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News

Macomb County Executive
Mark A. Hackel



Community Mental Health Services

For Immediate Release

Media Contact: Kevin Sadaj (248) 417-0545, kevin.sadaj@mccmh.net Date: May 4, 2017

Macomb Mental Health issues urgent call to action

Macomb County Community Mental Health (MCCMH) has released an urgent call to action asking its partners, supporters and the community to contact their Michigan House and Senate members expressing concerns for plans that aim to dismantle Prepaid Inpatient Health Plans (PIHP) in Michigan by 2020.

The legislation would take away MCCMH's role of contracting with local mental health and substance abuse providers on the basis of prepaid capitation payments (Medicaid funds).

"MCCMH would still exist as a designated Community Mental Health services provider for direct specialty services and general funds to cover services for the priority population but would no longer have administrative oversight of the Medicaid funds," said John Kinch, executive director of MCCMH. "Our role would be lessened, and our ability to be more cost effective and have greater quality outcomes than HMOs would be lost."

The Michigan Legislature recently released its 2018 budget recommendations, which if passed, would effectively begin the process of ending MCCMH's status as one of Michigan's 10 PIHPs. PIHPs provide services to enrollees under contract with the state Medicaid agency on the basis of prepaid Medicaid payments.

The Senate budget subcommittee included a sentence (Section 234) in its Senate Bill 135 stating the goal is to have Medicaid HMOs in control of all publicly-funded mental health-related services and supports by 2020.

The House budget committee had an amendment that passed on a partisan vote that called for up to three pilot projects that use a single contract between the state and private HMOs.

"We want to let our lawmakers know how important Community Mental Health is and prevent privatization of public dollars, which we are philosophically against," said Kinch. "More importantly, we know our consumers, we have a history of helping them, and we have low administration fees."

MCCMH asks the community to contact its representatives by May 12 when the conference committee process will begin in Lansing.

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Background Information

- The Section 298 workgroup process was fair and objective and reflected the voices of thousands of consumers. Section 234 ignores that process.
- Section 234 does nothing to lower costs, provide better care or improve health outcomes for vulnerable populations nor does it provide details regarding purpose of integration.
- Medicaid Health Plans (MHP) for 20 years have administered a benefit for persons with mild-to-moderate mental health conditions, and have done a very poor job with it.
- According to the Michigan Department of Health and Human Services (MDHHS), the average number of mental health visits authorized for qualifying MHP enrollees in 2014 was four. In 2015, only 10 percent of all contacts for Medicaid recipients seeking behavioral health services were with a behavioral health professional.
- The Medicaid-Medicare multi-year demonstration project (MI Health Link) in four state regions has been a failure, with the vast majority of eligible individuals choosing to dis-enroll from the project.
- In spite of the fact that the program automatically assigns these persons to a private health plan for their physical health care, when given a choice to stop these health plans from managing their care, 65 percent of these dual enrollees choose to leave the health plans.

Macomb County Community Mental Health is the public provider of mental health, substance use and developmental disability treatment services in Macomb County. MCCMH programs and services are supported and funded, in part, by the Michigan Department of Community Health and the Macomb County Board of Commissioners and are administered by the MCCMH Board. Visit <http://www.mccmh.net/> online for more information.

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