	84	20	8	21	9	15	481
Pathways	178	178	18	23	13	6	0	416
Pines	40	65	11	9	9	6	0	140
Saginaw	495	10	5	3	2	2	0	517
Sanilac	17	71	58	9	7	1	1	164
Shiawassee	48	83	5	0	3	2	2	143
St. Clair	472	154	28	11	13	15	163	856
St. Joseph	83	11	0	0	2	1	3	100
Summit Pointe	222	37	3	2	6	0	6	276
Tuscola	67	73	4	1	0	0	0	145
Van Buren	94	0	0	0	2	1	1	98
Washtenaw	0	0	0	0	0	0	808	808
West Michigan	55	3	1	0	1	2	45	107
Woodlands	92	19	1	0	0	1	1	114
Total	15,342	6,080	659	305	300	302	7,275	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Income
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Total Annual Household Income							
	Income Below \$10,000	Income \$10,001 to \$20,000	Income \$20,001 to \$30,000	Income \$30,001 to \$40,000	Income \$40,001 to \$60,000	Income Over \$60,000	Income Unreported	Total
Allegan	131	94	8	4	9	3	0	249
AuSable	8	5	0	0	1	0	8	22
Barry	30	31	0	1	1	0	0	63
Bay Arenac	167	82	5	1	0	2	14	271
Berrien	248	27	3	0	0	8	3	289
Clinton Eaton Ingham	344	369	13	11	6	5	3	751
CMH for Central Michigan	569	50	12	5	2	1	14	653
Copper	29	46	0	1	3	0	1	80
Detroit	281	88	15	3	6	1	282	676
Genesee	399	88	4	3	2	2	0	498
Gogebic	26	20	6	3	2	2	0	59
Gratiot	49	53	5	3	3	0	1	114
Hiawatha	35	39	9	1	5	1	4	94
Huron	45	41	3	2	0	1	0	92
Ionia	67	56	5	4	1	0	1	134
Kalamazoo	137	36	4	0	0	1	22	200
Lapeer	121	2	3	0	0	2	0	128
Lenewee	0	0	0	0	0	0	55	55
Lifeways	200	166	8	3	3	3	24	407
Livingston	0	0	0	0	0	0	123	123
Macomb	50	1	0	1	0	0	1,462	1,514
Manistee-Benzie	88	22	4	0	1	0	1	116
Monroe	0	0	0	0	0	0	142	142
Montcalm	28	61	5	9	6	1	1	111
Muskegon	185	163	5	0	6	3	43	405
network180	426	453	34	14	23	4	1	955
Newaygo	46	53	13	3	0	0	0	115
North Country	71	49	7	1	0	4	55	187
Northeast	48	141	5	6	0	2	1	203
Northern Lakes	213	227	15	6	6	3	2	472
Northpointe	83	102	19	16	5	6	0	231
Oakland	1,101	84	23	14	10	10	0	1,242
Ottawa	127	52	4	2	0	0	3	188
Pathways	86	95	8	7	4	0	1	201
Pines	35	72	5	8	5	1	0	126
Saginaw	407	6	3	1	2	0	0	419
Sanilac	25	42	46	10	6	2	3	134
Shiawassee	32	52	7	5	2	1	1	100
St. Clair	151	96	15	3	4	1	129	399
St. Joseph	117	21	8	2	4	0	3	155
Summit Pointe	208	33	4	1	0	0	15	261
Tuscola	21	64	2	0	1	0	0	88
Van Buren	203	0	0	1	2	0	0	206
Washtenaw	0	0	0	0	0	0	296	296
West Michigan	101	6	0	0	1	1	80	189
Woodlands	46	9	0	0	0	0	2	57
Total	6,784	3,197	335	155	132	71	2,796	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Income
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Total Annual Household Income							
	Income Below \$10,000	Income \$10,001 to \$20,000	Income \$20,001 to \$30,000	Income \$30,001 to \$40,000	Income \$40,001 to \$60,000	Income Over \$60,000	Income Unreported	Total
Allegan	15	1	0	0	0	0	0	16
AuSable	2	0	0	0	0	0	3	5
Barry	3	0	0	0	0	0	0	3
Bay Arenac	19	1	1	0	0	0	2	23
Berrien	1	0	0	0	0	0	2	3
Clinton Eaton Ingham	89	1	1	1	3	0	20	115
CMH for Central Michigan	20	3	1	0	0	0	13	37
Copper	4	0	0	0	0	0	13	17
Detroit	2	1	0	0	0	0	32	35
Genesee	383	18	4	0	0	0	0	405
Gogebic	1	0	0	0	0	0	8	9
Gratiot	2	0	0	0	0	0	11	13
Hiawatha	3	0	0	0	0	0	31	34
Huron	0	0	1	0	0	0	0	1
Ionia	6	1	0	0	0	0	1	8
Kalamazoo	32	1	0	0	0	0	37	70
Lapeer	5	0	0	0	0	0	3	8
Lenewee	0	0	0	0	0	0	1	1
Lifeways	35	6	1	0	0	0	31	73
Livingston	0	0	0	0	0	0	61	61
Macomb	0	0	0	0	0	0	26	26
Manistee-Benzie	2	1	0	0	0	0	2	5
Monroe	0	0	0	0	0	0	24	24
Montcalm	3	0	0	0	0	0	0	3
Muskegon	2	0	0	0	0	0	1	3
network180	169	53	13	3	0	0	0	238
Newaygo	0	0	0	0	0	0	0	0
North Country	13	6	1	0	0	0	30	50
Northeast	1	0	0	0	0	0	1	2
Northern Lakes	0	0	0	0	0	0	0	0
Northpointe	4	0	0	0	0	0	12	16
Oakland	66	1	1	0	1	0	0	69
Ottawa	0	0	0	0	0	0	11	11
Pathways	4	1	0	0	0	0	12	17
Pines	19	10	7	7	1	1	0	45
Saginaw	54	3	4	1	1	0	0	63
Sanilac	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0
St. Clair	4	0	0	0	0	0	4	8
St. Joseph	0	0	0	0	0	0	0	0
Summit Pointe	0	0	0	0	0	0	1	1
Tuscola	0	1	0	0	0	0	0	1
Van Buren	2	0	0	0	0	0	1	3
Washtenaw	0	0	0	0	0	0	85	85
West Michigan	0	0	0	0	0	0	0	0
Woodlands	3	0	0	0	0	0	1	4
Total	968	109	35	12	6	1	480	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Income
Persons with Unknown Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Total Annual Household Income							
	Income Below \$10,000	Income \$10,001 to \$20,000	Income \$20,001 to \$30,000	Income \$30,001 to \$40,000	Income \$40,001 to \$60,000	Income Over \$60,000	Income Unreported	Total
Allegan	0	1	0	0	0	0	0	1
AuSable	3	0	0	1	0	0	7	11
Barry	4	0	0	0	0	0	5	9
Bay Arenac	131	23	3	0	0	1	25	183
Berrien	3	1	0	0	0	0	2	6
Clinton Eaton Ingham	1	0	0	0	0	0	0	1
CMH for Central Michigan	42	12	2	1	3	0	99	159
Copper	6	2	0	0	0	0	6	14
Detroit	54	2	1	0	0	0	390	447
Genesee	88	6	2	0	0	0	0	96
Gogebic	0	0	0	0	0	0	6	6
Gratiot	0	0	0	0	0	0	0	0
Hiawatha	2	2	1	0	2	0	28	35
Huron	14	0	0	0	0	0	0	14
Ionia	0	0	0	0	0	0	0	0
Kalamazoo	63	1	0	0	0	0	60	124
Lapeer	0	0	0	0	0	0	0	0
Lenewee	0	0	0	0	0	0	98	98
Lifeways	47	18	4	0	1	2	880	952
Livingston	0	0	0	0	0	0	69	69
Macomb	4	0	0	0	0	0	79	83
Manistee-Benzie	0	0	0	0	0	0	0	0
Monroe	0	0	0	0	0	0	80	80
Montcalm	9	2	0	1	0	0	3	15
Muskegon	8	4	1	0	0	1	34	48
network180	218	84	21	6	5	5	11	350
Newaygo	0	0	0	0	0	0	0	0
North Country	21	10	4	2	0	0	65	102
Northeast	12	4	3	5	2	1	3	30
Northern Lakes	0	0	0	0	0	0	0	0
Northpointe	3	0	1	0	0	0	10	14
Oakland	1,934	36	8	5	5	6	0	1,994
Ottawa	5	7	2	1	1	1	54	71
Pathways	3	1	1	0	0	0	21	26
Pines	5	0	0	0	0	0	0	5
Saginaw	0	0	0	0	0	0	0	0
Sanilac	0	0	0	1	0	0	0	1
Shiawassee	16	4	1	0	0	0	1	22
St. Clair	1	0	0	1	0	0	1	3
St. Joseph	19	2	1	0	1	0	2	25
Summit Pointe	1	3	1	0	0	0	9	14
Tuscola	15	0	1	0	0	0	0	16
Van Buren	16	0	0	0	0	0	0	16
Washtenaw	0	0	0	0	0	0	135	135
West Michigan	0	0	0	0	0	0	0	0
Woodlands	6	2	0	0	1	2	33	44
Total	2,754	227	58	24	21	19	2,216	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Program Eligibility*
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Adoption Subsidy	Medicaid	Habilitation Supports Waiver	Medicare	SDA, SSI, or SSDI	Commercial Health Insurance	Other Public Sources	Not Eligible for Program / Plan	Unknown / Unreported
Allegan	0	789	0	0	0	74	37	242	0
AuSable	5	1,113	0	317	362	141	150	304	1
Barry	10	677	0	189	252	188	0	0	0
Bay Arenac	20	3,489	1	411	666	707	983	794	0
Berrien	20	2,244	2	909	1,290	716	0	0	0
Clinton Eaton Ingham	0	3,302	2	1,288	1,269	492	4,212	886	0
CMH for Central Michigan	0	4,250	2	1,201	0	418	137	1,556	0
Copper	1	470	0	267	338	130	31	182	0
Detroit	0	36,641	0	7,889	0	2,388	0	15,907	0
Genesee	62	6,125	1	2,012	2,092	516	696	1,260	0
Gogebic	0	224	0	89	122	28	6	70	0
Gratiot	0	772	0	124	355	92	882	201	0
Hiawatha	0	492	0	190	270	68	19	233	0
Huron	0	644	2	0	0	339	49	188	0
Ionia	0	993	0	236	491	192	1,219	480	0
Kalamazoo	0	2,716	0	0	0	1	267	35	3,168
Lapeer	7	800	0	287	277	113	49	256	0
Lenewee	0	954	1	351	0	111	0	413	0
Lifeways	0	2,914	4	1,060	0	258	77	1,649	0
Livingston	0	883	1	245	0	158	0	573	0
Macomb	0	6,076	1	2,058	22	480	117	2,809	0
Manistee-Benzie	6	742	0	217	14	206	877	147	0
Monroe	0	963	0	228	0	108	0	663	0
Montcalm	17	638	0	0	0	53	5	211	0
Muskegon	22	2,303	0	594	921	52	4	990	39
network180	78	7,614	0	2,113	2,888	396	1,035	3,385	0
Newaygo	8	1,066	0	228	469	96	1,138	338	0
North Country	12	1,630	0	576	830	518	254	747	16
Northeast	10	1,184	0	596	1,017	162	3	250	3
Northern Lakes	9	3,061	0	1,218	1,603	378	22	1,495	0
Northpointe	0	693	0	303	440	175	49	347	0
Oakland	0	8,461	1	3,826	0	1,192	258	3,992	0
Ottawa	22	1,218	1	431	563	149	156	26	1
Pathways	5	1,140	0	420	567	134	29	296	0
Pines	21	1,011	0	310	404	408	0	0	0
Saginaw	0	2,165	0	557	968	94	103	845	0
Sanilac	0	698	0	249	414	64	33	144	0
Shiawassee	2	910	2	0	0	111	304	158	0
St. Clair	12	1,900	0	636	734	166	99	583	0
St. Joseph	31	1,092	1	0	0	0	0	0	0
Summit Pointe	19	3,505	2	1,292	641	645	0	0	0
Tuscola	2	686	0	0	0	57	70	229	0
Van Buren	5	990	2	407	428	358	0	0	0
Washtenaw	0	2,262	0	869	0	449	0	1,213	0
West Michigan	0	1,217	0	398	2	247	513	0	0
Woodlands	4	343	0	0	0	22	2	59	8
Total	410	124,060	26	34,591	20,709	13,850	13,885	44,156	3,236

* Individuals can be counted in more than one eligibility group

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Program Eligibility*
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Adoption Subsidy	Medicaid	Habilitation Supports Waiver	Medicare	SDA, SSI, or SSDI	Commercial Health Insurance	Other Public Sources	Not Eligible for Program / Plan	Unknown / Unreported
Allegan	0	172	66	0	0	32	4	0	0
AuSable	0	186	54	127	189	25	1	1	1
Barry	2	67	5	45	65	18	0	0	0
Bay Arenac	1	397	99	0	0	46	15	4	0
Berrien	0	205	52	101	112	25	0	0	0
Clinton Eaton Ingham	0	722	103	317	474	224	788	27	0
CMH for Central Michigan	0	771	318	483	0	133	3	12	0
Copper	0	154	45	97	143	31	3	3	0
Detroit	0	8,076	1,246	3,195	0	1,205	0	1,022	0
Genesee	24	1,326	333	701	1,016	241	30	12	0
Gogebic	0	70	20	36	33	13	5	0	0
Gratiot	0	90	15	57	85	12	93	0	0
Hiawatha	0	195	45	91	143	39	0	3	0
Huron	0	86	25	0	0	22	2	1	0
Ionia	0	91	12	33	84	36	98	2	0
Kalamazoo	0	1,392	237	0	0	0	5	0	1,848
Lapeer	2	254	52	171	185	55	0	5	0
Lenewee	0	221	82	144	0	39	0	5	0
Lifeways	0	312	152	161	0	49	2	7	0
Livingston	0	342	101	135	0	111	0	27	0
Macomb	0	1,628	243	713	32	519	13	69	0
Manistee-Benzie	1	85	40	64	3	10	88	1	0
Monroe	0	354	116	183	0	87	0	29	0
Montcalm	0	58	5	0	0	11	1	0	0
Muskegon	5	501	54	219	456	75	11	23	0
network180	4	1,224	115	694	1,047	174	207	14	0
Newaygo	0	69	13	33	50	13	69	0	0
North Country	7	508	170	286	485	91	8	2	2
Northeast	0	211	86	137	204	26	0	1	0
Northern Lakes	12	365	71	184	325	85	4	6	0
Northpointe	0	110	24	62	93	31	4	3	0
Oakland	0	3,240	592	1,441	0	931	3	396	0
Ottawa	12	469	55	215	385	122	8	2	0
Pathways	0	411	93	204	284	115	0	3	0
Pines	1	115	25	55	83	33	0	0	0
Saginaw	0	503	55	214	318	78	3	6	0
Sanilac	0	160	46	96	146	28	0	3	0
Shiawassee	0	134	48	0	0	26	22	3	0
St. Clair	19	844	89	261	377	137	3	14	0
St. Joseph	2	92	22	0	0	0	0	0	0
Summit Pointe	10	258	63	90	183	29	0	0	0
Tuscola	0	137	28	0	0	54	0	6	0
Van Buren	1	88	19	42	33	21	0	0	0
Washtenaw	0	765	334	444	0	158	0	30	0
West Michigan	0	102	14	57	0	12	3	0	0
Woodlands	1	109	19	0	0	9	6	3	0
Total	104	27,669	5,501	11,588	7,033	5,231	1,502	1,745	1,851

* Individuals can be counted in more that one eligibility group

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Program Eligibility*
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Adoption Subsidy	Medicaid	Habilitation Supports Waiver	Medicare	SDA, SSI, or SSDI	Commercial Health Insurance	Other Public Sources	Not Eligible for Program / Plan	Unknown / Unreported
Allegan	0	230	57	0	0	23	8	7	0
AuSable	0	22	6	10	15	2	1	0	0
Barry	1	61	3	44	51	4	0	0	0
Bay Arenac	3	261	74	2	7	23	16	7	0
Berrien	4	273	60	158	196	19	0	0	0
Clinton Eaton Ingham	0	697	110	366	426	106	727	15	0
CMH for Central Michigan	0	632	248	380	0	67	1	21	0
Copper	0	74	25	42	62	11	2	2	0
Detroit	0	567	5	168	0	106	0	82	0
Genesee	6	477	65	189	264	79	14	7	0
Gogebic	0	54	8	16	40	9	4	0	0
Gratiot	0	107	24	60	100	18	112	1	0
Hiawatha	0	90	18	42	72	12	1	1	0
Huron	0	87	25	0	0	19	1	2	0
Ionia	1	127	24	59	106	16	132	1	0
Kalamazoo	0	192	36	0	0	0	2	0	198
Lapeer	0	119	7	39	42	18	2	3	0
Lenewee	0	54	20	35	0	3	0	1	0
Lifeways	0	395	120	203	0	42	4	12	0
Livingston	0	107	17	48	0	19	0	10	0
Macomb	0	1,468	265	773	29	298	3	47	0
Manistee-Benzie	1	110	38	62	1	15	114	1	0
Monroe	0	124	22	40	0	22	0	17	0
Montcalm	4	107	25	0	0	8	4	2	0
Muskegon	6	393	99	206	361	37	2	10	0
network180	2	936	62	520	828	123	201	11	0
Newaygo	2	108	7	46	88	11	111	2	0
North Country	3	170	43	76	142	25	7	5	0
Northeast	1	199	90	155	193	12	0	1	0
Northern Lakes	5	435	85	260	402	60	19	5	0
Northpointe	0	212	61	104	177	52	2	7	0
Oakland	0	1,142	317	671	0	203	9	101	0
Ottawa	3	187	41	131	169	15	4	0	0
Pathways	0	194	44	107	151	25	1	4	0
Pines	2	107	28	56	76	11	0	0	0
Saginaw	0	412	69	228	284	33	0	6	0
Sanilac	0	125	35	65	108	18	0	10	0
Shiawassee	0	93	16	0	0	19	13	0	0
St. Clair	3	378	74	195	251	52	14	18	0
St. Joseph	3	148	20	0	0	0	0	0	0
Summit Pointe	7	248	27	103	142	22	0	0	0
Tuscola	0	86	45	0	0	46	0	2	0
Van Buren	2	186	43	80	78	28	0	0	0
Washtenaw	0	259	47	99	0	69	0	31	0
West Michigan	0	178	24	88	0	13	4	0	0
Woodlands	5	54	7	0	0	3	1	4	0
Total	64	12,685	2,586	5,926	4,861	1,816	1,536	456	198

* Individuals can be counted in more than one eligibility group

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Program Eligibility*
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Adoption Subsidy	Medicaid	Habilitation Supports Waiver	Medicare	SDA, SSI, or SSDI	Commercial Health Insurance	Other Public Sources	Not Eligible for Program / Plan	Unknown / Unreported
Allegan	0	5	0	0	0	1	0	11	0
AuSable	0	5	0	0	0	0	0	1	1
Barry	0	1	0	0	1	0	0	0	0
Bay Arenac	0	13	0	1	1	3	7	6	0
Berrien	0	2	0	0	0	0	0	0	0
Clinton Eaton Ingham	0	19	0	9	11	6	75	35	0
CMH for Central Michigan	0	18	0	5	0	1	0	19	0
Copper	0	6	0	1	1	2	0	11	0
Detroit	0	25	0	3	0	1	0	7	0
Genesee	1	127	0	34	26	11	36	204	0
Gogebic	0	5	0	0	0	1	0	5	0
Graiot	0	4	0	0	0	0	4	9	0
Hiawatha	0	9	0	2	0	2	0	21	0
Huron	0	0	0	0	0	0	0	1	0
Ionia	0	4	0	2	2	0	5	3	0
Kalamazoo	0	20	0	0	0	0	56	6	8
Lapeer	0	3	0	2	0	0	0	5	0
Lenewee	0	0	0	0	0	0	0	1	0
Lifeways	0	26	0	3	0	1	0	40	0
Livingston	0	17	0	0	0	0	0	42	0
Macomb	0	9	0	2	0	0	0	14	0
Manistee-Benzie	0	2	0	0	0	0	3	2	0
Monroe	0	7	0	1	0	0	0	16	0
Montcalm	0	2	0	0	0	0	0	1	0
Muskegon	0	3	0	0	2	0	0	0	0
network180	1	130	0	22	40	3	18	102	0
Newaygo	0	0	0	0	0	0	0	0	0
North Country	0	14	0	3	3	4	3	32	2
Northeast	0	0	0	0	0	0	0	2	0
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	0	4	0	0	3	0	0	12	0
Oakland	0	37	0	10	0	6	1	33	0
Ottawa	0	3	0	1	1	1	0	0	0
Pathways	0	3	0	0	2	0	1	11	0
Pines	0	5	0	3	6	13	0	0	0
Saginaw	0	22	0	0	0	1	2	35	0
Sanilac	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0
St. Clair	0	2	0	0	1	0	0	6	0
St. Joseph	0	0	0	0	0	0	0	0	0
Summit Pointe	0	1	0	0	0	0	0	0	0
Tuscola	0	1	0	0	0	0	0	0	0
Van Buren	0	0	0	0	1	1	0	0	0
Washtenaw	0	29	0	3	0	0	0	59	0
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	0	1	0	0	0	0	0	3	0
Total	2	584	0	107	101	58	211	755	11

* Individuals can be counted in more than one eligibility group

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

*** The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Program Eligibility*
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Adoption Subsidy	Medicaid	Habilitation Supports Waiver	Medicare	SDA, SSI, or SSDI	Commercial Health Insurance	Other Public Sources	Not Eligible for Program / Plan	Unknown / Unreported
Allegan	0	1	0	0	0	0	0	0	0
AuSable	0	6	0	0	0	1	1	6	1
Barry	0	3	0	1	0	0	0	0	0
Bay Arenac	1	97	0	1	0	31	29	62	0
Berrien	0	4	0	4	3	3	0	0	0
Clinton Eaton Ingham	0	0	0	0	0	0	1	0	0
CMH for Central Michigan	0	66	1	7	0	9	2	85	0
Copper	0	4	0	1	2	2	1	9	0
Detroit	0	241	0	42	0	9	0	175	0
Genesee	1	33	1	6	4	3	12	47	0
Gogebic	0	4	0	1	0	2	0	1	0
Gratiot	0	0	0	0	0	0	0	0	0
Hiawatha	0	9	0	3	1	2	1	23	0
Huron	0	6	0	0	0	11	11	1	0
Ionia	0	0	0	0	0	0	0	0	0
Kalamazoo	0	72	0	0	0	0	17	9	98
Lapeer	0	0	0	0	0	0	0	0	0
Lenewee	0	45	0	2	0	0	0	57	0
Lifeways	0	427	0	44	0	40	2	522	0
Livingston	0	20	0	0	0	2	0	45	0
Macomb	0	70	2	52	2	11	0	8	0
Manistee-Benzie	0	0	0	0	0	0	0	0	0
Monroe	0	41	0	2	0	6	0	37	0
Montcalm	0	11	0	0	0	8	8	2	0
Muskegon	0	17	0	2	5	1	0	8	26
network180	3	265	1	59	86	19	38	92	0
Newaygo	0	0	0	0	0	0	0	0	0
North Country	0	58	0	6	11	8	13	55	0
Northeast	0	12	0	5	10	11	0	8	0
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	0	5	0	2	2	0	0	8	0
Oakland	0	780	1	129	0	112	6	1,143	0
Ottawa	2	55	0	10	1	20	1	1	10
Pathways	0	14	0	2	0	2	0	13	0
Pines	0	4	0	0	0	0	0	0	0
Saginaw	0	0	0	0	0	0	0	0	0
Sanilac	0	0	0	1	1	1	0	0	0
Shiawassee	0	3	0	0	0	6	17	4	0
St. Clair	0	2	0	0	0	1	0	1	0
St. Joseph	0	14	0	0	0	0	0	0	0
Summit Pointe	0	11	0	5	0	1	0	0	0
Tuscola	0	0	0	0	0	16	16	0	0
Van Buren	0	15	0	1	3	2	0	0	0
Washtenaw	0	67	0	8	0	8	0	71	0
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	0	36	0	0	0	2	0	4	18
Total	7	2,518	6	396	131	350	176	2,497	153

* Individuals can be counted in more than one eligibility group

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Employment Status
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Employment Status										
	Employed Full Time	Employed Part Time	Unemployed - Looking for Work	Sheltered Workshop	In Unpaid Work	Self-Employed	Enclaves / Mobile Crews	Facility-based Activity Program	Not in Competitive Labor Force	Unknown/ Unreported	Total
Allegan	40	45	237	0	1	6	0	0	811	3	1,143
AuSable	55	78	304	0	6	0	8	0	1,021	217	1,689
Barry	100	74	380	2	0	13	0	1	618	28	1,216
Bay Arenac	185	407	1,063	65	7	10	7	4	3,208	64	5,020
Berrien	178	211	426	50	12	23	1	3	2,679	341	3,924
Clinton Eaton Ingham	226	311	1,556	14	17	31	3	59	2,938	149	5,304
CMH for Central Michigan	254	461	976	48	6	37	14	12	4,276	55	6,139
Copper	39	62	120	24	3	5	7	0	512	6	778
Detroit	1,021	1,546	11,369	66	33	66	39	40	34,814	7,705	56,699
Genesee	167	328	2,501	2	12	19	23	96	5,210	361	8,719
Gogebic	9	16	39	0	1	1	0	0	247	8	321
Gratiot	54	91	284	1	0	1	0	0	636	37	1,104
Hiawatha	58	56	115	11	3	5	6	2	520	15	791
Huron	66	109	76	2	0	1	4	0	714	7	979
Ionia	147	113	392	1	9	24	0	3	1,034	52	1,775
Kalamazoo	36	157	755	66	7	7	2	4	1,359	1,077	3,470
Lapeer	40	86	354	9	5	7	12	10	668	0	1,191
Lenawee	38	88	372	4	0	4	1	7	885	22	1,421
Lifeways	105	173	846	6	13	19	0	4	3,028	547	4,741
Livingston	79	160	548	0	1	17	0	1	756	10	1,572
Macomb	267	584	2,076	20	12	37	3	36	5,721	726	9,482
Manistee-Benzie	46	57	102	0	1	3	1	2	882	8	1,102
Monroe	57	106	682	0	3	8	0	1	820	0	1,677
Montcalm	35	51	38	0	0	3	1	0	787	6	921
Muskegon	84	175	358	10	4	10	1	1	2,476	385	3,504
network180	1,170	983	3,497	22	40	123	2	6	5,164	713	11,720
Newaygo	43	70	530	0	0	5	5	0	893	0	1,546
North Country	124	162	417	8	7	32	6	0	1,625	330	2,711
Northeast	42	109	260	0	5	5	0	0	1,253	4	1,678
Northern Lakes	195	284	1,055	6	8	42	1	0	3,376	5	4,972
Northpointe	77	105	206	18	4	7	29	0	730	14	1,190
Oakland	487	1,024	3,515	72	49	83	8	45	8,060	62	13,405
Ottawa	123	139	545	2	10	15	0	101	868	171	1,974
Pathways	52	115	345	21	7	13	10	3	927	28	1,521
Pines	213	143	607	10	7	13	2	0	886	38	1,919
Saginaw	60	84	316	12	11	9	3	15	1,999	765	3,274
Sanilac	25	56	215	8	2	3	1	2	613	0	925
Shiawassee	73	86	406	0	0	2	0	1	768	15	1,351
St. Clair	64	156	747	12	7	12	6	6	1,734	2	2,746
St. Joseph	82	71	403	4	0	4	0	0	931	3	1,498
Summit Pointe	209	304	1,457	8	45	23	14	5	2,771	186	5,022
Tuscola	29	53	103	1	0	2	0	0	824	9	1,021
Van Buren	115	125	317	11	2	1	4	0	1,159	143	1,877
Washtenaw	115	308	1,266	1	2	24	29	4	1,867	24	3,640
West Michigan	92	107	451	4	7	20	0	2	1,178	60	1,921
Woodlands	13	14	46	1	1	0	0	1	381	5	462
Total	6,789	10,043	42,673	622	370	795	253	477	114,627	14,406	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Employment Status
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Employment Status										
	Employed Full Time	Employed Part Time	Unemployed - Looking for Work	Sheltered Workshop	In Unpaid Work	Self-Employed	Enclaves / Mobile Crews	Facility-based Activity Program	Not in Competitive Labor Force	Unknown/ Unreported	Total
Allegan	1	17	15	0	30	1	0	1	116	0	181
AuSable	1	6	14	2	0	0	47	0	127	0	197
Barry	0	6	4	8	0	0	0	0	62	0	80
Bay Arenac	0	19	5	116	0	1	5	66	193	0	405
Berrien	1	16	5	9	2	0	10	30	136	1	210
Clinton Eaton Ingham	10	74	36	57	2	0	9	218	461	3	870
CMH for Central Michigan	4	56	6	278	1	3	46	35	370	2	801
Copper	0	13	4	51	2	0	4	3	84	0	161
Detroit	48	186	290	936	91	11	272	1,198	5,598	308	8,938
Genesee	2	35	69	6	1	34	106	425	687	7	1,372
Gogebic	0	4	1	21	1	0	0	0	48	0	75
Gratiot	0	8	10	0	0	1	4	1	69	0	93
Hiawatha	0	13	6	38	0	0	4	0	139	2	202
Huron	1	15	4	2	0	1	13	0	54	1	91
Ionia	0	4	2	0	5	0	0	2	90	0	103
Kalamazoo	23	66	248	104	12	13	8	64	510	805	1,853
Lapeer	0	5	3	75	1	0	30	59	89	0	262
Lenewee	0	7	6	2	0	0	1	26	188	2	232
Lifeways	0	14	8	8	3	0	1	4	277	8	323
Livingston	2	23	25	3	4	0	19	24	294	1	395
Macomb	2	74	19	105	11	5	25	389	1,082	6	1,718
Manistee-Benzie	0	7	2	0	1	5	0	1	74	0	90
Monroe	1	28	18	26	4	1	2	28	292	0	400
Montcalm	0	3	0	0	0	0	0	0	57	1	61
Muskegon	1	30	14	71	2	0	2	61	362	8	551
network180	38	73	55	220	12	6	22	165	657	11	1,259
Newaygo	0	0	2	0	0	0	0	1	69	0	72
North Country	0	26	40	80	2	8	2	7	348	41	554
Northeast	0	55	18	0	0	10	0	0	135	0	218
Northern Lakes	0	23	10	100	1	0	2	2	254	0	392
Northpointe	1	4	1	21	0	0	15	6	75	0	123
Oakland	37	302	191	350	176	26	214	407	1,913	0	3,616
Ottawa	22	26	31	60	3	0	1	59	252	27	481
Pathways	0	22	9	67	7	1	14	1	295	0	416
Pines	1	10	11	27	0	0	0	0	91	0	140
Saginaw	0	30	10	68	6	3	27	60	311	2	517
Sanilac	0	8	7	72	0	1	0	7	69	0	164
Shiawassee	0	22	1	0	0	0	0	0	120	0	143
St. Clair	2	19	15	116	1	2	6	47	648	0	856
St. Joseph	0	7	2	13	1	0	0	0	77	0	100
Summit Pointe	0	14	16	1	0	0	3	5	237	0	276
Tuscola	0	10	7	27	1	0	0	1	99	0	145
Van Buren	0	9	5	16	2	3	3	0	59	1	98
Washtenaw	9	92	61	5	11	0	72	65	493	0	808
West Michigan	2	3	1	40	0	0	0	2	59	0	107
Woodlands	1	1	1	13	0	2	0	1	95	0	114
Total	210	1,485	1,308	3,214	396	138	989	3,471	17,815	1,237	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Employment Status
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Employment Status										
	Employed Full Time	Employed Part Time	Unemployed - Looking for Work	Sheltered Workshop	In Unpaid Work	Self-Employed	Enclaves / Mobile Crews	Facility-based Activity Program	Not in Competitive Labor Force	Unknown/ Unreported	Total
Allegan	2	23	34	3	21	1	0	1	164	0	249
AuSable	0	0	1	0	1	0	3	0	16	1	22
Barry	1	1	10	5	0	0	0	1	45	0	63
Bay Arenac	3	14	15	70	0	2	2	32	131	2	271
Berrien	0	13	16	8	3	0	4	24	218	3	289
Clinton Eaton Ingham	8	60	76	65	3	0	9	166	363	1	751
CMH for Central Michigan	0	22	18	174	1	4	39	17	376	2	653
Copper	0	1	4	19	0	0	1	3	52	0	80
Detroit	5	20	55	36	1	1	16	41	469	32	676
Genesee	1	11	39	4	2	5	24	85	326	1	498
Gogebic	0	1	2	7	0	0	0	1	48	0	59
Gratiot	0	5	11	0	0	0	2	3	93	0	114
Hiawatha	0	5	4	15	0	0	3	3	64	0	94
Huron	1	16	3	0	0	2	6	1	63	0	92
Ionia	1	4	8	1	6	1	2	0	111	0	134
Kalamazoo	0	11	14	21	2	1	1	4	76	70	200
Lapeer	1	4	9	7	0	0	7	11	89	0	128
Lenewee	0	2	3	1	0	0	0	6	43	0	55
Lifeways	1	17	36	11	8	0	0	6	325	3	407
Livingston	2	15	22	0	1	0	5	2	76	0	123
Macomb	4	49	34	139	22	3	31	379	846	7	1,514
Manistee-Benzie	0	10	5	0	2	5	0	1	92	1	116
Monroe	0	4	15	1	1	0	1	4	116	0	142
Montcalm	0	2	0	0	0	0	0	0	108	1	111
Muskegon	2	19	12	58	1	2	5	54	251	1	405
network180	27	72	65	168	3	6	1	70	532	11	955
Newaygo	0	2	8	0	0	1	0	0	104	0	115
North Country	0	8	21	27	0	0	0	2	127	2	187
Northeast	0	45	16	0	0	10	0	0	132	0	203
Northern Lakes	2	37	25	127	1	0	3	0	277	0	472
Northpointe	2	6	5	44	2	0	21	20	131	0	231
Oakland	13	90	102	178	54	7	104	180	513	1	1,242
Ottawa	8	13	14	36	0	0	0	15	95	7	188
Pathways	0	6	18	32	5	1	2	3	133	1	201
Pines	1	5	15	15	0	0	0	0	90	0	126
Saginaw	0	7	12	55	4	3	15	46	271	6	419
Sanilac	1	4	11	45	0	0	1	4	68	0	134
Shiawassee	0	14	3	0	0	0	0	0	83	0	100
St. Clair	3	14	28	75	2	0	4	23	250	0	399
St. Joseph	0	10	4	19	1	0	3	0	118	0	155
Summit Pointe	1	13	27	1	3	0	6	1	207	2	261
Tuscola	0	6	2	10	0	0	0	0	70	0	88
Van Buren	0	10	12	26	2	2	11	0	143	0	206
Washtenaw	5	17	51	0	1	0	14	9	198	1	296
West Michigan	0	11	5	47	1	0	0	0	125	0	189
Woodlands	1	3	2	3	0	0	0	0	48	0	57
Total	96	722	892	1,553	154	57	346	1,218	8,276	156	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Employment Status
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Employment Status										
	Employed Full Time	Employed Part Time	Unemployed - Looking for Work	Sheltered Workshop	In Unpaid Work	Self-Employed	Enclaves / Mobile Crews	Facility-based Activity Program	Not in Competitive Labor Force	Unknown/ Unreported	Total
Allegan	0	3	8	0	0	0	0	0	5	0	16
AuSable	0	0	0	0	1	0	0	0	0	4	5
Barry	0	0	2	0	0	0	0	0	1	0	3
Bay Arenac	1	1	10	0	0	0	0	0	6	5	23
Berrien	0	0	0	0	0	0	0	0	1	2	3
Clinton Eaton Ingham	11	2	68	1	0	0	0	0	21	12	115
CMH for Central Michigan	1	5	11	0	0	2	0	0	17	1	37
Copper	5	1	2	0	0	1	0	0	8	0	17
Detroit	0	0	0	0	0	0	0	0	27	8	35
Genesee	12	23	227	0	2	1	0	0	133	7	405
Gogebic	2	0	5	0	0	0	0	0	2	0	9
Gratiot	0	0	3	0	0	0	0	0	1	9	13
Hiawatha	5	2	13	1	0	0	0	0	11	2	34
Huron	1	0	0	0	0	0	0	0	0	0	1
Ionia	0	0	4	0	0	0	0	0	2	2	8
Kalamazoo	1	3	30	1	0	0	0	0	9	26	70
Lapeer	0	0	5	0	0	0	0	0	3	0	8
Lenewee	0	0	1	0	0	0	0	0	0	0	1
Lifeways	4	2	18	0	0	1	0	0	25	23	73
Livingston	5	5	36	0	0	5	0	0	9	1	61
Macomb	0	3	6	0	0	0	0	0	5	12	26
Manistee-Benzie	1	0	1	0	0	0	0	0	3	0	5
Monroe	4	2	16	0	0	0	0	0	2	0	24
Montcalm	0	0	0	0	0	0	0	0	3	0	3
Muskegon	0	0	1	0	0	0	0	0	2	0	3
network180	22	22	102	0	0	3	0	1	83	5	238
Newaygo	0	0	0	0	0	0	0	0	0	0	0
North Country	2	7	12	0	0	2	0	0	5	22	50
Northeast	0	0	0	0	0	0	0	0	2	0	2
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0
Northpointe	4	2	4	0	0	0	0	0	6	0	16
Oakland	3	3	11	0	0	2	0	0	14	36	69
Ottawa	2	0	3	0	0	0	0	0	2	4	11
Pathways	4	1	6	0	0	0	0	0	6	0	17
Pines	13	6	18	0	0	0	0	0	6	2	45
Saginaw	5	2	8	0	0	0	0	0	4	44	63
Sanilac	0	0	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0	0	0
St. Clair	0	0	2	0	0	0	0	0	6	0	8
St. Joseph	0	0	0	0	0	0	0	0	0	0	0
Summit Pointe	0	0	0	0	0	0	0	0	1	0	1
Tuscola	0	0	0	0	0	0	0	0	1	0	1
Van Buren	0	0	2	0	0	0	0	0	1	0	3
Washtenaw	8	8	58	0	0	0	0	0	11	0	85
West Michigan	0	0	0	0	0	0	0	0	0	0	0
Woodlands	0	0	1	0	0	0	0	0	3	0	4
Total	116	103	694	3	3	17	0	1	447	227	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Employment Status
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Employment Status										
	Employed Full Time	Employed Part Time	Unemployed - Looking for Work	Sheltered Workshop	In Unpaid Work	Self-Employed	Enclaves / Mobile Crews	Facility-based Activity Program	Not in Competitive Labor Force	Unknown/ Unreported	Total
Allegan	0	0	0	0	0	0	0	0	1	0	1
AuSable	0	0	1	0	0	0	0	0	7	3	11
Barry	0	0	3	0	0	0	0	0	1	5	9
Bay Arenac	3	4	14	0	0	0	0	0	19	143	183
Berrien	0	0	0	0	0	0	0	0	4	2	6
Clinton Eaton Ingham	0	0	1	0	0	0	0	0	0	0	1
CMH for Central Michigan	7	12	16	0	3	1	0	1	63	56	159
Copper	2	2	3	0	0	1	0	0	5	1	14
Detroit	1	1	20	1	0	0	1	1	373	49	447
Genesee	2	4	32	0	0	0	2	0	20	36	96
Gogebic	0	0	0	0	0	0	0	0	5	1	6
Gratiot	0	0	0	0	0	0	0	0	0	0	0
Hiawatha	6	4	2	0	0	0	0	0	11	12	35
Huron	1	0	2	0	1	0	0	0	3	7	14
Ionia	0	0	0	0	0	0	0	0	0	0	0
Kalamazoo	7	2	35	6	0	0	0	0	29	45	124
Lapeer	0	0	0	0	0	0	0	0	0	0	0
Lenewee	1	1	24	0	0	0	0	0	12	60	98
Lifeways	1	6	17	0	0	1	0	0	40	887	952
Livingston	8	6	27	0	0	0	0	0	17	11	69
Macomb	1	1	10	2	0	0	0	14	38	17	83
Manistee-Benzie	0	0	0	0	0	0	0	0	0	0	0
Monroe	4	8	29	0	1	1	0	0	34	3	80
Montcalm	0	1	0	0	0	0	0	0	4	10	15
Muskegon	1	4	0	0	0	0	0	0	17	26	48
network180	24	16	55	0	0	1	0	0	174	80	350
Newaygo	0	0	0	0	0	0	0	0	0	0	0
North Country	4	3	16	0	0	1	0	0	39	39	102
Northeast	3	3	3	0	0	0	0	0	21	0	30
Northern Lakes	0	0	0	0	0	0	0	0	0	0	0
Northpointe	2	1	1	0	0	0	0	0	9	1	14
Oakland	26	41	124	0	1	10	0	1	244	1,547	1,994
Ottawa	2	2	8	0	0	0	0	1	18	40	71
Pathways	2	3	5	0	0	0	0	0	9	7	26
Pines	0	0	1	0	0	0	0	0	4	0	5
Saginaw	0	0	0	0	0	0	0	0	0	0	0
Sanilac	0	0	0	0	0	0	0	0	1	0	1
Shiawassee	3	1	9	0	0	0	0	0	3	6	22
St. Clair	0	1	1	0	0	0	0	0	1	0	3
St. Joseph	3	0	8	0	0	0	0	0	14	0	25
Summit Pointe	0	0	0	0	0	0	0	0	6	8	14
Tuscola	6	1	2	0	0	0	0	0	0	7	16
Van Buren	0	0	2	0	1	0	0	0	13	0	16
Washtenaw	5	15	58	0	0	0	0	0	40	17	135
West Michigan	0	0	0	0	0	0	0	0	0	0	0
Woodlands	1	2	1	0	0	0	0	0	35	5	44
Total	126	145	530	9	7	16	3	18	1,334	3,131	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Education
Persons with Mental Illness
Fiscal Year 2012
State of Michigan

CMHSP	Education								
	Completed Less than High School	Completed High School or More	In School - K - 12	In Training Program	In Special Education	Attended or Attending Undergraduate College	College Graduate	Unreported	Total
Allegan	180	391	270	0	184	47	4	67	1,143
AuSable	191	549	582	9	12	83	47	216	1,689
Barry	166	509	259	4	4	180	57	37	1,216
Bay Arenac	1,123	1,926	979	11	73	678	137	93	5,020
Berrien	724	1,343	867	6	13	484	150	337	3,924
Clinton Eaton Ingham	998	1,556	1,003	14	55	947	352	379	5,304
CMH for Central Michigan	1,755	1,702	1,396	17	83	756	263	167	6,139
Copper	82	318	122	0	11	106	78	61	778
Detroit	8,796	7,368	8,717	63	300	3,932	739	26,784	56,699
Genesee	2,033	3,139	1,360	6	86	1,140	160	795	8,719
Gogebic	44	128	68	1	1	38	17	24	321
Gratiot	111	337	393	4	3	157	27	72	1,104
Hiawatha	119	228	175	1	14	126	38	90	791
Huron	192	450	190	1	17	92	28	9	979
Ionia	312	635	347	4	5	288	77	107	1,775
Kalamazoo	447	904	537	8	67	342	132	1,033	3,470
Lapeer	156	425	208	7	84	250	59	2	1,191
Lenewee	248	615	310	3	13	170	39	23	1,421
Lifeways	955	1,567	706	10	42	671	163	627	4,741
Livingston	188	570	415	11	32	224	110	22	1,572
Macomb	1,811	3,478	1,468	35	163	1,203	517	807	9,482
Manistee-Benzie	142	260	316	3	0	197	47	137	1,102
Monroe	375	720	348	5	24	171	32	2	1,677
Montcalm	127	408	335	1	1	37	4	8	921
Muskegon	551	970	640	3	132	589	94	525	3,504
network180	2,054	3,763	2,866	23	219	1,649	681	465	11,720
Newaygo	268	659	386	2	5	162	16	48	1,546
North Country	336	922	725	6	11	260	142	309	2,711
Northeast	305	629	285	2	21	315	110	11	1,678
Northern Lakes	692	1,539	996	19	34	781	286	625	4,972
Northpointe	135	471	229	1	17	160	60	117	1,190
Oakland	2,571	4,783	1,421	30	424	2,800	1,143	233	13,405
Ottawa	283	765	390	18	48	183	136	151	1,974
Pathways	209	482	319	1	9	304	77	120	1,521
Pines	332	729	420	3	8	247	135	45	1,919
Saginaw	569	819	558	10	54	114	63	1,087	3,274
Sanilac	152	410	139	2	58	121	36	7	925
Shiawassee	202	386	372	4	7	232	62	86	1,351
St. Clair	526	1,053	454	5	143	415	135	15	2,746
St. Joseph	268	499	390	0	13	189	37	102	1,498
Summit Pointe	861	1,641	1,309	25	86	569	343	188	5,022
Tuscola	169	430	248	0	18	123	23	10	1,021
Van Buren	330	542	358	41	14	320	129	143	1,877
Washtenaw	564	1,177	495	22	67	917	315	83	3,640
West Michigan	307	612	403	7	27	187	97	281	1,921
Woodlands	82	185	129	0	6	28	7	25	462
Total	33,041	52,992	34,903	448	2,708	22,984	7,404	36,575	191,055

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Education
Persons with Developmental Disabilities
Fiscal Year 2012
State of Michigan

CMHSP	Education								
	Completed Less than High School	Completed High School or More	In School - K - 12	In Training Program	In Special Education	Attended or Attending Undergraduate College	College Graduate	Unreported	Total
Allegan	45	92	13	0	0	0	30	1	181
AuSable	58	107	7	0	23	1	0	1	197
Barry	15	36	4	2	22	0	0	1	80
Bay Arenac	127	140	32	6	94	2	2	2	405
Berrien	20	109	44	3	30	1	1	2	210
Clinton Eaton Ingham	114	338	35	2	256	2	0	123	870
CMH for Central Michigan	201	336	41	10	158	1	4	50	801
Copper	32	85	5	0	34	1	0	4	161
Detroit	984	2,851	1,168	402	1,256	63	20	2,194	8,938
Genesee	447	423	198	9	227	12	3	53	1,372
Gogebic	28	16	4	0	24	0	0	3	75
Graiot	13	45	12	0	5	1	0	17	93
Hiawatha	32	87	22	1	35	3	0	22	202
Huron	38	30	7	0	16	0	0	0	91
Ionia	17	37	28	0	14	2	0	5	103
Kalamazoo	317	337	183	4	195	83	12	722	1,853
Lapeer	56	142	1	2	58	2	0	1	262
Lenewee	38	138	9	0	45	0	0	2	232
Lifeways	58	156	28	4	57	1	0	19	323
Livingston	65	131	49	10	131	3	0	6	395
Macomb	202	652	56	56	684	22	6	40	1,718
Manistee-Benzie	22	48	1	0	5	1	2	11	90
Monroe	75	176	19	4	124	1	1	0	400
Montcalm	10	33	13	0	3	1	0	1	61
Muskegon	75	230	63	3	163	4	2	11	551
network180	81	580	14	150	347	6	0	81	1,259
Newaygo	12	38	13	0	9	0	0	0	72
North Country	152	173	40	3	134	2	0	50	554
Northeast	51	111	15	0	33	2	1	5	218
Northern Lakes	62	126	48	9	130	2	3	12	392
Northpointe	17	61	7	0	31	1	0	6	123
Oakland	346	1,536	75	24	1,511	73	25	26	3,616
Ottawa	52	201	19	13	184	6	0	6	481
Pathways	44	199	44	7	91	7	1	23	416
Pines	19	53	41	0	23	2	0	2	140
Saginaw	65	239	42	9	150	3	0	9	517
Sanilac	56	66	2	1	36	2	0	1	164
Shiawassee	62	62	9	0	10	0	0	0	143
St. Clair	297	297	26	3	226	4	1	2	856
St. Joseph	22	49	3	1	24	0	0	1	100
Summit Pointe	65	93	32	4	78	1	1	2	276
Tuscola	38	56	15	0	35	0	0	1	145
Van Buren	13	51	9	0	23	1	0	1	98
Washtenaw	80	429	34	1	228	19	10	7	808
West Michigan	22	45	9	0	22	0	0	9	107
Woodlands	36	34	14	0	28	0	0	2	114
Total	4,681	11,274	2,553	743	7,012	338	125	3,537	30,263

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Education
Persons with Dual Diagnosis
Fiscal Year 2012
State of Michigan

CMHSP	Education								
	Completed Less than High School	Completed High School or More	In School - K - 12	In Training Program	In Special Education	Attended or Attending Undergraduate College	College Graduate	Unreported	Total
Allegan	57	121	35	3	3	3	26	1	249
AuSable	8	4	8	0	0	0	0	2	22
Barry	17	26	7	1	11	0	0	1	63
Bay Arenac	86	106	27	4	44	3	1	0	271
Berrien	45	157	55	5	20	1	2	4	289
Clinton Eaton Ingham	155	328	44	1	122	20	1	80	751
CMH for Central Michigan	176	249	77	5	108	7	1	30	653
Copper	26	27	10	0	11	3	0	3	80
Detroit	75	203	92	19	92	18	1	176	676
Genesee	153	144	96	0	74	12	1	18	498
Gogebic	9	15	22	0	11	2	0	0	59
Gratiot	16	53	27	0	10	1	0	7	114
Hiawatha	16	38	17	1	12	0	0	10	94
Huron	38	23	10	1	19	1	0	0	92
Ionia	23	64	14	4	8	2	0	19	134
Kalamazoo	54	35	12	1	32	3	2	61	200
Lapeer	24	33	18	0	49	3	1	0	128
Lenewee	28	18	3	0	6	0	0	0	55
Lifeways	94	178	58	0	59	3	0	15	407
Livingston	19	54	19	2	23	5	0	1	123
Macomb	324	646	74	39	373	20	4	34	1,514
Manistee-Benzie	23	50	12	1	15	0	1	14	116
Monroe	33	40	25	2	39	1	2	0	142
Montcalm	15	44	42	0	9	0	0	1	111
Muskegon	86	200	37	1	72	3	0	6	405
network180	121	291	32	180	225	11	5	90	955
Newaygo	19	54	32	1	7	1	0	1	115
North Country	43	60	43	2	28	4	0	7	187
Northeast	62	103	9	1	25	3	0	0	203
Northern Lakes	104	156	53	15	120	6	0	18	472
Northpointe	40	106	37	1	33	4	0	10	231
Oakland	241	640	49	6	255	35	9	7	1,242
Ottawa	41	103	9	5	28	1	1	0	188
Pathways	39	111	19	0	18	9	2	3	201
Pines	22	61	29	0	14	0	0	0	126
Saginaw	107	205	27	11	58	5	0	6	419
Sanilac	49	48	3	1	33	0	0	0	134
Shiawassee	29	35	23	0	11	1	1	0	100
St. Clair	83	209	17	2	80	7	1	0	399
St. Joseph	28	51	29	0	43	0	1	3	155
Summit Pointe	62	91	55	3	41	2	3	4	261
Tuscola	32	25	13	1	16	0	1	0	88
Van Buren	42	89	42	1	27	3	0	2	206
Washtenaw	56	99	54	1	59	19	5	3	296
West Michigan	58	60	21	1	30	3	1	15	189
Woodlands	14	22	7	1	9	2	1	1	57
Total	2,892	5,475	1,444	323	2,382	227	74	653	13,470

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Education
Persons with Substance Abuse Disorder
Fiscal Year 2012
State of Michigan

CMHSP	Education								
	Completed Less than High School	Completed High School or More	In School - K - 12	In Training Program	In Special Education	Attended or Attending Undergraduate College	College Graduate	Unreported	Total
Allegan	2	7	1	0	0	1	0	5	16
AuSable	1	0	0	0	0	1	0	3	5
Barry	1	1	0	0	0	1	0	0	3
Bay Arenac	3	10	0	0	0	4	1	5	23
Berrien	1	0	1	0	0	0	0	1	3
Clinton Eaton Ingham	29	57	0	0	0	13	4	12	115
CMH for Central Michigan	11	16	1	0	0	7	1	1	37
Copper	0	4	1	0	0	3	1	8	17
Detroit	0	1	1	0	0	1	0	32	35
Genesee	122	186	4	0	0	79	4	10	405
Gogebic	2	1	1	0	0	2	0	3	9
Gratiot	3	0	1	0	0	0	0	9	13
Hiawatha	6	11	1	0	0	3	1	12	34
Huron	0	1	0	0	0	0	0	0	1
Ionia	2	4	0	0	0	1	0	1	8
Kalamazoo	15	24	0	0	0	4	0	27	70
Lapeer	2	5	0	0	0	1	0	0	8
Lenewee	1	0	0	0	0	0	0	0	1
Lifeways	20	26	2	0	0	10	1	14	73
Livingston	15	26	7	0	0	9	4	0	61
Macomb	4	8	1	0	0	1	0	12	26
Manistee-Benzie	0	1	1	0	0	1	1	1	5
Monroe	4	14	1	0	0	3	1	1	24
Montcalm	2	1	0	0	0	0	0	0	3
Muskegon	2	0	0	0	0	1	0	0	3
network180	36	92	60	3	1	35	11	0	238
Newaygo	0	0	0	0	0	0	0	0	0
North Country	9	13	1	0	0	4	4	19	50
Northeast	1	1	0	0	0	0	0	0	2
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	3	3	0	0	0	0	1	9	16
Oakland	5	22	1	1	1	12	3	24	69
Ottawa	4	3	1	0	0	2	0	1	11
Pathways	2	7	0	0	0	2	2	4	17
Pines	6	24	1	0	0	9	3	2	45
Saginaw	3	8	1	0	0	0	0	51	63
Sanilac	0	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0	0
St. Clair	1	5	0	0	1	1	0	0	8
St. Joseph	0	0	0	0	0	0	0	0	0
Summit Pointe	0	1	0	0	0	0	0	0	1
Tuscola	0	0	1	0	0	0	0	0	1
Van Buren	1	2	0	0	0	0	0	0	3
Washtenaw	23	26	1	0	0	25	7	3	85
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	1	2	0	0	0	0	0	1	4
Total	343	613	91	4	3	236	50	271	1,611

* The Substance Abuse Consumers in this report represent those consumers served by the Community Mental Health System who were identified by the CMHSP as having a substance abuse disorder, but neither a developmental disability nor a mental illness.

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

Number of Persons Receiving Services from CMHSPs
by CMHSP and Education
Persons with Unknown Disability
Fiscal Year 2012
State of Michigan

CMHSP	Education								
	Completed Less than High School	Completed High School or More	In School - K - 12	In Training Program	In Special Education	Attended or Attending Undergraduat e College	College Graduate	Unreported	Total
Allegan	0	1	0	0	0	0	0	0	1
AuSable	0	2	5	1	0	0	0	3	11
Barry	0	3	1	0	0	0	0	5	9
Bay Arenac	7	17	12	0	0	4	5	138	183
Berrien	1	2	0	0	1	0	0	2	6
Clinton Eaton Ingham	0	1	0	0	0	0	0	0	1
CMH for Central Michigan	17	20	27	0	1	15	4	75	159
Copper	2	7	0	0	0	1	1	3	14
Detroit	12	21	12	0	0	8	4	390	447
Genesee	16	23	4	0	0	12	1	40	96
Gogebic	0	1	0	0	0	0	0	5	6
Gratiot	0	0	0	0	0	0	0	0	0
Hiawatha	1	5	4	0	0	2	3	20	35
Huron	0	2	0	0	0	0	0	12	14
Ionia	0	0	0	0	0	0	0	0	0
Kalamazoo	15	31	16	1	0	8	2	51	124
Lapeer	0	0	0	0	0	0	0	0	0
Lenewee	8	13	9	0	0	4	1	63	98
Lifeways	28	54	27	0	0	13	7	823	952
Livingston	6	21	13	0	0	11	0	18	69
Macomb	6	29	7	1	14	3	1	22	83
Manistee-Benzie	0	0	0	0	0	0	0	0	0
Monroe	7	39	25	0	1	5	2	1	80
Montcalm	2	1	2	0	0	0	0	10	15
Muskegon	2	9	5	0	0	2	1	29	48
network180	27	56	161	0	8	28	6	64	350
Newaygo	0	0	0	0	0	0	0	0	0
North Country	10	20	21	0	4	6	3	38	102
Northeast	3	12	7	0	0	4	4	0	30
Northern Lakes	0	0	0	0	0	0	0	0	0
Northpointe	1	3	0	1	0	0	0	9	14
Oakland	193	358	135	3	31	214	68	992	1,994
Ottawa	5	11	11	0	4	2	0	38	71
Pathways	1	3	3	0	0	3	1	15	26
Pines	2	1	2	0	0	0	0	0	5
Saginaw	0	0	0	0	0	0	0	0	0
Sanilac	0	1	0	0	0	0	0	0	1
Shiawassee	3	2	2	1	1	5	2	6	22
St. Clair	1	1	1	0	0	0	0	0	3
St. Joseph	5	4	10	0	0	2	1	3	25
Summit Pointe	3	1	0	0	0	1	0	9	14
Tuscola	1	1	1	0	0	0	0	13	16
Van Buren	0	3	7	0	1	0	0	5	16
Washtenaw	19	33	23	0	1	22	8	29	135
West Michigan	0	0	0	0	0	0	0	0	0
Woodlands	2	8	26	0	0	2	0	6	44
Total	406	820	579	8	67	377	125	2,937	5,319

This information is taken from the Quality Improvement data submitted to the DCH data warehouse.

CMHSP Client Level Encounter Data
Primary Diagnosis Breakdown
Fiscal Year 2011-2012
State of Michigan

Primary Diagnosis	Total Served	Percentage
Major Depression	31,067	12.79%
Bipolar Disorder	26,023	10.71%
Intellectual Disability	21,500	8.85%
Other Psychotic	18,062	7.44%
Attention Deficit and Disruptive Behavior	17,859	7.35%
Anxiety Disorder	14,135	5.82%
Mood disorder NOS	14,054	5.79%
Deferred	12,787	5.26%
Depressive Disorder NOS	12,733	5.24%
Schizophrenia	11,136	4.58%
Adjustment Disorders	9,844	4.05%
Substance Abuse Related	8,878	3.66%
Personality Disorders Axis II	6,901	2.84%
Pervasive Developmental Disorder	5,499	2.26%
Dysthymic Disorder	2,838	1.17%
Panic & Obsessive Compulsive Disorder	2,590	1.07%
Other Disorders from Infancy/Childhood	2,089	0.86%
Impulse Control Disorders	1,850	0.76%
Delirium, Dementia and Amnestic and Other Cognitive Disorders	1,342	0.55%
Motor Skills Disorder	560	0.23%
Unspecified Mental Disorder	289	0.12%
Mental Disorder Due to a General Medical Condition	200	0.08%
Communication Disorder	199	0.08%
Eating Disorder	125	0.05%
Elimination Disorders	108	0.04%
Somatoform Disorder	106	0.04%
Learning Disorder	88	0.04%
Sleep Disorders	81	0.03%
Tic Disorders	78	0.03%
Dissociative Disorder	76	0.03%
Sexual and Gender Identity Disorder	76	0.03%
Feeding Eating Disorders of Infancy	45	0.02%
Factitious Disorder	7	0.00%
Other Conditions	4	0.00%
V-Code Diagnosis	13,386	5.51%
Diagnosis Code Not Recognized	6,269	2.58%
Total	242,884	100.00%

SECTION 404 (2)(b)
PER CAPITA EXPENDITURES
FY 2012

Statewide & CMHSP Specific

Per Capita and Per Person Served CMHSP Expenditures by CMHSP

Adults with Mental Illness

State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMHSP	Cost	2011 Adult Population	Cost Per Capita	Total MI-A Served	Cost Per Person Served
Allegan	\$5,745,726	82,522	\$69.63	970	\$5,923.43
AuSable Valley	\$4,974,299	45,367	\$109.65	1,411	\$3,525.37
Barry	\$3,089,846	44,777	\$69.01	1,033	\$2,991.14
Bay-Arenac	\$17,248,910	96,392	\$178.95	4,315	\$3,997.43
Berrien	\$21,884,793	120,731	\$181.27	3,416	\$6,406.56
Clinton Eaton Ingham	\$30,114,450	365,375	\$82.42	4,432	\$6,794.78
CMH for Central Michigan	\$25,370,888	220,869	\$114.87	5,160	\$4,916.84
Copper Country	\$4,995,540	43,661	\$114.42	686	\$7,282.13
Detroit-Wayne	\$178,524,592	1,353,555	\$131.89	44,933	\$3,973.13
Genesee	\$43,534,858	318,351	\$136.75	8,755	\$4,972.57
Gogebic	\$1,900,376	13,612	\$139.61	278	\$6,835.88
Gratiot	\$2,978,111	33,212	\$89.67	2,898	\$1,027.64
Hiawatha	\$4,908,457	46,907	\$104.64	706	\$6,952.49
Huron	\$4,245,330	26,073	\$162.82	854	\$4,971.11
Ionia	\$4,773,608	48,546	\$98.33	1,438	\$3,319.62
Kalamazoo	\$26,125,407	196,167	\$133.18	3,438	\$7,599.01
Lapeer	\$5,886,187	67,307	\$87.45	970	\$6,068.23
Lenawee	\$5,798,636	76,824	\$75.48	1,246	\$4,653.80
Lifeways	\$23,420,591	159,015	\$147.29	5,599	\$4,183.00
Livingston	\$6,003,168	136,683	\$43.92	1,322	\$4,540.97
Macomb	\$59,127,145	651,407	\$90.77	8,213	\$7,199.21
Manistee-Benzie	\$3,878,585	34,002	\$114.07	793	\$4,891.03
Monroe	\$6,913,198	115,695	\$59.75	1,443	\$4,790.85
Montcalm	\$3,287,005	48,265	\$68.10	689	\$4,770.69
Muskegon	\$17,767,481	129,530	\$137.17	2,943	\$6,037.20
Network180	\$42,954,285	450,667	\$95.31	9,398	\$4,570.58
Newaygo	\$5,469,780	36,583	\$149.52	1,241	\$4,407.56
North Country	\$11,231,878	117,471	\$95.61	2,339	\$4,802.00
Northeast Michigan	\$6,919,879	51,640	\$134.00	1,707	\$4,053.82
Northern Lakes	\$16,616,507	154,904	\$107.27	4,152	\$4,002.05
Northpointe	\$5,670,122	49,567	\$114.39	999	\$5,675.80
Oakland	\$98,184,961	931,818	\$105.37	13,934	\$7,046.43
Ottawa	\$9,829,334	198,117	\$49.61	1,713	\$5,738.08
Pathways	\$10,141,638	98,147	\$103.33	1,270	\$7,985.54
Pines	\$3,561,446	34,575	\$103.01	1,629	\$2,186.28
Saginaw	\$21,055,582	153,233	\$137.41	3,430	\$6,138.65
Sanilac	\$5,620,619	32,728	\$171.74	772	\$7,280.59
Shiawassee	\$4,921,547	53,443	\$92.09	1,068	\$4,608.19
St. Clair	\$15,022,461	124,230	\$120.92	2,268	\$6,623.66
St. Joseph	\$6,931,391	45,570	\$152.10	5,590	\$1,239.96
Summit Pointe	\$19,495,864	103,093	\$189.11	3,848	\$5,066.49
Tuscola	\$3,841,338	42,736	\$89.89	847	\$4,535.23
Van Buren	\$7,808,110	56,998	\$136.99	1,502	\$5,198.48
Washtenaw	\$24,192,346	277,912	\$87.05	3,414	\$7,086.22
West Michigan	\$7,230,402	52,106	\$138.76	1,615	\$4,477.03
Woodlands	\$3,565,156	39,992	\$89.15	742	\$4,804.79
State Totals	\$842,761,835	7,580,375	\$111.18	171,419	\$4,916.39

Source: Service costs and consumer counts were obtained from the annual sub-element cost report submitted by the 46 CMHSPs for FY 2012.

2011 Population figures prepared by the Division for Vital Records and Health Statistics, Michigan Department of Community Health using Population Estimates (latest update 9/2012) released by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. <http://www.mdch.state.mi.us/pha/osr/CHI/POP/PO11CO2.htm>

Per Capita and Per Person Served CMHSP Expenditures by CMHSP

Children with Mental Illness

State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMHSP	Cost	2011 Child Population	Cost Per Capita	Total MI-C Served	Cost Per Person Served
Allegan	\$1,347,730	28,712	\$46.94	316	\$4,264.97
AuSable Valley	\$2,422,210	10,352	\$233.98	635	\$3,814.50
Barry	\$566,016	14,043	\$40.31	266	\$2,127.88
Bay-Arenac	\$4,587,289	26,367	\$173.98	1,053	\$4,356.40
Berrien	\$2,845,095	36,210	\$78.57	746	\$3,813.80
Clinton Eaton Ingham	\$10,263,610	99,763	\$102.88	1,648	\$6,227.92
CMH for Central Michigan	\$5,619,225	57,510	\$97.71	1,581	\$3,554.22
Copper Country	\$898,642	10,556	\$85.13	147	\$6,113.21
Detroit-Wayne	\$42,483,528	448,541	\$94.71	12,331	\$3,445.26
Genesee	\$9,411,545	103,729	\$90.73	1,757	\$5,356.60
Gogebic	\$454,958	2,669	\$170.46	70	\$6,499.40
Gratiot	\$1,975,371	8,933	\$221.13	1,731	\$1,141.17
Hiawatha	\$1,217,672	11,417	\$106.65	228	\$5,340.66
Huron	\$581,811	6,602	\$88.13	182	\$3,196.76
Ionia	\$1,557,029	15,433	\$100.89	490	\$3,177.61
Kalamazoo	\$8,094,066	55,907	\$144.78	1,364	\$5,934.07
Lapeer	\$1,125,897	20,775	\$54.19	276	\$4,079.34
Lenawee	\$1,100,799	22,616	\$48.67	320	\$3,440.00
Lifeways	\$652,490	47,247	\$13.81	822	\$793.78
Livingston	\$2,458,824	45,039	\$54.59	435	\$5,652.47
Macomb	\$8,812,214	190,738	\$46.20	1,799	\$4,898.40
Manistee-Benzie	\$1,383,607	8,150	\$169.77	401	\$3,450.39
Monroe	\$1,387,366	35,865	\$38.68	403	\$3,442.59
Montcalm	\$1,107,997	14,920	\$74.26	334	\$3,317.35
Muskegon	\$2,651,939	41,772	\$63.49	798	\$3,323.23
Network180	\$11,216,304	157,786	\$71.09	3,899	\$2,876.71
Newaygo	\$1,589,203	11,769	\$135.03	374	\$4,249.21
North Country	\$2,863,686	31,847	\$89.92	831	\$3,446.07
Northeast Michigan	\$1,710,472	11,354	\$150.65	450	\$3,801.05
Northern Lakes	\$3,592,918	40,961	\$87.72	1,138	\$3,157.22
Northpointe	\$986,455	12,344	\$79.91	258	\$3,823.47
Oakland	\$14,530,201	278,327	\$52.21	2,471	\$5,880.29
Ottawa	\$1,689,854	68,183	\$24.78	479	\$3,527.88
Pathways	\$1,631,353	22,749	\$71.71	356	\$4,582.45
Pines	\$546,864	10,622	\$51.48	408	\$1,340.35
Saginaw	\$4,036,394	45,855	\$88.03	755	\$5,346.22
Sanilac	\$811,302	9,877	\$82.14	194	\$4,181.97
Shiawassee	\$1,639,551	16,398	\$99.98	358	\$4,579.75
St. Clair	\$4,724,685	37,412	\$126.29	598	\$7,900.81
St. Joseph	\$1,644,609	15,566	\$105.65	2,437	\$674.85
Summit Pointe	\$5,957,981	32,397	\$183.91	928	\$6,420.24
Tuscola	\$1,200,385	12,686	\$94.62	235	\$5,108.02
Van Buren	\$1,615,254	19,133	\$84.42	219	\$7,375.59
Washtenaw	\$1,953,807	70,050	\$27.89	572	\$3,415.75
West Michigan	\$1,808,206	14,634	\$123.56	377	\$4,796.30
Woodlands	\$904,044	11,996	\$75.36	274	\$3,299.43
State Totals	\$181,660,459	2,295,812	\$79.13	47,744	\$3,804.89

Source: Service costs and consumer counts were obtained from the annual sub-element cost report submitted by the 46 CMHSPs for FY 2012.

2011 Population figures prepared by the Division for Vital Records and Health Statistics, Michigan Department of Community Health using Population Estimates (latest update 9/2012) released by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. <http://www.mdch.state.mi.us/pha/osr/CHI/POP/PO11CO2.htm>

Per Capita and Per Person Served CMHSP Expenditures by CMHSP

Persons with Developmental Disabilities

State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMHSP	Cost	2011 Total Population	Cost Per Capita	Total DD Served	Cost Per Person Served
Allegan	\$11,279,344	111,234	\$101.40	414	\$27,244.79
AuSable Valley	\$7,848,200	55,719	\$140.85	213	\$36,846.01
Barry	\$3,127,311	58,820	\$53.17	135	\$23,165.26
Bay-Arenac	\$22,140,722	122,759	\$180.36	701	\$31,584.48
Berrien	\$8,883,016	156,941	\$56.60	294	\$30,214.34
Clinton Eaton Ingham	\$46,562,074	465,138	\$100.10	1,433	\$32,492.72
CMH for Central Michigan	\$46,070,410	278,379	\$165.50	1,487	\$30,982.12
Copper Country	\$8,746,865	54,217	\$161.33	245	\$35,701.49
Detroit-Wayne	\$211,933,807	1,802,096	\$117.60	9,532	\$22,233.93
Genesee	\$49,830,558	422,080	\$118.06	1,889	\$26,379.33
Gogebic	\$3,246,466	16,281	\$199.40	135	\$24,047.90
Gratiot	\$5,440,241	42,145	\$129.08	984	\$5,528.70
Hiawatha	\$9,031,205	58,324	\$154.85	303	\$29,805.96
Huron	\$3,983,180	32,675	\$121.90	189	\$21,075.03
Ionia	\$4,381,211	63,979	\$68.48	261	\$16,786.25
Kalamazoo	\$29,979,754	252,074	\$118.93	900	\$33,310.84
Lapeer	\$9,107,816	88,082	\$103.40	398	\$22,883.96
Lenawee	\$6,612,347	99,440	\$66.50	289	\$22,880.09
Lifeways	\$19,136,043	206,262	\$92.78	740	\$25,859.52
Livingston	\$11,539,619	181,722	\$63.50	536	\$21,529.14
Macomb	\$107,718,876	842,145	\$127.91	3,357	\$32,087.84
Manistee-Benzie	\$6,604,287	42,152	\$156.68	193	\$34,219.10
Monroe	\$15,377,754	151,560	\$101.46	555	\$27,707.67
Montcalm	\$3,631,710	63,185	\$57.48	177	\$20,518.14
Muskegon	\$25,139,215	171,302	\$146.75	962	\$26,132.24
Network180	\$54,930,972	608,453	\$90.28	2,318	\$23,697.57
Newaygo	\$3,566,744	48,352	\$73.77	183	\$19,490.40
North Country	\$22,326,669	149,318	\$149.52	756	\$29,532.63
Northeast Michigan	\$15,549,080	62,994	\$246.83	453	\$34,324.68
Northern Lakes	\$23,241,284	195,865	\$118.66	817	\$28,447.10
Northpointe	\$8,619,028	61,911	\$139.22	356	\$24,210.75
Oakland	\$150,677,367	1,210,145	\$124.51	4,704	\$32,031.75
Ottawa	\$22,004,697	266,300	\$82.63	673	\$32,696.43
Pathways	\$24,346,211	120,896	\$201.38	626	\$38,891.71
Pines	\$5,448,721	45,197	\$120.55	270	\$20,180.45
Saginaw	\$25,302,964	199,088	\$127.09	966	\$26,193.54
Sanilac	\$10,033,665	42,605	\$235.50	306	\$32,789.75
Shiawassee	\$8,294,740	69,841	\$118.77	254	\$32,656.46
St. Clair	\$30,000,305	161,642	\$185.60	1,277	\$23,492.80
St. Joseph	\$5,505,798	61,136	\$90.06	875	\$6,292.34
Summit Pointe	\$13,160,293	135,490	\$97.13	426	\$30,892.71
Tuscola	\$8,796,311	55,422	\$158.72	238	\$36,959.29
Van Buren	\$5,615,124	76,131	\$73.76	262	\$21,431.77
Washtenaw	\$34,428,997	347,962	\$98.94	1,156	\$29,782.87
West Michigan	\$9,268,674	66,740	\$138.88	301	\$30,792.94
Woodlands	\$5,409,973	51,988	\$104.06	172	\$31,453.33
State Totals	\$1,163,879,650	9,876,187	\$117.85	43,711	\$26,626.70

Source: Service costs and consumer counts were obtained from the annual sub-element cost report submitted by the 46 CMHSPs for FY 2012.

2011 Population figures prepared by the Division for Vital Records and Health Statistics, Michigan Department of Community Health using Population Estimates (latest update 9/2012) released by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. <http://www.mdch.state.mi.us/pha/osr/CHI/POP/PO11CO2.htm>

Per Capita and Per Person Served CMHSP Expenditures by CMHSP

State of Michigan

Administrative Costs

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMHSP	Cost	2011 Total Population	Cost Per Capita	Total Served	Administrative Cost Per Person Served
Allegan	\$1,632,293	111,234	\$14.67	1,700	\$960.17
AuSable Valley	\$444,238	55,719	\$7.97	2,259	\$196.65
Barry	\$122,642	58,820	\$2.09	1,434	\$85.52
Bay-Arenac	\$3,711,424	122,759	\$30.23	6,069	\$611.54
Berrien	\$806,779	156,941	\$5.14	4,456	\$181.05
Clinton Eaton Ingham	\$4,034,158	465,138	\$8.67	7,513	\$536.96
CMH for Central Michigan	\$2,909,477	278,379	\$10.45	8,228	\$353.61
Copper Country	\$293,000	54,217	\$5.40	1,078	\$271.80
Detroit-Wayne	\$52,065,285	1,802,096	\$28.89	66,796	\$779.47
Genesee	\$8,586,160	422,080	\$20.34	12,401	\$692.38
Gogebic	\$149,071	16,281	\$9.16	483	\$308.64
Gratiot	\$398,875	42,145	\$9.46	5,613	\$71.06
Hiawatha	\$310,000	58,324	\$5.32	1,237	\$250.61
Huron	\$524,643	32,675	\$16.06	1,225	\$428.28
Ionia	\$351,801	63,979	\$5.50	2,189	\$160.71
Kalamazoo	\$7,485,904	252,074	\$29.70	5,702	\$1,312.86
Lapeer	\$146,567	88,082	\$1.66	1,644	\$89.15
Lenawee	\$1,624,987	99,440	\$16.34	1,855	\$876.00
Lifeways	\$4,354,943	206,262	\$21.11	7,161	\$608.15
Livingston	\$2,677,758	181,722	\$14.74	2,293	\$1,167.80
Macomb	\$10,568,369	842,145	\$12.55	13,369	\$790.51
Manistee-Benzie	\$356,545	42,152	\$8.46	1,387	\$257.06
Monroe	\$3,074,690	151,560	\$20.29	2,401	\$1,280.59
Montcalm	\$509,959	63,185	\$8.07	1,200	\$424.97
Muskegon	\$3,389,058	171,302	\$19.78	4,703	\$720.62
Network180	\$8,213,074	608,453	\$13.50	15,615	\$525.97
Newaygo	\$473,299	48,352	\$9.79	1,798	\$263.24
North Country	\$2,558,348	149,318	\$17.13	3,926	\$651.64
Northeast Michigan	\$432,342	62,994	\$6.86	2,610	\$165.65
Northern Lakes	\$3,165,127	195,865	\$16.16	6,107	\$518.28
Northpointe	\$400,021	61,911	\$6.46	1,613	\$248.00
Oakland	\$17,001,737	1,210,145	\$14.05	21,109	\$805.43
Ottawa	\$2,095,673	266,300	\$7.87	2,865	\$731.47
Pathways	\$3,053,011	120,896	\$25.25	2,252	\$1,355.69
Pines	\$198,947	45,197	\$4.40	2,307	\$86.24
Saginaw	\$3,807,001	199,088	\$19.12	5,151	\$739.08
Sanilac	\$209,781	42,605	\$4.92	1,272	\$164.92
Shiawassee	\$590,550	69,841	\$8.46	1,680	\$351.52
St. Clair	\$3,073,998	161,642	\$19.02	4,143	\$741.97
St. Joseph	\$1,282,434	61,136	\$20.98	8,902	\$144.06
Summit Pointe	\$5,433,889	135,490	\$40.11	5,202	\$1,044.58
Tuscola	\$434,590	55,422	\$7.84	1,320	\$329.23
Van Buren	\$564,942	76,131	\$7.42	1,983	\$284.89
Washtenaw	\$6,085,602	347,962	\$17.49	5,142	\$1,183.51
West Michigan	\$881,618	66,740	\$13.21	2,293	\$384.48
Woodlands	\$980,494	51,988	\$18.86	1,188	\$825.33
State Totals	\$171,465,104	9,876,187	\$17.36	262,874	\$652.27

Source: Service costs and consumer counts were obtained from the annual sub-element cost report submitted by the 46 CMHSPs for FY 2012.

2011 Population figures prepared by the Division for Vital Records and Health Statistics, Michigan Department of Community Health using Population Estimates (latest update 9/2012) released by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. <http://www.mdch.state.mi.us/pha/osr/CHI/POP/PO11CO2.htm>

Per Capita and Per Person Served CMHSP Expenditures by CMHSP

Other Costs
State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMHSP	Cost	2011 Total Population	Cost Per Capita	Total Served	Other Costs Per Person Served
Allegan	\$1,033,256	111,234	\$9.29	1,700	\$607.80
AuSable Valley	\$1,078,236	55,719	\$19.35	2,259	\$477.31
Barry	\$704,706	58,820	\$11.98	1,434	\$491.43
Bay-Arenac	\$861,380	122,759	\$7.02	6,069	\$141.93
Berrien	\$1,222,723	156,941	\$7.79	4,456	\$274.40
Clinton Eaton Ingham	\$4,807,725	465,138	\$10.34	7,513	\$639.92
CMH for Central Michigan	\$1,959,974	278,379	\$7.04	8,228	\$238.21
Copper Country	\$1,244,977	54,217	\$22.96	1,078	\$1,154.89
Detroit-Wayne	\$20,650,100	1,802,096	\$11.46	66,796	\$309.15
Genesee	\$11,584,526	422,080	\$27.45	12,401	\$934.16
Gogebic	\$598,255	16,281	\$36.75	483	\$1,238.62
Gratiot	\$692,743	42,145	\$16.44	5,613	\$123.42
Hiawatha	\$684,230	58,324	\$11.73	1,237	\$553.14
Huron	\$262,370	32,675	\$8.03	1,225	\$214.18
Ionia	\$438,148	63,979	\$6.85	2,189	\$200.16
Kalamazoo	\$1,506,300	252,074	\$5.98	5,702	\$264.17
Lapeer	\$613,785	88,082	\$6.97	1,644	\$373.35
Lenawee	\$132,549	99,440	\$1.33	1,855	\$71.45
Lifeways	\$748,413	206,262	\$3.63	7,161	\$104.51
Livingston	\$2,175,725	181,722	\$11.97	2,293	\$948.86
Macomb	\$1,828,342	842,145	\$2.17	13,369	\$136.76
Manistee-Benzie	\$779,622	42,152	\$18.50	1,387	\$562.09
Monroe	\$1,320,691	151,560	\$8.71	2,401	\$550.06
Montcalm	\$147,690	63,185	\$2.34	1,200	\$123.07
Muskegon	\$1,889,785	171,302	\$11.03	4,703	\$401.83
Network180	\$3,041,608	608,453	\$5.00	15,615	\$194.79
Newaygo	\$363,661	48,352	\$7.52	1,798	\$202.26
North Country	\$1,149,536	149,318	\$7.70	3,926	\$292.80
Northeast Michigan	\$1,085,006	62,994	\$17.22	2,610	\$415.71
Northern Lakes	\$7,800,601	195,865	\$39.83	6,107	\$1,277.32
Northpointe	\$1,165,536	61,911	\$18.83	1,613	\$722.59
Oakland	\$5,884,028	1,210,145	\$4.86	21,109	\$278.74
Ottawa	\$1,141,812	266,300	\$4.29	2,865	\$398.54
Pathways	\$840,669	120,896	\$6.95	2,252	\$373.30
Pines	\$1,268,047	45,197	\$28.06	2,307	\$549.65
Saginaw	\$4,080,309	199,088	\$20.50	5,151	\$792.14
Sanilac	\$143,769	42,605	\$3.37	1,272	\$113.03
Shiawassee	\$171,514	69,841	\$2.46	1,680	\$102.09
St. Clair	\$5,073,752	161,642	\$31.39	4,143	\$1,224.66
St. Joseph	\$922,555	61,136	\$15.09	8,902	\$103.63
Summit Pointe	\$9,003,056	135,490	\$66.45	5,202	\$1,730.69
Tuscola	\$304,744	55,422	\$5.50	1,320	\$230.87
Van Buren	\$1,805,277	76,131	\$23.71	1,983	\$910.38
Washtenaw	\$3,441,375	347,962	\$9.89	5,142	\$669.27
West Michigan	\$480,617	66,740	\$7.20	2,293	\$209.60
Woodlands	\$618,463	51,988	\$11.90	1,188	\$520.59
State Totals	\$108,752,187	9,876,187	\$11.01	262,874	\$413.70

Source: Service costs and consumer counts were obtained from the annual sub-element cost report submitted by the 46 CMHSPs for FY 2012.

2011 Population figures prepared by the Division for Vital Records and Health Statistics, Michigan Department of Community Health using Population Estimates (latest update 9/2012) released by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. <http://www.mdch.state.mi.us/pha/osr/CHI/POP/PO11CO2.htm>

Note: Other costs include expenses for services not reported in the sub-element services such as room and board, MRS match, grant funded services, lab and pharmacy services.

Prevention Indirect Service Model

State of Michigan

SUB-ELEMENT COST REPORT: Fiscal Year 2012

QMPmeasures@michigan.gov

CMH Name	Prevention Indirect Cost	Total Service Expenditures	Percentage
Allegan	\$293,847	\$21,332,196	1.38%
AuSable Valley	\$125,232	\$16,892,415	0.74%
Barry	\$0	\$7,610,521	0.00%
Bay-Arenac	\$136,800	\$50,376,039	0.27%
Berrien	\$0	\$35,642,406	0.00%
Clinton Eaton Ingham	\$0	\$95,782,017	0.00%
CMH for Central Michigan	\$0	\$83,170,193	0.00%
Copper Country	\$47,248	\$16,226,271	0.29%
Detroit-Wayne	\$0	\$515,659,265	0.00%
Genesee	\$0	\$125,346,835	0.00%
Gogebic	\$0	\$6,349,126	0.00%
Gratiot	\$0	\$11,485,342	0.00%
Hiawatha	\$84,109	\$16,235,672	0.52%
Huron	\$24,600	\$9,621,934	0.26%
Ionia	\$0	\$11,501,798	0.00%
Kalamazoo	\$659,217	\$75,801,127	0.87%
Lapeer	\$0	\$16,880,253	0.00%
Lenawee	\$0	\$15,269,318	0.00%
Lifeways	\$0	\$49,149,869	0.00%
Livingston	\$0	\$24,855,093	0.00%
Macomb	\$870,084	\$192,696,097	0.45%
Manistee-Benzie	\$0	\$13,002,645	0.00%
Monroe	\$0	\$28,073,699	0.00%
Montcalm	\$0	\$8,684,360	0.00%
Muskegon	\$0	\$52,398,778	0.00%
Network180	\$774,670	\$123,684,384	0.63%
Newaygo	\$0	\$11,462,687	0.00%
North Country	\$812	\$41,437,150	0.00%
Northeast Michigan	\$0	\$25,696,778	0.00%
Northern Lakes	\$0	\$55,664,127	0.00%
Northpointe	\$89,450	\$16,930,613	0.53%
Oakland	\$608,474	\$292,256,169	0.21%
Ottawa	\$12,331	\$36,773,702	0.03%
Pathways	\$0	\$41,582,604	0.00%
Pines	\$0	\$11,024,026	0.00%
Saginaw	\$0	\$58,282,250	0.00%
Sanilac	\$1,666	\$16,820,802	0.01%
Shiawassee	\$173,788	\$15,791,690	1.10%
St. Clair	\$0	\$59,411,528	0.00%
St. Joseph	\$0	\$16,286,787	0.00%
Summit Pointe	\$0	\$55,163,815	0.00%
Tuscola	\$7,564	\$14,584,932	0.05%
Van Buren	\$0	\$17,408,707	0.00%
Washtenaw	\$0	\$72,056,047	0.00%
West Michigan	\$225,028	\$19,894,545	1.13%
Woodlands	\$14,631	\$11,492,761	0.13%
State Totals	\$4,149,550	\$2,513,749,378	0.17%

SECTION 404 (2) (c)
TOTAL CMHSP COSTS BY SERVICE
CATEGORY
FY 2012

Statewide CMHSP Summaries

Adults with Mental Illness (MI-A)
Children with a Serious Emotional Disturbance (MI-C)
Individuals with a Developmental Disability (DD)

Cost Information by Service Category, Client Group and Fund Source

The information in this section was provided by CMHSPs as required by the FY 2013 MDCH/CMHSP contract. Cost data were collected for the reporting period October 1, 2012 to September 30, 2013 and submitted to MDCH by February 28, 2013. The data in this section represent the total statewide CMHSP costs for each of the three consumer populations – Adults with Mental Illness (MI-A), Children with Mental Illness (MI-C), and Persons with Developmental Disability (DD) by service category.

Service Costs by Category

Departmental services were categorized into ten service groupings that are listed below. The individual services that make up each category for each of the three consumer populations are shown on pages 16-37.

State Inpatient
Community Inpatient and Crisis Services
Outpatient Services
Assertive Community Treatment
Case Management
Supports for Living
Family/Caregiver Support
Daytime Supports and Services
Other
Substance Abuse Services

State-wide Service Costs

FY12 state-wide service costs totaled \$2,188,301,943. The majority of the dollars were for supports for living services (\$760,266,581), and daytime supports and services (\$481,177,018). The total FY12 expenditures for adults with mental illness were \$842,761,835. The majority of the expenditures for these consumers were distributed across the following services - supports for living (\$180,647,058), outpatient services (\$172,692,886), case management (\$135,484,345) and community inpatient and crisis services (\$128,725,415). The total FY12 service expenditures for children with a serious emotion disorder were \$181,660,459. The large majority of these dollars were for supports for family caregivers (\$60,195,403), outpatient services (\$52,588,257) and case management (\$35,635,300). The total FY12 expenditures for consumers with a developmental disability were \$1,163,879,650. Over three-quarters of these dollars were used to provide supports for living services (\$576,169,155) and daytime supports and services (\$389,858,510). The pie charts on pages 6-9 show the dollars expended on each service grouping for each consumer population.

Service Costs by CMHSP

The distribution of service dollars for each of the ten categories is shown by CMHSP on pages 10-15 for each of the consumer populations. In general, the distribution of expenditures across these service categories is fairly similar to the state-wide figures. However, there are a few cost outliers in which some CMHSPs spent a larger percentage of their dollars on a particular service category. Several of the CMHSPs reference these consumer needs in the FY11 and FY12 needs assessment section 404(2)(g) and highlight the CMHSP initiatives to address these needs.

Adults with Mental Illness. The CMHSP percentage distributions for costs by service groupings for adults with mental illness are shown on pages 10-11. In general, the distribution of dollars across the service categories is fairly similar across the CMHSPs with only a few cost outliers. As an example, the percentage of MI-A dollars that CMHSPs spent on Assertive Community Treatment (ACT) was not very much different from the state-wide average of 6.64%. However, Huron CMHSP spent a larger percentage of their MI-A dollars on ACT (22.7%) than did the other CMHSPs. Also, Gratiot CMHSP was an outlier on the percentage of dollars spent on case management (Gratiot: 31.25%, State: 16.08%). Berrien CMHSP devoted a larger percentage of their dollars on supports for living (Berrien: 48.95%, State: 21.44%) than did other CMHSPs. Network180 was an outlier on the percentage of dollars spent on community inpatient and crisis services (network180: 31.03%, State: 15.27%). Network180 notes in the needs assessment section 404(2)(g) that for FY12 psychiatric capacity has been added by hiring additional doctors and through the expanded use of telepsychiatry. In addition, network180 is partnering with Pine Rest to provide psychiatric training for MSU medical students.

Lifeways, Ionia and Huron CMHSPs were outliers on the percentage of MI-A dollars spent on family and caregiver support (Lifeways: 10.28%, Ionia: 7.25% and Huron: 5.27%, State: 1.26%). In the FY2011 needs assessment section 404(2)(g), Ionia notes that they have used grant monies and partnered with the local Commission on Aging, the Alzheimer's Association and the Area Agency on Aging, to increase outreach, support & service coordination, and caregiver support to meet the needs of an increasing number of consumers diagnosed with Alzheimer's Disease.

Most CMHSPs did not spend their dollars on substance abuse services for adults with mental illness. However, seven CMHSPs appear as outliers since they spent some dollars on these services – Detroit/Wayne, Genesee, Lifeways, Muskegon, network180, Oakland, Saginaw, St. Clair and St. Joseph.

In the FY11 needs assessment section 404(2)(g), Saginaw CMHSP notes that consumers diagnosed with co-occurring disorders were identified as an underserved group in Saginaw's annual community stakeholder survey. Saginaw is addressing this need through work force development supported by the Systems of Care project. The SCCMHA Improving Practices Leadership Team has a comprehensive agenda of work to expand evidence-based practices to all populations served in the network. Huron Behavioral Health notes that they were no longer

able to provide Substance Use Disorder treatment although there is a high perceived need for these services. Huron has worked with the Coordinating Agency to transition these services to a local private substance abuse provider in an effort to be sure that Huron County still has access to Substance Use Disorder treatment.

Children with a Serious Emotional Disturbance. The CMHSP percentage distributions for costs by service groupings for children with an emotional disturbance (MI-C) are shown on pages 12-13. While the distribution of dollars for most of the children's service categories is fairly similar across the CMHSPs, there are a few more outliers and variations in the costs for children's service than there are for the adult services. Four CMHSPs appear as outliers in their expenditures for state inpatient stays – Woodlands CMHSP (26.41%), Copper County CMHSP (12.84%), St. Joseph CMHSP (8.25%) and Hiawatha CMHSP (6.80%). The state-wide percentage for percent of expenditures on state inpatient stays for children with emotional disturbance was only 1.81%. In their needs assessment, Woodlands outlines plans for increased psychiatric capacity. Copper notes that community stakeholders voiced the need for increased mental health services for children ages 0-18 including homebased and outpatient. Copper will continue these services to the extent that budget restrictions will allow. Macomb CMHSP, Barry CMHSP and Pines CMHSP are outliers on the percentage spent on community inpatient and crisis services (Macomb: 38.01%, Barry: 33.26%, Pines: 23.90%, State: 11.07%). In the needs assessment section 404(2)(g), Barry indicated that there has been an increase in demand for psychiatric availability. Barry is working with affiliates to fulfill needs. Pines CMHSP determined through a stakeholder survey that children's mental health needs have become more acute with an increase in behaviors. To address this, Pines is focusing on staff development in evidence-based practices, family support and trauma-based therapy.

Lifeways CMHSP spends a larger percentage of children's service dollars on outpatient services than did the other CMHSPs (Lifeways: 84.76%, State: 28.95%) and Van Buren spends a large percentage of dollars on case management (Van Buren: 54.01%, State: 19.62%). Many CMHSPs spent less than one percent of their MI-C dollars on supports for living with the state-wide average at 1.90%. However, nine CMHSPs appear as outliers as they spent three percent or more of their MI-C dollars on supports for living for children – Macomb (13.28%), Copper County (13.16%), North Country (12.36%), Northeast (8.37%), Woodlands (6.82%), Northpointe (6.77%), Pathways (5.42%), network180 (3.92%) and St. Clair (3.62%). In the needs assessment section for 404(2)(g) North Country notes the increased skill level required for Child Foster Care providers to meet the needs of children with serious challenging behaviors. To address this, North Country is collaborating with DHS to identify placements at risk of relocation and developing a curriculum of gentle teaching, trauma-informed care and motivational interviewing.

Northeast CMHSP notes that there is currently a lack of local placement options to meet the needs of children and families who need specialized foster care. In response to this, Northeast is engaged in discussions with the local DHS, Probate Court and Child and Family Services of Northeast Michigan to continue working toward the development of an Intensive Treatment Foster Care Home. network180 continues to partner with the Coalition to End Homelessness and other housing providers to provide outreach, mental health care and housing assistance for children and the families who are homeless.

Five CMHSPs are outliers in the percentage of dollars spent on daytime supports and services for children - St. Joseph (17.14%), Kalamazoo (10.60%), Gratiot (10.25%), Pines (9.44%) and Northeast Michigan (9.11%). The state-wide average for children with serious emotional disturbance is 3.20%. In their needs assessment, Gratiot notes that not having public transportation in this rural county has been a barrier for access. Gratiot plans to develop additional co-located sites in defined geographical areas to serve as additional access points. Pines CMHSP notes plans to further develop staff in evidenced-based interventions that especially focus on children and family supports.

The majority of CMHSPs did not expend their dollars on substance abuse services for children with a serious emotional disturbance. However, seven CMHSPs appear as outliers since they spent some dollars on these services – Detroit/Wayne, Genesee, Muskegon, Saginaw, and St. Clair.

Consumers with a Developmental Disability. The CMHSP percentage distributions for costs by service groupings for consumers with a developmental disability are shown on pages 14-15. Several CMHSPs spent a relatively large percentage of their dollars on services that are more typically provided to consumers with mental illness. For example, four CMHSPs were outliers in the percentage of dollars spent on state psychiatric inpatient stays (Allegan, 1.11%, Monroe, 1.16%, Washtenaw, .98% and Woodlands, 1.15%). State-wide, only 0.22% of expenditures for consumers with a developmental disability were for psychiatric inpatient stays. Lifeways was an outlier in expenditures for community inpatient and crisis services (Lifeways: 1.87%, State: 0.55%). Most CMHSPs did not provide dollars for Assertive Community Treatment for consumers with a developmental disability, however, four CMHSPs are outliers in the percentage of dollars spent on ACT – Berrien (.29%), Kalamazoo (.35%), Huron (.52%), Montcalm (.66%). The state-wide average was 0.05%.

Genesee (16.94%), Ionia (16.61%) and Van Buren (15.47%) are outliers in the percentage spent on case management. The state-wide average is 10.0%. Genesee notes in their FY11 needs assessment narrative that increases in Targeted Case Management and Supports Coordination and increased use of other non-crisis and community-based services were required to more efficiently meet demand and to reduce costly inpatient utilization.

Washtenaw CMHSP (61.36%) and Monroe (57.01%) spent a larger percentage of dollars on daytime supports and services than did other CMHSPs. The state-wide average was 33.50%. In the 2011 needs assessment section 404(2)(g), Washtenaw indicates an increased need to identify provider agencies and a direct care professional work force that are well-prepared to provide community living supports (CLS) to high need consumers in community settings. To address this need, Washtenaw has begun an examination of training curricula provided to direct care workers. In addition, Washtenaw works to ensure proper care through provider monitoring, as well as a careful assessment of the consumer's daytime support needs.

Three CMHSPs were outliers on dollars spent on family caregiver supports – Ionia (8.16%), Macomb (8.40%), and Montcalm (9.18%). The state-wide average is 3.13%. For FY10, Macomb had worked with case managers and supports coordinators to explore additional

options with consumers and their families to develop non-traditional natural supports to help involve consumers more in their communities in activities valuable to them. For FY11 Macomb noted their strategic plan to move persons to smaller, less restrictive settings. Macomb notes that they plan to eliminate contracts with institutional facilities by the end of March 2012.

The majority of CMHSPs did not expend dollars on substance abuse services for individuals with a developmental disability. However, six CMHSPs appear as outliers since they spent some dollars on these services – Detroit-Wayne, Genesee, Muskegon, Saginaw, St. Clair.

Additional Details on Services Provided

The details on the number of consumers who received each service during FY11 and the cost of each service are available on the Michigan Department of Community Health web site. This information is available for each CMHSP as well as state-wide for each of the three populations. To access these detailed reports go to:

<http://michigan.gov/mdch>

Click on ‘Mental Health & Substance Abuse’ from the left-hand menu bar

Then click on ‘Mental Health & Developmental Disability’

Then click on ‘Mental Health Statistics and Reports’

Then click on ‘CMHSP Sub-element Cost Reports for Section 404’

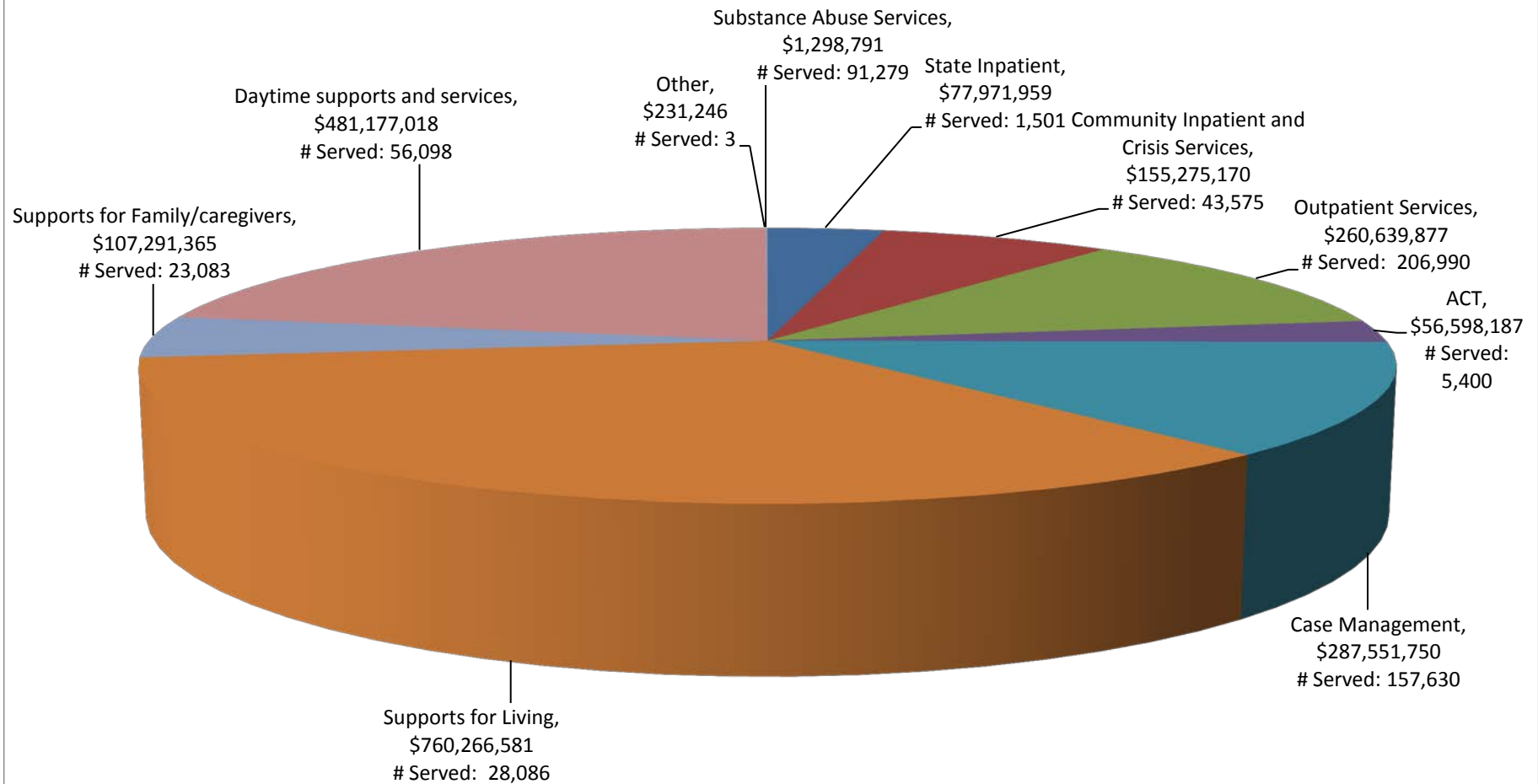
The direct link to these reports is:

http://www.michigan.gov/mdch/0,4612,7-132-2941_4868_4902-256889--,00.html

FY 12 CMHSP Services Gross Cost by Total Population

\$2,188,301,943

Served: 242,884

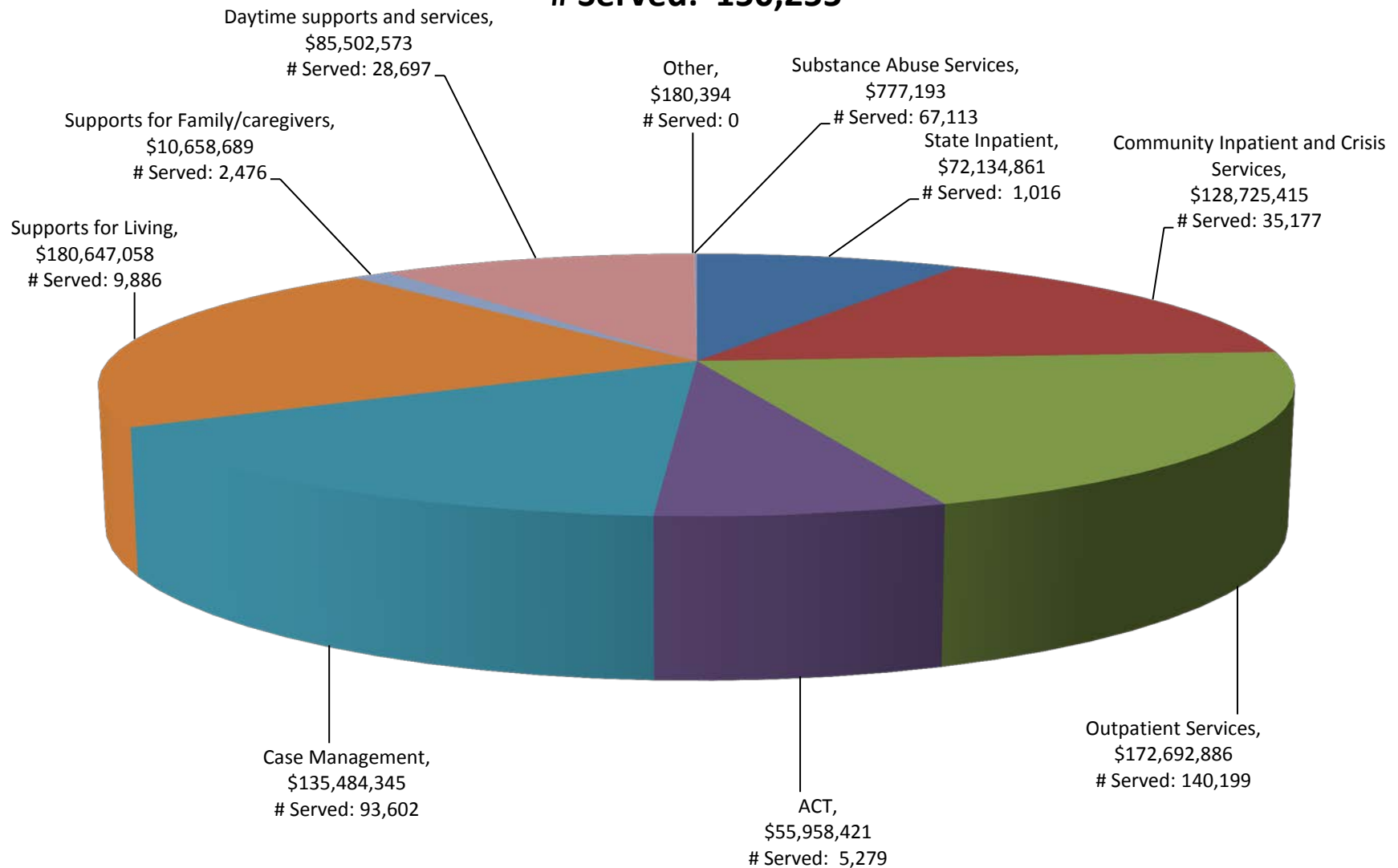


Section 404(2)(c) summarizes the service costs reported in the Sub-element Cost Report and does not include the costs for administration, "other", non-encounterable services or indirect prevention. These costs are shown by CMHSP in Section 404(2)(b).

FY 12 CMHSP Services Gross Cost by MI-A Population

\$842,761,835

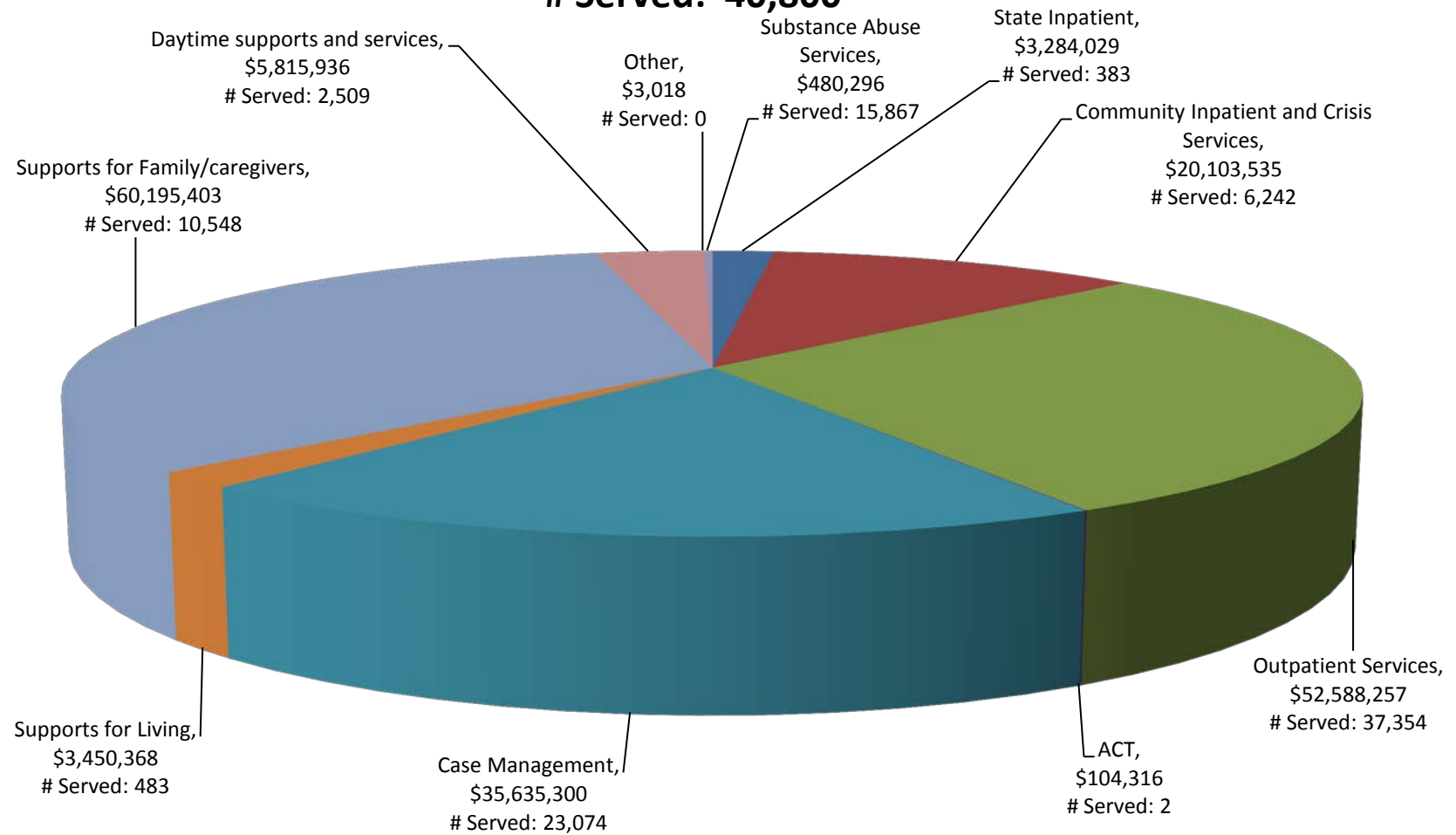
Served: 150,255



FY 12 CMHSP Services Gross Cost by MI-C Population

\$181,660,459

Served: 40,800

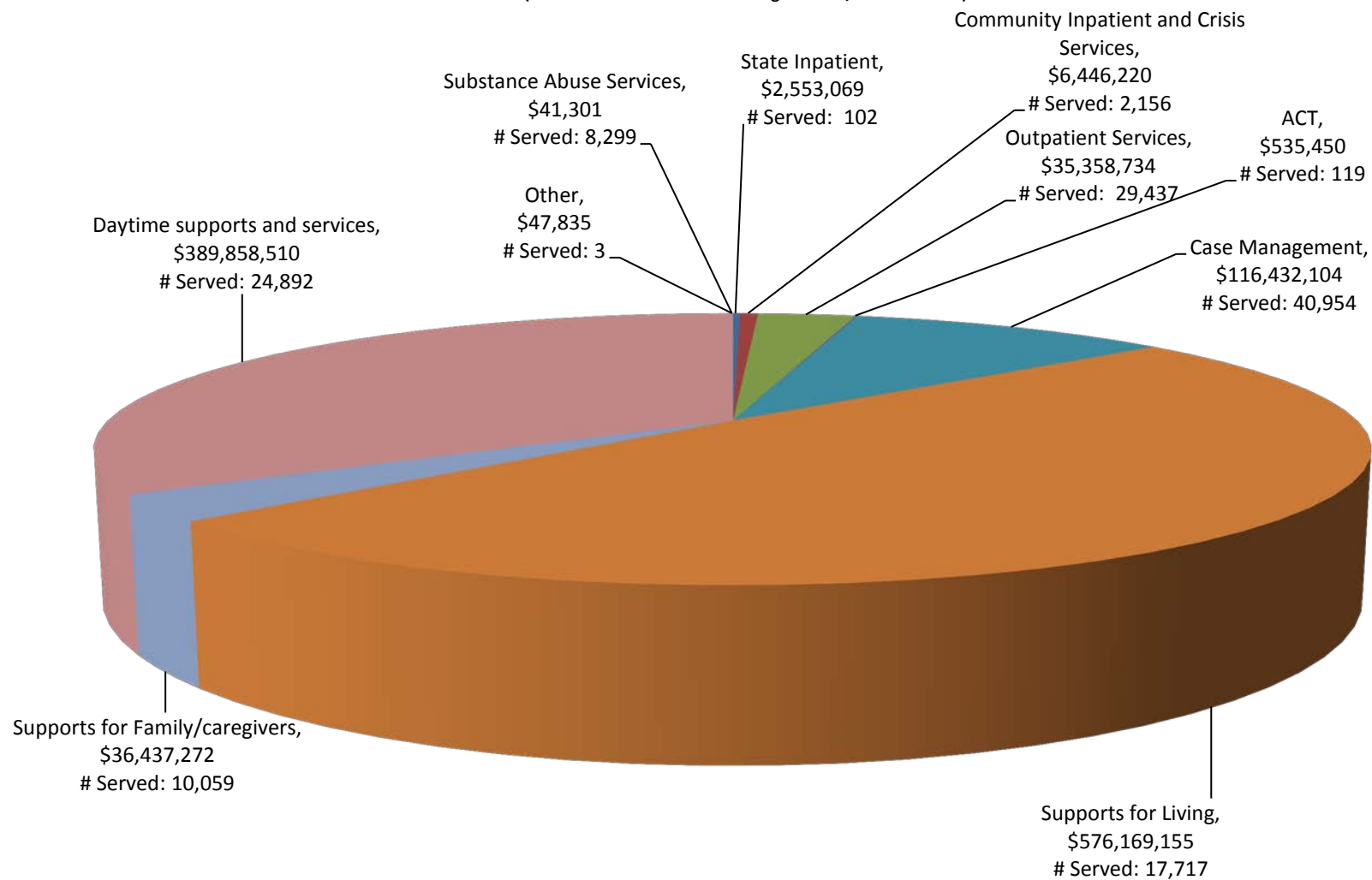


FY 12 CMHSP Services Gross Cost by DD Population

\$1,163,879,650

Served: 43,733

(Note: # served includes dual diagnosis DD/MI consumers)



FY 2012 Statewide Cost Report for Adults with Mental Illness

Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	1,016.00	162,416.00	\$72,134,861.00
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0.00	0.00	\$0.00
STATE INPATIENT							\$72,134,860.71
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	5,609.00	56,636.00	\$28,068,239.00
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	14,987.00	136,601.00	\$75,381,923.00
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of tests	262.00	304.00	\$3,140.00
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0.00	0.00	\$0.00
ECT Anesthesia	0370				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	3,164.00	4,458.00	\$1,128,913.00
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0.00	0.00	\$0.00
ECT Recovery Room	0710				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0.00	0.00	\$0.00
Crisis Observation Care	0762			Hour	0.00	0.00	\$0.00
Additional Codes-ECT Facility Charge	0901			Encounter	57.00	571.00	\$398,976.00
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of visits	0.00	0.00	\$0.00
Outpatient Partial Hospitalization	0912			Days	1,482.00	9,749.00	\$2,377,314.00
Outpatient Partial Hospitalization	0913			Days	33.00	193.00	\$121,847.00
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0.00	0.00	\$0.00
Additional Codes-ECT Anesthesia		00104		Minutes	3.00	513.00	\$44,573.00
Additional Codes-ECT Anesthesia	0901	00104		Minutes	0.00	0.00	\$0.00
Crisis Intervention		T2034		Days	0.00	0.00	\$0.00
Crisis Residential Services		H0018		Days	3,771.00	30,297.00	\$9,999,051.00
Crisis Intervention		H0030		Per Service	6.00	6.00	\$470.00
Crisis Intervention		H2011		15 Minutes	21,660.00	212,830.00	\$10,320,593.00
Crisis Intervention		H2020		Days	0.00	0.00	\$0.00
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	652.00	5,408.00	\$880,376.00
COMMUNITY INPATIENT AND CRISIS							\$128,725,414.62
Assessment-Psychiatric Assessment		90801		Encounter	43,602.00	53,991.00	\$13,974,663.00
Assessment-Psychiatric Assessment		90802		Encounter	469.00	790.00	\$86,193.00
Therapy-Individual Therapy		90804		Encounter 20-30 Min	22,909.00	57,801.00	\$4,780,569.00
Therapy-Individual Therapy		90805		Encounter 20-30 Min	935.00	2,130.00	\$170,615.00
Therapy-Individual Therapy		90806		Encounter 45-50 Min	45,134.00	246,705.00	\$29,736,127.00
Therapy-Individual Therapy		90807		Encounter 45-50 Min	518.00	1,014.00	\$138,294.00

FY 2012 Statewide Cost Report for Adults with Mental Illness

Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Therapy-Individual Therapy		90808		Encounter 75-80 Min	3,173.00	7,981.00	\$1,407,698.00
Therapy-Individual Therapy		90809		Encounter 75-80 Min	1.00	1.00	\$210.00
Therapy-Individual Therapy		90810		Encounter 20-30 Min	100.00	168.00	\$12,448.00
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90812		Encounter 45-50 Min	191.00	284.00	\$33,286.00
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90814		Encounter 75-80 Min	29.00	120.00	\$16,619.00
Therapy-Individual Therapy		90815		Encounter 75-80 Min	3.00	5.00	\$575.00
Therapy-Individual Therapy		90816		Encounter 20-30 Min	25.00	169.00	\$21,414.00
Therapy-Individual Therapy		90817		Encounter 20-30 Min	1.00	4.00	\$209.00
Therapy-Individual Therapy		90818		Encounter 45-50 Min	27.00	122.00	\$32,452.00
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90821		Encounter 75-80 Min	13.00	34.00	\$14,170.00
Therapy-Individual Therapy		90822		Encounter 75-80 Min	1.00	1.00	\$96.00
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90824		Encounter 20-30 Min	1.00	4.00	\$386.00
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90827		Encounter 45-50 Min	2.00	5.00	\$482.00
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Family Therapy		90846		Encounter	310.00	1,047.00	\$99,705.00
Therapy-Family Therapy		90847		Encounter	1,142.00	3,371.00	\$500,395.00
Therapy-Family Therapy		90849		Encounter	2.00	10.00	\$1,212.00
Therapy-Family Therapy		90849	HS	Encounter	4.00	17.00	\$5,396.00
Therapy-Group Therapy		90853		Encounter	14,671.00	131,467.00	\$8,527,747.00
Therapy-Group Therapy		90857		Encounter	33.00	473.00	\$24,067.00
Medication Review		90862		Encounter	82,996.00	326,260.00	\$41,532,069.00
Additional Codes-ECT Physician		90870		Encounter	19.00	129.00	\$22,929.00
Additional Codes-ECT Physician	0901	90870		Encounter	4.00	47.00	\$13,579.00
Assessments-Other		90887		Encounter	3,382.00	4,474.00	\$217,089.00
Speech & Language Therapy		92506		Encounter	0.00	0.00	\$0.00
Speech & Language Therapy		92507		Encounter	1.00	106.00	\$3,700.00
Speech & Language Therapy		92508		Encounter	0.00	0.00	\$0.00
Speech & Language Therapy		92526		Encounter	0.00	0.00	\$0.00
Speech & Language Therapy		92610		Encounter	1.00	1.00	\$509.00
Psychological Testing PSYCH/PHYS		96101		Per Hour	387.00	1,075.00	\$233,603.00
Psychological Testing by Technician		96102		Per Hour	79.00	147.00	\$15,993.00
Psychological Testing by Comp		96103		Per Hour	0.00	0.00	\$0.00
Assessments-Other		96105		Encounter	36.00	38.00	\$5,130.00
Assessments-Other		96110		Encounter	914.00	7,458.00	\$619,506.00
Assessments-Other		96111		Encounter	212.00	1,169.00	\$53,359.00
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	15.00	24.00	\$2,333.00
Neuropsych test by Psych/Phys		96118		Per Hour	20.00	30.00	\$8,519.00
Neuropsych test by Tech		96119		Per Hour	0.00	0.00	\$0.00
Neuropsych test Admin w/Comp		96120		Per Hour	0.00	0.00	\$0.00
Medication Administration		96372		Encounter	7,423.00	67,595.00	\$4,964,178.00
Physical Therapy		97001		Encounter	6.00	6.00	\$1,976.00
Physical Therapy		97002		Encounter	1.00	2.00	\$1,091.00
Occupational Therapy		97003		Encounter	122.00	123.00	\$44,042.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Occupational Therapy		97004		Encounter	12.00	13.00	\$5,236.00
Occupational or Physical Therapy		97110		15 Minutes	11.00	541.00	\$13,753.00
Occupational or Physical Therapy		97112		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97113		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97116		15 Minutes	1.00	12.00	\$434.00
Occupational or Physical Therapy		97124		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97140		15 Minutes	1.00	209.00	\$6,987.00
Occupational or Physical Therapy		97150		Encounter	5.00	8.00	\$144.00
Occupational or Physical Therapy		97530		15 Minutes	97.00	1,034.00	\$104,896.00
Occupational or Physical Therapy		97532		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97533		15 Minutes	12.00	168.00	\$3,646.00
Occupational or Physical Therapy		97535		15 Minutes	58.00	1,924.00	\$142,509.00
Occupational or Physical Therapy		97537		15 Minutes	1.00	16.00	\$680.00
Occupational or Physical Therapy		97542		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97750		15 Minutes	0.00	0.00	\$0.00
Occupational Therapy		97755		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97760		15 Minutes	0.00	0.00	\$0.00
C/O for Orthotic/Prosth Use		97762		15 minutes	0.00	0.00	\$0.00
Assessment or Health Services		97802		15 Minutes	115.00	562.00	\$47,908.00
Assessment or Health Services		97803		15 Minutes	123.00	1,429.00	\$76,738.00
Health Services		97804		30 Minutes	8.00	26.00	\$4,262.00
Additional Codes-Physician Services		99201		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99202		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99203		Encounter	1.00	1.00	\$353.00
Additional Codes-Physician Services		99204		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99205		Encounter	185.00	185.00	\$87,869.00
Additional Codes-Physician Services Medication Administration		99211		Encounter	1,738.00	9,902.00	\$1,016,252.00
Additional Codes-Physician Services		99212		Encounter	19.00	20.00	\$3,091.00
Additional Codes-Physician Services		99213		Encounter	86.00	92.00	\$13,229.00
Additional Codes-Physician Services		99214		Encounter	435.00	1,157.00	\$233,447.00
Additional Codes-Physician Services		99215		Encounter	144.00	151.00	\$66,632.00
Additional Codes-Physician Services		99221		30 Minutes	421.00	491.00	\$42,855.00
Additional Codes-Physician Services		99222		50 Minutes	1,690.00	1,993.00	\$302,478.00
Additional Codes-Physician Services		99223		70 Minutes	583.00	727.00	\$55,191.00
Additional Codes-Physician Services		99224		15 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99225		25 minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99226		35 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99231		15 Minutes	1,826.00	9,199.00	\$420,203.00
Additional Codes-Physician Services		99232		25 minutes	2,053.00	7,846.00	\$473,140.00
Additional Codes-Physician Services		99233		35 Minutes	933.00	3,841.00	\$222,701.00
Additional Codes-Physician Services		99241		Encounter	103.00	144.00	\$9,602.00
Additional Codes-Physician Services		99242		Encounter	277.00	291.00	\$26,320.00
Additional Codes-Physician Services		99243		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99244		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99245		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99251		Encounter	3.00	3.00	\$358.00
Additional Codes-Physician Services		99252		Encounter	410.00	491.00	\$104,590.00
Additional Codes-Physician Services		99253		Encounter	88.00	92.00	\$24,164.00
Additional Codes-Physician Services		99254		Encounter	5.00	6.00	\$461.00
Additional Codes-Physician Services		99255		Encounter	4.00	5.00	\$1,120.00
Additional Codes-Physician Services		99261		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99262		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99263		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99271		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99272		Encounter	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Additional Codes-Physician Services		99273		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99274		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99275		Encounter	0.00	0.00	\$0.00
Medication Administration		99506		Encounter	26.00	145.00	\$16,449.00
Medication Administration (Children's Waiver)		99506		Encounter	0.00	0.00	\$0.00
Medication Management		99605		15 Minutes	1,102.00	143,667.00	\$4,496,190.00
Assessment		H0002		Encounter	23,566.00	28,664.00	\$4,156,920.00
Assessment		H0031		Encounter	59,149.00	75,218.00	\$15,297,023.00
Health Services		H0034		15 Minutes	2,747.00	9,360.00	\$736,411.00
Comprehensive Medication Services - EBP only		H2010		15 minutes	1.00	4.00	\$369.00
Mental Health Therapy		H2027		15 Minutes	0.00	0.00	\$0.00
Behavior Services		H2019		15 Minutes	745.00	50,588.00	\$2,079,787.00
Behavior Services		H2019	TT	15 Minutes	365.00	34,268.00	\$586,180.00
Medication Review		M0064		Encounter Face-to-Face, generally less than 10 minutes	10,064.00	25,165.00	\$2,221,561.00
Occupational or Physical Therapy		S8990		Encounter	0.00	0.00	\$0.00
Health Services		S9445		Encounter	11,281.00	30,636.00	\$1,627,647.00
Health Services		S9446		Encounter	1,165.00	5,379.00	\$852,469.00
Health Services		S9470		Encounter	84.00	383.00	\$80,416.00
Assessment		T1001		Encounter	19,022.00	22,007.00	\$2,695,101.00
Health Services		T1002		Up to 15 min	17,591.00	96,565.00	\$6,285,190.00
Assessments		T1023		Encounter	15,594.00	21,317.00	\$9,602,550.00
Pharmacy (Drugs and Other Biologicals)					6,947.00	0.00	\$4,468,421.00
Aggregate for 'J' Codes		ALL			1,014.00	0.00	\$6,654,321.00
OUTPATIENT SERVICES							\$172,692,886.37
ASSERTIVE COMMUNITY TREATMENT (ACT)		H0039		15 Minutes	6,214.00	1,084,575.00	\$55,958,421.03
Treatment Planning		H0032		Encounter	43,956.00	67,476.00	\$9,121,352.00
Monitoring of Treatment - Clinician		H0032	TS	Encounter	4,846.00	41,514.00	\$1,190,839.00
Behavior Treatment Plan Review		H2000		Encounter	340.00	878.00	\$427,761.00
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	173.00	597.00	\$129,992.00
Wraparound		H2021		15 Minutes	105.00	5,446.00	\$438,648.00
Wraparound		H2022		Days	7.00	96.00	\$61,629.00
Wraparound (SED Waiver)		H2022	TT	Days	0.00	0.00	\$0.00
Supports Coordination/Wrap Facilitation		T1016		15 minutes	10,534.00	215,227.00	\$16,060,780.00
Targeted Case Management		T1017		15 minutes	61,097.00	1,953,301.00	\$106,395,389.00
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	1,002.00	16,875.00	\$1,657,955.00
CASE MANAGEMENT							\$135,484,345.45
Enhanced Medical Equipment-Supplies		E1399		Items	6.00	10.00	\$10,827.00
Community Living Supports in Independent living/own home		H0043		Per diem	1,318.00	243,464.00	\$19,859,378.00
Community Living Supports (Daily)		H2016		Per Diem	1,933.00	217,650.00	\$10,100,154.00
Community Living Supports (Daily)		H2016	TF	Per Diem	2,267.00	416,361.00	\$22,205,069.00
Community Living Supports (Daily)		H2016	TG	Per Diem	4,450.00	647,995.00	\$73,467,446.00
Repair/Svc DME Non-Oxygen Equipment (Children's Waiver)		K0739		15 Minutes	0.00	0.00	\$0.00
Foster Care		S5140		Days	36.00	10,672.00	\$353,623.00
Foster Care		S5145		Days	2.00	129.00	\$20,349.00
Personal Emergency Response System (PERS)		S5160		Encounter	4.00	4.00	\$2,108.00
Personal Emergency Response System (PERS)		S5161		Month	56.00	491.00	\$305,764.00
Environmental Modification		S5165		Service	2.00	3.00	\$2,164.00
Enhanced Medical Equipment-Supplies		S5199		Items	13.00	41.00	\$11,087.00
Residential Room and Board		S9976		Days	1,110.00	23,204.00	\$659,931.00
Private Duty Nursing		T1000		Up to 15 min	0.00	0.00	\$0.00
Private Duty Nursing		T1000	TD	Up to 15 min	0.00	0.00	\$0.00
Private Duty Nursing		T1000	TE	Up to 15 min	0.00	0.00	\$0.00
Personal Care in Licensed Specialized Residential Setting		T1020		Days	3,226.00	636,005.00	\$16,978,471.00
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	1,824.00	275,475.00	\$13,123,615.00

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Service Description	Revenue Code	HCPSC Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2,515.00	268,131.00	\$19,806,513.00
Enhanced Medical Supplies or Pharmacy		T1999		Items	772.00	6,330.00	\$139,610.00
Fiscal Intermediary Services		T2025		Month	212.00	1,725.00	\$172,239.00
Enhanced Medical Equipment-Supplies		T2028		Items	7.00	17.00	\$3,227.00
Enhanced Medical Equipment-Supplies		T2029		Items	6.00	18.00	\$5,245.00
Housing Assistance		T2038		Service	1,648.00	10,299.00	\$3,419,495.00
Enhanced Medical Equipment-Supplies		T2039		Items	0.00	0.00	\$0.00
Goods and Services		T5999	HK	Per Item	0.00	0.00	\$0.00
Wraparound Services		T5999		Per Item	2.00	2.00	\$744.00
SUPPORTS FOR LIVING							\$180,647,058.33
Family Training/Support EBP only		G0177		Encounter Session at least 45 min	562.00	3,904.00	\$734,646.00
Prevention Services - Direct Model		H0025		Face to Face Contact	477.00	3,223.00	\$560,721.00
Home Based Services		H0036		15 Minutes	1,127.00	102,400.00	\$6,802,507.00
Home Based Services		H0036	ST	15 Minutes	68.00	7,094.00	\$381,082.00
Respite		H0045		Days	97.00	3,340.00	\$141,684.00
Respite (Children's Waiver)		H0045	TD	Per Diem	0.00	0.00	\$0.00
Respite (Children's Waiver)		H0045	TE	Per Diem	0.00	0.00	\$0.00
Home Based Services		H2033		15 Minutes	109.00	12,085.00	\$573,489.00
Family Training - EBP		S5110		15 Minutes	173.00	2,797.00	\$137,001.00
Family Training		S5111		Encounter	231.00	1,135.00	\$197,990.00
Family Training		S5111	HA	Encounter	1.00	1.00	\$1,036.00
Family Training (SED Waiver)		S5111	HM	Encounter	11.00	117.00	\$16,272.00
Respite		S5150		15 Minutes	1.00	740.00	\$836.00
Respite		S5151		Per Diem	2.00	9.00	\$2,321.00
Respite (Children's Waiver)		S5151	TT	Per diem	0.00	0.00	\$0.00
Prevention Services - Direct Model		S9482		15 Minutes	51.00	1,754.00	\$166,015.00
Respite Care		T1005		15 Minutes	174.00	149,870.00	\$597,891.00
Respite Care		T1005	TD	15 Minutes	0.00	0.00	\$0.00
Respite Care		T1005	TE	15 Minutes	0.00	0.00	\$0.00
Respite Care (Children's Waiver)		T1005	TT	15 minutes	12.00	46,511.00	\$228,507.00
Family Psycho-Education - EBP		T1015		Encounter	289.00	630.00	\$111,621.00
Prevention Services - Direct Model		T1027		15 minutes	16.00	81.00	\$3,777.00
Prevention Services - Direct Model		T2024			0.00	0.00	\$0.00
Respite Care		T2036		Per session. One night = one session	5.00	30.00	\$1,292.00
Respite Care		T2037		Per session. One day/partial day = one session	0.00	0.00	\$0.00
FAMILY/CAREGIVER SUPPORTS							\$10,658,688.77
Transportation		A0080		Per mile	11.00	4,467.00	\$2,618.00
Transportation		A0090		Per mile	0.00	0.00	\$0.00
Transportation		A0100		Per one-way trip	124.00	187.00	\$9,051.00
Transportation		A0110		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0120		Per one-way trip	167.00	2,107.00	\$18,436.00
Transportation		A0130		Per one-way trip	358.00	412.00	\$16,457.00
Transportation		A0140		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0170			0.00	0.00	\$0.00
Additional Codes-Transportation		A0425		Per Mile	1,539.00	43,457.00	\$1,606,499.00
Additional Codes-Transportation		A0427		Refer to code descriptions.	592.00	678.00	\$150,547.00
Peer Directed and Operated Support Services		H0023		Encounter	861.00	36,267.00	\$2,213,612.00
Peer Directed and Operated Support Services		H0038		15 minutes	13,405.00	443,914.00	\$9,391,969.00
Peer Directed and Operated Support Services		NA			950.00	313.00	\$3,661,331.00
Peer Directed and Operated Support Services		H0046		Encounter	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	3,534.00	2,617,467.00	\$9,443,843.00
Community Living Supports (15 Minutes)		H2015		15 Minutes	8,220.00	6,633,395.00	\$28,278,656.00
Supported Employment Services		H2023		15 minutes	3,655.00	711,663.00	\$7,614,577.00
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	4,004.00	4,525,177.00	\$22,315,289.00
Transportation		S0209		Per Mile	1.00	316.00	\$5,132.00
Transportation		S0215		Per Mile	1.00	368.00	\$423.00
Transportation		T2001		Encounter	9.00	54.00	\$1,050.00
Transportation		T2002		Per Diem	172.00	109,949.00	\$74,594.00
Transportation		T2003		Encounter / Trip	2,169.00	31,143.00	\$698,489.00
Transportation		T2004		Encounter	0.00	0.00	\$0.00
Transportation		T2005		Encounter	0.00	0.00	\$0.00
DAYTIME SUPPORTS AND SERVICES							\$85,502,572.55
OTHER					379.00	0.00	\$180,393.93
Drug Screen for Methadone Clients Only		80100		Per Screen	519.00	622.00	\$17,024.00
Drug Screen for Methadone Clients Only		80101		Per Screen	0.00	0.00	\$0.00
Substance Abuse: Psychiatric Evaluation		90801		Encounter	49.00	50.00	\$80,238.00
Substance Abuse: Psychiatric Evaluation		90802		Encounter	1.00	2.00	\$178.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	36.00	58.00	\$4,326.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	25.00	40.00	\$4,605.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	1.00	1.00	\$154.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Psychotherapy (Individual Therapy)	0900, 0914, 0915, 0916, 0919	90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter	3.00	6.00	\$735.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter	1.00	1.00	\$143.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90857		Encounter	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIA-Cases	MIA-Units	MIA-Cost
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	38.00	38.00	\$4,640.00
Substance Abuse: Accupuncture		97810		Encounter	0.00	0.00	\$0.00
Substance Abuse: Accupuncture		97811		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99203		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99204		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99205		Encounter	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0100		Per one-way trip	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0110		Per one-way trip	14.00	15.00	\$430.00
Substance Abuse: Recovery Support Services		G0409		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Individual Assessment		H0001		Encounter	1,225.00	10,259.00	\$466,415.00
Substance Abuse: Laboratory		H0003		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		15 Minutes	70.00	1,299.00	\$47,148.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	80.00	1,109.00	\$131,765.00
Substance Abuse: Case Management		H0006		Encounter	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0906	H0015		Days	0.00	0.00	\$0.00
Substance Abuse: Residential	1002	H0018		Days	3.00	3.00	\$780.00
Substance Abuse: Residential	1002	H0019		Days	3.00	352.00	\$18,328.00
Substance Abuse: Methadone		H0020		Encounter	0.00	0.00	\$0.00
Substance Abuse: Early Intervention		H0022		Encounter	0.00	0.00	\$0.00
Substance Abuse: Pharnalological Support - Suboxane		H0033		Direct Observation Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		H0038		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Laboratory (cells now unlocked)		H0048		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment		H0050		15 Minutes	0.00	0.00	\$0.00
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Hour	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Per Diem	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		S0215		Per Mile	0.00	0.00	\$0.00
Substance Abuse Services: Residential Room and Board		S9976		Days	0.00	0.00	\$0.00
Substance Abuse: Child Sitting Services		T1009		Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		T1012		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2001		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2002		Per Diem	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2003		Encounter / Trip	13.00	26.00	\$284.00
Substance Abuse Services: Transportation		T2004		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2005		Encounter	0.00	0.00	\$0.00
SUBSTANCE ABUSE SERVICES							\$777,193.35

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	383.00	15,410.00	\$3,284,029.00
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0.00	0.00	\$0.00
STATE INPATIENT							\$3,284,029.11
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	2,292.00	18,563.00	\$10,157,847.00
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	709.00	5,356.00	\$3,534,951.00
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0.00	0.00	\$0.00
ECT Anesthesia	0370				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	2.00	2.00	\$437.00
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0.00	0.00	\$0.00
ECT Recovery Room	0710				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0.00	0.00	\$0.00
Crisis Observation Care	0762			Hour	0.00	0.00	\$0.00
Additional Codes-ECT Facility Charge	0901			Encounter	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902- 0904, 0911, 0914- 0919			# of visits	0.00	0.00	\$0.00
Outpatient Partial Hospitalization	0912			Days	1,177.00	10,234.00	\$2,860,930.00
Outpatient Partial Hospitalization	0913			Days	1.00	8.00	\$2,450.00
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0.00	0.00	\$0.00
Additional Codes-ECT Anesthesia		00104		Minutes	0.00	0.00	\$0.00
Additional Codes-ECT Anesthesia	0901	00104		Minutes	0.00	0.00	\$0.00
Crisis Intervention		T2034		Days	0.00	0.00	\$0.00
Crisis Residential Services		H0018		Days	253.00	2,016.00	\$656,921.00
Crisis Intervention		H0030		Per Service	3.00	3.00	\$235.00
Crisis Intervention		H2011		15 Minutes	5,158.00	38,792.00	\$2,744,073.00
Crisis Intervention		H2020		Days	0.00	0.00	\$0.00
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	133.00	925.00	\$145,691.00
COMMUNITY INPATIENT AND CRISIS							\$20,103,535.32
Assessment-Psychiatric Assessment		90801		Encounter	9,261.00	10,175.00	\$3,406,716.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
Assessment-Psychiatric Assessment		90802		Encounter	444.00	571.00	\$102,188.00
Therapy-Individual Therapy		90804		Encounter 20-30 Min	5,348.00	15,245.00	\$1,487,315.00
Therapy-Individual Therapy		90805		Encounter 20-30 Min	77.00	114.00	\$14,161.00
Therapy-Individual Therapy		90806		Encounter 45-50 Min	14,032.00	76,426.00	\$10,626,375.00
Therapy-Individual Therapy		90807		Encounter 45-50 Min	60.00	112.00	\$19,040.00
Therapy-Individual Therapy		90808		Encounter 75-80 Min	1,235.00	4,000.00	\$765,807.00
Therapy-Individual Therapy		90809		Encounter 75-80 Min	1.00	1.00	\$210.00
Therapy-Individual Therapy		90810		Encounter 20-30 Min	336.00	836.00	\$46,039.00
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90812		Encounter 45-50 Min	510.00	1,733.00	\$201,759.00
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90814		Encounter 75-80 Min	25.00	55.00	\$12,205.00
Therapy-Individual Therapy		90815		Encounter 75-80 Min	42.00	109.00	\$10,299.00
Therapy-Individual Therapy		90816		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90818		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90821		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90822		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90828		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90829		Encounter 75-80 Min	0.00	0.00	\$0.00
Therapy-Family Therapy		90846		Encounter	3,292.00	9,762.00	\$1,445,142.00
Therapy-Family Therapy		90847		Encounter	11,868.00	54,092.00	\$7,602,235.00
Therapy-Family Therapy		90849		Encounter	59.00	226.00	\$80,209.00
Therapy-Family Therapy		90849	HS	Encounter	49.00	303.00	\$58,991.00
Therapy-Group Therapy		90853		Encounter	1,463.00	10,131.00	\$798,911.00
Therapy-Group Therapy		90857		Encounter	524.00	12,778.00	\$607,485.00
Medication Review		90862		Encounter	15,524.00	60,302.00	\$9,147,171.00
Additional Codes-ECT Physician		90870		Encounter	0.00	0.00	\$0.00
Additional Codes-ECT Physician	0901	90870		Encounter	0.00	0.00	\$0.00
Assessments-Other		90887		Encounter	559.00	661.00	\$81,811.00
Speech & Language Therapy		92506		Encounter	1.00	1.00	\$69.00
Speech & Language Therapy		92507		Encounter	1.00	88.00	\$2,886.00
Speech & Language Therapy		92508		Encounter	0.00	0.00	\$0.00
Speech & Language Therapy		92526		Encounter	0.00	0.00	\$0.00
Speech & Language Therapy		92610		Encounter	0.00	0.00	\$0.00
Psychological Testing PSYCH/PHYS		96101		Per Hour	1,085.00	2,716.00	\$729,961.00
Psychological Testing by Technician		96102		Per Hour	29.00	73.00	\$8,485.00
Psychological Testing by Comp		96103		Per Hour	0.00	0.00	\$0.00
Assessments-Other		96105		Encounter	13.00	13.00	\$1,755.00
Assessments-Other		96110		Encounter	2,044.00	5,912.00	\$1,153,592.00
Assessments-Other		96111		Encounter	48.00	69.00	\$51,710.00
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	1.00	1.00	\$120.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
Neuropsych test by Psych/Phys		96118		Per Hour	20.00	129.00	\$13,242.00
Neuropsych test by Tech		96119		Per Hour	4.00	47.00	\$3,953.00
Neuropsych test Admin w/Comp		96120		Per Hour	7.00	8.00	\$560.00
Medication Administration		96372		Encounter	35.00	212.00	\$22,809.00
Physical Therapy		97001		Encounter	0.00	0.00	\$0.00
Physical Therapy		97002		Encounter	0.00	0.00	\$0.00
Occupational Therapy		97003		Encounter	101.00	102.00	\$35,173.00
Occupational Therapy		97004		Encounter	10.00	24.00	\$1,508.00
Occupational or Physical Therapy		97110		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97112		15 Minutes	2.00	8.00	\$438.00
Occupational or Physical Therapy		97113		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97116		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97124		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97140		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97150		Encounter	0.00	0.00	\$0.00
Occupational or Physical Therapy		97530		15 Minutes	109.00	5,743.00	\$106,569.00
Occupational or Physical Therapy		97532		15 Minutes	2.00	13.00	\$394.00
Occupational or Physical Therapy		97533		15 Minutes	47.00	2,002.00	\$111,385.00
Occupational or Physical Therapy		97535		15 Minutes	3.00	24.00	\$427.00
Occupational or Physical Therapy		97537		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97542		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97750		15 Minutes	0.00	0.00	\$0.00
Occupational Therapy		97755		15 Minutes	0.00	0.00	\$0.00
Occupational or Physical Therapy		97760		15 Minutes	0.00	0.00	\$0.00
C/O for Orthotic/Prosth Use		97762		15 minutes	0.00	0.00	\$0.00
Assessment or Health Services		97802		15 Minutes	246.00	1,370.00	\$43,260.00
Assessment or Health Services		97803		15 Minutes	407.00	15,676.00	\$486,710.00
Health Services		97804		30 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99201		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99202		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99203		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99204		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99205		Encounter	29.00	29.00	\$13,727.00
Additional Codes-Physician Services Medication Administration		99211		Encounter	104.00	245.00	\$11,564.00
Additional Codes-Physician Services		99212		Encounter	12.00	19.00	\$3,751.00
Additional Codes-Physician Services		99213		Encounter	16.00	16.00	\$1,966.00
Additional Codes-Physician Services		99214		Encounter	90.00	282.00	\$60,927.00
Additional Codes-Physician Services		99215		Encounter	115.00	278.00	\$48,211.00
Additional Codes-Physician Services		99221		30 Minutes	71.00	95.00	\$10,927.00
Additional Codes-Physician Services		99222		50 Minutes	292.00	336.00	\$37,595.00
Additional Codes-Physician Services		99223		70 Minutes	11.00	13.00	\$1,024.00
Additional Codes-Physician Services		99224		15 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99225		25 minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99226		35 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99231		15 Minutes	228.00	684.00	\$34,029.00
Additional Codes-Physician Services		99232		25 minutes	283.00	1,346.00	\$75,840.00
Additional Codes-Physician Services		99233		35 Minutes	68.00	99.00	\$6,740.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
Additional Codes-Physician Services		99241		Encounter	3.00	3.00	\$199.00
Additional Codes-Physician Services		99242		Encounter	4.00	4.00	\$370.00
Additional Codes-Physician Services		99243		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99244		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99245		Encounter	20.00	20.00	\$8,634.00
Additional Codes-Physician Services		99251		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99252		Encounter	4.00	5.00	\$1,439.00
Additional Codes-Physician Services		99253		Encounter	2.00	3.00	\$497.00
Additional Codes-Physician Services		99254		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99255		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99261		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99262		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99263		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99271		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99272		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99273		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99274		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99275		Encounter	0.00	0.00	\$0.00
Medication Administration		99506		Encounter	6.00	6.00	\$790.00
Medication Administration (Children's Waiver)		99506		Encounter	0.00	0.00	\$0.00
Medication Management		99605		15 Minutes	5.00	654.00	\$19,620.00
Assessment		H0002		Encounter	6,772.00	9,999.00	\$1,229,091.00
Assessment		H0031		Encounter	21,960.00	39,562.00	\$8,575,828.00
Health Services		H0034		15 Minutes	194.00	511.00	\$40,168.00
Comprehensive Medication Services - EBP only		H2010		15 minutes	0.00	0.00	\$0.00
Behavior Services		H2019		15 Minutes	71.00	3,910.00	\$110,779.00
Behavior Services		H2019	TT	15 Minutes	16.00	1,900.00	\$9,103.00
Mental Health Therapy		H2027		15 Minutes	0.00	0.00	\$0.00
Medication Review		M0064		Encounter Face-to-Face, generally less	1,011.00	2,479.00	\$222,577.00
Occupational or Physical Therapy		S8990		Encounter	1.00	76.00	\$4,412.00
Health Services		S9445		Encounter	378.00	1,125.00	\$99,134.00
Health Services		S9446		Encounter	11.00	47.00	\$16,076.00
Health Services		S9470		Encounter	2.00	3.00	\$851.00
Assessment		T1001		Encounter	879.00	912.00	\$167,699.00
Health Services		T1002		Up to 15 min	3,624.00	9,236.00	\$717,310.00
Assessments		T1023		Encounter	2,753.00	3,691.00	\$1,674,092.00
Pharmacy (Drugs and Other Biologicals)					36.00	0.00	\$53,983.00
Aggregate for 'J' Codes		ALL			6.00	0.00	\$40,226.00
OUTPATIENT SERVICES							\$52,588,256.90
ASSERTIVE COMMUNITY TREATMENT (ACT)							
		H0039		15 Minutes	17.00	2,268.00	\$104,316.12
Treatment Planning		H0032		Encounter	14,450.00	30,170.00	\$4,556,661.00
Monitoring of Treatment - Clinician		H0032	TS	Encounter	1,299.00	2,320.00	\$298,016.00
Behavior Treatment Plan Review		H2000		Encounter	91.00	373.00	\$57,818.00
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	12.00	33.00	\$5,464.00
Wraparound		H2021		15 Minutes	1,480.00	79,383.00	\$7,379,896.00
Wraparound		H2022		Days	457.00	7,500.00	\$1,869,560.00
Wraparound (SED Waiver)		H2022	TT	Days	4.00	57.00	\$27,585.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
Supports Coordination/Wrap Facilitation		T1016		15 minutes	2,135.00	36,378.00	\$2,966,165.00
Targeted Case Management		T1017		15 minutes	9,572.00	322,284.00	\$18,468,273.00
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	7.00	100.00	\$5,863.00
CASE MANAGEMENT							\$35,635,299.72
Enhanced Medical Equipment-Supplies		E1399		Items	2.00	2.00	\$1,322.00
Community Living Supports in Independent living/own home		H0043		Per diem	3.00	224.00	\$9,393.00
Community Living Supports (Daily)		H2016		Per Diem	9.00	882.00	\$68,636.00
Community Living Supports (Daily)		H2016	TF	Per Diem	5.00	738.00	\$93,327.00
Community Living Supports (Daily)		H2016	TG	Per Diem	117.00	9,256.00	\$1,873,791.00
Repair/Svc DME Non-Oxygen Equipment (Children's Waiver)		K0739		15 Minutes	0.00	0.00	\$0.00
Foster Care		S5140		Days	0.00	0.00	\$0.00
Foster Care		S5145		Days	26.00	3,158.00	\$856,938.00
Personal Emergency Response System (PERS)		S5160		Encounter	0.00	0.00	\$0.00
Personal Emergency Response System (PERS)		S5161		Month	1.00	11.00	\$3,669.00
Environmental Modification		S5165		Service	1.00	1.00	\$3,601.00
Enhanced Medical Equipment-Supplies		S5199		Items	11.00	11.00	\$1,943.00
Residential Room and Board		S9976		Days	82.00	845.00	\$18,707.00
Private Duty Nursing		T1000		Up to 15 min	0.00	0.00	\$0.00
Private Duty Nursing		T1000	TD	Up to 15 min	0.00	0.00	\$0.00
Private Duty Nursing		T1000	TE	Up to 15 min	0.00	0.00	\$0.00
Personal Care in Licensed Specialized Residential Setting		T1020		Days	31.00	3,429.00	\$70,230.00
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	20.00	3,747.00	\$237,965.00
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	4.00	982.00	\$132,987.00
Enhanced Medical Supplies or Pharmacy		T1999		Items	16.00	53.00	\$11,341.00
Fiscal Intermediary Services		T2025		Month	344.00	2,653.00	\$58,986.00
Enhanced Medical Equipment-Supplies		T2028		Items	17.00	25.00	\$2,609.00
Enhanced Medical Equipment-Supplies		T2029		Items	0.00	0.00	\$0.00
Housing Assistance		T2038		Service	8.00	119.00	\$3,183.00
Enhanced Medical Equipment-Supplies		T2039		Items	0.00	0.00	\$0.00
Goods and Services		T5999	HK	Per Item	0.00	0.00	\$0.00
Wraparound Services		T5999		Per Item	9.00	9.00	\$1,741.00
SUPPORTS FOR LIVING							\$3,450,367.55
Family Training/Support EBP only		G0177		Encounter Session at least 45 min	13.00	33.00	\$4,001.00
Prevention Services - Direct Model		H0025		Face to Face Contact	917.00	10,979.00	\$2,060,942.00
Home Based Services		H0036		15 Minutes	7,511.00	891,943.00	\$45,039,795.00
Home Based Services		H0036	ST	15 Minutes	10.00	427.00	\$18,709.00
Respite		H0045		Days	388.00	3,380.00	\$811,948.00
Respite (Children's Waiver)		H0045	TD	Per Diem	0.00	0.00	\$0.00
Respite (Children's Waiver)		H0045	TE	Per Diem	0.00	0.00	\$0.00
Home Based Services		H2033		15 Minutes	197.00	22,806.00	\$1,600,001.00
Family Training - EBP		S5110		15 Minutes	6.00	75.00	\$2,764.00
Family Training		S5111		Encounter	2,130.00	14,765.00	\$2,641,382.00
Family Training		S5111	HA	Encounter	28.00	211.00	\$49,857.00
Family Training (SED Waiver)		S5111	HM	Encounter	297.00	2,112.00	\$433,934.00
Respite		S5150		15 Minutes	45.00	16,926.00	\$57,692.00
Respite		S5151		Per Diem	24.00	213.00	\$57,086.00
Respite (Children's Waiver)		S5151	TT	Per diem	0.00	0.00	\$0.00

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Prevention Services - Direct Model		S9482		15 Minutes	379.00	17,247.00	\$872,897.00
Respite Care		T1005		15 Minutes	1,661.00	1,161,032.00	\$5,815,284.00
Respite Care		T1005	TD	15 Minutes	3.00	1,295.00	\$4,349.00
Respite Care		T1005	TE	15 Minutes	3.00	608.00	\$3,966.00
Respite Care (Children's Waiver)		T1005	TT	15 minutes	218.00	166,345.00	\$456,773.00
Family Psycho-Education - EBP		T1015		Encounter	118.00	71,421.00	\$23,508.00
Prevention Services - Direct Model		T1027		15 minutes	56.00	1,304.00	\$25,008.00
Prevention Services - Direct Model		T2024			62.00	1,084.00	\$59,551.00
Respite Care		T2036		Per session. One night = one session	188.00	1,093.00	\$128,182.00
Respite Care		T2037		Per session. One day/partial day = one session	73.00	658.00	\$27,773.00
FAMILY/CAREGIVER SUPPORTS							\$60,195,403.49
Transportation		A0080		Per mile	2.00	502.00	\$486.00
Transportation		A0090		Per mile	0.00	0.00	\$0.00
Transportation		A0100		Per one-way trip	2.00	4.00	\$482.00
Transportation		A0110		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0120		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0130		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0140		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0170			0.00	0.00	\$0.00
Additional Codes-Transportation		A0425		Per Mile	48.00	2,829.00	\$69,844.00
Additional Codes-Transportation		A0427		Refer to code descriptions.	20.00	22.00	\$3,409.00
Peer Directed and Operated Support Services		H0023		Encounter	0.00	0.00	\$0.00
Peer Directed and Operated Support Services		H0038		15 minutes	144.00	520.00	\$101,709.00
Peer Directed and Operated Support Services		NA			4.00	18.00	\$494.00
Peer Directed and Operated Support Services		H0046		Encounter	0.00	0.00	\$0.00
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	752.00	99,165.00	\$552,648.00
Community Living Supports (15 Minutes)		H2015		15 Minutes	2,263.00	826,403.00	\$4,990,679.00
Supported Employment Services		H2023		15 minutes	25.00	1,302.00	\$36,699.00
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	18.00	2,737.00	\$30,917.00
Transportation		S0209		Per Mile	0.00	0.00	\$0.00
Transportation		S0215		Per Mile	1.00	31.00	\$777.00
Transportation		T2001		Encounter	2.00	10.00	\$210.00
Transportation		T2002		Per Diem	19.00	4,834.00	\$2,465.00
Transportation		T2003		Encounter / Trip	35.00	58.00	\$25,116.00
Transportation		T2004		Encounter	0.00	0.00	\$0.00
Transportation		T2005		Encounter	0.00	0.00	\$0.00
DAYTIME SUPPORTS AND SERVICES							\$5,815,936.16
OTHER					9.00	0.00	\$3,017.88
Drug Screen for Methadone Clients Only		80100		Per Screen	1.00	1.00	\$25.00
Drug Screen for Methadone Clients Only		80101		Per Screen	0.00	0.00	\$0.00
Substance Abuse: Psychiatric Evaluation		90801		Encounter	2.00	2.00	\$302.00
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	2.00	2.00	\$111.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0.00	0.00	\$0.00

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Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	6.00	7.00	\$631.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	1.00	1.00	\$247.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Psychotherapy (Individual Therapy)	0900, 0914, 0915, 0916, 0919	90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter	97.00	193.00	\$23,644.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90857		Encounter	1.00	1.00	\$33.00
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	4.00	4.00	\$436.00
Substance Abuse: Acupuncture		97810		Encounter	0.00	0.00	\$0.00
Substance Abuse: Acupuncture		97811		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99203		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99204		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99205		Encounter	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0100		Per one-way trip	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0110		Per one-way trip	1.00	1.00	\$29.00
Substance Abuse: Recovery Support Services		G0409		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Individual Assessment		H0001		Encounter	2,863.00	14,148.00	\$436,018.00
Substance Abuse: Laboratory		H0003		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		15 Minutes	11.00	254.00	\$10,154.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	10.00	53.00	\$8,665.00
Substance Abuse: Case Management		H0006		Encounter	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0.00	0.00	\$0.00

FY 2012 Statewide Cost Report for Children with Mental Illness

Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	MIC-Cases	MIC-Units	MIC-Cost
Substance Abuse: Outpatient Care	0906	H0015		Days	0.00	0.00	\$0.00
Substance Abuse: Residential	1002	H0018		Days	0.00	0.00	\$0.00
Substance Abuse: Residential	1002	H0019		Days	0.00	0.00	\$0.00
Substance Abuse: Methadone		H0020		Encounter	0.00	0.00	\$0.00
Substance Abuse: Early Intervention		H0022		Encounter	0.00	0.00	\$0.00
Substance Abuse: Pharmacological Support - Suboxone		H0033		Direct Observation Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		H0038		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Laboratory (cells now unlocked)		H0048		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment		H0050		15 Minutes	0.00	0.00	\$0.00
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Hour	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Per Diem	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		S0215		Per Mile	0.00	0.00	\$0.00
Substance Abuse Services: Residential Room and Board		S9976		Days	0.00	0.00	\$0.00
Substance Abuse: Child Sitting Services		T1009		Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		T1012		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2001		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2002		Per Diem	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2003		Encounter / Trip	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2004		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2005		Encounter	0.00	0.00	\$0.00
SUBSTANCE ABUSE SERVICES							\$480,296.29

FY 2012 Statewide Cost Report for Persons with Developmental Disabilities

Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
State Psychiatric Hospital - Inpatient PT22	0100, 0101, 0114, 0124, 0134, 0154		PT22	Days	102.00	7,462.00	\$2,553,069.00
State Mental Retardation Facility - Inpatient (ICF/MR) PT65	0100, 0101, 0114, 0124, 0134, 0154		PT65	Days	0.00	0.00	\$0.00
STATE INPATIENT							\$2,553,069.46
Local Psychiatric Hospital/IMD PT68	0100, 0101, 0114, 0124, 0134, 0154		PT68	Days	317.00	4,951.00	\$2,731,888.00
Local Psychiatric Hospital - Acute Community PT73	0100, 0101, 0114, 0124, 0134, 0154		PT73	Days	368.00	4,646.00	\$2,435,887.00
Inpatient Hospital Ancillary Services - Room and Board	0144			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Leave of Absence	0183			Days	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257- 0258				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272			# of items	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305- 0307			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Radiology	0320			# of tests	0.00	0.00	\$0.00
ECT Anesthesia	0370				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Physical Therapy	0420-0424			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of treatments	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of visits	36.00	58.00	\$8,899.00
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Audiology	0470-0472			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of units	0.00	0.00	\$0.00
ECT Recovery Room	0710				0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - EEG	0740			# of tests	0.00	0.00	\$0.00
Crisis Observation Care	0762			Hour	0.00	0.00	\$0.00
Additional Codes-ECT Facility Charge	0901			Encounter	1.00	23.00	\$15,525.00
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902- 0904, 0911, 0914- 0919			# of visits	0.00	0.00	\$0.00
Outpatient Partial Hospitalization	0912			Days	117.00	1,505.00	\$407,567.00
Outpatient Partial Hospitalization	0913			Days	2.00	32.00	\$5,868.00
Inpatient Hospital Ancillary Services - Other Diagnosis Services	0925			# of tests	0.00	0.00	\$0.00
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			# of visits	0.00	0.00	\$0.00
Additional Codes-ECT Anesthesia		00104		Minutes	0.00	0.00	\$0.00
Additional Codes-ECT Anesthesia	0901	00104		Minutes	0.00	0.00	\$0.00
Crisis Intervention		T2034		Days	17.00	98.00	\$57,282.00
Crisis Residential Services		H0018		Days	76.00	657.00	\$172,649.00
Crisis Intervention		H0030		Per Service	0.00	0.00	\$0.00
Crisis Intervention		H2011		15 Minutes	862.00	5,583.00	\$558,508.00
Crisis Intervention		H2020		Days	1.00	44.00	\$31,997.00
Intensive Crisis Stabilization-Enrolled Program		S9484		Hour	21.00	119.00	\$20,150.00
COMMUNITY INPATIENT AND CRISIS							\$6,446,219.79
Assessment-Psychiatric Assessment		90801		Encounter	4,105.00	4,413.00	\$1,154,940.00
Assessment-Psychiatric Assessment		90802		Encounter	14.00	21.00	\$4,308.00
Therapy-Individual Therapy		90804		Encounter 20-30 Min	2,011.00	9,501.00	\$669,161.00
Therapy-Individual Therapy		90805		Encounter 20-30 Min	70.00	131.00	\$16,177.00
Therapy-Individual Therapy		90806		Encounter 45-50 Min	3,736.00	27,185.00	\$3,163,125.00
Therapy-Individual Therapy		90807		Encounter 45-50 Min	87.00	168.00	\$28,536.00
Therapy-Individual Therapy		90808		Encounter 75-80 Min	277.00	749.00	\$145,871.00

FY 2012 Statewide Cost Report for Persons with Developmental Disabilities

Service Description	Revenue Code	HCPSC Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Therapy-Individual Therapy		90809		Encounter /5-80 Min	1.00	1.00	\$210.00
Therapy-Individual Therapy		90810		Encounter 20-30 Min	22.00	52.00	\$3,591.00
Therapy-Individual Therapy		90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90812		Encounter 45-50 Min	35.00	84.00	\$14,536.00
Therapy-Individual Therapy		90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90814		Encounter /5-80 Min	4.00	9.00	\$1,177.00
Therapy-Individual Therapy		90815		Encounter /5-80 Min	3.00	6.00	\$562.00
Therapy-Individual Therapy		90816		Encounter 20-30 Min	8.00	52.00	\$4,765.00
Therapy-Individual Therapy		90817		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90818		Encounter 45-50 Min	9.00	272.00	\$41,602.00
Therapy-Individual Therapy		90819		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90821		Encounter /5-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90822		Encounter /5-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90823		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90824		Encounter 20-30 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90827		Encounter 45-50 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90828		Encounter /5-80 Min	0.00	0.00	\$0.00
Therapy-Individual Therapy		90829		Encounter /5-80 Min	0.00	0.00	\$0.00
Therapy-Family Therapy		90846		Encounter	467.00	1,328.00	\$172,720.00
Therapy-Family Therapy		90847		Encounter	1,753.00	8,878.00	\$840,072.00
Therapy-Family Therapy		90849		Encounter	13.00	28.00	\$7,679.00
Therapy-Family Therapy		90849	HS	Encounter	11.00	28.00	\$3,241.00
Therapy-Group Therapy		90853		Encounter	756.00	7,017.00	\$551,178.00
Therapy-Group Therapy		90857		Encounter	15.00	251.00	\$11,813.00
Medication Review		90862		Encounter	11,396.00	46,543.00	\$7,061,906.00
Additional Codes-ECT Physician		90870		Encounter	1.00	37.00	\$32,509.00
Additional Codes-ECT Physician	0901	90870		Encounter	0.00	0.00	\$0.00
Assessments-Other		90887		Encounter	1,163.00	1,653.00	\$218,581.00
Speech & Language Therapy		92506		Encounter	840.00	998.00	\$233,718.00
Speech & Language Therapy		92507		Encounter	797.00	16,734.00	\$1,477,724.00
Speech & Language Therapy		92508		Encounter	47.00	446.00	\$29,987.00
Speech & Language Therapy		92526		Encounter	63.00	98.00	\$17,560.00
Speech & Language Therapy		92610		Encounter	783.00	823.00	\$140,385.00
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92626		First Hour	0.00	0.00	\$0.00
Evaluation of Auditory Rehabilitation Status (Children's Waiver)		92627		Each Additional 15 Minutes	0.00	0.00	\$0.00
Auditory Rehabilitation Preling Hearing Loss (Children's Waiver)		92630		Encounter	0.00	0.00	\$0.00
Auditory Rehabilitation; Post-Lingual Hearing Loss (Children's Waiver)		92633		Encounter	0.00	0.00	\$0.00
Psychological Testing PSYCH/PHYS		96101		Per Hour	1,716.00	6,857.00	\$912,656.00
Psychological Testing by Technician		96102		Per Hour	35.00	74.00	\$6,240.00
Psychological Testing by Comp		96103		Per Hour	0.00	0.00	\$0.00
Assessments-Other		96105		Encounter	4.00	4.00	\$540.00
Assessments-Other		96110		Encounter	232.00	650.00	\$69,398.00
Assessments-Other		96111		Encounter	780.00	1,181.00	\$211,994.00
Neurobehavioral Status Exam (Children's Waiver)		96116		Per Hour	506.00	2,409.00	\$153,380.00
Neuropsych test by Psych/Phys		96118		Per Hour	4.00	11.00	\$4,500.00
Neuropsych test by Tech		96119		Per Hour	0.00	0.00	\$0.00
Neuropsych test Admin w/Comp		96120		Per Hour	1.00	1.00	\$70.00
Medication Administration		96372		Encounter	275.00	3,407.00	\$305,050.00
Physical Therapy		97001		Encounter	452.00	473.00	\$141,446.00

FY 2012 Statewide Cost Report for Persons with Developmental Disabilities

Service Description	Revenue Code	HCPSC Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Physical Therapy		97002		Encounter	94.00	237.00	\$92,283.00
Occupational Therapy		97003		Encounter	1,961.00	2,114.00	\$677,566.00
Occupational Therapy		97004		Encounter	1,698.00	1,995.00	\$399,563.00
Occupational or Physical Therapy		97110		15 Minutes	686.00	37,932.00	\$890,200.00
Occupational or Physical Therapy		97112		15 Minutes	22.00	313.00	\$30,867.00
Occupational or Physical Therapy		97113		15 Minutes	35.00	1,242.00	\$30,150.00
Occupational or Physical Therapy		97116		15 Minutes	20.00	92.00	\$13,608.00
Occupational or Physical Therapy		97124		15 Minutes	41.00	3,342.00	\$62,565.00
Occupational or Physical Therapy		97140		15 Minutes	6.00	152.00	\$18,145.00
Occupational or Physical Therapy		97150		Encounter	67.00	432.00	\$6,282.00
Occupational or Physical Therapy		97530		15 Minutes	477.00	25,282.00	\$798,503.00
Occupational or Physical Therapy		97532		15 Minutes	6.00	54.00	\$5,993.00
Occupational or Physical Therapy		97533		15 Minutes	177.00	10,162.00	\$263,195.00
Occupational or Physical Therapy		97535		15 Minutes	296.00	2,906.00	\$172,060.00
Occupational or Physical Therapy		97537		15 Minutes	2.00	14.00	\$1,179.00
Occupational or Physical Therapy		97542		15 Minutes	286.00	1,905.00	\$269,255.00
Occupational or Physical Therapy		97750		15 Minutes	4.00	19.00	\$633.00
Occupational Therapy		97755		15 Minutes	68.00	300.00	\$19,009.00
Occupational or Physical Therapy		97760		15 Minutes	41.00	205.00	\$12,509.00
Prosthetic Training (Children's Waiver)		97761		15 Minutes	1.00	12.00	\$21.00
C/O for Orthotic/Prosth Use		97762		15 minutes	3.00	22.00	\$419.00
Assessment or Health Services		97802		15 Minutes	649.00	2,807.00	\$182,696.00
Assessment or Health Services		97803		15 Minutes	1,305.00	6,552.00	\$478,429.00
Health Services		97804		30 Minutes	50.00	236.00	\$50,947.00
Additional Codes-Physician Services		99201		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99202		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99203		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99204		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99205		Encounter	15.00	15.00	\$7,351.00
Additional Codes-Physician Services Medication Administration		99211		Encounter	271.00	1,176.00	\$120,110.00
Additional Codes-Physician Services		99212		Encounter	22.00	22.00	\$971.00
Additional Codes-Physician Services		99213		Encounter	66.00	82.00	\$8,516.00
Additional Codes-Physician Services		99214		Encounter	189.00	381.00	\$72,767.00
Additional Codes-Physician Services		99215		Encounter	75.00	77.00	\$33,495.00
Additional Codes-Physician Services		99221		30 Minutes	9.00	11.00	\$1,520.00
Additional Codes-Physician Services		99222		50 Minutes	64.00	87.00	\$10,896.00
Additional Codes-Physician Services		99223		70 Minutes	5.00	8.00	\$1,270.00
Additional Codes-Physician Services		99224		15 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99225		25 minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99226		35 Minutes	0.00	0.00	\$0.00
Additional Codes-Physician Services		99231		15 Minutes	61.00	345.00	\$41,837.00
Additional Codes-Physician Services		99232		25 minutes	64.00	424.00	\$29,459.00
Additional Codes-Physician Services		99233		35 Minutes	13.00	24.00	\$4,890.00
Additional Codes-Physician Services		99241		Encounter	4.00	8.00	\$531.00
Additional Codes-Physician Services		99242		Encounter	2.00	3.00	\$256.00
Additional Codes-Physician Services		99243		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99244		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99245		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99251		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99252		Encounter	13.00	24.00	\$3,127.00
Additional Codes-Physician Services		99253		Encounter	2.00	2.00	\$544.00
Additional Codes-Physician Services		99254		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99255		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99261		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99262		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99263		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99271		Encounter	0.00	0.00	\$0.00

FY 2012 Statewide Cost Report for Persons with Developmental Disabilities

Service Description	Revenue Code	HCPSC Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Additional Codes-Physician Services		99272		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99273		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99274		Encounter	0.00	0.00	\$0.00
Additional Codes-Physician Services		99275		Encounter	0.00	0.00	\$0.00
Medication Administration		99506		Encounter	18.00	175.00	\$7,457.00
Medication Administration (Children's Waiver)		99506		Encounter	0.00	0.00	\$0.00
Medication Management		99605		15 Minutes	34.00	4,634.00	\$142,280.00
Assessment		H0002		Encounter	1,664.00	1,823.00	\$408,335.00
Assessment		H0031		Encounter	11,793.00	16,685.00	\$3,458,742.00
Health Services		H0034		15 Minutes	259.00	1,128.00	\$56,810.00
Comprehensive Medication Services - EBP only		H2010		15 minutes	0.00	0.00	\$0.00
Behavior Services		H2019		15 Minutes	24.00	3,730.00	\$226,609.00
Behavior Services		H2019	TT	15 Minutes	18.00	1,538.00	\$24,806.00
Mental Health Therapy		H2027		15 Minutes	0.00	0.00	\$0.00
Medication Review		M0064		Encounter Face-to-Face, generally less than 10 minutes	2,365.00	7,305.00	\$817,886.00
Occupational or Physical Therapy		S8990		Encounter	176.00	16,157.00	\$582,210.00
Health Services		S9445		Encounter	1,778.00	3,922.00	\$245,933.00
Health Services		S9446		Encounter	71.00	474.00	\$163,389.00
Health Services		S9470		Encounter	630.00	1,652.00	\$192,083.00
Assessment		T1001		Encounter	5,024.00	5,631.00	\$1,532,521.00
Health Services		T1002		Up to 15 min	5,141.00	42,471.00	\$3,812,325.00
Assessments		T1023		Encounter	852.00	1,221.00	\$383,491.00
Pharmacy (Drugs and Other Biologicals)					1,190.00	0.00	\$172,807.00
Aggregate for 'J' Codes		ALL			49.00	0.00	\$464,520.00
OUTPATIENT SERVICES							\$35,358,733.77
ASSERTIVE COMMUNITY TREATMENT (ACT)		H0039		15 Minutes	76.00	11,459.00	\$535,449.55
Treatment Planning		H0032		Encounter	10,767.00	25,799.00	\$4,208,422.00
Monitoring of Treatment - Clinician		H0032	TS	Encounter	4,319.00	20,710.00	\$4,298,911.00
Behavior Treatment Plan Review		H2000		Encounter	2,764.00	7,474.00	\$1,101,747.00
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	Encounter	2,117.00	8,514.00	\$1,336,188.00
Wraparound		H2021		15 Minutes	44.00	2,586.00	\$237,529.00
Wraparound		H2022		Days	0.00	0.00	\$0.00
Wraparound (SED Waiver)		H2022	TT	Days	0.00	0.00	\$0.00
Supports Coordination/Wrap Facilitation		T1016		15 minutes	33,972.00	1,053,113.00	\$89,181,588.00
Targeted Case Management		T1017		15 minutes	6,559.00	190,914.00	\$14,084,110.00
Nursing Home Mental Health Monitoring		T1017	SE	15 minutes	261.00	5,646.00	\$453,375.00
Targeted Case Management (Children's Waiver)		T2023		Month	420.00	4,532.00	\$1,530,234.00
CASE MANAGEMENT							\$116,432,104.36
Enhanced Medical Equipment-Supplies		E1399		Items	408.00	647.00	\$309,654.00
Community Living Supports in Independent living/own home		H0043		Per diem	3,429.00	1,020,341.00	\$146,051,220.00
Community Living Supports (Daily)		H2016		Per Diem	2,001.00	539,932.00	\$18,810,655.00
Community Living Supports (Daily)		H2016	TF	Per Diem	2,563.00	643,803.00	\$38,768,627.00
Community Living Supports (Daily)		H2016	TG	Per Diem	5,312.00	1,572,486.00	\$194,487,786.00
Repair/Svc DME Non-Oxygen Equipment (Children's Waiver)		K0739		15 Minutes	0.00	0.00	\$0.00
Home Care Training, Non-Family (Children's Waiver)		S5116		Encounter	270.00	2,276.00	\$433,037.00
Foster Care		S5140		Days	4.00	987.00	\$141,811.00
Foster Care		S5145		Days	7.00	2,249.00	\$475,304.00
Personal Emergency Response System (PERS)		S5160		Encounter	18.00	18.00	\$10,930.00
Personal Emergency Response System (PERS)		S5161		Month	301.00	2,952.00	\$1,781,778.00
Environmental Modification		S5165		Service	137.00	182.00	\$562,804.00
Enhanced Medical Equipment-Supplies		S5199		Items	754.00	2,064.00	\$478,406.00
Private Duty Nursing	0582	S9123		Hour	4.00	335.00	\$9,899.00
Private Duty Nursing		S9123		Hour	13.00	23,529.00	\$779,747.00
Private Duty Nursing		S9123	TT	Hour	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Private Duty Nursing	0582	S9124		Hour	11.00	29,447.00	\$889,286.00
Private Duty Nursing		S9124		Hour	14.00	18,983.00	\$580,140.00
Private Duty Nursing		S9124	TT	Hour	0.00	0.00	\$0.00
Residential Room and Board		S9976		Days	206.00	66,697.00	\$1,724,013.00
Private Duty Nursing		T1000		Up to 15 min	10.00	71,218.00	\$437,352.00
Private Duty Nursing		T1000	TD	Up to 15 min	12.00	90,443.00	\$642,563.00
Private Duty Nursing		T1000	TE	Up to 15 min	20.00	170,568.00	\$1,290,250.00
Personal Care in Licensed Specialized Residential Setting		T1020		Days	3,915.00	1,117,471.00	\$26,385,458.00
Personal Care in Licensed Specialized Residential Setting		T1020	TF	Days	2,852.00	741,184.00	\$41,936,087.00
Personal Care in Licensed Specialized Residential Setting		T1020	TG	Days	2,991.00	879,729.00	\$91,838,388.00
Enhanced Medical Supplies or Pharmacy		T1999		Items	1,088.00	11,131.00	\$450,245.00
Fiscal Intermediary Services		T2025		Month	7,053.00	71,337.00	\$5,378,059.00
Enhanced Medical Equipment-Supplies		T2028		Items	79.00	193.00	\$46,156.00
Enhanced Medical Equipment-Supplies		T2029		Items	44.00	281.00	\$125,166.00
Housing Assistance		T2038		Service	650.00	5,197.00	\$1,285,376.00
Enhanced Medical Equipment-Supplies		T2039		Items	24.00	26.00	\$57,504.00
Goods and Services		T5999	HK	Per Item	3.00	5.00	\$881.00
Wraparound Services		T5999		Per Item	6.00	11.00	\$571.00
SUPPORTS FOR LIVING							\$576,169,154.97
Family Training/Support EBP only		G0177		Encounter Session at least 45 min	20.00	72.00	\$11,493.00
Prevention Services - Direct Model		H0025		Face to Face Contact	90.00	426.00	\$92,663.00
Home Based Services		H0036		15 Minutes	313.00	42,160.00	\$2,151,870.00
Home Based Services		H0036	ST	15 Minutes	5.00	618.00	\$31,852.00
Respite		H0045		Days	1,460.00	18,860.00	\$2,864,254.00
Respite (Children's Waiver)		H0045	TD	Per Diem	0.00	0.00	\$0.00
Respite (Children's Waiver)		H0045	TE	Per Diem	0.00	0.00	\$0.00
Home Based Services		H2033		15 Minutes	2.00	194.00	\$9,062.00
Family Training - EBP		S5110		15 Minutes	10.00	135.00	\$5,713.00
Family Training		S5111		Encounter	1,990.00	10,979.00	\$1,556,034.00
Family Training		S5111	HA	Encounter	1.00	1.00	\$1,036.00
Family Training (SED Waiver)		S5111	HM	Encounter	6.00	44.00	\$7,756.00
Respite		S5150		15 Minutes	541.00	283,902.00	\$569,073.00
Respite		S5151		Per Diem	1,111.00	16,158.00	\$1,704,581.00
Respite (Children's Waiver)		S5151	TT	Per diem	18.00	1,722.00	\$22,384.00
Respite Care in the Home (RN) (Children's Waiver)		S9125	TD	Per Diem	1.00	1.00	\$391.00
Respite Care in the Home (LPN) (Children's Waiver)		S9125	TE	Per Diem	0.00	0.00	\$0.00
Prevention Services - Direct Model		S9482		15 Minutes	2.00	56.00	\$22,037.00
Respite Care		T1005		15 Minutes	7,552.00	8,032,433.00	\$24,268,701.00
Respite Care		T1005	TD	15 Minutes	28.00	39,971.00	\$348,629.00
Respite Care		T1005	TE	15 Minutes	70.00	161,567.00	\$1,283,126.00
Respite Care (Children's Waiver)		T1005	TT	15 minutes	360.00	390,132.00	\$1,180,547.00
Family Psycho-Education - EBP		T1015		Encounter	14.00	29.00	\$5,777.00
Prevention Services - Direct Model		T1027		15 minutes	2.00	24.00	\$347.00
Prevention Services - Direct Model		T2024			0.00	0.00	\$0.00
Respite Care		T2036		Per session. One night = one session	243.00	2,127.00	\$268,029.00
Respite Care		T2037		Per session. One day/partial day = one session	47.00	467.00	\$31,918.00
FAMILY/CAREGIVER SUPPORTS							\$36,437,272.26
Transportation		A0080		Per mile	9.00	6,095.00	\$3,541.00
Transportation		A0090		Per mile	0.00	0.00	\$0.00
Transportation		A0100		Per one-way trip	3.00	5.00	\$1,536.00
Transportation		A0110		Per one-way trip	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Transportation		A0120		Per one-way trip	20.00	289.00	\$2,464.00
Transportation		A0130		Per one-way trip	5.00	1,006.00	\$24,917.00
Transportation		A0140		Per one-way trip	0.00	0.00	\$0.00
Transportation		A0170			1.00	11.00	\$2,760.00
Additional Codes-Transportation		A0425		Per Mile	4.00	255.00	\$939.00
Additional Codes-Transportation		A0427		Refer to code descriptions.	2.00	2.00	\$190.00
Activity Therapy (Children's Waiver)		G0176		Encounter	164.00	6,136.00	\$559,311.00
Peer Directed and Operated Support Services		H0023		Encounter	36.00	1,650.00	\$108,119.00
Peer Directed and Operated Support Services		H0038		15 minutes	281.00	19,325.00	\$345,911.00
Peer Directed and Operated Support Services		NA			74.00	1,150.00	\$31,556.00
Peer Directed and Operated Support Services		H0046		Encounter	34.00	126.00	\$4,463.00
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 minutes	14,550.00	39,818,394.00	\$143,269,799.00
Community Living Supports (15 Minutes)		H2015		15 Minutes	14,363.00	54,520,559.00	\$206,692,138.00
Supported Employment Services		H2023		15 minutes	4,030.00	4,145,776.00	\$23,870,740.00
Clubhouse Psychosocial Rehabilitation Programs		H2030		15 Minutes	291.00	464,203.00	\$2,087,876.00
Transportation		S0209		Per Mile	0.00	0.00	\$0.00
Transportation		S0215		Per Mile	3.00	1,201.00	\$1,381.00
Transportation		T2001		Encounter	3.00	739.00	\$5,879.00
Transportation		T2002		Per Diem	646.00	479,258.00	\$1,004,577.00
Transportation		T2003		Encounter / Trip	907.00	306,491.00	\$3,265,259.00
Transportation		T2004		Encounter	0.00	0.00	\$0.00
Transportation		T2005		Encounter	0.00	0.00	\$0.00
Out of Home Prevocational Service		T2015		Hour	732.00	597,076.00	\$8,575,152.00
DAYTIME SUPPORTS AND SERVICES							\$389,858,509.51
OTHER					77.00	0.00	\$47,834.67
Drug Screen for Methadone Clients Only		80100		Per Screen	1.00	1.00	\$25.00
Drug Screen for Methadone Clients Only		80101		Per Screen	0.00	0.00	\$0.00
Substance Abuse: Psychiatric Evaluation		90801		Encounter	0.00	0.00	\$0.00
Substance Abuse: Psychiatric Evaluation		90802		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90804		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90805		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90806		Encounter 45-50 Min	2.00	2.00	\$152.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90807		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90808		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90809		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90810		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90811		Encounter 20-30 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90812		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90813		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90814		Encounter 75-80 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0914, 0915, 0916, 0919	90815		Encounter 75-80 Min	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Substance Abuse: Psychotherapy (Individual Therapy)	0900, 0914, 0915, 0916, 0919	90826		Encounter 45-50 Min	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846		Encounter	6.00	21.00	\$2,573.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853		Encounter	1.00	1.00	\$59.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90857		Encounter	0.00	0.00	\$0.00
Substance Abuse: Medication Review	0900, 0914, 0915, 0916, 0919	90862		Encounter	9.00	9.00	\$2,787.00
Substance Abuse: Acupuncture		97810		Encounter	0.00	0.00	\$0.00
Substance Abuse: Acupuncture		97811		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99203		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99204		Encounter	0.00	0.00	\$0.00
Substance Abuse: Physician Evaluation		99205		Encounter	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0100		Per one-way trip	0.00	0.00	\$0.00
Substance Abuse: Transportation		A0110		Per one-way trip	3.00	132.00	\$3,780.00
Substance Abuse: Recovery Support Services		G0409		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Individual Assessment		H0001		Encounter	97.00	588.00	\$22,961.00
Substance Abuse: Laboratory		H0003		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		15 Minutes	2.00	98.00	\$3,985.00
Substance Abuse: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Encounter	1.00	8.00	\$1,349.00
Substance Abuse: Case Management		H0006		Encounter	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0010		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0012		Days	0.00	0.00	\$0.00
Substance Abuse: Sub-Acute Detoxification	1002	H0014		Days	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0906	H0015		Days	0.00	0.00	\$0.00
Substance Abuse: Residential	1002	H0018		Days	0.00	0.00	\$0.00
Substance Abuse: Residential	1002	H0019		Days	0.00	0.00	\$0.00
Substance Abuse: Methadone		H0020		Encounter	0.00	0.00	\$0.00
Substance Abuse: Early Intervention		H0022		Encounter	0.00	0.00	\$0.00
Substance Abuse: Pharmacological Support - Suboxane		H0033		Direct Observation Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		H0038		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Laboratory (cells now unlocked)		H0048		Encounter	0.00	0.00	\$0.00
Substance Abuse: Outpatient Treatment		H0050		15 Minutes	0.00	0.00	\$0.00
Substance Abuse Services: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027		15 Minutes	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035		Hour	0.00	0.00	\$0.00
Substance Abuse: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036		Per Diem	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		S0215		Per Mile	0.00	0.00	\$0.00
Substance Abuse Services: Residential Room and Board		S9976		Days	0.00	0.00	\$0.00
Substance Abuse: Child Sitting Services		T1009		Encounter	0.00	0.00	\$0.00
Substance Abuse: Recovery Support Services		T1012		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2001		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2002		Per Diem	0.00	0.00	\$0.00

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Service Description	Revenue Code	HCPCS Code	Modifier	Unit Type	DD-Cases	DD-Units	DD-Cost
Substance Abuse Services: Transportation		T2003		Encounter / Trip	124.00	266.00	\$3,631.00
Substance Abuse Services: Transportation		T2004		Encounter	0.00	0.00	\$0.00
Substance Abuse Services: Transportation		T2005		Encounter	0.00	0.00	\$0.00
SUBSTANCE ABUSE SERVICES							\$41,301.36

SECTION 404 (2) (d)
SERVICE OUTCOMES
FY 2012

2012 Michigan Consumer Survey

**MHSIP Consumer Satisfaction Survey
in ACT Teams**

**Youth Satisfaction Survey for Families
in Home-based Programs**

May, 2013

2012 Consumer Survey Results Michigan

Background and Overview

In response to federal reporting requirements, since 1998 the Michigan Department of Community Health (MDCH) has commissioned an annual statewide consumer satisfaction survey of adults with mental illness using the Mental Health Statistics Improvement Program (MHSIP) 28-item questionnaire. Consumers were randomly sampled from the pool of consumers who had received services during the previous year.

In order to enhance the use of statewide satisfaction results at the state and local level, a new approach to the evaluation of consumer satisfaction was implemented in 2007. During April 2007, each PIHP was asked to oversee and conduct satisfaction surveys on a smaller scale among all of their Assertive Community Treatment programs. In addition, PIHPs were also asked to conduct consumer satisfaction surveys among children receiving services in home-based care. This approach has been repeated each year and the results are summarized in this report.

For adults with mental illness, the MHSIP 44-item Consumer Survey which includes the additional domains of satisfaction with functioning and social connectedness, as well as information on arrest history. For children and adolescents, the longer, 26-item version of the MHSIP Youth Services Survey for Families was selected. Both instruments are used by states across the nation and have normative data available to aid interpretation of survey results. These surveys are shown in the Attachment.

All persons receiving services from the ACT and home-based programs as of October 1, 2011 were asked to participate in the survey process. Each PIHP appointed one individual from among its quality improvement staff as a member of the Consumer Satisfaction Implementation Sub-Committee. This Implementation Sub-Committee, headed by MDCH staff, worked with PIHPs to organize, collect, clean, and generally prepare satisfaction data for electronic transmission to MDCH where it was analyzed and reported back to the local level.

Data Collection and Processing

Survey data was collected over a 2-week period anytime between October 14 – November 17, 2012. All data collection, however, was required to be completed by November 18, 2012 and transmitted to MDCH no later than Monday, December 31, 2012. A standardized EXCEL file structure was developed by the Implementation Group for use by all CMHSPs and PIHPs. Agencies cleaned and prepared the data prior to sending it to MDCH.

During the 2-week data collection period in October/November, MHSIP satisfaction surveys were hand-delivered by ACT team staff to eligible consumers during regularly scheduled (home) visits. ACT members were provided with a set of “bullets” or “talking points” designed to explain to consumers the nature and purpose of the survey, procedures for completing and returning survey forms, procedures for protecting the anonymity of respondents, how data will be analyzed, reported, and used, and finally, how consumers may learn about the results.

Consumers had the option of handing the form back to the ACT member after placing it in a sealed envelope; or alternatively, the consumer could return the survey to the CMHSP in a pre-addressed, stamped envelope.

Home-based program staff offered the YSS survey to one parent of **each** child/adolescent who has a face-to-face home-based services contact during the selected two week period in October/November 2012. If more than one child in the home is receiving services, then the parent was **asked** to complete one survey for each child. If the parent was willing to complete only a single survey, then the parent was instructed to select their responses to reflect the average or typical experience for all their children.

Home-based program staff were provided with a set of “bullets” or “talking points” designed to explain to consumers the nature and purpose of the survey, procedures for completing and returning survey forms, procedures for protecting the anonymity of respondents, how data will be analyzed, reported, and used, and finally, how consumers may learn about the results.

Parents had the option of handing the form back to the home-based program member after placing it in a sealed envelope; or alternatively, the parent could return the survey in a pre-addressed, stamped envelope.

Response Rates

The MHSIP survey was offered to consumers who were enrolled in an ACT program between 10/14 – 11/17/ 2012. The MHSIP questionnaires were distributed among 78 ACT teams. Not all agencies tracked the number of adult consumers who were offered the survey, however, based on encounter data reported to the state 3,680 consumers received ACT services between the two-week period 10/14-28/2012 and would have been potentially eligible to participate in the survey. Of the 3,680 ACT consumers, 1,603 people responded to the survey for an approximate state-wide response rate of 43.6 percent.

The YSS survey was offered to all families that had a child with serious emotional disturbance in a home-based program. Data were received for 85 home-based programs. Based on encounter data reported to the state, 3,631 consumers received home-based services during the two-week period 10/14-28/2012 and would have been potentially eligible to participate in the survey. Of the families offered the MHSIP YSS-F survey, 1,291 responded for an approximate state-wide response rate of 36.5 percent.

Scoring Protocols

44-item MHSIP Consumer Survey

Scores for the 44 item Consumer Survey for Adults.

There are five subscales in the survey. These subscales are: general satisfaction, access to care, quality of care, participation in treatment planning, outcomes of care, functional status,

and social-connectedness. To obtain individual subscale scores, each response is assigned the following numerical values:

- a. Strongly agree = 1
- b. Agree = 2
- c. Neutral = 3
- d. Disagree = 4
- e. Strongly Disagree = 5

Individual mean scores less than 2.5 are classified as being “in agreement”. The number of respondents “in agreement” is then divided by the total number of respondents with the result multiplied by 100.

26-item YSS for Families

Scores were reported as percentage in agreement. There are six subscales in the YSS survey: access, quality and satisfaction with service, outcomes, family member participation in treatment planning, and cultural sensitivity of staff. Each response in the YSS is assigned the following numerical values:

- f. Strongly agree = 5
- g. Agree = 4
- h. Neutral = 3
- i. Disagree = 2
- j. Strongly Disagree = 1

For the percentage in agreement score, individual mean scores greater than 3.5 are classified as being “in agreement”.

Analyses

The percentage of respondents in agreement for the 7 MHSIP and 6 YSS subscales and are provided at the state-level, the PIHP-level, and the CMHSP-level.

MHSIP Survey – ACT Teams

Percent in Agreement

The state-wide and PIHP analyses in Table 1 show the percent of Michigan consumers receiving ACT who are in agreement on each of the seven domains. State-wide the percent of consumers in agreement was highest for Appropriateness and Quality of Care at 91% in agreement. The percentage in agreement with the other domains was 87% for General Satisfaction, 86% for Access to Care, 81% for Participation in Treatment Planning, 73% for Outcomes, 73% for Functioning, and 69% for Social Connectedness.

There is somewhat of a range for each domain score across the 18 PIHPs. The percentage in agreement for **General Satisfaction** ranges from 79% (Lakeshore) to 96% (CMH for Central

Michigan). The ranges for the other domains were as follows: **Access to Care** 72% (Lakeshore) to 99% (Macomb), **Quality of Care** 76% (Southeast Partnership) to 100% (CMH for Central Michigan), **Participation in Treatment Planning** 67% (Southeast) to 91% (CMH Affiliation of Mid-Michigan), **Outcomes of Care** 54% (Northern Lakes) to 84% (North Care), **Social Connectedness** 47% (Lifeways) to 82% (CMH Affiliation of Mid-Michigan), and **Functioning** 63% (Lakeshore and Lifeways) to 84% (CMH Affiliation of Mid-Michigan).

Table 2 shows scores in more detail by CMHSP.

YSS for Families – Home-Based

The PIHP-wide analyses in Table 3 shows the 2012 results for each of the 6 domains on the YSS. The most positive response was for Cultural Sensitivity (97% agreement) and the least positive response was for Outcomes of Care (59% agreement). While the scores show overall satisfaction, there is somewhat of a range for each domain score across the 18 PIHPs. The team score for **Cultural Sensitivity** show a slight variation from 91 (Northern Lakes) to 100 (Genesee, Macomb, Northern Affiliation, Saginaw, Southwest). The ranges for the other domains are as follows: **Treatment Plan Participation** 89 (CMH for Central Michigan, Southeast Partnership) to 100 (Saginaw), **Access to Care** ranges from 86 (Lakeshore Affiliation) to 100 (North Care, Saginaw, Thumb Alliance), **Appropriateness of Care** 77 (Macomb) to 96 (Thumb Alliance), and **Social Connectedness** 64 (Lakeshore Affiliation) to 90 (Northern Affiliation). The score for **Outcomes of Care** ranged from 36 percent (Lakeshore) to 78 percent (Saginaw).

Table 4 shows scores in more detail by CMHSP.

MHSIP/ACT

Table 1: State-Wide Results for All ACT Teams

MHSIP Domain Scores FY2012

Percentage of Respondents Agreeing with Domain

	Appropriate/ Quality	Access	General Satisfaction	Participation in Treatment Planning	Outcomes	Functioning	Social Connectedness
Access Alliance	88%	80%	85%	77%	66%	70%	68%
CMH Affiliation of Mid-Michigan	96%	94%	91%	91%	82%	84%	82%
CMH for Central Michigan	100%	95%	96%	90%	83%	74%	68%
Detroit-Wayne	91%	88%	88%	85%	77%	74%	68%
Genesee	92%	87%	87%	81%	77%	81%	76%
Lakeshore Affiliation	77%	72%	79%	70%	62%	63%	66%
Lifeways	94%	88%	93%	83%	74%	63%	47%
Macomb	97%	99%	94%	79%	74%	75%	73%
network180	95%	86%	93%	77%	69%	69%	73%
Northern Affiliation	91%	86%	89%	76%	61%	65%	65%
NorthCare	94%	89%	90%	83%	84%	82%	76%
Northern Lakes	94%	85%	87%	74%	54%	70%	63%
Oakland	88%	82%	84%	83%	67%	72%	69%
Saginaw	88%	81%	83%	77%	82%	78%	71%
Southeast Partnership	76%	80%	83%	67%	68%	66%	66%
Southwest Alliance	88%	81%	80%	81%	80%	76%	72%
Thumb Alliance	96%	86%	93%	84%	73%	72%	75%
Venture	91%	83%	81%	76%	74%	75%	67%
State-wide	91%	86%	87%	81%	73%	73%	69%
Number Responding	1,530	1,633	1,715	1,669	1,006	1,623	1,595

Michigan data from the 44-item MHSIP Consumer Satisfaction Survey, collected October 2012

MHSIP/ACT

Table 2: CMHSP-Level Results

MHSIP Domain Scores FY2012
Percentage of Respondents Agreeing with Domain

	Appropriate/Quality		Access		General Satisfaction		Participation in Treatment Planning		Outcomes		Functioning		Social Connectedness	
	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain
Allegan	91%	11	79%	14	86%	14	71%	14	83%	6	77%	13	75%	12
AuSable	94%	33	85%	34	89%	35	74%	35	57%	23	63%	35	79%	34
Bay-Arenac	96%	23	75%	24	88%	25	83%	23	59%	17	64%	25	68%	25
Berrien	93%	14	79%	14	87%	15	64%	14	91%	11	77%	13	77%	13
CEI	95%	22	96%	23	84%	25	84%	25	83%	18	88%	24	96%	24
Central	100%	19	95%	20	96%	23	90%	21	83%	12	74%	23	68%	22
Copper Country	89%	9	89%	9	89%	9	78%	9	80%	5	88%	8	78%	9
Detroit-Wayne	91%	369	88%	379	88%	401	85%	394	77%	235	74%	382	68%	362
Genesee	92%	129	87%	135	87%	137	81%	131	77%	81	81%	124	76%	125
Gogebic		3		4		4		4		3		4		3
Hiawatha BH	86%	7	75%	8	88%	8	100%	8		3	100%	8	75%	8
Huron	92%	13	93%	15	93%	15	80%	15	75%	8	86%	14	70%	10
Ionia		4	100%	5	100%	5		4		3		4	60%	5
Kalamazoo	87%	136	81%	135	81%	139	82%	140	81%	70	76%	138	72%	137
Lapeer	94%	18	82%	17	88%	17	89%	18	73%	15	78%	18	78%	18
Lifeways	94%	49	88%	72	93%	73	83%	71	74%	34	63%	73	47%	72
Livingston	75%	16	88%	16	88%	17	69%	16	75%	12	69%	16	75%	16
Macomb	97%	78	99%	78	94%	86	79%	81	74%	46	75%	81	73%	81
Manistee Benzie	100%	14	93%	15	94%	16	100%	15	88%	8	77%	13	77%	13
Monroe	100%	14	86%	14	81%	16	73%	15	71%	7	73%	15	60%	15
Montcalm	100%	6	100%	7	100%	7	100%	7		1	86%	7	100%	7
Muskegon	86%	28	74%	34	79%	39	70%	37	62%	21	69%	36	68%	37
network180	95%	59	86%	64	93%	70	77%	64	69%	49	69%	59	73%	62
Newaygo	88%	8	88%	8	100%	9	89%	9	60%	5	89%	9	67%	9
North Country	88%	26	88%	26	93%	28	86%	28	81%	16	67%	27	67%	27
Northeast Michigan	88%	17	83%	18	83%	18	65%	17	42%	12	67%	18	35%	17
Northern Lakes	95%	22	91%	22	83%	23	86%	22	57%	14	88%	24	73%	22
Northpointe		3		2		3		3		1		3		3
Oakland	88%	139	82%	148	84%	150	83%	151	67%	86	72%	145	69%	143
Ottawa	68%	25	70%	27	79%	28	70%	27	61%	18	56%	27	63%	27
Pathways	100%	14	93%	14	88%	17	75%	16	85%	13	75%	16	79%	14
Pines BH	88%	16	86%	22	74%	23	82%	22	56%	16	74%	19	33%	18
St. Clair	100%	12	79%	14	93%	14	79%	14	64%	11	64%	14	62%	13
St. Joseph	92%	26	85%	26	76%	29	79%	29	75%	16	72%	25	70%	27
Saginaw	88%	26	81%	27	83%	29	77%	26	82%	17	78%	27	71%	28
Sanilac	96%	24	92%	26	96%	26	84%	25	79%	14	72%	25	79%	24
Shiawassee	67%	9	78%	9	90%	10	70%	10	86%	7	75%	8	56%	9
Summit Pointe	93%	14	88%	17	82%	17	75%	16	60%	10	63%	16	76%	17
Tuscola	77%	13	64%	14	63%	16	63%	16	63%	8	56%	16	60%	15
Van Buren	92%	25	79%	28	83%	29	79%	28	86%	21	84%	25	78%	27
Washtenaw	50%	12	68%	19	80%	20	61%	18	58%	12	56%	16	63%	16
West Michigan	92%	25	80%	30	90%	30	65%	31	52%	21	57%	30	55%	29
State-wide	91%	1,530	86%	1,633	87%	1,715	81%	1,669	73%	1,006	73%	1,623	69%	1,595

Michigan data from the 44-item MHSIP Consumer Satisfaction Survey, collected October 2012

Percentages for cells with fewer than five respondents have been blacked out.

YSS/Home-Based

Table 3: PIHP-Level Results for Home-Based Programs

YSS Domain Scores FY2012

Percentage of Respondents Agreeing with Domain

	Cultural Sensitivity	Participation in Treatment Planning	Access	Appropriate/ Quality	Social Connectedness	Outcomes
Access Alliance	92%	93%	93%	89%	86%	59%
CMH Affiliation of Mid-Michigan	98%	97%	95%	89%	81%	65%
CMH for Central Michigan	92%	89%	97%	83%	76%	50%
Detroit-Wayne	94%	98%	94%	93%	86%	61%
Genesee	100%	95%	99%	94%	86%	54%
Lakeshore Affiliation	93%	93%	86%	79%	64%	36%
Lifeways	97%	91%	97%	89%	79%	69%
Macomb	100%	91%	89%	77%	86%	40%
network180	98%	97%	97%	88%	86%	57%
Northern Affiliation	100%	95%	90%	95%	90%	52%
North Care	94%	95%	100%	89%	85%	76%
Northern Lakes	91%	97%	88%	86%	67%	56%
Oakland	97%	95%	94%	87%	81%	56%
Saginaw	100%	100%	100%	89%	89%	78%
Southeast Partnership	93%	89%	91%	90%	82%	47%
Southwest Alliance	100%	98%	95%	87%	76%	64%
Thumb Alliance	97%	96%	100%	96%	85%	65%
Venture	99%	95%	99%	87%	82%	60%
State-wide	97%	95%	95%	89%	82%	59%
Number Responding	1,333	1,373	1,379	1,357	1,356	1,326

Data from the 26-item MHSIP YSS-F Consumer Satisfaction Survey, collected October 2012.

YSS/Home-Based

Table 4:
CMHSP-Level Results for Home-Based Programs

YSS Domain Scores FY2012
Percentage of Respondents Agreeing with Domain

	Access		Appropriate/Quality		Outcomes		Participation in Treatment Planning		Cultural Sensitivity		Social Connectedness	
	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain	% Agree	Total Responding to Domain
Allegan	100%	12	92%	12	75%	12	100%	12	100%	11	75%	12
AuSable		3		3		3		3		3		3
Barry	-	-	-	-	-	-	-	-	-	-	-	-
Bay-Arenac	71%	21	57%	21	33%	21	71%	21	67%	21	65%	20
Berrien	99%	89	84%	87	60%	82	93%	87	99%	82	82%	88
Woodlands(Cass)	91%	11	82%	11	64%	11	91%	11	100%	11	73%	11
CEI	92%	84	83%	82	58%	81	96%	84	99%	80	81%	83
Central	97%	36	83%	35	50%	34	89%	37	92%	37	76%	37
Copper Country	100%	5	100%	5	100%	5	100%	5	100%	4	80%	5
Detroit-Wayne	94%	258	93%	257	61%	260	98%	261	94%	251	86%	251
Genesee	99%	81	94%	81	54%	78	95%	79	100%	79	86%	80
Gogebic		1		1		1		1		1		1
Gratiot	99%	69	97%	67	77%	69	97%	68	99%	68	89%	70
Hiawatha BH		3		3		2		3		3		3
Huron	100%	8	100%	8	50%	6	88%	8	100%	8	88%	8
Ionia	95%	19	89%	19	68%	19	95%	19	95%	19	63%	19
Kalamazoo	98%	43	86%	42	64%	42	100%	43	100%	42	74%	43
Lapeer	100%	10	100%	10	70%	10	100%	10	100%	10	100%	9
Lenawee	100%	5	60%	5	20%	5	80%	5	60%	5	60%	5
Lifeways	97%	35	89%	35	69%	32	91%	35	97%	34	79%	34
Livingston	100%	10	100%	10	70%	10	90%	10	100%	10	90%	10
Macomb	89%	36	77%	35	40%	35	91%	35	100%	34	86%	36
Manistee-Benzle	100%	11	82%	11	40%	10	100%	11	100%	10	60%	10
Monroe	93%	27	89%	27	52%	27	89%	27	93%	27	89%	27
Montcalm	100%	11	100%	11	78%	9	100%	11	100%	10	90%	10
Muskegon	83%	6	67%	6	33%	6	100%	6	100%	6	67%	6
network180	97%	58	88%	58	57%	56	97%	58	98%	56	86%	57
Newaygo	100%	7	83%	6	43%	7	100%	7	100%	7	86%	7
North Country	100%	11	100%	11	64%	11	100%	11	100%	11	100%	11
Northeast Michigan	86%	7	86%	7	57%	7	100%	7	100%	7	100%	7
Northern Lakes	90%	20	88%	16	53%	15	95%	20	95%	19	80%	20
Northpointe	-	-	-	-	-	-	-	-	-	-	-	-
Oakland	94%	126	87%	124	56%	123	95%	125	97%	124	81%	126
Ottawa	88%	8	88%	8	38%	8	88%	8	88%	8	63%	8
Pathways	100%	11	78%	9	78%	9	91%	11	90%	10	100%	11
Pines BH		4		3		4		3		4		4
St. Clair	100%	55	96%	55	64%	50	95%	55	96%	52	85%	53
St. Joseph	88%	17	88%	17	54%	13	94%	17	100%	16	82%	17
Saginaw	100%	9	89%	9	78%	9	100%	9	100%	7	89%	9
Sanilac	100%	5	80%	5	60%	5	100%	5	100%	5	60%	5
Shiawassee	100%	8	100%	8	100%	8	100%	8	100%	8	100%	8
Summit Pointe	100%	58	95%	55	61%	57	96%	57	98%	56	81%	57
Tuscola	98%	48	96%	48	60%	43	100%	48	100%	45	91%	44
Van Buren	100%	5	80%	5		4		4	100%	5		3
Washtenaw	80%	15	94%	16	33%	15	93%	15	100%	14	73%	15
West Michigan	85%	13	85%	13	58%	12	100%	13	85%	13	46%	13
State-wide	95%	1,379	89%	1,357	59%	1,326	95%	1,373	97%	1,333	82%	1,356

Data from the 26-item MHSIP YSS-F Consumer Satisfaction Survey, collected October 2012.

There was no data available from Barry and Northpointe CMH's

Percentages for cells with fewer than five respondents have been blacked out.

APPENDIX

Consumer Satisfaction Survey

MHSIP Subscales and Scoring Protocols

Youth Satisfaction Survey for Families

YSS Subscales and Scoring Protocols

CONSUMER SATISFACTION SURVEY

In order to provide the best mental health services possible, we'd like to know what you think about the Assertive Community Treatment (ACT) team services you have received during the last **six** months, the people who provided these services to you, and the results that have been achieved. There are no right or wrong answers to the questions in this survey. Please indicate your agreement or disagreement with each of the following statements by filling in the circle that best represents your opinion. If a question does not apply to you, then fill in the "NA" circle for "not applicable." Your answers will remain strictly confidential.

☐ **Completed without assistance**

☐ **Completed with assistance**

	Strongly Agree (SA)	Agree (A)	I am Neutral (N)	Disagree (D)	Strongly Disagree (SD)	Not Applicable (NA)
1. I like the services that I received.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
2. If I had other choices, I would still choose to get services from this mental healthcare provider.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
3. I would recommend this agency to a friend or family member.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
4. The location of services was convenient.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
5. Staff were willing to see me as often as I felt it was necessary.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
6. Staff returned my calls within 24 hours.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
7. Services were available at times that were good for me.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
8. I was able to get all the services I thought I needed.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
9. I was able to see a psychiatrist when I wanted to.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
10. Staff believed that I could grow, change and recover.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
11. I felt comfortable asking questions about my treatment, services, and medication.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
12. I felt free to complain.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉

13. I was given information about my rights.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
14. Staff encouraged me to take responsibility for how I live my life.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉

15. Staff told me what side effects to watch for.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
16. Staff respected my wishes about who is and who is not to be given information about my treatment services.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
17. I, not staff, decided my treatment goals.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
18. Staff were sensitive to my cultural/ethnic background (e.g., race, religion, language, etc.).	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
19. Staff helped me obtain the information I needed so that I could take charge of managing my illness or disability.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
As a direct result of the services I received:	Strongly Agree (SA)	Agree (A)	I am Neutral (N)	Disagree (D)	Strongly Disagree (SD)	Not Applicable (NA)
21. I deal more effectively with daily problems.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
22. I am better able to control my life.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
23. I am better able to deal with crisis.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
24. I am getting along better with my family.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉
25. I do better in social situations.	(SA) ₁	(A) ₂	(N) ₃	(D) ₄	(SD) ₅	(NA) ₉

26. I do better in school and/or work.	<input type="radio"/> SA ₁	<input type="radio"/> A ₂	<input type="radio"/> N ₃	<input type="radio"/> D ₄	<input type="radio"/> SD ₅	<input type="radio"/> NA ₉
27. My housing situation has improved.	<input type="radio"/> SA ₁	<input type="radio"/> A ₂	<input type="radio"/> N ₃	<input type="radio"/> D ₄	<input type="radio"/> SD ₅	<input type="radio"/> NA ₉
28. My symptoms are not bothering me as much.	<input type="radio"/> SA ₁	<input type="radio"/> A ₂	<input type="radio"/> N ₃	<input type="radio"/> D ₄	<input type="radio"/> SD ₅	<input type="radio"/> NA ₉

Thank you for completing this survey.

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MHSIP Consumer Survey for Adults with Mental Illness Subscales and Scoring Protocols

Subscales

1. General Satisfaction

Q1, Q2, Q3

2. Access

Q4, Q5, Q6, Q7, Q8, Q9

3. Quality/Appropriateness

Q10, Q12, Q13, Q14, Q15, Q16, Q18, Q19, Q20

4. Participation in Treatment Planning

Q11, Q17

5. Outcomes

Q21, Q22, Q23, Q24, Q25, Q26, Q27, Q28

6. Functioning

Q29, Q30, Q31, Q32

7. Social Connectedness

Q33, Q34, Q35, Q36

Scoring Protocols for 28-item Consumer Survey

Scores for the Consumer Survey for Adults are reported in two ways:

1. Subscale Means

There are 5 subscales in the survey. To obtain individual subscale scores, each response is assigned the following numerical values:

Strong Agree = 1
Agree = 2
Neutral = 3
Disagree = 4
Strongly Disagree = 5

For each respondent, scores for each item in the subscale are summed, then divided by the total number of items in the subscale. The result is a mean score for each individual respondent that may vary between 1 and 5.

To obtain the program mean, individual means are summed and then divided by the total number of respondents.

2. Percentage of Respondents in Agreement (by subscale)

Individual subscale means are computed for each respondent with valid data using the protocol described in section 1.

Individual mean scores less than 2.5 are classified as being “in agreement.” The number of respondents “in agreement” is then divided by the total number of respondents with the result multiplied by 100.

YOUTH SERVICES SURVEY FOR FAMILIES

In order to provide the best care possible, we'd like to know what you think about the services your child has received from our agency **over the last 6 months**. There are no right or wrong answers to the questions in this survey. Please indicate your agreement or disagreement with each of the following statements by filling in the circle that best represents your opinion. All responses will remain strictly confidential.

☐ **Completed without assistance**

☐ **Completed with assistance**

	Strongly Disagree (SD)	Disagree (D)	Undecided (UN)	Agree (A)	Strongly Agree (SA)
1. Overall, I am satisfied with the services my child received.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
2. I helped to choose my child's services.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
3. I helped to choose the goals in my child's service plan.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
4. The people helping my child stuck with us no matter what.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
5. I felt my child had someone to talk to when he/she was troubled.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
6. I participated in my child's treatment/services.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
7. The services my child and/or family received were right for us.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
8. The location of services was convenient for us.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
9. Services were available at times that were convenient for us.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
10. My family got the help we wanted for my child.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
11. My family got as much help as we needed for my child.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
12. Staff treated me with respect.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
13. Staff respected my family's religious/spiritual beliefs.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅
14. Staff spoke with me in a way that I understood.	(SD) ₁	(D) ₂	(UN) ₃	(A) ₄	(SA) ₅

15. Staff were sensitive to my cultural/ethnic background (e.g., race, religion, language)	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
As a direct result of the services I received:	Strongly Disagree (SD)	Disagree (D)	Undecided (UN)	Agree (A)	Strongly Agree (SA)
16. My child is better at handling daily life.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
17. My child gets along better with family members.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
18. My child gets along better with friends and other people.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
19. My child is doing better in school and/or work.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
20. My child is better able to cope when things go wrong.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
21. I am satisfied with our family life right now.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
22. My child is better able to do things he or she wants to do.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
As a result of the services my child and/or family received: <i>please answer for relationships with persons other than your mental health provider(s)</i>	Strongly Disagree (SD)	Disagree (D)	Undecided (UN)	Agree (A)	Strongly Agree (SA)
23. I know people who will listen and understand me when I need to talk.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
24. I have people that I am comfortable talking with about my child's problems.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
25. In a crisis, I would have the support I need from family or friends.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅
26. I have people with whom I can do enjoyable things.	<input type="radio"/> SD ₁	<input type="radio"/> D ₂	<input type="radio"/> UN ₃	<input type="radio"/> A ₄	<input type="radio"/> SA ₅

Thank you for completing this survey.

Youth Services Survey (YSS) for Families Subscales and Scoring Protocols

Subscales

1. Access

Q8, Q9

2. Participation in Treatment

Q2, Q3, Q6

3. Cultural Sensitivity

Q12, Q13, Q14, Q15

4. Appropriateness

Q1, Q4, Q5, Q7, Q10, Q11

5. Outcomes

Q16, Q17, Q18, Q19, Q20, Q21, Q22

6. Social Connectedness

Q23, Q24, Q25, Q26

7. Functioning (What is the difference from outcomes? I need to ask SAMHSA)

Q16, Q17, Q18, Q19, Q20, Q22

Scoring Protocols for 26-item YSS for Families

Scores for the 26-item Youth Services Survey for Families are reported in two ways:

3. Subscale Means

There are 6 subscales in the survey. To obtain individual subscale scores, each response is assigned the following numerical values:

Strong Agree = 5
Agree = 4
Neutral = 3
Disagree = 2
Strongly Disagree = 1

For each respondent, scores for each item in the subscale are summed, then divided by the total number of items in the subscale. The result is a mean score for each individual respondent that may vary between 1 and 5.

To obtain the program mean, individual means are summed and then divided by the total number of respondents.

4. Percentage of Respondents in Agreement (by subscale)

FOR YSS-F: calculate the percent of scores greater than 3.5. (percent agree and strongly agree).

Individual subscale means are computed for each respondent with valid data using the protocol described in section 1.

Individual mean scores greater than or equal to 3.5 are classified as being “in agreement.” The number of respondents “in agreement” is then divided by the total number of respondents with the result multiplied by 100.

YSS-F Functioning Domain Items:

- 1 My child is better able to do things he or she wants to do.
- 2 My child is better at handling daily life. (existing YSS-F Survey item)
- 3 My child gets along better with family members. (existing YSS-F Survey item)
- 4 My child gets along better with friends and other people. (existing YSS-F Survey item)
- 5 My child is doing better in school and/or work. (existing YSS-F Survey item)
- 6 My child is better able to cope when things go wrong. (existing YSS-F Survey item)

SECTION 404 (2)(e)(i)(ii)(g)
ACCESS TO SERVICE & CMHSP NEEDS
ASSESSMENT
FY 2012

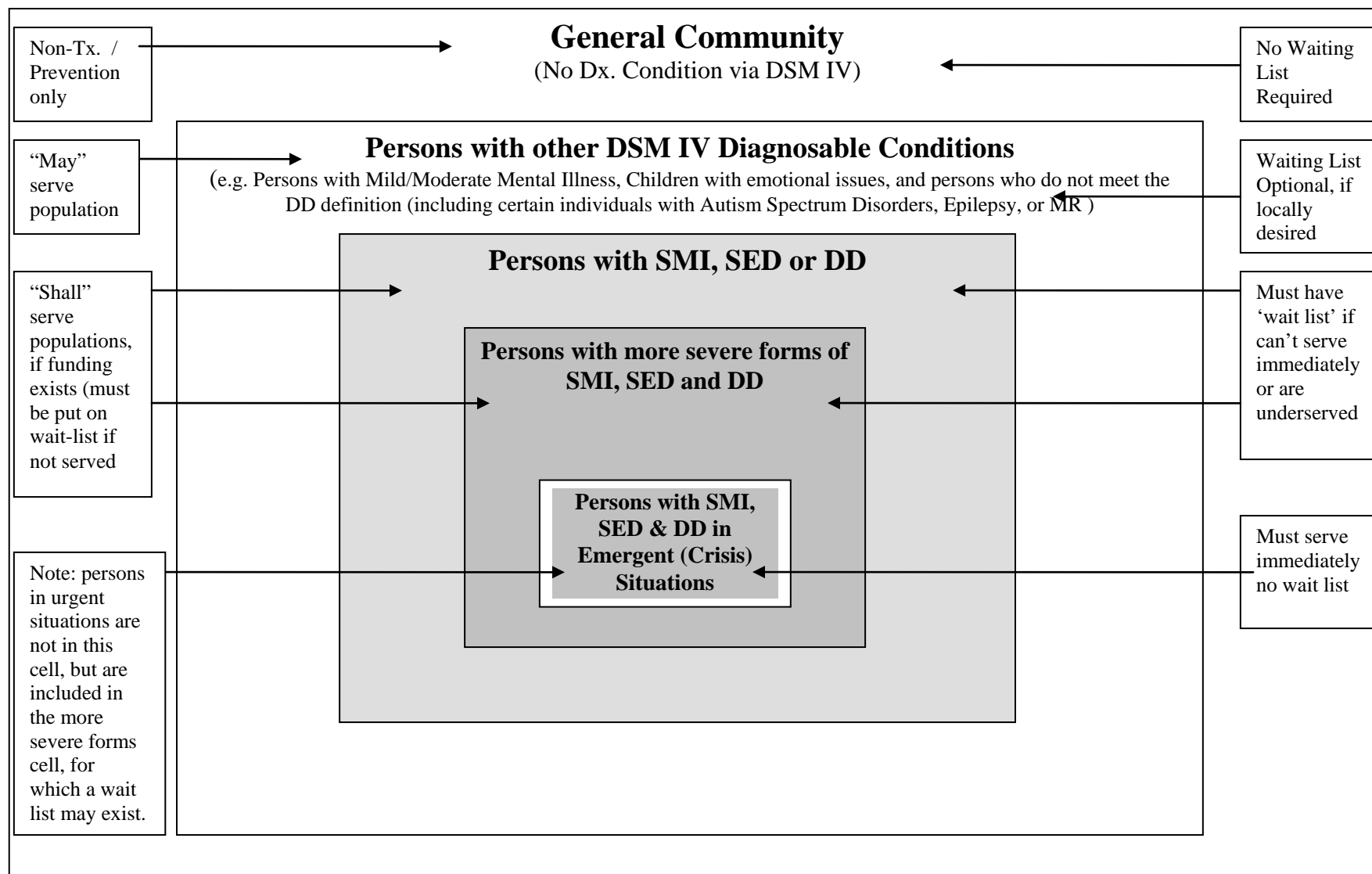
CMHSP Summary of Access to Service Needs Assessment

The Mental Health Code MCL 330.1226(1)(a) requires an annual needs assessment be conducted by every CMHSP. Beginning with FY 12, every CMHSP utilized a standardized process to meet this requirement. The process involved data collection, community stakeholder engagement, and identification of the key issues found including a prioritized list for local action. The Priority Needs and Planned Action portion of the Needs Assessment process for each CMHSP is included in this report.

MDCH remains committed to the policy that the overall purpose of the public mental health system is to provide necessary services to all individuals with mental health needs. However, given the current financing climate, it is also realized that funds may be insufficient to address the needs of all individuals desiring to receive services from the public mental health system. Thus, a CMHSP may need to prioritize who receives public mental health services and, when it cannot address all needs, establish a waiting list process that ensures systematic access into services and ongoing service delivery. It remains the perspective of MDCH that a waiting list should only be considered as a last resort. Yet, when it is determined necessary, the management of the waiting list process shall always be based on objective and fair criteria with consistent implementation.

The Standards Group, along with the MDCH, has developed a Technical Advisory to issue specific guidelines to any CMHSP that establishes a waiting list because it cannot provide Mental Health Code required mental services for its Code-defined priority population due to insufficient funds. This Advisory specifies the minimum standards that must be met by each CMHSP in the management of its waiting list processes. The Population Cell Grid, which was developed to guide waiting list decisions made by CMHSP's, is listed below.

The Standards Group
GF Waiting List: Population Cells Service Priorities



Note: CMH use of GF dollars shall go from inside cell to outside cells, as available dollars permit.

Period: October 1, 2011 to September 30, 2012

**All CMHs
Alpha by PIHP**

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Access Alliance / Bay-Arenac					Access Alliance / Huron					Access Alliance / Montcalm				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	146	2,010	579	1,081	3,816	27	377	97	179	680	58	490	229	384	1,161
2	Is Info on row 1 an unduplicated count? (yes/no)	y	y	y	y	YES	y	y	y	y	yes	y	y	y	y	yes
3	# referred out due to non MH needs (of row 1)	0	2	0	1	3	0	0	0	0	0	0	0	0	0	0
4	# seeking substance abuse services (of row 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Total # who requested services the CMHSP provides (of row1)	109	1,432	456	925	2,922	23	263	84	175	545	54	353	200	366	973
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	3	15	5	585	608	1	7	3	118	129	1	4	5	270	280
7	Of the # in Row 5 - How many people were scheduled for assessment	106	1,417	451	340	2,314	22	256	81	57	416	53	349	195	96	693
8	other--describe	37	576	123	155	891	4	114	13	4	135	4	137	29	18	188

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	9	5	0	243	257	1	9	2	44	56	12	0	0	96	108
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0	0	0	0	0	0	12	18	0	30	30
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	56	23	1	80	0	0	0	0	0	1	61	15	0	77
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	0	0	0	0	0	0	0	0	0	25	7	0	32	32
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0	0	0	0	0	0	0	0	1	36	8	0	45
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	97	1,356	428	96	1,977	21	247	79	13	360	40	276	162	10	488
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	2	68	5	8	83	1	20	0	0	21	0	32	6	5	43
15	Of the # in Row 13 - How many met immediate admission criteria	95	1,288	423	88	1,894	20	227	79	13	339	40	244	156	5	445
16	Of the # in Row 13 - How many were put on a waiting list					0					0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services					0					0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services					0					0	0	0	0	0	0
17	Other - explain					0	0	0	0	0	0	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Access Alliance / Shiawassee					Access Alliance / Tuscola					Affiliation of Mid-Michigan / Clinton-Eaton-Ingham				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	49	632	241	330	1,252	57	414	129	311	911				6,166	6,166
2	Is Info on row 1 an unduplicated count? (yes/no)	y	y	y	y	yes	y	y	y	y	yes					
3	# referred out due to non MH needs (of row 1)	0	0	0	0	0	0	0	0	0	0				917	917
4	# seeking substance abuse services (of row 1)	0	1	0	0	1	0	0	0	0	0				43	43
5	Total # who requested services the CMHSP provides (of row1)	45	476	210	318	1,049	50	314	107	292	763	231	1,512	1,050	948	3,741
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	1	5	2	216	224	1	9	1	177	188	41	742	285	6	1,074
7	Of the # in Row 5 - How many people were scheduled for assessment	44	471	208	102	825	49	305	106	115	575	190	770	765	942	2,667
8	other--describe	4	155	31	12	202	7	100	22	19	148					0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	6	2	1	92	101	9	11	2	103	125	5	135	87		227
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0	0	0	0	0	0					0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	0	0	0	0	0	0	0	0	0					0
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	0	0	0	0	0	0	0	0	0					0
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0	0	0	0	0	0	0	0					0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	38	469	207	10	724	40	294	104	12	450	165	710	761	942	2,578
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	5	152	43	4	204	0	16	1	0	17					0
15	Of the # in Row 13 - How many met immediate admission criteria	33	317	164	6	520	40	278	103	12	433	1	1	1	1	4
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0					0					0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0					0					0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0					0					0
17	Other - explain	0	0	0	0	0	0	0	0	0	0					0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Affiliation of Mid-Michigan / Gratiot					Affiliation of Mid-Michigan / Ionia					Affiliation of Mid-Michigan / Manistee-Benzie				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	33	493	296	12	834	40	1,139	516	68	1,763	16	531	221	2,350	3,118
2	Is Info on row 1 an unduplicated count? (yes/no)	No	No	No	No	No	no	no	no	no	no	N	N	N	N	
3	# referred out due to non MH needs (of row 1)	3	81	34	2	120	5	101	28	22	156	0	0	0	2,350	2,350
4	# seeking substance abuse services (of row 1)	1	165	24	0	190	0	23	2	6	31	0	0	0	0	0
5	Total # who requested services the CMHSP provides (of row1)	30	412	262	10	714	31	917	430	46	1,424	16	531	221	0	768
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	5	121	65	4	195	7	326	239	46	618	0	0	0	0	0
7	Of the # in Row 5 - How many people were scheduled for assessment	25	291	197	6	519	24	587	195	0	806	16	531	221	0	768
8	other--describe					0	3	73	22	22	120	0	0	0	0	0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	0	38	25	3	66	4	240	47	0	291	5	93	44	0	142
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	11	4	0	15
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0		0	0	102	91	8	201	2	18	23	0	43
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	0	0	0	0	0	0	0	0	0	2	64	8	0	74
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	0	0	0	0	0	0	0	0	0	2	59	8	0	69
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0		0	0	0	0	0	0	0	5	0	0	5
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	25	291	197	6	519	20	245	57	0	322	7	345	142	0	494
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	1	1	1		3	2	135	11	0	148	3	107	34	0	144
15	Of the # in Row 13 - How many met immediate admission criteria	25	291	197	6	519	20	245	57	0	322	2	203	106	0	311
16	Of the # in Row 13 - How many were put on a waiting list	0	32	1	0	33	0	0	0	0	0	2	35	2	0	39
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	32	1	0	33	0	0	0	0	0	2	35	2	0	39
17	Other - explain					0	0	0	0	0	0	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Affiliation of Mid-Michigan / Newaygo					Central Michigan					Detroit-Wayne				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	33	969	368	0	1,370	129	2,929	1,077	1,830	5,965	1,110	11,814	4,679	79,651	97,254
2	Is Info on row 1 an unduplicated count? (yes/no)	no	yes	yes	no		No	No	No	No	No	no	no	no	no	no
3	# referred out due to non MH needs (of row 1)	0	12	2	0	14	0	0	0	732	732	0	0	0	12,200	12,200
4	# seeking substance abuse services (of row 1)	0	19	0	0	19	0	0	0	13	13	32	4,723	401	55	5,211
5	Total # who requested services the CMHSP provides (of row1)	33	929	368	0	1,330	129	2,929	1,077	1,085	5,220	1,110	11,809	4,723	2,506	20,148
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	5	403	88	0	496	5	179	22	333	539	40	601	380	0	1,021
7	Of the # in Row 5 - How many people were scheduled for assessment	25	584	256	0	865	120	2,666	1,049	645	4,480	1,066	11,140	4,245	0	16,451
8	other--describe					0	4	84	6	107	201	0	0	0	2,506	2,506

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	4	63	33	0	100	0	0	0	1,224	1,224	323	2,836	954	0	4,113
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	9	27	13	0	49
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	2	7	0	9	0				0					0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	2	7	0	9	5	154	37	160	356	6	72	5	0	83
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	147	37	0	184	5	154	37	160	356					0
12b	Of the # in row 12 - How many were not referred out to other mental health providers		41	10	0	51	0	0	0	0	0					0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	21	329	162	0	512	108	1,918	828	6	2,860	601	6,628	3,051	0	10,280
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	53	29	0	82	0	102	19	0	121	28	3,237	647	0	3,912
15	Of the # in Row 13 - How many met immediate admission criteria	21	329	162	0	512	108	1,816	809	6	2,739	601	6,628	3,051	0	10,280
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	39	1	0	40	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	39	1	0	40	0	0	0	0	0
17	Other - explain					0	0	0	0	0	0	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Genesee					Lakeshore Behavioral Health Alliance / Muskegon					Lakeshore Behavioral Health Alliance / Ottawa				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	327	7,258	892		8,477	172	3,638	1,175		4,985	117	1,037	280	8	1,442
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no	no	no	no	no			Yes	Yes	Yes	Yes	
3	# referred out due to non MH needs (of row 1)	28	1,602	301		1,931	0	363	225		588	15	90	32	3	140
4	# seeking substance abuse services (of row 1)	44	3,986	26		4,056	1	147	5		153	0	0	0	0	0
5	Total # who requested services the CMHSP provides (of row1)	311	6,130	650		7,091	172	3,491	950		4,613	102	947	248	5	1,302
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	14	1,599	14		1,627	26	1,301	525		1,852	4	44	15	5	68
7	Of the # in Row 5 - How many people were scheduled for assessment	299	5,656	591		6,546	146	1,730	455		2,331	98	903	233		1,234
8	other--describe	0	0	0		0					0					0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	12	474	59		545	1	133	5		139	31	212	36	0	279
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0		0	0	218	23		241	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	11	305	39		355	0	137	16		153	0	0	0	0	0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	42	1,116	68		1,226	0	337	0		337	7	222	22	0	251
12a	Of the # in row 12 - How many were referred out to other mental health providers	42	1,116	68		1,226	8	0	0		8	7	222	22	0	251
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0		0	0	0	0		0	0	0	0	0	0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	228	1,614	500		2,342	72	1,242	432		1,746	60	469	175	0	704
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	34	0		34	0	339	51		390	0	0	0	0	0
15	Of the # in Row 13 - How many met immediate admission criteria	228	1,586	500		2,314	1	22	3		26	58	352	171	0	581
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0		0	2	117	4	0	123
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0		0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0		0	2	117	4	0	123
17	Other - explain	0	0	0	0	0					0	1	16	7	0	24

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Lifeways					Macomb					Network 180				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	226	4,038	896	0	5,160	1,197	8,185	2,041	299	11,722	335	10,246	3,052	3,378	17,011
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no	Yes	No	No	No	No	No	No	No	No	No	
3	# referred out due to non MH needs (of row 1)	3	7	3	0	13	389	2,660	663	97	3,809	24	111	38	0	173
4	# seeking substance abuse services (of row 1)	0	88	3	0	91	59	4,430	172	34	4,695	0	0	0	3,378	3,378
5	Total # who requested services the CMHSP provides (of row1)	124	2,267	657	8	3,056	808	5,525	1,378	202	7,913	311	10,135	3,014	0	13,460
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	19	1,324	238	0	1,581	64	285	122	84	555	11	241	74	0	326
7	Of the # in Row 5 - How many people were scheduled for assessment	106	972	397	0	1,475	663	4,693	1,039	33	6,428	300	9,894	2,940	3,378	16,512
8	other--describe	13	159	65	8	245	60	476	159	77	772					0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	3	226	91	0	320	107	1,411	215	6	953	89	240	14	0	343
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	4	4	0	8	3	26	17	1	47	1	62	54	0	117
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	6	171	44	0	221	9	22	8	1	35	12	458	44	0	514
12a	Of the # in row 12 - How many were referred out to other mental health providers	3	127	28	0	158	0	6	3	0	8	2	165	17	0	184
12b	Of the # in row 12 - How many were not referred out to other mental health providers	3	44	16	0	63	8	12	2	0	19	10	293	27	0	330
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	98	589	250	0	937	422	2,734	631	14	1,678	171	8,753	2,599	0	11,523
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	5	25	9	0	39	60	830	189	30	1,072	30	1,127	194	0	1,351
15	Of the # in Row 13 - How many met immediate admission criteria	93	564	241	0	898	422	2,734	631	14	3,801	141	7,626	2,405	0	10,172
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	526	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	14	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	255	0	0	0	0	0
17	Other - explain	0	0	0	0	0	0	0	0	0	5					0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		NorthCare / Copper Country					NorthCare / Gogebic					NorthCare / Hiawatha				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	15	306	119	600	1,040	9	128	63	257	457	42	332	167	518	1,059
2	Is Info on row 1 an unduplicated count? (yes/no)	No	No	No	No		NO	NO	NO	NO		No	No	No	No	
3	# referred out due to non MH needs (of row 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	# seeking substance abuse services (of row 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Total # who requested services the CMHSP provides (of row1)	15	306	119	0	440	9	128	63	0	200	42	332	167	0	541
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	0	143	22	0	165	0	67	12	0	79	0	182	39	0	221
7	Of the # in Row 5 - How many people were scheduled for assessment	15	163	97	0	275	9	61	51	0	121	42	150	128	0	320
8	other--describe					0					0					0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	1	46	16	0	63	0	13	3	0	16	3	19	24	5	51
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0					0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0	0	1	6	0	7					0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	7	4	0	11	0	3	2	0	5	5	24	8	2	39
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	6	3	0	9	0	3	2	0	5		4	1		5
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	1	1	0	2	0	0	0	0	0	5	20	7	2	34
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	14	110	77		201	9	44	40	0	93	33	76	81	17	207
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	0	0	0	0	0	0	0	0	0					0
15	Of the # in Row 13 - How many met immediate admission criteria	0	0	0	0	0	0	0	0	0	0					0
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0					0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0					0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0					0
17	Other - explain	0	0	0	0	0	0	0	0	0	0					0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		NorthCare / Northpointe					NorthCare / Pathways					Northern Affiliation / AuSable				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	60	510	201	899	1,670	80	696	273	1,580	2,629	30	904	439	39	1,412
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no		no	no	no	no	n/a	Y	Y	Y	Y	
3	# referred out due to non MH needs (of row 1)	0	0	0	0	0	0	0	0	0	0	0	9	7	0	16
4	# seeking substance abuse services (of row 1)	0	0	0	0	0	0	0	0	0	0	0	8	1	0	9
5	Total # who requested services the CMHSP provides (of row1)	60	510	201	0	738	80	696	273	0	1,049	30	887	431	39	1,387
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	0	267	33	0	300	9	388	62	0	459	0	80	33	0	113
7	Of the # in Row 5 - How many people were scheduled for assessment	60	243	168	0	471	71	308	211	0	590	30	807	398		1,235
8	other--describe	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	1	65	24	0	56	2	26	7	24	59	11	44	25	0	80
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0	0	0	0	0	0	0	81	10	0	91
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	39	0	0	39	1	21	4	0	26	0	10	0	0	10
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	39	0	0	39	0	16	2	0	18	0	10	0	0	10
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0	0	0	1	5	2	0	8	0	0	0	0	0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	60	204	168	0	432	68	261	200	0	529	19	309	363	0	691
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	0	0	0	0	0	0	0	0	0	0	496	77	0	573
15	Of the # in Row 13 - How many met immediate admission criteria	60	204	168	0	432	68	261	200	0	529	19	144	286	0	449
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain	0	0	0	0	0	8	26	2	0	36	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

Report on the Requests for Services and
Disposition of Requests

CMHSP Point of Entry-Screening		Northern Affiliation / North Country					Northern Affiliation / Northeast					Northern Affiliation / Northern Lakes				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	111	1,755	830	142	2,838	23	990	288	54	1,355	157	2,286	996	0	3,439
2	Is Info on row 1 an unduplicated count? (yes/no)	Yes	Yes	Yes	Yes		Yes	Yes	Yes	Yes	Y	N	N	N	N	
3	# referred out due to non MH needs (of row 1)	0	47	17	0	64	0	12	5	0	17	3	77	42	0	122
4	# seeking substance abuse services (of row 1)	0	21	2	0	23	0	3	0	0	3	0	120	7	0	127
5	Total # who requested services the CMHSP provides (of row1)	111	1,687	811	142	2,751	22	935	272	54	1,283	154	2,089	947	0	3,190
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	0	252	128	0	380	0	114	41	0	155	5	390	118	0	513
7	Of the # in Row 5 - How many people were scheduled for assessment	111	1,435	683	15	2,244	22	947	225	54	1,248	140	1,634	778	0	2,552
8	other--describe	0	0	0	127	127	0	0	0	47	0	9	65	51	0	125

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	6	296	67	0	369	0	41	3	49	93	32	628	207	0	867
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	43	19	0	62	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	9	12	0	21	0	0	0	0	0	0	0	0	0	0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	209	59	0	268	1	37	0	0	38	14	173	76	0	263
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	14	5	0	19	0	0	0	0	0	5	53	11	0	69
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	195	54	0	249	0	6	0	0	6	9	120	65	0	194
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	105	810	499	0	1,414	21	863	222	0	1,106	94	833	495	0	1,422
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	68	27	0	95	2	77	9	0	88	0	38	11	0	49
15	Of the # in Row 13 - How many met immediate admission criteria	105	810	499	0	1,414	2	77	9	0	88	94	829	495	0	1,418
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	4	0	0	4
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	4	0	0	4
17	Other - explain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Northern Affiliation / West Michigan					Oakland					Saginaw				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	51	2,148	700	578	3,477	470	3,877	1,172	31,135	36,654	159	981	478	75	1,693
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no		no	no	no	no		no	no	no	no	
3	# referred out due to non MH needs (of row 1)	47	1,985	646	404	3,082	0	0	0	0	0	51	347	213	71	682
4	# seeking substance abuse services (of row 1)	0	46	1	245	292	0	0	0	2,084	2,084	0	12	0	0	12
5	Total # who requested services the CMHSP provides (of row1)	22	641	237	242	1,142	470	3,877	1,172	209	5,728	101	366	212	0	679
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	13	29	31	225	298	18	1,089	286	0	1,393	0	12	3	0	15
7	Of the # in Row 5 - How many people were scheduled for assessment	19	612	206	17	854	470	2,755	873	0	4,098	101	353	208	0	662
8	other--describe					0	12	33	13	209	267	0	1	1	0	2

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	1	77	14	0	92	12	33	13	209	267	1	140	37	0	178
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	80	22	0	102	3	21	0	0	24
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	2	3	0	5	4	247	223	0	474	1	26	17	0	44
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	32	10	0	42	14	762	41	0	817	4	15	2	0	21
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	0	0	0	0	10	352	29	0	391	4	15	2	0	21
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	32	10	0	42	4	410	12	0	426	0	0	0	0	0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	18	501	179	17	715	440	2,755	873	0	4,068	92	151	152	0	395
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	5	4	0	9	0	0	0	0	0	0	0	0	0	0
15	Of the # in Row 13 - How many met immediate admission criteria	18	496	175	17	706	440	2,755	873	0	4,068	92	151	152	0	395
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain					0	0	0	0	0	0					0

Period: October 1, 2011 to September 30, 2012

Report on the Requests for Services and
Disposition of Requests

CMHSP Point of Entry-Screening		Southeast Michigan / Lenawee					Southeast Michigan / Livingston					Southeast Michigan / Monroe				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	46	994	293	67	1,400	175	1,461	585	496	2,717	123	1,426	451	66	2,066
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no	NO	no	no	no	no	no	no	no	no	no	yes
3	# referred out due to non MH needs (of row 1)	0	24	0	1	25	63	1,113	338	482	1,996	21	780	188	43	1,032
4	# seeking substance abuse services (of row 1)	0	20	0	1	21	7	336	42	328	713	0	38	0	21	59
5	Total # who requested services the CMHSP provides (of row1)	46	970	293	66	1,375	112	338	247	14	711	103	561	241	15	920
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	9	386	106	56	557	9	75	17	10	111	15	136	33	12	196
7	Of the # in Row 5 - How many people were scheduled for assessment	37	584	187	10	818	102	247	219	3	571	54	238	117	0	409
8	other--describe	0	0	0	0	0	1	16	11	1	29	34	187	91	3	315

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	13	101	25	4	143	12	46	34	0	92	1	12	9	0	22
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	5	0	0	5	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	8	9	0	17	0	0	0	0	0	0	94	8	0	102
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	49	1	0	50	0	25	0	0	25	34	62	2	3	101
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	37	1	0	38	0	25	0	0	25	0	46	2	3	51
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	12	0	0	12	0	0	0	0	0	0	16	0	0	16
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	24	415	149	6	594	87	181	177	1	446	19	70	72	0	161
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	5	2		7	0	8	2	0	10	0	0	2	0	2
15	Of the # in Row 13 - How many met immediate admission criteria	24	410	147	6	587	87	181	177	1	446	19	70	72	0	161
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain	0	0	0	0	0	0	0	0	0	0					0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Southeast Michigan / Washtenaw					Southwest / Allegan					Southwest / Cass / Woodlands				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	227	2,670	786	6,275	9,958	66	492	235	53	846	35	698	282	414	1,429
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no	no	No	No	No	Yes	no	no	no	no	no	
3	# referred out due to non MH needs (of row 1)	44	852	193	6,275	7,364	0	42	47	53	142	0	3	1	0	4
4	# seeking substance abuse services (of row 1)	6	96	2	102	206				3	3	0	4	0	406	410
5	Total # who requested services the CMHSP provides (of row1)	182	1,784	593	16	2,575	66	492	235	0	793	35	691	281	8	1,015
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	6	308	61	7	382	0	39	10		49	3	125	94	0	222
7	Of the # in Row 5 - How many people were scheduled for assessment	172	1,451	523	9	2,155	66	411	178		655	35	691	281	8	1,015
8	other--describe	4	25	9	0	38					0	0	0	0	0	0
CMHSP ASSESSMENT																
9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	17	406	99	6	528	0	46	15		61	1	101	37	6	145
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	21	8	0	29
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0	0	0	0	0	0	1	33	34	0	68
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	7	228	38	0	273	13	47	6		66	14	411	71	361	857
12a	Of the # in row 12 - How many were referred out to other mental health providers	7	228	38	0	273	0	30	4		34	1	11	4	0	16
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0	0	0	0	17	2		19	0	3	1	0	4
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	132	806	337	2	1,277	53	318	152	0	523	26	272	115	2	415
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	2	117	20	0	139	0	0	0	0	0	5	198	36	2	241
15	Of the # in Row 13 - How many met immediate admission criteria	132	806	337	2	1,277	53	318	152	0	523	4	69	18	0	91
16	Of the # in Row 13 - How many were put on a waiting list	1	7	0	0	8	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services					0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services					0	0	0	0	0	0	0	0	0	0	0
17	Other - explain					0					0	1	30	9	0	40

Period: October 1, 2011 to September 30, 2012

Report on the Requests for Services and
Disposition of Requests

CMHSP Point of Entry-Screening		Southwest / Kalamazoo					Southwest / St Joseph					Thumb Alliance / Lapeer				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	247	3,472	2,981	8,676	15,376	49	869	369	429	1,716	92	739	283	183	1,297
2	Is Info on row 1 an unduplicated count? (yes/no)	no	no	no	no		no	no	no	no		Yes	Yes	Yes	Yes	
3	# referred out due to non MH needs (of row 1)	60	558	1,445	989	3,052	0	32	6		38	0	0	0	168	168
4	# seeking substance abuse services (of row 1)	3	185	33	3,076	3,297	0	56	3	369	428	0	2	0	0	2
5	Total # who requested services the CMHSP provides (of row1)	222	3,319	1,572	6,321	11,434	49	837	363	429	1,678	92	739	283	15	1,129
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	9	178	60	759	1,006	0	232	74		306	0	0	0	0	0
7	Of the # in Row 5 - How many people were scheduled for assessment	195	2,692	1,307	3,320	7,514	49	605	289	429	1,372	92	739	283	15	1,129
8	other--describe	29	763	643	3,088	4,523					0					0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	5	261	222	931	1,419	5	115	18		138	0	0	0	0	0
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	10	198	55	256	519	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	1	35	71	47	154	0	12	16		28	0	4	3	0	7
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	9	153	64	69	295	4	102	18		124	11	243	100	10	364
12a	Of the # in row 12 - How many were referred out to other mental health providers	3	93	39	64	199	0	26	5		31	11	234	93	9	347
12b	Of the # in row 12 - How many were not referred out to other mental health providers	6	74	30	34	144	0	76	13		89	0	9	7	1	17
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	92	963	680	1,774	3,509	40	376	237	60	713	82	562	196	5	845
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	10	212	186	180	588				60	60	8	198	34	1	241
15	Of the # in Row 13 - How many met immediate admission criteria	11	223	104	145	483					0	75	483	176	4	738
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain	0	0	0	0	0					0	2	5	8	1	16

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Thumb Alliance / St Clair					Thumb Alliance / Sanilac					Venture Behavioral / Barry				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	237	1,862	509	712	3,320	57	480	143	129	809	27	820	201	435	1,483
2	Is Info on row 1 an unduplicated count? (yes/no)	Yes	Yes	Yes	Yes		YES	YES	YES	YES		Yes	Yes	Yes	Yes	yes, #1 is unduplicated
3	# referred out due to non MH needs (of row 1)	0	0	0	695	695	0	0	0	122	122	2	6	17	83	108
4	# seeking substance abuse services (of row 1)	0	7	0	1	8	0	0	0	0	0	0	0	0	352	352
5	Total # who requested services the CMHSP provides (of row1)	237	1,860	509	17	2,623	57	480	143	7	687	25	814	184	352	1,375
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	0	0	0	1	1	0	0	0	0	0	0	9	2	0	11
7	Of the # in Row 5 - How many people were scheduled for assessment	237	1,860	509	17	2,623	57	480	143	7	687	25	805	182	352	1,364
8	other--describe					0	0	0	0	0	0	0	0	0	0	0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	0	0	0	0	0	0	0	0	0	0	4	378	83	144	609
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	15	7	0	22	1	2	1	0	4	0	5	2	0	7
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	25	548	133	6	712	2	110	32	1	145	0	21	8	0	29
12a	Of the # in row 12 - How many were referred out to other mental health providers	24	534	133	6	697	0	107	31	0	138	0	13	6	0	19
12b	Of the # in row 12 - How many were not referred out to other mental health providers	1	14	0	0	15	0	3	1	1	5	0	8	2	0	10
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	219	1,432	394	9	2,054	55	390	115	6	566	21	401	89	208	719
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	19	614	92	5	730	6	113	17	1	137	0	6	2	0	8
15	Of the # in Row 13 - How many met immediate admission criteria	208	1,142	348	4	1,702	50	327	107	5	489	21	395	87	208	711
16	Of the # in Row 13 - How many were put on a waiting list	0	30	0	0	30	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	30	0	0	30	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain	3	29	7	1	40	0	5	3	0	8					0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Venture Behavioral / Berrien					Venture Behavioral / Pines					Venture Behavioral / Summit Pointe				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total	DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	102	1,804	405	718	3,029	34	2,166	571	0	2,771				8,277	8,277
2	Is Info on row 1 an unduplicated count? (yes/no)	N	N	N	N	NO	Y	N	Y	Y					No	No
3	# referred out due to non MH needs (of row 1)	3	157	13	424	597	0	22	0	0	22				600	600
4	# seeking substance abuse services (of row 1)	0	5	0	11	16	0	542	2	0	544				115	115
5	Total # who requested services the CMHSP provides (of row1)	102	1,766	404	658	2,930	34	2,144	571	0	2,749	95	1,499	1,033	252	2,879
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	1	97	3	364	465	0	0	0	0	0				81	81
7	Of the # in Row 5 - How many people were scheduled for assessment	99	1,643	392	294	2,428	34	2,144	571	0	2,749	95	1,499	1,033	171	2,798
8	other--describe					0	0	0	0	0	0				1,309	1,309

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	0	0	0	0	0	2	643	28	0	673	17	383	198	217	815
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	1	26	5	101	133	0	90	8	0	98	0	0	0	0	0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	1	89	2	287	379	0	30	0	0	30	6	97	188	6	297
12a	Of the # in row 12 - How many were referred out to other mental health providers	1	70	1	248	320	0	30	0	0	30	5	92	179	4	280
12b	Of the # in row 12 - How many were not referred out to other mental health providers	19	1	39	59	59	0	1,381	535	0	1,916	1	5	9	2	17
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	101	1,771	400	597	2,869	0	115	21	0	136	25	808	541	8	1,382
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	26	472	42	58	598	3	276	107	0	386	2	83	12	5	102
15	Of the # in Row 13 - How many met immediate admission criteria	74	1,204	356	257	1,891	0	0	0	0	0	23	725	529	3	1,280
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - explain	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Venture Behavioral / VanBuren				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	74	981	197	0	1,252
2	Is Info on row 1 an unduplicated count? (yes/no)	yes	yes	yes	yes	
3	# referred out due to non MH needs (of row 1)	0	112	26	0	138
4	# seeking substance abuse services (of row 1)	0	139	12	0	151
5	Total # who requested services the CMHSP provides (of row1)	74	730	159	0	963
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	0	147	28	0	175
7	Of the # in Row 5 - How many people were scheduled for assessment	74	583	131	0	788
8	other--describe	0	0	0	0	0

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	0	0	0	0	0
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	0	0	0	0	0
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	0	0	0	0	0
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	0	0	0	0	0
12a	Of the # in row 12 - How many were referred out to other mental health providers	0	0	0	0	0
12b	Of the # in row 12 - How many were not referred out to other mental health providers	0	0	0	0	0
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	74	583	131	0	788
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	0	0	0	0	0
15	Of the # in Row 13 - How many met immediate admission criteria	74	583	131	0	788
16	Of the # in Row 13 - How many were put on a waiting list	0	0	0	0	0
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	0	0	0	0
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	0	0	0	0	0
17	Other - explain	0	0	0	0	0

Period: October 1, 2011 to September 30, 2012

**Report on the Requests for Services and
Disposition of Requests**

CMHSP Point of Entry-Screening		Totals				
		DD All Ages	Adults with MI	Children with SED	Unknown and All Others	Total
1	Total # of people who telephoned or walked in	6,870	92,047	30,785	158,854	288,556
2	Is Info on row 1 an unduplicated count? (yes/no)					
3	# referred out due to non MH needs (of row 1)	761	11,207	4,530	26,734	43,232
4	# seeking substance abuse services (of row 1)	153	15,222	738	10,643	26,756
5	Total # who requested services the CMHSP provides (of row1)	6,336	81,850	28,101	15,742	132,029
6	Of the # in Row 5 - How many people did not meet eligibility through phone or other screen	345	11,951	3,379	3,359	19,034
7	Of the # in Row 5 - How many people were scheduled for assessment	5,865	69,355	23,995	10,435	109,650
8	other--describe	225	2,964	1,289	7,712	12,190

CMHSP ASSESSMENT

9	Of the # in Row 7 - How many did not receive eligibility determination (dropped out, no show, etc.)	768	10,048	2,823	3,406	17,045
10	Of the # in Row 7 - how many were not served because they were MA FFS enrolled and referred to other MA FFS providers (not health plan)	22	624	144	257	1,047
11	Of the # in Row 7 - how many were not served because they were MA HP enrolled and referred out to MA health plan	26	1,358	704	157	2,245
12	Of the # in Row 7 - how many otherwise did not meet cmhsp non-entitlement eligibility criteria	255	6,282	1,150	907	8,594
12a	Of the # in row 12 - How many were referred out to other mental health providers	140	4,109	818	494	5,561
12b	Of the # in row 12 - How many were not referred out to other mental health providers	68	2,839	853	99	3,859
13	Of the # in Row 7 - How many people met the cmhsp eligibility criteria	4,257	44,889	17,920	3,821	70,887
14	Of the # in Row 13 - How many met emergency/urgent conditions criteria	220	9,264	1,921	359	11,764
15	Of the # in Row 13 - How many met immediate admission criteria	3,702	37,414	14,857	803	56,776
16	Of the # in Row 13 - How many were put on a waiting list	5	264	8	0	277
16a	Of the # in row 16 - How many received some cmhsp services, but wait listed for other services	0	30	0	0	30
16b	Of the # in row 16 - How many were wait listed for all cmhsp services	4	227	8	0	239
17	Other - explain	15	111	36	2	164

Community Needs Assessment Priority Needs and Planned Actions

Based on feedback received from stakeholder groups and data collected from this process, the CMHSP must identify at least 5 priority needs. Of these, the CMHSP must identify the areas where it intends to address and what action is being planned in that area. The table below provides a format for identifying the top issues.

Priority Issue: Please give a brief explanation of the issue, in order of priority, with 1 being highest.

Reasons for Priority: Identify what makes this a priority issue. For example: the issue was identified by multiple stakeholder groups; or the size of the issue; or consistency with other community efforts, etc.

CMHSP Plan: Give a brief overview of what steps the CMHSP intends to take to address the identified issue. Please include basic time frames and milestones.

CMHSP: Allegan County Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Stakeholders report that accessing CMH services is quite difficult.	ACCMHS services are difficult to access due to: insurance, eligibility criteria, community members do not know about ACCMHS services, and available transportation.	<p>As requests for ACCMHS services increase, and overall agency capacity becomes strained, eligibility for ACCMHS services is “reserved” for individuals with the most severe symptoms and highest risk factors. Individuals with moderate symptoms, who still need treatment and support, are being referred to alternative community resources. The Horizons Circle of Friends Drop-In Center is developing peer-run recovery and support groups for individuals with mild to moderate symptoms.</p> <p>ACCMHS continues to maintain an open and ongoing dialogue with Allegan County Transportation (ACT), our local public transit system. Allegan County has more miles of paved roads than any other county in Michigan. With many small rural communities throughout the county, transportation is an ongoing barrier to citizens accessing services. ACCMHS and ACT will continue exploring solutions to the transportation problems effecting all populations in the county. This may include advocating for a transportation millage in Allegan County.</p>
2. Substance abuse and self-medicating.	Stakeholders report that individuals self medicate due to access issues. Stakeholders also report great concern about alcohol and	ACCMHS does not currently provide substance abuse services, however they do provide behavioral health services to individuals with a co-occurring disorder. For individuals specifically seeking substance abuse services, ACCMHS Access staff refer the individuals to the appropriate service provider for assessment and treatment.

	illicit/licit drug abuse, especially among students and young adults.	<p>ACCMHS Prevention Services provides a variety of educational opportunities to school-aged children and the community at large. They work closely with law enforcement on special projects, such as a task force to combat the production and use of methamphetamine.</p> <p>The ACCMHS Community Education Committee provides substance abuse and prevention educational materials to a wide range of stakeholders. These include school systems in the county, parents, students, seniors, and the community at large.</p>
3. Decreasing face-to-face time with doctors and primary clinicians.	Doctors and primary clinicians are so over-worked that they are spending less and less time with consumers.	New productivity standards implemented in 2012 will ensure more face-to-face time with the individuals served by ACCMHS. The agency set an overall goal of a 10% increase in clinician/client face-to-face time.
4. Provide education to the community about mental illness, stigma, and services available from ACCMHS to treat individuals with disabilities.	Many stakeholders reported that, due to stigma, people will not seek the treatment they need. They also reported that many people do not know ACCMHS is an “option” for seeking treatment.	<p>The ACCMHS Community Education Committee (CEC) continually engages with other public and private organizations for the purpose of providing educational materials and opportunities for any interested party. Historically, CEC participates in events held by public school systems, older adult service organizations, Miranda’s Park Party, Allegan County Fair, religious organizations, and health systems. These events have afforded ACCMHS the opportunity to provide information about topics such as autism, substance abuse, brain injury, relationship wellness, anger management, social wellness, anxiety depression, post traumatic stress disorder, healthy aging, teen self-esteem, and many other health topics.</p> <p>ACCMHS has developed a robust anti-stigma campaign that has included such things as developing an anti-stigma video, holding a film festival, and an open microphone night, giving people with a wide spectrum of disabilities “a voice.”</p>
5. Partnering with and training other community organizations.	Stakeholders report that they would like ACCMHS to provide training for school employees, police, religious organizations, etc., to recognize and appropriately deal with people exhibiting symptoms of mental illness.	ACCMHS will continue to partner with other public and private organizations to ensure the community is “equipped” to assist individuals with mental illness or developmental disabilities. This will be done through direct interventions with and by our partners or through referrals. ACCMHS is planning to provide educational opportunities for a staff person to become certified in Mental Health First Aid. This will allow a representative of this agency to reach out to other public and private organizations for the purpose of educating other stakeholders in recognizing serious symptoms of mental illness.

CMHSP: AuSable Valley Community Mental Health Authority

Priority Issue	Reasons For Priority	CMHSP Plan
1. Awareness of Services Provided	<ul style="list-style-type: none"> To facilitate service coordination Increase access to care Increasing community relations Underutilization of services could result in an increase in emergency services 	<ul style="list-style-type: none"> To develop a comprehensive Agency brochure for distribution throughout community and partner agencies Create a Speakers' Bureau where CMH staff could speak to various community organizations Educate own staff for knowledge of agency services Redesign Agency website for ease in navigation and information distribution
2. Convenient Access to Services	<ul style="list-style-type: none"> Identified as a need by multiple focus groups Service provider locations do not accommodate the rural-ness of our area Lack of mental health providers in the area as a whole 	<ul style="list-style-type: none"> Increase service hours and locations of service sites throughout our catchment area Increase presence in local community meetings
3. Increase in SUD Services	<ul style="list-style-type: none"> Consistently been identified by stakeholder groups for multiple years Extreme lack of 	<ul style="list-style-type: none"> We currently have youth co-occurring services available in our counties and a plan to expand those With the passing of the Poleski bills, the CAs will be integrated into the PIHP. Our Agency will develop a group of credentialed providers and be in a position to apply to become a member of the provider panel when it's opened

	SUD service providers within catchment area	
4. Lack of a full continuum of services for children and youth up to the transitional ages of 17/18/19	<ul style="list-style-type: none"> Stakeholder groups identified a gap of services for children transferring from children's services to adult services and the lack of interventions at the young adult service level 	<ul style="list-style-type: none"> Establish young adult groups, FPE-like, and expand the same to adult case management and outpatient therapy
5. Expansion of service delivery to persons with mild to moderate mental health issues utilizing Integrated Care Model	<ul style="list-style-type: none"> Severe lack of mental health providers in this area to address this population which eventually leads to an increase in severity of symptomology 	<ul style="list-style-type: none"> Continue pilot program of placing our therapists in Primary Care Physicians' offices and possible expansion based on identified need

CMHSP: Barry County Community Mental Health Authority

Priority Issue	Reasons For Priority	CMHSP Plan
1. Psychiatric availability and access for adults and children.	Increased demand in recent years has created a higher need and BCCMHA has had difficulty in obtaining more psychiatric availability. BCCMHA is currently working with affiliates to fulfill needs.	<ul style="list-style-type: none"> -Increase efforts to obtain additional contract hours of psychiatrist for both children and adults. -Explore tele-psychiatry. -Goal of January 2014 to obtain an actual full time psychiatrist.
2. Better communication to the community.	With increased service demands, other stakeholders are becoming overwhelmed with direct service needs and reduced funding.	<ul style="list-style-type: none"> -Other community agencies fail to understand our client confidentiality laws and the true nature of community mental health. -Explore client rights, services BCCMHA provides (i.e. sexual dysfunction prevention) and long-term vs. short-term services. -This is an ongoing initiative and we will continue with community education.
3. Better suicide awareness within the community.	A recent increase in county-wide death by suicide has made this an important issue.	<ul style="list-style-type: none"> -Continue with prevention awareness program. -Multi-collaborative committee made up by community stakeholders. -This is an ongoing endeavor and our goal is a reduction in death by suicide.
4. Mental health services made available to the school systems.	With the reduction of or elimination of counselors at the area schools there is a great need for our presence in the local school systems.	<ul style="list-style-type: none"> -Better communication with the schools advising them of the services we offer such as improved access within the schools and better access to our services. -Possibility of free counseling offered to both students and families in need. -Possible grant application to receive resources for training of school personnel in mental health awareness of students and or family members. -This is an ongoing initiative with the school systems and as more information/resources are received, it is our desire to develop and possibly offer mental health services to the schools.
5. Increasing more positive communication and relationships with PCP's.	The upcoming initiatives on integrated health make this a necessary and viable need in our county.	<ul style="list-style-type: none"> -An open channel of communication needs to be developed and implemented with PCP's and our staff. -More frequent therapy visits: weekly or every two weeks. -This again is an ongoing initiative with the desired outcome to be the improved health of BCCMHA clients.

CMHSP: Bay Arenac Behavioral Health

Based on information gathered regarding requests for service, community needs, and stakeholder input, Bay-Arenac Behavioral Health (BABH) representatives have identified five priority needs. The priority needs were determined by the frequency of comments on these five topics by varying stakeholder groups, the consistency of these needs with the goals and objectives of the Provider Network Strategic Plan, and supporting contextual data from the community needs data collection as well as internal data monitoring. The current priority needs for BABH are:

- 1) Services for Youth;
- 2) Training on Mental Health Topics, Services & Access to Services for Community Partners;
- 3) Services to Persons without Medicaid;
- 4) Access to Mental Health and Substance Use Services via AAM; and
- 5) Access to and Availability of Psychiatric Services.

Information regarding relevant initiatives from the BABH Provider Network Strategic Plan and applicable contextual data are provided in the BABH Annual Needs Assessment FY12 Community Needs Final Report, included in this submission.

BABH leadership has responded to each priority need with details on applicable current and planned actions; details can be found in the BABH Annual Needs Assessment FY12 Community Needs Final Report. It should be noted that the priorities listed above are consistent with previously identified needs, and as such, efforts are underway to support these community efforts through BABH services and supports.

CMHSP: Berrien Mental Health Authority (BMHA)

Priority Issue	Reasons For Priority	CMHSP Plan
1. Health Integration	<ul style="list-style-type: none"> • Mental health and physical health problems for our consumers are interwoven. • Many BMHA consumers lack a primary care physician or have not seen a physician in the last 12 months. • Belief that when mental health and primary care services are linked, outcomes will improve. • Primary health care providers have identified access for this population as a priority. • Assists the BMHA in becoming a patient-centered medical home. • Belief that costs efficiencies can be realized. 	<ul style="list-style-type: none"> • FQHC and BMHA identified the need for integrated care and decided to develop a bilateral co-location model. <i>Completed</i> • FQHC began recruiting a provider. • 1/2013 – begin design of processes and procedures. • 2/2013 – will begin contacting consumers and will begin scheduling appointments. • 3/4/13 – initiate primary care treatment on BMHA's campus part time. • 3/2013 – BMHA to place behavioral health consultants at the FQHC's site. • Late 2013 – completion of physical plant remodel for integrated medical services (psychiatric and primary care).
2. Integrated SUD Treatment	<ul style="list-style-type: none"> • A large portion of consumers with SMI possess dual MI/SA diagnoses. • SUD services in Berrien County are inadequate in scope and capacity. • The justice system, public health, Venture (PIHP) and Lakeshore Coordinating Council (CA) are all supportive of the BMHA expanding into this area of service provision. • Providing SUD services with a recovery focus will compliment efforts to emphasize recovery for the SMI population. 	<ul style="list-style-type: none"> • Have discussions with the Health Department, Venture and Lakeshore Coordinating Council. <i>Completed</i> • 1/2013 Submitted enrollment packet and funding request to LCC. <i>Completed</i> • 1/2013 Seek consultant to help develop a strategic plan and implementation strategy. <i>Completed</i> • Obtain financial information. <i>Completed</i> • Obtain LCC & Venture billing codes and reporting requirements. <i>Completed</i> • Review of EBP and design program. • Complete procedures & job descriptions. • Develop budget. • Hire supervisor and staff.
3. Autism Services	<ul style="list-style-type: none"> • The State of Michigan passed legislation mandating insurance 	<p>Determine number of eligible individuals. Attend training events.</p>

	<p>coverage for children with Autism.</p> <ul style="list-style-type: none"> • The State of Michigan is amending its Medicaid Plan to add Early Intensive Behavioral Intervention (EIBI) and Applied Behavioral Intervention (ABI) coverage for children with Autism. • Each CMH/PIHP in Michigan will be responsible for developing and implementing these benefits for the Medicaid population. EIBI and ABI services are not currently available. • The school systems are seeking these services from BMHA. 	<p>Secure contracts with external providers to deliver these new services. Develop processes for seamless coordination of care. Implement billing, claims and contract monitoring.</p>
4. Wraparound Services	<ul style="list-style-type: none"> • The local DHS is supportive of BMHA expanding services to children involved in multiple local systems. • BMHA recently applied to become an approved site for the Serious Emotional Disturbance Waiver (SEDW). • A requirement of becoming an SEDW site includes offering Wraparound services to the participants. • Wraparound services are a particularly effective approach in serving children served by multiple systems. 	<p>Partner with the local Department of Human Services to determine if their Wraparound program meets the MDCH requirements. Determine if contracting with the provider that DHS currently utilizes for the implementation of Wraparound is the best approach. Develop processes for seamless coordination of care Implement billing, claims and contract monitoring.</p>
5. Anti-Stigma	<ul style="list-style-type: none"> • The need for increased anti-stigma efforts was identified by consumers, advocates and other stakeholders. • Increased efforts will be consistent with continuation of 	<ul style="list-style-type: none"> • Partner with stakeholders to identify the main topics to be addressed • Develop an annual plan utilizing various resources such as radio, print, website and signage. • Partner with other community agencies and business to increase the support and impact.

	the Mental Health First Aid trainings we currently offer.	
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CMHSP: Centra Wellness Network (Manistee-Benzie Counties)

Priority Issue	Reasons For Priority	CMHSP Plan
1."Increase connections with the schools"	Educate various community partners on available resources in the community addressing our most vulnerable population as expressed by numerous stakeholders	<ul style="list-style-type: none"> Expand awareness of Safenet Program throughout schools served by beginning of 2013 school year Develop flow chart of services offered by CWN that can be distributed to families by September 2013 Develop crisis triage chart delineating CWN and DHS jurisdictions and services by beginning of 2013 school year
2."Community Training on mental health issues"	Wealth of knowledge within CWN staff and/or other providers acknowledged by stakeholders – establish training opportunities for needs of the community as desired by stakeholders [Schools, Drop In Centers, law enforcement, etc.]	<ul style="list-style-type: none"> Provide various trainings through the year open to the community – attempt to offer at least 3 opportunities Bring various speakers to the area to address various community/partner concerns throughout time period
3."on the job experience for customers looking for work skills"	Need identified for Benzie and Manistee county for job readiness and coaching classes – stakeholders identified significant value for community members when 'employment' in their lives. Continuum of employment from hobby – microbusiness – volunteer – part/full time, etc.	<ul style="list-style-type: none"> Develop SEP Employment Action Plan, Orientation Checklist and Work Program Work site Analysis by spring of 2013 Coordinate/collaborate CMHSP staff with MRS, DHC, etc. stakeholders to enhance opportunities ongoing timeline
4."substance abuse is a problem"	Law Enforcement, judicial system, DHS, schools etc. all expressed various concerns re addictions	<ul style="list-style-type: none"> Establish educational/training events for all stakeholders re addiction Maintain agenda item of addictions in various meeting venues [Continuum of Care/housing; Child Advocacy Center; Emergency partner meetings/law enforcement, judicial departments, hospitals, etc as examples]

5.Integrated Health services	Although not specifically identified many stakeholders identified various needs for children, adults, older adults in a greater quality of life.	<ul style="list-style-type: none"> • Establish communication lines between various stakeholders re Integrated Health • Maintain agenda item in various meetings venues to propel integration in different discussions
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CMHSP: CEI - Clinton-Eaton-Ingham County CMH

Priority Issue	Reasons For Priority	CMHSP Plan
1. Expanding the eligibility criteria for AMHS	<p>Historically, AMHS has not been able to serve persons with mild to moderate mental illnesses/mental health conditions. This has led to large gaps in the provision of mental health services in the Tri-County area for persons not meeting a level of care for enhanced services.</p> <p>Without earlier intervention for this population, at times, the mental health conditions have become more acute/serious and have required higher levels of care (i.e. psychiatric hospitalizations or crisis residential) to resolve the issue.</p>	<p>1. Expansion of services for persons with mild to moderate mental health conditions by:</p> <ul style="list-style-type: none"> • Partnering with Health Departments in the three counties for co-located services within a primary care setting • Initiating clinics at several sites within Ingham County to serve persons with mild to moderate mental health conditions who have Medicaid • Expanding psychiatry services for this population • Initiating a Crisis Recovery Team to divert individuals from psychiatric hospitalizations by providing intensive services for 90 days with linkage back to primary care/other community services
2. Coordination of Care for individuals with substance use/mental health needs during and post incarceration	Adults with serious mental illness who are incarcerated appear to have difficulty getting mental health needs met	<p>Increase coordination of care for persons who have been incarcerated at either the local jails or state facilities by:</p> <ul style="list-style-type: none"> • Better discharge planning between local jails and outpatient treatment. • Shoring up communication between jail-based CMH programs (i.e. CATS) and outpatient/aftercare treatment programs

	<p>post incarceration. This has led to gaps in the provision of mental health services in the Tri-County area for this population and the potential for recidivism in regards to mental health as well as legal issues.</p> <p>Clinton Eaton and Ingham County Jails currently have Crisis Service, Mental Health Therapist for in jail screening and follow up. The gap for individuals served in jail is upon leaving jail and no follow up as most have mild to moderate mental illness. Individuals with MI/SUD have a high recidivism rate due to lack of attention to follow up in both areas of need (MI/SUD) and with intervention post discharge would be less likely to violate probation or once again enter the criminal justice system.</p>	<ul style="list-style-type: none"> Developing working relationships with local courts to explore, at a minimum, better communication as well as the possibility of treatment courts.
3. Autism Services expansion	The incidence of Autism has increased significantly over the past decade	<ul style="list-style-type: none"> Obtain a facility within Ingham county that will accommodate the provision of multiple therapies and educational events.

	<p>(from 1:160 children to 1:88). Recently both private insurances and Medicaid have expanded coverage's to include an Autism benefit. CEI CMH will open an Autism Center to provide diagnosis, evidence based treatment, education and support for children with Autism, their families and the community at large.</p>	<ul style="list-style-type: none"> • Train Staff in recommended assessment tools to develop a best practice assessment process. • Partner with other Agencies as appropriate to develop capacity to serve as an area Diagnostic Center. • Develop Capacity to provide Applied Behavioral Analysis services. • Hire additional staff in order to expand the provision of speech therapy, occupational therapy and behavioral supports. • Network with other agencies, school districts and advocacy organizations to: a) publicize and coordinate service and • Develop ancillary services and supports (e.g. Support groups or recreational activities).
<p>4. Extended stabilization services for persons with acute psychiatric issues</p>	<p>Historically, AMHS has had only psychiatric hospitals, the Bridges Crisis Unit (BCU)/crisis residential program and other traditional outpatient/aftercare programs in which to stabilize persons with acute psychiatric issue. These resources have not been adequate to serve the almost 400 individuals, many of whom did not have an adequate discharge destination for follow up care, particularly related to psychotropic medications. Approximately half of these individuals were</p>	<ul style="list-style-type: none"> • The Crisis Recovery Team was initiated in late 2011 to expand services for an estimated 250 adults being either discharged from psychiatric hospitalizations or diverted from psychiatric hospitalizations who do not qualify for enhanced case management at AMHS, but have acute psychiatric issues, by providing short-term services (psychiatry, medication clinic, short-term case management stabilization, problem-solving, health related services); the target maximum is 90 days of service with linkage to primary care for continued treatment. The primary goals of CRT are to improve the clinical care for these consumers as well as to reduce recidivism for the hospital and BCU. • Additionally, the BCU Coordinator recently worked with the BCU Medical staff to expand the BCU admission criteria allowing those with some types of medical needs which have previously been excluded from admission are now eligible for admission.

	discharged on Probate Court orders.	
<p>5. Children/families that have experienced trauma and the interventions/treatment necessary to support them will be a priority of this CMHSP. We will focus particularly on children who are under the care of the Department of Human Services (DHS); i.e. children in foster care, and children and families who are open with Protective Services as a result of neglect or abuse.</p>	<p>Trauma and its harmful effects are wide ranging, especially among our more vulnerable populations such as children and youth. Current research indicates that exposure to trauma can have significant negative effects on brain development and children's sensory systems. Trauma exposure can cause such intense fear, anger, shame and helplessness that children are overwhelmed by their feelings. Children who are affected in this way often appear to be intentionally misbehaving and uncooperative when they are actually reacting to overwhelming sensory stimulation or emotional triggering. A specialized approach is needed.</p>	<p>This CMHSP intends to provide trauma-informed and trauma-specific mental health services to children and families who may not otherwise have access to these specialized services, especially those children who are under the care of DHS. Our plan includes the following:</p> <ul style="list-style-type: none"> • Further development of our Children's Trauma Clinic, including the provision of occupational therapy and sensory integration services. • Increased partnership with DHS in an effort to: <ul style="list-style-type: none"> a. Provide DHS staff with education about the short-term and long-term effects of trauma on children b. Identify children and families who could benefit from trauma services c. Facilitate their entry into the CMH service delivery system for trauma services d. Provide education and support to DHS frontline and supervisory workers who may be experiencing the effects of secondary traumatic stress • Increased marketing to DHS, other community agencies, and families through the distribution of a CMH Children's Trauma Clinic brochure which is currently in development. • Enhanced training and staff development efforts for CMH clinical staff in trauma-related treatment, including: <ul style="list-style-type: none"> a. Continued training and skill development in Trauma-Focused Cognitive Behavioral Therapy, Structured Sensory Intervention for Traumatized Children, Adolescents, and Parents, Infant-Parent Psychotherapy, and Dialectical Behavior Therapy. b. Annual participation in continuing education efforts with the National Institute for Trauma and Loss in Children c. On-site training, scheduled in March, 2013, from Tina Payne Bryson, Ph.D., psychotherapist, researcher, and co-author of <i>The Whole-Brain Child</i>, which advances a therapeutic approach which helps to develop children's minds and integrate their brains for better treatment outcomes.

CMHSP: CMH for Central Michigan

Priority Issue	Reasons For Priority	CMHCM Plan (include time frames and milestones)
1. Access/Assessment – To create an open-access environment to enhance potential for same-day assessment.	Re-designing the access structure would increase availability and participation while assuring consistent entrance criteria is followed.	<ol style="list-style-type: none"> 1. Create flowchart of re-design including potential barriers (February 2013). 2. Run data for current baseline (March 2013). 3. Pilot re-designed structure (March - April 2013).
2. Prevention and promotion of mental health awareness.	Increasing the agency's efforts would assist to reduce stigma, promote awareness, and inform of expanded service availability, specifically targeting youth, individuals with a mild and moderate mental illness, and individuals with a substance use disorder.	<ol style="list-style-type: none"> 1. Expand behavioral health services in primary care locations (on going). 2. Expand services to children/youth through expansion of screening and assessment activities targeting children 18 months to 6 years (April 1, 2013). 3. Review expansion of children's services with a mild or moderate mental illness (October 1, 2013). 4. Increase the number of people trained in Mental Health First Aid (MHFA). Review the MHFA curriculum for youth for possible implementation (October 1, 2013). 5. Expand the suicide prevention training for staff and the community (October 2, 2013). 6. Host community event promoting mental health awareness (June 1, 2013).
3. Collaboration – To expand collaboration with health care providers and local agencies and improve the whole health quality of care consumers receive.	Expanding collaborative efforts would assist to reverse the trend for individuals with a mental illness or developmental disability having a shorter life expectancy than the general population.	<ol style="list-style-type: none"> 1. Hire a Health Integration Director (April 2013). 2. Review communication with local agencies (December 2013). 3. Collaborate with newly-formed Federally Qualified Health Centers (FQHCs) and FQHC Look-Alike (2013). 4. Expand co-location of services (December 2013).

CMHSP: Copper Country Mental Health Services

Priority Issue	Reasons For Priority	CMHSP Plan
1. The need for more access to mental health services (including for those that don't meet criteria for community mental health services)	This was the highest rated concern by community stakeholders (see attached chart from CNA survey report 2012) and has remained a concern expressed by stakeholders over the years.	CCMHS ability to provide services to persons does depend on specified eligibility criteria. CCMHS will continue to educate community partners as to what those eligibility requirements are and assist them in understanding the services we provide as well as other resources that may be available to them in our community. In cooperation with NorthCare Network, CCMHS will continue to provide persons looking for services with the necessary referral information to assist them.
2. The need for more mental health services for children & youth 0-18	This was rated the second most important concern of community stakeholders	Regarding the concern for more services to children, CCMHS will continue to provide community education and prevention programs, as well as home based, outpatient, and school social work services within the scope of current budget constraints and eligibility criteria.
3. The significant increase in substance/drug abuse in the community	This was rated the third most important concern of community stakeholders	CCMHS continues to provide services to persons with co-occurring disorders that meet the eligibility criteria for community mental health services. CCMHS refers persons to substance abuse providers in the area and collaborates with community partners such as the Western UP Regional Substance Abuse Services Coordinating Agency. CCMHS will continue to provide an updated list of Alcoholics Anonymous/Narcotics Anonymous meetings to persons served. CCMHS is also involved in the Baraga County Substance Abuse Coalition sponsored by Baraga County Memorial Hospital, a group engaged in efforts to respond to youth alcohol and opiate use.
4. The need for more access to psychiatry services	This was rated the fourth most important concern of community stakeholders	For several years, CCMHS has attempted to recruit an additional psychiatrist to its staff without success. CCMHS is presently collaborating with a local primary healthcare provider, Portage Health Systems to recruit qualified providers of psychiatry services to our catchment area. In 2013, CCMHS will employ a part-time nurse practitioner to assist with providing psychiatry services to persons served. These two developments have been very encouraging to CCMHS in meeting this need.
5. The need for more public transportation options	This was rated the fifth most important concern of community stakeholders	Public transportation issues have been raised by area citizen groups throughout our catchment area for many years. So, it was not a surprise to hear this concern expressed by focus group participants, the majority of which are persons with developmental disabilities working in the

		<p>community who find transportation their biggest hurdle to maintaining employment. Although CCMHS is not responsible for providing transportation services, it recognizes the limitations that a lack of affordable public transportation places on persons served. CCMHS continues to coordinate transportation services as well as advocate for and support the efforts of persons served to acquire public transportation. For example, the Ontonagon County RICC (Regional Interagency Consumer Committee) is working with the Ontonagon County Transit to provide transportation to groups for special events and the transit manager is a member of the RICC group. Also, the Houghton County RICC has invited their congressional representative to their meeting to discuss their concerns over the lack of affordable public transportation.</p>
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CMHSP: Detroit-Wayne County Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Homelessness	<p>Homelessness and issues related to housing appeared across a number of items as a top priority for stakeholders. In response to the survey question, "Which of the following populations are most underserved?" the top response was 'homeless', being ranked first among nearly half (45%) of respondents. Furthermore, in response to the question, "Which of the following are the most significant mental health needs in the community that are not being addressed?" the fourth most frequent response (27%) of 16 possible responses was 'housing'. When asked, "Which <i>one</i> need do you recommend as the priority for D-WCCMHA?" the third most frequent recommendation was 'housing' (tied with 'Access to Benefits'). In addition, over half of the focus groups reported that housing among individuals receiving</p>	<p>D-WCCMHA Board of Director's Strategic Plan and Funding Priorities #9: "Decrease Consumers Experiencing Homelessness and Residential Instability".</p> <p>D-WCCMHA Permanent Supportive Housing Initiative.</p>

	services is a top priority. (Figure 2)	
2. Transitioning from one care arena to another	<p>Respondents to the on-line survey were asked to identify the two most underserved populations in the Detroit-Wayne County area. Adolescents who have SED and are transitioning to adult services were identified as the second population (42%) population most underserved. Another transitioning population, those transitioning from jail or prison back to the community – was identified third most frequently (36%) as most underserved.</p> <p>(Figure 2)</p>	<p>ARR Section 6: Treatment of People in the Criminal Justice System.</p> <p>ARR Section 8: Coordinating and Managing Care.</p> <p>D-WCCMHA Board of Director's Strategic Plan and Funding Priorities #4: "Improve Jail Diversion Efforts With Attention to Pre-booking Efforts and Community Re-entry Supports".</p>
3. Integration and Collaboration	<p>Respondents were asked next to identify the most significant mental health needs of the community that were not being addressed adequately. Access to services (34%), integration of services (32%), and transportation (28%) were identified as the three greatest needs.</p> <p>(Figure 3)</p>	<p>ARR Section 8: "Coordinating and Managing Care".</p> <p>D-WCCMHA Board of Director's Strategic Plan and Funding Priorities #7: "Improve Integration of Physical, Mental Health and Substance Abuse Systems of Care Coordination"</p> <p>D-WCCMHA Board of Director's Strategic Plan and Funding Priorities #8: "Improve Response to Co-Occurring Disorders, Particularly With Substance Abuse".</p>

	<p>The next item asked respondents to identify the <i>one</i> need that D-WCCMHA should address as the top priority. Access to services (17%) and integration of services (15%) again appeared as the top two responses. (Figure 4)</p>	
4. Access to Services	<p>Respondents were asked next to identify the most significant mental health needs of the community that were not being addressed adequately. Access to services (34%) and integration of services (32%) were identified as the two greatest needs. (Figure 3)</p> <p>The next item asked respondents to identify the <i>one</i> need that D-WCCMHA should address as the top priority. Access to services (17%) and integration of services (15%) again appeared as the top two responses. (Figure 4)</p>	<p>ARR Section 7: Assessing Needs and Managing Demands.</p> <p>ARR Section 8: Coordinating and Managing Care.</p>
5. Prevention: •Suicide •Early Detection •Trauma Informed	<p>When asked to identify the <i>one</i> need that D-WCCMHA should</p>	<p>D-WCCMHA Board of Director's Strategic Plan and Funding Priorities #10: "Increase the Reimbursements to Incentivize providers to Increase Trauma Focused Best Practices".</p>

System of Care	address as the top priority, prevention and early intervention were named as the fifth most recommended priority. (Figure 4)	ARR Section 2: Improving the Culture of Systems Care”.
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CMHSP: Genesee County Community Mental Health

Note: Genesee Health System (GHS; formerly Genesee County CMH) uses a five-year strategic planning process (with annual updates and modifications as needed), which, in 2013, is in its fifth year. The planning process yielded similar findings to the present needs assessment. Thus, most of the items identified below reflect activities already in process in the plan. A new five-year plan is scheduled to start in 2014. Its development will include review of needs identified in the current assessment.

Priority Issue	Reasons For Priority	CMHSP Plan
1. Maintaining / improving service accessibility	This was a strongly expressed priority for stakeholder survey respondents. Also, as Genesee moves from being a stand-alone PIHP to part of Region 10, it will be important to maintain ease of access and ensure continuity.	<p>The CMHSP strategic plan includes multiple interventions that are ongoing:</p> <ul style="list-style-type: none"> • GHS is developing strategies to improve visibility and communication via social media such as Facebook and Twitter • GHS has changed its name to better reflect the integrated health emphasis, and also to reduce potential stigma associated with the term “mental health”. • Region 10 is preparing for potential Medicaid expansion, which will provide eligibility for mental health services for many more individuals. • A number of processes have streamlined Access services, including direct referrals (no Access screen) for children and SUD outpatient, simplified processes for jail screenings, and courtesy referrals to other providers for those not eligible for GHS services. • GHS provides an annual grant to the Genesee Health Plan to provide a limited mental health benefit for those not eligible for CMH services. In 2012, the grant amount was \$537,875. <p>In FY 2013, we are planning additional study and interventions:</p> <ul style="list-style-type: none"> • Stakeholder survey findings will be shared with the PIHP Consumer Advisory Group and the CMHSP Consumer Council, to elicit recommendations regarding Access. • By 5/1/2013, the GHS Quality Management Committee will review Access issues with <i>ad hoc</i> participation by Marketing and Access representatives, to develop a plan to address continued perceptions of difficult access, lack of knowledge of services, and long wait times.
2. Physical health for individuals with SMI and DD	2008 NASMHPD report findings on life expectancy for individuals with SMI are consistent with GHS data for SMI, and also DD consumers. Mean age at death for GHS consumers with MI or DD is consistently	<p>GHS's strategic plan is heavily focused on physical health, including the following initiatives:</p> <ul style="list-style-type: none"> • Development of an FQHC (opened 2012) • Implementation and expansion of InSHAPE®, an evidence-based practice focused on physical health promotion for CMH consumers • Organization-wide promotion of wellness activities and programs, including consumers and staff, including a community garden, InSHAPE®, and integration of physical health measures into the GHS EMR.

Priority Issue	Reasons For Priority	CMHSP Plan
	around 50. Annually, around 70%-80% of consumer deaths are due to natural causes.	<ul style="list-style-type: none"> GHS has selected completeness and validity of health measures as the PIHP's optional Performance Improvement Project in 2013. One motivation for this is to gain complete and accurate data that can be used to identify consumers at risk, and target appropriate interventions toward the risk. Implementation of a Recovery Navigator Health Home pilot project to assist "hot spotter" consumers with multiple health issues in staying engaged with services. In FY2013, we received an MDCH grant to expand the project. GHS has established relationships with a number of organizations, locally and nationally, focused on integrated healthcare. GHS continues to host onsite primary care services provided by practitioners from the Hamilton Clinic, a Genesee County FQHC. GHS is partnering in development of the Center for Hope, a one-stop resource for multiple needs, including CMH and healthcare.
3. Homeless individuals with mental illness	Homelessness increased by 78% from 2009 to 2011.	<p>Again, this is a focus GHS has already identified in its strategic plan. The plan includes several interventions that are ongoing (status reports as of 2012):</p> <ul style="list-style-type: none"> Development of a new FQHC with homeless as a targeted population (opened 2012) Plans for the Center for Hope include homeless services, and the homeless are a major target population for its services. Supervisor position dedicated to housing issues continues to work closely with National Homeless Council and other local and regional groups 5/2012: started Chronic Homeless Initiative grant services GHS provides grants to homeless shelter providers in order to enhance their ability to serve CMH-eligible clients (grants totaled \$330,000 for 11 providers in FY 2012)
4. Community resource needs	Needs assessment clearly documents general need. The proportion of the population on Medicaid has increased by 10% since 2008, While slowly recovering, community unemployment rates are still high. Violence, bullying, and other social problems were identified by many respondents on the needs assessment.	<p>GHS maintains an active engagement with the community around prevention and education activities. This forms, again, an area addressed in our Strategic Plan:</p> <ul style="list-style-type: none"> A new grant in 2012 focuses on anti-bullying initiatives; In 2013, GHS will, for the second year offer the "Bullyproof" day camp during the summer. Genesee is one of ten Michigan counties to share a three-year SPF/SIG grant focused on substance abuse prevention. GHS is participating in SWAP (Students Who Appreciate Peace) initiative with schools, churches and other community groups. GHS provides psychiatric and social work support to the Genesee Valley Regional Center, which houses juveniles detained by the court. We also provide staff to do mental health screenings at Juvenile Court, consultations for new juveniles entering the Probate Court system, and provide Multi-Systemic Therapy for juveniles diverted from court residential placements. <p>Needs Assessment findings will be used as we plan prevention and outreach activities.</p>

Priority Issue	Reasons For Priority	CMHSP Plan
		The starting point for systematic inclusion of the needs assessment information will be the Quality Management Committee, where GHS's Manager of Prevention will participate in review and planning.
5. Assurance of an adequate professional workforce	<p>While only a few Needs Assessment comments touched on this topic, it has been a focus of scrutiny for GHS for several years. The 32.75 vacancies documented in the FTE equivalent data submitted along with this report represent mostly professional staff – psychiatrists and master's level clinicians.</p> <p>This information is consistent with frequent reports from GHS providers that they have substantial difficulty in recruiting and retaining psychiatrists and Master's level mental health professionals.</p>	<p>GHS is investing aggressively in workforce development activities, as reflected in the Strategic Plan:</p> <ul style="list-style-type: none"> • Base pay within the CMH provider for some professional staff classifications has been increased. • GHS hired a seasoned LMSW in 2012 to develop and grow the intern pipeline for schools of public health, psychology, social work, and the allied health professions. • GHS continues to operate a "Grow the Field" summer internship program for undergraduates – the project is in its 7th year. • In 2012, GHS consulted with Advocates for Human Potential to develop workforce initiative, which included conducting a salary survey/analysis cost of hiring, identifying methods of recruiting outside the area, and the development of a recruitment and retention plan. • GHS has formed a collaboration with the CMH School of Medicine, Department of Psychiatry in order to provide training sites for psychiatry residents.

CMHSP: Gogebic CMHA

Priority Issue	Reasons For Priority	CMHSP Plan
1. Prevention Services: School Based Services	Review of ongoing satisfaction surveys from consumers and community partners as well as results from recent needs assessment survey for program planning which included consumers and community partners	<u>Providing Services In Our Public Schools and Prevention Programs</u> – Gogebic County CMHSP is working towards providing services in our public schools. Internally, the agency has re-aligned caseloads, appointed a Children's Services Supervisor and re-structured children's services to a family-focused children's program. The increase in the need for children's services has been apparent. The next step in this process is to hire staff to provide services in the public school system. Decision making relies on the agency budget to make a future commitment to fund these services. This commitment will include a focus on a prevention program. Gogebic County CMHSP has a strong desire and need to provide services to the children of our community!
2. Family Focused Services	Same as above	<ol style="list-style-type: none"> 1. Establish a support group for individuals with ID/DD and their families. 2. Determine from group above need areas/interests and assist in facilitating group, to include providing/acquiring subject matter experts for presentations. 3. Continue to support staff development in Family focus training and implementation of EBP's and Promising Practices as relevant. <p>It is anticipated that this group will organize in mid-April and the group will determine future direction from attendee input.</p> <p>Staff will continue to be offered training opportunity in the area of Family Focused care.</p>
3. Community Education and outreach	Same as above	Continue education and awareness efforts relating to mental illness and developmental disabilities and attempting to reduce stigma related to such, which include: (1) monthly articles and various advertisements in local paper; (2) highway billboard signs [currently have suicide prevention and anti-bullying displayed on the two major highways in Gogebic County]; (3) CMH staff availability for community education regarding mental health; (4) offer and organize community Mental Health First Aid training; (5) up-to-date information on CMH agency web site and face book page; (6) update-to-date information on recovery bulletin board located in CMH lobby; (7) update on an as-needed basis, the CMH-developed anti-stigma 20-minute video in Outpatient waiting room to include wellness/healthy information and children-specific information; (8) host 2 nd annual Walk A Mile In My Shoes campaign (scheduled for May 22, 2013). The agency's anti-stigma committee has been very active in education and awareness since July 2011; in addition

		<p>to the above events that the Committee has assisted in organizing, planning, etc., the Committee was successful in bringing Eric Hipple, retired Detroit Lions QB, now working at the University of Michigan Depression Center, to Gogebic County in the Upper Peninsula to provide depression, suicide prevention, and mental fitness presentations to all local schools, touching approximately 1,000 middle- and high-school students. Mr. Hipple also conducted a Community Awareness night, which presentations focused toward parents and adults.</p>
4. Enhanced Psychiatric services for mild to moderate population	Same as above	<ol style="list-style-type: none"> 1. Assess current CMHA needs for priority population. (this happens on an ongoing basis in review of psychiatric schedules and referrals for psychiatric services) 2. Continue to evaluate need to expand psychiatric care for current consumers via a nurse practitioner and or hiring additional psychiatric care. 3. Discuss with community partners the ability to contract with an existing psychiatrist and or nurse practitioner. 4. Discuss with UPHP the ability to bring additional psychiatric services for non CMHA consumers. <p>The ability of CMHA to develop or expand services for the mild to moderate population is directly correlated to the Medicaid expansion efforts, dual eligibility pilot, integrated care and discussion/planning with community stakeholders. Upon determination of Medicaid expansion and the dual eligible pilot additional community and regional meetings will occur to help develop further plans. It is anticipated that once the state has determined Medicaid expansion plans and the dual eligible pilot further plans can be developed and implemented.</p>
5. Enhanced access mild to moderate population	Same as above	<p>Gogebic County has limited availability of private sector mental health treatment for the mild to moderate population. At this time there is only one provider located in Ironwood, MI. Catholic Social Services has had discussed opening a clinic but has not done so to date. There continues to be a tremendous need within our county for services locally for this population. It would certainly be our prerogative to serve this population but our funding is limited.</p> <p>We have been selected by DCH as a Dual Eligible pilot site and therefore will be providing services to the mild to moderate Dual Eligible population as of 1/1/2014.</p> <p>It is yet to be determined if the Medicaid Expansion, if approved, will transfer the responsibility of serving the mild to moderate to CMH or have the Health Plan retain the service. When this has been determined, and CMH holds the funding and responsibility, we will begin the process of recruitment of qualified staff to serve the mild to moderate population.</p>

CMHSP: Gratiot County Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Become licensed as a Substance Abuse Treatment Provider.	A recurrent theme in the community surveys was a general acknowledgement that current SA services were either inadequate or ill-received from the current provider. Gratiot CMH has, up to this time, chosen not to compete with the local CA-contracted entity; however, most CMH clinical staff are MCBAP credentialed, thus providing "Co-Occurring Knowledgeable" treatment. With the mergers of the CA's into the relevant CMH's and in order to provide true IDDT, becoming a licensed treatment provider seems appropriate and per the community's wishes.	<ol style="list-style-type: none"> 1. Confirmation from CEI – CA that additional SA providers can be added to the existing provider network. Timeline: 03/15/13 2. Complete and submit application LARA/SUB - 500. Timeline: 04/15/13 3. Receive SA Treatment license and join the CA's Provider Network. Timeline: 07/31/13
2. Expand existing co-location sites by at least one, possibly two sites.	Gratiot County does NOT have county-wide public transportation, nor has the local DHS been successful in building capacity to meet their medical-related transportation responsibilities. Thus, CMH personnel provide a substantial amount of	<ol style="list-style-type: none"> 1. Gratiot CMH has previously identified the County Court as a possible site to provide co-occurring services (see #1 priority) and as a possible access point for individuals whose mental health needs have been contributory to their legal issues. Thus, CMH will pursue dialogue from the Gratiot County Courts to co-locate a CMH clinician on site. Timeline: 03/15/13 2. If favorably reviewed by the County Courts, co-locate a CMH Clinician in that environment. Timeline: 06/15/13 3. The Gratiot CMH Leadership Team will evaluate demographic data that should represent the underserved area(s) of the county. Timeline: 04/15/13

	<p>transportation for both medical and mental health appointments. Not having public transportation in this rural county has been a barrier for access, too, and additional co-located sites in defined geographical areas would serve as additional access points, as well as service delivery sites (potentially Health Integrated with Primary Care).</p>	<p>4. The Gratiot CMH Leadership Team will pursue dialogue with local Primary Care Physicians in the most likely geographic area (using data from #2). Timeline: 07/31/13</p> <p>5. If a Primary Care Physician is willing to enter into a Health Integration agreement, train and co-locate a CMH Clinician to that environment. Timeline: 10/01/13</p>
<p>3. Expand Children's Psychiatric services (i.e., accessibility)</p>	<p>Due to the lack of local resources, Gratiot County CMH has been dependent on Michigan State University's medical contractors for child psychiatric services. Previous efforts to recruit and/or add Psychiatrists (including enrolling in the Medical Opportunities of Michigan J-1 program) have been unsuccessful. Thus, wait times of 90 days (or more) from referral to psychiatric evaluation are not uncommon.</p>	<p>1. Contact MSU and inquire (again) re: the availability of additional child psychiatric services. Timeline: 04/15/13</p> <p>2. Establish communication between Clinical and Medical Directors within MidState Affiliation to collaborate and share resources to recruit Child Psychiatrists and/or mid-level child practitioners. Timeline: 07/31/13</p> <p>3. If #1 and #2 are unsuccessful, make inquiries and explore a business plan of engaging tele-psychiatry services for children/adolescents. Timeline: 10/01/13</p>
<p>4. Expand existing school-based services.</p>	<p>Gratiot CMH currently has one Children's Therapist assigned (in selected Gratiot County schools) to be the "school liaison", provide short-term</p>	<p>1. The Gratiot Leadership Team will explore opportunities for funding additional school-based clinicians re: the 13/14 school year. Timeline: 05/31/13</p>

	<p>services and be an referral source for children with SED who are not enrolled in services. This position has been received with overwhelming positivity from both school personnel and children and provides a collateral contact for children already assigned to an OP or Home-Based Therapist. The schools and advocates would like additional resources assigned for currently un-served schools, opportunity for additional case consultations and availability to provide more prevention activities.</p>	
<p>5. Community training re: Mental health and additional community collaboration.</p>	<p>The news over the last several years have peaked the public's interest and concerns re: individuals with mental health disorders. There were suggestions throughout the surveys of sharing more information about mental health issues to the community, law enforcement, human service organizations, business owners, etc.</p>	<ol style="list-style-type: none"> 1. Explore possibility of enrolling a CMH employee in a "Mental Health First Aid" curriculum. Timeline: 04/15/2013 2. If feasible, select appropriate candidate and acquire MHFA training. Timeline: 07/31/13 3. Conduct initial MHFA Training to a community group by 10/01/13.

CMHSP: Hiawatha Behavioral Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Increase support options for individuals with DD	<u>Still in the Shadows with Their Future Uncertain, A Report on Family and Individuals Needs for Disability Supports</u> by the ARC, June 2011. Focus groups with Consumers with DD and their families.	Research EBP's for group options; develop PSS for Individuals w/DD; explore external resources and/or assist in development of community resources.
2. Explore options to expand access to transportation	Consumer surveys, focus groups, stakeholder surveys	Establish an inter-agency committee to explore all current options and identify critical gaps. Work with local transportation entities on expanding funding mechanisms.
3. Develop integration models with primary care in each county served.	Fed/State initiatives, consumer wellness	Internal efforts to improve coordination with PCP's and improve consumer physical health. We currently have no funding available to imbed clinical staff in PC or vise versa.
4. Expand substance use credentials among staff.	Rates of prevalence in consumers and crisis services/inpatient utilization.	Publish credential requirements, encourage and financially support staff in obtaining credentials.
5. Explore technology applications for individual consumer use to increase independence and integration.	Improve efficiency, improve quality of consumer lives, expand consumer options for treatment, support and integration.	Develop committee to identify and research applications and approaches.

CMHSP: Huron Behavioral Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. All recent stakeholder groups have raised concerns/issues regarding availability and access to co-occurring substance use treatment. Many stakeholders (employers, etc.) see substance use as an obstacle for people to obtaining & maintaining employment. People are unable to maintain a stable work schedule or pass random drug screenings due to drug and alcohol use.	Substance Use Disorders came up in every stakeholder group that was surveyed. This was seen as an issue for teens with the increased use of Bath Salts in the community as well as for those 30-50 years of age and is seen as a reason for individuals not being able to get and keep a job due to their substance use disorder. Huron County has a high rate of Substance Use, some examples from recent statistics show that for adults there is a 28% alcohol abuse rate and a 58% opioid abuse rate and for adolescents there is a 14% alcohol abuse rate and a 71% marijuana abuse rate. Therefore, this is a high priority for the community. (Anecdotally, several employers participating in recent focus groups commented that many applicants cannot and do not pass initial or random drug screens.)	<ol style="list-style-type: none"> 1. Continue to provide education to stakeholders regarding how to access HBH's co-occurring treatment and the services routinely provided. This will occur each quarter during Emergency Services Coalition Meetings, Great Start Collaborative, CA/N Council and Community Collaborative Meetings. 2. Partner with others in the community to increase awareness related to Substance Use Disorders as well as treatment options currently available. This is already occurring, however, we will increase our efforts to have more collaboration with the Substance Use Provider in our community by inviting them to attend quarterly Emergency Services Coalition meetings.
2. A Campaign to combat Stigma needs to be re-envigorized as this was noted to be a barrier to individuals seeking needed treatment and also seen as a barrier to consumers as they move toward recovery.	Both consumers and community partners report that they feel individuals are still not seeking needed services due to the stigma attached to receiving treatment at Huron Behavioral Health and/or mental health treatment in general. Stigma was brought up by multiple stake holders as the number one barrier to treatment; therefore, it is a priority issue that needs to be addressed. Huron	<ol style="list-style-type: none"> 1. HBH will promote mental health awareness through taking advantage of speaking opportunities and other regularly scheduled meetings in the community. These venues will be used in an effort to combat stigma and provide a mental health perspective to community conversations. This will occur on-going throughout the fiscal year. There are multiple venues, such as quarterly ES Coalition Meetings, Quarterly Children's Services Breakfasts, Community Collaborative, Great Start collaborative, CA/N Council, Suicide Prevention Coalition, etc. 2. HBH will continue to work with the consumer run drop-in center, Flashpoint, to strengthen the ability of the consumers to be able to discuss and model their recovery as an effort at combating stigma.

...	Behavioral Health has gotten grants throughout the years to combat Stigma and has done many different campaigns through radio and newspaper advertisements as well as Billboard campaigns.	<ol style="list-style-type: none"> 3. Continue to partner with the schools and other community partners for Green Ribbon Day which brings awareness regarding Children's Mental Health issues. 4. HBH will annually provide opportunities to Celebrate Success for those consumers that have made substantial progress toward community inclusion, self-sufficiency and recovery. Community partners who share HBH's vision of community inclusion, respect and social justice are also recognized.
3. Access to Services is an area that needs to be improved as many felt it was a cumbersome, unfriendly process that prevented a lot of individuals from getting into treatment.	Several focus groups and surveys reported that they felt not having local access to get authorization for services poses a barrier to some individuals following through with seeking treatment. There were also complaints made regarding the Access Alliance of Michigan and how they determine eligibility and felt overall that the process was not consumer friendly.	<ol style="list-style-type: none"> 1. In November 2012, HBH provided training for community partners regarding the AAM process and also hosted an opportunity to meet with AAM to discuss concerns. This was received very well and positive outcomes have been seen since this meeting. Feedback from the provider community was extremely positive. 2. Work on a process to reinstate random "secret shopper" calls to assure that the process is working as it should by March 31, 2013. 3. Provide periodic ongoing training information and updates regarding the access and service authorization process. 4. Development and circulation of a "prompt sheet" has already occurred to assist the consumer/parent/community partner in making the Access phone call. The prompt sheet has been received positively and seems to assist the callers with the screening/access process. 5. HBH has implemented Same Day Access to service beginning September 4, 2012. Though not every person has been able to take advantage of this, we have certainly improved the response time for first appointment well above the 14 day standard. Currently, we are able to receive most consumers for their initial contact within 0 to 4 days from their phone call requesting services.
4. Additional Psychiatric Services are needed as there is a shortage of psychiatric services in the county. Stable psychiatric services are also something that consumers and other stakeholders report is important. Integrated Treatment options are	The need for psychiatric services within the county is not a new issue or concern. Although psychiatric services at HBH have been stable for some time now, the agency will be losing one of their full-time psychiatrists in June of 2013. We are already anticipating that the departure will pose some problems as this individual is/was also HBH's Child	<ol style="list-style-type: none"> 1. Continue recruitment efforts for a replacement Child Psychiatrist and this will be ongoing until a replacement is secured. 2. It is anticipated HBH will have access to fiber optic technology soon, and once that is available, HBH will secure the necessary equipment and agreements to allow provision of tele-medicine options. 3. Work collaboratively with community partners to explore options to increase psychiatric care for those in the community who do not meet criteria for HBH services. This will be an ongoing effort to attempt to increase availability/access to psychiatric services for all county residents that desire the service. 4. Look for opportunities for providing integrated health options for

<p>also something consumers and other stakeholders have stated they would be supportive of and most likely take advantage of the opportunity to receive their treatment at an Integrated site.</p>	<p>Psychiatrist. HBH has been recruiting for a replacement for almost six months already, but has been unsuccessful as of this time.</p>	<p>individuals in the community to maximize the synergistic effect of improved mental and physical well-being. HBH is currently working with Health Delivery, Inc., Saginaw, MI in hopes of securing a grant to be able to have a primary care provider as a part of HBH's practice in fiscal year 2014.</p>
<p>5. Increase awareness around the issues of those who live in poverty as poverty is a significant issue in Huron County as we rate 22nd in the State for joblessness, which is 6.5%. These numbers are lower due to the fact that many individuals moved out of the county to secure a job and those on unemployment have exhausted their benefits and fallen off the ranks to be counted as unemployed. Of those individuals HBH provides service to 89% are at or below the poverty level.</p>	<p>It is a well-known fact that living in poverty can and does produce mental health challenges such as anxiety, depression and substance use disorders. These mental health issues in and of themselves can be barriers to employment and thus to self-sufficiency. It is well known that until someone is able to provide for his/her basic subsistence needs such as food and shelter, they are not able to focus on higher level needs such as securing treatment for mental health issues.</p>	<ol style="list-style-type: none"> 1. Continue active membership in Thumb Area Continuum of Care and Huron County Homeless Coalition in order to assist consumers with housing and other basic needs as well as contributing assistance from a mental health perspective. 2. Provide case management to consumers receiving housing from the "Door to Open I and II" housing programs for individuals with a mental illness or a co-occurring substance use disorder. This is ongoing. 3. Assist consumers with loans/grant program from MDCH as long as there is funding available. 4. Support efforts of Recovery Oriented Systems of Care by continuing to be a part of the monthly meetings. 5. Assist and support consumers in community employment and micro-enterprises as they request in their person-centered plan. 6. Assist and support consumers to apply for entitlement benefits, including Medicaid, etc. as appropriate. 7. Provide training and information to consumers, staff and community partners regarding the culture of poverty and means to work collaboratively with people currently struggling with poverty.

CMHSP: Ionia County CMH

Priority Issue	Reasons For Priority	CMHSP Plan
1. Integrated Health	Demonstrated evidence of reduction in premature death of consumers with people with mental health disorders, DD and SUD.	Continue coordinating with community physicians via our rural physician outreach coordinator. Provide collaborative trainings with community physicians.
2. Integrate Treatment of Co-Occurring Substance Abuse Treatment	There are a high percentage of consumers served with co-occurring substance abuse needs.	Provide CAADC training to increase the number of certified clinicians. Offer to co-locate substance abuse treatment with the Ionia County Health Department at ICCMH.
3. Autism	Increase outreach to families of children with autism and ensure compliance with state Medicaid benefit.	Engage Dr. David Laman, Ph. D. to conduct a needs and preparedness report by July 2013. Continue implementing autism plan.
4. Veterans Services	Increased demand for veteran's services within the agency as well as consistency with Governor Snyder's initiative. Most veterans requesting services at Ionia CMH are not National Guard, but are eligible for V.A. Benefits.	Work to reduce stigma related to veterans services. Offer to co-locate veteran's services with V.A. Hospital. Increase involvement in veteran's court. Locally implement DCH's plan for veterans outreach.
5. Increase Utilization of Trauma Informed Care Throughout ICCMH	There are a high percentage of consumers with trauma related needs.	Increase trainings of trauma informed care for agency staff within the next two years. Continue utilizing evidence based practices on trauma informed care. Provide an AMDR training. Provide evidence based groups, including Seeking Safety, to address needs of consumers with trauma.
6. Workforce Development	To increase recruitment and retention of skilled staff and to meet increased demand as a result of the Michigan Medicaid expansion.	Continue working with NHSC for student loan repayment. Complete an independent salary study by June 2013 to ensure competitive wages and benefits. Increase the number of graduate level internships. Become a location for medical student psychiatric rotations. Cross train clinical staff. Provide more trainings on evidence based practices.

CMHSP: Kalamazoo Mental Health and Substance Abuse Services

Priority Issue	Reasons For Priority	KCMHSAS Plan
1. Services/Access/Administration	Feedback from local stakeholders was overwhelming in this area. Themes include inadequate funding, and few options for those who do not meet an ever-increasing threshold for service eligibility. The data sets likewise noted that Medicaid enrollment progressively climbed from 2008-2011, with a sudden decrease in Medicaid enrollment in 2012; making the number of individuals eligible for KCMHSAS services conceivably fewer than previous years. And yet, data reflect that the number of individuals with developmental disabilities, number of KCMHSAS recipients who are homeless, number of KCMHSAS jail diversions, number of children aging out of/graduating from special education, dropout rates, and the population of Kalamazoo county as a whole continue to rise. It is conceivable that coverage for services has reduced in Kalamazoo county, while the service needs of our residents not only persist, but increase. It is noted however, that 54 of the total 75 stakeholders who responded identified themselves as local providers of Mental Health and Substance Abuse services; and therefore the volume of concerns as they relate to services/access/administration may be somewhat skewed.	The KCMHSAS Strategic Plan includes a goal to become the provider of choice for specialty mental health services. The work Group responsible for this strategic goal will incorporate findings into workplan and implement solutions as developed.
2. Youth/Transition	Kalamazoo's population increases by roughly 2,000 citizens each year. The number of students aging out of or graduating from special education	Strategies for improved transition for youth and families is included in Departmental Strategic Plans. Workgroup had been convened to identify and implement options for improved transition experience.

	<p>services has increased from 162 students in 2011, to 196 students in 2012. It may be deduced that Kalamazoo's school are struggling to keep up with the added demand, as data sets reflect an overall gradual decline in the percent of children who graduate from mainstream high school in Kalamazoo county while the percent of children who drop out has gradually increased. Feedback from local stakeholders support an observed need for an additional focus on school age children, especially as they transition from school to adulthood.</p>	
3. Housing	<p>Interestingly, the data sets reveal a decrease in overall community homelessness from 985 persons in 2009 to 822 persons in 2011; however the number of homeless persons served through KCMHSAS jumped from 194 in 2009 to 238 persons in 2011. Feedback trends from local stakeholders support an observed need for additional, more diverse housing opportunities that meet KCMHSAS recipients' diverse needs.</p>	<p>KCMHSAS has a Housing Department that takes the lead with housing issues and needs.</p>
4. Psychiatry	<p>Stakeholders identified the following issues with Kalamazoo's options for psychiatry: shortage of outpatient psychiatrists, over medication of children, co-occurring incompetency, and lacking options for local inpatient care. Data sets do not directly address inpatient hospitalization rates.</p>	<p>KCMHSAS Strategic Plan includes a goal of re-engineering the Psychiatric Clinic. The responsible workgroup will take the lead in reviewing feedback and incorporating improvements as indicated.</p>
5. Cultural Awareness	<p>Stakeholders identified an overall reluctance of Kalamazoo's local minority groups to seek mental health services; based on continued stigma surrounding mental health issues and ongoing cultural incompetency of service providers.</p>	<p>The KCMHSAS Strategic Plan included a goal of increasing accessibility for individuals from all cultured. There is a Cultural and Linguistic Competency Committee responsible for developing a plan for improvement. This committee will review issue areas raised and will incorporate improvements into the Cultural and Linguistic Competency Plan.</p>

	Stakeholder responses related to the need for additional trauma-focused treatment may be related to this issue inadequate cultural awareness; in that untreated mental health issues for adults often translates into trauma for children in the home. Data sets do not address cultural or racial demographics.	.
6. Health	Data sets reflect a vast divide between the number of KCMHSAS with an identified history of ailments such as diabetes, asthma, and hypertension who were not treated for it within in the last year; and those who were treated for diabetes, asthma, and hypertension within the last year. For example, only 68 KCMHSAS recipient are identified as having a history of diabetes but not treated within the last 12 months, while 376 KCMHSAS recipients were treated for diabetes. Stakeholder input only minimally identified health concerns as a primary focus.	The KCMHSAS Strategic Plan includes a goal to promote health and wellness through increased integration with Primary Care services. Additionally, KCMHSAS has a Program Coordinator for Wellness, focusing on increased positive health outcomes and indicators for individuals served.

CMHSP: Lapeer County Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Integrated Health Care	Identified as a top need in survey – State priority – need to improve general health of the people we serve while trying to reduce costs.	Train staff through UMass program on care management and integrated health care – build local collaboration with primary care physicians, local hospital, and other health care provider organizations. (FY13 and ongoing)
2. Community Education and anti-stigma campaign	Help educate our local community on the need for mental health services – promote collaboration – improve opportunities for full community integration and participation for the people we serve – make this a healthier community.	Continue press releases and stories related to mental health issues and how CMH is collaborating with numerous community partners to address community needs – continue to expand community collaboration, especially through our creative expression programs, that include partnerships with numerous people and organizations – annual Open House and Family Fun Day – creative work training program that helps sustain the County Parks. (FY13 and ongoing)
3. Expand services related to autism	Huge unmet need – rapidly rising prevalence – State Medicaid benefit plan being implemented.	We have established a center at a local school that includes partnering with a parent-run, not-for-profit (Inspiring Hearts for Autism) – adding CMH staff to enhance treatment capacity. (FY 13)
4. Improve housing options	Need to develop specialized residential programs to allow persons place out-of-county to return to Lapeer – need to continue efforts to assist people to move to non-licensed, home settings in the community.	We developed agreements to contract with two new specialized residential facilities that will allow most people placed out-of-county to return to Lapeer if they choose – continuing to encourage supports to enable people to move from AFC settings into apartments or other home settings. (FY 13)
5. Reduce the number of suicides in the county.	The number of suicides in Lapeer county has more than doubled in the past couple of years (19 last year).	Through CMH's involvement in the local Multi-Purpose Community Collaborative, we have put together a County Plan to Prevent Suicides. The plan is being rolled out this year.
6. Expand CMH	Growth in services	CMH partnered with the Lapeer School district to share space at a local elementary

facilities.	created a need for additional individual and group meeting space – the aging population in our Stepping Stone Program and the increased number of motorized wheel chair users created a need for more space.	school – this promotes collaboration, improves transition from school to adult services, and allows sharing of resources to address children with autism – this frees up space at the main CMH building to provide more individual and group meeting rooms. (FY13 and ongoing)
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CMHSP: Lenawee Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Youth who are difficult to place (no family, behaviors too difficult for most FC)	Issue identified by multiple stakeholders (CMH, Court, LISD, DHS and law enforcement)	By the end of March, we will meet with those systems that can impact this issue and begin development of a plan to meet the needs of the youth identified
2. Integration of SUD into MH and the integration of Behavioral Health with Primary Care	This is in line with the priorities of the local community as well as the State	We have identified Performance Improvement projects/teams to address integration. The SUD/MH Team has been meeting for several months, has begun collecting data and identifying areas for improvement. The MH/PC Team is in the process of getting started. MH members have been identified and we hope to include PC members by March.
3. Development of a Recovery Oriented System of Care.	This is in line with the priorities of the local community and involves multiple stakeholders	The goal is to have a continuum of care for those who struggle with SUD to include prevention, early intervention, treatment, and support post treatment. We have a group of community partners who recently started meeting to assist in the development of the ROSC. March/April we plan to conduct a community assessment to identify what resources exist and where there are gaps.
4. Provide additional support to Law Enforcement and Probation	Identified by multiple stakeholders (Sheriff, local Police Chiefs, Probation and Parole Departments)	We recently began meeting with the Police Chiefs, Probation and Parole Departments to identify where they need additional support. They are unsure how to work with our consumers. We are going to initiate monthly (at first) meetings with Probation, and quarterly meetings with Police Chiefs to develop relationships and strengthen partnerships.
5. Community Education	Identified by multiple stakeholders (Law Enforcement, LISD, DHS, Court, Providers, community groups)	We are continually asked how to identify someone who has a mental illness, and what to do about it. We currently provide suicide prevention training to schools, businesses and other groups. We are looking for Mental Health First Aid (adult and children) train the trainers so we can send staff. This training is very well received in Lenawee County but we have only one trainer currently. We will identify additional outlets for education including media, newsletters and movie theater ads.

CMHSP: LifeWays Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
MH Services for those who are uninsured or do not meet criteria for services provided or coordinated by CMH	Identified across multiple stakeholder groups and ranked #1 in total number of responses	Effective work at the Community Level. LifeWays is a part of the community conversation and is open to partnerships to fill this gap.
Transportation to mental health treatment and related supportive services	Identified across multiple stakeholder groups and ranked #2 in total number of responses	Transportation being a barrier to effective health care continues to be discussed at the community level. Will continue to monitor and partner at the community level.
Housing for consumers that is both affordable and appropriate for level of care needed.	Identified across multiple stakeholder groups and ranked #3 in total number of responses	Built into our FY 13-14 Strategic Plan. A Housing Continuum workgroup has been formed to further identify gaps in residential services and develop a housing continuum to address identified needs by end of FY 14.
Services for Kids/Teens--specifically substance abuse and MH support groups	Identified across multiple stakeholder groups and ranked #4 in total number of responses	Specific to Substance Abuse, the SA Prevention Coalition is a part of the "Most Teens Don't" Effort. LifeWays will be developing and implementing a Prevention Program over the next year where this will be incorporated.
Integrated Care and coordination between multiple stakeholders groups (CMH, PCP, SA providers, Courts and Jail)	Identified across multiple stakeholder groups and ranked #5 in total number of responses	Built into our FY 13-14 Strategic Plan. Currently developing stronger relationships with those identified in the Community Stakeholder survey.

CMHSP: Livingston County Community Mental Health

Priority Issue	Reasons for Priority	CMHSP Plan
1. <i>Need for additional psychiatric time</i>	<ul style="list-style-type: none"> a. Raised by many stakeholder groups (consumers, CMH staff, advocacy organizations, primary care) b. Recruiting difficulties have resulted in longer than acceptable waits for appointments c. It negatively impacts a very large segment of our CMH consumers d. These services are critical to consumers' ability to remain stable in their family and community settings e. The demand for such services has increased 	We will intensify our efforts to recruit psychiatrists and nurse practitioners, both as contractors and employees – Immediate and ongoing. Our MIA Program Director, Kathy Dettling will take the lead in this effort.
2. <i>Need for more communication, collaboration and partnering between CMH and community providers and other human service organizations</i>	<ul style="list-style-type: none"> a. Identified as a need by a wide range of stakeholder groups (CMH staff, DHS, Primary Care, Education and Justice) b. All participants will benefit from increased familiarity with current issues and shared learning c. Need to address the misunderstanding of CMH service eligibility criteria in various parts of the community 	<p>The Administrative Team will develop an action plan this spring as part of Strategic Planning. The plan will target stakeholder need for increased communication, consultation, collaboration and partnering. It will include an expansion of current efforts to partner with primary care via our Community Health Links program and others. Resources will also be directed toward our Affiliation's Health Home Pilot as well as other integrated health care integration projects.</p> <p>A formal review of expectations / standards regarding staff productivity as split between direct service, the above and other indirect activities will be conducted</p>
3. <i>Mental health services for individuals who do not meet CMH eligibility criteria, such as those with mild-to-moderate disorders (In anticipation of reduced GF funding, there may be a new community need for MH services among those without Medicaid)</i>	<ul style="list-style-type: none"> a. This is a large unserved group of consumers who could benefit from mental health services. Without these services, many may later need more restrictive, costly services. b. This need has been confirmed by several stakeholder groups, as well as by the reaction of CMH service applicants who are denied services c. Parts of the Affordable Care Act underscore this need and will provide better access to insurance with mental health coverage 	Through its membership on our Human Services Collaborative Body and other community groups, CMH will take the lead in sharing emerging information, advocating for making this unmet need a high priority and providing momentum for the implementation of a community plan for meeting this need. Connie Conklin, Executive Director, and Lindsay Beaudry, Community Collaborative Planner, will spearhead this effort.
4. <i>Improved systems / models of care for people with complex mental health care needs, such as autism and other</i>	<ul style="list-style-type: none"> a. Identified as a high priority need by educators, consumers and their parents / guardians and CMH b. We have had better outcomes when the care of these consumers is coordinated between diverse 	Livingston's current Strategic Plan includes numerous activities addressing this need. In updating the Plan this

<i>disorders requiring coordinated services from those with expertise in MI, DD and SU, across various professional disciplines and community organizations</i>	<p>program staff, community providers and family members, e.g. our Family Strength Project</p> <p>c. With many providers utilizing an agreed-upon treatment model / approach, a probable outgrowth of good collaboration and coordination, the likelihood of outcome achievement is increased</p>	<p>spring, the Administrative Team will augment the relevant sections to more closely address the specific concerns expressed by community stakeholders. Our Program Director of DD Services, Mary Phillips, will take the lead.</p>
<p>5. <i>There needs to be a reduction in the stigma that many in the community attach to those with mental health needs</i></p>	<p>a. Like our other priority needs, this one was identified by stakeholder groups, including consumers and CMH staff.</p> <p>b. In general, we expect that reduced stigma will improve consumer engagement in services, and thus, enhance their success</p> <p>c. Specifically, stigma reduction in the community will likely increase the quality of consumers experiences as they become more active in community life</p>	<p>CMH plans to boost its activities focusing on stigma-reduction, expanding Mental Health First Aid training, Consumer Leadership Training, collaboration with primary care, ER, Urgent Care and specialty medical providers, work with consumers and their landlords, family and other natural support involvement in service planning and implementation, meetings with law enforcement officers and other community members. We will also initiate local newspaper articles addressing the presence of stigma in our county. Our Customer Services Coordinator, Leslie Hall, will take the lead.</p>
<p>6. <i>Increased opportunities for Peer Support Specialists, including Parent-to-Parent support</i></p>	<p>a. Consumers and their families have been asking for these services with increasing frequency</p> <p>b. Consumers are very pleased with their work with these peer support employees and relate deriving much benefit</p> <p>c. New state eligibility requirements and insufficiently frequent training have added to our inability to meet this need thoroughly</p>	<p>We will continue to monitor our current use of these positions, conduct a cost/benefit analysis, track demand / need and search for opportunities to expand as indicated.</p> <p>We will implement a more formal effort to advocate for feasible changes in eligibility and training frequency with DCH</p>

CMHSP: Macomb County CMH

Priority Issue	Reasons For Priority	CMHSP Plan
1. Stigma	Numerous stakeholders identified this as a concern	Increase efforts providing education to various settings, including media, brochures, public speakers, and community forums. MCCMH will begin to schedule additional community forums in the fourth quarter of this fiscal year. MCCMH will look at creating a media approach to stigma early next fiscal year. MCCMH has already had some radio commercials related to walk-in services and brochures related to overall services.
2. Transportation	Numerous stakeholders identified this as a concern	Continue working with DHS on this issue for Medicaid beneficiaries; educate and support consumers to utilize available public transportation; re-locate treatment facilities to bus routes. MCCMH has already started the process of moving various facilities to be on or close to bus lines. Future RFP's will indicate the need for treatment facilities to be on or close bus routes.
3. Jail Diversion	Review of data and concern from stakeholders	Continued efforts training law enforcement agencies and working with the County Sheriffs' office; Expand to additional Macomb County communities. The training efforts have already begun and will be on-going.
4. Safe and affordable housing	Numerous stakeholders identified this as a concern	Continue to work with community partners; Utilization of Community Housing Network Mapping Project to identify Macomb County low income and supported housing options. The Mapping Project is currently under way.
5. Access to services and appropriate clinical services provided	Numerous stakeholders identified this general area as a concern	Continue to expand and promote walk-in services; Continue and expand provision of training to staff to increase effectiveness of services; Continue and expand use of outcome tools (DLA-20) to assess effectiveness of services. Expansion of walk-in services will begin in the 4 th quarter; Training on the DLA-20 has been going on for the past year with all providers; Follow-up training for the DLA-20 is currently under way; Additional outcome tools will be identified by the 4 th quarter and training to start after that.

CMHSP: Monroe Community Mental Health Authority

Priority Issue	Reasons For Priority	CMHSP Plan
1. Enhance community education	The stakeholder feedback and data supports an increase in mental health needs in our community, a need to further educate the community on what MCMHA can provide, and a need to educate the community about changes in healthcare reform/integrated health care, and upcoming changes in the MDCH Medicaid	<p>Expand community education efforts about MCMHA specifically and mental health/healthcare reform in general (January 2013-December 2013) Outcomes: News/press articles, DVDs, MH first Aid training to community leaders in Monroe (i.e. Chamber of Commerce, faith-based organizations,), use of social media and PSAs.</p> <p>Develop relationships with more primary care practices and non-traditional community members</p> <p>MCMHA involvement in Chamber of Commerce leadership training (completion May 2013)</p>
2. Integrated Health and Medicaid Expansion Preparation	Create structural and service efficiencies in ways that promote MCMHA's readiness for in healthcare reform/integrated health care, and upcoming changes in the Michigan MDCH Medicaid benefit	<p>Work with Management Training and Measurement Services (MTM) consultant on rapid change cycle plan to create efficiencies in care that prepares MCMHA for expansion of integrated health care and potential Medicaid expansion (Feb – July 2013) Outcomes: Develop and implement key performance indicators for all staff (clinical, direct care and support/admin) Develop Clinical and Non Clinical performance expectations Develop Performance standards and systems of accountability (job descriptions/evaluations) Assessment of Administrative vs. Clinical Tasks to increase operational efficiency Assess public information/image and collaboration with medical providers in the community needs and develop a plan to address identified needs Enhance Supervision/Coaching capacity to support change management within the agency and Develop Supervisor and Develop UM/UR Level Of Care protocols contingent with system changes and integrated care Develop evaluation plan to ensure CQI process is used after implementation of solutions Develop Training Plan to support all change initiatives Expand integrated healthcare relationship with Family Medical Center (local FQHC) Outreach to individual and group primary care practices for integrated health collaboration opportunities</p>

3. Community Collaboration/Public Relations	Stakeholder feedback and data supports a need to expand collaboration with the community and develop a public relations plan to strengthen partnerships and hence better serve the community as we move more expansively into healthcare reform/ integrated health care, upcoming changes in the MDCH Medicaid, and a potential increase in service demand	<p>Expand community collaboration and public relation efforts about MCMHA specifically and mental health/healthcare reform in general (January 2013-December 2013)</p> <p>Outcomes: News/press articles, DVDs, MH first Aid training to community leaders in Monroe (i.e. Chamber of Commerce, faith-based organizations,), use of social media and PSAs.</p> <p>Develop relationships with more non-traditional community members</p> <p>Extend or expand collaboration with pre/schools, hospital, jails, and nursing homes, and provide them information/education on mental health and services available</p> <p>Develop orientation program for individuals new to the system/not familiar with CMHSP services – review role of peer support services in this area</p>
4. Engagement (Access/orientation, ongoing care, case closure)	To improve efficiencies in access to care and in referring to community systems of care in ways that promote the recovery/resiliency of individuals served, enables MCMHA to expand their partnerships with primary care/ integrated healthcare, and create administrative efficiencies for the agency	<p>Work with Management Training and Measurement Services (MTM) consultant on rapid change cycle plan to create efficiencies in care that prepares MCMHA for expansion of integrated health care, changes in Medicaid MH benefits and potential Medicaid expansion (Feb – December 2013)</p> <p>Establish Discharge/Transition Procedures for inactive clients.</p> <p>Design and Implement re-engagement/transition procedures for current cases not actively in treatment.</p> <p>Concurrent/Collaborative documentation implementation and training</p> <p>Open Access to Services</p> <p>Assess Service Capacity and Resource Deployment</p> <p>Develop Centralized Scheduling models with “Back Fill” Management using “Will Call” procedures</p> <p>Develop scheduling templates and standing appointment protocols linked to billable hour standards and no show/cancellation percentages</p> <p>Develop and Implement no show/cancellation Management Using an Engagement Specialist</p> <p>Develop Evaluation Plan to ensure CQI process is used after implementation of solutions</p> <p>Develop Communication Plan to Communicate Changes to Teams and Stake Holders</p> <p>Develop Training Plan to support all change initiatives</p>
5. Analysis of services and supports based on community need	Our community shows an increase on Medicaid enrollees and CMHSP	<p>Analyze community needs and develop a plan of action for the following populations and their potential service needs: (February – December 2013)</p>

	population.	Children Parolees and probationers with no insurance/access to care Substance Abuse Disorders Seniors Incorporate Management Training and Measurement Services (MTM) work noted in #2 and #4 in the plan of action
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CMHSP: Montcalm Center for Behavioral Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Implement Integrated Health Care Initiative.	Integration of health care was chosen given the current trends in the health care industry. Additionally, the Mid-Michigan Health Department's 2011 Community Needs Assessment identifies heart disease as the leading cause of death in Montcalm Co. and prioritizes the reduction of obesity.	Steps: 1. Participate in MDCH Integrated Health Learning Collaborative over next year to receive technical assistance. 2. Enhance Case Manager knowledge base in disease management, care manager practices, and motivational interviewing principles. Target Date: 6-13 3. Provide basic health screening to all SPMI consumers with no PCP visit in past 12 months. Target Date: 5-13. 4. Include a health goal for all SPMI consumers with a chronic health condition. TD: 6-13 5. Establish outcome measures related to top 3 chronic health conditions in the SPMI population at MCBH and track. TD: 9-13. 6. Establish a partnership with local FQHC to embed a social worker in the practice. TD 9-13 7. Investigate other partnerships opportunities in the community (i.e. rural health clinics, health dept.). TD 6-13.
2. Implement Autism services and develop community partnership in the delivery of care.	This issue was one of the top three identified by stakeholders in our survey. The county has recently begun an Autism Collaborative to bring together a wide range of service providers, parents, law enforcement, employers and other interested parties to evaluate how to best impact the lives of person with Autism spectrum disorders in our community.	Steps 1. Participate in Montcalm Co. Autism Collaborative. 2. Continue to build competency in the administration of ADOS-2 and ADI-R. Target Date- 6-13 3. Identify current consumers and orient to the autism benefit. TD 4-13. 4. Develop contracts with providers of enhanced assessment and treatment planning. TD 4-13 5. Train CLS workers in ABA principles and implementation of treatment plans. TD 4-13 6. Develop mechanism to provide support to CLS workers given intensity of time spent in service provision. TD 6-13 7. Gain clearer understanding of school processes, service structures, and ensure positive communication patterns. TD 8-13 8. Continue to assess staffing resource in relation to service demand. TD 7-13 and ongoing 9. Communicate with local pediatricians, family care doctors, Early On about referral processes, screening, and service availability. TD- 9-13.
3. Expand community	A significant issue	Step 1: Develop community collaboration forum focused on highest need children (foster

partnerships in child/family services.	identified by stakeholders was intervention for children and families. Our community like many is faced with a lack of prevention services and families who become involved with many systems when things are at crisis point.	care, juvenile delinquency, abuse and neglect case) to bring together DHS workers, foster care providers, court and other stakeholders to problem solve system level concerns. Target Date 6-13 2. Investigate Medicaid SED Waiver and community interest in supporting this model of care. Target Date 7-13. 3. Investigate Direct Prevention Services specifically School Success Programs and potential interest of Montcalm Co. schools. Target Date 7-13. 4. Arrange cross training opportunities for children's mental health staff in school IEP process, DHS- CPS and foster care system, juvenile delinquency statutes and stakeholders in children's mental health issues. Target Date 6-13.
4. Improve ease of access to services.	Stakeholders identified ease of access to services, concerns of persons "falling through the cracks" and ensuring that no matter the type of insurance a person has they can find direction to quality care as significant issue in our county. In addition, MCBH prioritized decreasing no shows (current 40% for intake) in order to expand the time available for service delivery to consumer as well as promoting a quick response between the call for treatment to getting care.	Steps: 1. Implement an Open Access system for all intake assessments. Target Date 2-13. 2. Triage consumers coming into the agency to identify need (crisis, brief assessment, intake) and provide direct assess to a clinician. Target Date 2-13 3. Improve efficiencies between PIHP Access Unit and local open access center. TD 3-13 4. Track and follow up with any consumer not coming in for an open access appointment after calling about services after 7 days and then again in 14 days. TD ongoing 5. Measure consumer satisfaction with new process and evaluate need for adjustments. TD 5-13. 6. Evaluate time consumer walks in the door to contact with triage and need for adjustments. TD 5-13. 7. Measure denied and referred rates. TD quarterly.
5. Expand co-occurring mental health/substance use treatment capacities.	Substance use is of great concern in our community. The 2011 Mid Michigan Health Department Needs Assessment identified this as a major community concern. Riverhaven Coordination Agency	Steps 1: Train children's clinical staff in substance use trends and assessment. Target date: 3-13 2. Provide clinicians treating persons with SPMI with quarterly co-occurring topical training/case presentation during clinical staff meetings. TD ongoing 3. Expand IDDT services to case management through the credentialing of one CM as SU provider. TD 10-13. 4. Participate in local RISC steering committee. TD 4-13. 5. Continue participation of ACT team with Drug Court. TD ongoing. 6. Measure number of consumers with SPMI and co-occurring SUD diagnosis with

	<p>identifies Montcalm Co. as spending the largest portion of its substance use dollars for adults in methadone treatment. The Substance Abuse Advisory Council has noted trends in marijuana and synthetic drug use among youth. Prescription drug misuse is a stakeholder identified trend. Law enforcement notes methamphetamine as problematic in this rural community.</p>	<p>person-centered plans that address SUD commensurate with stage of change, resample in 6 months. TD 6-13, 12-13</p>
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CMHSP: Community Mental Health Services of Muskegon County

1. Increased Access to Mental Health Services especially for Youth (90% respondents)

Community individuals do not know how to navigate through the CMH system. For example, the perception is that CMH denies access to persons with insurance, or denies due to level of severity. There are situations in which CMH should be involved but person is not referred or situation is not presented to CMH Access staff for appropriate screening. Issues with stigma, transportation issues, and lack of understanding of criteria for admission/eligibility. MH and SA services are also not well coordinated. Lack of psychiatrists in the area, even if the person has insurance.

This issue was identified by multiple stakeholders through face-to-face meetings and online submitted surveys. Below is a list of reasons for this priority as described by those stakeholders.

1. Increased substance use among youth.
2. Lack of early intervention services.
3. Need for mental health education in the schools and the general community (early identification).
3. Workforce not trained/credentialed in working with youth – increased number of younger children with serious mental health problems. Age range for juvenile justice involvement has shifted younger to 11/12 year olds and increasingly more females.
4. Increased number of youth ages 0-5 living in poverty and a high rate of teen parents. Also have a high rate of parents with inadequate education (less than HS), increased crime, child neglect or maltreatment, and increasing numbers of traumatized children, thus the need for trauma informed care.
5. Weak network of protection services.
6. Increased youth from families of veterans.
7. Increased stressors in families regarding jobs, education, income, and living situations.
8. Many youth are not being served. Increase in numbers of kids with cognitive deficits, autism, and dual diagnosis of DD/MI.
9. Overdependence on medications versus treatment, especially related to trauma. Need for more effective counseling and education rather than “pushing” medication.
10. Lack of access for individuals who are not a severe threat to themselves or others and not severely mentally ill but certainly experiencing mental health issues (the “at-risk” population).

CMH hired two intake workers with specific training in assessment of children’s mental health issues in January 2013.

On February 14, 2013 a budget meeting was held for our 2014 budget. Several positions were created that will be devoted to youth and young adults with SED.

Continue to participate in community collaboration opportunities such as “enhanced partners”

The Agency is addressing our Access system and being in a position to begin to work with individuals who have private insurance.

Increase capacity through effective um ensuring youth are receiving right service at right time; increasing successful outcomes.

Increase use of natural and community resources .

CMH will work with our customer services department to help us with changing our community perception of being an organization that is difficult to get into.

Hire a coder to improve ability to bill third party insurance and increase capacity

Coordinate efforts with community partners to screen and prioritize youth population, particularly look at collaboration regarding use of CANS and implementation of trauma assessment.

Increase community capacity by providing training on evidenced based practices for children, particularly infant mental health and transition to independence process (TIP)

2. Integrated and Coordinated System of Care for the Community (78% respondents)

Many respondents had issues with the need for increased collaboration in the community. Youth issues are increasingly significant and require collaborative work between schools, CMH, primary health care, private agencies, juvenile justice, and Michigan Department of Human Services. There is the need to develop relationships and build partnerships so we can open communication at all levels. There is also a continued need for collaboration and coordination with law enforcement in dealing with persons with developmental disabilities and mental illness.

This issue was identified by multiple stakeholders through face-to-face meetings and online submitted surveys. Below is a list of reasons for this priority as described by those stakeholders.

1. Lack of psychiatrists in the community which leads to increased waiting times.
2. Need for better integration and availability of mental health and substance abuse co-occurring services.
3. Individuals/families cannot afford co-pays and medications.
4. Need increased communication with law enforcement & education regarding mental health.
5. Need increased presence of CMH in the community – anti-stigma, education, groups, early identification, and information about available resources.
6. Increase assistance to individuals who “fall through the cracks.”
7. Need Coordination of services with community partners.
8. Public perception/tragedies/media impact regarding individuals with disabilities.
9. Issues with increased community/family stressors – poverty, unemployment, basic personal needs, transportation, education, crime, and housing.
10. Lack of space in a secured 24-hour staffed law enforcement facility to provide immediate treatment.

CMH is actively involved in establishing a legitimate system of care (SOC) devoted to children's services. CMH will provide leadership in developing formal MOU's between child serving agencies.

CMH is currently meeting with our area CA and planning how to better integrate SA services into our organization. Regional entity activity will help with this.

Effective immediately CMH will begin to schedule standing meetings with key stakeholder organizations representing individuals with developmental disabilities.

CMH will also be placing a staff member at the local rescue mission to assure that the guests of the mission have access to the appropriate level of mental health services.

CMH will hire a staff position to provide psychological first aid to the community. CMH will also train at least two staff in mental health first aid.

In collaboration with family court CMH will pursue the development of a youth problem solving court.

CMH will increase presence in the community through school based services and putting staff in non-clinic settings.

3. Education about CMH Services and Mental Health (41% respondents)

Many respondents recommended increased education on a variety of subjects and to a wide range of groups of people.

This issue was identified by multiple stakeholders through face-to-face meetings and online submitted surveys. Below is a list of reasons for this priority as described by those stakeholders.

1. Need to educate law enforcement in dealing with persons with mental illness. The legal system is quick to arrest without assessing the situation.
2. Need increased education regarding mental illness; many people are afraid to come to CMH due to stigma.
3. Need increase knowledge among community partners/physicians, attorneys, etc. on what would be an appropriate referral to CMH.
4. Need to educate youth on mental health issues.
5. Need to educate consumers on the medications they are receiving in order for them to strive in their recovery process.
6. Need to educate our community on mental health issues from the very young to the elderly, including schools, churches, nursing homes, etc., with the focus on reducing any shame, guilt, or misconceptions of a person with a diagnosis of a mental health issue.
7. Need to educate staff involved in any form of healthcare.
8. Need to educate people on Recovery/Wellness.
9. Educate the public on the criteria for eligibility and admission to CMH services.

CMH will hire an individual this fiscal year who has been trained in “psychological first aid”. They will have responsibilities of providing mental health education and crisis response throughout our community. Also this fiscal year we will be working with our customer services department to provide more information related to prevention, treatment and education in regards to mental health diagnosis in the community.

All Managers will be expected to develop community relations with key stakeholders and to make at least 2 public presentations per year that are geared to mental health issues within our community.

We will be tracking those individuals who contact the Agency for services that we refer to other Agencies within our community.

The Agency Nurses have been trained in the Nurse Care Manager program offered through the University of Massachusetts. Nurses will begin this fiscal year to provide more direct education regarding mental health issues and also the correlation between primary care and behavioral health.

<p>4. Need for Appropriate and Affordable Housing (39% respondents)</p> <p>This issue was also discussed by many respondents as an issue needing to be addressed.</p>	<p>This issue was identified by multiple stakeholders through face-to-face meetings and online submitted surveys. Below is a list of reasons for this priority as described by those stakeholders.</p> <ol style="list-style-type: none"> 1. Need alternatives from 6-bed AFC homes and CLS. 2. Quality of AFC homes is poor. 3. Homelessness – lack of available shelters. 4. Aging population. 5. Barriers to creation of housing alternatives – waiting for subsidies to come through. 	<p>Safe affordable housing continues to be a community need. CMH is in the process of developing a new position that will be able to lead more efforts in finding consumers alternatives with their housing situations.</p>
<p>5. Adequate Workforce (10% respondents)</p> <p>An adequate workforce was also discussed by a few respondents as an issue needing to be addressed.</p>	<ol style="list-style-type: none"> 1. Maintaining Mental Health Workers is difficult due to no advancement, working two jobs, and high turnover. 2. Workforce needs on-going training and development (Youth, Aging, SA) 3. CLS workers need training in working with youth, including proper credentialing and defined needed competencies. 4. The development of a workforce is needed that interacts with families and young children and understands trauma-informed care. 5. There are not enough trained child and family therapists. 	<p>CMH has made significant strides with the development of an intensive community based services model for all ages of children within our community. Since January 2013, the Agency has established an Infant Mental Health team and Transitions to Independence team.</p> <p>CMH will be meeting with key community stakeholders who provide DD services in order to plan on the training and skill set of CLS workers with whom we contract.</p> <p>CMH will implement personal development. Plans for staff. In addition a new clinical supervision plan will be implemented to improve staff competencies in targeted areas.</p> <p>All job descriptions will be updated to more specifically include clinical competencies. The organization will investigate compensation strategies that recognize needed clinical competencies.</p>

CMHSP: Network180 (Kent County)

Priority Issue	Reasons For Priority	Network180 Plan
1. Collaboration and Communication	<ul style="list-style-type: none"> Fits with Network180 Strategic Plan Noted as a need by multiple stakeholders Necessary to effectively develop our regional entity 	Network180 will develop relationships with other CMH providers in the region and enhance current relationships with our provider network. Network180 will also continue to build relationships with health plans for better integration of care. Efforts will be made to better communicate with our partners. This will be accomplished by the end of 2013.
2. Access to Psychiatric Services	<ul style="list-style-type: none"> Fits with Network180 Strategic Plan Noted as a need by multiple stakeholders Included in the Phase I System Transformation Project 	Psychiatric capacity has been added at Network180 by hiring additional doctors. The use of telepsychiatry has also been implemented and expanded throughout our provider network. In addition, Network180 will be partnering with Pine Rest with regard to psychiatric training for MSU medical students. This will be accomplished by the end of 2013.
3. Greater Inclusion of Persons with Lived Experience (Peers)	<ul style="list-style-type: none"> Noted as a need by multiple stakeholders Current Network180 Performance Improvement Project Necessary to effectively develop our regional entity 	Greater emphasis will be placed on the inclusion of persons served to be involved in various capacities through the Network180 system. This includes training peer supports, recovery coaches, pcp facilitators, and individuals interested in joining workgroups and advocacy committees. Peers will be included in the planning for our new regional entity. This will be accomplished by the end of 2013.
4. Safe and Affordable Housing	<ul style="list-style-type: none"> Noted as a need by multiple stakeholders 	
5. Access to Medications	<ul style="list-style-type: none"> Noted as a need by multiple stakeholders 	

CMHSP: Newaygo

Priority Issue	Reasons For Priority	CMHSP Plan
1. Increased collaboration and coordination with Primary Health Care settings.	This has been identified in the surveys returned and within NCMH staffs. Further, the chronic health conditions found in CMH populations decrease life expectancy and quality of life.	NCMH has been participating with FQHC in 4 sites to varying degrees of integration. Further development at those sites and with Spectrum Gerber will be occurring in the next fiscal year. This coordination has proven effective in managing complicated care needs by providers and consumers.
2. If it becomes fiscally possible, develop and provide primary health care onsite for those persons refused by primary care settings and who are served by NCMH.	There is always a population of persons served who are unable to secure ongoing medical care due to behaviors and/or diagnosis. They have complicated medical issues making mental health treatment difficult.	If this becomes fiscally viable it will be developed in coordination with other primary care provider partners in the continuing effort to meet with overall health needs of the county.
3. Development of fully integrated care capacity within primary care settings in Newaygo County. (presently in 2 Teen Health Clinics settings)	This has been identified in the surveys returned and within NCMH staffs. Further, the chronic health conditions found in CMH populations decrease life expectancy and quality of life.	NCMH has been participating with FQHC in 4 sites to varying degrees of integration. Further development at those sites and with Spectrum Gerber will be occurring in the next fiscal year. This coordination has proven effective in managing complicated care needs by providers and consumers.
4. Continued participation and collaboration in community benefit activities .i.e. transportation options development, prevention (substance abuse, mental illness, poverty, jail admissions), human	This has been identified in the surveys returned and within NCMH staffs. Further, the chronic health conditions found in CMH populations and generally in the socially disenfranchised decrease life expectancy and quality of life.	NCMH has remained active throughout the years in the development of county resources and collaborations to meet the social and health care needs of the county. Efforts within the county have continued to grow and identify joint opportunities for solutions. This will continue through Newaygo County Community Collaborative (NC3) and within contract partnerships with DHS, the courts, and medical care practitioners.

services collaborating body, and other collaborative activities within the county.		
5. Continued growth in numbers of persons served, maintaining/decreasing costs for services thereby assuring necessary services continue for those in need in Newaygo County.	This has been identified as a need within the surveys completed and within ongoing conversations with interested parties. NCMH is the sole source for many services including psychiatric. The prevalence ratios found in the research conducted identifies many opportunities to impact the citizens of the county.	Through identified partnerships and collaborative efforts NCMH continues to provide opportunities for discussion of needs, identification of individuals and outreach to those in need. Ever increasing numbers of persons served show this to have been effective in recent years and will continue.

CMHSP: Northeast Michigan Community Mental Health Authority

Priority Issue	Reasons For Priority	CMHSP Plan
1. Trauma Informed treatment	DHS request for support when placing infants into Foster Care and the recognized need to provide Trauma Informed care to individuals served within the CMH system	Contract has been developed with a partner community agency to guide the staff development activities aimed at assessing trauma for the people we serve and the organization as a whole. In addition discussion continues with local DHS regarding support for limiting trauma in infants being placed out of the family home.
2. School Based Support & MH First Aid	The community and our area schools continue to request greater levels of support for all children with emotional or behavioral issues	CMH has contracted with 2 FQHCs to provide school based social work services in 4 different schools. The FQHC have hired LMSW's to provide the support in 3 elementary schools and one junior high school
3. Gentle teaching	Continued need to deepen the culture of gentleness.	84% of all CMH staff has been trained in the first class of Working with People. The remaining 16% will be trained in 2013 and select staff will expand their skills in the area of mentoring
4. Integrated Health Care	Several studies in the United States have identified that people who are diagnosed with a Severe and Persistent Mental Illness die, on average, 25 years sooner than non-disabled people	Discussion with 2 area FQHCs have begun on a number of topics related to Integrated Care. Internally a team of staff has been identified to lead the efforts of the agency and to participate in the Integrated Care Learning community.
5. Intensive Foster Care	Presently if a child with a Severe Emotional Disturbance is in need of residential placement there are no local options in the Northeast Area	Discussions with the local DHS, Probate Court and Child and Family Services of Northeast Michigan continue, working toward the development of an Intensive Treatment Foster Care Home.

CMHSP: North Country CMH

1. **Issue:** Inappropriate referrals for CMH services. Referral stakeholders do not fully understand the populations served by the community mental health system or general criteria used to determine eligibility for services resulting in referrals that are denied.
 - **Reason for priority:** To ensure appropriate referrals for CMH services are made; to strengthen collaborative relationships with stakeholders, and to better understand the unmet mental health needs in our catchment.
 - **CMHSP Plan:** Continue to educate stakeholders about the mission of the community mental health system; how we are funded and populations served; to the extent possible, explain how eligibility for services is determined; and share our vision for the future of integrated primary and behavioral health care.
 - A presentation to HSCBs by NCCMH leadership; to be completed by 1/1/14.
 - Determine appropriate NCCMH staff for HSCB membership; to be completed by 6/1/13.
 - Schedule co-education of staff with specific agencies, e.g. DHS, ISD's, primary care physicians, courts, law enforcement; establish schedule for 2014 by 1/1/14.
 - Ensure a feedback loop with referral sources is in place and working; send to QI Council for development by 10/1/14.
 - Develop a tight referral processes to primary health care providers (refer to NCCMH Integrated Health Work Plan); to be completed by 9/1/13.
 - Evaluate our press releases and other publications for accurately describing our service populations and eligibility criteria; to be completed by 10/1/14.
2. **Issue:** Perception by stakeholders that there is a long wait for access to psychiatry services.
 - **Reason for priority:** There is a high demand for this service and it has high visibility in the stakeholder community. Due to limited resources, it must be tightly managed by NCCMH. An initial study on psychiatric evaluation timeliness was conducted in 2012 and is a goal in the 2013 QI Work Plan.
 - **CMHSP Plan:** Monitor and evaluate the demand for and utilization of psychiatry to ensure timeliness of service delivery and appropriate distribution of resources throughout the catchment.
 - Program supervisors will track and monitor requests for psychiatry during weekly staffing to triage for acuity and to meet timeliness goal of less than 40 days.

- Utilization data will be analyzed by UM Committee (subcommittee of QI Council) quarterly to identify appropriate distribution of physician resources and to evaluate how nursing services impact psychiatry utilization.
- Results of this Quality Improvement goal will be shared during stakeholder presentations.

3. **Issue:** Reluctance of consumers to seek employment for fear of losing other benefits. Consumers and employers need more information on how employment will or will not impact an individual's benefits.

- **Reason for priority:** Employment can be a significant factor in a consumer's recovery. NCCMH has invested significant resources toward the supported employment evidence-based practice. The NCCMH Consumer Council identified this as a priority.
- **CMHSP Plan:**
 - Ensure all supported employment staff are educated in SSA, DHS and other benefits by 1/1/14.
 - Create a list of NCCMH staff with this specialized knowledge and post on agency Intranet as resource; to be completed by 9/1/13.

4. **Issue:** Inadequate skill level of Child Foster Care providers to meet the needs of children with serious challenging behaviors

- **Reason for priority:** This concern has been raised by DHS and CMH staff. Providers and consumers are negatively impacted when a placement fails.
- **CMHSP Plan:** Collaborate with DHS to:
 - Identify placements of children with challenging behaviors at risk of being relocated by 9/1/13.
 - Participate in the development of curriculum that may incorporate Gentle Teaching, trauma-informed care, and motivational interviewing, to be completed by 3/1/14.
 - Develop presentation on impact of employment on other benefits and conduct at each clubhouse semi-annually and Day of Education in October 2013.

5. **Issue:** Children aging out of children's foster care placement and into adult foster care need extra support from CMH providers.

- **Reason for priority:** Need was identified by DHS director in Otsego County.
- **CMHSP Plan:** Collaborate with DHS staff in Otsego county to:
 - Identify unmet needs of children transitioning into AFC homes by 9/1/13.
 - Identify how DHS and CMH staff can improve communication and/or service delivery to meet the consumer's needs by 9/1/13.
 - Identify children with SED or DD that will be transitioning into AFC homes by 9/1/13 and ongoing.

CMHSP: Northern Lakes Community Mental Health Authority

Priority Issue	Reasons For Priority	CMHSP Plan	Timeframe
1. Appropriate/Adequate Housing.	Identified by multiple stakeholders.	Northern Lakes to strengthen partnerships with Habitat for Humanity, MSU Extension, and Goodwill housing.	During 2013-14
2. Services for the mild to moderate mentally ill.	Identified by multiple stakeholders.	<ol style="list-style-type: none"> 1. Northern Lakes' to improve and enhance community based services to children. 2. Keep peer groups open to community as space permits. 	<p>Began in 2012 and will carry forward into 2013.</p> <p>During 2013-14</p>
3. Individuals needing treatment, but who do not seek it out.	Identified by multiple stakeholders.	<ol style="list-style-type: none"> 1. Increase community education on anti-stigma such movie nights, speaker bureaus, art shows, and community displays. 2. Integrated health initiatives. 	Education has been on-going and will continue into 2013-14.
4. Lack of transportation options to appointments.	Identified by multiple stakeholders.	Northern Lakes has started a transportation work group to explore additional transportation options.	Began exploring transportation options in 2012. Work will continue in 2013-14.
5. Lack of emergency services/availability of after hour appointments.	Identified by multiple stakeholders.	Northern Lakes has 24/7 emergency services available.	Continue educating persons served on the services available to them.

CMHSP: Northpointe BHS

Priority Issue	Reasons For Priority	CMHSP Plan
1. Substance Abuse	Listed multiple times on all surveys – lack of providers, inpatient needs, cost of services, co-occurring illnesses can't be treated at same provider	NBHS will update our referral lists to make sure all available SA providers are listed, NBHS will participate in local radio shows and give information to the public in regards to SA and mental health issues and providers; NBHS providers will be participating in a Community Forum to address the needs of the Homeless – referral information will be provided at this forum; Recently opened in the community is the Alpha/Omega House – a residential facility for persons coming out of jail who are homeless and in need of SA treatment – NBHS will make referrals here as appropriate. “Reality Tours” are staged for local schools which show the dangers and outcomes of substance abuse – with mock drug busts, jail time, and funerals. NBHS CEO and Dickinson County Directors are scheduled to meet with Director of Great Lakes Recovery 3.15.13 to discuss community based SA partnerships with the VA.
2. Lack of services for mental health (non – CMH)	Appears on NBHS surveys every year, people not qualified for CMH services and cannot afford private practice have no where to go OR their insurance doesn't cover mental health OR providers don't accept insurance	NBHS will update our Referral list to include community providers along with their billing/insurance acceptance and fee schedules so those we refer to the community will have educated choices; NBHS will send this list to all local PCPs so they have to distribute and refer to as well.
3. Obesity/lack of physical fitness	Mentioned on DCH survey in comments more than any other reason/need	Encourage employees, recipients, friends and family to participate in the Michigan Healthier Tomorrow program. Northpointe has started numerous Healthy Eating education classes for individuals and also providing fitness classes designed for any fitness level. NBHS provides scholarships to our recipients if they cannot afford to attend the YMCA; a NBHS RN will provide education on Healthy Living and Eating via a local radio show; Dietician may also participate in this educational show.
4. Lack of Children's services	Few psychiatric providers in our communities that can provide services to the mild/moderate population; need for	NBHS referral lists will include which providers will provide services to and/or specialize in Children's issues; NBHS is currently addressing the Autism Benefit by training/hiring needed specialty staff – this benefit will encompass more children in the community; NBHS attends quarterly Intermediate School District meetings providing support and education to providers; NBHS has a representative at all Community Collaborative

	autism specialty providers	Board meetings where information on services is provided.
5. Transportation needs	Ongoing problem for years, DHS not readily available to those on Medicaid- they have to plan far in advance for rides and often there is no availability; We have rural communities with no public transportation and very few taxi providers.	NBHS will look into partnering with local community providers to implement Bike sharing program in the community; there is a local women's group that donates money to worthy causes – it will be requested that NBHS be a recipient of some of this money in order to pay for transportation costs; it will be requested of the County Commissioners on the NBHS Board of Directors to bring this issue back to their respective County Boards for discussion and education on the need for transportation resources in our communities; volunteer transporters will be sought and lists kept in customer service

CMHSP: Oakland

Priority Issue	Reasons For Priority	CMHSP Plan
1. Enhancing Trauma Informed Services for Children	<ol style="list-style-type: none"> 1. Oakland poverty statistics for persons under 18 show a 31% increase in this population since 2008. 2. The Oakland CMHA data shows nearly a 9 percentage point increase in the number of persons served from October 2011 to September 2012. 	<p>Utilize new service delivery models:</p> <ol style="list-style-type: none"> 1. Evidence Based Practice -Seeking Safety: <ol style="list-style-type: none"> a. July 2013 staff training b. August 2013 Fidelity reviews c. November 2013 Program Certification 2. EBP – Real Life Heros <ol style="list-style-type: none"> a. October 2013 – will have trained and implemented this EBP.
2. Expand Services for Children	Same as above	<ol style="list-style-type: none"> 1. Initiate services for the General SED – Waiver. 10/1/2013 Letter of intent to be in place. 2. Autism Waiver Adoption – as per MDCH timelines.
3. Improve Collaborative Relationships: DHS and Medicaid Health Plans.	<ol style="list-style-type: none"> 1. DHS: Oakland data shows decrease in DHS out of home placement for children. 2. Medicaid Health Plans: Integrated plans are needed that address persons served health care needs 	<ol style="list-style-type: none"> 1. Collaborative agreement to be in place by 4/1/13. This is a goal area that was previously identified in Oakland's Strategic Plan. 2. 10/01/13 – Final Plans to be in place for ensuring that any IPOS developed after 1/1/2014 will have goals to address physical health conditions as evidenced by person's needs.

<p>4. Enhance Peer Services for All Populations</p>	<p>Stakeholder feedback obtained via the development of the Peer Services Strategic Plan.</p>	<p>OCCMHA has developed a Strategic Plan for Peer Services. Specific goals and objectives are identified in this plan. This plan covers the time period of 2013 – 2015.</p>
<p>5. Employment: Improve Employment Outcomes for Persons Served</p>	<p>This has been expressed as a priority area for several years by stakeholders. It has also been an area of focus for OCCMHA as well.</p>	<p>OCCMHA has an Employment Strategic Plan which spans FY 2013 – 2016. The plan contains specific goals. A work plan is being developed which will contain objectives and timelines for each area identified.</p>

CMHSP: Ottawa County

Priority Issue	Reasons For Priority	CMHSP Plan
1. Mental health services for individuals who are not severe enough to meet Ottawa CMHSP eligibility criteria.	<ol style="list-style-type: none"> 1. Ottawa CMHSP completed a stakeholder survey in January, 2013 and this issue was clearly the highest priority for advocates and providers in Ottawa County. 2. Ottawa CMHSP needed to initiate a waiting list in January, 2012 for uninsured individuals due to inadequate state general fund. 3. Ottawa CMHSP participated in a community survey through United Way. Mental health needs, especially depression, were noted as community problems. 	<ol style="list-style-type: none"> 1. Maintain strong relationships with other private and public mental health providers through formal planning. 2. Advocate with the Michigan Department of Community Health for additional general fund dollars. 3. Through Ottawa CMHSP's Customer Connect Program, provide assistance for individuals not meeting eligibility criteria. Assist these individuals in finding appropriate community services, and provide technical support in completing Medicaid applications.
2. Procuring and maintaining adequate psychiatric resources. This is an issue for Ottawa CMHSP consumers, as well as the community at large.	<ol style="list-style-type: none"> 1. This issue was raised in the Stakeholder survey referenced above. 2. Communication and feedback has been received from community work groups of which Ottawa CMHSP is a participant. 	<ol style="list-style-type: none"> 1. Ottawa CMHSP currently has at least 1 FTE vacancy for psychiatry. Recruitment of a psychiatrist/medical director is in process. 2. Ottawa is planning on reinstituting dinner events with community physicians/psychiatrists for the purpose of communication and education. 3. Ottawa CMHSP has recently put technology in place to allow begin tele-psychiatry. Program level procedures are currently being developed.

	<ul style="list-style-type: none"> 3. Feedback has been received from network providers and community physicians. 4. Ottawa CMHSP participated in a community survey through United Way. Mental health needs, especially depression, were noted as community problems. 	
3. Increasing demand for mental health and psychiatric services for individuals residing in the jail. (This demand grows despite enhanced CMHSP resources in the jail.)	<ul style="list-style-type: none"> 1. Identified by Committee of Ottawa County Human Services providers, including Sheriff. 2. Feedback received from Ottawa County Sheriff and jail staff. 3. Feedback received by the Ottawa County Detention Center. 	<ul style="list-style-type: none"> 1. Ottawa CMHSP is providing mental health crisis and psychiatric services in the jail. 2. Ottawa CMHSP is in discussion with the Jail regarding enhancement of psychiatric services in the jail using local funding. 3. Continue to provide mental health and substance use assessment on behalf of the Community Corrections Department. 4. Continue participating on interagency committee on jail services.
4. Continued community problem with stigmatizing individuals with mental illness and developmental disability.	<ul style="list-style-type: none"> 1. Identified in the January 2013 Stakeholder Survey. 	<ul style="list-style-type: none"> 1. Customer services department will continue to regularly communicate to consumers, stakeholders, and the community on positive attitudes toward persons with mental illness. 2. There will be periodic articles and press releases provided to local newspapers. 3. Ottawa CMHSP will send representatives, including peer support staff person, to training on implementing the tool kit for reducing stigma.
5. Increased demand for services for individuals with autism.	<ul style="list-style-type: none"> 1. Identified in the January 2013 Stakeholder Survey. 2. Ottawa CMHSP seeking to address new state requirements for individuals with autism. 3. Identified by Ottawa CMHSP Director. 	<ul style="list-style-type: none"> 1. Ottawa CMHSP has signed a contract with a provider who employs staff credentialed according to state requirements for the autism program. 2. Ottawa CMHSP will develop a long term plan to further develop staff with required credentials.

CMHSP: Pathways CMHSP

Priority Issue	Reasons For Priority	CMHSP Plan
Mental Health Education / Public Awareness	Lack of knowledge in community on who Pathways serves	During FY13, schedule Mental Health First Aid Trainings in all four counties. By April 2013, Clinical Supervisors will have a Community Education Plan ready to implement for their county.
Integrated Health	Not enough psychiatrists / primary care physicians working with our population	During FY13, continue to offer Integrated HealthCare Training. Develop an integrated healthcare setting in Delta County by October 1, 2013.
Underserved / Uninsured	Unmet Mental Health Needs	Persons on Pathways General Fund Waiting List will be offered attendance at a Pathways Recovery Group.
School Aged Children	Unmet need in schools	Wrap Around Services will be offered in all four counties by April 1, 2013. Provide prevention services to persons with Mental Illness who have children.
Transportation	Limited transportation services and service times	Actively participate in "Friends of DATA" to pass a mileage in Escanaba and Wells Township for transportation.

CMHSP: Pines Behavioral Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Improve the ability to assist each individual in meeting their immediate, basic needs (housing, finances, crisis, etc.) so that they can then better focus on their mental wellness.	The survey frequently mentioned that the current economy is impacting one's housing stability, financial resources, and the ability to cope thus resulting in substance use, child neglect or abuse, and increased mental health symptoms.	Continue to work with community collaboration committees to assure understanding of each other's resources and common gaps that could be addressed together. Assist case manager's in role modeling a proactive problem solving approach to care coordination in lieu of a "fighting fires" approach to having needs met
2. Help increase awareness across the community about behavioral health issues (mental health & substance use), its implication, and everyone's role	The survey pointed out that many opportunities for treatment may have been lost as a result of people not understanding mental illness and/or addiction, and/or not being aware of the array of services available. There also were many statements indicating that mental health was not a community's problem but rather an individual's weakness.	Provide continuous and wide-spread information campaigns about behavioral health Utilize the success stories of peer support specialists to dispel negative connotations of behavioral health issues portrayed by the media. Solicit "community leaders" in awareness activities to reduce stigma
3. Focus on capacity building in terms of professional development, workforce development, and service availability.	The survey pointed out that needs have increased, have become more acute in nature, and are of a different nature than what we've experienced in the past (increase in child behaviors, increased violence, etc.) It is	Further develop staff in evidenced based interventions that especially focus on children, family support, autism spectrum disorders, and trauma. Continue to enhance treatment services to include trauma informed approaches, parent support and education, and positive behavioral support interventions.

	important that mental health providers look at their profession and instead of “doing what we’ve always done well”, that we “do what we need to do now, even better”.	
4. Improve access to care.	Loss of jobs, increased substance abuse, loss of transportation options, uninsured or under-insured have all contributed to the inability to easily access services. At the other continuum, changes in federal policy allowing more and more greater access to insurance and entitlements may also impact access. It is important that access remain quick, efficient, and easy to avoid acuity.	<p>Continue to assess the expediency of access to services</p> <p>Continue to assess network adequacy to assure that sufficient providers are available to meet the need</p> <p>Improve outreach attempts to decrease persons from experiencing real or perceived barriers to early treatment</p>
5. Create a community culture of behavioral health recovery that includes prevention and relapse prevention components	The survey indicated that many people don’t remain on their medications, and that people need support both before issues surmounted in their life as well as following treatment.	<p>Include in the awareness/educational campaign a focus on recovery and how community collaborative efforts could facilitate both prevention as well as post treatment support.</p> <p>Encourage community participation in the development of prevention and post-treatment support opportunities.</p>

CMHSP: Saginaw

Priority Issue	Reasons For Priority	CMHSP Plan
1. access to services	Sustaining high performance in access is a Triple Aim quality objective. Access touches on consumer experience, outcomes and financial management performance goals.	Addressing barriers to service due to both capacity and process are at the core of a complete redesign of the SCCMHA access service in FY 13. By Sept.30, 2013 the Central Access and Intake unit and the Crisis Intervention Service which are colocated Access services will be housed in a redesign area of the mental health center which facilitates a consumer focused recovery model based on the principles implemented in the Arizona Living Room program.
2. lack of services and resources	Saginaw County residents feel the continuing erosion of resources which address public health and quality of life.	SCCMHA actively participates in social welfare advocacy throughout the community. Partnering with DHS in the Pathways to Potential and similar collaborative efforts to stabilize and extend all remaining resources in the community.
3. children's mental health issues	Saginaw System of Care is in its third year of a five year project to strengthen the community response to the mental health needs of children with schools, juvenile justice, human services and other points of	SCCMHA will continue with the SAMHSA System of Care grant work plan and two parallel partnerships: the DHS Incentive Project and the Court's Disproportionate Minority Contact Project (DMC).
4. lack of financial resources/insurance	Maximizing enrollment in health care insurance for all ensures access.	SCCMHA will extend a for another year the contract with DHS for two outstation workers and a DHS MiBridges Kiosk will be added to the access services at the mental health center in March 2013. Additionally, SCCMHA will extend for a second year a partnership with Saginaw Health Plan to create a mental health benefit in Plan B. This partnership leverages funds available for mental health for the uninsured.
5. community violence	Saginaw's ranking in crime statistics is headline news and has become perhaps the most intractable problem the community faces. Every citizen and every dimension of community life is touched by this problem.	SCCMHA responds at several levels: 1) partnering with law enforcement through cross training to strengthen the response to persons with mental illness, 2) emphasizing trauma treatment and trauma informed practice throughout the provider network, 3) joining in collaborative community responses for crime prevention.

CMHSP: SANILAC CMH

Priority Issue	Reasons For Priority	CMHSP Plan
1. Community access to psychiatric or mental health services for individuals not eligible for CMH mental health services	Currently, Sanilac County only has two non-cmh psychiatrists located in the county and only one other mental health provider that provides therapy in conjunction with psychiatric care.	<ul style="list-style-type: none"> • Coordinate with other providers to open up to provide services to those who have the Medicaid Health Plan, MIChild or private insurance. • Work with the community, Community Foundation, United Way, etc. to establish funds for services to those who don't have coverage • Bring this up with the Community Collaborative and coordinate with other service providers, etc.
2. Educate the community about community mental health services, how to access services, what services can be provided and what's the criteria	Several stakeholders responded to the survey stating that they have difficulty understanding the CMH system and how to gain access to public mental health services.	<ul style="list-style-type: none"> • Conduct community presentations regarding mental health services availability and criteria.
3. Community education in regards to suicide prevention/mental health first aid/substance abuse and mental health related issues, etc.	Suicide rates in Sanilac County have been on the rise over the past couple of years and several stakeholders have requested community based trainings to combat suicide and mental health issues in the community.	<ul style="list-style-type: none"> • Provide the ASIST training, mental health first aid, fireside chats about mental health issues, mental health minutes, etc.
4. Community organizations felt that we have a strong collaborative relationship but it could be stronger or wider spread to enhance and expand/extend our collaborative network.	Stakeholder feedback regarding needing to get additional members to participate in collaborative relationships in order to strengthen the safety net.	Coordinate and outreach with community organizations that do not currently have a collaborative relationship with Sanilac CMH.

5. Reducing mental health stigma.	We need this in the community because it prevents people from wanting to come to our door.	We need to add support to the things we are already doing.
6. Employment opportunities for individuals with a disability or a mental illness.	Stakeholder report of difficulty obtaining jobs for individuals receiving CMH services in the community.	Continue to provide cash match to MRS as we are able to enhance the employment opportunities for individuals receiving mental health treatment in Sanilac County.
7. Transportation	Stakeholder report of difficulty with accessing mental health and other services due to transportation issues.	Continue to work with Sanilac Transportation to promote the expansion of the transportation system. Also collaborate with other agencies to enhance a one stop shop system to reduce the reliance of transportation for individuals receiving mental health services.

CMHSP: Shiawassee County Community Mental Health Authority

Priority Issue: Increased Community Awareness/Anti-Stigma

1.1 Reason for Priority:

This priority is being addressed Based on direct Stakeholder feedback as well as the results of the county wide survey. The results of that survey suggested that 18% of all adults had looked for a Mental Health program. However, 24% of those were unable to find a program. The reasons offered ranged from cost, did not know how to find a program, stigma of mental health services, transportation, etc.

Additionally, the Governor recently announced that his FY14 Executive Budget will include Medicaid expansion to 133% of the Federal Poverty Level. In total, 320,000 Michiganders will be covered in the first year. This equates too approximately, 470,000 additional covered lives by 2021, causing a drop in Michigan's uninsured population by about 46%. Using moderate Medicaid growth scenarios HMA projected a 57% enrollment rate increase for Shiawassee County. Using the Medicaid enrollment data for September 2012 of 14,172 SCCMHA could project 3,346 additional individuals in our community would have Medicaid, many of who may never have had access to healthcare coverage in the past.

1.2 CMHSP Action Plan

1.2.a Increase community awareness of the availability of mental health services; including both private and public SA providers.

1.2.b Create a network of follow-up support systems, e.g. clergy,

1.2.c Increase education in the community on the signs of suicide/depression,

1.2.d Increase the number of primary care physicians who screen adults for depression during office visits,

1.2.e SCCMHA will ensure that the Shiawassee County Veterans Affairs Board has greater understanding of County Behavioral Health Services,

1.2.f SCCMHA will assess local need when war veterans return home and educate Veterans and their families about SCCMHA services and community resources,

1.2.g SCCMAH will participate in community activities to include but not limited to Pre-incident Education with first responders, Sheriff Support Staff, SCALE, etc,

1.2.h Shiawassee community members will become educated about behavior health issues including but not limited to stigma, suicide prevention, homelessness and veterans issues.

2. Priority Issue: Improved Access to Services-Continue to Increase Penetration Rates

2.1 Reason for Priority

Shiawassee County Community Mental Health Authority is intent on assuring that individuals seeking mental health and developmental disability services are afforded efficient and timely access to services. To that end, this priority issue is consistent with the previous one which supports increased awareness of services. An organization cannot market itself without ensuring that access to that need can be met.

In addition, based on October 2012 data, SCCMHA demonstrated the second lowest Total of Medicaid eligibles served to total Medicaid enrollment in the current AAM PIHP. This rate would be the third lowest penetration rate in the new Mid-State Region 5 PIHP.

2.2 CMHSP Action Plan

2.2.a Establish a same day point of access process,

2.2.b Continue to expand co-location models to address the needs of primary care patients with mild/moderate symptoms,

2.2.c Continue to expand staff and technologies to provide support and services to a much larger population,

2.2.d SCCMHA will continue to advocate for appropriate funding so that when someone seeks help it is available and easily accessible.

3. Priority Issue: Decrease Suicide Rate

3.1 Reason for Priority

The Shiawassee County age-adjusted suicide mortality rates decreased during the five year moving averages of 2000 to 2004 and 2005 to 2009. However, the Shiawassee County rate remained above the Michigan rate over each five year period. Between 00/04 the state rate per 100,000 was 10.4 while Shiawassee County demonstrated a rate of 13.7. Between 05/09 the state rate per 100,000 was 11.1 while Shiawassee County demonstrated a rate of 12.3.

In addition, the Shiawassee County Health Needs Assessment identifies that 3% of Shiawassee County adults considered attempting suicide and 9% of adults felt so sad or hopeless nearly every day for two weeks that they ceased doing usual or pleasurable activities.

3.2 CMHSP Action Plan

3.2.a Promote community involvement in suicide prevention initiatives,

3.2.b Shiawassee community members will become educated about behavior health issues including but not limited to stigma and suicide prevention,

- 3.2.c** Partner with Shiawassee County Sheriff so that response information pertaining to suicide is made available to SCCMHA within 24 hours,
- 3.2.d** Increase education in the community on signs and symptoms of suicide and depression,
- 3.2.e** Increase the number of primary care physicians who screen adults for depression during office visits.

4. Priority Issue: Integrated Care

4.1 Reason for Priority

This item is a priority for many reasons. It is consistent with the Michigan Health and Wellness 4 x 4 Plan. Not only is obesity is a public health crisis in Michigan, it is also evident in Shiawassee County. In a recent 2010 study the obesity rate in Michigan was at 32%. The 2012 Shiawassee County Health Assessment indicates that 36% of adults are overweight and 33% are obese. This rate is higher than the state percentage. In addition, 29% of Shiawassee County adults have been diagnosed with high blood pressure, 37% have high cholesterol. All three are known risk factors for heart disease and stroke. These percentages are for the general population. We know that these conditions are even more prevalent in the SPMI/DD and SUD populations.

In addition, this is a key element in the upcoming RFP. As such, Integrated care will provide CMHSP's new opportunities to collaborate in shared costing arrangements such as ACO or may be a expectation towards certification as a Federally Qualified Community Behavioral Health Center.

4.2 CMHSP Action Plan

- 4.2.a** Increasing access to primary care services by opening a primary care clinic in partnership with Health Delivery in the SCCMH's outpatient department.,
- 4.2.b** Improve the health of consumers with mental health symptoms that prevent access or coordination or compliance with traditional primary care treatment,
- 4.2.c** Identify and expand all health promotion activities available in the community or provided by CMH so that consumers with serious mental health conditions choosing to improve their health have a variety of options,
- 4.2.d** Implement expanded Nurse Care Coordination (Washtenaw model) for 25 high risk consumers,
- 4.2.e** Provide early intervention services and/or referral services to 100% of all new patients at the Shiawassee Community Health Center (FQHC),

- 4.2.f** Partner with Owosso Memorial Healthcare and HDI (FQHC) to educate primary care providers how to assess for signs and symptoms of depression and sociality,
- 4.2.g** Improve the health of the consumers served by increasing access to physical health care and coordinating care with the primary care providers to address chronic health conditions.

5. Priority Issue: Substance Abuse

5.1 Reason for Priority

This priority is being addressed Based on direct Stakeholder feedback as well as the results of the Community Health Assessment. The Shiawassee County Strategic Planning Committee completed an exercise where they ranked the key issues based on the magnitude of the issue, seriousness of the consequence, and the feasibility of correcting the issue. A total score was given to each priority. The max score was 30. All committee members' scores were combined and then average numbers were produced. Based off of these parameters, the group decided to focus on three primary issues. While Substance Abuse was not one of the top three concerns fell within the top five priorities.

5.2 CMHSP Action Plan

- 5.2.a** Work with the Coordinating Agency to Increase community awareness of the availability of substance abuse services,
- 5.2.b** Work with the Coordinating Agency to increase education in the community on signs and symptoms of substance abuse and dependence,
- 5.2.c** Increase the number of primary care physicians who screen adults for substance use during office visits,
- 5.2.d** Work with the Coordinating Agency to increase awareness of substance abuse prevention programs in Shiawassee County

CMHSP : St. Clair County Community Mental Health

PRIORITY NEED	ACTION PLAN
After hours services to the people we serve.	<i>Evening hours will be expanded to the main building which will include services for walk-in individuals and intakes.</i>
Lack of Services for General Fund / Non-Insured individuals in St. Clair County.	<i>SCCCMH will assess and apply for grant funding opportunities in order to increase services to individuals. Staff will link individual with DHS worker co-located inside SCCCMH building to assist with benefits application.</i>
Lack of Residential placement options for children.	<i>SCCCMH will assign a staff person to research residential alternatives in Michigan and develop a relationship with the provider of services.</i>
Employment opportunities for the people we serve.	<i>SCCCMH will strengthen their relationship with Michigan Rehabilitation Services. Develop additional supported employment contracts and continue to expand the Supported Employment evidence based practice.</i>
Increase Coordination with Primary Care Physicians	<i>SCCCMH will develop a plan to integrate services with Primary Care Providers in St. Clair County.</i>

CMHSP: Community Mental Health & Substance Abuse Services of St. Joseph County

Priority Issue	Reasons For Priority	CMHSP Plan
1. No health Insurance	75% of respondents in Community felt this was a major concern	<ol style="list-style-type: none"> 1. Integrating Mental Health and Physical Health Care by expanding the number of staff located in RHC by 9/1/14 2. CMHSAS has applied as the co-applicant for an FQHC, if funded will be in operation by 9/1/14 3. CMHSAS has contracted with National behavioral Council to develop a business plan for Health Home and will seek funding by 1/31/14
2. Teen Pregnancy	53% of respondents in Community felt this was a major concern	Will work in partnership with the Collaborative body (HSC) since this is a community effort there are no timelines
3. Mental health	53% of respondents in Community felt this was a major concern	4. Increasing availability of Mental health and Substance Abuse Services by 9/1/14.
4. Unhealthy food choices/obesity	51% of respondents in Community felt this was a major concern	Will work in partnership with the Collaborative body (HSC)

PLANNED ACTIONS

Community Mental Health & Substance Abuse Services of St. Joseph County will focus on two areas:

1. Increasing availability of Mental health and Substance Abuse Services
2. Integrating Mental Health and Physical Health Care

CMHSAS-SJC will continue to seek partnerships that will allow its employees to work in the Rural Health Clinics. In this arrangement the employees are leased to the Rural Health Clinics and serve the mild to moderate population.

CMHSAS-SJC is working with the National Behavioral Council in the development of a business plan for a Health Home. In addition, CMHSAS-SJC is the co-applicant for a Federally Qualified Health Center grant.

CMHSP: Summit Pointe

Priority	Priority Issue	Reasons For Priority	CMHSP Plan
1.	Housing/Employment	Homelessness and inadequate housing, along with economic issues, stress, and lack of employment opportunities were mentioned several times in stakeholder surveys as top issues in the community. This is consistent with current community efforts. We also see firsthand the impact of inadequate housing and economic stress on the individuals and families served at Summit Pointe. Housing and employment/economic issues are basic needs that must be addressed if individuals are to be successful in improving their overall health.	<ol style="list-style-type: none"> 1. Continue to work closely with Calhoun County COC (Continuum of Care) and assist them in reaching their 10 year plan to end homelessness. 2. Act as Calhoun County HARA to provide community resources for all housing needs including, but not limited to, providing grant assistance for those in need of immediate housing and for those at risk of becoming homeless. 3. Continue to provide safe and affordable housing options within our community. 4. Participate in HUD and MSHDA grants providing resources to eliminate homelessness. 5. Work in conjunction with Michigan Works, participating in job fairs and ready now program. 6. Assigned Summit Pointe staff to provide case coordination, enhance the welcoming environment and conduct skill building groups on site at Michigan Works. 7. Continue to work collaboratively with community employers and create innovative business opportunities to employee customers successfully.
2.	Integrated Health/Improved Quality Care	This was noted as a high priority from multiple stakeholders and survey participants. There are several initiatives throughout the community focused on improving the overall health in our county. These include enhanced collaborations, access, improved health outcomes, prevention and integrated healthcare. We know that individuals diagnosed with a mental illness are dying 25 years earlier and it is imperative that we address the total health of our customers. This also keeps us aligned with the state 4 x 4 plan and encourages us to remain focused with our customers on improving both physical and behavioral health outcomes.	<ol style="list-style-type: none"> 1. Begin preparations to fully participate in Dual Eligible pilot (Medicaid/Medicare) starting January 2014. 2. Continue collaborative involvement with Integrated Health Partners projects and initiatives. 3. Evaluate and enhance the Integrated Care model with the Care Management and Senior Behavioral Health teams 4. Increase number of staff who successfully complete Complex Care Management training 5. Transition direct operated Primary Care clinic to the same EMR as behavioral health services 6. Successfully meet required meaningful use standards for both the primary care and behavioral health eligible professionals 7. Meet established team and agency targets to decrease percentage of customers whose BMI falls in

			category of overweight or obese.
3.	Communication/Stigma and awareness of mental health issues and treatment	This issue was identified by multiple stakeholders including comments that people are either afraid to seek treatment due to stigma surrounding mental illness, and/or people who seek mental health treatment are often misunderstood in the community and within their own family and social groups. Community understanding and support of mental health needs is critical to an individual's recovery as well as the overall health of a community.	<ol style="list-style-type: none"> 1. Publish one article/month in the Battle Creek Enquirer regarding mental health issues and treatment. 2. Provide Mental Health First Aid training for community and family members 3. Support the establishment of NAMI chapter in Calhoun County 4. Continue anti-stigma marketing campaign that includes various billboards throughout the community 5. Continue to provide community based prevention and education services within schools and court system. 6. Continue to provide Family Psycho-Education (FPE) groups
4.	Access to Care and Benefits	This issue was consistent with multiple stakeholder and survey replies. It has been identified as an issue for both behavioral and physical healthcare. We have also seen an increase in cancellations/no shows due to lack of transportation. Customers and community members report needing help with obtaining coverage – Medicaid and/or disability benefits. We have seen an increase in customers being denied for Medicaid and other public assistance. During the year, we also did not consistently meet the access performance indicator and want to improve in this area to better meet the needs in our community.	<ol style="list-style-type: none"> 1. Peer Support Specialists will implement an educational group focused on transportation hints/tips. 2. Continue to contract with on-site DHS worker to assist customers in applying for Medicaid on-site. 3. Targeted outreach to general fund customers throughout the month of March to encourage application for ABW open enrollment. 4. Continue to contract with SHARE Center for additional transportation assistance for customers. 5. Increase availability of therapists. 6. Staff trained in SOAR will provide training for other staff. 7. Continue to work closely with community resources to assist customers with obtaining medications, medical equipment, and health services as needed
5.	Substance Abuse	Stakeholders repeatedly mentioned substance abuse as an issue in the community. Misuse of prescription drugs was also mentioned as a particular concern.	<ol style="list-style-type: none"> 1. Begin process to apply for Substance Use Treatment license 2. Begin process to enhance accreditation through The Joint Commission to cover Substance Use Treatment 3. Utilize results of COMPASS to enhance co-occurring treatment within Summit Pointe – workgroup to be formed to include staff with substance abuse service

			<p>experience</p> <ol style="list-style-type: none">4. SHARE Center to continue to offer 12 step groups on site at Drop In Center5. Continue to offer IDDT groups for specific stages of change. These groups are co-facilitated with a certified peer support specialist.
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CMHSP: Tuscola Behavioral Health Systems

Priority Issue	Reasons For Priority	CMHSP Plan
1. Community education/prevention activities/community outreach.	TBHS had also identified this as a priority issue as did the needs assessment.	This is already an action item in the TBHS FY13 Strategic Plan.
2. Integrated Healthcare.	TBHS had also identified this as a priority issue as did the needs assessment.	This is already an action item in the TBHS FY13 Strategic Plan.
3. Advertising/anti-stigma efforts.	The needs assessment identified this as a priority concern.	TBHS Leadership has developed an anti-stigma work plan to address this area.
4. System of care for Children	The needs assessment identified different issues relative to mental health care for children in the county.	TBHS has taken the lead in this area and facilitates a children's system of care group consisting of different community agencies. This group has been meeting since 10/26/2011.
5. Education to local organizations, schools, etc. about the role and responsibility of TBHS.	Many respondents have expressed that there is a need to better understand TBHS' roles and responsibilities in the community.	This item was already identified by TBHS as a weakness and it is included in the FY13 Strategic Plan as an action item.

CMHSP: Van Buren Community Mental Health

Van Buren Community Mental Health	Van Buren Community Mental Health	Van Buren Community Mental Health
1. Increase in children with challenging behavior /Increased trauma and trauma response noted	Large number of persons surveyed listed this from all stakeholder groups surveyed.	<ul style="list-style-type: none"> • Complete cohort training in TF CBT • Start Parent Resource Training group • Provide training to other child serving agencies on impact of trauma • Continue providing Brief Strategic Family Therapy (2 clinicians certified in October in this model) • Continue working with schools to provide screening for youth and referral to services as needed • Implement Autism services in conjunction with state Medicaid benefit • Increase behavior treatment specialist hours
2. Concerns about access to mental health services including <ul style="list-style-type: none"> • For those with mild to moderate disturbance with Medicaid do not know where to go, do not have access to psychiatric services • For persons without insurance or underinsured see cost as barrier and do not know where to go • Transportation issues and confusion on who qualifies for services through CMH 	Second most frequent issue noted on surveys	<ul style="list-style-type: none"> • Continue working with schools to provide screening for youth and referral to appropriate services as needed • If person comes to or calls CMH but is found not eligible for CMH services, provide in writing other resources • Continue to educate referral sources and public that CMH has sliding scale fee for uninsured or underinsured
3. Parenting education and support	Third most frequent issue noted on surveys	<ul style="list-style-type: none"> • Provide Parent Resource Training groups • Work with CAN Council and Great Start Coalition to get Love and Logic parent group pilot running • Work with Great Start Parent Coalition to develop means to track parenting group availability in the county

4. Employment opportunities for persons with disabilities	Not noted as often in stakeholder survey but customer requests for employment exceed available jobs	<ul style="list-style-type: none"> Continued implementation of EBP supported employment for adults with MI begun 2 years ago Reorganization of employment services to increase number of persons served with employment
5. Prevention services	Fourth most frequent issue noted on surveys	<ul style="list-style-type: none"> Continue facilitation of Suicide Prevention Coalition Continue working with schools to provide screening for youth and referral to appropriate services as needed Continue work in prevention at Bangor school based health center One additional staff working to attain Infant Mental Health certification Pursue grant opportunities that would fund increased prevention and early intervention services

CMHSP: Washtenaw Community Health Organization

Priority Issue	Reasons For Priority	CMHSP Plan
1. Education on Mental Health	Reduction of discrimination and stigma	Community collaboration and creation of empowerment and educational series on mental health topics
2. Affordable housing	Fundamental need	Partnership with housing association to explore opportunities
3. Continuity of care	Increased quality of care provided	Continue to support integrated health care efforts and communication between service providers
4. Decreasing the number of community members that utilized the ER for mental health issues.	High amount of people who are utilizing inpatient services.	Educating the community regarding the new 24/7 Access and changing the culture of going to the ER for after hour services.
5. Education of available services provided by WCHO to greater number of Washtenaw County residents	Requests from community members who live in rural areas for increased information related to accessing Mental Health services.	Increased outreach to rural areas of Washtenaw County

CMHSP: West Michigan Community Mental Health

Priority Issue	Reasons For Priority	CMHSP Plan
1. Health Care Issues – lack of providers, lack of integrated care between PCP and CMH	45% of the population does not have health care. Identified as part of stakeholder survey.	Develop a plan to change practice to more integrated care. Develop relationships with primary health care providers. To begin 01/01/13 See plan for more details. Monitored through ET.
2. Increase the availability of treatment of the mild/moderate population	Identified as part of stakeholder survey. Lack of providers who accept Medicaid and indigent consumers who have mild/moderate mental health need.	Develop and identify more providers in the area, including at CMH and those who are bilingual. Continue providing Substance Abuse Services at CMH. To begin 01/01/13 See plan for more details. Monitored through work group as part of goals and projects.
3. Reduce the burden on Law enforcement	Identified as part of stakeholder survey, the number of low jail diversions.	Develop a plan for jail interventions. Work on relationships with law enforcement agencies. Provide law enforcement trainings regarding the interaction with persons with Mental Health issues. Better reporting on jail diversions. To begin 01/01/13 See plan for more details. Monitored through PIOC.
4. Troubled youth – desired outcome – healthier kids in our community	Identified as part of stakeholder survey. Number of kids placed in foster care, number of abused and neglected kids, high dropout rates, number of children at risk of developing SED.	Plan for working with strategic partners in the community including System of Care Initiative, Great Start work group, Baldwin Family Health – Baldwin Schools Teen Center, Walkerville Schools, Journey High School, Juvenile Courts, DHS, etc. Exploring SED waiver. To begin 01/01/13 Monitored through work group as part of goals and projects.
5. Pain Management issues	Identified as part of stakeholder survey.	Develop Agency Pain Management Philosophy, train staff and stakeholders on philosophy and institute pain management into person centered plans and decision support. Coordination with Primary Care Physicians. To begin 01/01/13 Monitored through Clinical Oversight Committee and as part of goals and projects.

CMHSP – Woodlands (Cass Co. CMH)

Priority Issue	Reasons For Priority	CMHSP Plan
1. Increased psychiatric capacity	Consistent response received from community regarding the need for more psychiatric services, especially for children and consultation with medical providers.	Expansion of current recruiting activities to include tele-psychiatry or joint purchasing with new Regional Entity. WBHN currently is investigating two psychiatry options.
2. Expansion of Community Education and Prevention Activities	Community stakeholders have requested additional education related to working with individuals with mental health or substance abuse diagnosis. Prevention and education activities have also been requested, given recent national events.	Increase opportunities for communities to engage in conversations regarding mental illness (facts vs. fiction), targeted trainings to medical staff and law enforcement regarding risk factors and suggested interventions.
3. Education to medical community	Increased efforts to access medical care for individuals served have resulted in requests for education and training by medical providers (Hospital ER and primary care)	WBHN to provide targeted trainings to medical staff within the community, regarding diagnosis, risk factors and suggested interventions. Opportunities for CMH Psychiatric consultations will also be developed. WBHN will work with local Trauma initiative to ensure county-wide training for all interested and willing medical providers.
4. Improve collaboration with schools, ISD to increase number of children who access and receive mental health care.	Community assessment confirmed the need for earlier identification and treatment of at risk children, along with better engagement of the child and family in treatment.	WBHN will work to expand local system of care, including DHS, Courts and local school districts. Additional outreach and community education forums focused on autism will be developed. WBHN has begun involvement with SED waiver and is hiring an Access clinician for SED waiver program to facilitate referral and stakeholder education.
5. Integrated healthcare	Needs assessments demonstrated need for better access to primary	WBHN will continue efforts with local FQHC and other providers to expand co-location of therapy and develop new integrated health opportunities (CMH currently in planning stage for school based health clinic with local FQHC). CMH will

	care for CMH consumers as well as those not served by CMH.	
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SECTION 404 (2) (f)
SECOND OPINIONS
FY 2012

Number of Second Opinions Requested Resulting in Delivery of Services

	October 1, 2011 - December 31, 2011		January 1, 2012 - March 31, 2012		April 1, 2012 - June 30, 2012		July 1, 2012 - September 30, 2012	
	Number of Requests for Second Opinions	Number of Persons that Received Services After Request for Second Opinion	Number of Requests for Second Opinions	Number of Persons that Received Services After Request for Second Opinion	Number of Requests for Second Opinions	Number of Persons that Received Services After Request for Second Opinion	Number of Requests for Second Opinions	Number of Persons that Received Services After Request for Second Opinion
CMHSP								
Allegan	0	0	0	0	2	0	0	0
AuSable	0	0	0	0	0	0	0	0
Barry	0	0	0	0	0	0	0	0
Bay-Arenac	0	0	0	0	0	0	0	0
Berrien	1	1	1	1	0	0	3	2
CEI	0	0	0	0	5	3	0	0
CMH Central MI	0	0	3	3	1	0	2	1
Copper	0	0	0	0	0	0	1	0
Detroit-Wayne	1	1	0	0	1	0	0	0
Genesee	6	1	5	1	10	0	10	0
Gogebic	0	0	0	0	0	0	1	1
Gratiot	0	0	0	0	0	0	0	0
Hiawatha	0	0	0	0	0	0	0	0
Huron	0	0	0	0	0	0	0	0
Ionia	0	0	0	0	0	0	0	0
Kalamazoo	14	7	14	7	14	7	4	0
Lapeer	0	0	0	0	0	0	0	0
Lenawee	2	1	0	0	0	0	0	0
Lifeways	0	0	4	1	0	0	0	0
Livingston	0	0	0	0	0	0	0	0
Macomb	0	0	4	2	2	0	0	0
Manistee-Benzie	0	0	0	0	0	0	0	0
Monroe	4	2	4	2	2	1	0	0
Montcalm	0	0	0	0	0	0	0	0
Muskegon	0	0	0	0	0	0	0	0
network180	5	1	6	1	7	1	9	1
Newaygo	0	0	0	0	0	0	0	0
North Country	0	0	0	0	1	0	3	0
Northeast	0	0	1	1	0	0	0	0
Northern Lakes	1	1	2	1	6	2	4	3
Northpointe	0	0	0	0	0	0	0	0
Oakland	35	13	55	17	37	17	22	8
Ottawa	5	2	6	0	6	3	5	1
Pathways	2	0	0	0	1	1	0	0
Pines	0	0	0	0	0	0	0	0
Saginaw	0	0	1	0	0	0	0	0
Sanilac	0	0	0	0	0	0	0	0
Shiawassee	0	0	0	0	0	0	0	0
St. Clair	2	1	3	2	4	0	26	6
St. Joseph	0	0	0	0	0	0	1	0
Summit Pointe	0	0	0	0	0	0	0	0
Tuscola	0	0	0	0	0	0	0	0
Van Buren	0	0	0	0	0	0	0	0
Washtenaw	3	1	5	2	5	2	1	1
West Michigan	0	0	0	0	0	0	0	0
Woodlands	0	0	0	0	0	0	0	0
Total	81	32	114	41	104	37	92	24

Source: Performance Indicator Report

SECTION 404 (2) (h)
LAPSES AND CARRYFORWARDS
FY 2012

FY 2012 CMHSP / PIHP FINAL REPORT ANALYSIS - UNAUDITED CMHSP / PIHP FY 12 REPORTS AS OF 05/09/13

PIHP	CMHSP	Medicaid Savings	Medicaid Lapse	PIHP MED Risk	MDCH MED Risk	GF Funding Formula Carryforward	GF Oper Base Lapse	GF Categorical Lapse	WCHO Disease MGMT Prg	Total Lapse	GF on Medicaid	CMHSP GF Risk
Southwest Affiliation	Allegan	n/a	n/a	n/a	n/a	35,599	-	-	-	-		
Northern Affiliation	Ausable Valley	n/a	n/a	n/a	n/a	92,316	(89,887)	-	-	(89,887)		
Venture Behavioral Health	Barry	n/a	n/a	n/a	n/a	23,845	-	-	-	-		
Access Alliance of MI	Bay Arenac	1,410,891	-	-	-	-	-	-	-	-		855,691
Venture Behavioral Health	Berrien	n/a	n/a	n/a	n/a	212,065	(92,396)	-	-	(92,396)		
CMH Affiliation of Mid-MI	Clinton-Eaton-Ingham	-	-	185,265	n/a	-	-	-	-	-		696,163
CMH Central MI	CMH for Central Michigan	4,594,254	(788,519)	-	-	-	-	-	-	-		2,462,713
North Care	Copper Country	n/a	n/a	n/a	n/a	-	-	-	-	-		375,922
Detroit-Wayne Co CMH	Detroit-Wayne	27,739,734	(4,308,861)	-	-	1,946,557	-	-	-	-		
Genesee Co CMH Services	Genesee - Cat lapse	8,566,587	(7,317,332)	-	-	893,003	(924,688)	(83,772)	-	(1,008,460)		
North Care	Gogebic	n/a	n/a	n/a	n/a	-	-	-	-	-		5,562
CMH Affiliation of Mid-MI	Gratiot	n/a	n/a	n/a	n/a	-	-	-	-	-		240,183
North Care	Hiawatha	n/a	n/a	n/a	n/a	100,975	(98,229)	-	-	(98,229)		
Access Alliance of MI	Huron	n/a	n/a	n/a	n/a	42,650	-	-	-	-		
CMH Affiliation of Mid-MI	Ionia	n/a	n/a	n/a	n/a	-	-	-	-	-		18,334
Southwest Affiliation	Kalamazoo	-	-	1,444,014	-	-	-	-	-	-	306,550	
Network 180	Kent - Network 180	1,948,821	-	-	-	164,941	-	-	-	-		
Thumb Alliance PIHP	Lapeer	n/a	n/a	n/a	n/a	90,695	(20,599)	-	-	(20,599)		
CMH Partnership of Southeast MI	Lenawee	n/a	n/a	n/a	n/a	-	-	-	-	-		274,350
Lifeways	Lifeways	2,861,888	(628,647)	-	-	29,221	-	-	-	-		
CMH Partnership of Southeast MI	Livingston	n/a	n/a	n/a	n/a	-	-	-	-	-		305,089
Macomb Co CMH Services	Macomb	12,772,527	(6,345,964)	-	-	58,167	-	-	-	-		
CMH Affiliation of Mid-MI	Manistee-Benzie	n/a	n/a	n/a	n/a	-	-	-	-	-		19,914
CMH Partnership of Southeast MI	Monroe	n/a	n/a	n/a	n/a	-	-	-	-	-		248,031
Access Alliance of MI	Montcalm	n/a	n/a	n/a	n/a	20,109	-	-	-	-		
Lakeshore Behavioral Health Allia	Muskegon	4,199,563	(437,515)	-	-	-	-	-	-	-		
CMH Affiliation of Mid-MI	Newaygo	n/a	n/a	n/a	n/a	-	-	-	-	-		212,287
Northern Affiliation	North Country	4,226,488	(463,859)	-	-	103,763	-	-	-	-		
Northern Affiliation	Northeast	n/a	n/a	n/a	n/a	-	-	-	-	-		121,267
Northwest CMH Affiliation	Northern Lakes	3,633,145	(629,801)	-	-	-	-	-	-	-		746,630
North Care	Northpointe	n/a	n/a	n/a	n/a	-	-	-	-	-		218,464
Oakland Co CMH Authority	Oakland	11,841,896	-	-	-	-	-	573,748	-	573,748		459,087
Lakeshore Behavioral Health Allia	Ottawa	-	n/a	n/a	n/a	-	-	-	-	-		213,286
North Care	Pathways	2,555,891	-	-	-	154,350	(52,721)	-	-	(52,721)		
Venture Behavioral Health	Pines Behavioral	n/a	n/a	n/a	n/a	19,405	-	-	-	-		
Saginaw Co CMH Authority	Saginaw	2,331,739	-	-	-	412,809	-	-	-	-		
Thumb Alliance PIHP	Sanilac	n/a	n/a	n/a	n/a	-	-	-	-	-		128,060
Access Alliance of MI	Shiawassee	n/a	n/a	n/a	n/a	77,069	-	-	-	-		
Thumb Alliance PIHP	St. Clair	-	-	2,735,126	-	-	-	-	-	-		1,236,186
Southwest Affiliation	St. Joseph	n/a	n/a	n/a	n/a	-	-	-	-	-		206,453
Venture Behavioral Health	Summit Pointe	5,348,923	(242,919)	-	-	-	-	-	-	-		197,759
Access Alliance of MI	Tuscola	n/a	n/a	n/a	n/a	68,815	(44,967)	-	-	(44,967)		
Venture Behavioral Health	Van Buren	n/a	n/a	n/a	n/a	111,868	(33,131)	-	-	(33,131)		
CMH Partnership of Southeast MI	Washtenaw	8,471,643	(2,634,444)	-	-	-	-	-	-	-		1,188,498
Northwest CMH Affiliation	West Michigan	n/a	n/a	n/a	n/a	-	-	-	-	-		33,388
Southwest Affiliation	Woodlands	n/a	n/a	n/a	n/a	96,001	-	-	-	-		
Totals		\$ 102,503,990	\$ (23,797,861)	\$ 4,364,405	\$ -	\$ 4,754,223	\$ (1,356,618)	\$ 489,976	\$ -	\$ (866,642)	\$ 306,550	\$ 10,463,317

SECTION 404 (2) (i) (i, ii & iii)
CMHSP PROVIDER CONTRACTS
FY 2012

STATEWIDE TOTALS

Program Type	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
ADULTS WITH MENTAL ILLNESS			
Targeted CSM/Supports Coordination	245		\$89,158,096.15
Intensive Interventions/Intensive Community Services	61		\$34,608,720.22
Clinic Services and/or Medication	559		\$87,007,240.10
Supports for Residential Living	988		\$119,460,865.60
Supports for Community Living	483		\$54,332,926.99
PERSONS WITH DEVELOPMENTAL DISABILITIES			
Targeted CSM/Supports Coordination	277		\$96,177,812.43
Intensive Interventions/Intensive Community Services	45		\$2,071,156.97
Clinic Services/Medication	499		\$23,502,001.26
Supports for Residential Living	1282		\$456,951,960.45
Supports for Community Living	967		\$439,770,305.34
CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCE			
Targeted CSM/Supports Coordination	115		\$21,658,707.35
Intensive Interventions/Intensive Community Services	92		\$28,850,629.02
Clinic Services/Medication	458		\$35,499,546.44
Supports for Residential Living	64		\$5,285,936.22
Supports for Community Living	127		\$8,478,190.33

**Adults with Mental Illness
Targeted CSM/Supports Coordination**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	1	\$29.48/15 minutes	\$265
Bay Arenac	3	\$50.00/unit - \$200 case rate	\$954,110
Berrien	2	29.48 - \$67.15	\$5,084
CEI	1	\$469 pp/mo.	\$28,268
Central MI	10	4.73 - 80.98	\$30,604
Copper Country	0	0	\$0
Detroit Wayne	48	0.28 - 3435.00	\$34,361,662
Genesee	13	\$10.86 - \$73.69	\$8,043,307
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	4	\$30/hr - \$43/day	\$6,027
Huron	1	1,850/month	\$18,000
Ionia	2	\$28.00 - \$43.75/ 15 min	\$12,963
Kalamazoo	5	T1017 \$31.00, T1017:HE \$31.00 per 15 min, T1017:HE:HM \$31.00 per 15 min	\$3,228,306
Lapeer	0	0	\$0
Lenawee	0	0	\$0
Lifeways	13	\$18.00-\$145.44	\$1,538,810
Livingston	0	0	\$0
Macomb	52	5.65 - 131.07	\$6,538,920
Manistee Benzie	0	0	\$0
Monroe	0	0	\$0
Montcalm	0	0	\$0
Muskegon	0	0	\$0
Network180	7	\$24 - \$100 /15 minutes	\$7,198,009
Newaygo	0	0	\$0
North Country	1	\$170 encounter	\$57,807
Northeast	2	62.50 - 86.52	\$3,442
Northern Lakes	15	\$49 to \$70 per 15 minutes	\$1,743,260
Northpointe	15	\$40-\$99.50	\$33,388
Oakland	4	net cost	\$18,166,123
Ottawa	10	\$43.78 - \$50.00 - 15 minutes	\$63,213
Pathways	3	\$39.50 - \$53.00 / 15 minutes	\$41,969
Pines	0	0	\$0
Saginaw	8	\$43.87/15min-\$82.64/15min	\$1,851,857
Sanilac	0	0	\$0
Shiawassee	1	96	\$4,155
St. Clair	3	\$20.49/15 min - \$71.43/15 min	\$38,791
St. Joseph	0	0	\$0
Summit Pointe	11	\$23-\$100/15 Min	\$52,660
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	5	\$16.25 to \$527.30 / units vary	\$5,058,176
West MI	3	\$43 - \$55	\$35,000
Woodlands	2	\$40 - \$57	\$43,921
Total	245		\$89,158,096

**Adults with Mental Illness
Intensive Interventions/Intensive Community**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	0	0	\$0
Bay Arenac	0	0	\$0
Berrien	0	0	\$0
CEI	0	0	\$0
Central MI	0	0	\$0
Copper Country	0	0	\$0
Detroit Wayne	24	1.00 - 1571.00	\$10,865,643
Genesee	3	\$0.30 - \$150.00	\$1,901,626
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	0	0	\$0
Huron	2	15/visit	\$4,300
Ionia	0	0	\$0
Kalamazoo	2	H0039 \$26.00 per day: H2019 \$30.00 per 15 min: H2019:TT \$6.88 per 15 min	\$2,561,464
Lapeer	1	\$242.00 per day	\$134,424
Lenawee	0	0	\$0
Lifeways	5	\$28.50-\$82.00	\$3,307,121
Livingston	0	0	\$0
Macomb	6	3.51 - 152.29	\$2,126,475
Manistee Benzie	1	29.48-148.50	\$1,686
Monroe	0	0	\$0
Montcalm	0	0	\$0
Muskegon	0	0	\$0
Network180	3	\$33 - \$66 /15 minutes	\$3,215,105
Newaygo	0	0	\$0
North Country	0	0	\$0
Northeast	0	0	\$0
Northern Lakes	2	\$110 to \$130 per 15 miutes	\$1,338,285
Northpointe	0	0	\$0
Oakland	4	net cost	\$6,868,318
Ottawa	0	0	\$0
Pathways	0	0	\$0
Pines	0	0	\$0
Saginaw	1	\$41.64/15min-\$41.86/15min	\$49,341
Sanilac	0	0	\$0
Shiawassee	1	257	\$2,313
St. Clair	1	23.97/15 min	\$144
St. Joseph	0	0	\$0
Summit Pointe	4	\$34/15 Min/They Pay Us	\$122,528
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	1	\$65.48 to \$158.04 / units vary	\$2,109,949
West MI	0	0	\$0
Woodlands	0	0	\$0
Total	61		\$34,608,720

**Adults with Mental Illness
Clinic Services and/or Medication**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	1	90-210	\$7,109
Barry	3	\$349.50/unit-\$40/unit	\$1,205
Bay Arenac	10	\$30.00/event - \$484/event	\$1,589,725
Berrien	3	\$74.25 - 408.94	\$2,006
CEI	0	0	\$0
Central MI	19	28.50 - 137 /hr	\$1,065,414
Copper Country	3	\$30-\$40/day \$35/hour when called out	\$6,852
Detroit Wayne	47	0.01 - 1200.00	\$38,730,531
Genesee	21	\$1.42 - \$150.00	\$1,246,304
Gogebic	3	\$160.00 - \$170.00/hour	\$131,758
Gratiot	2	125-200/hr	\$134,209
Hiawatha	13	\$22-\$170/hr	\$224,645
Huron	12	70/visit;65-145/eval;50/review	\$58,384
Ionia	5	\$18.00 - \$250.00/encounter	\$4,768
Kalamazoo	15	H0031 \$150.00 per encounter;90801AH:\$150.00 per encounter, 90901:AF \$135.00 per encounter; 90862 \$67.50 per encounter, M0064 \$67.50 per encounter;T1002 \$31.00 per 15 minute; 96101 \$65.00 per hour, 96102 \$32.50 per event, 96103 \$35.00 per event, 96116 \$75.00 per hour, 96118 \$75.00 per hour, S9445 \$87.50-\$97.50 per encounter	\$319,559
Lapeer	25	\$20.02 per unit to \$130.00 per hour	\$930,362
Lenawee	14	\$75-\$150 per hour	\$339,746
Lifeways	31	\$5.10-\$312.50	\$2,973,137
Livingston	5	48 -79 per hour	\$538,993
Macomb	32	3.33 - 228.50	\$8,272,013
Manistee Benzie	14	26.14-360.00	\$245,887
Monroe	6	\$35.70 to \$175.00 per encounter	\$249,216
Montcalm	2	\$151-155/hour	\$4,127
Muskegon	9	\$14.00-\$160.00 hour	\$253,549
Network180	10	\$16 - \$211 /encounter	\$2,309,464
Newaygo	2	\$100-\$135/ Hour	\$180,271
North Country	11	\$30-\$130 hour, \$52-\$700 encounter	\$341,965
Northeast	5	60.00 - 278.10	\$11,544
Northern Lakes	29	\$40 to \$325 per service	\$5,340,177
Northpointe	83	\$70-\$300/HR	\$106,443
Oakland	3	net cost	\$13,004,665
Ottawa	11	\$30.91 -\$77.27 - encounter	\$154,149
Pathways	7	\$40 / encounter - \$90 / hour	\$12,397
Pines	1	\$8.00 1/4 hr. to 180.00 hr	\$3,235
Saginaw	11	\$3.65/15min-\$420.61/Encounter	\$283,919
Sanilac	2	\$12.01-\$266.17 per session & \$1.54 - \$165 per day	\$16,332
Shiawassee	4	\$15 - \$185	\$99,240
St. Clair	6	\$10/session - \$149.18/session	\$462,267
St. Joseph	3	100-136/ hour	\$160,913
Summit Pointe	58	\$55-\$525/Enc; \$15.60-112/Hr; \$130-\$280/Eval	\$1,967,770
Tuscola	1	\$5.75 - \$160.00 / RX	\$18,828
Van Buren	1	116.59	\$100,829
Washtenaw	6	\$101.14-\$785.41 reporting unit varies	\$8,957,685
West MI	5	\$50 - \$195	\$245,600
Woodlands	8	\$21 - \$269	\$20,722
Total	562		\$91,127,913

**Adults with Mental Illness
Supports for Residential Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	43	\$19.02 - \$336.00 per day	\$1,304,356
AuSable Valley	0	0	\$0
Barry	6	\$100 per diem-\$391 per diem	\$313,109
Bay Arenac	10	\$47.11 - \$381/day	\$2,693,325
Berrien	21	\$3.20 - \$461.50	\$2,664,783
CEI	36	\$44.75 - \$241.36 per diem	\$2,832,631
Central MI	45	1.91 - 450.05	\$3,559,858
Copper Country	1	\$45.75/day/occupied bed \$39.43/day/unoccupied bed	\$96,091
Detroit Wayne	268	0.81 - 360.00	\$26,173,622
Genesee	49	\$14.05 - \$289.00	\$5,251,089
Gogebic	1	\$205/day	\$70,930
Gratiot	2	25-85/day	\$130,546
Hiawatha	2	\$160-\$191/day	\$931,083
Huron	1	280/day	\$35,000
Ionia	10	\$31.68 - \$283.00/diem	\$246,977
Kalamazoo	21	T2033 \$11.00-\$336.00 per day; T1020 \$14.44-\$183.65 per day; H2016 \$69.33-\$538.00 per day; H0018 \$391.00 per day;	\$7,127,093
Lapeer	13	\$10.85 to \$289.00 per day	\$1,291,431
Lenawee	3	\$170-\$247 per day	\$979,026
Lifeways	15	\$9.56-\$368.00	\$2,855,548
Livingston	6	35 - 164 per day	\$240,348
Macomb	77	16.47 - 528.59	\$1,450,907
Manistee Benzie	0	0	\$0
Monroe	8	\$145.38 - \$289.16 per diem	\$291,400
Montcalm	5	\$42-\$172/day	\$157,508
Muskegon	4	\$189.00-\$322.89 per diem	\$2,852,463
Network180	3	\$122 - \$293 /day	\$10,655,882
Newaygo	6	\$25.00/Day - \$100/day	\$92,854
North Country	16	\$20-\$306 day	\$1,283,777
Northeast	19	40.00 - 294.00	\$777,792
Northern Lakes	30	\$30 to \$520 per day	\$1,338,285
Northpointe	23	\$20-\$250/HR	\$153,706
Oakland	3	net cost	\$19,418,034
Ottawa	11	\$49.45 - \$241.61 - per diem	\$1,541,200
Pathways	15	\$45.80 - 259.63 / day	\$2,489,795
Pines	6	\$11.00 per day to 150.00 per day	\$364,692
Saginaw	62	\$6.30/Day-\$284.44/Day	\$5,101,306
Sanilac	13	\$1.54 - \$480.45 per day	\$933,159
Shiawassee	12	\$112 - \$499	\$1,071,890
St. Clair	11	\$2.22/day - \$276.96/day	\$1,587,618
St. Joseph	8	164-327/ diem	\$866,093
Summit Pointe	54	\$39.68/Day-\$612.25/Day	\$2,074,864
Tuscola	3	\$105.43 - \$ 306.00 / day	\$275,455
Van Buren	23	\$3.13 - \$299.25	\$1,313,814
Washtenaw	5	\$14.40 to \$223.22 / units vary	\$2,349,454
West MI	12	\$18 - \$304	\$1,420,100
Woodlands	6	\$175 - \$461	\$801,971
Total	988		\$119,460,866

**Adults with Mental Illness
Supports for Community Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	13	\$7.55 - \$18.63 per hour	\$83,869
AuSable Valley	0	0	\$0
Barry	2		
Bay Arenac	4	4	\$4
Berrien	9	\$2.32 - \$378.42	\$1,471,770
CEI	2	\$15.88/hr	\$8,987
Central MI	28	2.44 - 24.28	\$1,708,893
Copper Country	1	30.00/hour	\$46,169
Detroit Wayne	66	0.81 - 349.00	\$8,536,876
Genesee	21	\$0.25 - \$17.15	\$978,658
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	0	0	\$0
Huron	0	0	\$0
Ionia	2	\$13.59/hour & \$145.00/diem	\$71,210
		H0043 \$104.24-\$223.65 per day; H2014T:TT \$2.00-\$4.07 per 15 min, H2014:TF \$5.48 per 15 min, H2014:TF:TT \$4.00-\$4.81 per 15 min, H2014:TT:HE \$2.00 per 15 min, H2014:TF:TT:HE \$4.00 per 15 min, H2014:TG:TT \$5.00 per 15 min, H2014:TG:TT:HE \$5.00 per 15 min ; H2015 \$4.75 per 15 min, H2015:TT \$2.92 per 15 min, H2015:TF:TT \$4.44 per 15 min; H2023:TG \$24.00 per 15 min, H2023:TF:TG \$12.50 per 15 min ; H2015 \$4.24 per 15 min; H2030	
Kalamazoo	8	\$49.52 per day	\$1,257,867
Lapeer	4	\$1.60 per unit to \$38.05 per day	\$280,127
Lenawee	5	\$2.51-\$3.85/15 mins	\$603,865
Lifeways	17	\$3.56 - \$342.14	\$2,107,243
Livingston	5	15.40 per hour	\$276,773
Macomb	25	2.07 - 50.95	\$5,349,153
Manistee Benzie	0	0	\$0
Monroe	12	\$3.13 - \$3.85 per 15 min unit	\$853,016
Montcalm	2	\$4-\$4.05/ 15 min	\$101,248
		\$4.71 per 15 min-4245.00 per diem	
Muskegon	17		\$4,589,269
Network180	10	\$3 - \$5 /15 minutes	\$2,952,035
Newaygo	2	\$2.08/unit - \$315.63/Day	\$173,922
		\$2.65-\$17.34 hour \$95-\$150 day \$10,880 month	
North Country	6		\$268,922
Northeast	2	3.25 - 22.83	\$14,737
Northern Lakes	18	\$3 per \$6 per 15 minutes	\$1,381,981
Northpointe	71	\$8-\$30/HR	\$349,085
Oakland	3	net cost	\$11,331,677
Ottawa	28	\$1.65 - \$12.32 - 15 minutes	\$415,331
Pathways	9	\$4.03 / 15 min - \$248.40 / day	\$224,934
		\$2.42 per 1/4 hr to 508.33 per day	
Pines	6		\$347,112
Saginaw	14	\$1.20/15min-\$6.00/15min	\$672,877
		\$14.16 - \$216.96 per day & \$2.08 - \$12.00 per unit	
Sanilac	5		\$149,630
Shiawassee	8	\$2 - \$336.72	\$981,322
St. Clair	13	\$2.04/15 min - \$200.40/day	\$1,193,143
St. Joseph	4	25-85 / diem	\$405,511
		\$42-\$335/Day;\$1.93-\$5/15 Min;\$25/Hr	
Summit Pointe	12		\$381,296
Tuscola	2	\$151.93 - \$175.02 / day	\$119,337
Van Buren	7	\$2.38 - \$315.00	\$188,849
Washtenaw	10	\$1.27 to \$595.00 / units vary	\$3,485,141
West MI	0	0	\$0
Woodlands	6	\$2 - \$125	\$100,926
Total	479		\$53,462,767

**Persons with Developmental Disabilities
Targeted CSM/Supports Coordination**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	1	\$79.46/15 minutes	\$2,034
Bay Arenac	4	\$78.57/unit - \$200/month case rate	\$21,836
Berrien	4	\$43.09-\$96.00	\$7,991
CEI	8	\$13/hr - \$476/mo	\$40,328
Central MI	14	4.73 - 80.98	\$119,883
Copper Country	0	0	\$0
Detroit Wayne	80	0.13 - 2379.96	\$61,307,935
Genesee	21	\$30.40 - \$105.35	\$1,715,539
Gogebic	2	\$53.51 - \$968.65/service code	\$18,670
Gratiot	0	0	\$0
Hiawatha	4	\$30/hr - \$43/day	\$582,756
Huron	2	35/15 min;210/encounter	\$152,495
Ionia	2	\$47.50 - \$68.75/ 15 min	\$0
Kalamazoo	4	T1016 \$36.00 per 15 min, T1016:HE \$36.00 per 15 min,T1016:TF	\$696,258
Lapeer	1	\$33.81 per hour	\$42,195
Lenawee	0	0	\$0
Lifeways	9	\$28.00-\$95.49	\$1,182,919
Livingston	0	0	\$0
Macomb	32	47.53 - 96.61	\$9,233,353
Manistee Benzie	3	3	\$9,840
Monroe	0	0	\$0
Montcalm	2	\$52.50/unit	\$9,596
Muskegon	0	0	\$0
Network180	6	\$32.00/15 min - \$331 /month	\$4,855,792
Newaygo	0	0	\$0
North Country	2	\$37 day, \$52-\$282.15 encounter	\$15,830
Northeast	4	28.92 - 87.56	\$24,181
Northern Lakes	10	\$49 to \$70 per 15 miutes	\$889,480
Northpointe	4	\$40-\$99.50	\$6,831
Oakland	2	net cost	\$11,616,397
Ottawa	10	\$43.78 - \$50.00 - 15 minutes	\$58,219
Pathways	2	\$53 / 15 min - \$95.49 / 15 min	\$7,416
Pines	0	0	\$0
Saginaw	13	\$8.57/15min-\$106.78/15min	\$225,498
Sanilac	1	\$45.00 - \$61.00 per unit	\$990
Shiawassee	0	0	\$0
St. Clair	7	\$52.50/15 min - \$251.25/15 min	\$57,206
St. Joseph	1	95 / encounter	\$103,455
Summit Pointe	9	\$15-\$100/15 Min; \$23-\$31.80/Hr	\$310,241
Tuscola	2	\$37.92 - \$98.00	\$3,000
Van Buren	0	0	\$0
Washtenaw	8	\$46.70 to \$527.30 / units vary	\$2,856,025
West MI	0	0	\$0
Woodlands	3	\$29 - \$127	\$7,767
Total	277		\$96,181,956

**Persons with Developmental Disabilities
Intensive Interventions/Intensive Community Services**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	0	0	\$0
Bay Arenac	0	0	\$0
Berrien	0	0	\$0
CEI	0	0	\$0
Central MI	0	0	\$0
Copper Country	0	0	\$0
Detroit Wayne	15	2.50 - 365.00	\$277,735
Genesee	2	\$10.00 - \$150.00	\$116,729
Gogebic	0	0	\$0
Gratiot	1	has not been used	\$0
Hiawatha	0	0	\$0
Huron	0	0	\$0
Ionia	0	0	\$0
Kalamazoo	3	H0039 \$26.00 per day; H2019 \$30.00 per 15 min; H2019:TT \$6.88 per 15 min; H0036 \$22.92 per day;	\$102,700
Lapeer	0	0	\$0
Lenawee	0	0	\$0
Lifeways	5	\$29.50-107.93	\$440,051
Livingston	0	0	\$0
Macomb	4	3.51 - 152.29	\$89,344
Manistee Benzie	0	0	\$0
Monroe	0	0	\$0
Montcalm	0	0	\$0
Muskegon	0	0	\$0
Network180	1	\$600/day - \$1,500 /encounter	\$544,527
Newaygo	0	0	\$0
North Country	0	0	\$0
Northeast	0	0	\$0
Northern Lakes	2	\$110 to \$130 per 15 miutes \$279 per day	\$40,439
Northpointe	0	0	\$0
Oakland	2	net cost	\$7,759
Ottawa	1	\$43.78 - 15 minutes	\$0
Pathways	0	0	\$0
Pines	3	\$6,100 to \$12,249 home modifications	\$35,381
Saginaw	0	0	\$0
Sanilac	0	0	\$0
Shiawassee	1	280	\$840
St. Clair	0	0	\$0
St. Joseph	0	0	\$0
Summit Pointe	3	\$32-\$34/15 Min	\$255,644
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	1	\$40.00 to \$158.04 / units vary	\$157,376
West MI	0	0	\$0
Woodlands	1	29	\$2,631
Total	45		\$2,071,157

**Persons with Developmental Disabilities
Clinic Services/Medication**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	2	\$40/unit-\$375/unit	\$1,713
Bay Arenac	1	\$20.75 - \$155/event	\$37,392
Berrien	5	\$17.50 - 356.77	\$218,567
CEI	0	0	\$0
Central MI	17	26.92 - 137/hr	\$238,846
Copper Country	4	\$30-\$40/day \$35/hour when called out	\$7,735
Detroit Wayne	62	0.50 - 1248.28	\$7,617,250
Genesee	18	\$0.92 - \$201.91	\$127,094
Gogebic	1	\$160.00/hour	\$29,120
Gratiot	1	157.5	\$59,220
Hiawatha	13	\$22-\$170/hr	\$335,015
Huron	9	75/visit;60/assmt;27.50- 67.50/unit;50/hr	\$71,358
Ionia	6	\$27.50 - \$300/encounter	\$27,252
		96101\$65.00 per hour, 96102 \$32.50 per event, 96103 \$35.00 per event, 96116 \$75.00 per hour, 96118 \$75.00 per hour, T1001 \$139.68 per event, T1002 \$32.00 per 15 min, 97003 \$46.07- \$124.00 per encounter, 92506 \$75.14 per encounter, 92507 \$32.52 per encounter, 90801 AF \$135.00 per encounter; 90801AH \$150.00 per encounter; 90862 \$67.50 per encounter; 99244 \$337.00 per hour; 97001\$43.06- \$124.00 per event; 97002- \$22.82 to 62.00 per event, 97003- \$46.07 to 124.00 per event, 97004- \$27.77 to \$62.00 per event, 97110:GO- \$15.93 per event, 97112:GO- \$16.58 per 15 min., 97113:GO- \$18.09 per 15 min., 97116:GO- 13.99 per 15 min., 97124:GO- \$12.70 per 15 min., 97140:GO- \$14.86 per 15 min., 97530:GO- \$16.58 per 15 min. 97532:GO- 13.99 per 15 min., 97533:GO- \$14.86 per 15 min., 97535:GO- \$17.01 per 15 min., 97537:GO- \$15.50 per 15 min., 97542:GO- \$15.93 per 15 min., 97110:GP- \$15.97 per 15 min., 97112:GP- \$16.58 per 15 min., 97113:GP- \$18.09 per 15	
Kalamazoo	8	\$20.02 per unit to \$130.00 per hour	\$68,771
Lapeer	5	\$30-\$150/hour	\$113,660
Lenawee	12	\$5.10-\$199.33	\$422,668
Lifeways	31	48 -79 per hour	\$1,491,155
Livingston	8	9.90 - 548.33	\$267,612
Macomb	28	0	\$3,244,665
Manistee Benzie	0	0	\$0
Monroe	6	\$35.70 to \$175.00 per encounter	\$229,249
Montcalm	4	\$151-170/hour	\$22,334
Muskegon	0	Included Above In Adult MI	\$0
Network180	7	\$8.29/unit (item) - \$1,335 /unit (Item)	\$1,855,716
Newaygo	2	\$100-\$135/Hour	\$21,851
North Country	15	\$30-\$130 hour, \$38.50-\$700 encounter	\$176,417
Northeast	11	28.92 - 1140.00	\$147,434
Northern Lakes	30	\$40 to \$325 per service	\$250,334
Northpointe	70	\$155/enc	\$99,347
Oakland	2	net cost	\$3,859,457
Ottawa	19	\$30.91 - \$77.27 - encounter	\$112,631
Pathways	7	\$40 / 15 min - \$4,500 / day	\$174,895
Pines	0	0	\$0
Saginaw	16	\$25.57/Encounter- \$220.00/Encounter	\$79,319
Sanilac	0	0	\$0
Shiawassee	1	\$40 - \$185	\$1,855
St. Clair	7	\$16.64/session - \$128.43/session	\$8,465
St. Joseph	3	100-136/ hour	\$90,514
Summit Pointe	47	\$55-\$525/Enc; \$18-150/Hr; \$130- \$280/Eval	\$429,856
Tuscola	0	0	\$0
Van Buren	1	116.59	\$16,789
Washtenaw	8	\$9.37 to \$457.94 / units vary	\$1,399,341
West MI	9	\$38 - \$195	\$143,700
Woodlands	3	\$149 - \$1500	\$3,407
Total	499		\$23,502,001

**Persons with Developmental Disabilities
Supports for Residential Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	92	\$40.00 - \$480.99 per day	\$4,452,091
AuSable Valley	0	0	\$0
Barry	11	\$40 per diem-\$532 per diem	\$1,443,036
Bay Arenac	8	\$49.65 - \$142.17/day	\$6,967,718
Berrien	20	\$8.37 - \$312.73	\$4,164,158
CEI	70	\$18.86/day - \$208.38/day	\$20,416,937
Central MI	102	1.52 - 440.79	\$17,745,728
Copper Country	6	\$64.68 - \$264.76 per day	\$657,830
Detroit Wayne	128	1.00 - 2947.12	\$121,226,303
Genesee	115	\$13.38 - \$279.00	\$22,262,677
Gogebic	5	\$114.00 - \$244.67/day	\$254,890
Gratiot	1	137.06-191.87/day	\$1,909,033
Hiawatha	13	\$30-\$390/day	\$3,438,660
Huron	5	16.28-158/day	\$331,519
Ionia	23	\$16.60 - \$285.00/diem	\$1,774,415
Kalamazoo	21	T2033 \$11.00-\$336.00 per day;T1020 \$14.44-\$183.65 per day;H2016 \$69.33-\$538.00 per day;H0018 \$391.00 per day	\$11,781,367
Lapeer	16	\$10.85 to \$289.00 per day	\$3,109,614
Lenawee	2	\$95-\$175/day	\$2,937,080
Lifeways	18	\$31.91-\$123.27	\$8,599,353
Livingston	5	114 - 309 per day	\$2,046,024
Macomb	70	19.62 - 311.83	\$26,395,011
Manistee Benzie	14	60.00 to 538.10 per diem	\$1,610,828
Monroe	8	\$145.38 - \$175.00 per encounter	\$3,920,263
Montcalm	9	\$32-\$196/day	\$1,700,355
Muskegon	12	\$59.15-\$281.00 per diem	\$11,706,885
Network180	7	\$8.35/day - \$525/day	\$33,549,379
Newaygo	11	\$25.00/Day - \$100/Day	\$864,015
North Country	37	\$18.53-\$538 day	\$9,710,600
Northeast	51	25.00 - 352.00	\$1,824,624
Northern Lakes	58	\$30 to \$520 per day	\$14,031,048
Northpointe	21	\$20.00 - \$250.00/day	\$984,045
Oakland	2	net cost	\$51,805,264
Ottawa	41	\$15.45 - \$991.95 per diem	\$9,030,247
Pathways	20	\$45.13 - \$662.08 / day	\$10,310,089
Pines	12	\$1.85 per 1/4 hr to 200.00 hr	\$2,652,558
Saginaw	79	\$7.47/Day-\$285.47/Day	\$9,600,469
Sanilac	28	\$1.54 - \$480.45 per day	\$3,077,267
Shiawassee	4	\$112.18 - \$210.76	\$802,075
St. Clair	23	\$2.22/day - \$398.64/day	\$8,829,398
St. Joseph	17	70-615/ diem	\$4,047,443
Summit Pointe	1	\$47.96/Hr	\$129,535
Tuscola	18	\$16.73 - \$221.00 / day	\$3,240,654
Van Buren	43	\$3.00 - \$408.00	\$1,762,859
Washtenaw	18	\$2.22 to \$165.71 / units vary	\$5,079,826
West MI	15	\$38 - \$358	\$3,467,500
Woodlands	2	\$177 - \$375	\$1,301,290
Total	1282		\$456,951,960

**Persons with Developmental Disabilities
Supports for Community Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	14	\$7.55 - \$19.20 per hour	\$2,437,859
AuSable Valley	1	22-84	\$30,568
Barry	9	\$1.11/15 min-\$76.87/15 min	\$110,759
Bay Arenac	16	\$2.25/unit - \$600/event	\$6,066,404
Berrien	33	\$2.80 - \$308.08	\$7,184,407
CEI	35	\$15.88 - \$39.44/hour	\$4,504,566
Central MI	39	2.44 - 24.28	\$13,022,609
Copper Country	3	\$9.00 - \$30.00 per hour	\$358,974
Detroit Wayne	108	0.13 - 2947.12	\$122,495,903
Genesee	34	\$1.12 - \$14.95	\$9,426,745
Gogebic	2	\$2.05/unit or \$11/hour	\$207,933
Gratiot	2	13.42/hr	\$616,425
Hiawatha	5	\$30/hr - \$43/day	\$434,720
Huron	2	175/transaction;2.66/unit; 60/encounter	\$1,423,819
Ionia	5	\$15.49 - \$20.00/hour	\$308,073
Kalamazoo	11	H0043 \$11.00-\$658.00 per day;H2015 \$3.62-\$475 per 15 min., H2015:TT \$2.72-\$2.92 per 15 min, H2015:TG:TT \$6.13 per 15 min, H2015:TF:TT \$4.44 per 15 min; H2030; H2014:TT \$2.00-\$4.07 per 15 min, H2014:TF \$5.48 per 15 min, H2014:TT:HE \$2.00 per 15 min, H2014:TF:TT \$4.00-\$4.81 per 15 min, H2014:TF:TT:HE \$4.00 per 15 min, H2014:TG:TT \$5.00 per 15 min, H2014:TG:TT \$5.00 per 15 min;T1005; T1005:TF- \$3.56 per 15 min. T1005:TT- \$2.67 per 15 min., T1005:TE- \$6.52 per 15 min., T1005:TD- \$7.67 per 15 min.H2023 \$24.00 per 15 min, H2023:TF \$12.50 per 15 min	\$13,480,093
Lapeer	8	\$1.60 per unit to \$38.05 per day	\$1,741,662
Lenawee	6	\$2.51-\$3.85/15 mins	\$2,664,536
Lifeways	19	\$1.75-\$379.20	\$6,977,701
Livingston	13	15.40 - 29.95 per hour	\$5,245,357
Macomb	39	2.14 - 258.00	\$60,549,688
Manistee Benzie	51	9.00 per hour to 355.83 per diem	\$2,393,044
Monroe	12	\$3.13 - \$3.85 per 15 min unit	\$6,878,231
Montcalm	3	\$3.67-\$5.30/15 min	\$286,653
Muskegon	0	Included Above In Adult MI	\$0
Network180	9	\$2.67/15 min - \$13,432 /month	\$14,427,012
Newaygo	2	\$2.08/unit- \$315.63/day	\$300,179
North Country	17	\$10.00-\$33.21 hour	\$6,896,957
Northeast	69	\$22.74-\$350 day	\$1,294,688
Northern Lakes	45	4.56 - 8.72	\$7,211,249
Northpointe	56	\$3 to \$6 per 15 minutes	\$1,477,392
Oakland	2	\$8 - \$30.00/hr	\$81,284,085
Ottawa	48	net cost	\$6,046,790
Pathways	10	\$1.65 - \$12.32 - 15 minutes	\$3,417,064
Pines	12	\$4.03 / 15 min - \$780.12 / day	\$1,399,555
Saginaw	33	1.85 per 1/4 hr to \$150.00 per hr.	\$4,189,439
Sanilac	12	\$1.21/15min-\$224.44/Day	\$462,420
Shiawassee	6	\$14.16 - \$216.96 per day & \$2.08 - \$12.00 per unit	\$1,171,324
St. Clair	66	\$3.51 - \$304.89	\$8,907,851
St. Joseph	14	\$2.06/15 min - \$490.59/day	\$1,631,204
Summit Pointe	24	8.64-25/ hour	\$6,026,769
Tuscola	5	\$1.84-\$12.85/15 Min; \$42-\$739.20/Day; \$18/Hr	\$899,658
Van Buren	27	\$151.93 - \$317.81 / day	\$1,232,196
Washtenaw	29	\$1.65 - \$380.75	\$20,194,767
West MI	5	\$1.29 to \$652.75 / units vary	\$101,000
Woodlands	6	\$1.97 - \$4.85	\$2,351,978
Total	967	\$3 - \$951	\$439,770,305

**Children with Serious Emotional Disturbance
Targeted CSM**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	2	\$32/15 min-\$72.39/15 min	\$0
Bay Arenac	0	0	\$0
Berrien	1	100.5	\$101
CEI	0	0	\$0
Central MI	1	52.7	\$2,635
Copper Country	1	0	\$1,055
Detroit Wayne	35	0.50 - 5940.00	\$12,543,579
Genesee	8	\$21.71 - \$91.39	\$2,066,948
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	1	\$25/hr	\$3,300
Huron	0	0	\$0
Ionia	0	0	\$0
Kalamazoo	2	T1017:TG- \$9.65 per diem, T1017:HE- net cost, T1017- \$9.65 per diem	\$385,910
Lapeer	2	\$17.46 per hour	\$58,106
Lenawee	0	0	\$0
Lifeways	5	36	\$14,449
Livingston	0	0	\$0
Macomb	26	47.53 - 169.78	\$190,022
Manistee Benzie	1	0	\$0
Monroe	0	0	\$0
Montcalm	0	0	\$0
Muskegon	0	0	\$0
Network180	5	\$29 - \$48 /15 minutes	\$5,168,182
Newaygo	0	0	\$0
North Country	0	0	\$0
Northeast	0	0	\$0
Northern Lakes	2	\$49 to \$70 per 15 miutes	\$254,500
Northpointe	3	\$50/HR	\$11,687
Oakland	2	net cost	\$377,919
Ottawa	5	\$43.78 - 15 minutes	\$11,049
Pathways	0	0	\$0
Pines	0	0	\$0
Saginaw	3	\$43.63/15min-\$44.09/15min	\$97,828
Sanilac	1	\$45.00 - \$61.00 per unit	\$976
Shiawassee	0	0	\$0
St. Clair	2	\$20.48/15 min - \$108.59/15 min	\$48,464
St. Joseph	0	0	\$0
Summit Pointe	3	\$50/15 Min; \$291.57/Mon	\$232,978
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	2	\$74.65 to \$170.68 / units vary	\$188,137
West MI	0	0	\$0
Woodlands	2	\$36 - \$44	\$883
Total	115		\$21,658,707

**Children with Serious Emotional Disturbance
Intensive Interventions/Intensive Community Services**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	0	0	\$0
Barry	2	\$30/15 min-\$41.53/15 min	\$872
Bay Arenac	0	0	\$0
Berrien	2	\$29.65 - \$38.82	\$7,779
CEI	0	0	\$0
Central MI	1	56.57	\$45,143
Copper Country	0	0	\$0
Detroit Wayne	21	5.67 - 1571.00	\$9,880,901
Genesee	2	\$3.00 - \$150.00	\$1,017,783
Gogebic	1	\$102.72 - \$236.89/service code	\$10,254
Gratiot	0	0	\$0
Hiawatha	0	0	\$0
Huron	6	45.45/15 min;127/review;327/eval	\$39,801
Ionia	0	0	\$0
		H0036- \$18.08 per 15 minute unit, H0036:TF- \$36.02 per 15 minute unit, H0036:TG- \$36.02 per 15 minute unit, H0036:HA- net cost; 90806- \$75.00 per session, 90853- \$30.00 per session, 90804- \$37.50 per session, 90847- \$75.00 per session, 90853:HH- \$30.00 per session, 90806:HH- \$75.00 per session, 90804:HH- \$37.50 per session,90847:HH- \$75.00 per session	
Kalamazoo	3	session	\$1,382,467
Lapeer	0	0	\$0
Lenawee	1	\$25.90/15 mins	\$176,319
Lifeways	4	\$44.00-\$82.00	\$2,385,070
Livingston	0	0	\$0
Macomb	24	36.21 - 117.00	\$1,130,244
Manistee Benzie	0	0	\$0
Monroe	0	0	\$0
Montcalm	4	\$56.18-\$60/unit	\$5,920
Muskegon	1	\$55.00-\$185.00 hour	\$31,218
Network180	6	\$25 - \$68 /15 minutes	\$1,851,802
Newaygo	0	0	\$0
North Country	1	\$8,291.58 case	\$493,510
Northeast	1	66.81 Unit	\$19,693
Northern Lakes	3	\$110 to \$130 per 15 miutes	\$213,120
Northpointe	0	0	\$0
Oakland	2	net cost	\$6,224,273
Ottawa	1	\$68.30 - 15 minutes	\$212
Pathways	0	0	\$0
Pines	0	0	\$0
Saginaw	0	0	\$0
Sanilac	0	0	\$0
Shiawassee	0	0	\$0
St. Clair	1	\$23.96/15 min - 24.45/15 min	\$1,074,500
St. Joseph	0	0	\$0
Summit Pointe	3	\$1-\$34/15 Min	\$2,310,653
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	2	\$65.47 to \$158.04 / units vary	\$549,094
West MI	0	0	\$0
Woodlands	0	0	\$0
Total	92		\$28,850,629

**Children with Serious Emotional Disturbance
Clinic Services/Medication**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	2	160-217	\$183,814
Barry	2	\$30/15 min-\$41.53/15 min	\$872
Bay Arenac	2	\$20.75 - \$155.00/event	\$452,308
Berrien	3	\$5.83- \$459.60	\$6,660
CEI	0	0	\$0
Central MI	9	28.50 - 137/hour	\$258,008
Copper Country	1	0	\$3,895
Detroit Wayne	42	0.01 - 5940.00	\$19,852,558
Genesee	21	\$1.60 - \$390.94	\$448,561
Gogebic	1	\$170.00/hour	\$102,638
Gratiot	2	154.00/hr	\$76,846
Hiawatha	1	\$175/hr	\$138,492
		110/eval;27.50-	
Huron	6	67.50/unit;60/assessment	\$13,270
Ionia	5	\$65.00 - \$130.00/encounter	\$11,632
		97003- \$46.07 to 124.00 per event, 97004- \$27.77 to \$62.00 per event, 97110-GO- \$15.93 per event, 97112-GO- \$16.58 per 15 min., 97113-GO- \$18.09 per 15 min., 97116-GO- 13.99 per 15 min., 97124-GO- \$12.70 per 15 min., 97140-GO- \$14.86 per 15 min., 97530-GO- \$16.58 per 15 min., 97532-GO- 13.99 per 15 min., 97533-GO- \$14.86 per 15 min., 97535-GO- \$17.01 per 15 min., 97537-GO- \$15.50 per 15 min., 97542-GO- \$15.93 per 15 min., 97001- \$43.06 to \$124.00 per event, 97002- \$22.82 to 62.00 per event, 97110-GP- \$15.97 per 15 min., 97112-GP- \$16.58 per 15 min., 97113-GP- \$18.09 per 15 min., 97116-GP- \$13.99 per 15 min., 97129-GP- \$12.70 per 15 min., 97140-GP- \$14.86 per 15 min., 97530-GP- \$16.58 per 15 min., 97532-GP- \$13.99 per 15 min., 97533-GP- \$14.86 per 15 min., 97535-GP- \$17.01 per 15 min., 97537-GP- \$15.50 per 15 min., 97542-GP- \$15.93 per 15 min., H0031- \$150.00 per event, 90801-AH- \$150.00 per event, 96101- \$65.00 per hour, 96103- \$35.00 per event, 90853-HA-	
Kalamazoo	21		\$495,875
Lapeer	11	\$20.02 per unit to \$130.00 per hour	\$465,181
Lenawee	9	\$75-\$150/hour	\$169,286
Lifeways	20	\$33.22-\$229.33	\$553,475
Livingston	3	37 -125 per hour	\$189,584
Macomb	36	6.40 - 790.63	\$1,368,242
Manistee Benzie	0	0	\$0
Monroe	3	\$37.50 - \$135.00 per encounter	\$28,084
Montcalm	13	\$151-\$155/hour	\$84,041
Muskegon	4	\$30.00-123.00 hour	\$59,000
Network180	5	\$35 - \$285 /encounter	\$812,185
Newaygo	2	\$100-\$135 / hour	\$71,016
		\$85-\$130 hour, \$110-\$275 encounter	
North Country	8		\$130,436
Northeast	3	80.00 - 90.00	\$52,456
Northern Lakes	16	\$40 to \$325 per service	\$2,598,480
Northpointe	115	\$155/enc	\$149,020
Oakland	2	net cost	\$4,485,398
Ottawa	10	\$30.91 - \$77.27 encounter	\$137,766
Pathways	7	\$37.01 - \$579 / encounter	\$13,499
Pines	2	\$93.00 hr to 160.00 hr	\$59,595
		\$31.58/Encounter-\$265.31/Encounter	
Saginaw	5		\$123,242
		\$12.01-\$266.17 per session & \$1.54 - \$165 per day	
Sanilac	3		\$2,008
Shiawassee	1	\$40 - \$185	\$28,050
St. Clair	4	\$10.80/session - \$265.31/session	\$303,667
St. Joseph	0	0	\$0
Summit Pointe	38	\$18.00-112/Hr; \$130-\$280/Eval	\$817,269
Tuscola	0	0	\$0
Van Buren	1	117	\$28,923
Washtenaw	7	\$20.00 to \$483.00 / units vary	\$672,946
West MI	2	\$50 - \$185	\$23,200
Woodlands	4	\$31 - \$459	\$12,736
Total	452		\$35,484,214

**Children with Serious Emotional Disturbance
Supports for Residential Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	1	35	\$3,185
Barry	1	\$382 per diem	\$128,352
Bay Arenac	1	\$61.24/day	\$10,717
Berrien	0	0	\$0
CEI	0	0	\$0
Central MI	2	4.77 - 287.74	\$5,457
Copper Country	3	\$143.16 - \$315.58	\$118,996
Detroit Wayne	9	3.13 - 392.78	\$1,039,774
Genesee	0	0	\$0
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	0	0	\$0
Huron	0	0	\$0
Ionia	0	0	\$0
Kalamazoo	1	H0018- \$296.10 per day.	\$10,866
Lapeer	1	\$144.00 per day	\$2,160
Lenawee	0	0	\$0
Lifeways	8	\$31.91-\$316.58	\$274,626
Livingston	0	0	\$0
Macomb	6	116.96 - 360.00	\$1,243,710
Manistee Benzie	0	0	\$0
Monroe	8	\$50.00 per diem	\$278,566
Montcalm	0	0	\$0
Muskegon	3	\$226.80-\$550.00 per diem	\$305,993
Network180	1	\$230 - \$450 /day	\$710,011
Newaygo	0	0	\$0
North Country	3	\$69.90-\$317 day	\$324,567
Northeast	0	0	\$0
Northern Lakes	2	\$32 to \$175 per day	\$59,586
Northpointe	2	\$75 - \$210.00/day	\$226,513
Oakland	2	net cost	\$182,078
Ottawa	2	\$230.65 - 407.59 per diem	\$15,328
Pathways	3	\$116.49 - \$517.71 / day	\$113,381
Pines	0	0	\$0
Saginaw	1	\$67.20/Day-\$248.38/Day	\$29,665
Sanilac	0	0	\$0
Shiawassee	1	232	\$10,904
St. Clair	2	\$8.98/day - \$ \$206.52/day	\$164,686
St. Joseph	0	0	\$0
Summit Pointe	0	0	\$0
Tuscola	0	0	\$0
Van Buren	0	0	\$0
Washtenaw	0	0	\$0
West MI	0	0	\$0
Woodlands	1	135	\$26,815
Total	64		\$5,285,936

**Children with Serious Emotional Disturbance
Supports for Community Living**

CMHSP	Number of Contracts	Rate paid per unit of service. Provide range if more than one rate is paid	Total FY 12 CMHSP Contractual Expenditures
Allegan	0	0	\$0
AuSable Valley	1	17-84	\$46,345
Barry	3	\$4.00/15 min-\$395 per diem	\$25,442
Bay Arenac	1	\$5.29/unit	\$370,834
Berrien	2	\$5.35 - \$5.83	\$5,556
CEI	0	0	\$0
Central MI	2	3.21 - 4.31	\$23,791
Copper Country	0	0	\$0
Detroit Wayne	11	2.25 - 236.00	\$120,947
Genesee	7	\$1.95 - \$10.00	\$1,260,786
Gogebic	0	0	\$0
Gratiot	0	0	\$0
Hiawatha	0	0	\$0
Huron	0	0	\$0
Ionia	4	\$13.00 - \$17.07	\$122,009
Kalamazoo	4	H2015- \$4.24 per 15 min., H2015:TG- \$6.13 per 15 min., H2015:TF- \$4.44 per 15 min., H2015:TT- \$2.72 per 15 min., H2015:TG:TT- \$6.13 per 15 min., H2015:TF:TT- \$4.44 per 15 min., T1005- \$1.04 per 15 min., T1005:TF:TT- \$3.34 per 15 min., T1005:TG- \$3.99 per 15 min., T1005:TG:TT- \$3.99 per 15 min., H2014:TJ- \$9.06 per 15 min.	\$1,539,480
Lapeer	4	\$1.60 per unit to \$38.05 per day	\$274,037
Lenawee	2	\$3.85/15 mins	\$100,857
Lifeways	11	\$1.75-\$56.50	\$131,194
Livingston	0	0	\$0
Macomb	17	2.00 - 521.56	\$788,603
Manistee Benzie	0	0	\$0
Monroe	3	\$3.13 - \$3.85 per 15 min unit	\$164,461
Montcalm	0	0	\$0
Muskegon	0	0	\$0
Network180	5	\$3.70 - \$6.60 /15 minutes	\$1,162,028
Newaygo	0	0	\$0
North Country	0	0	\$0
Northeast	0	0	\$0
Northern Lakes	2	\$32 to \$175 per day	\$59,586
Northpointe	0	0	\$0
Oakland	2	net cost	\$1,186,596
Ottawa	30	\$1.92 - \$12.00 - 15 minutes	\$170,174
Pathways	2	\$3.26 - \$4.00 / 15 minutes	\$37,450
Pines	1	\$4.56 1/4 hr to \$ 7.89 1/4 hr	\$163,450
Saginaw	2	\$3.60/15min-\$224.50/Day	\$378,534
Sanilac	0	0	\$0
Shiawassee	0	0	\$0
St. Clair	1	\$3.53/15 min - \$4.70/day	\$10,217
St. Joseph	0	0	\$0
Summit Pointe	4	\$1.85-\$10.50/15 Min;\$44-\$384/Day	\$235,136
Tuscola	0	0	\$0
Van Buren	2	\$3.56 - \$3.62 per unit	\$13,000
Washtenaw	2	\$1.85 to \$100.00/ units vary	\$45,849
West MI	0	0	\$0
Woodlands	2	\$138 - \$151	\$41,830
Total	127		\$8,478,190

SECTION 404 (2) (j) (i)
EXPENDITURES BY MEDICAID
ELIGIBILITY GROUP
FY 2012

MEG Summary

Year-To-Date:
October 2011 through September 2012

Michigan's Medicaid Specialty Services and Supports Waiver
418 REPORT - FY2012

Capitation Paid (including adjustments)

PIHP	DAB			TANF			DAB & TANF			HSW
	MH	SA	Combined	MH	SA	Combined	MH	SA	Combined	
ACCESS ALLIANCE	58,186,343	560,961	58,757,304	8,715,386	938,555	9,653,941	58,911,729	1,499,516	68,411,245	21,131,219
CMH AFFILIATION OF MID MI	81,184,121	753,809	81,917,929	11,142,333	1,085,220	12,227,554	92,306,454	1,839,028	94,145,482	21,818,456
CMH FOR CENTRAL MICHIGAN	42,864,299	450,507	43,114,806	4,381,551	528,530	4,910,081	47,645,859	977,137	48,622,997	22,428,061
CMH PARTNERSHIP OF SE MI	66,641,585	773,782	67,415,367	8,112,482	1,095,168	9,197,649	74,754,407	1,656,948	76,411,355	39,787,409
DETROIT WAYNE PIHP	341,323,482	9,433,885	350,757,367	42,460,597	3,677,171	46,137,768	383,784,079	13,111,056	396,895,135	72,388,692
GENESEE COUNTY PIHP	81,586,028	1,637,768	83,223,796	9,770,587	1,810,853	11,581,440	91,365,612	3,448,621	94,814,233	19,154,527
LAKEHORE BEHAVIORAL HLTH ALLIANCE	52,931,015	830,719	53,761,734	5,015,142	1,019,170	6,034,312	57,946,157	1,648,860	59,595,017	15,354,388
LIFEWAYS PIHP	28,487,960	358,953	28,846,913	3,513,387	600,820	4,114,187	32,001,327	957,773	32,959,100	11,449,087
MACOMB PIHP	128,089,176	1,794,529	129,883,705	12,070,074	1,990,270	14,030,343	140,159,249	3,754,789	143,914,038	28,992,188
NETWORK 180	87,160,401	1,073,039	88,233,431	9,187,738	1,253,097	10,440,835	96,348,140	2,326,127	98,674,268	9,121,947
NORTH CARE	54,495,502	448,412	54,944,014	5,033,510	670,907	5,704,417	59,529,112	1,119,318	60,648,431	20,589,797
NORTHERN AFFILIATION	45,013,303	533,487	45,546,790	4,868,537	708,113	5,576,650	49,911,939	1,239,800	51,151,739	23,889,301
NORTHWEST CMH AFFILIATION	42,864,109	449,714	43,313,823	6,276,072	660,205	6,936,276	49,140,181	1,109,918	50,250,099	9,808,589
OAKLAND COUNTY PIHP	183,934,049	1,473,348	185,407,396	12,106,748	1,889,362	13,996,111	196,040,798	3,382,708	199,423,506	49,984,276
SAGINAW COUNTY PIHP	36,255,812	639,108	36,894,921	3,085,075	747,241	3,832,316	39,340,887	1,386,350	40,727,237	6,031,102
SOUTHWEST MI URBAN & RURAL CONSORTIUM	68,106,304	825,340	68,931,644	7,888,776	1,060,737	8,949,513	73,885,080	1,886,077	75,771,157	26,189,043
THUMB ALLIANCE	51,703,989	447,025	52,151,014	7,051,806	657,272	7,709,078	58,755,875	1,114,297	59,870,172	16,589,034
VENTURE BEHAVIORAL HEALTH	71,968,856	864,889	72,833,745	10,968,381	1,080,541	12,048,922	82,935,237	1,745,428	84,680,665	16,994,994
TOTAL	\$1,620,686,812	\$22,947,383	\$1,643,634,195	\$172,878,282	\$21,438,228	\$194,316,510	\$1,802,875,074	\$44,385,592	\$1,737,260,666	\$428,475,111

Eligible Months Paid

PIHP	DAB	TANF	DAB & TANF	HSW
ACCESS ALLIANCE	209,541	488,132	697,673	4,411
CMH AFFILIATION OF MID MI	329,427	810,117	1,139,544	4,384
CMH FOR CENTRAL MICHIGAN	160,736	346,951	507,687	5,414
CMH PARTNERSHIP OF SE MI	261,597	695,457	957,054	8,128
DETROIT WAYNE PIHP	1,611,789	3,613,018	5,224,817	13,643
GENESEE COUNTY PIHP	325,089	770,146	1,095,234	4,461
LAKEHORE BEHAVIORAL HLTH ALLIANCE	209,164	583,356	792,520	2,809
LIFEWAYS PIHP	123,417	302,261	425,678	3,056
MACOMB PIHP	384,327	976,061	1,360,388	5,583
NETWORK 180	333,603	856,117	1,189,720	1,889
NORTH CARE	176,876	356,703	533,579	4,310
NORTHERN AFFILIATION	176,844	379,974	556,818	5,051
NORTHWEST CMH AFFILIATION	156,683	372,634	529,317	2,202
OAKLAND COUNTY PIHP	455,777	1,090,880	1,546,657	8,825
SAGINAW COUNTY PIHP	184,287	326,233	510,520	1,414
SOUTHWEST MI URBAN & RURAL CONSORTIUM	247,925	647,086	894,011	5,434
THUMB ALLIANCE	142,885	412,189	555,074	3,378
VENTURE BEHAVIORAL HEALTH	311,858	743,428	1,055,286	3,780
TOTAL	6,781,016	13,680,930	20,461,946	90,266

SECTION 404 (2) (j) (ii)
CMHSP PERFORMANCE
INDICATOR REPORTING
FY 2012

MICHIGAN'S MISSION-BASED PERFORMANCE INDICATOR SYSTEM VERSION 6.0

CMHSP Reporting Codebooks

December 2012

Codebook Version 10/3/2006

Codebook Revisions 12/18/2012

Due Date Revisions 5/7/2012

**Michigan Department of Community Health
Mental Health & Substance Abuse Administration**

Revision Legend: Revised FY08

Revised FY09

Revised FY12

FOR CMHSPS

ACCESS

1. The percent of all adults and children receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours.
 - a. Standard = 95% in three hours
 - b. Quarterly report
 - c. PIHP for all Medicaid beneficiaries
 - d. CMHSP for all consumers

2. The percent of new persons receiving a face-to-face meeting with a professional within 14 calendar days of a non-emergency request for service (MI adults, MI children, DD adults, and DD children).
 - a. Standard = 95% in 14 days
 - b. Quarterly report
 - c. PIHP for all Medicaid beneficiaries
 - d. CMHSP for all consumers
 - e. Scope: MI adults, MI children, DD adults, DD children, and Medicaid SA

3. The percent of new persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional. (MI adults, MI children, DD adults and DD children)
 - a. Standard = 95% in 14 days
 - b. Quarterly report
 - c. PIHP for all Medicaid beneficiaries
 - d. CMHSP for all consumers
 - e. Scope: MI adults, MI children, DD adults, DD children, and Medicaid SA

4. The percent of discharges from a psychiatric inpatient unit who are seen for follow-up care within seven days. (All children and all adults -MI, DD).
 - a. Standard = 95%
 - b. Quarterly report
 - c. PIHP for all Medicaid beneficiaries
 - d. CMHSP for all consumers

Scope: All children and all adults (MI, DD) - Do not include dual eligibles (Medicare/Medicaid) in these counts.

5. The percent of face-to-face assessments with professionals that result in decisions to deny CMHSP services. (MI and DD) (Old Indicator #6)
 - a. Quarterly report
 - b. CMHSP
 - c. Scope: all MI/DD consumers

6. The percent of Section 705 second opinions that result in services. (MI and DD) (Old Indicator #7)

- a. Quarterly report
- b. CMHSP
- c. Scope: all MI/DD consumers

EFFICIENCY

*7. The percent of total expenditures spent on administrative functions for CMHSPs. (Old Indicator #9)

- a. Annual report (MDCH calculates from cost reports)
- b. PIHP for Medicaid administrative expenditures
- c. CMHSP for all administrative expenditures

OUTCOMES

*8. The percent of adults with mental illness, the percent of adults with developmental disabilities, and the percent of dual MI/DD adults served by CMHSP who are in competitive employment. (Old Indicator #10)

- a. Annual report (MDCH calculates from QI data)
- b. PIHP for Medicaid adult beneficiaries
- c. CMHSP for all adults
- d. Scope: MI only, DD only, dual MI/DD consumers

*9. The percent of adults with mental illness, the percent of adults with developmental disabilities, and the percent of dual MI/DD adults served by the CMHSP who earn minimum wage or more from employment activities (competitive, supported or self employment, or sheltered workshop). (Old Indicator #11)

- a. Annual report (MDCH calculates from QI data)
- b. PIHP for Medicaid adult beneficiaries
- c. CMHSP for all adults
- d. Scope: MI only, DD only, dual MI/DD consumers

10. The percent of MI and DD children and adults readmitted to an inpatient psychiatric unit within 30 days of discharge. (Old Indicator #12)

- a. Standard = 15% or less within 30 days
- b. Quarterly report
- c. PIHP for all Medicaid beneficiaries
- c. CMHSP
- d. Scope: All MI and DD children and adults - Do not include dual eligibles (Medicare/Medicaid) in these counts.

11. The annual number of substantiated recipient rights complaints per thousand persons served with MI and with DD served, in the categories of Abuse I and II, and Neglect I and II. (Old Indicator #13)

NEW PERFORMANCE INDICATORS

*13. The percent of adults with developmental disabilities served, who live in a private residence alone, with spouse, or non-relative(s).

- a. Annual report (MDCH calculates from QI data)
- b. PIHP for Medicaid beneficiaries
- c. CMHSP for all adults
- d. Scope: DD adults only

*14. The percent of adults with serious mental illness served, who live in a private residence alone, with spouse, or non-relative(s).

- a. Annual report (MDCH calculates from QI data)
- b. PIHP for Medicaid beneficiaries
- c. CMHSP for all adults
- d. Scope: DD adults only

*15. Percentage of children with developmental disabilities (not including children in the Children's Waiver Program) in the quarter who receive at least one service each month other than case management and Respite.

- a. Quarterly report (MDCH calculates based on QI & Encounter data)
- b. PIHP for Medicaid beneficiaries
- c. CMHSP for all DD children
- d. Scope: DD children only

CMHSP PERFORMANCE INDICATOR REPORTING DUE DATES

FY 2012 Due Dates

Indicator Title	Period	Due	Period	Due	Period	Due	Period	Due	From
1. Pre-admission screening	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
2. 1 st request	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
3. 1 st service	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
4. Follow-up	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
5. Denials	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
6. 2 nd Opinions	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4/01 to 6/30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
7. Admin Costs*	10/01 to 9/30	1/31/13							CMHSPs
8. Competitive employment*	10/01 to 9/30	N/A							MDCH
9. Minimum wage*	10/01 to 9/30	N/A							MDCH
10. Readmissions	10/01 to 12/31	3/30/12	1/01 to 3/31	6/29/12	4-01 to 6-30	9/28/12	7/01 to 9/30	12/31/12	CMHSPs
11. RR complaints	10/01 to 9/30	12/31/12							CMHSPs
12. Suicides	10/01 to 9/30	12/31/12							CMHSPs
13. Residence (DD)*	10/01 to 9/30	N/A							MDCH
14. Residence (MI)*	10/01 to 9/30	N/A							MDCH
15. DD Children Services*	10/01 to 12/31	N/A	1/01 to 3/31	N/A	4/01 to 6/30	N/A	7/01 to 9/30	N/A	MDCH

*Indicators with *: MDCH collects data from encounters, quality improvement or cost reports and calculates performance indicators

PERFORMANCE INDICATOR CODEBOOK

General Rules for Reporting Performance Indicators

1. Due dates

All data are due **90 days** following the end of the reporting period (Note: reporting periods are 90 days, six months, or 12 months).

Consultation drafts will be issued for editing purposes approximately two weeks after the due date.

Final report will be posted on the MDCH web site approximately 30 days following the due date.

2. Children

Children are counted as such who are less than age 18 on the last day of the reporting period.

3. Dual Eligible

Do not include those individuals who are Medicare/Medicaid dual eligible in indicators number 4a & 4b (Follow-up Care) and number 10 (Readmissions).

4. Medicaid

Count as Medicaid eligible any person who qualified as a Medicaid beneficiary during at least one month of the reporting period. Indicators # 1, 2, 3, 4, 10, and 11 are to be reported by the CMHSPs for all their consumers, and by the PIHPs for all their Medicaid beneficiaries. If a PIHP is an affiliation, the PIHP reports these indicators for all the Medicaid beneficiaries in the affiliation. The PIHPs, therefore, will submit two reports: One, as a CMHSP for all its consumers, and one as the PIHP for all its Medicaid beneficiaries.

5. Substance abuse beneficiaries

Indicators #2, 3, and 4 include persons receiving Medicaid substance abuse services managed by the PIHP (this is not applicable to CMHSPs). Managed by the PIHP includes substance abuse services subcontracted to CAs, as well as any substance abuse services that the PIHP may deliver directly or may subcontract directly with a substance abuse provider. Consumers who have co-occurring mental illness and substance use disorders may be counted by the PIHP as either MI or SA. However, please count them only once. **Do not add the same consumer to the count in both the MI and SA categories.**

6. Documentation

It is expected that CMHSPs and PIHPs will maintain documentation of:

- a) persons counted in the “exception” columns on the applicable indicators – who, why, and source documents; and
- b) start and stop times for timeliness indicators.

Documentation may be requested and reviewed during external quality reviews.

ACCESS -TIMELINESS/INPATIENT SCREENING (CMHSP & PIHP)

Indicator #1

The percentage of persons during the quarter receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours (by two sub-populations: Children and Adults). Standard = 95%

Rationale for Use

People who are experiencing symptoms serious enough to warrant evaluation for inpatient care are potentially at risk of danger to themselves or others. Thus, time is of the essence. This indicator assesses whether CMHSPs and PIHPs are meeting the Department's standard that 95% of the inpatient screenings have a final disposition within three hours. This indicator is a standard measure of access to care.

Table 1 - Indicator #1

1. Population	2. Number (#) of Emergency Referrals for Inpatient Screening During the Time Period	3. Number (#) of Dispositions about Emergency Referrals Completed within Three Hours or Less	4. Percent (%) of Emergency Referrals Completed within the Time Standard
1. # Children	B2	C2	F2 - Calculated
2. # Adults	D2	E2	G2 - Calculated

Definitions and Instructions

“Disposition” means the decision was made to refer, or not refer, to inpatient psychiatric care.

1. If screening is not possible due to intoxication or sedation, do not start the clock.
2. Start time: When the person is clinically, medically and physically available to the CMHSP/PIHP.
 - a. When emergency room or jail staff informs CMHSP/PIHP that individual needs, and is ready, to be assessed; or
 - b. When an individual presents at an access center and then is clinically cleared (as needed).
3. Stop time: Clinician (in access center or emergency room) who has the authority, or utilization management unit that has the authority, makes the decision whether or not to admit.
4. After the decision is made, the clock stops but other activities will continue (screening, transportation, arranging for bed, crisis intervention).
5. Documentation of start/stop times needs to be maintained by the PIHP/CMHSPS.

ACCESS-TIMELINESS/FIRST REQUEST (CMHSP & PIHP)

Indicator #2

The percentage of new persons during the quarter receiving a face-to-face assessment with a professional within 14 calendar days of a non-emergency request for service (by five sub-populations: MI-adults, MI-children, DD-adults, DD-children, and persons with Substance Use Disorders). Standard = 95%

Rationale for Use

Quick, convenient entry into the public mental health system is a critical aspect of accessibility of services. Delays in clinical and psychological assessment may lead to exacerbation of symptoms and distress and poorer role functioning. The amount of time between a request for service and clinical assessment with a professional is one measure of access to care.

Table 2 – Indicator #2

1. Population	2. # of New Persons Receiving an Initial Non- Emergent Professional Assessment Following a First Request	3. # of New Persons from Col 2 who are Exceptions	4. # Net of New Persons Receiving an Initial Assessment (Col 2 minus Col 3)	5. # of Persons from Col 4 Receiving an Initial Assessment within 14 calendar days of First Request	6. % of Persons Receiving an Initial Assessment within 14 calendar days of First Request
1. MI - C	H2	I2	J2 - Calculated	K2	AB2 - Calculated
2. MI - A	L2	M2	N2 - Calculated	O2	AC2 - Calculated
3. DD - C	P2	Q2	R2 - Calculated	S2	AD- Calculated
4. DD - A	T2	U2	V2 - Calculated	W2	AE2 - Calculated
5. TOTAL	X2	Y2	Z2 - Calculated	AA2	AF2 - Calculated

Column 2- Selection Methodology

1. Cases selected for inclusion in Column 2 are those for which a **face-to-face** assessment with a professional resulting in a decision whether to provide on-going CMHSP/PIHP services took place during the time period.
2. Non-emergent assessment and services do not include pre-admission screening for, and receipt of, psychiatric in-patient care; nor crisis contacts that did not result in an assessment. Consumers who come in with a crisis, and are stabilized are counted as "new" for indicator #2 when they subsequently request a non-emergent assessment.

3. Persons with co-occurring disorders should only be counted once, in either the MI or SA row.
4. "New person:" Individual who has never received services at the CMHSP/PIHP or whose last date of service (regardless of service) was 90 or more days before the assessment, or whose case was closed 90 or more days before the assessment. As noted above in item 2, consumers who come in with a crisis, and are stabilized are counted as "new" for indicator #2 when they subsequently request a non-emergent assessment.
5. A "professional assessment" is that face-to-face assessment or evaluation with a professional designed to result in a decision whether to provide ongoing CMHSP service.
6. Consumers covered under OBRA should be excluded from the count.

Column 3- Exception Methodology

Enter the number of consumers who request an appointment outside the 14 calendar day period or refuse an appointment offered that would have occurred within the 14 calendar day period.

CMHSP/PIHP must maintain documentation available for state review of the reasons for exclusions and the dates offered to the individual. In the case of refused appointments, the dates offered to the individual must be documented.

Column 4 – Calculation of Denominator

Subtract the number of persons in column 3 from the number of persons in column 2 and enter the number.

Column 5 – Numerator Methodology

1. Cases selected for inclusion in Column 5 are those in Column 4 for which the assessment took place in 14 calendar days.
2. "First request" is the initial telephone or walk-in request for non-emergent services by the individual, parent of minor child, legal guardian, or referral source that results in the scheduling of a face-to-face assessment with a professional.
3. Count backward to the date of first request, even if it spans a quarter. If the assessment required several sessions in order to be completed, use the first date of assessment for this calculation.
4. "Reschedules" because consumer cancelled or no-shows who reschedule: count the date of request for reschedule as "first request."

ACCESS-TIMELINESS/FIRST SERVICE (CMHSP & PIHP)

Indicator #3

Percentage of new persons during the quarter starting any needed on-going service within 14 days of a non-emergent face-to-face assessment with a professional ((by five sub-populations: MI-adults, MI-children, DD-adults, DD-children, and persons with Substance Use Disorders). Standard = 95% within 14 days

Rationale for Use

The amount of time between professional assessment and the delivery of needed treatments and supports addresses a different aspect of access to care than Indicator #2. Delay in the delivery of needed services and supports may lead to exacerbation of symptoms and distress and poorer role functioning.

Table 3 - Indicator #3

1. Population	2. # of New Persons Who Started Face- to-Face Service During the Period	3. # of New Persons From Col 2 Who are Exceptions	4. # Net of Persons who Started Service (Col 2 minus Col 3)	5. # of Persons From Col 4 Who Started a Face- to-Face Service Within 14 Days of a Face-to-Face Assessment with a Professional	6. % of Persons Who Started Service within 14 days of Assessment
1. MI-C	AG2	AH2	AI2 – Calculated	AJ2	BA2 -Calculated
2. MI-A	AK	AL2	AM2 – Calculated	AN2	BB2 - Calculated
3. DD -C	AO2	AP2	AQ2 – Calculated	AR2	BC2 - Calculated
4. DD-A	AS2	AT2	AU2 – Calculated	AV2	BD2 - Calculated
6. TOTAL	AW2	AX2	AY2 - Calculated	AZ2	BE2 - Calculated

Column 2 - Selection Methodology

1. Cases selected for inclusion are those for which the start of a non-emergent service (other than the initial assessment – see below) took place during the time period.
2. Do not include pre-admission screening for, and receipt of, psychiatric in-patient care or crisis contacts that did not result in a non-emergent assessment.
3. Persons with co-occurring disorders should only be counted once, in either the MI or SA row.

4. Consumers covered under OBRA should be excluded from the count.

Column 3 – Exception Methodology

Enter in column 3 the number of individuals counted in column 2 but for specific reasons described below* should be excluded from the indicator calculations.

*Consumers who request an appointment outside the 14 calendar day period or refuse an appointment offered that would have occurred within the 14 calendar day period, or do not show for an appointment or reschedule it.

*Consumers for whom the intent of service was medication only or respite only and the date of service exceeded the 14 calendar days. May also exclude environmental modifications where the completion of a project exceeds 14 calendar days. It is expected, however, that minimally a request for bids/quotes has been issued within 14 calendar days of the assessment. Lastly, exclude instances where consumer is enrolled in school and is unable to take advantage of services for several months.

CMHSP/PIHP must maintain documentation available for state review of the reasons for exclusions and the dates offered to the individual. In the case of refused appointments, the dates offered to the individual must be documented.

Column 4 – Calculation of Denominator

Subtract the number of persons in column 3 from the number of persons in column 2 and enter the number.

Column 5 – Numerator Methodology

1. Cases selected for inclusion in Column 5 are those in Column 4 for which a service was received within 14 calendar days of the professional face-to-face assessment.
2. “Service” means any face-to-face CMHSP service. For purposes of this data collection, the initial face-to-face assessment session or any continuous assessment sessions needed to reach a decision on whether to provide ongoing CMHSP services shall not be considered the start of service.
3. Count backward from the date of service to the first date of assessment, even if it spans a quarter, in order to calculate the number of calendar days to the assessment with the professional. If the initial assessment required several sessions in order to be completed, use the first date of assessment in this calculation.

ACCESS-CONTINUITY OF CARE (CMHSP & PIHP)

Indicator #4a (CMHSP & PIHP) & 4b (PIHP Only)

The percentage of discharges from a psychiatric inpatient unit during the quarter that were seen for follow-up care within 7 days. Standard = 95%

Rationale for Use

When responsibility for the care of an individual shifts from one organization to another, it is important that services remain relatively uninterrupted and continuous. Otherwise, the quality of care and consumer outcomes may suffer. This is an indicator required by the federal Substance Abuse and Mental Health Services Administration.

Table 4a – Indicator #4a

1. Population	2. # of Discharges from a Psychiatric Inpatient Unit	3. # of Discharges from Col 2 that are Exceptions	4. # Net Discharges (Col 2 minus Col 3)	5. # of Discharges from Col 4 Followed up by CMHSP/PIHP within 7days	6. % of Persons discharged seen within 7 days
1. # of Children	BF2	BG2	BH2 - Calculated	BI2	BN2 - Calculated
2. # of Adults	BJ2	BK2	BL2 - Calculated	BM2	BO2 - Calculated

Column 2 – Selection Methodology

1. “Discharges” are the events involving people who are discharged from a Psychiatric Inpatient Unit (community, IMD or state hospital) who meet the criteria for specialty mental health services and are the responsibility of the CMHSP/PIHP for follow-up services. In the event of multiple discharges of one person during the reporting period, count the number of discharges.
2. Pre-admission screening for psychiatric in-patient care; and the psychiatric in-patient care should not be counted here.
3. Do not include dual eligibles (Medicare/Medicaid) in these counts.

Column 3 – Exception Methodology

1. Consumers who request an appointment outside the seven-day period or refuse an appointment offered that would have occurred within the seven calendar day period, or do not show for an appointment or reschedule it.
2. Consumers who choose not to use CMHSP/PIHP services.

CMHSP/PIHP must maintain documentation available for state review of the reasons for all exclusions. In the case of refused appointments, the dates offered to the individual must be documented.

Column 4- Calculation of denominator

Subtract the number of discharges in column 3 from the number of discharges in column 2 and enter the number.

Column 5- Numerator Methodology

1. Enter the number of discharges from column 4 (net) who were seen for follow-up care by the CMHSP/PIHP within seven days.
2. “Seen for follow-up care,” means a face-to-face service (not screening for inpatient service, or the inpatient service) with a professional (not exclusively psychiatrists).
3. “Days” mean calendar days.

~~Table 4b – Indicator #4b~~ Do not use the following fields (BP-BT). This Indicator is PIHP only.

1, Population	2, # of Discharges from a Substance Abuse Detox Unit	3, # of Discharges from Col 2 that are Exceptions	4, # Net Discharges (Col 2 minus Col 3)	5, # of Discharges from Col 4 Followed up by CA/CMHSP/PIHP within 7 days	6, % of Persons discharged seen within 7 days
# of Consumers	BP2	BQ2	BR2 – Calculated	BS2	BT2 – Calculated

Column 2 – Selection Methodology

1. “Discharges” are the events involving consumers with substance use disorders who were discharged from a sub-acute detoxification unit, who meet the criteria for specialty mental health services and are the responsibility of the CA/PIHP or CMHSP/PIHP for follow-up services. In the event of multiple discharges of one person during the reporting period, count the number of discharges.
2. Do not include dual eligibles (Medicare/Medicaid) in these counts.

Column 3 – Exception Methodology

1. Consumers who request an appointment outside the seven-day period or refuse an appointment offered that would have occurred within the seven calendar day period, or do not show for an appointment or reschedule it.
2. Consumers who choose not to use CA/CMHSP/PIHP services.

CA/PIHP or CMHSP/PIHP must maintain documentation available for state review of the reasons for all exclusions. In the case of refused appointments, the dates offered to the individual must be documented.

Column 4- Calculation of denominator

Subtract the number of discharges in column 3 from the number of discharges in column 2 and enter the number.

Column 5- Numerator Methodology

1. Enter the number of discharges from column 4 (net) who were seen for follow-up care by the CA/PIHP or CMHSP/PIHP within seven days.
2. Seen for follow-up care,” means a face-to-face service with a substance abuse professional.
3. “Days” mean calendar days.

ACCESS-DENIAL/APPEAL (CMHSP Only)

Indicator #5 (old indicator #6)

Percentage of face-to-face assessments with professionals during the quarter that result in denials.

Indicator #6 (old indicator #7)

Percentage of Section 705 second opinions that result in services.

Rationale for Use

As managed care organizations, CMHSPs are responsible for exercising appropriate control of entry into the public mental health system. The professional assessment represents one of the first opportunities for a CMHSP to control access to its non-emergent services and supports.

Table 5 – Indicator #5 & #6

1. Total # of New Persons Receiving an Initial Non- Emergent Face-to- Face Professional Assessment	2. Total # of Persons Assessed but Denied CMHSP Service	3. Total # of Persons Requesting Second Opinion	4. Total # of Persons Receiving Mental Health Service Following a Second Opinion
BU2	BV2	BW2	BX2

Note: Do not include in any column in Table 5 individuals who only received telephone screens or access center screens performed by non-professionals. Table 5 excludes those cases in which the individual refused CMHSP services that were authorized.

Definitions

Section 330.1705 of Public Act 1974 as revised, was intended to capture requests for initial entry into the CMHSP. Requests for changes in the levels of care received are governed by other sections of the Code.

“Professional Assessment” is that face-to-face meeting with a professional that results in an admission to ongoing CMHSP service or a denial of CMHSP service.

Methodology

Column 1: Enter the number of those people who received an initial face-to-face professional assessment during the time period (from Indicator #2, Column #2).

Column 2: Enter the number of people who were denied CMHSP services.

Column 3: Enter the number of people who were denied who requested a second opinion.

Column 4: Enter the number of people who received a mental health service as a result of the second opinion.

EFFICIENCY

Indicator #7 (old indicator #9)

The percent of total expenditures spent on managed care administrative functions annually by CMHSPs and PIHPs.

Rationale for Use

There is public interest in knowing what portion of an agency's total expenditures are spent on operating the agency relative to the cost of providing services. Combined with other indicators of performance, information on percentage spent on administrative costs can be used as an indication of the agency's overall efficiency.

Method of Calculation

MDCH will calculate this indicator using CMHSP Total Sub-Element Cost Report and the PIHP Medicaid Utilization and Net Cost Report.

Numerator: the amount of expenditures for managed care administration as defined in the cost reports for the functions as defined in the document: "Establishing Managed Care Administrative Costs" Revised June 20, 2005.

Denominator: the amount of total expenditures from all funding sources for CMHSPs; and the amount of total Medicaid expenditures for PIHPs.

OUTCOMES: EMPLOYMENT

Indicator #8a,b (old indicator #10a,b)

The percent of (a) adults with mental illness, the percent of (b) adults with developmental disabilities, and the percent of (c) adults dually diagnosed with mental illness/developmental disability served by the CMHSPs and PIHPs who are employed competitively.

Rationale for Use

A positive outcome of improved functioning and recovery is the ability to work in a job obtained through competition with candidates who may not have disabilities. While there are variables, like unemployment rates, that the CMHSP and PIHPs cannot control, it is expected that through treatment and/or support they will enable and empower individuals who want jobs to secure them.

Method of Calculation

MDCH will calculate this indicator after the end of the fiscal year using employment data from the individual's most recent QI record.

CMHSP Indicator

Numerator: the total number of (a) adults with mental illness, the total number of (b) adults with developmental disabilities, and the total number of (c) adults dually diagnosed with mental illness/developmental disability who are employed competitively.

Denominator: the total number of (a) adults with mental illness, the total number of (b) adults with developmental disabilities, and the total number of (c) adults dually diagnosed with mental illness/developmental disability served by the CMHSP.

PIHP Indicator

Numerator: the total number of (a) adult Medicaid beneficiaries with mental illness, the total number of (b) adult Medicaid beneficiaries with developmental disabilities, and the total number of (c) adult Medicaid beneficiaries dually diagnosed with mental illness/developmental disability who are employed competitively.

Denominator: the total number of (a) adult Medicaid beneficiaries with mental illness, the total number of (b) adult Medicaid beneficiaries with developmental disabilities, and the total number of (c) adult Medicaid beneficiaries dually diagnosed with mental illness/developmental disability served by the PIHP.

OUTCOMES: EMPLOYMENT

Indicator #9a,b (old indicator #11a,b)

The percent of (a) adults with mental illness, the percent of (b) adults with developmental disabilities, and the percent of (c) adults dually diagnosed with mental illness/developmental disability served by the CMHSPs and PIHPs who earned minimum wage or more from any employment activities.

Rationale for Use

A positive outcome of improved functioning and recovery is the ability to earn an income that enables individuals the independence to purchase goods and services and pay for housing.

Method of Calculation

MDCH will calculate this indicator after the end of the fiscal year using employment data from the individual's most recent QI record. A new minimum wage data element will be added to the FY '06 reporting requirements.

CMHSP Indicator

Numerator: the total number of (a) adults with mental illness, the total number of (b) adults with developmental disabilities, and the total number of (c) adults dually diagnosed with mental illness/developmental disability, who received Michigan's minimum wage or more from employment activities (competitive, supported or self-employment, or sheltered workshop).

Denominator: the total number of (a) adults with mental illness, the total number of (b) adults with developmental disabilities, and the total number of (c) adults dually diagnosed with mental illness/developmental disability served by the CMHSP.

PIHP Indicator

Numerator: the total number of (a) adult Medicaid beneficiaries with mental illness, the total number of (b) adult Medicaid beneficiaries with developmental disabilities, and the total number of (c) adult Medicaid beneficiaries dually diagnosed with mental illness/developmental disability, who received Michigan's minimum wage or more from employment activities (competitive, supported or self-employment, or sheltered workshop).

Denominator: the total number of (a) adult Medicaid beneficiaries with mental illness, the total number of (b) adult Medicaid beneficiaries with developmental disabilities, and the total number of (c) adult Medicaid beneficiaries dually diagnosed with mental illness/developmental disability served by the PIHP.

OUTCOME: INPATIENT RECIDIVISM (CMHSP & PIHP)

Indicator #10 (old indicator #12):

The percentage of readmissions of children and adults during the quarter to an inpatient psychiatric unit within 30 days of discharge. Standard = 15% or less

Rationale for Use

For some people with mental illness, the occasional use of psychiatric inpatient care is essential. However, rapid readmission following discharge may suggest that people were prematurely discharged or that the post discharge follow-up was not timely or sufficient. This indicator assessed whether CMHSPs are meeting the Department's standard of no more than 15 percent of people discharged from inpatient units are being readmitted within 30 days.

Table 6 – Indicator #10

1. Population	2. # of Discharges from Psychiatric Inpatient Care during the Reporting Period	3. # of Discharges in Col 2 that are Exceptions	4. # Net Discharges (Col 2 minus Col 3)	5. # of Discharges (from Net Col. 4) Readmitted to Inpatient Care within 30 Days of Discharge	6. % of Discharges Readmitted to Inpatient Care within 30 days of Discharge
1. # of Children	BY2	BZ2	CA2 - Calculated	CB2	CG2 - Calculated
2. # of Adults	CC2	CD2	CE2 - Calculated	CF2	CH2 - Calculated

NOTE: This information is intended to capture Admissions and Readmissions, not transfers to another psychiatric unit, or transfers to a medical inpatient unit. Do not include transfers or dual-eligibles (Medicare/Medicaid) in the counts in any column on this table.

Column 2 – Selection Methodology

1. Discharges” are the events involving all people (for the CMHSPs) and Medicaid eligibles only (for the PIHPs) who are discharged from a Psychiatric Inpatient Unit (community, IMD or state hospital), who meet the criteria for specialty mental health services and are the responsibility of the CMHSP for follow-up services. In the event of multiple discharges of one person during the reporting period, count the total number of discharges.
2. Do not include dual eligibles (Medicare/Medicaid) in these counts.

Column 3 – Exception Methodology

Enter the discharges who chose not to use CMHSP/PIHP services

CMHSP/PIHP must maintain documentation available for state review of the reasons for exceptions in column 3.

Column 4 – Calculation of Denominator

Subtract the number of discharges in column 3 from the number of discharges in column 2 and enter the number.

Column 5 – Numerator Methodology

1. Enter the number of persons from column 4 who were readmitted to a psychiatric inpatient unit within 30 days of discharge from a psychiatric inpatient unit.
2. In order to obtain correct counts for column 5, you must look 30 days into the **next quarter** for possible readmissions of persons discharged toward the end of the current reporting period.
3. “Days” mean calendar days.

Attachment I:

CMHSP Annual Recipient Rights Report Codebook

Period:	10/01/11-9/30/12
Due:	December 31, 2012

OUTCOMES: RECIPIENT RIGHTS COMPLAINTS

Indicator #11

The **annual** number of substantiated recipient rights complaints in the categories of Abuse I and II, and Neglect I and II per 1,000 persons served by CMHSPs and by PIHPs.

Rationale for Use

Substantiated rights complaints are a measure of the quality of care provided by CMHSPs and managed by PIHPs. Since Abuse and Neglect complaints must be investigated, it is believed that these four categories represent the most serious allegations filed on behalf of people served.

Table 7b. Recipient Rights Complaints from All Consumers Served by the CMHSP (reported by CMHSPs)

A = CMHSP Name

RR Complaints	1. # of Complaints from All Consumers	2. # of Complaints Substantiated by ORR	3. # of Complaints Substantiated Per Thousand CMHSP Consumers Served
Abuse I	B	C	
Abuse II	D	E	
Neglect I	F	G	
Neglect II	H	I	

Instructions:

Column 1: Enter the number of complaints from all consumers in each of the above categories that were filed at the local Office(s) of Recipient Rights during the year.

Column 2: Enter the number of those complaints that were substantiated by the local ORRs.

Column 3: MDCH will calculate the number of complaints per thousand persons served.

Community Mental Health
Performance Indicator Results
FY 2012

Indicator 1a: Percentage of Children Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed within
Three Hours - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	Number of Referrals Children Q1	Number Completed in Three Hours for Children Q1	Percentage Q2	Number of Referrals Children Q2	Number Completed in Three Hours for Children Q2	Percentage Q3	Number of Referrals Children Q3	Number Completed in Three Hours for Children Q3	Percentage Q4	Number of Referrals Children Q4	Number Completed in Three Hours for Children Q4	
Allegan	100.00%	24	24	100.00%	23	23	100.00%	21	21	95.83%	24	23	98.91
AuSable	100.00%	27	27	100.00%	12	12	100.00%	13	13	100.00%	13	13	100.00
Barry	100.00%	8	8	100.00%	6	6	100.00%	7	7	100.00%	9	9	100.00
Bay-Arenac	100.00%	73	73	97.59%	83	81	97.78%	90	88	98.28%	58	57	98.36
Berrien	100.00%	51	51	100.00%	43	43	97.56%	41	40	100.00%	39	39	99.43
CEI	95.83%	48	46	98.31%	59	58	100.00%	59	59	96.23%	53	51	97.72
CMH Central MI	100.00%	48	48	100.00%	64	64	100.00%	65	65	97.96%	49	48	99.56
Copper	100.00%	7	7	100.00%	5	5	100.00%	10	10	100.00%	3	3	100.00
Detroit-Wayne	99.80%	509	508	99.51%	405	403	99.59%	487	485	99.43%	348	346	99.60
Genesee	100.00%	141	141	98.81%	168	166	97.52%	161	157	100.00%	102	102	98.95
Gogebic	-	0	0	100.00%	1	1	100.00%	3	3	100.00%	1	1	100.00
Gratiot	100.00%	11	11	100.00%	8	8	100.00%	16	16	100.00%	2	2	100.00
Hiawatha	100.00%	14	14	100.00%	8	8	100.00%	11	11	100.00%	7	7	100.00
Huron	100.00%	3	3	100.00%	7	7	100.00%	6	6	100.00%	2	2	100.00
Ionia	100.00%	13	13	100.00%	13	13	100.00%	26	26	87.50%	8	7	98.33
Kalamazoo	95.35%	43	41	95.38%	65	62	98.44%	64	63	98.99%	99	98	97.42
Lapeer	100.00%	12	12	100.00%	14	14	100.00%	16	16	100.00%	8	8	100.00
Lenawee	100.00%	16	16	100.00%	23	23	100.00%	24	24	100.00%	20	20	100.00
Lifeways	89.47%	19	17	95.24%	21	20	84.21%	19	16	100.00%	16	16	92.00
Livingston	100.00%	18	18	100.00%	22	22	100.00%	17	17	100.00%	12	12	100.00
Macomb	100.00%	395	395	100.00%	440	440	99.23%	391	388	99.66%	294	293	99.74
Manistee-Benzie	100.00%	2	2	100.00%	4	4	100.00%	6	6	100.00%	4	4	100.00
Monroe	100.00%	24	24	100.00%	28	28	100.00%	18	18	100.00%	20	20	100.00
Montcalm	100.00%	16	16	100.00%	15	15	100.00%	10	10	100.00%	7	7	100.00
Muskegon	95.83%	24	23	97.67%	43	42	100.00%	33	33	100.00%	25	25	98.40
network180	96.72%	122	118	98.44%	128	126	94.44%	108	102	95.59%	68	65	96.48
Newaygo	100.00%	14	14	100.00%	10	10	100.00%	15	15	100.00%	8	8	100.00
North Country	100.00%	32	32	100.00%	11	11	100.00%	19	19	100.00%	12	12	100.00
Northeast	100.00%	13	13	100.00%	15	15	100.00%	13	13	100.00%	10	10	100.00
Northern Lakes	88.89%	9	8	93.75%	16	15	92.31%	13	12	100.00%	19	19	94.74
Northpointe	100.00%	8	8	100.00%	15	15	100.00%	8	8	100.00%	3	3	100.00
Oakland	92.75%	193	179	95.67%	254	243	93.14%	204	190	90.27%	185	167	93.18
Ottawa	100.00%	10	10	100.00%	18	18	100.00%	12	12	100.00%	8	8	100.00
Pathways	96.55%	29	28	96.67%	30	29	96.00%	25	24	100.00%	15	15	96.97
Pines	100.00%	10	10	100.00%	28	28	100.00%	18	18	100.00%	26	26	100.00
Saginaw	98.89%	90	89	100.00%	107	107	100.00%	110	110	100.00%	92	92	99.75
Sanilac	100.00%	6	6	100.00%	1	1	100.00%	10	10	100.00%	3	3	100.00
Shiawassee	100.00%	26	26	100.00%	24	24	100.00%	22	22	95.24%	21	20	98.92
St. Clair	100.00%	22	22	100.00%	25	25	100.00%	35	35	100.00%	25	25	100.00
St. Joseph	100.00%	10	10	100.00%	16	16	100.00%	12	12	100.00%	9	9	100.00
Summit Pointe	100.00%	10	10	100.00%	9	9	100.00%	1	1	100.00%	1	1	100.00
Tuscola	100.00%	18	18	100.00%	8	8	100.00%	6	6	100.00%	9	9	100.00
Van Buren	100.00%	5	5	100.00%	5	5	100.00%	9	9	100.00%	4	4	100.00
Washtenaw	100.00%	41	41	100.00%	38	38	100.00%	29	29	100.00%	35	35	100.00
West Michigan	100.00%	11	11	100.00%	12	12	100.00%	19	19	100.00%	9	9	100.00
Woodlands	100.00%	11	11	100.00%	9	9	100.00%	10	10	100.00%	6	6	100.00
	98.70%	2,236	2,207	98.86%	2,359	2,332	98.36%	2,312	2,274	98.21%	1,791	1,759	

Indicator 1b: Percentage of Adults Receiving a Pre-Admission Screening for Psychiatric Inpatient Care for Whom the Disposition was Completed
within Three Hours - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	Number of Referrals for Adults Q1	Number Completed in Three Hours for Adults Q1	Percentage Q2	Number of Referrals for Adults Q2	Number Completed in Three Hours for Adults Q4	Percentage Q3	Number of Referrals for Adults Q3	Number Completed in Three Hours for Adults Q3	Percentage Q4	Number of Referrals for Adults Q4	Number Completed in Three Hours for Adults Q4	Fiscal Year Percentage
Allegan	100.00%	127	127	98.78%	82	81	97.33%	75	73	98.25%	57	56	98.83
AuSable	100.00%	86	86	98.00%	50	49	100.00%	65	65	100.00%	87	87	99.65
Barry	100.00%	15	15	100.00%	13	13	100.00%	17	17	100.00%	15	15	100.00
Bay-Arenac	99.29%	280	278	99.11%	336	333	100.00%	309	309	97.93%	338	331	99.05
Berrien	100.00%	286	286	100.00%	346	346	98.90%	363	359	99.22%	385	382	99.49
CEI	94.13%	460	433	93.75%	464	435	95.77%	449	430	96.40%	528	509	95.06
CMH Central MI	100.00%	210	210	100.00%	240	240	100.00%	266	266	100.00%	261	261	100.00
Copper	100.00%	28	28	100.00%	37	37	100.00%	29	29	100.00%	41	41	100.00
Detroit-Wayne	98.20%	1,445	1,419	99.60%	1,007	1,003	98.37%	1,407	1,384	97.90%	1,524	1,492	98.42
Genesee	100.00%	718	718	99.71%	695	693	98.02%	708	694	99.86%	712	711	99.40
Gogebic	100.00%	13	13	100.00%	22	22	100.00%	11	11	100.00%	14	14	100.00
Gratiot	100.00%	26	26	100.00%	34	34	100.00%	36	36	100.00%	31	31	100.00
Hiawatha	100.00%	43	43	100.00%	49	49	100.00%	56	56	100.00%	58	58	100.00
Huron	100.00%	55	55	100.00%	52	52	100.00%	41	41	100.00%	52	52	100.00
Ionia	96.92%	65	63	97.83%	46	45	100.00%	53	53	100.00%	58	58	98.65
Kalamazoo	98.87%	265	262	99.24%	264	262	98.72%	235	232	99.72%	355	354	99.20
Lapeer	100.00%	41	41	100.00%	60	60	100.00%	66	66	100.00%	70	70	100.00
Lenawee	100.00%	84	84	100.00%	72	72	100.00%	95	95	100.00%	80	80	100.00
Lifeways	98.24%	170	167	94.74%	152	144	93.87%	163	153	100.00%	178	178	96.83
Livingston	100.00%	52	52	100.00%	60	60	100.00%	69	69	100.00%	64	64	100.00
Macomb	100.00%	1,181	1,181	100.00%	1,300	1,300	99.22%	1,289	1,279	99.93%	1,427	1,426	99.79
Manistee-Benzie	100.00%	14	14	100.00%	14	14	100.00%	17	17	100.00%	30	30	100.00
Monroe	100.00%	168	168	100.00%	162	162	100.00%	153	153	100.00%	139	139	100.00
Montcalm	100.00%	51	51	100.00%	48	48	100.00%	69	69	100.00%	63	63	100.00
Muskegon	99.22%	128	127	100.00%	134	134	98.82%	169	167	98.76%	161	159	99.16
network180	98.22%	563	553	99.48%	576	573	97.39%	421	410	97.59%	415	405	98.28
Newaygo	100.00%	34	34	100.00%	42	42	100.00%	32	32	100.00%	46	46	100.00
North Country	96.30%	54	52	100.00%	55	55	98.25%	57	56	100.00%	45	45	98.58
Northeast	100.00%	82	82	98.75%	80	79	100.00%	80	80	100.00%	94	94	99.70
Northern Lakes	100.00%	202	202	99.51%	206	205	100.00%	181	181	99.07%	216	214	99.63
Northpointe	100.00%	47	47	96.08%	51	49	100.00%	49	49	100.00%	50	50	98.98
Oakland	94.52%	913	863	96.26%	990	953	94.26%	993	936	92.22%	1,093	1,008	94.26
Ottawa	100.00%	32	32	98.04%	51	50	100.00%	59	59	91.86%	86	79	96.49
Pathways	99.35%	153	152	99.39%	165	164	98.79%	165	163	100.00%	126	126	99.34
Pines	100.00%	56	56	100.00%	63	63	100.00%	78	78	100.00%	81	81	100.00
Saginaw	100.00%	476	476	100.00%	452	452	100.00%	512	512	100.00%	538	538	100.00
Sanilac	100.00%	38	38	100.00%	35	35	100.00%	31	31	100.00%	41	41	100.00
Shiawassee	100.00%	76	76	98.73%	79	78	100.00%	79	79	100.00%	80	80	99.68
St. Clair	100.00%	202	202	100.00%	194	194	99.56%	229	228	100.00%	220	220	99.88
St. Joseph	98.48%	66	65	100.00%	81	81	100.00%	59	59	100.00%	86	86	99.66
Summit Pointe	100.00%	56	56	100.00%	56	56	100.00%	8	8	100.00%	20	20	100.00
Tuscola	100.00%	35	35	100.00%	34	34	100.00%	33	33	100.00%	28	28	100.00
Van Buren	100.00%	36	36	100.00%	30	30	100.00%	15	15	100.00%	28	28	100.00
Washtenaw	100.00%	249	249	100.00%	224	224	100.00%	239	239	99.56%	226	225	99.89
West Michigan	100.00%	54	54	100.00%	69	69	100.00%	60	60	100.00%	70	70	100.00
Woodlands	100.00%	38	38	100.00%	51	51	100.00%	44	44	100.00%	67	67	100.00
	98.65%	9,473	9,345	98.95%	9,323	9,225	98.35%	9,634	9,475	98.34%	10,384	10,212	

Indicator 2: Percentage of New Persons Receiving a Face-to-Face Assessment with a Professional Within 14 Calendar Days of a Non-Emergent Request for Service - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	Total Persons Received Assessment Following 1st Request Q1	Total Persons Received Assessment within 14 Calendar Days Q1	Percentage Q2	Total Persons Received Assessment Following 1st Request Q2	Total Persons Received Assessment within 14 Calendar Days Q2	Percentage Q3	Total Persons Received Assessment Following 1st Request Q3	Total Persons Received Assessment within 14 Calendar Days Q3	Percentage Q4	Total Persons Received Assessment Following 1st Request Q4	Total Persons Received Assessment within 14 Calendar Days Q4	
Allegan	98.24%	170	167	99.28%	138	137	99.17%	121	120	100.00%	97	97	99.05
AuSable	100.00%	115	115	99.18%	122	121	97.92%	96	94	100.00%	115	115	99.33
Barry	100.00%	133	133	98.68%	151	149	99.34%	152	151	99.36%	156	155	99.32
Bay-Arenac	97.89%	379	371	98.47%	391	385	99.71%	341	340	99.47%	377	375	98.86
Berrien	99.29%	283	281	98.59%	284	280	98.31%	296	291	100.00%	333	333	99.08
CEI	100.00%	306	306	99.03%	309	306	99.04%	311	308	99.33%	297	295	99.35
CMH Central MI	99.05%	524	519	98.74%	635	627	98.73%	631	623	98.07%	623	611	98.63
Copper	100.00%	52	52	100.00%	39	39	100.00%	46	46	100.00%	53	53	100.00
Detroit-Wayne	96.04%	2,196	2,109	95.92%	2,451	2,351	96.60%	2,737	2,644	97.79%	2,312	2,261	96.59
Genesee	98.40%	688	677	99.08%	541	536	99.24%	523	519	99.63%	547	545	99.04
Gogebic	100.00%	31	31	100.00%	26	26	100.00%	12	12	100.00%	19	19	100.00
Gratiot	98.61%	72	71	98.77%	81	80	100.00%	83	83	100.00%	97	97	99.40
Hiawatha	98.11%	53	52	97.44%	39	38	100.00%	53	53	98.21%	56	55	98.51
Huron	100.00%	73	73	100.00%	82	82	100.00%	83	83	100.00%	94	94	100.00
Ionia	100.00%	169	169	99.21%	127	126	99.16%	119	118	99.11%	112	111	99.43
Kalamazoo	99.44%	178	177	97.96%	196	192	95.93%	123	118	95.60%	91	87	97.62
Lapeer	100.00%	117	117	100.00%	158	158	99.34%	152	151	100.00%	131	131	99.82
Lenawee	100.00%	103	103	100.00%	107	107	100.00%	93	93	100.00%	135	135	100.00
Lifeways	98.43%	191	188	86.39%	169	146	66.67%	120	80	69.23%	208	144	81.10
Livingston	100.00%	76	76	100.00%	60	60	100.00%	68	68	100.00%	51	51	100.00
Macomb	98.31%	474	466	95.10%	531	505	93.94%	545	512	98.87%	531	525	96.49
Manistee-Benzie	100.00%	75	75	100.00%	99	99	100.00%	101	101	100.00%	91	91	100.00
Monroe	72.73%	44	32	100.00%	68	68	100.00%	122	122	100.00%	168	168	97.01
Montcalm	97.58%	124	121	97.67%	129	126	96.49%	114	110	96.83%	126	122	97.16
Muskegon	98.94%	282	279	99.41%	339	337	99.72%	355	354	99.68%	313	312	99.46
network180	97.56%	1,637	1,597	98.27%	2,025	1,990	97.48%	1,987	1,937	99.61%	1,796	1,789	98.23
Newaygo	96.55%	87	84	100.00%	99	99	100.00%	79	79	98.97%	97	96	98.90
North Country	100.00%	366	366	99.75%	395	394	99.47%	380	378	99.71%	341	340	99.73
Northeast	99.17%	120	119	100.00%	141	141	100.00%	126	126	100.00%	88	88	99.79
Northern Lakes	99.31%	435	432	99.61%	508	506	99.00%	402	398	100.00%	361	361	99.47
Northpointe	100.00%	98	98	100.00%	79	79	100.00%	93	93	100.00%	72	72	100.00
Oakland	98.32%	895	880	97.68%	1,034	1,010	99.28%	970	963	99.50%	1,006	1,001	98.69
Ottawa	100.00%	291	291	100.00%	263	263	98.46%	195	192	100.00%	152	152	99.67
Pathways	100.00%	91	91	96.74%	92	89	98.99%	99	98	98.77%	81	80	98.62
Pines	100.00%	235	235	98.80%	250	247	99.16%	237	235	99.20%	251	249	99.28
Saginaw	96.46%	113	109	99.25%	133	132	100.00%	127	127	100.00%	111	111	98.97
Sanilac	96.39%	83	80	100.00%	79	79	100.00%	73	73	100.00%	64	64	99.00
Shiawassee	97.96%	147	144	100.00%	174	174	100.00%	176	176	100.00%	153	153	99.54
St. Clair	99.72%	355	354	100.00%	344	344	100.00%	333	333	100.00%	296	296	99.92
St. Joseph	100.00%	179	179	100.00%	173	173	100.00%	177	177	100.00%	169	169	100.00
Summit Pointe	96.31%	732	705	97.75%	846	827	90.45%	827	748	98.39%	867	853	95.75
Tuscola	100.00%	67	67	100.00%	62	62	100.00%	52	52	100.00%	42	42	100.00
Van Buren	100.00%	192	192	100.00%	178	178	100.00%	212	212	100.00%	200	200	100.00
Washtenaw	99.57%	234	233	100.00%	252	252	99.55%	223	222	99.51%	204	203	99.67
West Michigan	95.28%	127	121	99.12%	113	112	99.17%	120	119	98.21%	112	110	97.88
Woodlands	100.00%	78	78	96.58%	117	113	97.87%	94	92	98.89%	90	89	98.15
	98.11%	13,470	13,215	98.06%	14,629	14,345	97.53%	14,379	14,024	98.64%	13,686	13,500	

Indicator 2a: Percentage of New Children with Emotional Disturbance Receiving a Face-to-Face Assessment with a Professional Within 14 Calendar Days of a
Non-Emergent Request for Service - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# MI Children Received Assessment Following 1st Request Q1	# MI Children Received Assessment within 14 Calendar Days Q1	Percentage Q2	# MI Children Received Assessment Following 1st Request Q2	# MI Children Received Assessment within 14 Calendar Days Q2	Percentage Q3	# MI Children Received Assessment Following 1st Request Q3	# MI Children Received Assessment within 14 Calendar Days Q3	Percentage Q4	# MI Children Received Assessment Following 1st Request Q4	# MI Children Received Assessment within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	97.87%	47	46	97.06%	34	33	100.00%	30	30	100.00%	36	36	98.64
AuSable	100.00%	22	22	100.00%	24	24	100.00%	23	23	100.00%	21	21	100.00
Barry	100.00%	28	28	97.62%	42	41	100.00%	46	46	100.00%	36	36	99.34
Bay-Arenac	98.92%	93	92	97.62%	84	82	98.61%	72	71	98.57%	70	69	98.43
Berrien	100.00%	102	102	97.14%	105	102	100.00%	78	78	100.00%	76	76	99.17
CEI	100.00%	147	147	99.38%	160	159	97.90%	143	140	99.24%	132	131	99.14
CMH Central MI	98.11%	159	156	99.10%	221	219	98.98%	196	194	96.93%	163	158	98.38
Copper	100.00%	19	19	100.00%	13	13	100.00%	19	19	100.00%	20	20	100.00
Detroit-Wayne	96.32%	760	732	96.67%	870	841	96.85%	952	922	97.87%	657	643	96.88
Genesee	98.31%	118	116	98.20%	111	109	97.27%	110	107	98.82%	85	84	98.11
Gogebic	100.00%	9	9	100.00%	15	15	100.00%	5	5	100.00%	6	6	100.00
Gratiot	96.77%	31	30	97.83%	46	45	100.00%	38	38	100.00%	40	40	98.71
Hiawatha	100.00%	19	19	100.00%	20	20	100.00%	25	25	100.00%	16	16	100.00
Huron	100.00%	19	19	100.00%	21	21	100.00%	24	24	100.00%	22	22	100.00
Ionia	100.00%	54	54	100.00%	32	32	97.37%	38	37	100.00%	24	24	99.32
Kalamazoo	98.57%	70	69	98.31%	59	58	100.00%	46	46	100.00%	35	35	99.05
Lapeer	100.00%	34	34	100.00%	45	45	97.14%	35	34	100.00%	19	19	99.25
Lenawee	100.00%	27	27	100.00%	31	31	100.00%	29	29	100.00%	27	27	100.00
Lifeways	92.45%	53	49	93.75%	48	45	70.97%	31	22	68.89%	45	31	83.05
Livingston	100.00%	40	40	100.00%	22	22	100.00%	37	37	100.00%	21	21	100.00
Macomb	99.07%	107	106	90.27%	113	102	93.64%	110	103	98.82%	85	84	95.18
Manistee-Benzie	100.00%	18	18	100.00%	42	42	100.00%	23	23	100.00%	25	25	100.00
Monroe	0.00%	12	0	100.00%	27	27	100.00%	32	32	100.00%	42	42	89.38
Montcalm	98.25%	57	56	97.92%	48	47	95.12%	41	39	97.62%	42	41	97.34
Muskegon	96.84%	95	92	100.00%	92	92	100.00%	90	90	100.00%	64	64	99.12
network180	96.56%	669	646	97.44%	743	724	96.92%	715	693	99.67%	610	608	97.59
Newaygo	96.43%	28	27	100.00%	40	40	100.00%	25	25	100.00%	32	32	99.20
North Country	100.00%	150	150	100.00%	131	131	100.00%	107	107	100.00%	96	96	100.00
Northeast	100.00%	21	21	100.00%	37	37	100.00%	28	28	100.00%	18	18	100.00
Northern Lakes	100.00%	154	154	100.00%	203	203	99.15%	118	117	100.00%	101	101	99.83
Northpointe	100.00%	40	40	100.00%	31	31	100.00%	31	31	100.00%	18	18	100.00
Oakland	98.50%	200	197	94.47%	199	188	97.06%	204	198	99.34%	151	150	97.21
Ottawa	100.00%	92	92	100.00%	62	62	100.00%	32	32	100.00%	23	23	100.00
Pathways	100.00%	35	35	100.00%	33	33	100.00%	43	43	96.97%	33	32	99.31
Pines	100.00%	60	60	100.00%	70	70	98.00%	50	49	97.92%	48	47	99.12
Saginaw	98.08%	52	51	100.00%	46	46	100.00%	35	35	100.00%	38	38	99.42
Sanilac	90.48%	21	19	100.00%	19	19	100.00%	21	21	100.00%	13	13	97.30
Shiawassee	100.00%	44	44	100.00%	51	51	100.00%	61	61	100.00%	38	38	100.00
St. Clair	98.73%	79	78	100.00%	76	76	100.00%	68	68	100.00%	55	55	99.64
St. Joseph	100.00%	70	70	100.00%	72	72	100.00%	60	60	100.00%	52	52	100.00
Summit Pointe	92.16%	204	188	95.57%	271	259	77.18%	241	186	92.75%	193	179	89.33
Tuscola	100.00%	15	15	100.00%	16	16	100.00%	6	6	100.00%	6	6	100.00
Van Buren	100.00%	38	38	100.00%	33	33	100.00%	32	32	100.00%	27	27	100.00
Washtenaw	100.00%	59	59	100.00%	62	62	100.00%	51	51	100.00%	44	44	100.00
West Michigan	94.59%	37	35	96.55%	29	28	100.00%	32	32	92.59%	27	25	96.00
Woodlands	100.00%	23	23	100.00%	40	40	93.33%	30	28	100.00%	19	19	98.21
	97.47%	4,231	4,124	97.80%	4,589	4,488	96.58%	4,263	4,117	98.29%	3,451	3,392	

Indicator 2b: Percentage of New Adults with Mental Illness Receiving a Face-to-Face Assessment with a Professional Within 14 Calendar Days of a
Non-Emergent Request for Service - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# MI Adults Received Assessment Following 1st Request Q1	# MI Adults Received Assessment within 14 Calendar Days Q1	Percentage Q2	# MI Adults Received Assessment Following 1st Request Q2	# MI Adults Received Assessment within 14 Calendar Days Q2	Percentage Q3	# MI Adults Received Assessment Following 1st Request Q3	# MI Adults Received Assessment within 14 Calendar Days Q3	Percentage Q4	# MI Adults Received Assessment Following 1st Request Q4	# MI Adults Received Assessment within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	98.10%	105	103	100.00%	94	94	98.61%	72	71	100.00%	56	56	99.08
AuSable	100.00%	91	91	98.98%	98	97	97.14%	70	68	100.00%	90	90	99.14
Barry	100.00%	101	101	99.05%	105	104	100.00%	103	103	100.00%	108	108	99.76
Bay-Arenac	97.54%	285	278	98.69%	306	302	100.00%	259	259	99.67%	299	298	98.96
Berrien	98.78%	164	162	99.42%	171	170	97.57%	206	201	100.00%	241	241	98.98
CEI	100.00%	140	140	99.17%	120	119	100.00%	119	119	99.24%	132	131	99.61
CMH Central MI	99.43%	349	347	98.75%	400	395	98.54%	412	406	98.41%	441	434	98.75
Copper	100.00%	30	30	100.00%	25	25	100.00%	20	20	100.00%	27	27	100.00
Detroit-Wayne	95.70%	1,279	1,224	95.38%	1,364	1,301	96.42%	1,538	1,483	97.82%	1,421	1,390	96.36
Genesee	98.46%	520	512	99.49%	394	392	99.73%	373	372	99.76%	422	421	99.30
Gogebic	100.00%	18	18	100.00%	10	10	100.00%	6	6	100.00%	7	7	100.00
Gratiot	100.00%	37	37	100.00%	32	32	100.00%	34	34	100.00%	50	50	100.00
Hiawatha	96.77%	31	30	94.74%	19	18	100.00%	22	22	97.06%	34	33	97.17
Huron	100.00%	54	54	100.00%	60	60	100.00%	58	58	100.00%	68	68	100.00
Ionia	100.00%	108	108	98.85%	87	86	100.00%	73	73	98.75%	80	79	99.43
Kalamazoo	100.00%	100	100	98.35%	121	119	94.83%	58	55	91.67%	48	44	97.25
Lapeer	100.00%	63	63	100.00%	97	97	100.00%	95	95	100.00%	97	97	100.00
Lenawee	100.00%	67	67	100.00%	66	66	100.00%	59	59	100.00%	100	100	100.00
Lifeways	93.80%	129	121	86.41%	103	89	62.86%	70	44	70.71%	140	99	79.86
Livingston	100.00%	25	25	100.00%	21	21	100.00%	22	22	100.00%	21	21	100.00
Macomb	98.63%	291	287	97.44%	352	343	94.24%	347	327	99.48%	387	385	97.46
Manistee-Benzie	100.00%	57	57	100.00%	54	54	100.00%	73	73	100.00%	63	63	100.00
Monroe	100.00%	25	25	100.00%	30	30	100.00%	73	73	100.00%	109	109	100.00
Montcalm	97.01%	67	65	97.53%	81	79	97.26%	73	71	96.39%	83	80	97.04
Muskegon	100.00%	169	169	99.11%	224	222	99.59%	243	242	99.57%	232	231	99.54
network180	98.23%	905	889	98.86%	1,227	1,213	97.70%	1,220	1,192	99.55%	1,111	1,106	98.59
Newaygo	96.49%	57	55	100.00%	57	57	100.00%	51	51	98.36%	61	60	98.67
North Country	100.00%	193	193	99.59%	241	240	99.22%	256	254	99.56%	226	225	99.56
Northeast	98.88%	89	88	100.00%	102	102	100.00%	86	86	100.00%	60	60	99.70
Northern Lakes	98.86%	264	261	99.29%	282	280	100.00%	247	247	100.00%	234	234	99.51
Northpointe	100.00%	39	39	100.00%	38	38	100.00%	48	48	100.00%	45	45	100.00
Oakland	98.04%	611	599	98.26%	749	736	99.85%	687	686	99.62%	783	780	98.98
Ottawa	100.00%	181	181	100.00%	190	190	97.99%	149	146	100.00%	116	116	99.53
Pathways	100.00%	40	40	95.35%	43	41	97.06%	34	33	100.00%	37	37	98.05
Pines	100.00%	167	167	98.22%	169	166	99.42%	172	171	99.50%	199	198	99.29
Saginaw	100.00%	42	42	100.00%	56	56	100.00%	63	63	100.00%	52	52	100.00
Sanilac	98.04%	51	50	100.00%	54	54	100.00%	45	45	100.00%	49	49	99.50
Shiawassee	96.84%	95	92	100.00%	113	113	100.00%	110	110	100.00%	101	101	99.28
St. Clair	100.00%	223	223	100.00%	234	234	100.00%	220	220	100.00%	198	198	100.00
St. Joseph	100.00%	101	101	100.00%	89	89	100.00%	107	107	100.00%	110	110	100.00
Summit Pointe	97.71%	480	469	98.63%	511	504	95.50%	533	509	100.00%	638	638	98.06
Tuscola	100.00%	44	44	100.00%	42	42	100.00%	41	41	100.00%	35	35	100.00
Van Buren	100.00%	143	143	100.00%	130	130	100.00%	168	168	100.00%	159	159	100.00
Washtenaw	99.30%	143	142	100.00%	149	149	100.00%	124	124	99.21%	127	126	99.63
West Michigan	95.24%	84	80	100.00%	80	80	98.80%	83	82	100.00%	81	81	98.48
Woodlands	100.00%	51	51	95.89%	73	70	100.00%	60	60	98.48%	66	65	98.40
	98.25%	8,308	8,163	98.30%	9,063	8,909	97.96%	8,982	8,799	98.84%	9,244	9,137	

Indicator 2c: Percentage of New Children with Developmental Disabilities Receiving a Face-to-Face Assessment with a Professional Within 14 Calendar Days
of a Non-Emergent Request for Service - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# DD Children Received Assessment Following 1st Request Q1	# DD Children Received Assessment within 14 Calendar Days Q1	Percentage Q2	# DD Children Received Assessment Following 1st Request Q2	# DD Children Received Assessment within 14 Calendar Days Q2	Percentage Q3	# DD Children Received Assessment Following 1st Request Q3	# DD Children Received Assessment within 14 Calendar Days Q3	Percentage Q4	# DD Children Received Assessment Following 1st Request Q4	# DD Children Received Assessment within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	100.00%	3	3	100.00%	4	4	100.00%	7	7	100.00%	2	2	100.00
AuSable	-	0	0	-	0	0	-	0	0	-	0	0	
Barry	100.00%	2	2	100.00%	1	1	-	0	0	100.00%	3	3	100.00
Bay-Arenac	100.00%	1	1	100.00%	1	1	100.00%	3	3	100.00%	3	3	100.00
Berrien	100.00%	3	3	100.00%	1	1	100.00%	3	3	100.00%	4	4	100.00
CEI	100.00%	5	5	100.00%	10	10	100.00%	25	25	100.00%	16	16	100.00
CMH Central MI	100.00%	2	2	100.00%	5	5	100.00%	5	5	100.00%	3	3	100.00
Copper	100.00%	2	2	-	0	0	100.00%	2	2	100.00%	3	3	100.00
Detroit-Wayne	98.72%	78	77	96.97%	99	96	98.47%	131	129	97.44%	117	114	97.88
Genesee	100.00%	13	13	92.31%	13	12	100.00%	11	11	100.00%	8	8	97.78
Gogebic	100.00%	3	3	-	0	0	-	0	0	100.00%	5	5	100.00
Gratiot	100.00%	1	1	100.00%	2	2	100.00%	5	5	-	0	0	100.00
Hiawatha	100.00%	2	2	-	0	0	100.00%	4	4	100.00%	4	4	100.00
Huron	-	0	0	100.00%	1	1	-	0	0	-	0	0	100.00
Ionia	100.00%	3	3	100.00%	3	3	100.00%	4	4	-	0	0	100.00
Kalamazoo	100.00%	4	4	100.00%	6	6	100.00%	6	6	100.00%	1	1	100.00
Lapeer	100.00%	11	11	100.00%	11	11	100.00%	9	9	100.00%	10	10	100.00
Lenawee	100.00%	1	1	100.00%	4	4	100.00%	1	1	100.00%	1	1	100.00
Lifeways	-	0	9	66.67%	9	6	85.71%	7	6	66.67%	6	4	113.64
Livingston	100.00%	3	3	100.00%	6	6	100.00%	4	4	100.00%	5	5	100.00
Macomb	100.00%	30	30	90.91%	22	20	95.24%	42	40	95.24%	21	20	95.65
Manistee-Benzie	-	0	0	100.00%	1	1	100.00%	2	2	100.00%	2	2	100.00
Monroe	100.00%	3	3	100.00%	4	4	100.00%	5	5	100.00%	6	6	100.00
Montcalm	-	0	0	-	0	0	-	0	0	-	0	0	
Muskegon	100.00%	6	6	100.00%	3	3	100.00%	7	7	100.00%	3	3	100.00
network180	95.65%	23	22	92.31%	13	12	100.00%	10	10	100.00%	18	18	96.88
Newaygo	100.00%	1	1	100.00%	1	1	100.00%	1	1	-	0	0	100.00
North Country	100.00%	11	11	100.00%	15	15	100.00%	2	2	100.00%	9	9	100.00
Northeast	-	0	0	100.00%	2	2	100.00%	3	3	100.00%	4	4	100.00
Northern Lakes	100.00%	9	9	100.00%	10	10	88.89%	18	16	100.00%	9	9	95.65
Northpointe	100.00%	11	11	100.00%	3	3	100.00%	9	9	100.00%	5	5	100.00
Oakland	100.00%	38	38	100.00%	40	40	100.00%	30	30	100.00%	19	19	100.00
Ottawa	100.00%	9	9	100.00%	4	4	100.00%	7	7	100.00%	3	3	100.00
Pathways	100.00%	10	10	91.67%	12	11	100.00%	8	8	100.00%	5	5	97.14
Pines	100.00%	6	6	100.00%	2	2	100.00%	10	10	100.00%	2	2	100.00
Saginaw	70.00%	10	7	91.67%	12	11	100.00%	10	10	100.00%	8	8	90.00
Sanilac	100.00%	3	3	100.00%	2	2	100.00%	2	2	100.00%	1	1	100.00
Shiawassee	100.00%	1	1	100.00%	6	6	100.00%	2	2	100.00%	6	6	100.00
St. Clair	100.00%	27	27	100.00%	13	13	100.00%	16	16	100.00%	22	22	100.00
St. Joseph	100.00%	2	2	100.00%	7	7	100.00%	5	5	100.00%	3	3	100.00
Summit Pointe	100.00%	38	38	100.00%	52	52	100.00%	40	40	100.00%	27	27	100.00
Tuscola	100.00%	3	3	100.00%	2	2	100.00%	1	1	-	0	0	100.00
Van Buren	100.00%	5	5	100.00%	6	6	100.00%	3	3	100.00%	5	5	100.00
Washtenaw	100.00%	13	13	100.00%	17	17	100.00%	22	22	100.00%	18	18	100.00
West Michigan	100.00%	3	3	100.00%	3	3	100.00%	1	1	100.00%	2	2	100.00
Woodlands	100.00%	2	2	-	0	0	100.00%	1	1	100.00%	2	2	100.00
	101.00%	401	405	97.20%	428	416	98.55%	484	477	98.47%	391	385	

Indicator 2d: Percentage of New Adults with Developmental Disabilities Receiving a Face-to-Face Assessment with a Professional Within 14 Calendar Days
of a Non-Emergent Request for Service - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# DD Adults Received Assessment Following 1st Request Q1	# DD Adults Received Assessment within 14 Calendar Days Q1	Percentage Q2	# DD Adults Received Assessment Following 1st Request Q2	# DD Adults Received Assessment within 14 Calendar Days Q2	Percentage Q3	# DD Adults Received Assessment Following 1st Request Q3	# DD Adults Received Assessment within 14 Calendar Days Q3	Percentage Q4	# DD Adults Received Assessment Following 1st Request Q4	# DD Adults Received Assessment within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	100.00%	15	15	100.00%	6	6	100.00%	12	12	100.00%	3	3	100.00
AuSable	100.00%	2	2	-	0	0	100.00%	3	3	100.00%	4	4	100.00
Barry	100.00%	2	2	100.00%	3	3	66.67%	3	2	88.89%	9	8	88.24
Bay-Arenac	-	0	0	-	0	0	100.00%	7	7	100.00%	5	5	100.00
Berrien	100.00%	14	14	100.00%	7	7	100.00%	9	9	100.00%	12	12	100.00
CEI	100.00%	14	14	94.74%	19	18	100.00%	24	24	100.00%	17	17	98.65
CMH Central MI	100.00%	14	14	88.89%	9	8	100.00%	18	18	100.00%	16	16	98.25
Copper	100.00%	1	1	100.00%	1	1	100.00%	5	5	100.00%	3	3	100.00
Detroit-Wayne	96.20%	79	76	95.76%	118	113	94.83%	116	110	97.44%	117	114	96.05
Genesee	97.30%	37	36	100.00%	23	23	100.00%	29	29	100.00%	32	32	99.17
Gogebic	100.00%	1	1	100.00%	1	1	100.00%	1	1	100.00%	1	1	100.00
Gratiot	100.00%	3	3	100.00%	1	1	100.00%	6	6	100.00%	7	7	100.00
Hiawatha	100.00%	1	1	-	0	0	100.00%	2	2	100.00%	2	2	100.00
Huron	-	0	0	-	0	0	100.00%	1	1	100.00%	4	4	100.00
Ionia	100.00%	4	4	100.00%	5	5	100.00%	4	4	100.00%	8	8	100.00
Kalamazoo	100.00%	4	4	90.00%	10	9	84.62%	13	11	100.00%	7	7	91.18
Lapeer	100.00%	9	9	100.00%	5	5	100.00%	13	13	100.00%	5	5	100.00
Lenawee	100.00%	8	8	100.00%	6	6	100.00%	4	4	100.00%	7	7	100.00
Lifeways	100.00%	9	9	66.67%	9	6	66.67%	12	8	58.82%	17	10	70.21
Livingston	100.00%	8	8	100.00%	11	11	100.00%	5	5	100.00%	4	4	100.00
Macomb	93.48%	46	43	90.91%	44	40	91.30%	46	42	94.74%	38	36	92.53
Manistee-Benzie	-	0	0	100.00%	2	2	100.00%	3	3	100.00%	1	1	100.00
Monroe	100.00%	4	4	100.00%	7	7	100.00%	12	12	100.00%	11	11	100.00
Montcalm	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00
Muskegon	100.00%	12	12	100.00%	20	20	100.00%	15	15	100.00%	14	14	100.00
network180	100.00%	40	40	97.62%	42	41	100.00%	42	42	100.00%	57	57	99.45
Newaygo	100.00%	1	1	100.00%	1	1	100.00%	2	2	100.00%	4	4	100.00
North Country	100.00%	12	12	100.00%	8	8	100.00%	15	15	100.00%	10	10	100.00
Northeast	100.00%	10	10	-	0	0	100.00%	9	9	100.00%	6	6	100.00
Northern Lakes	100.00%	8	8	100.00%	13	13	94.74%	19	18	100.00%	17	17	98.25
Northpointe	100.00%	8	8	100.00%	7	7	100.00%	5	5	100.00%	4	4	100.00
Oakland	100.00%	46	46	100.00%	46	46	100.00%	49	49	98.11%	53	52	99.48
Ottawa	100.00%	9	9	100.00%	7	7	100.00%	7	7	100.00%	10	10	100.00
Pathways	100.00%	6	6	100.00%	4	4	100.00%	14	14	100.00%	6	6	100.00
Pines	100.00%	2	2	100.00%	9	9	100.00%	5	5	100.00%	2	2	100.00
Saginaw	100.00%	9	9	100.00%	19	19	100.00%	19	19	100.00%	13	13	100.00
Sanilac	100.00%	8	8	100.00%	4	4	100.00%	5	5	100.00%	1	1	100.00
Shiawassee	100.00%	7	7	100.00%	4	4	100.00%	3	3	100.00%	8	8	100.00
St. Clair	100.00%	26	26	100.00%	21	21	100.00%	29	29	100.00%	21	21	100.00
St. Joseph	100.00%	6	6	100.00%	5	5	100.00%	5	5	100.00%	4	4	100.00
Summit Pointe	100.00%	10	10	100.00%	12	12	100.00%	13	13	100.00%	9	9	100.00
Tuscola	100.00%	5	5	100.00%	2	2	100.00%	4	4	100.00%	1	1	100.00
Van Buren	100.00%	6	6	100.00%	9	9	100.00%	9	9	100.00%	9	9	100.00
Washtenaw	100.00%	19	19	100.00%	24	24	96.15%	26	25	100.00%	15	15	98.81
West Michigan	100.00%	3	3	100.00%	1	1	100.00%	4	4	100.00%	2	2	100.00
Woodlands	100.00%	2	2	75.00%	4	3	100.00%	3	3	100.00%	3	3	91.67
	98.68%	530	523	96.90%	549	532	97.08%	650	631	97.67%	600	586	

Indicator 3: Percentage of New Persons Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	Total Starting Ongoing Service Q1	Total Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	Total Starting Ongoing Service Q2	Total Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	Total Starting Ongoing Service Q3	Total Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	Total Starting Ongoing Service Q4	Total Starting Ongoing Service within 14 Calendar Days Q4	
Allegan	99.59%	243	242	99.25%	133	132	100.00%	110	110	98.91%	92	91	99.48
AuSable	96.39%	83	80	93.41%	91	85	93.51%	77	72	100.00%	73	73	95.68
Barry	99.13%	115	114	99.12%	114	113	100.00%	119	119	100.00%	110	110	99.56
Bay-Arenac	97.59%	332	324	98.01%	301	295	99.23%	261	259	99.33%	299	297	98.49
Berrien	99.38%	162	161	98.75%	160	158	97.85%	186	182	100.00%	225	225	99.05
CEI	94.88%	215	204	91.55%	213	195	97.34%	188	183	98.40%	188	185	95.40
CMH Central MI	94.33%	441	416	96.18%	498	479	96.77%	465	450	98.44%	450	443	96.44
Copper	100.00%	44	44	100.00%	33	33	100.00%	34	34	100.00%	32	32	100.00
Detroit-Wayne	96.93%	1,790	1,735	92.94%	2,068	1,922	94.95%	2,118	2,011	96.77%	1,981	1,917	95.32
Genesee	97.99%	399	391	99.13%	343	340	93.59%	281	263	98.44%	320	315	97.47
Gogebic	100.00%	21	21	100.00%	19	19	100.00%	8	8	87.50%	16	14	96.88
Gratiot	98.31%	59	58	98.57%	70	69	100.00%	74	74	92.47%	93	86	96.96
Hiawatha	87.10%	31	27	85.71%	28	24	93.55%	31	29	93.94%	33	31	90.24
Huron	100.00%	50	50	100.00%	55	55	100.00%	62	62	100.00%	49	49	100.00
Ionia	97.44%	117	114	100.00%	86	86	97.65%	85	83	100.00%	97	97	98.70
Kalamazoo	97.50%	120	117	97.40%	154	150	94.44%	108	102	88.57%	70	62	95.35
Lapeer	100.00%	62	62	100.00%	90	90	97.26%	73	71	98.28%	58	57	98.94
Lenawee	88.24%	34	30	94.12%	34	32	96.43%	28	27	94.12%	34	32	93.08
Lifeways	86.34%	227	196	85.57%	201	172	80.42%	189	152	81.71%	246	201	83.55
Livingston	96.77%	62	60	96.15%	52	50	100.00%	70	70	100.00%	46	46	98.26
Macomb	97.76%	446	436	98.00%	501	491	99.28%	559	555	99.09%	550	545	98.59
Manistee-Benzie	100.00%	35	35	100.00%	49	49	100.00%	36	36	100.00%	37	37	100.00
Monroe	100.00%	39	39	100.00%	62	62	98.11%	106	104	97.96%	147	144	98.59
Montcalm	98.89%	90	89	98.99%	99	98	97.80%	91	89	100.00%	98	98	98.94
Muskegon	95.03%	181	172	96.96%	230	223	98.03%	203	199	95.65%	184	176	96.49
network180	93.55%	837	783	92.02%	915	842	86.92%	780	678	86.15%	693	597	89.92
Newaygo	91.78%	73	67	92.94%	85	79	94.55%	55	52	93.65%	63	59	93.12
North Country	97.84%	185	181	99.48%	194	193	98.79%	165	163	100.00%	170	170	99.02
Northeast	100.00%	86	86	100.00%	87	87	100.00%	80	80	100.00%	58	58	100.00
Northern Lakes	97.61%	293	286	97.86%	327	320	93.23%	251	234	98.24%	227	223	96.81
Northpointe	98.75%	80	79	98.61%	72	71	97.33%	75	73	100.00%	70	70	98.65
Oakland	99.91%	1,144	1,143	99.83%	1,151	1,149	99.90%	1,032	1,031	99.81%	1,036	1,034	99.86
Ottawa	99.34%	151	150	94.39%	107	101	95.77%	71	68	92.00%	50	46	96.31
Pathways	97.40%	77	75	97.78%	90	88	100.00%	92	92	97.10%	69	67	98.17
Pines	97.87%	141	138	98.77%	163	161	100.00%	166	166	100.00%	128	128	99.16
Saginaw	84.85%	66	56	91.46%	82	75	97.53%	81	79	100.00%	86	86	93.97
Sanilac	100.00%	82	82	100.00%	90	90	100.00%	71	71	100.00%	71	71	100.00
Shiawassee	90.57%	106	96	97.22%	108	105	99.15%	117	116	100.00%	99	99	96.74
St. Clair	100.00%	302	302	100.00%	278	278	100.00%	252	252	100.00%	235	235	100.00
St. Joseph	96.55%	116	112	99.07%	108	107	98.29%	117	115	99.05%	105	104	98.21
Summit Pointe	97.19%	320	311	98.21%	390	383	96.02%	377	362	99.03%	411	407	97.66
Tuscola	100.00%	99	99	98.81%	84	83	100.00%	78	78	100.00%	72	72	99.70
Van Buren	100.00%	144	144	100.00%	118	118	100.00%	145	145	99.20%	125	124	99.81
Washtenaw	94.61%	167	158	98.57%	70	69	96.71%	152	147	96.12%	129	124	96.14
West Michigan	100.00%	103	103	97.50%	80	78	98.98%	98	97	100.00%	82	82	99.17
Woodlands	94.12%	68	64	96.20%	79	76	96.10%	77	74	100.00%	67	67	96.56
	96.95%	10,038	9,732	96.27%	10,362	9,975	96.19%	9,894	9,517	96.99%	9,574	9,286	

Indicator 3a: Percentage of New Children with Emotional Disturbance Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# MI Children Starting Ongoing Service Q1	# MI Children Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# MI Children Starting Ongoing Service Q2	# MI Children Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# MI Children Starting Ongoing Service Q3	# MI Children Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# MI Children Starting Ongoing Service Q4	# MI Children Starting Ongoing Service within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	100.00%	57	57	100.00%	27	27	100.00%	31	31	100.00%	30	30	100.00
AuSable	94.44%	18	17	94.74%	19	18	88.89%	18	16	100.00%	10	10	93.85
Barry	96.15%	26	25	96.43%	28	27	100.00%	40	40	100.00%	20	20	98.25
Bay-Arenac	96.74%	92	89	98.75%	80	79	98.46%	65	64	98.61%	72	71	98.06
Berrien	100.00%	45	45	100.00%	40	40	97.73%	44	43	100.00%	45	45	99.43
CEI	94.64%	112	106	93.85%	130	122	99.09%	110	109	100.00%	91	91	96.61
CMH Central MI	91.67%	144	132	95.56%	180	172	96.53%	144	139	96.12%	129	124	94.97
Copper	100.00%	14	14	100.00%	12	12	100.00%	11	11	100.00%	13	13	100.00
Detroit-Wayne	98.05%	514	504	93.81%	614	576	99.37%	636	632	95.95%	444	426	96.83
Genesee	99.31%	145	144	98.47%	131	129	88.15%	135	119	97.12%	104	101	95.73
Gogebic	100.00%	3	3	100.00%	9	9	100.00%	2	2	100.00%	4	4	100.00
Gratiot	96.15%	26	25	97.22%	36	35	100.00%	39	39	85.37%	41	35	94.37
Hiawatha	80.00%	10	8	93.33%	15	14	93.33%	15	14	100.00%	8	8	91.67
Huron	100.00%	16	16	100.00%	14	14	100.00%	16	16	100.00%	6	6	100.00
Ionia	96.97%	33	32	100.00%	25	25	96.00%	25	24	100.00%	20	20	98.06
Kalamazoo	97.50%	40	39	97.50%	40	39	92.31%	39	36	100.00%	21	21	96.43
Lapeer	100.00%	22	22	100.00%	32	32	94.74%	19	18	100.00%	7	7	98.75
Lenawee	91.67%	12	11	92.86%	14	13	92.86%	14	13	83.33%	6	5	91.30
Lifeways	82.69%	52	43	83.33%	60	50	84.91%	53	45	82.00%	50	41	83.26
Livingston	96.97%	33	32	100.00%	27	27	100.00%	38	38	100.00%	18	18	99.14
Macomb	100.00%	109	109	98.98%	98	97	97.30%	111	108	97.73%	88	86	98.52
Manistee-Benzie	100.00%	5	5	100.00%	19	19	100.00%	9	9	100.00%	10	10	100.00
Monroe	100.00%	13	13	100.00%	23	23	96.77%	31	30	97.14%	35	34	98.04
Montcalm	100.00%	39	39	97.67%	43	42	97.22%	36	35	100.00%	26	26	98.61
Muskegon	98.53%	68	67	98.48%	66	65	100.00%	54	54	94.44%	36	34	98.21
network180	92.14%	471	434	89.70%	427	383	82.29%	384	316	88.30%	282	249	88.36
Newaygo	100.00%	21	21	88.89%	36	32	87.50%	16	14	95.00%	20	19	92.47
North Country	100.00%	90	90	100.00%	64	64	96.00%	50	48	100.00%	56	56	99.23
Northeast	100.00%	14	14	100.00%	28	28	100.00%	22	22	100.00%	13	13	100.00
Northern Lakes	96.84%	95	92	99.20%	125	124	96.20%	79	76	100.00%	73	73	98.12
Northpointe	100.00%	31	31	96.15%	26	25	100.00%	26	26	100.00%	20	20	99.03
Oakland	99.63%	269	268	99.12%	227	225	100.00%	226	226	100.00%	161	161	99.66
Ottawa	100.00%	38	38	90.00%	40	36	90.91%	22	20	85.00%	20	17	92.50
Pathways	100.00%	29	29	100.00%	36	36	100.00%	39	39	96.30%	27	26	99.24
Pines	100.00%	28	28	97.44%	39	38	100.00%	28	28	100.00%	15	15	99.09
Saginaw	83.33%	30	25	93.10%	29	27	100.00%	22	22	100.00%	30	30	93.69
Sanilac	100.00%	20	20	100.00%	20	20	100.00%	22	22	100.00%	14	14	100.00
Shiawassee	91.43%	35	32	96.88%	32	31	100.00%	36	36	100.00%	25	25	96.88
St. Clair	100.00%	65	65	100.00%	60	60	100.00%	49	49	100.00%	45	45	100.00
St. Joseph	100.00%	46	46	100.00%	53	53	98.08%	52	51	100.00%	31	31	99.45
Summit Pointe	96.00%	100	96	98.25%	114	112	98.31%	118	116	100.00%	75	75	98.03
Tuscola	100.00%	25	25	95.24%	21	20	100.00%	14	14	100.00%	10	10	98.57
Van Buren	100.00%	28	28	100.00%	24	24	100.00%	26	26	91.67%	12	11	98.89
Washtenaw	100.00%	46	46	100.00%	15	15	100.00%	39	39	96.43%	28	27	99.22
West Michigan	100.00%	22	22	100.00%	19	19	100.00%	25	25	100.00%	18	18	100.00
Woodlands	95.00%	20	19	95.24%	21	20	94.44%	18	17	100.00%	9	9	95.59
	96.69%	3,171	3,066	95.68%	3,238	3,098	95.70%	3,048	2,917	96.20%	2,318	2,230	

Indicator 3b: Percentage of New Adults with Mental Illness Starting any Needed On-going Service Within 14 Days of a
Non-Emergent Assessment With a Professional - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# MI Adults Starting Ongoing Service Q1	# MI Adults Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# MI Adults Starting Ongoing Service Q2	# MI Adults Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# MI Adults Starting Ongoing Service Q3	# MI Adults Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# MI Adults Starting Ongoing Service Q4	# MI Adults Starting Ongoing Service within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	99.38%	162	161	98.95%	95	94	100.00%	61	61	98.28%	58	57	99.20
AuSable	96.67%	60	58	93.06%	72	67	94.12%	51	48	100.00%	60	60	95.88
Barry	100.00%	85	85	100.00%	82	82	100.00%	77	77	100.00%	78	78	100.00
Bay-Arenac	97.92%	240	235	98.17%	218	214	99.48%	191	190	99.55%	222	221	98.74
Berrien	99.09%	110	109	98.28%	116	114	97.12%	139	135	100.00%	179	179	98.71
CEI	96.84%	95	92	89.39%	66	59	94.74%	57	54	95.77%	71	68	94.46
CMH Central MI	95.79%	285	273	96.74%	307	297	96.71%	304	294	99.34%	303	301	97.16
Copper	100.00%	27	27	100.00%	20	20	100.00%	18	18	100.00%	12	12	100.00
Detroit-Wayne	96.78%	1,148	1,111	93.17%	1,260	1,174	93.83%	1,247	1,170	96.95%	1,344	1,303	95.18
Genesee	97.14%	210	204	99.43%	176	175	98.28%	116	114	98.90%	181	179	98.39
Gogebic	100.00%	14	14	100.00%	6	6	100.00%	5	5	80.00%	5	4	96.67
Gratiot	100.00%	30	30	100.00%	31	31	100.00%	26	26	97.73%	44	43	99.24
Hiawatha	88.89%	18	16	76.92%	13	10	90.91%	11	10	90.00%	20	18	87.10
Huron	100.00%	34	34	100.00%	40	40	100.00%	46	46	100.00%	43	43	100.00
Ionia	97.50%	80	78	100.00%	58	58	98.28%	58	57	100.00%	69	69	98.87
Kalamazoo	97.44%	78	76	97.12%	104	101	95.52%	67	64	86.96%	46	40	95.25
Lapeer	100.00%	30	30	100.00%	48	48	100.00%	39	39	97.56%	41	40	99.37
Lenawee	85.71%	21	18	93.33%	15	14	100.00%	12	12	95.65%	23	22	92.96
Lifeways	90.85%	153	139	86.96%	115	100	77.59%	116	90	82.84%	169	140	84.81
Livingston	94.44%	18	17	92.31%	13	12	100.00%	19	19	100.00%	18	18	97.06
Macomb	98.88%	269	266	99.39%	326	324	100.00%	360	360	99.74%	392	391	99.55
Manistee-Benzie	100.00%	30	30	100.00%	26	26	100.00%	27	27	100.00%	25	25	100.00
Monroe	100.00%	20	20	100.00%	29	29	98.31%	59	58	98.92%	93	92	99.00
Montcalm	98.04%	51	50	100.00%	56	56	98.18%	55	54	100.00%	71	71	99.14
Muskegon	95.15%	103	98	98.67%	150	148	97.01%	134	130	95.65%	138	132	96.76
network180	96.07%	331	318	95.06%	445	423	90.60%	351	318	83.01%	365	303	91.29
Newaygo	88.24%	51	45	95.74%	47	45	100.00%	37	37	95.00%	40	38	94.29
North Country	96.00%	75	72	99.12%	114	113	100.00%	100	100	100.00%	92	92	98.95
Northeast	100.00%	64	64	100.00%	57	57	100.00%	53	53	100.00%	35	35	100.00
Northern Lakes	97.84%	185	181	97.28%	184	179	90.21%	143	129	96.97%	132	128	95.81
Northpointe	97.06%	34	33	100.00%	32	32	94.44%	36	34	100.00%	42	42	97.92
Oakland	100.00%	766	766	100.00%	825	825	99.86%	704	703	99.74%	782	780	99.90
Ottawa	99.03%	103	102	96.55%	58	56	97.56%	41	40	100.00%	26	26	98.25
Pathways	93.94%	33	31	94.87%	39	37	100.00%	32	32	96.97%	33	32	96.35
Pines	97.17%	106	103	99.14%	116	115	100.00%	123	123	100.00%	111	111	99.12
Saginaw	84.21%	19	16	87.10%	31	27	100.00%	36	36	100.00%	34	34	94.17
Sanilac	100.00%	51	51	100.00%	61	61	100.00%	42	42	100.00%	52	52	100.00
Shiawassee	88.89%	63	56	97.10%	69	67	98.70%	77	76	100.00%	65	65	96.35
St. Clair	100.00%	195	195	100.00%	194	194	100.00%	171	171	100.00%	159	159	100.00
St. Joseph	93.65%	63	59	98.00%	50	49	98.36%	61	60	100.00%	67	67	97.51
Summit Pointe	97.56%	205	200	98.39%	249	245	99.56%	226	225	99.36%	311	309	98.79
Tuscola	100.00%	66	66	100.00%	62	62	100.00%	59	59	100.00%	61	61	100.00
Van Buren	100.00%	106	106	100.00%	89	89	100.00%	110	110	100.00%	102	102	100.00
Washtenaw	90.82%	98	89	97.62%	42	41	94.87%	78	74	94.52%	73	69	93.81
West Michigan	100.00%	75	75	96.49%	57	55	98.55%	69	68	100.00%	58	58	98.84
Woodlands	93.33%	45	42	98.11%	53	52	96.23%	53	51	100.00%	54	54	97.07
	97.31%	6,105	5,941	96.94%	6,316	6,123	96.64%	5,897	5,699	97.25%	6,399	6,223	

Indicator 3c: Percentage of New Children with Developmental Disabilities Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# DD Children Starting Ongoing Service Q1	# DD Children Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# DD Children Starting Ongoing Service Q2	# DD Children Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# DD Children Starting Ongoing Service Q3	# DD Children Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# DD Children Starting Ongoing Service Q4	# DD Children Starting Ongoing Service within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	100.00%	5	5	100.00%	4	4	100.00%	6	6	100.00%	2	2	100.00
AuSable	-	0	0	-	0	0	-	0	0	-	0	0	
Barry	100.00%	2	2	100.00%	1	1	-	0	0	100.00%	3	3	100.00
Bay-Arenac	-	0	0	66.67%	3	2	100.00%	2	2	-	0	0	80.00
Berrien	100.00%	2	2	100.00%	1	1	100.00%	3	3	100.00%	1	1	100.00
CEI	-	0	0	75.00%	4	3	100.00%	8	8	100.00%	14	14	96.15
CMH Central MI	-	0	0	80.00%	5	4	100.00%	4	4	100.00%	4	4	92.31
Copper	100.00%	2	2	-	0	0	100.00%	2	2	100.00%	4	4	100.00
Detroit-Wayne	94.44%	54	51	85.19%	81	69	91.07%	112	102	97.59%	83	81	91.82
Genesee	100.00%	13	13	100.00%	16	16	100.00%	14	14	100.00%	8	8	100.00
Gogebic	100.00%	3	3	-	0	0	-	0	0	100.00%	5	5	100.00
Gratiot	-	0	0	100.00%	2	2	100.00%	4	4	100.00%	1	1	100.00
Hiawatha	100.00%	2	2	-	0	0	100.00%	3	3	100.00%	4	4	100.00
Huron	-	0	0	100.00%	1	1	-	0	0	-	0	0	100.00
Ionia	100.00%	1	1	-	0	0	100.00%	2	2	100.00%	1	1	100.00
Kalamazoo	100.00%	1	1	100.00%	4	4	-	0	0	0.00%	2	0	71.43
Lapeer	100.00%	4	4	100.00%	7	7	83.33%	6	5	100.00%	7	7	95.83
Lenawee	-	0	0	100.00%	2	2	100.00%	1	1	100.00%	1	1	100.00
Lifeways	85.71%	7	6	85.71%	14	12	77.78%	9	7	71.43%	7	5	81.08
Livingston	100.00%	2	2	100.00%	5	5	100.00%	6	6	100.00%	4	4	100.00
Macomb	93.55%	31	29	89.29%	28	25	100.00%	45	45	100.00%	23	23	96.06
Manistee-Benzie	-	0	0	100.00%	1	1	-	0	0	100.00%	1	1	100.00
Monroe	100.00%	2	2	100.00%	4	4	100.00%	5	5	100.00%	7	7	100.00
Montcalm	-	0	0	-	0	0	-	0	0	-	0	0	
Muskegon	100.00%	3	3	100.00%	1	1	100.00%	5	5	100.00%	3	3	100.00
network180	100.00%	11	11	84.62%	13	11	100.00%	13	13	100.00%	10	10	95.74
Newaygo	100.00%	1	1	100.00%	1	1	100.00%	1	1	-	0	0	100.00
North Country	85.71%	7	6	100.00%	11	11	100.00%	2	2	100.00%	10	10	96.67
Northeast	-	0	0	100.00%	2	2	100.00%	3	3	100.00%	3	3	100.00
Northern Lakes	100.00%	5	5	100.00%	4	4	100.00%	13	13	100.00%	6	6	100.00
Northpointe	100.00%	8	8	100.00%	3	3	100.00%	8	8	100.00%	4	4	100.00
Oakland	100.00%	43	43	100.00%	41	41	100.00%	39	39	100.00%	33	33	100.00
Ottawa	100.00%	2	2	100.00%	1	1	100.00%	3	3	50.00%	2	1	87.50
Pathways	100.00%	9	9	100.00%	9	9	100.00%	12	12	100.00%	3	3	100.00
Pines	100.00%	4	4	100.00%	3	3	100.00%	10	10	-	0	0	100.00
Saginaw	85.71%	7	6	87.50%	8	7	87.50%	8	7	100.00%	8	8	90.32
Sanilac	100.00%	4	4	100.00%	2	2	100.00%	2	2	100.00%	3	3	100.00
Shiawassee	-	0	0	100.00%	3	3	100.00%	2	2	100.00%	5	5	100.00
St. Clair	100.00%	21	21	100.00%	11	11	100.00%	11	11	100.00%	20	20	100.00
St. Joseph	100.00%	3	3	100.00%	3	3	100.00%	3	3	100.00%	4	4	100.00
Summit Pointe	100.00%	10	10	95.00%	20	19	50.00%	24	12	85.71%	14	12	77.94
Tuscola	100.00%	3	3	100.00%	1	1	100.00%	1	1	-	0	0	100.00
Van Buren	100.00%	5	5	100.00%	1	1	100.00%	2	2	100.00%	3	3	100.00
Washtenaw	100.00%	4	4	100.00%	3	3	93.75%	16	15	100.00%	16	16	97.44
West Michigan	100.00%	3	3	100.00%	3	3	100.00%	1	1	100.00%	2	2	100.00
Woodlands	100.00%	1	1	0.00%	1	0	100.00%	1	1	100.00%	2	2	80.00
	97.19%	285	277	92.38%	328	303	93.45%	412	385	97.30%	333	324	

Indicator 3d: Percentage of New Adults with Developmental Disabilities Starting any Needed On-going Service Within 14 Days of a Non-Emergent Assessment With a Professional - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			
	Percentage Q1	# DD Adults Starting Ongoing Service Q1	# DD Adults Starting Ongoing Service within 14 Calendar Days Q1	Percentage Q2	# DD Adults Starting Ongoing Service Q2	# DD Adults Starting Ongoing Service within 14 Calendar Days Q2	Percentage Q3	# DD Adults Starting Ongoing Service Q3	# DD Adults Starting Ongoing Service within 14 Calendar Days Q3	Percentage Q4	# DD Adults Starting Ongoing Service Q4	# DD Adults Starting Ongoing Service within 14 Calendar Days Q4	Fiscal Year Percentage
Allegan	100.00%	19	19	100.00%	7	7	100.00%	12	12	100.00%	2	2	100.00
AuSable	100.00%	5	5	-	0	0	100.00%	8	8	100.00%	3	3	100.00
Barry	100.00%	2	2	100.00%	3	3	100.00%	2	2	100.00%	9	9	100.00
Bay-Arenac	-	0	0	-	0	0	100.00%	3	3	100.00%	5	5	100.00
Berrien	100.00%	5	5	100.00%	3	3	-	0	1	-	0	0	112.50
CEI	75.00%	8	6	84.62%	13	11	92.31%	13	12	100.00%	12	12	89.13
CMH Central MI	91.67%	12	11	100.00%	6	6	100.00%	13	13	100.00%	14	14	97.78
Copper	100.00%	1	1	100.00%	1	1	100.00%	3	3	100.00%	3	3	100.00
Detroit-Wayne	93.24%	74	69	91.15%	113	103	86.99%	123	107	97.27%	110	107	91.90
Genesee	96.77%	31	30	100.00%	20	20	100.00%	16	16	100.00%	27	27	98.94
Gogebic	100.00%	1	1	100.00%	4	4	100.00%	1	1	50.00%	2	1	87.50
Gratiot	100.00%	3	3	100.00%	1	1	100.00%	5	5	100.00%	7	7	100.00
Hiawatha	100.00%	1	1	-	0	0	100.00%	2	2	100.00%	1	1	100.00
Huron	-	0	0	-	0	0	-	0	0	-	0	0	0
Ionia	100.00%	3	3	100.00%	3	3	-	0	0	100.00%	7	7	100.00
Kalamazoo	100.00%	1	1	100.00%	6	6	100.00%	2	2	100.00%	1	1	100.00
Lapeer	100.00%	6	6	100.00%	3	3	100.00%	9	9	100.00%	3	3	100.00
Lenawee	100.00%	1	1	100.00%	3	3	100.00%	1	1	100.00%	4	4	100.00
Lifeways	53.33%	15	8	83.33%	12	10	90.91%	11	10	75.00%	20	15	74.14
Livingston	100.00%	9	9	85.71%	7	6	100.00%	7	7	100.00%	6	6	96.55
Macomb	86.49%	37	32	91.84%	49	45	97.67%	43	42	95.74%	47	45	93.18
Manistee-Benzie	-	0	0	100.00%	3	3	-	0	0	100.00%	1	1	100.00
Monroe	100.00%	4	4	100.00%	6	6	100.00%	11	11	91.67%	12	11	96.97
Montcalm	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00
Muskegon	57.14%	7	4	69.23%	13	9	100.00%	10	10	100.00%	7	7	81.08
network180	83.33%	24	20	83.33%	30	25	96.88%	32	31	97.22%	36	35	90.98
Newaygo	-	0	0	100.00%	1	1	0.00%	1	0	66.67%	3	2	60.00
North Country	100.00%	13	13	100.00%	5	5	100.00%	13	13	100.00%	12	12	100.00
Northeast	100.00%	8	8	-	0	0	100.00%	2	2	100.00%	7	7	100.00
Northern Lakes	100.00%	8	8	92.86%	14	13	100.00%	16	16	100.00%	16	16	98.15
Northpointe	100.00%	7	7	100.00%	11	11	100.00%	5	5	100.00%	4	4	100.00
Oakland	100.00%	66	66	100.00%	58	58	100.00%	63	63	100.00%	60	60	100.00
Ottawa	100.00%	8	8	100.00%	8	8	100.00%	5	5	100.00%	2	2	100.00
Pathways	100.00%	6	6	100.00%	6	6	100.00%	9	9	100.00%	6	6	100.00
Pines	100.00%	3	3	100.00%	5	5	100.00%	5	5	100.00%	2	2	100.00
Saginaw	90.00%	10	9	100.00%	14	14	93.33%	15	14	100.00%	14	14	96.23
Sanilac	100.00%	7	7	100.00%	7	7	100.00%	5	5	100.00%	2	2	100.00
Shiawassee	100.00%	8	8	100.00%	4	4	100.00%	2	2	100.00%	4	4	100.00
St. Clair	100.00%	21	21	100.00%	13	13	100.00%	21	21	100.00%	11	11	100.00
St. Joseph	100.00%	4	4	100.00%	2	2	100.00%	1	1	66.67%	3	2	90.00
Summit Pointe	100.00%	5	5	100.00%	7	7	100.00%	9	9	100.00%	11	11	100.00
Tuscola	100.00%	5	5	-	0	0	100.00%	4	4	100.00%	1	1	100.00
Van Buren	100.00%	5	5	100.00%	4	4	100.00%	7	7	100.00%	8	8	100.00
Washtenaw	100.00%	19	19	100.00%	10	10	100.00%	19	19	100.00%	12	12	100.00
West Michigan	100.00%	3	3	100.00%	1	1	100.00%	3	3	100.00%	4	4	100.00
Woodlands	100.00%	2	2	100.00%	4	4	100.00%	5	5	100.00%	2	2	100.00
	93.92%	477	448	93.96%	480	451	96.09%	537	516	97.14%	524	509	

Indicator 4a(1): Percentage of Children Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	# Children Discharged Q1	# Children Seen for Follow-up Care Q1	Percentage Q2	# Children Discharged Q2	# Children Seen for Follow-up Care Q2	Percentage Q3	# Children Discharged Q3	# Children Seen for Follow-up Care Q3	Percentage Q4	# Children Discharged Q4	# Children Seen for Follow-up Care Q4	
Allegan	80.00%	5	4	80.00%	5	4	100.00%	3	3	100.00%	4	4	88.24
AuSable	100.00%	5	5	100.00%	11	11	100.00%	4	4	100.00%	1	1	100.00
Barry	100.00%	2	2	100.00%	4	4	80.00%	5	4	100.00%	2	2	92.31
Bay-Arenac	100.00%	20	20	100.00%	24	24	100.00%	30	30	100.00%	25	25	100.00
Berrien	100.00%	2	2	100.00%	3	3	100.00%	6	6	100.00%	1	1	100.00
CEI	100.00%	6	6	100.00%	4	4	100.00%	9	9	100.00%	7	7	100.00
CMH Central MI	90.91%	11	10	100.00%	9	9	90.00%	10	9	91.67%	12	11	92.86
Copper	100.00%	2	2	100.00%	2	2	100.00%	6	6	100.00%	2	2	100.00
Detroit-Wayne	98.33%	239	235	99.44%	177	176	99.56%	225	224	99.55%	221	220	99.19
Genesee	100.00%	35	35	100.00%	37	37	100.00%	46	46	100.00%	31	31	100.00
Gogebic	-	0	0	-	0	0	100.00%	1	1	-	0	0	100.00
Gratiot	100.00%	6	6	100.00%	4	4	85.71%	7	6	100.00%	2	2	94.74
Hiawatha	100.00%	5	5	100.00%	6	6	100.00%	2	2	100.00%	1	1	100.00
Huron	100.00%	2	2	100.00%	2	2	100.00%	2	2	100.00%	1	1	100.00
Ionia	-	0	0	-	0	0	100.00%	4	4	100.00%	1	1	100.00
Kalamazoo	100.00%	25	25	82.35%	17	14	100.00%	21	21	100.00%	19	19	96.34
Lapeer	100.00%	6	6	100.00%	6	6	100.00%	9	9	100.00%	4	4	100.00
Lenawee	75.00%	4	3	100.00%	6	6	100.00%	7	7	100.00%	4	4	95.24
Lifeways	64.29%	14	9	83.33%	18	15	75.00%	12	9	90.00%	10	9	77.78
Livingston	100.00%	4	4	100.00%	17	17	100.00%	7	7	100.00%	5	5	100.00
Macomb	95.79%	95	91	95.96%	99	95	96.64%	119	115	96.70%	91	88	96.29
Manistee-Benzie	100.00%	1	1	-	0	0	100.00%	1	1	-	0	0	100.00
Monroe	100.00%	9	9	100.00%	6	6	100.00%	2	2	100.00%	4	4	100.00
Montcalm	100.00%	3	3	100.00%	3	3	100.00%	1	1	100.00%	2	2	100.00
Muskegon	100.00%	12	12	100.00%	7	7	100.00%	7	7	100.00%	5	5	100.00
network180	95.65%	46	44	88.24%	34	30	91.30%	46	42	95.74%	47	45	93.06
Newaygo	100.00%	4	4	100.00%	3	3	100.00%	1	1	100.00%	2	2	100.00
North Country	100.00%	23	23	100.00%	9	9	100.00%	11	11	100.00%	7	7	100.00
Northeast	100.00%	4	4	100.00%	2	2	100.00%	2	2	100.00%	1	1	100.00
Northern Lakes	100.00%	9	9	92.86%	14	13	100.00%	9	9	100.00%	13	13	97.78
Northpointe	80.00%	5	4	100.00%	7	7	100.00%	4	4	-	0	0	93.75
Oakland	100.00%	55	55	97.37%	38	37	100.00%	32	32	100.00%	29	29	99.35
Ottawa	100.00%	8	8	100.00%	4	4	100.00%	5	5	100.00%	2	2	100.00
Pathways	85.71%	7	6	87.50%	8	7	81.82%	11	9	80.00%	5	4	83.87
Pines	-	0	0	100.00%	1	1	-	0	0	66.67%	6	4	71.43
Saginaw	85.71%	7	6	100.00%	17	17	90.48%	21	19	100.00%	8	8	94.34
Sanilac	100.00%	3	3	100.00%	1	1	100.00%	5	5	100.00%	3	3	100.00
Shiawassee	100.00%	9	9	100.00%	2	2	100.00%	8	8	100.00%	5	5	100.00
St. Clair	100.00%	11	11	100.00%	12	12	100.00%	13	13	100.00%	12	12	100.00
St. Joseph	100.00%	4	4	100.00%	4	4	100.00%	4	4	100.00%	1	1	100.00
Summit Pointe	100.00%	7	7	100.00%	6	6	100.00%	1	1	100.00%	1	1	100.00
Tuscola	100.00%	2	2	100.00%	2	2	100.00%	2	2	100.00%	3	3	100.00
Van Buren	100.00%	4	4	100.00%	2	2	100.00%	1	1	100.00%	1	1	100.00
Washtenaw	100.00%	21	21	100.00%	8	8	100.00%	11	11	100.00%	10	10	100.00
West Michigan	100.00%	4	4	100.00%	3	3	80.00%	5	4	100.00%	4	4	93.75
Woodlands	100.00%	2	2	100.00%	3	3	100.00%	4	4	100.00%	1	1	100.00
	97.19%	748	727	97.06%	647	628	97.30%	742	722	98.21%	616	605	

Indicator 4a(2): Percentage of Adults Discharged from a Psychiatric Inpatient Unit Who are Seen for Follow-up Care Within 7 Days - 95% Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	# Adults Discharged Q1	# Adults Seen for Follow-up Care Q1	Percentage Q2	# Adults Discharged Q2	# Adults Seen for Follow-up Care Q2	Percentage Q3	# Adults Discharged Q3	# Adults Seen for Follow-up Care Q3	Percentage Q4	# Adults Discharged Q4	# Adults Seen for Follow-up Care Q4	
Allegan	78.95%	19	15	95.45%	22	21	100.00%	21	21	90.91%	11	10	91.78
AuSable	100.00%	16	16	100.00%	21	21	100.00%	22	22	100.00%	25	25	100.00
Barry	93.75%	16	15	93.33%	15	14	100.00%	15	15	100.00%	13	13	96.61
Bay-Arenac	100.00%	67	67	98.78%	82	81	98.57%	70	69	100.00%	69	69	99.31
Berrien	97.14%	35	34	100.00%	46	46	100.00%	56	56	95.65%	23	22	98.75
CEI	95.65%	69	66	100.00%	64	64	94.83%	58	55	96.34%	82	79	96.70
CMH Central MI	95.24%	42	40	96.00%	50	48	96.55%	58	56	100.00%	44	44	96.91
Copper	100.00%	8	8	100.00%	9	9	100.00%	10	10	100.00%	8	8	100.00
Detroit-Wayne	97.32%	894	870	97.48%	634	618	98.49%	925	911	98.04%	1,074	1,053	97.87
Genesee	95.71%	210	201	97.22%	216	210	95.49%	244	233	95.47%	265	253	95.94
Gogebic	100.00%	5	5	100.00%	5	5	100.00%	5	5	100.00%	2	2	100.00
Gratiot	100.00%	12	12	100.00%	14	14	100.00%	16	16	90.00%	10	9	98.08
Hiawatha	100.00%	9	9	100.00%	6	6	100.00%	9	9	100.00%	7	7	100.00
Huron	100.00%	22	22	95.45%	22	21	100.00%	26	26	100.00%	26	26	98.96
Ionia	100.00%	7	7	100.00%	6	6	100.00%	10	10	100.00%	17	17	100.00
Kalamazoo	100.00%	77	77	96.30%	81	78	98.97%	97	96	98.39%	62	61	98.42
Lapeer	100.00%	20	20	100.00%	24	24	100.00%	31	31	100.00%	24	24	100.00
Lenawee	97.22%	36	35	96.43%	28	27	100.00%	33	33	100.00%	35	35	98.48
Lifeways	84.21%	95	80	94.51%	91	86	78.69%	122	96	85.98%	107	92	85.30
Livingston	100.00%	20	20	100.00%	27	27	100.00%	30	30	100.00%	32	32	100.00
Macomb	98.36%	305	300	96.14%	363	349	89.53%	430	385	94.76%	382	362	94.32
Manistee-Benzie	100.00%	4	4	100.00%	5	5	100.00%	3	3	100.00%	3	3	100.00
Monroe	95.45%	44	42	100.00%	48	48	98.08%	52	51	100.00%	55	55	98.49
Montcalm	100.00%	13	13	100.00%	12	12	96.43%	28	27	92.31%	26	24	96.20
Muskegon	100.00%	45	45	100.00%	37	37	98.31%	59	58	98.21%	56	55	98.98
network180	89.55%	220	197	91.25%	240	219	90.09%	212	191	90.27%	185	167	90.32
Newaygo	100.00%	11	11	100.00%	17	17	100.00%	17	17	100.00%	13	13	100.00
North Country	100.00%	27	27	100.00%	30	30	100.00%	28	28	100.00%	27	27	100.00
Northeast	100.00%	15	15	100.00%	16	16	100.00%	11	11	100.00%	29	29	100.00
Northern Lakes	97.14%	105	102	95.88%	97	93	97.73%	88	86	97.73%	88	86	97.09
Northpointe	100.00%	16	16	100.00%	15	15	100.00%	16	16	100.00%	14	14	100.00
Oakland	99.28%	277	275	96.09%	256	246	98.74%	239	236	97.92%	240	235	98.02
Ottawa	100.00%	24	24	96.97%	33	32	95.24%	42	40	100.00%	37	37	97.79
Pathways	95.24%	21	20	94.87%	39	37	100.00%	29	29	95.65%	23	22	96.43
Pines	100.00%	10	10	100.00%	9	9	100.00%	24	24	100.00%	17	17	100.00
Saginaw	100.00%	37	37	93.48%	46	43	98.04%	51	50	94.29%	70	66	96.08
Sanilac	100.00%	19	19	100.00%	20	20	100.00%	12	12	100.00%	21	21	100.00
Shiawassee	100.00%	27	27	100.00%	33	33	100.00%	36	36	100.00%	36	36	100.00
St. Clair	97.30%	74	72	97.67%	86	84	97.62%	84	82	97.10%	69	67	97.44
St. Joseph	100.00%	10	10	100.00%	9	9	100.00%	12	12	100.00%	15	15	100.00
Summit Pointe	100.00%	37	37	97.50%	40	39	100.00%	8	8	100.00%	9	9	98.94
Tuscola	92.31%	13	12	100.00%	17	17	100.00%	11	11	100.00%	12	12	98.11
Van Buren	100.00%	13	13	100.00%	10	10	100.00%	8	8	100.00%	7	7	100.00
Washtenaw	98.61%	72	71	96.67%	30	29	98.33%	60	59	96.00%	75	72	97.47
West Michigan	100.00%	13	13	100.00%	19	19	95.24%	21	20	96.00%	25	24	97.44
Woodlands	93.33%	15	14	100.00%	7	7	100.00%	10	10	100.00%	11	11	97.67
	96.79%	3,146	3,045	96.80%	2,997	2,901	95.97%	3,449	3,310	96.73%	3,481	3,367	

Indicator 5 (old #6): Percentage of Face-to-Face Assessments with a Professional that Result in Decisions to Deny CMHSP Services

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	Persons Assessed Q1	Persons Denied Service Q1	Percentage Q2	Persons Assessed Q2	Persons Denied Services Q2	Percentage Q3	Persons Assessed Q3	Persons Denied Services Q3	Percentage Q4	Persons Assessed Q4	Persons Denied Services Q4	
Allegan	6.74%	178	12	10.42%	144	15	6.56%	122	8	2.04%	98	2	6.83
AuSable	3.03%	132	4	2.65%	151	4	0.00%	124	0	1.52%	132	2	1.86
Barry	7.69%	169	13	5.52%	181	10	7.87%	178	14	3.64%	165	6	6.20
Bay-Arenac	0.94%	424	4	1.16%	430	5	1.57%	381	6	2.33%	429	10	1.50
Berrien	0.91%	331	3	1.72%	348	6	3.93%	356	14	4.78%	272	13	2.75
CEI	2.01%	298	6	3.70%	270	10	5.24%	286	15	4.01%	274	11	3.72
CMH Central MI	6.68%	599	40	5.67%	723	41	8.50%	694	59	6.39%	689	44	6.80
Copper	3.17%	63	2	2.27%	44	1	7.84%	51	4	6.78%	59	4	5.07
Detroit-Wayne	1.61%	2,293	37	1.37%	2,631	36	1.21%	2,896	35	2.71%	2,616	71	1.72
Genesee	37.27%	432	161	61.16%	654	400	55.93%	674	377	58.91%	640	377	54.79
Gogebic	16.13%	31	5	18.18%	33	6	42.86%	14	6	21.74%	23	5	21.78
Gratiot	0.00%	61	0	0.00%	84	0	0.00%	84	0	0.00%	105	0	0.00
Hiawatha	12.07%	58	7	9.30%	43	4	16.67%	54	9	13.56%	59	8	13.08
Huron	1.11%	90	1	3.03%	99	3	1.04%	96	1	0.00%	102	0	1.29
Ionia	0.00%	162	0	0.00%	124	0	0.00%	108	0	0.00%	106	0	0.00
Kalamazoo	6.86%	204	14	5.88%	238	14	10.07%	139	14	4.55%	88	4	6.88
Lapeer	15.45%	123	19	10.43%	163	17	7.55%	159	12	18.66%	134	25	12.61
Lenawee	21.36%	103	22	17.43%	109	19	22.34%	94	21	11.85%	135	16	17.69
Lifeways	16.19%	210	34	11.29%	186	21	13.44%	186	25	14.84%	512	76	14.26
Livingston	4.88%	82	4	8.45%	71	6	4.11%	146	6	8.16%	98	8	6.05
Macomb	1.80%	501	9	0.69%	583	4	0.47%	643	3	1.82%	604	11	1.16
Manistee-Benzie	12.50%	72	9	8.77%	114	10	11.01%	109	12	16.67%	102	17	12.09
Monroe	4.35%	46	2	4.35%	46	2	0.82%	122	1	-	0	0	2.34
Montcalm	22.46%	138	31	21.23%	146	31	15.00%	120	18	18.94%	132	25	19.59
Muskegon	7.17%	279	20	13.27%	339	45	11.83%	355	42	8.18%	318	26	10.30
network180	6.08%	1,644	100	7.87%	2,032	160	7.02%	1,994	140	6.41%	1,841	118	6.90
Newaygo	0.99%	101	1	2.94%	102	3	13.92%	79	11	7.00%	100	7	5.76
North Country	25.00%	408	102	18.69%	487	91	30.02%	433	130	23.42%	380	89	24.12
Northeast	12.41%	137	17	11.59%	164	19	16.67%	138	23	20.00%	105	21	14.71
Northern Lakes	12.50%	448	56	13.42%	529	71	14.94%	415	62	15.96%	376	60	14.08
Northpointe	3.92%	102	4	6.59%	91	6	8.91%	101	9	5.00%	80	4	6.15
Oakland	7.90%	1,089	86	17.16%	1,107	190	28.72%	1,027	295	34.96%	1,044	365	21.94
Ottawa	21.21%	297	63	42.81%	285	122	26.05%	215	56	28.48%	165	47	29.94
Pathways	6.86%	102	7	9.52%	105	10	5.13%	117	6	3.37%	89	3	6.30
Pines	7.75%	258	20	7.17%	321	23	3.67%	218	8	4.56%	307	14	5.89
Saginaw	25.86%	116	30	20.59%	136	28	19.53%	128	25	5.41%	111	6	18.13
Sanilac	2.17%	92	2	5.21%	96	5	3.95%	76	3	0.00%	70	0	2.99
Shiawassee	20.25%	158	32	15.82%	177	28	13.29%	173	23	12.42%	153	19	15.43
St. Clair	17.03%	364	62	21.69%	355	77	36.55%	249	91	25.25%	301	76	24.11
St. Joseph	11.01%	218	24	13.46%	208	28	18.10%	210	38	13.86%	202	28	14.08
Summit Pointe	0.90%	891	8	0.87%	1,034	9	1.94%	981	19	2.09%	1,006	21	1.46
Tuscola	9.09%	132	12	6.25%	128	8	8.47%	118	10	10.00%	120	12	8.43
Van Buren	0.00%	193	0	0.00%	181	0	0.00%	213	0	0.00%	204	0	0.00
Washtenaw	20.33%	300	61	17.22%	418	72	19.69%	325	64	24.55%	334	82	20.26
West Michigan	43.38%	136	59	46.28%	121	56	45.16%	124	56	47.86%	117	56	45.58
Woodlands	7.69%	91	7	0.00%	124	0	1.26%	159	2	3.85%	156	6	2.83
	8.44%	14,356	1,212	10.62%	16,155	1,716	11.30%	15,684	1,773	11.85%	15,153	1,795	

Indicator 6 (old #7): Percentage of Section 705 Second Opinions Requested Resulting in the Delivery of Service

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	# Persons Requesting 2nd Opinion Q1	# Persons Receiving Service Q1	Percentage Q2	# Persons Requesting 2nd Opinion Q2	# Persons Receiving Service Q2	Percentage Q3	# Persons Requesting 2nd Opinion Q3	# Persons Receiving Service Q3	Percentage Q4	# Persons Requesting 2nd Opinion Q4	# Persons Receiving Service Q4	
Allegan	-	0	0	-	0	0	0.00%	2	0	-	0	0	0.00
AuSable	-	0	0	-	0	0	-	0	0	-	0	0	
Barry	-	0	0	-	0	0	-	0	0	-	0	0	
Bay-Arenac	-	0	0	-	0	0	-	0	0	-	0	0	
Berrien	100.00%	1	1	100.00%	1	1	-	0	0	66.67%	3	2	80.00
CEI	-	0	0	-	0	0	60.00%	5	3	-	0	0	60.00
CMH Central MI	-	0	0	100.00%	3	3	0.00%	1	0	50.00%	2	1	66.67
Copper	-	0	0	-	0	0	-	0	0	0.00%	1	0	0.00
Detroit-Wayne	100.00%	1	1	-	0	0	0.00%	1	0	-	0	0	50.00
Genesee	16.67%	6	1	20.00%	5	1	0.00%	10	0	0.00%	10	0	6.45
Gogebic	-	0	0	-	0	0	-	0	0	100.00%	1	1	100.00
Gratiot	-	0	0	-	0	0	-	0	0	-	0	0	
Hiawatha	-	0	0	-	0	0	-	0	0	-	0	0	
Huron	-	0	0	-	0	0	-	0	0	-	0	0	
Ionia	-	0	0	-	0	0	-	0	0	-	0	0	
Kalamazoo	50.00%	14	7	50.00%	14	7	50.00%	14	7	0.00%	4	0	45.65
Lapeer	-	0	0	-	0	0	-	0	0	-	0	0	
Lenawee	50.00%	2	1	-	0	0	-	0	0	-	0	0	50.00
Lifeways	-	0	0	25.00%	4	1	-	0	0	-	0	0	25.00
Livingston	-	0	0	-	0	0	-	0	0	-	0	0	
Macomb	-	0	0	50.00%	4	2	0.00%	2	0	-	0	0	33.33
Manistee-Benzie	-	0	0	-	0	0	-	0	0	-	0	0	
Monroe	50.00%	4	2	50.00%	4	2	50.00%	2	1	-	0	0	50.00
Montcalm	-	0	0	-	0	0	-	0	0	-	0	0	
Muskegon	-	0	0	-	0	0	-	0	0	-	0	0	
network180	20.00%	5	1	16.67%	6	1	14.29%	7	1	11.11%	9	1	14.81
Newaygo	-	0	0	-	0	0	-	0	0	-	0	0	
North Country	-	0	0	-	0	0	0.00%	1	0	0.00%	3	0	0.00
Northeast	-	0	0	100.00%	1	1	-	0	0	-	0	0	100.00
Northern Lakes	100.00%	1	1	50.00%	2	1	33.33%	6	2	75.00%	4	3	53.85
Northpointe	-	0	0	-	0	0	-	0	0	-	0	0	
Oakland	37.14%	35	13	30.91%	55	17	45.95%	37	17	36.36%	22	8	36.91
Ottawa	40.00%	5	2	0.00%	6	0	50.00%	6	3	20.00%	5	1	27.27
Pathways	0.00%	2	0	-	0	0	100.00%	1	1	-	0	0	33.33
Pines	-	0	0	-	0	0	-	0	0	-	0	0	
Saginaw	-	0	0	0.00%	1	0	-	0	0	-	0	0	0.00
Sanilac	-	0	0	-	0	0	-	0	0	-	0	0	
Shiawassee	-	0	0	-	0	0	-	0	0	-	0	0	
St. Clair	50.00%	2	1	66.67%	3	2	0.00%	4	0	23.08%	26	6	25.71
St. Joseph	5.33%	0	0	-	0	0	-	0	0	0.00%	1	0	0.00
Summit Pointe	-	0	0	-	0	0	-	0	0	-	0	0	
Tuscola	-	0	0	-	0	0	-	0	0	-	0	0	
Van Buren	-	0	0	-	0	0	-	0	0	-	0	0	
Washtenaw	33.33%	3	1	40.00%	5	2	40.00%	5	2	100.00%	1	1	42.86
West Michigan	-	0	0	-	0	0	-	0	0	-	0	0	
Woodlands	-	0	0	-	0	0	-	0	0	-	0	0	
	39.51%	81	32	35.96%	114	41	35.58%	104	37	26.09%	92	24	

Indicator 10a (old #12a): Percentage of Children Readmitted to Inpatient Psychiatric Units Within 30 Calendar of Discharge From a Psychiatric Inpatient Unit - 15% or Less Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	# Children Discharged Q1	# Children Readmitted Within 30 Days Q1	Percentage Q2	# Children Discharged Q2	# Children Readmitted Within 30 Days Q2	Percentage Q3	# Children Discharged Q3	# Children Readmitted Within 30 Days Q3	Percentage Q4	# Children Discharged Q4	# Children Readmitted Within 30 Days Q4	
Allegan	0.00%	8	0	20.00%	5	1	0.00%	5	0	9.09%	11	1	6.90
AuSable	0.00%	8	0	8.33%	12	1	0.00%	8	0	0.00%	4	0	3.13
Barry	0.00%	5	0	0.00%	4	0	0.00%	6	0	0.00%	4	0	0.00
Bay-Arenac	0.00%	22	0	25.93%	27	7	19.44%	36	7	11.11%	27	3	15.18
Berrien	0.00%	2	0	0.00%	4	0	0.00%	6	0	0.00%	1	0	0.00
CEI	16.67%	6	1	0.00%	4	0	11.11%	9	1	20.00%	10	2	13.79
CMH Central MI	18.18%	11	2	11.11%	9	1	7.14%	14	1	0.00%	12	0	8.70
Copper	0.00%	3	0	0.00%	3	0	0.00%	8	0	33.33%	3	1	5.88
Detroit-Wayne	10.76%	381	41	12.29%	293	36	11.08%	361	40	15.28%	288	44	12.17
Genesee	9.43%	53	5	13.79%	58	8	12.68%	71	9	8.89%	45	4	11.45
Gogebic	-	0	0	-	0	0	0.00%	1	0	-	0	0	0.00
Gratiot	0.00%	7	0	0.00%	5	0	0.00%	7	0	0.00%	2	0	0.00
Hiawatha	16.67%	6	0	0.00%	6	0	0.00%	4	0	0.00%	1	0	5.88
Huron	33.33%	3	1	20.00%	5	1	0.00%	6	0	0.00%	1	0	13.33
Ionia	-	0	0	-	0	0	0.00%	4	0	0.00%	1	0	0.00
Kalamazoo	9.38%	32	3	3.70%	27	1	0.00%	25	0	17.39%	23	4	7.48
Lapeer	14.29%	7	1	0.00%	6	0	20.00%	10	2	0.00%	5	0	10.71
Lenawee	0.00%	5	0	16.67%	6	1	0.00%	9	0	12.50%	8	1	7.14
Lifeways	13.33%	15	2	11.11%	18	2	7.69%	13	1	8.33%	12	1	10.34
Livingston	25.00%	4	1	23.53%	17	4	11.11%	9	1	28.57%	7	2	21.62
Macomb	10.19%	108	11	6.60%	106	7	5.74%	122	7	21.88%	96	21	10.65
Manistee-Benzie	0.00%	1	0	-	0	0	50.00%	2	1	-	0	0	33.33
Monroe	10.00%	10	1	0.00%	6	0	50.00%	2	1	0.00%	4	0	9.09
Montcalm	0.00%	5	0	0.00%	3	0	0.00%	1	0	0.00%	2	0	0.00
Muskegon	0.00%	12	0	10.00%	10	1	0.00%	12	0	25.00%	8	2	7.14
network180	4.00%	50	2	8.33%	36	3	7.55%	53	4	4.08%	49	2	5.85
Newaygo	25.00%	4	1	0.00%	5	0	0.00%	1	0	33.33%	3	1	15.38
North Country	10.34%	29	3	15.38%	13	2	5.00%	20	1	10.00%	10	1	9.72
Northeast	0.00%	6	0	0.00%	6	0	33.33%	3	1	0.00%	2	0	5.88
Northern Lakes	7.69%	13	1	11.76%	17	2	6.67%	15	1	9.52%	21	2	9.09
Northpointe	14.29%	7	1	9.09%	11	1	0.00%	6	0	-	0	0	8.33
Oakland	7.59%	79	6	8.70%	69	6	7.14%	42	3	16.67%	36	6	9.29
Ottawa	7.69%	13	1	0.00%	15	0	0.00%	5	0	0.00%	5	0	2.63
Pathways	22.22%	9	2	10.00%	10	1	30.77%	13	4	16.67%	6	1	21.05
Pines	-	0	0	0.00%	2	0	0.00%	1	0	0.00%	9	0	0.00
Saginaw	9.09%	11	1	4.17%	24	1	0.00%	28	0	3.23%	31	1	3.19
Sanilac	0.00%	5	0	0.00%	1	0	0.00%	9	0	0.00%	3	0	0.00
Shiawassee	10.00%	10	1	0.00%	2	0	37.50%	8	3	66.67%	6	4	30.77
St. Clair	7.14%	14	1	0.00%	16	0	20.00%	20	4	0.00%	11	0	8.20
St. Joseph	0.00%	5	0	0.00%	5	0	0.00%	5	0	0.00%	4	0	0.00
Summit Pointe	0.00%	10	0	0.00%	9	0	0.00%	1	0	100.00%	1	1	4.76
Tuscola	0.00%	2	0	0.00%	2	0	0.00%	2	0	33.33%	3	1	11.11
Van Buren	0.00%	4	0	0.00%	2	0	0.00%	2	0	0.00%	1	0	0.00
Washtenaw	0.00%	24	0	0.00%	10	0	0.00%	14	0	0.00%	14	0	0.00
West Michigan	40.00%	5	2	25.00%	4	1	11.11%	9	1	20.00%	5	1	21.74
Woodlands	100.00%	2	2	0.00%	3	0	25.00%	4	1	0.00%	1	0	30.00
	9.25%	1,016	94	9.82%	896	88	9.29%	1,012	94	13.44%	796	107	

Indicator 10b (old #12b): Percentage of Adults Readmitted to Inpatient Psychiatric Units Within 30 Calendar of Discharge From a Psychiatric Inpatient Unit - 15% or Less Standard

	October - December 2011			January - March 2012			April - June 2012			July - September 2012			Fiscal Year Percentage
	Percentage Q1	# Adults Discharged Q1	# Adults Readmitted Within 30 Days Q1	Percentage Q2	# Adults Discharged Q2	# Adults Readmitted Within 30 Days Q2	Percentage Q3	# Adults Discharged Q3	# Adults Readmitted Within 30 Days Q3	Percentage Q4	# Adults Discharged Q4	# Adults Readmitted Within 30 Days Q4	
Allegan	7.41%	27	2	0.00%	28	0	8.82%	34	3	4.17%	24	1	5.31
AuSable	3.33%	30	1	16.67%	36	6	6.90%	29	2	5.41%	37	2	8.33
Barry	8.00%	25	2	0.00%	16	0	9.52%	21	2	0.00%	17	0	5.06
Bay-Arenac	11.90%	84	10	12.38%	105	13	12.77%	94	12	8.99%	89	8	11.56
Berrien	3.51%	57	2	3.03%	33	1	2.67%	75	2	3.23%	31	1	3.06
CEI	9.09%	77	7	15.38%	78	12	10.29%	68	7	11.34%	97	11	11.56
CMH Central MI	5.45%	55	3	8.06%	62	5	6.67%	75	5	3.51%	57	2	6.02
Copper	0.00%	9	0	16.67%	12	2	25.00%	12	3	0.00%	11	0	11.36
Detroit-Wayne	11.48%	1,455	167	12.10%	1,264	153	12.62%	1,569	198	16.41%	1,633	268	13.27
Genesee	10.67%	300	32	9.12%	307	28	12.54%	343	43	10.35%	367	38	10.71
Gogebic	0.00%	5	0	0.00%	8	0	0.00%	5	0	0.00%	2	0	0.00
Gratiot	28.57%	14	4	5.88%	17	1	0.00%	16	0	0.00%	13	0	8.33
Hiawatha	30.00%	10	3	0.00%	8	0	22.22%	9	2	0.00%	9	0	13.89
Huron	3.23%	31	1	0.00%	29	0	5.71%	35	2	16.67%	36	6	6.87
Ionia	0.00%	8	0	0.00%	8	0	0.00%	11	0	5.88%	17	1	2.27
Kalamazoo	7.07%	99	7	8.14%	86	7	6.48%	108	7	7.61%	92	7	7.27
Lapeer	13.33%	30	4	9.38%	32	3	7.89%	38	3	5.71%	35	2	8.89
Lenawee	12.50%	40	5	2.56%	39	1	9.76%	41	4	2.17%	46	1	6.63
Lifeways	12.24%	98	12	17.39%	92	16	13.49%	126	17	10.92%	119	13	13.33
Livingston	12.00%	25	3	6.25%	32	2	9.38%	32	3	21.62%	37	8	12.70
Macomb	19.65%	397	78	19.64%	443	87	21.02%	528	111	17.82%	477	85	19.57
Manistee-Benzie	25.00%	4	1	0.00%	5	0	0.00%	3	0	0.00%	3	0	6.67
Monroe	24.07%	54	13	25.49%	51	13	14.55%	55	8	3.51%	57	2	16.59
Montcalm	7.69%	13	1	0.00%	14	0	10.34%	29	3	3.70%	27	1	6.02
Muskegon	3.28%	61	2	10.91%	55	6	8.54%	82	7	11.84%	76	9	8.76
network180	17.58%	256	45	16.61%	283	47	16.53%	242	40	11.63%	215	25	15.76
Newaygo	0.00%	13	0	5.26%	19	1	4.76%	21	1	14.29%	14	2	5.97
North Country	7.50%	40	3	4.17%	48	2	8.70%	46	4	9.52%	42	4	7.39
Northeast	0.00%	24	0	3.23%	31	1	0.00%	21	0	13.51%	37	5	5.31
Northern Lakes	17.83%	129	23	9.73%	113	11	8.62%	116	10	7.14%	126	9	10.95
Northpointe	21.05%	19	4	23.53%	17	4	11.11%	18	2	15.79%	19	3	17.81
Oakland	8.93%	347	31	9.97%	321	32	9.62%	260	25	8.59%	256	22	9.29
Ottawa	6.00%	50	3	6.25%	48	3	5.13%	39	2	8.57%	70	6	6.76
Pathways	15.38%	26	4	10.20%	49	5	21.05%	38	8	13.79%	29	4	14.79
Pines	7.14%	14	1	0.00%	16	0	6.90%	29	2	3.13%	32	1	4.40
Saginaw	8.33%	48	4	6.58%	76	5	9.41%	85	8	6.36%	110	7	7.52
Sanilac	20.00%	25	5	3.85%	26	1	5.00%	20	1	10.34%	29	3	10.00
Shiawassee	7.41%	27	2	3.03%	33	1	5.56%	36	2	19.44%	36	7	9.09
St. Clair	21.00%	100	21	14.55%	110	16	18.38%	136	25	9.17%	109	10	15.82
St. Joseph	23.53%	17	4	10.00%	10	1	0.00%	15	0	0.00%	17	0	8.47
Summit Pointe	1.96%	51	1	3.70%	54	2	0.00%	11	0	0.00%	16	0	2.27
Tuscola	0.00%	20	0	5.26%	19	1	7.14%	14	1	8.33%	12	1	4.62
Van Buren	20.00%	15	3	0.00%	18	0	0.00%	12	0	0.00%	13	0	5.17
Washtenaw	2.41%	83	2	6.06%	33	2	10.45%	67	7	4.05%	74	3	5.45
West Michigan	0.00%	20	0	3.85%	26	1	0.00%	29	0	0.00%	29	0	0.96
Woodlands	6.67%	15	1	28.57%	7	2	20.00%	10	2	18.18%	11	2	16.28
	11.89%	4,347	517	11.71%	4,217	494	12.42%	4,703	584	12.33%	4,705	580	

SECTION 404 (k)
NUMBER OF DIRECT CARE WORKERS
FY 2012

TABLE 1 -Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	1,759.31	61.69	1,821.00
3	b. Contract Agency Staff	20,427.93	331.17	20,759.10
	Total	22,187.24	392.86	22,580.09

TABLE 2-Total Workforce Estimate

	Estimated Total Workforce FTEs	Actual Filled as of 9/30/11	Approved Vacancies	Total Actual and Approved
13	CMHSP Employees	20,474	257	20,731
14	Contract Agency Staff	16,948	340	17,288
15	Total	37,422	597	38,019

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	32	0	32
4	Total	32	0	32

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	145	4	149
6	Contract Agency Staff	14	0	14
7	Total	159	4	163

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	92.15	3.825	95.975
3	b. Contract Agency Staff	0		0
4	Total	92.15	3.825	95.975

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	25.65	0.4	26.05
6	Contract Agency Staff			0
7	Total	25.65	0.4	26.05

ESTIMATED FTE EQUIVALENTS

CMHSP: Barry County
Contact name/e-mail:

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	0	0	0
4	Total	0	0	0

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	10	0	10
6	Contract Agency Staff	0	0	0
7	Total	10	0	10

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	10.7	0	10.7
3	b. Contract Agency Staff	280.6		280.6
4	Total	291.3	0	291.3

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	24.7	0	24.7
6	Contract Agency Staff	174.76		174.76
7	Total	199.46	0	199.46

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	11	0	11
3	b. Contract Agency Staff	131.6	9.6	141.2
4	Total	142.6	9.6	152.2

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	0	0	0
6	Contract Agency Staff	74.9	0.5	75.4
7	Total	74.9	0.5	75.4

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	111	29	140
3	b. Contract Agency Staff	343		343
4	Total	454	29	483

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	741	63	804
6	Contract Agency Staff	168		168
7	Total	909	63	972

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	742.31		742.31
4	Total	742.31	0	742.31

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	377	12	389
6	Contract Agency Staff	523.98		523.98
7	Total	900.98	12	912.98

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	100	9	109
3	b. Contract Agency Staff	2	0	2
4	Total	102	9	111

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	212	7	219
6	Contract Agency Staff	7	0	7
7	Total	219	7	226

ESTIMATED FTE EQUIVALENTS

CMHSP: Detroit Wayne County Community MH
 Contact name/e-mail: J. Summerlin / Jsummerl@co.wayne.mi.us

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	886		886
3	b. Contract Agency Staff	6061	117	6178
4	Total	6947	117	7064

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	16129	28	16157
6	Contract Agency Staff	5795	124	5919
7	Total	21924	152	22076

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	1532	0	1532
4	Total	1532	0	1532

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	312.25	32.75	345
6	Contract Agency Staff	422	0	422
7	Total	734.25	32.75	767

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	32.43		32.43
3	b. Contract Agency Staff			0
4	Total	32.43	0	32.43

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	74.52		74.52
6	Contract Agency Staff	5.11		5.11
7	Total	79.63	0	79.63

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0		0
3	b. Contract Agency Staff	78		78
4	Total	78	0	78

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	6	2	8
6	Contract Agency Staff	70	0	70
7	Total	76	2	78

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	39.8	0	39.8
3	b. Contract Agency Staff	12	0	12
4	Total	51.8	0	51.8

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	131.9	2	133.9
6	Contract Agency Staff	27.2	0	27.2
7	Total	159.1	2	161.1

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	32		32
3	b. Contract Agency Staff	14		14
4	Total	46	0	46

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	27		27
6	Contract Agency Staff	42		42
7	Total	69	0	69

ESTIMATED FTE EQUIVALENTS

CMHSP: Ionia County CMH
 Contact name/e-mail: Robert Lathers, 616-527-1790

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	79.45	0	79.45
4	Total	79.45	0	79.45

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	88.1	4	92.1
6	Contract Agency Staff	91.45	0	91.45
7	Total	179.55	4	183.55

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees			0
3	b. Contract Agency Staff	457.8	20.3	478.1
4	Total	457.8	20.3	478.1

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees			0
6	Contract Agency Staff	292.75	19.75	312.5
7	Total	292.75	19.75	312.5

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees			0
3	b. Contract Agency Staff	223.5		223.5
4	Total	223.5	0	223.5

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	14.88		14.88
6	Contract Agency Staff	47.36		47.36
7	Total	62.24	0	62.24

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	65	0	65
3	b. Contract Agency Staff	134.62	3.27	137.89
4	Total	199.62	3.27	202.89

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	0	0	0
6	Contract Agency Staff	102.88	0	102.88
7	Total	102.88	0	102.88

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	253.3	10.5	263.8
4	Total	253.3	10.5	263.8

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	82.75	13.5	96.25
6	Contract Agency Staff	675.54	11	686.54
7	Total	758.29	24.5	782.79

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees			0
3	b. Contract Agency Staff	56.715	0	56.715
4	Total	56.715	0	56.715

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees			0
6	Contract Agency Staff	216.61	5.9	222.51
7	Total	216.61	5.9	222.51

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees			0
3	b. Contract Agency Staff	1177.74		1177.74
4	Total	1177.74	0	1177.74

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees			0
6	Contract Agency Staff	1623.05		1623.05
7	Total	1623.05	0	1623.05

ESTIMATED FTE EQUIVALENTS

CMHSP: [Centra Wellness Network](#)
 Contact name/e-mail: [Amy Taylor; Ataylor@centrawellness.org](#)

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	110.03	0	110.03
4	Total	110.03	0	110.03

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	88.75	0	88.75
6	Contract Agency Staff	0	0	0
7	Total	88.75	0	88.75

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	8	0	8
3	b. Contract Agency Staff	160.45	0	160.45
4	Total	168.45	0	168.45

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	127	15	142
6	Contract Agency Staff	459.74	0	459.74
7	Total	586.74	15	601.74

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	69.49	0	69.49
4	Total	69.49	0	69.49

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	0	0	0
6	Contract Agency Staff	11.92	0	11.92
7	Total	11.92	0	11.92

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	31.94	4.8	36.74
3	b. Contract Agency Staff	997.56	5.3	1002.86
4	Total	1029.5	10.1	1039.6

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	248.24	19.33	267.57
6	Contract Agency Staff	317.03	12.5	329.53
7	Total	565.27	31.83	597.1

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	672.75	24.7	697.45
4	Total	672.75	24.7	697.45

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	149	7	156
6	Contract Agency Staff	263.88	11.6	275.48
7	Total	412.88	18.6	431.48

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0		0
3	b. Contract Agency Staff	128.92		128.92
4	Total	128.92	0	128.92

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	44	0	44
6	Contract Agency Staff	247.78	0	247.78
7	Total	291.78	0	291.78

ESTIMATED FTE EQUIVALENTS

CMHSP: [North Country Community Mental Health](#)
 Contact name/e-mail: dwheeler@norcccmh.org

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	10.06		10.06
3	b. Contract Agency Staff	319.49	14	333.49
4	Total	329.55	14	343.55

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	19.43		19.43
6	Contract Agency Staff	183.35		183.35
7	Total	202.78	0	202.78

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	62	0	62
3	b. Contract Agency Staff	512	12	524
4	Total	574	12	586

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	226	12	238
6	Contract Agency Staff	262	25	287
7	Total	488	37	525

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	133.82	2.5	136.32
3	b. Contract Agency Staff	56	0	56
4	Total	189.82	2.5	192.32

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	99.91	9.5	109.41
6	Contract Agency Staff	34	0	34
7	Total	133.91	9.5	143.41

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	94	9	103
3	b. Contract Agency Staff	29		29
4	Total	123	9	132

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	43	2	45
6	Contract Agency Staff	39		39
7	Total	82	2	84

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	1901	80	1981
4	Total	1901	80	1981

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	94	2	96
6	Contract Agency Staff	2692	90	2782
7	Total	2786	92	2878

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	314.1	11	325.1
4	Total	314.1	11	325.1

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	37	0	37
6	Contract Agency Staff	302.51	2	304.51
7	Total	339.51	2	341.51

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	351.64	2.5	354.14
4	Total	351.64	2.5	354.14

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	59	0	59
6	Contract Agency Staff	107.05	1	108.05
7	Total	166.05	1	167.05

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	82.5	0	82.5
4	Total	82.5	0	82.5

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	0	0	0
6	Contract Agency Staff	31.6	31.6	63.2
7	Total	31.6	31.6	63.2

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	491	0	491
4	Total	491	0	491

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	110	9	119
6	Contract Agency Staff	296	0	296
7	Total	406	9	415

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	144.94		144.94
4	Total	144.94	0	144.94

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	102	0	102
6	Contract Agency Staff	27.55	0	27.55
7	Total	129.55	0	129.55

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	57.37	0	57.37
4	Total	57.37	0	57.37

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	105	4	109
6	Contract Agency Staff	136	0	136
7	Total	241	4	245

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	297	0	297
4	Total	297	0	297

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	38.4	0	38.4
6	Contract Agency Staff	222	0	222
7	Total	260.4	0	260.4

ESTIMATED FTE EQUIVALENTS

CMHSP: [Community Mental Health & Substance](#)
 Contact name/e-mail: [Heather Kerr hkerr@stjoecmh.org](mailto:Heather.Kerr@stjoecmh.org)

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees			0
3	b. Contract Agency Staff	262.5	15	277.5
4	Total	262.5	15	277.5

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees			0
6	Contract Agency Staff	25.2		25.2
7	Total	25.2	0	25.2

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0		0
3	b. Contract Agency Staff	313.05		313.05
4	Total	313.05	0	313.05

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	7.25	1	8.25
6	Contract Agency Staff	251.36	0	251.36
7	Total	258.61	1	259.61

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	30.24	3.56	33.8
3	b. Contract Agency Staff	131.5		131.5
4	Total	161.74	3.56	165.3

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	31.57	0	31.57
6	Contract Agency Staff	1.09		1.09
7	Total	32.66	0	32.66

ESTIMATED FTE EQUIVALENTS

CMHSP: Van Buren
 Contact name/e-mail: Claren Schweitzer
 cschweitzer@vbcmh.com

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	9.17		9.17
3	b. Contract Agency Staff			0
4	Total	9.17	0	9.17

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	140.65	1.85	142.5
6	Contract Agency Staff			0
7	Total	140.65	1.85	142.5

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	251		251
4	Total	251	0	251

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	286	6	292
6	Contract Agency Staff	471	5	476
7	Total	757	11	768

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	86	6	92
4	Total	86	6	92

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	30	0	30
6	Contract Agency Staff	23		23
7	Total	53	0	53

TABLE 1 - Total Workforce in Specialized Residential Settings

	FTEs and Est DCW Cost	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
	Workforce in Specialized Residential Settings			
1	Specialized Residential Settings			
2	a. CMHSP Employees	0	0	0
3	b. Contract Agency Staff	1077	0	1077
4	Total	1077	0	1077

TABLE 2 - Total Workforce in Other Settings

	Total Workforce FTEs	Actual Filled as of 9/30/12	Approved Vacancies	Total Actual and Approved
5	CMHSP Employees	13	0	13
6	Contract Agency Staff	211	0	211
7	Total	224	0	224

SECTION 404 (3)
CMHSP CONTRACTUAL DATA
REPORTING REQUIREMENTS
FY 2012

**CMHSP REPORTING REQUIREMENTS FOR MEDICAID SPECIALTY SUPPORTS
AND SERVICES BENEFICIARIES**

Effective 10/1/11

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CONTRACT MENTAL HEALTH REPORTING REQUIREMENTS

Introduction

The Michigan Department of Community Health reporting requirements for the FY2012 Master contract with community mental health services programs (CMHSPs) are contained in this attachment. The requirements include the data definitions and dates for submission of reports on consumers that the CMHSP serves: persons with mental illness and persons with developmental disabilities served by mental health programs. These requirements do not cover Medicaid beneficiaries who receive their mental health benefit through the Medicaid Health Plans, and with whom the CMHSP may contract (or subcontract with an entity that contracts with the Medicaid Health Plans) to provide the mental health benefit.

Companions to the requirements in this attachment are

- “Supplemental Instructions for Encounter and Quality Improvement Data Submissions” which contains clarifications, value ranges, and edit parameters for the encounter and quality improvement (demographic) data, as well as examples that will assist PIHP staff in preparing data for submission to MDCH.
- Mental Health Codelist that contains the Medicaid covered services as well as services that may be paid by general fund and the CPT and HCPCs codes that MDCH and EDIT have assigned to them.
- Cost per code instructions that contain instructions on use of modifiers; the acceptable activities that may be reflected in the cost of each procedure; and whether an activity needs to be face-to-face in order to count.
- “Establishing Managed Care Administrative Costs” that provides instructions on what managed care functions should be included in the allocation of expenditures to managed care administration
- “Michigan’s Mission-Based Performance Indicator System, Version 6.0” is a codebook with instructions on what data to collect for, and how to calculate and report, performance indicators

These documents are posted on the MDCH web site and are periodically updated when federal or state requirements change, or when in consultation with representatives of the public mental health system it deemed necessary to make corrections or clarifications. Question and answer documents are also produced from time to time and posted on the web site.

Collection of each element contained in the master contract attachment is required. Data reporting must be received by 5 p.m. on the due dates (where applicable) in the acceptable format(s) and by the MDCH staff identified in the instructions. Failure to meet this standard will result in contract action.

The reporting of the data by CMHSPs described within these requirements meets several purposes at MDCH including:

- Legislative boilerplate annual reporting and semi-annual updates
- Managed Care Contract Management
- System Performance Improvement

- Statewide Planning
- Centers for Medicare and Medicaid (CMS) reporting
- Actuarial activities

Where accuracy standards for collecting and reporting QI data are noted in the contract, it is expected that CMHSPs will meet those standards.

Individual consumer level data received at MDCH is kept confidential and published reports will display only aggregate data. Only a limited number of MDCH staff have access to the database that contains social security numbers, income level, and diagnosis, for example. Individual level data will be provided back to the agency that submitted the data for encounter data validation and improvement. This sharing of individual level data is permitted under the HIPAA Privacy Rules, Health Care Operations.

CMHSP Reporting Requirements
FY 2012 DATA REPORT DUE DATES

	Nov11	Dec	Jan12	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec12	Jan13
1. Consumer level** a. Quality Improvement (monthly) ¹ b. Encounter (monthly) ¹	√	√	√	√	√	√	√	√	√	√	√	√	√	√	√
2. CMHSP level a. Sub-element Cost Report (annually) ²				√											√
b. Performance indicators (quarterly) ²					√			√			√			√	
c. Recipient Rights (semi-annually) ^{3,4}						√				√				√	

NOTES:

1. Send data to MDCH MIS via DEG, unless the CMHSP as affiliate has arranged for its PIHP to submit consumer-level data for non-Medicaid consumers
2. Send data to MDCH, Mental Health and Substance Abuse Administration, Division of Quality Management and Planning
3. Send Recipient Rights reports to MDCH Office of Recipient Rights
4. Per the Mental Health Code, the annual Recipient Rights report is due December 30th

**Consumer level data must be submitted immediately within 30 days following adjudication of claims for services provided, or in cases where claims are not part of the CMHSP's business practices within 30 days following the end of the month in which services were delivered.

CMHSP level reports are due at 5 p.m. on the last day of the month checked

CMHSP Reporting Requirements**QUALITY IMPROVEMENT DATA**

Demographic or “quality improvement” (QI) data is required to be reported for each consumer and for whom an encounter data record or fee-for service claim (for Children’s Waiver) is being submitted. Encounter data is reported within 30 days after the claim for the service is adjudicated, or in cases where claims payment is not part of the CMHSP’s business practice, within 30 days following the end of the month in which services were delivered. QI data is reported year-to-date. The first report for the fiscal year will contain records for all consumers whose claims were adjudicated the first month, the next month’s report will contain records of all consumers whose claims were adjudicated in month one and month two, etc. Corrective QI file updates are allowed from the CMHSP to replace a rejected file, or a file that contained rejected records.

Method for submission: The QI data is to be submitted in a delimited format, with the columns identified by the delimiter, rather than by column “from” and “to” indicators.

Due dates: The first QI data should be submitted during the same month the first encounter data is submitted. Encounter and QI data are due 30 days after a claim is adjudicated or services were rendered (see above note). Reporting adjudicated claims will enable the PIHP to accurately report on the amount paid for the service and on third party reimbursements.

Who to report: Report on each consumer who received a service from the CMHSP, regardless of funding stream. The exception is when a CMHSP contracts with another CMHSP, or a Medicaid Health Plan contracts with a CMHSP, or an entity that contracts with a Medicaid Health Plan subcontracts with the CMHSP to provide the mental health outpatient benefit. In these cases, the CMHSP that delivers the service **does not** report the encounter. Reporting QI data for all other consumers who are seen for a one-time-only assessment, crisis intervention, or prevention service, and do not become continuing mental health service recipients, requires only those data elements with a **. The encounter and QI file will be rejected if those data elements are not present.

Who submits consumer-level data: The PIHP must report the encounter and QI data for all mental health and developmental disabilities (MH/DD) consumers and Medicaid beneficiaries in its entire service area/affiliation regardless of the funding stream that paid for the services.

Notes:

1. Demographic Information must be updated at least annually, such as at the time of annual planning. A consumer demographic record must be submitted for each month the consumer receives services, and for which an encounter record or fee-for-service claim (Children’s Waiver) is being submitted. Failure to meet this standard may result in rejection of a file and contract action.
2. Numbers missing from the sequence of options represent items deleted from previous reporting requirements.
3. Items with an * require that 95% of records contain a value in that field and that the values be within acceptable ranges (see each item for the ranges). Items with ** require that 100% of the records contain a value in the field, and the values are in the proper format and within acceptable ranges. Failure to meet the 100% standard will result in rejection of the file or

CMHSP Reporting Requirements

record.

4. A “Supplemental Instructions for Encounter and Quality Improvement Data Submissions” issued by MDCH should be used for file layouts.
5. Some demographic items are reported on both the 837 Health Care Claim transaction and the QI data report for ease of calculating population numbers during the year.

The following is a description of the individual consumer demographic elements for which data is required of Community Mental Health Services Programs.

****1. Reporting Period (REPORTPD)**

The last day of the month during which consumers received services covered by this report.
Report year, month, day: ccyymmdd.

****2.a. PIHP Payer Identification Number (PIHPID)**

The MDCH-assigned 7-digit payer identification number must be used to identify the PIHP with all data transmissions.

2.b. CMHSP Payer Identification Number (CMHID)

The MDCH-assigned 7-digit payer identification number must be used to identify the CMHSP with all data transmissions.

****3. Consumer Unique ID (CONID)**

A numeric or alphanumeric code, of 11 characters that enables the consumer and related services to be identified and data to be reliably associated with the consumer across all of the PIHP's services. The identifier should be established at the PIHP or CMHSP level so agency level or sub-program level services can be aggregated across all program services for the individual. The consumer's unique ID must not be changed once established since it is used to track individuals, and to link to their encounter data over time. A single shared unique identifier must match the identifier used in 837encounter for each consumer. **If the consumer identification number does not have 11 characters, it will cause rejection of a file.**

4. Social Security Number (SSNO)

The nine-digit integer must be recorded, if available.
Blank = Unreported [Leave nine blanks]

***5. Medicaid ID Number (MCIDNO)**

Enter the ten-digit integer for consumers with a Medicaid number, or ABW number, or MICHild number.
Blank = Unreported [Leave ten blanks]

6. Leave blank beginning with FY'06 service reporting

7. Corrections Related Status (CORSTAT)

For persons under the jurisdiction of a corrections or law enforcement program during treatment, indicate the location/jurisdiction involved at the time of annual update

- 1 = In prison
- 2 = In jail
- 3 = Paroled from prison

CMHSP Reporting Requirements

- 4 = Probation from jail
- 5 = Juvenile detention center
- 6 = Court supervision
- 7 = Not under the jurisdiction of a corrections or law enforcement program
- 8 = Awaiting trial
- 9 = Awaiting sentencing
- 10 = Consumer refused to provide information
- 11 = Minor (under age 18) who was referred by the court
- 12 = Arrested and booked
- 13 = Diverted from arrest or booking
- Blank = Unknown

***8. Residential Living Arrangement (RESID) Effective 10/1/07, 95% completeness required**

Indicate the consumer's residential situation or arrangement at the time of intake if it occurred during the reporting period, or at the time of annual update of consumer information during the period. Reporting categories are as follows:

- 1 = Homeless on the street or in a shelter for the homeless
- 2 = Living in a private residence with natural or adoptive family member(s). "Family member" means parent, stepparent, sibling, child, or grandparent of the primary consumer; or an individual upon whom the primary consumer is dependent for at least 50% of his or her financial support.
- 3 = Living in a private residence not owned by the CMHSP or the contracted provider, alone or with spouse or non-relative(s).
- 5 = Foster family home (Include all foster family arrangements regardless of number of beds)
- 6 = Specialized residential home - Includes any adult foster care facility certified to provide a specialized program per DMH Administrative Rules, 3/9/96, R 330.1801 (Include all specialized residential, regardless of number of beds), or a licensed Children's Therapeutic Group Home.
- 8 = General residential home (Include all general residential regardless of number of beds)
"General residential home" means a licensed foster care facility not certified to provide specialized program (per the DMH Administrative Rules)
- 10 = Prison/jail/juvenile detention center
- 11 = Deleted (AIS/MR)
- 12 = Nursing Care Facility
- 13 = Institutional setting (congregate care facility, boarding schools, Child Caring Institutions, state facilities)
- 16 = Living in a private residence that is owned by the PIHP, CMHSP or the contracted provider, alone or with spouse or non-relative
- Blank = Unreported

***9. Total Annual Income (TOTINC)**

Indicate the total amount of gross income of the individual consumer if he/she is single; or that of the consumer and his/her spouse if married; or that of the parent(s) of a minor consumer at the time of service initiation or most recent plan review. "Income" is defined as

CMHSP Reporting Requirements

income that is identified as taxable personal income in section 30 of Act No. 281 of the Public Acts of 1967, as amended, being 206.30 of the Michigan Compiled Laws, and non-taxable income, which can be expected to be available to the individual and spouse not more than 2 years subsequent to the determination of liability.

- 1=Income is below \$10,000
- 2=Income is \$10,001 to \$20,000
- 3=Income is \$20,001 to \$30,000
- 4=Income is \$30,001 to \$40,000
- 5=Income is 40,001 to \$60,000
- 6=Income is more than \$60,000
- Blank = Income was not reported

***10. Number of Dependents (NUMDEP)**

Enter the number of dependents claimed in determining ability-to-pay. "Dependents" means those individuals who are allowed as exemptions pursuant to section 30 of Act No. 281 of the Public Acts of 1967, as amended, being 206.30 of the Michigan Compiled Laws. Single individuals living in an AFC or independently are considered one exemption, therefore enter "1" for number of dependents.

of dependents = _ _ Blank = Unreported

***11. Employment Status (EMPLOY) Effective October 1, 2010**

Indicate current employment status as it relates to principal employment for consumers age 18 and over. Reporting categories are as follows:

- 1 = Employed full time (30 hours or more per week) competitively.
- 2 = Employed part time (less than 30 hours per week) competitively.
- 3 = Unemployed - looking for work, and/or on layoff from job.
- 4= Deleted.
- 5= Deleted.
- 6 = Deleted.
- 7 = Participates in sheltered workshop or facility-based work.
- 8 = Deleted.
- 9 = Deleted
- 10= Deleted.
- 11= In unpaid work (e.g. volunteering, internship, community service).
- 12= Self-employed (e.g. micro-enterprise).
- 13= In enclaves/mobile crews, agency-owned transitional employment.
- 14= Participates in facility-based activity program where an array of specialty supports and services are provided to assist an individual in achieving his/her non-work related goals.
- 15= Not in the competitive labor force-includes homemaker, child, student age 18 and over not working, retired from work, resident of an institution (including nursing home), or incarcerated.

Note: "Competitive employment" is work for which anyone may apply, that occurs in an

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integrated setting, with or without supports, for which the individual is paid at or above minimum wage, but not less than the customary wage and benefit level for all workers in that setting. This status includes persons employed as Peer Support Specialists and Peer Mentors.

12. Education (EDUC)

Indicate the level attained at the time of the most recent admission or annual update. For children attending pre-school that is not special education, use "blank=unreported." Reporting categories are as follows:

- 1 = Completed less than high school
- 2 = Completed special education, high school, or GED
- 3 = In school - Kindergarten through 12th grade
- 4 = In training program
- 6 = In Special Education
- 7 = Attended or is attending undergraduate college
- 8 = College graduate
- Blank = Unreported

13 – 16 Intentionally Left Blank***17. Disability Designation**

Enter yes for all that apply, enter no for all that do not apply. To meet standard at least one field must have a "1."

17.01: Developmental disability (Individual meets the 1996 Mental Health Code Definition of Developmental Disability regardless of whether or not they receive services from the DD or MI services arrays) **(DD)**

- 1 = Yes
- 2 = No
- 3 = Not evaluated

17.02: Mental Illness or Serious Emotional Disturbance (Has DSM-IV diagnosis, exclusive of mental retardation, developmental disability, or substance abuse disorder) **(MI)**

- 1 = Yes
- 2 = No
- 3 = Not evaluated

17.03: Substance Abuse Disorder/SUD (as defined in Section 6107 of the public health code. Act 368 of the Public Health Acts of 1978, being section 333.6107 of the MCL). Indicate the appropriate substance use disorder related status at the time of intake, and subsequently at annual update. **(SA)**.

- 2= No, individual does not have an SUD
- 3= Not evaluated for SUD (e.g., person is an infant, in crisis situation, etc.)
- 4 = Individual has one or more DSM-IV substance use disorder(s), diagnosis codes 291xx, 292xx, 303xx, 304xx, 305xx, with at least one disorder either active or in partial remission (use within past year).
- 5 = Individual has one or more DSM-IV substance use disorder(s), diagnosis codes 291xx, 292xx, 303xx, 304xx, 305xx, and all coded substance use disorders are in full remission (no use for one year). This includes cases where the disorder is in full remission and the consumer is on agonist therapy

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or is in a controlled environment.

6 = Results from a screening or assessment suggest substance use disorder. This includes indications, provisional diagnoses, or "rule-out diagnoses.

17.04: Individual received an assessment only, and was found to meet none of the disabilities listed above (NA)

1= Yes

2= No

18. Reporting element deleted in FY'03-04

Leave blank beginning with FY'04 service reporting

Items 19-24 should be left blank beginning October 1, 2011.

PROXY MEASURES FOR PERSONS WITH DEVELOPMENTAL DISABILITIES

Note: The following 6 elements are proxy measures for level of functioning for people with developmental disabilities. The information is obtained or observed when an individual begins receiving public mental health services for the first time, and/or at the time of annual planning. For purposes of these data elements, "Assistance" means the hands-on help from a paid or un-paid person or technological support needed to enable the individual to achieve the desired future agreed upon during planning. [Note for FY2011: The Improving Oversight Workgroup, a joint committee of MDCH and PIHP representatives, will make recommendations to MDCH for revisions to the proxy measures #19 through #24, and for additional measures that will help the system better identify "vulnerable" people. MDCH will issue requirements, based on the recommendations, by October 1, 2010. PIHPs shall be in compliance with the requirements no later than January 1, 2011.]

***19. Predominant Communication Style (People with developmental disabilities only) (COMSTYLE) 95% completeness and accuracy required**

Indicate from the list below how the individual communicates **most of the time**:

1= English language spoken by the individual

2= Assistive technology used (includes computer, other electronic devices) or symbols such as Bliss board, or other "low tech" communication devices.

3= Interpreter used - this includes a foreign language or sign language interpreter, or someone who knows the consumer well enough to interpret speech or behavior.

4= Alternative language used - this includes a foreign language, or sign language.

Blank= Unreported

***20. Assistance for Independence Needed (People with developmental disabilities only) 95% completeness and accuracy required**

Indicate below all areas of daily living activities in which the individual needs regular, ongoing assistance. It does not include those situations in which the individual is temporarily unable to perform due to a short illness.

20.1 Mobility Assistance includes technology and equipment such as wheelchairs, and/or personal assistance such as help with transferring and transporting. **(MA)**

1= Yes, assistance is needed

2= No, assistance is not needed

Blank =Unreported

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20.2 Medication Administration includes administering, observing or reminding (RX)

1 = Yes, assistance is needed

2 = No, assistance is not needed

Blank = Unreported

20.3 Personal Assistance includes help with bathing, toileting, dressing, grooming, and/or eating (PA)

1 = Yes, assistance is needed

2 = No, assistance is not needed

Blank = Unreported

20.4 Household Assistance includes help with such tasks as cooking, shopping, budgeting, and light housekeeping (HD)

1 = Yes, assistance is needed

2 = No, assistance is not needed

Blank = Unreported

20.5 Community Assistance includes help with transportation, purchasing, and money handling. (CA)

1 = Yes, assistance is needed

2 = No, assistance is not needed

Blank = Unreported

***21. Nature of Support System (People with developmental disabilities only) (NATSUPP) 95% completeness and accuracy required**

Indicate how family and friends are involved with the consumer. "Involved" means consumer gets together with family/friends on a regular basis, for example, monthly or more often.

1 = Family and/or friends are not involved

2 = Family and/or friends are involved, but do not provide assistance

3 = Family and/or friends provide limited assistance, such as intermittent or up to once a month

4 = Family and/or friends provide moderate assistance, such as several times a month up to several times a week

5 = Family and/or friends provide extensive assistance, such as daily assistance to full-time care giving

Blank = Information unavailable

***22. Status of Existing Support System (People with Developmental Disabilities only) (STATSUPP) 95% completeness and accuracy required**

Indicate whether family/friend caregiver status is at risk; including instances of caregiver disability/illness, aging, and/or re-location. "At risk" means is caregiver will likely be unable to continue providing the current level of help, or will cease providing help altogether.

1 = Yes, care giver status is at risk

2 = No, care giver status is not at risk

3 = No care giver is involved

Blank = Unreported or information unavailable

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***23. ~~Health Status (People with developmental disabilities only) 95% completeness and accuracy required~~**

Indicate below all areas in which assistance (personal or technology) is required:

23.1 ~~Vision (requiring accommodations beyond glasses) (VOS)~~

1 = ~~No vision problems, or no assistance needed~~

2 = ~~Limited assistance is needed such as intermittent help up to once a month~~

3 = ~~Moderate assistance is needed such as monthly to several times a week~~

4 = ~~Extensive assistance is needed such as daily to full time help~~

Blank = ~~Unreported~~

23.2 ~~Hearing (requiring accommodations beyond a hearing aid) (HEAR)~~

1 = ~~No hearing problems, or no assistance needed~~

2 = ~~Limited assistance is needed such as intermittent help up to once a month~~

3 = ~~Moderate assistance is needed such as monthly to several times a week~~

4 = ~~Extensive assistance is needed such as daily to full time help~~

Blank = ~~Unreported~~

23.3 ~~Other physical/medical characteristics requiring personal intervention (OTH)~~

1 = ~~No physical/medical characteristics, or no assistance needed~~

2 = ~~Limited assistance is needed such as intermittent help up to once a month~~

3 = ~~Moderate assistance is needed such as monthly to several times a week~~

4 = ~~Extensive assistance is needed such as daily to full time help~~

Blank = ~~Unreported~~

***24. ~~Assistance for Accommodating Challenging Behaviors (People with developmental disabilities only) (BEHAVIOR) 95% completeness and accuracy required~~**

Indicate the level of assistance the consumer needs, if any to accommodate challenging behaviors. "Challenging behaviors" include those that endanger self and/or others to those that prohibit functioning independently in the home or participating in the community.

1 = ~~No challenging behaviors, or no assistance needed~~

2 = ~~Limited assistance needed, such as intermittent help up to once a month~~

3 = ~~Moderate assistance needed, such as monthly to several times a week~~

4 = ~~Extensive assistance needed, such as daily assistance to full time help~~

Blank = ~~Unreported~~

25. *Gender (GENDER)*

Identify consumer as male or female.

M = Male

F = Female

26. *Program Eligibility (PE)

Indicate ALL programs or plans in which the individual is enrolled and/or from which funding is received directly by the individual/family or on his/her/family's behalf.

Every item MUST have a response of "1" or "2" to meet standard.

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26.1 Reporting element deleted in FY'03-04

26.2 Adoption Subsidy (**PE_ASUB**)

1 = Yes

2 = No

26.3 Medicare (**PE_MCARE**)

1 = Yes

2 = No

26.8 Commercial Health Insurance or Service Contract (EAP, HMO) (**PE_COM**)

1 = Yes

2 = No

26.7 SDA, SSI, SSDI (**PE_SSI**)

1 = Yes

2 = No

26.9 Program or plan is not listed above (**PE_OTH**)

1 = Yes

2 = No

26.10 Individual is not enrolled in or eligible for a program or plan (**PE_INELG**)

1 = Yes

2 = No

27. Parental Status (PARSTAT)

Indicate if the consumer (no matter what age) is the natural or adoptive parent of a minor child (under 18 years old)

1 = Yes

2 = No

Blank = Unreported

28. Children Served by Department of Human Services

Indicate whether minor child is enrolled in a DHS program. If the consumer is an adult or if the consumer is a child not enrolled in any of the DHS programs, enter 2=No.

28.01 Child served by DHS for abuse and neglect (FIA_AN)

1 = Yes

2 = No

Blank = Unreported

28.02 Child served by another DHS program (FIA_OT)

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1= Yes

2= No

Blank = Unreported

29. *Children Enrolled in Early On (CHILDEOP)*

Indicate whether minor child is enrolled in the Early On program. If the consumer is an adult or if the consumer is a child not enrolled in the Early On program, enter 2=No.

1= Yes

2= No

Blank = Unreported

30. *Date of birth (DOB)

Date of Birth - Year, month, and day of birth must be recorded in that order. Report in a string of eight characters, no punctuation: YYYYMMDD using leading zeros for days and months when the number is less than 10. For example, January 1, 1945 would be reported as 19450101. Use blank = Unknown

31. *Intentionally Left Blank*

32. *Hispanic (HIS)

Indicate whether the person is Hispanic or Latino or not, or their ethnicity is unknown. Must use one these codes:

1. Hispanic or Latino
2. Not Hispanic or Latino
3. Unknown

33. *Race 1, Race 2, Race3 (RACE1, RACE2, RACE3)

There are three separate fields for race, each one character long. RACE1 is required for individuals with service dates after 9/30/2005. RACE2 and RACE3 are for individuals who report more than one race. Report one race in each field. RACE2 and RACE3 are optional, but please use a blank to hold the place if there is no value for either.

Use these codes:

- a. White - A person having origins in any of the original peoples of Europe
- b. Black or African American - A person having origins in any of the Black racial groups of Africa.
- c. American Indian or Alaskan Native - American Indian, Eskimo, and Aleut, having origins in any of the native peoples of North America
- d. Asian - A person having origins in any of the original peoples of the far East, Southeast Asia, or the Indian subcontinent.
- e. Native Hawaiian or other Pacific Islander
- f. Some other race
- g. Unknown Race
- h. Consumer refused to provide

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***34. Minimum Wage (MINW)**

Indicate if the consumer is currently earning minimum wage or more.

1 = Yes

2 = No

3 = Not Applicable (e.g., person is not working)

Blank = Unreported

35. Beds (BEDS)

Number of beds must be entered when the consumer resides in one of the following living arrangement reported in #8 RESID:

Foster family home (#5)

Specialized residential home (#6)

General residential home (#8)

Institutional setting (#13)

Enter the one character that best represents the number of licensed beds in one of the arrangements listed above. The field will be edited for 1,2,3,4 or blank.

1 = 1- 3 beds

2 = 4 - 6 beds

3 = 7 - 15 beds

4 = 16+ beds

Blank = Unknown or Not Applicable

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HEALTH AND OTHER CONDITIONS FOR ALL POPULATIONS

The following three elements should be collected for all populations. These are conditions that affect all people served by the public mental health system and impact the success of the specialty services and supports they receive. The information is obtained from the individual's record and/or observation. Complete when an individual begins receiving public mental health services for the first time and update at least annually. Information can be gathered as part of the person-centered planning process. PIHPs and CMHSPs should be aware of these conditions and assure that care for them is being provided. MDCH is collecting this data in order to have more complete information about people served by the public mental health system who are more vulnerable.

39. Hearing 95% accuracy and completeness required

39.1: Ability to hear (with hearing appliance normally used) **(HEARING)**

- 1 = Adequate—No difficulty in normal conversation, social interaction, listening to TV
- 2 = Minimal difficulty—Difficulty in some environments (e.g., when person speaks softly or is more than 6 feet away)
- 3 = Moderate difficulty—Problem hearing normal conversation, requires quiet setting to hear well
- 4 = Severe difficulty—Difficulty in all situations (e.g., speaker has to talk loudly or speak very slowly; or person reports that all speech is mumbled)
- 5 = No hearing
- Blank = Missing

39.2: Hearing aid used **(HEAR Aid)**

- 1 = Yes
- 2 = No
- Blank = Missing

40. Vision 95% accuracy and completeness required

40.1: Ability to see in adequate light (with glasses or with other visual appliance normally used) **(VISION)**

- 1 = Adequate—Sees fine detail, including regular print in newspapers/books or small items in pictures
- 2 = Minimal difficulty—Sees large print, but not regular print in newspapers/books or cannot identify large objects in pictures
- 3 = Moderate difficulty—Limited vision; not able to see newspaper headlines or small items in pictures, but can identify objects in his/her environment
- 4 = Severe difficulty—Object identification in question, but the person's eyes appear to follow objects, or the person sees only light, colors, shapes
- 5 = No vision—eyes do not appear to follow objects; absence of sight
- Blank = Missing

40. 2: Visual appliance used **(VISAPP)**

- 1= Yes
- 2 = No

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Blank = Missing

41. Health Conditions 95% accuracy and completeness required

Indicate whether or not the individual had the presence of each of the following health conditions, as reported by the individual, a health care professional or family member, in the past 12 months.

41.1: Pneumonia (2 or more times within past 12 months) – including Aspiration Pneumonia (PNEUM)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.2: Asthma (ASTHMA)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.3: Upper Respiratory Infections (3 or more times within past 12 months) (RESP)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.4: Gastroesophageal Reflux, or GERD (GERD)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.5: Chronic Bowel Impactions (BOWEL)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.6: Seizure disorder or Epilepsy (SEIZURE)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

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months

3 = Treated for the condition within the past 12 months and seizure free

4 = Treated for the condition within the past 12 months, but still experience occasional seizures (less than one per month)

5 = Treated for the condition within the past 12 months, but still experience frequent seizures

6 = Information unavailable

Blank = Missing

41.7: Progressive neurological disease, e.g., Alzheimer's (**NEURO**)

1 = Not present

2 = Treated for the condition within the past 12 months

3 = Information unavailable

Blank = Missing

41.8: Diabetes (**DIABETES**)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for the condition within the past 12 months

4 = Information unavailable

Blank = Missing

41.9: Hypertension (**HYPERTEN**)

1 = Never present

2 = History of condition, but not treated for the condition within the past 12 months

3 = Treated for condition within the past 12 months and blood pressure is stable

4 = Treated for condition within the past 12 months, but blood pressure remains high or unstable

5 = Information is unavailable

Blank = Missing

41.10: Obesity (**OBESITY**)

1 = Not present

2 = Medical diagnosis of obesity present or Body Mass Index (BMI) > 30

Blank = Missing

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PROXY MEASURES FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

The following 11 elements are proxy measures for people with developmental disabilities. The information is obtained from the individual's record and/or observation. Complete when an individual begins receiving public mental health services for the first time and update at least annually. Information can be gathered as part of the person-centered planning process.

For purposes of these data elements, when the term "support" is used, it means support from a paid or un-paid person or technological support needed to enable the individual to achieve his/her desired future. The kinds of support a person might need are:

- *"Limited" means the person can complete approximately 75% or more of the activity without support and the caregiver provides support for approximately 25% or less of the activity.*
- *"Moderate" means the person can complete approximately 50% of the activity and the caregiver supports the other 50%.*
- *"Extensive" means the person can complete approximately 25% of the activity and relies on the caregiver to support 75% of the activity.*
- *"Total" means the person is unable to complete the activity and the caregiver is providing 100% support.*

**42. Predominant Communication Style (People with developmental disabilities only)
(COMTYPE) 95% completeness and accuracy required**

Indicate from the list below how the individual communicates **most of the time**:

- 1 = English language spoken by the individual
- 2 = Assistive technology used (includes computer, other electronic devices) or symbols such as Bliss board, or other "low tech" communication devices.
- 3 = Interpreter used - this includes a foreign language or American Sign Language (ASL) interpreter, or someone who knows the individual well enough to interpret speech or behavior.
- 4 = Alternative language used - this includes a foreign language, or sign language without an interpreter.
- 5 = Non-language forms of communication used – gestures, vocalizations or behavior.
- 6 = No ability to communicate
- Blank = Missing

**43. Ability to Make Self Understood (People with developmental disabilities only) (EXPRESS)
95% completeness and accuracy required.**

Ability to communicate needs, both verbal and non-verbal, to family, friends, or staff

- 1 = Always Understood – Expresses self without difficulty
- 2 = Usually Understood – Difficulty communicating BUT if given time and/or familiarity can be understood, little or no prompting required
- 3 = Often Understood – Difficulty communicating AND prompting usually required
- 4 = Sometimes Understood - Ability is limited to making concrete requests or understood only by a very limited number of people
- 5 = Rarely or Never Understood – Understanding is limited to interpretation of very person-specific sounds or body language
- Blank = Missing

44. Support with Mobility (People with developmental disabilities only) (MOBILITY) 95% completeness and accuracy required

- 1 = Independent - Able to walk (with or without an assistive device) or propel wheelchair and move about
 - 2 = Guidance/Limited Support - Able to walk (with or without an assistive device) or propel wheelchair and move about with guidance, prompting, reminders, stand by support, or with limited physical support.
 - 3 = Moderate Support - May walk very short distances with support but uses wheelchair as primary method of mobility, needs moderate physical support to transfer, move the chair, and/or shift positions in chair or bed
 - 4 = Extensive Support - Uses wheelchair exclusively, needs extensive support to transfer, move the wheelchair, and/or shift positions in chair or bed
 - 5 = Total Support - Uses wheelchair with total support to transfer, move the wheelchair, and/or shift positions or may be unable to sit in a wheelchair; needs total support to shift positions throughout the day
- Blank = Missing

45. Mode of Nutritional Intake (People with developmental disabilities only) (INTAKE) 95% completeness and accuracy required

- 1 = Normal – Swallows all types of foods
 - 2 = Modified independent – e.g., liquid is sipped, takes limited solid food, need for modification may be unknown
 - 3 = Requires diet modification to swallow solid food – e.g., mechanical diet (e.g., purée, minced) or only able to ingest specific foods
 - 4 = Requires modification to swallow liquids – e.g., thickened liquids
 - 5 = Can swallow only puréed solids AND thickened liquids
 - 6 = Combined oral and parenteral or tube feeding
 - 7 = Enteral feeding into stomach – e.g., G-tube or PEG tube
 - 8 = Enteral feeding into jejunum – e.g., J-tube or PEG-J tube
 - 9 = Parenteral feeding only—Includes all types of parenteral feedings, such as total parenteral nutrition (TPN)
- Blank = Missing

46. Support with Personal Care (People with developmental disabilities only) (PERSONAL) 95% completeness and accuracy required.

Ability to complete personal care, including bathing, toileting, hygiene, dressing and grooming tasks, including the amount of help required by another person to assist. This measure is an overall estimation of the person's ability in the category of personal care. If the person requires guidance only for all tasks but bathing, where he or she needs extensive support, score a "2" to reflect the overall average ability. The person may or may not use assistive devices like shower or commode chairs, long-handled brushes, etc. Note: assistance with medication should NOT be included.

- 1 = Independent - Able to complete all personal care tasks without physical support
- 2 = Guidance/Limited Support - Able to perform personal care tasks with guidance, prompting, reminding or with limited physical support for less than 25% of the

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activity

3 = Moderate Physical Support - Able to perform personal care tasks with moderate support of another person

4 = Extensive Support - Able to perform personal care tasks with extensive support of another person

5 = Total Support – Requires full support of another person to complete personal care tasks (unable to participate in tasks)

Blank = Missing

47. Relationships (People with developmental disabilities only) (RELATION) 95% completeness and accuracy required

Indicate whether or not the individual has “natural supports” defined as persons outside of the mental health system involved in his/her life who provide emotional support or companionship.

1 = Extensive involvement, such as daily emotional support/companionship

2 = Moderate involvement, such as several times a month up to several times a week

3 = Limited involvement, such as intermittent or up to once a month

4 = Involved in planning or decision-making, but does not provide emotional support/companionship

5 = No involvement

Blank = Missing

48. Status of Family/Friend Support System (People with developmental disabilities only) (SUPPSYS) 95% completeness and accuracy required

Indicate whether current (unpaid) family/friend caregiver status is at risk in the next 12 months; including instances of caregiver disability/illness, aging, and/or re-location. “At risk” means caregiver will likely be unable to continue providing the current level of help, or will cease providing help altogether but no plan for replacing the caregiver’s help is in place.

1 = Care giver status is not at risk

2 = Care giver is likely to reduce current level of help provided

3 = Care giver is likely to cease providing help altogether

4 = Family/friends do not currently provide care

5 = Information unavailable

Blank = Missing

49. Support for Accommodating Challenging Behaviors (People with developmental disabilities only) (BEHAV) 95% completeness and accuracy required

Indicate the level of support the individual needs, if any, to accommodate challenging behaviors. “Challenging behaviors” include those that are self-injurious, or place others at risk of harm. (Support includes direct line of sight supervision)

1 = No challenging behaviors, or no support needed

2 = Limited Support, such as support up to once a month

3 = Moderate Support, such as support once a week

4 = Extensive Support, such as support several times a week

5 = Total Support – Intermittent, such as support once or twice a day

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6 = Total Support – Continuous, such as full-time support

Blank = Missing

50. Presence of a Behavior Plan (People with developmental disabilities only) (PLAN) 95% accuracy and completeness required

Indicate the presence of a behavior plan during the past 12 months.

1 = No Behavior Plan

2 = Positive Behavior Support Plan or Behavior Treatment Plan without restrictive and/or intrusive techniques requiring review by the Behavior Treatment Plan Review Committee

3 = Behavior Treatment Plan with restrictive and/or intrusive techniques requiring review by the Behavior Treatment Plan Review Committee

Blank = Missing

51. Use of Psychotropic Medications (People with developmental disabilities only) 95% accuracy and completeness required

Fill in the number of anti-psychotic and other psychotropic medications the individual is prescribed. See the codebook for further definition of “anti-psychotic” and “other psychotropic” and a list of the most common medications.

51.1: Number of Anti-Psychotic Medications (**AP**) ____

Blank = Missing

51.2: Number of Other Psychotropic Medications (**OTHPSYCH**) ____

Blank = Missing

52. Major Mental Illness (MMI) Diagnosis (People with developmental disabilities only) 95% accuracy and completeness required

This measure identifies major mental illnesses characterized by psychotic symptoms or severe affective symptoms. Indicate whether or not the individual has one or more of the following major mental illness diagnoses: Schizophrenia, Schizophreniform Disorder, or Schizoaffective Disorder (ICD code 295.xx); Delusional Disorder (ICD code 297.1); Psychotic Disorder NOS (ICD code 298.9); Psychotic Disorder due to a general medical condition (ICD codes 293.81 or 293.82); Dementia with delusions (ICD code 294.42); Bipolar I Disorder (ICD codes 296.0x, 296.4x, 296.5x, 296.6x, or 296.7); or Major Depressive Disorder (ICD codes 296.2x and 296.3x). The ICD code must match the codes provided above. Note: Any digit or no digit at all, may be substituted for each “x” in the codes.

1 = One or more MMI diagnosis present

2 = No MMI diagnosis present

Blank = Missing

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**ENCOUNTERS PER CONSUMER WITH MENTAL ILLNESS, SERIOUS EMOTIONAL DISTURBANCE AND, DEVELOPMENTAL DISABILITY
DATA REPORT**

Due dates: Encounter data are due within 30 days following adjudication of the claim for the service provided, or in the case of a PIHP whose business practices do not include claims payment, within 30 days following the end of the month in which services were delivered. It is expected that encounter data reported will reflect services for which providers were paid (paid claims), third party reimbursed, and/or any services provided directly by the PIHP. Submit the encounter data for an individual on any claims adjudicated, regardless of whether there are still other claims outstanding for the individual for the month in which service was provided. In order that the department can use the encounter data for its federal and state reporting, it must have the count of units of service provided to each consumer during the fiscal year. Therefore, the encounter data for the fiscal year must be reconciled within 90 days of the end of the fiscal year. Claims for the fiscal year that are not yet adjudicated by the end of that period, should be reported as encounters with a monetary amount of "0." Once claims have been adjudicated, a replacement encounter must be submitted.

Encounters per Beneficiary

Encounter data is collected and reported for every beneficiary for which a claim was adjudicated or service rendered during the month by the PIHP (directly or via contract) regardless of payment source or funding stream. Every MH/DD encounter record reported must have a corresponding quality improvement (QI) or demographic record reported at the same time. Failure to report both an encounter record and a QI record for a consumer receiving services will result in contract action. SA encounter records do not require a corresponding quality improvement (QI) or demographic record to be reported by the PIHP. * PIHP's and CMHSPs that contract with another PIHP or CMHSP to provide mental health services should include that consumer in the encounter and QI data sets. In those cases the PIHP or CMHSP that provides the service via a contract should not report the consumer in this data set. Likewise, PIHPs or CMHSPs that contract directly with a Medicaid Health Plan, or sub-contract via another entity that contracts with a Medicaid Health Plan to provide the Medicaid mental health outpatient benefit, should not report the consumer in this data set.

The Health Insurance Portability and Accountability Act (HIPAA) mandates that all consumer level data reported after October 16, 2002 must be compliant with the transaction standards. Version 4010A1 will be used for production transactions submitted through 12/31/2011 and Version 5010 must be used for all transactions submitted 1/1/2012 and after.

A summary of the relevant requirements is:

- Encounter data (service use) is to be submitted electronically on a Health Care Claim 4010A1 or 5010 as appropriate.
- The encounter requires a small set of specific demographic data: gender, diagnosis, Medicaid number, race, and social security number, and name of the consumer.
- Information about the encounter such as provider name and identification number, place of

CMHSP Reporting Requirements

service, and amount paid for the service is required.

- The 837/4010A includes a “header” and “trailer” that allows it to be uploaded to the CHAMPS system.
- The remaining demographic data, in HIPAA parlance called “Quality Improvement” data, shall be submitted in a separate file to CHAMPS and must be accompanied by the required headers and trailers.

The information on HIPAA contained in this contract relates only to the data that MDCH is requiring for its own monitoring and/or reporting purposes, and does not address all aspects of the HIPAA transaction standards with which PIHPs must comply for other business partners (e.g., providers submitting claims, or third party payers). Further information is available at www.michigan.gov/mdch.

Data that is uploaded to CHAMPS must follow the HIPAA-prescribed formats for the 837/4010A1 and 5010 (institutional and professional) and MDCH-prescribed formats for QI data. The 837/4010A1 and 5010 includes header and trailer information that identifies the sender and receiver and the type of information being submitted. If data does not follow the formats, entire files could be rejected by the electronic system.

HIPAA also requires that procedure codes, revenue codes and modifiers approved by the CMS be used for reporting encounters. Those codes are found in the Current Procedural Terminology (CPT) Manual, Fifth Edition, published by the American Medical Association, the Health Care Financing Administration Common Procedure Coding System (HCPCS), the National Drug Codes (NDC), the Code on Dental Procedures and Nomenclature (CDPN), the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), and the Michigan Uniform Billing Manual. The procedure codes in these coding systems require standard units that must be used in reporting on the 837/4010A1 and 5010.

MDCH has produced a code list of covered Medicaid specialty and Habilitation Supports waiver supports and services names (as found in the Medicaid Provider Manual) and the CPT or HCPCS codes/service definition/units as soon as the majority of mental health services have been assigned CPT or HCPCS codes. This code list is available on the MDCH web site.

The following elements reported on the 837/4010A1 and 5010 encounter format will be used by MDCH Quality Management and Planning Division for its federal and state reporting, the Contracts Management Section and the state’s actuary. The items with an ** are required by HIPAA, and when they are absent will result in rejection of a file. Items with an ** must have 100% of values recorded within the acceptable range of values. Failure to meet accuracy standards on these items will result in contract action.

Refer to HIPAA 837 transaction implementation guides for exact location of the elements. Please consult the HIPAA implementation guides, and clarification documents (on MDCH’s web site) for additional elements required of all 837/4010A1 and 5010 encounter formats. The Supplemental Instructions contain field formats and specific instructions on how to submit encounter level data.

*****1.a. PIHP Plan Identification Number (PIHPID)***

CMHSP Reporting Requirements

The MDCH-assigned 7-digit payer identification number must be used to identify the PIHP with all data transactions.

1.b. *CMHSP Plan Identification Number (CMHID)*

The MDCH-assigned 7-digit payer identification number must be used to identify the CMHSP with all mental health and/or developmental disabilities transactions.

1.c. *CA Plan Identification Number (CAID)*

The MDCH-assigned 7-digit payer identification number must be used to identify the Substance Abuse Coordinating Agency with all Substance Abuse data transactions

****2. *Identification Code/Subscriber Primary Identifier (please see the details in the submitter's manual)***

Ten-digit Medicaid number must be entered for a **Medicaid, ABW or MICHild** beneficiary. If the consumer is not a beneficiary, enter the nine-digit **Social Security** number. If consumer has neither a Medicaid number nor a Social Security number, enter the unique identification number assigned by the CMHSP or **CONID**.

****3. *Identification Code/Other Subscriber Primary Identifier (please see the details in the submitter's manual)***

Enter the consumer's unique identification number (**CONID**) assigned by the CMHSP **regardless** of whether it has been used above.

****4. *Date of birth***

Enter the date of birth of the beneficiary/consumer.

****5. *Diagnosis***

Enter the ICD-9 primary diagnosis of the consumer.

****6. *EPSDT***

Enter the specified code indicating the child was referred for specialty services by the EPSDT screening.

****7. *Encounter Data Identifier***

Enter specified code indicating this file is an encounter file.

****8. *Line Counter Assigned Number***

A number that uniquely identifies each of up to 50 service lines per claim.

****9. *Procedure Code***

Enter procedure code from code list for service/support provided. The code list is located on the MDCH web site. Do not use procedure codes that are not on the code list.

10. *Procedure Modifier Code

Enter modifier as required for Habilitation Supports Waiver services provided to enrollees; for Community Living Supports and Personal Care levels of need; for Nursing Home Monitoring; and for evidence-based practices. See Costing per Code List.

CMHSP Reporting Requirements

11. *Monetary Amount:

Enter a value of at least \$1.00.

****12. *Quantity of Service***

Enter the number of units of service provided according to the unit code type. **Only whole numbers should be reported.**

13. *Facility Code*

Enter the specified code for where the service was provided, such as an office, inpatient hospital, etc.

14. *Diagnosis Code Pointer*

Points to the diagnosis code at the claim level that is relevant to the service.

****15. *Date Time Period***

Enter date of service provided (how this is reported depends on whether the Professional, or the Institutional format is used).

FY2012 CMHSP SUB-ELEMENT COST REPORT

This report provides the total service data necessary for MDCH management of CMHSP contracts and reporting to the Legislature. The data set reflects and describes the support activity provided to or on behalf of all consumers receiving services from the CMHSP **regardless of funding stream** (Medicaid, general fund, grant funds, private pay, third party pay, contracts). The new format is presented by procedure code, beginning with facility services reported by revenue code. Most of the activity reported here will also have been reported in the encounter data system. Refer to the Mental Health HCPCS and CPT Code List and the Costing Per Code list on the MDCH web site for cross walk between services and the appropriate codes. Instructions and current electronic templates for reporting will be issued by MDCH six weeks prior to the due date and are also located on the MDCH web site: www.michigan.gov/mdch, click on Mental Health and Substance Abuse, then Reporting Requirements

~~RULES FOR REPORTING ON CMHSP TOTAL SUB-ELEMENT COST REPORT~~

Instructions:

~~I. Total units, cases, and costs per procedure code~~

- ~~a. Enter the number of **units** per procedure code that were provided during the period of this report for each eligibility group—individuals with a developmental disability, adults with mental illness, and children with mental illness. For most of the procedure codes, the total number of units should be consistent with the number of units for that procedure code that were reported to the MDCH warehouse for all consumers. Follow the same rules for reporting units in this report that are followed for reporting encounters. Refer to the Mental Health HCPCS and Revenue Code Chart on the MDCH web site, the Mental Health and Substance Abuse Chapter of the Medicaid Provider Manual (also on the MDCH web site) and the Costing Per Code document issued by MDCH. Report services for Persons with Developmental Disabilities (H), Adults with Mental Illness (I), and Children with Serious Emotional Disturbance (J) in separate columns on the spreadsheet. Note that some procedures are reportable under only one column. An example is out of home prevocational service (T2015) that is only a HSW service.~~
- ~~b. Peer delivered (H0038) has a row for units, costs, and cases that were reported in the encounter data, and a row for peer delivered expenditures (typically drop in center activities) that were **not** captured by encounters data. **Do not** aggregate the units, cases and costs and report in the row for cost only peer delivered. **Do not** combine the costs from either row.~~
- ~~c. Several codes have rows without modifiers as well as rows with modifiers: 90849 (HS modifier used to distinguish when a beneficiary is not present), H2016 and T1020 (TF and TG modifiers used to distinguish levels of support). For T1017, SE modifier is used to distinguish between targeted case management and case management provided in a nursing home. It is important that the appropriate number of units, cases and costs are entered into the correct rows for these~~

procedures. ~~Do not~~ aggregate the units, cases and costs for the modified procedures into one row.

- ~~d. A row for residential room and board has been added. If room and board is reported as encounters (S9976) to the warehouse, enter the cases, units, and costs here. If room and board was not reported as encounters, report it in Row VI, "Other."~~
- ~~e. A row for pharmacy has been added to report drugs, including injectibles, and other biologicals. Do not report "enhanced pharmacy" cases and costs in this row.~~
- ~~f. A row for "other" has been added to report other procedure codes that are not included in the rows above. These are typically non-mental health activities provided to individual consumers for which CMHSPs use general funds.~~
- ~~g. Enter the **unique number of cases** per procedure code. This number should reflect the unduplicated number of consumers who were provided the service during the reporting period. Record case, unit, and costs under "Column J" if the child has a mental illness and is less than age 18 on the last day of the reporting period.~~
- ~~h. Enter the **total expenditures** per procedure code (see exclusions below) by each population group.~~

II. Prevention—Indirect Service Model

- ~~a. In row II, column K, enter the total expenditures (staff, facility, equipment, staff travel, contract services, supplies and materials) for indirect prevention activities.~~

III. SA Managed Care Administration

- ~~a. Cost of managed care administration performed by the CMHSP for the substance abuse benefit, if the CMHSP is a PIHP. CMHSP affiliates report 0. If the CMHSP performs non-Medicaid managed care administrative functions for the CA, the CMHSP should report that expense here.~~
- ~~b. Refer to the document entitled "Establishing Managed Care Administrative Costs" (revised January 2010) for determining the administrative costs to be entered in row III, column K of this report.~~

IV. MH/DD Medicaid Managed Care Administration Costs: Enter in column K the expenditures for the Medicaid managed care functions that were performed by the CMHSP that is a PIHP. Do not include expenditures for functions that were delegated to affiliates. Affiliate CMHSPs report 0 in column K

V. Managed Care Administration MH/DD

Enter in column K the total expenditures for managed care administration performed by the CMHSP for all its services. For affiliates this includes delegated Medicaid managed care administration and includes non-Medicaid managed care administration. In those instances where the PIHP also provides administrative service organization activities for the affiliates for non-Medicaid services, the

~~VI. All Other Costs:~~ In column K report all other costs: room and board, MRS cash match, labs, and pharmacy not already reported in any procedure codes. Please provide an itemized listing of “all other costs” in the Comments box.

~~VII. Total MH/DD Cases and Costs:~~ Enter in the appropriate columns the unduplicated number of cases and costs for each population group.

Grand Total Expenditures: formula in cell will automatically calculate the sum of all costs included in this report.

Exclusions

The following expenditures ~~must be excluded~~ from the CMHSP Sub-Element Cost Report:

- ~~1. Room and board costs should be excluded from all rows except VI. “All Other”~~
- ~~2. Local contribution to Medicaid~~
- ~~3. Payments made into internal service funds (ISFs) or risk pools.~~
- ~~4. Provider of administrative service organization (ASO) services to other entities, including PIHP/hub ASO activities provided to CMHSP affiliates/spokes for non-Medicaid services~~
- ~~5. Write-offs for prior years~~
- ~~6. Substance Abuse services provided by the CMHSP under provider contract with CAs (these show up in the report from the CA)~~
- ~~7. Workshop production costs (these costs should be offset by income for the products).~~
- ~~8. Medicare payments for inpatient days (where CMHSP has no financial responsibility)~~
- ~~9. Services provided in the Center for Forensic Psychiatry~~
- ~~10. Mental health services paid for by health plan (MHP) contracts.~~

Additional Issues

- ~~1. Include costs and services that were funded by previous fiscal year savings or carry-forward or by funds pulled **out** of the ISFs.~~
- ~~2. Include cases, units and costs for Children’s Waiver~~
- ~~3. Include costs and services for persons with co-occurring conditions where revenues were used by the CMHSP to purchase or provide such services using funds that were **not** paid to the CA.~~
- ~~4. Report services and costs that match the accrual assumptions for fee for service activities where an end-of-year financial accrual is made for services incurred but where a claim has not been processed. (i.e., report cases, units, and costs for services rendered, but those whose claims have not been adjudicated by the time of report).~~
- ~~5. Assume that the CAs are providing a Total service use/cost report~~
- ~~6. If services are provided by a CMHSP to another CMHSP/PIHP through an earned~~

- contract, the COFR CMHSP should report these costs, NOT the providing CMHSP
- ~~7. If services were delivered by the CMHSP, but paid for by a Medicaid Health Plan, do not report on the sub-element table.~~
 - ~~8. Spend down is captured separately on the Medicaid Utilization and Net Cost Report but does not need to be separated on this report.~~
 - ~~9. Report on separate rows in this report:~~
 - ~~*Community Psychiatric Inpatient~~
 - ~~*Inpatient in a community institution for mental disease (IMD)~~
 - ~~*ICF-MR (Mt. Pleasant)~~
 - ~~*State Psychiatric Hospitals (includes those persons at Mt. Pleasant who are not ICF-MR eligible)~~

**MICHIGAN MISSION-BASED PERFORMANCE INDICATOR SYSTEM
VERSION 6.0
FOR CMHSPS**

The Michigan Mission Based Performance Indicator System (version 1.0) was first implemented in FY'97. That original set of indicators reflected nine months of work by more than 90 consumers, advocates, CMHSP staff, MDCH staff and others. The original purposes for the development of the system remain. Those purposes include:

- To clearly delineate the dimensions of quality that must be addressed by the Public Mental Health System as reflected in the Mission statements from Delivering the Promise and the needs and concerns expressed by consumers and the citizens of Michigan. Those domains are: ACCESS, EFFICIENCY, and OUTCOME.
- To develop a state-wide aggregate status report to address issues of public accountability for the public mental health system (including appropriation boilerplate requirements of the legislature, legal commitments under the Michigan Mental Health Code, etc.)
- To provide a data-based mechanism to assist MDCH in the management of PIHP contracts that would impact the quality of the service delivery system statewide.
- To the extent possible, facilitate the development and implementation of local quality improvement systems; and
- To link with existing health care planning efforts and to establish a foundation for future quality improvement monitoring within a managed health care system for the consumers of public mental health services in the state of Michigan.

All of the indicators here are measures of CMHSP performance, rather than affiliation performance. Therefore these performance indicators should be reported by the CMHSP. Medicaid beneficiaries who are not receiving specialty services and supports (1915(b)(c) waivers) but are provided outpatient services through contracts with Medicaid Health Plans, or sub-contracts with entities that contract with Medicaid Health Plans are not covered by the performance indicator requirements. Due dates for indicators vary and can be found on the table following the list of indicators. Instructions and reporting tables are located in the "Michigan's Mission-Based Performance Indicator System Codebook, revised located on the MDCH web site: www.michigan.gov/mdch , click on Mental Health and Substance Abuse, then Reporting Requirements. Electronic templates for reporting will be issued by MDCH six weeks prior to the due date and are also on the web site

**MICHIGAN MISSION-BASED PERFORMANCE INDICATOR SYSTEM, VERSION 6.0
FOR CMHSPS****ACCESS**

1. The percent of all adults and children receiving a pre-admission screening for psychiatric inpatient care for whom the disposition was completed within three hours. **Standard = 95% in three hours**
2. The percent of new persons receiving a face-to-face meeting with a professional within 14 calendar days of a non-emergency request for service (MI adults, MI children, DD adults, and DD children). **Standard = 95% in 14 days**
3. The percent of new persons starting any needed on-going service within 14 days of a non-emergent assessment with a professional. (MI adults, MI children, DD adults and DD children) **Standard = 95% in 14 days**
4. The percent of discharges from a psychiatric inpatient unit who are seen for follow-up care within seven days. (All children and all adults -MI, DD). **Standard=95%**
5. The percent of face-to-face assessments with professionals that result in decisions to deny CMHSP services. (MI and DD)
6. The percent of Section 705 second opinions that result in services. (MI and DD)

EFFICIENCY

7. The percent of total expenditures spent on administrative functions for CMHSPs.

OUTCOMES

8. The percent of adults with mental illness and the percent of adults with developmental disabilities served by CMHSP who are in competitive employment.

Adult Consumers with Serious Mental Illness:

- For CMHSPs with a three-year average of 15% or less of total persons served in competitive employment, an increase of 7% of the base number over the last year.
- For CMHSP with a three-year average of more than 15%, but less than 20% of total persons served in competitive employment, an increase of 5% of the base number over the last year.
- For CMHSPs with a three-year average of 20% or more of total persons service who are in competitive employment, an increase of 3% of the base number over the last year.

Adult Consumers with Developmental Disabilities:

- For CMHSPs with a three-year average of 10% or less of total persons served in competitive employment, an increase of 7% of the base number over the last year.
- For CMHSPs with a three-year average of more than 10%, but less than 15% of total

persons served in competitive employment, an increase of 5% of the base number over the last year.

- For CMHSPs with a three-year average of more than 15%, but less than 25% of total persons served in competitive employment, an increase of 3% of the base number over the last year.
- For CMHSPs with a three-year average of 25% or more of total persons served who are in competitive employment, an increase of 2% of the base number over the last year.

Adult Consumers with Dual Diagnosis (MI/DD)

- For CMHSPs with a three-year average of 8% or less of total persons served in competitive employment, an increase of 7% of the base number over the last year.
- For CMHSPs with a three-year average of more than 8%, but less than 16% of total persons served in competitive employment, an increase of 5% of the base number over the last year.
- For CMHSPs with a three-year average of 16%, but less than 30% of total persons served who are in competitive employment, an increase of 3% of the base number over the last year.
- For CMHSPs with a three-year average of 30% or more of total persons served who are in competitive employment, an increase of 2% of the base number over the last year.

A minimum increase of one or more persons competitively employed will be expected when numbers are less than ten.

9. The percent of adults with mental illness and the percent of adults with developmental disabilities served by the CMHSP who earn state minimum wage or more from employment activities (competitive, self employment, or sheltered workshop).
10. The percent of MI and DD children and adults readmitted to an inpatient psychiatric unit within 30 days of discharge. **Standard = 15% or less within 30 days**
11. The annual number of substantiated recipient rights complaints per thousand persons served with MI and with DD served, in the categories of Abuse I and II, and Neglect I and II.
12. The number of suicides per thousand persons served (MI, DD).
13. The percent of adults with developmental disabilities served, who live in a private residence alone, or with spouse, or non-relatives.
14. The percent of adults with serious mental illness served, who live in a private residence alone, or with spouse, or non-relatives
15. The percent of children with developmental disabilities (excluding children in the

Children's Waiver Program) served, who received at least one service (excluding case management and respite) each month of the quarter.

PIHP PERFORMANCE INDICATOR REPORTING DUE DATES

Indicator Title	Period	Due	Period	Due	Period	Due	Period	Due	From
1. Pre-admission screen	10/01 to 12/31	3/31	1/01 to 3/31	6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
2. 1 st request	10/01 to 12/31	3/31	1/01 to 3/31	6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
3. 1 st service	10/01 to 12/31	3/31	1/01 to 3/31	6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
4. Follow-up	10/01 to 12/31	3/31	1/01 to 3/31	6/01 6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
5. Denials	10/01 to 12/31	3/31	1/01 to 3/31	6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
6. 2 nd Opinions	10/01 to 12/31	3/31	1/01 to 3/31	6/30	4/01 to 6/30	9/30	7/01 to 9/30	12/31	CMHSPs
7. Admin. Costs*	10/01 to 9/30	1/31							MDCH
8. Competitive employment*	10/01 to 9/30								MDCH
9. Minimum wage*	10/01 to 9/30								MDCH
10. Readmissions	10/01 to 9/30	3/31	1/01 to 3/31	6/30	4-01 to 6-30	9/30	7/01 to 9/30	12/31	CMHSPs
11. RR complaints	10/01 to 9/30	12/31							CMHSPs
12. Suicides	10/01 to 3/31	12/31							MDCH
13. DD living in private residence*	10/01 to 9/30								MDCH
14. SMI living in private residence*	10/01 to 9/30								MDCH
15. Children with DD services*	10/01 to 9/30								MDCH

*Indicators with * mean MDCH collects data from encounters, quality improvement or cost reports and calculates performance indicators

STATE LEVEL DATA COLLECTION

Change for CAFAS Reporting effective 10/1/10:

Child and Adolescent Functional Assessment Scale (CAFAS) shall be performed for each child with serious emotional disturbance at intake, quarterly thereafter, and at exit. Scale scores shall be exported using the FAS Outcomes application in xml format. In order that the scores along with de-identified data are automatically sent to the Eastern Michigan University Level of Functioning (LOF) Project, the CMHSP must assure the research box remains checked. MDCH uses aggregate reports from the LOF Project for internal planning and decision-making. In FY'11 MDCH will cover 50% of the FAS Outcomes annual licensing fee of \$400 per CMHSP, and 50% of the per usage fee of \$2.95.

Annually each CMHSP shall submit an aggregate CAFAS report to MDCH. The report is automatically generated by the FAS Outcomes program. **Methodology and instructions for submitting the reports are posted on the MDCH web site at www.michigan.gov/mdch. Click on Mental Health and Substance Abuse, then on "Reporting Requirements."**

Critical Incident Reporting effective 10/1/10

PIHPs will report the following events, except Suicide, within 60 days after the end of the month in which the event occurred for individuals actively receiving services, with individual level data on consumer ID, event date, and event type:

- **Suicide** for any individual actively receiving services at the time of death, and any who have received an emergency services within 30 days prior to death. Once it has been determined whether or not a death was suicide, the suicide must be reported within 30 days after the end of the month in which the death was determined. If 90 calendar days have elapsed without a determination of cause of death, the PIHP must submit a "best judgment" determination of whether the death was a suicide. In this event the time frame described in "a" above shall be followed, with the submission due within 30 days after the end of the month in which this "best judgment" determination occurred.
- **Non-suicide death** for individuals who were actively receiving services and were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution; or were receiving community living supports, supports coordination, targeted case management, ACT, Home-based, Wraparound, Habilitation Supports Waiver, SED waiver or Children's Waiver services. If reporting is delayed because the PIHP is determining whether the death was due to suicide, the submission is due within 30 days after the end of the month in which the PIHP determined the death was not due to suicide.
- **Emergency Medical treatment due to Injury or Medication Error** for people who at the time of the event were actively receiving services and were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution; or were receiving either Habilitation Supports Waiver services, SED Waiver services or Children's Waiver services.
- **Hospitalization due to Injury or Medication Error** for individuals who living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-

Caring institution; or receiving Habilitation Supports Waiver services, SED Waiver services, or Children's Waiver services.

- **Arrest of Consumer** for individuals who living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution; or receiving Habilitation Supports Waiver services, SED Waiver services, or Children's Waiver services.

Methodology and instructions for reporting are posted on the MDCH web site at www.michigan.gov/mdch. Click on Mental Health and Substance Abuse, then "Reporting Requirements."

FY 2012 RECIPIENT RIGHTS DATA REPORT

INSTRUCTIONS FOR COMPLETING THE RECIPIENT RIGHTS DATA REPORT

Use the CURRENT (DCH 0046 REV03/2010) excel form and email the report. The annual report letter can be sent by USPS or a signed PDF copy can be sent via email. The semi annual report memo can be sent by email

Demographic Data

THIS SECTION IS REQUIRED FOR THE ANNUAL REPORT ONLY

FTE's are defined as hours paid for recipient rights functions. For example if a patient advocate/recipient rights advisor splits their time, and only .4 FTE is for recipient rights, put only .4. You may also list this as hours per week. Explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers. This will appear as the first tab "demographics" in the report.

CMHSPs will report:

- Geographic Area: _____ sq. mi (One time-completed by DCH)
- Number of Consumers Served (unduplicated count):
- Number of Service Sites:
 - Program Site: Out Patient; Residential MI; Residential DD; Inpatient; Day Program MI; Day Program DD; Workshop (prevocational); Supported Employment; ACT; Case Management; Psychosocial Rehab; Partial Hospitalization; SIP; Other
- In Catchment Area; Out of Catchment; Site Visit Required
- Total Number of Service Sites that Require Site Visits:
- Total Number of Site Visits Conducted:
- Number of Rights FTEs*: Explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers
- Number of Complainants (unduplicated count):

LPH/Us will report:

- Number of Patient Days (completed by DCH-BHS)
- Populations Served:
- Number of Rights FTEs*: Explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers
 - Number of Complainants (unduplicated count)

State Facilities will report:

- Number of Patient Days:
- Populations Served:
- Number of Rights FTEs*: Explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers
- Number of Complainants (unduplicated count):

FY 2011 RECIPIENT RIGHTS DATA REPORT

Section 1: Complaint Data Summary

⇒ *THIS SECTION IS REQUIRED TO BE COMPLETED) FOR THE ANNUAL REPORT AND SEMI-ANNUAL REPORT*

Part A: Totals

Complaints Received: Enter the total number of complaints received for the reporting period.
Allegations Involved: Some complaints contain more than 1 allegation. The allegation number will fill in as Allegations Substantiated: enter the numbers of “received” column. Allegations substantiated will also fill in as you fill in the report columns.
Complaint Source: Enter the category of the complainant: Recipient; Staff; ORR; Guardian/ Family; Anonymous; Community/General Public; Total. The total of “Complaint Sources” must be the same as the “Complaints Received”.

Part A: Totals Complaint Source: Please enter 1 complaint source for each complaint (NOT ALLEGATION). This should match the number of complaints in the section above.

Recipient	0
Staff	
ORR	
Guardian/Family	
Anonymous	
Community/General Public	
Total	0

(this will self-fill & should = C14)

Timeframes of Completed Investigations: The total in this section will self-fill. Fill in the timeframe to complete each investigation (not including any time following submission to the director).

	Total	≤30	≤60	≤90	>90
Abuse/Neglect					
All others					

Part B: Aggregate Summary of Allegations By Category

For each sub-category enter the following:

- Number of allegations received
- Number of these **investigated** *
- Number of these in which some **intervention** ** was conducted

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- Number of allegations substantiated by investigation.
- Number of allegations substantiated by intervention.

In each subcategory: If “0”, enter 0 in ALL appropriate boxes of the row where an allegation is received

- The recipient population for targeted allegations (beginning FY 08-09); adult MI (MI), Developmental Disability (DD), Seriously Emotionally Disturbed (SED)

*** Investigation:** A detailed inquiry into, and systematic examination of, an allegation raised in a rights complaint and reported in accordance with Chapter 7A, Report of Investigative Findings.

****Intervention:** To act on behalf of a recipient to resolve a complaint alleging a violation of a code protected right when the facts are clear and the remedy, if applicable, is clear, easily obtainable and does not involve statutorily required disciplinary action.

**Interventions are not allowed in allegations of abuse, neglect, serious injury, or death of a recipient involving an apparent or suspected rights violation or retaliation/harassment.*

The semi-annual report has a “pending” column, to account for cases that are still open. If any cases are unfinished during the completion of the annual report, that information should be shared with the Advisory Committee at the time of the report review, but added to the report as the data is finalized, prior to the December 30 deadline for submission to the department. It is not required that the entire report be re-presented to the Advisory Committee.

Part C: Remediation of Substantiated Rights Violations:

For each allegation, which, through investigation **or intervention**, it was established that a recipient's right was violated indicate:

- The category and specific allegation
- The number of the type of Provider (see table)
- The number of the type of remedial action taken
- The number of the type of population

Provider	Type	Remedial Action	Type
Outpatient	01	Verbal Counseling	01
Residential MI	02	Written Counseling	02
Residential DD	03	Written Reprimand	03
Inpatient	04	Suspension	04
Day Program MI	05	Demotion	05
Day Program DD	06	Staff Transfer	06
Workshop (Prevocational)	07	Training	07
Supported Employment	08	Employment Termination	8
ACT	09	Employee left the agency, but substantiated allegation	*08
Case Management	10	Contract Action	09

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Psychosocial Rehabilitation	11	Policy Revision/Development	10
Partial Hospitalization	12	Environmental Repair/Enhancement	11
SIP	13	Plan of Service Revision	12
Other	14	Recipient Transfer to Another Provider/Site	13
		Other	14

Population
MI
DD
SED
SEDW
DD-CWP
HSW
ABW

SEDW

This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with serious emotional disturbance. This waiver is administered through Community Mental Health Services Programs (CMHSPs) in partnership with other community agencies and is available in a limited number of counties. Eligible consumers must meet current MDCH contract criteria for the state psychiatric hospital for children and demonstrate serious functional limitations that impair the child's ability to function in the community.

DD- CWP

This is a 1915(c) waiver (Home and Community-Based Services Waiver) for children with developmental disabilities who have challenging behaviors and/or complex medical needs. This waiver is administered through Community Mental Health Services Programs (CMHSPs) and is available statewide. Eligible consumers must be eligible for, and at risk of, placement in an Intermediate Care Facility for the Mentally Retarded (ICF/MR).

HSW

The Habilitation Supports Waiver is a 1915(c) waiver (Home and Community-Based Services Waiver) for people who have developmental disabilities and who meet the eligibility requirements: have active Medicaid, live in the community, and otherwise need the level of services provided by an intermediate care facility for mental retardation (ICF/MR) if not for the HSW. There are no age limitations for enrollment in the HSW. This waiver is administered through Prepaid Inpatient Health Plans (PIHPs) and affiliate Community Mental Health Services Programs (CMHSPs). The HSW is available statewide.

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ABW

The Adult Benefits Waiver provides basic health insurance coverage to residents of the State of

Michigan with countable incomes at or below 35% of the federal poverty level.

Example:

Part C: Remediation of Substantiated Rights Violations (includes complaints investigated and those addressed through other interventions) Identify service sites & remedial action. If you have more than one action it should all be placed in 1 box with the lower number first. List the number of recipients in each population involved:										
				population						
				waiver populations						
Code (from Section I)	Category (from Section I)	Specific Provider Type (number only)	Specific Remedial Action Type (number only)	MI	DD	SED	SED-W	DD- CWP	HSW	ABW
72225	abuse class II - exploitation	03	04	1						

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THE FOLLOWING SECTION IS REQUIRED FOR THE ANNUAL REPORT ONLY

Section II: Training Activity

Part A: Training Received by Rights Office Staff

Indicate, for each rights staff, the kind of rights related training received during the period and the number of hours for each.

Part B: Training Provided by Rights Office

Indicate if update training is required. If it is required, indicate how often.

Indicate the kind of training provided during the period, the number of hours for each, the number of CMH or Hospital Staff involved, the number of contractual staff involved, the number and type of other staff involved, and the number of consumers trained. Beginning in 2008, indicate the type of training provided:

<i>Method of Training</i>	
01	<i>Face-to-Face</i>
02	<i>Video</i>
03	<i>Computer</i>
04	<i>Paper</i>
05	<i>training includes face to face follow up</i>
14	<i>Other (please describe)</i>

Topic	# Hours	# Agency Staff	# Contractual Staff	# and Type Other Staff	# of Consumers	Method of Training
-------	---------	----------------	---------------------	------------------------	----------------	--------------------

If the training is conducted by someone else, indicate, in addition to the aforementioned information, the date the training was reviewed by the rights office.

Section III: Desired Outcomes for the Office

List the outcomes establish for the office from the last fiscal year (from last year's report) and progress made on each.

List the outcomes establish for the office during the next fiscal year.

Section IV: Recommendations to the CMHSP Board or LPH Governing Board

List any recommendations made to the governing Board regarding the rights office or recipient rights activity as part of the annual report.

Be sure to include issues identified by the Advisory Committee throughout the year or discussed as part of the annual and semi-annual report review.

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LPH/Us are to include ALL data regarding complaints on the Annual & Semi-Annual Reports.

LPH/Us must fill out one Annual report for each facility.

CMHSPs are NOT to include LPH/U data on the Annual & Semi-Annual Reports

REPORT DATES:

Semi-Annual

October 1 through March 31

Section I

Cover letter from Rights Office

To “the department” & Advisory Committee

Due at MDCH: April 30

Annual

October 1 through September 30

Section, I, II, III, IV

Cover Letter from Executive Director or Hospital Director

To “the department” & Board of CMHSP or governing board of licensed hospital

Due at MDCH: December 30

Demographic Data

CMHSP:

Geographic Area: _____ sq. mi (One time- completed by DCH)

Number of Consumers Served (unduplicated count): _____

Number of Service Sites:

Program Type/Site	In Catchment Area	Out of Catchment	Site Visit Required
Out Patient			
Residential MI			
Residential DD			
Inpatient			
Day Program MI			
Day Program DD			
Workshop (prevocational)			
Supported Employment			
ACT			
Case Management			
Psychosocial Rehab			
Partial Hospitalization			
SIP			
Other			

Total Number of Service Sites that Require Site Visits: _____

Total Number of Site Visits Conducted: _____

Number of Rights FTEs*: _____

Please explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers

Number of Complainants (unduplicated count):

:-

LPH/U:

Number of Patient Days: _____ (by DCH-BHS)

Populations Served: _____

Number of Rights FTEs*: _____

Please explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers

**Number of Complainants
(unduplicated count):**

State Facility:

Number of Patient Days: _____

Populations Served: _____

Number of Rights FTEs*: _____

Please explain the breakdown of staff (if there is one); investigators/administrators, clerical/support, trainers

Number of Complainants (unduplicated count):

:-

Michigan Department of Community Health Recipient Rights Data Report

Agency: _____

CMHSP's: Indicate DCH assigned two-digit CMHSP Board Number: _____

Officer: _____

Reporting Period: 10/1/2009 to 9/30/2010

☒ Annual

☐ Semi-Annual

Section I: *Complaint Data Summary:*

Part A: Totals

Allegations Involved	407
Allegations Investigated	67
Interventions Substantiated	11
Investigations Substantiated	21

Complaint Source

Recipient	
Staff	
ORR	
Guardian/Family	
Anonymous	
Community/General Public	
Total	0

(this will self-fill & should = C14)

Timeframes of Completed Investigations

	Total	≤30	≤60	≤90	>90
Abuse/Neglect	0	0	0	0	0
All others	0	0	0	0	0

Part B: Aggregate Summary

1. Freedom from Abuse

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
72210	abuse class I								
72221	abuse class II - nonaccidental act								
72222	abuse class II - unreasonable force								
72223	abuse class II - emotional harm								
72224	abuse class II - treating as incompetent								
72225	abuse class II - exploitation								
72230	abuse class III								
72240	abuse class I - sexual abuse								

2. Freedom from Neglect

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
72251	neglect class I								
72252	neglect class I - failure to report								
72261	neglect class II								
72262	neglect class II - failure to report								
72271	neglect class III								
72272	neglect class III - failure to report								

3. Rights Protection System

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7060	notice/explanation of rights								
7520	failure to report								
7545	retaliation/harassment								
7760	access to rights system								
7780	complaint investigation process								
7840	appeal process/mediation								

4. Admission/Discharge/Second Opinion

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
4090	second opinion - denial of hospitalization								
4190	termination of voluntary hospitalization (adult)								
4510	court hearing/process								
4630	independent clinical examination								
4980	objection to hospitalization (minor)								
7050	second opinion - denial of services								

5. Civil Rights

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7041	civil rights: discrimination, accessibility, accommodation, etc								
7044	religious practice								
7045	voting								
7047	presumption of competency								
7284	search/seizure								

6. Family Rights

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7111	family dignity & respect								
7112	receipt of general education information								
7113	opportunity to provide information								

7. Communication & Visits

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7261	visits								
7262	contact with attorneys or others regarding legal matters								
7263	access to telephone, mail								
7264	usage								
7265	written and posted limitations, if established								
7266	uncensored mail								

8. Confidentiality/Privileged Communications/Disclosure

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7481	disclosure of confidential information								
7485	withholding of information (includes recipient access to records)								
7486	correction of record								
7487	access by p & a to records								
7501	privileged communication								

9. Treatment Environment

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7081	safe environment								
7082	sanitary/ humane environment								
7086	least restrictive setting								

10. Freedom of Movement

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7441	restrictions/limitations								
7400	restraint								
7420	seclusion								

11. Financial Rights

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7301	safeguarding money								
7302	facility account								
7303	easy access to money in account								

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7304	ability to spend or use as desired								
7305	delivery of money upon release								
7360	labor & compensation								

12. Personal Property

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7267	access to entertainment materials, information, news								
7281	possession and use								
7281	possession and use								
7282	storage space								
7283	inspection at reasonable times								
7285	exclusions								
7286	limitations								
7287	receipts to recipient and to designated individual								
7288	waiver								
7289	protection								

13. Suitable Services

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
1708	dignity & respect								
7003	informed consent								
7029	information on family planning								
7049	treatment by spiritual means								
7080	mh services suited to condition								
7100	Physical and mental exams								
7130	choice of physician/mental health professional								
7140	notice of clinical status/progress								
7150	services of mental health professional								
7160	surgery								
7170	electro convulsive therapy (ect)								
7180	psychotropic drugs								
7190	notice of medication side effects								

14. Treatment Planning

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7121	person-centered process								
7122	timely development								
7123	requests for review								
7124	participation by individual(s) of choice								
7125	assessment of needs								

**MDCH/CMHSP MANAGED MENTAL HEALTH SUPPORTS AND SERVICES CONTRACT: ATTACHMENT C 6.5.1.1 - 10/01/10
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15. Photographs, Fingerprints, Audiotapes, One-way Glass

Code	Category	Received	Investigation	Intervention	Interventions Substantiated	Investigations Substantiated	Recipient Population		
							MI	DD	SED
7241	prior consent								
7242	identification								
7243	objection								
7244	release to others/return								
7245	storage/destruction								

17. No Right Involved

Code	Category	Received
0000	no right involved	

insert the same number



18. Outside Provider Jurisdiction

Code	Category	Received
0001	outside provider jurisdiction	

insert the same number



0 0 0 0 0 0 0 0

Part C: Remediation of Substantiated Rights Violations (includes complaints investigated and those addressed through other interventions) Identify service sites & remedial action. If you have more than one action it should all be placed in 1 box with the lower number first. List the number of recipients in each population involved:

				population						
				waiver populations						
Code (from Section I)	Category (from Section I)	Specific Provider Type (number only)	Specific Remedial Action Type (number only)	MI	DD	SED	SED-W	DD-CWP	HSW	ABW

SECTION II: TRAINING ACTIVITY

Part A: Training Received by Office Staff

Staff Name	Topic	# Hours

SECTION II: TRAINING ACTIVITY

Part B: Training Provided by Rights Office

Is Update Training Required? _____ Yes No						
If Yes, how often: (Annual, Every 2 years, etc.)						
Topic	# Hours	# Agency Staff	# Contractual Staff	# and Type Other Staff	# of Consumers	Method of Training

SECTION III: DESIRED OUTCOMES FOR THE OFFICE & PROGRESS OF PREVIOUS OUTCOMES

Progress on Outcomes established by the office for FY 05/06

1.

☐ Accomplished
☐ Ongoing
2.

☐ Accomplished
☐ Ongoing

Outcomes established by the office for FY 06/07:

1.
2.

SECTION IV: RECOMMENDATIONS TO THE GOVERNING BOARD

The Advisory Committee recommends the following:

1.

2.

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