

Meeting Agenda

SUD OVERSIGHT POLICY BOARD

Wednesday, March 6, 2024

4:00 PM

Board Room - Community Mental Health of Ottawa County
12265 James Street, Holland, MI 49424

1. Call to Order: Chair
2. Roll Call/Introductions: Chair
3. Public Comment: Chair
4. Conflict of Interest: Chair
5. Review/Approval of Agenda-Chair (Attachment 1)
Suggested Motion: To approve the March 6, 2024 LRE Oversight Policy Board meeting agenda as presented.
6. Review/Approval of Minutes-Chair (Attachment 2)
Suggested Motion: To approve the December 6, 2023 LRE Oversight Policy Board meeting minutes as presented.
7. Old Business
8. New Business
 - a. Updated Board Roster (*Attachment 3*)
 - b. Election Officers – Patrick Sweeney
Nomination and Selection of Officers
Suggested Motion: To approve the recommendations for OPB Chair, Vice Chair and Secretary as nominated by the members.
9. Finance Report (Maxine Coleman)
 - a. Statement of Activities (*Attachment 4*)
 - b. Budget Amendment #2 (*Attachment 5*)
10. State/Regional Updates (Stephanie VanDerKooi)
 - a. CAIT Prevention License Update – Amy Embury
 - b. Grant Updates
 - i. COVID Grant Sunsetting
 - ii. SOR3 – Mobile Health Unit
 - c. MDHHS SUD/SOR Audits
 - d. Legislative Update (*Attachment 6*)
11. Prevention Updates – Amy Embury
 - a. FY21 – 23 Summary of Prevention Activities (*Attachment 7*)

- b. TalkSooner Regional Updates
- 12. SUD Treatment Updates – Amanda Tarantowski
 - a. FY23 SUD Treatment Evaluation Report (*Attachment 8*)
- 13. Next Meeting
 - June 5, 2024 – 4:00 PM
 - CMHOC Board Room

Meeting Minutes (proposed)
SUD OVERSIGHT POLICY BOARD

Wednesday, December 6, 2023 4:00 PM
 Board Room - Community Mental Health of Ottawa County
 12265 James Street, Holland, MI 49424

CALL TO ORDER

Mr. Patrick Sweeney, LRE Oversight Policy Board Chair, called the December 6, 2023 meeting to order at 4:03 PM.

ROLL CALL/INTRODUCTION– Chair

Present at Roll Call:

MEMBER	P	A	MEMBER	P	A
Martha Burkett		x	Stan Ponstein		x
Shelly Cole-Mickens		x	Julie Sanford		x
Mark DeYoung	x		Andrew Sebolt	x	
Bethany Fisk		x	Sarah Sobel	x	
Marcia Hovey-Wright		x	James Storey	x	
Rebecca Lange	x		Patrick Sweeney	x	
Richard Kanten	x		Clyde Welford	x	
David Parnin	x		Doug Zylstra	x	

PUBLIC COMMENT

No Public Comment

CONFLICT OF INTEREST

Mr. Sweeney declared a conflict with the agenda item related to N180 PA2 funds and will not be voting on that issue.

REVIEW/APPROVAL OF AGENDA

OPB 23-016 Motion: To approve the December 6, 2023 LRE Oversight Policy Board meeting agenda as presented.

Moved by: Storey Support: Parnin

MOTION CARRIED

REVIEW/APPROVAL OF MINUTES

OPB 23-017 Motion: To approve the September 6, 2023 LRE Oversight Policy Board meeting minutes as presented.

Moved by: Kanten Support: DeYoung

MOTION CARRIED

FINANCE REPORT (Maxine Coleman)

Statement of Activities

SUD Expenditures through October, 2024 were presented for review. Budget lines are currently reflecting below expected expenses in all funding lines due to the finalization of FY23. There is very limited activity from providers during the first month of the fiscal year.

Oversight Policy Board Meeting Schedule – Stephanie VanDerKooi

Ms. Sobel expressed concerns with recent proposed policy from Ottawa County Administration related to allowing concealed weapons to be carried at Ottawa County offices.

OPB 23-020 Motion: LRE OPB will continue to meet at the CMHOC Board Room in Holland until such time as the Ottawa County Board of Commissioners determines that concealed weapons are permitted in county buildings. If this occurs, the meetings will be relocated to an alternate location.

Moved by: Sobel
MOTION CARRIED

Support: Cole-Mickens

OPB 23-021 Motion: To approve the 2024 Lakeshore Regional Entity Oversight Policy Board meeting schedule as presented.

Moved by: Sobel
MOTION CARRIED

Support: Kanten

STATE/REGIONAL UPDATES (Stephanie VanDerKooi)

LRE 3-Year SUD Strategic Plan

The plan was submitted to the state in July and notice of acceptance was received in November. The plan is available on the LRE website.

Legislative Update

The grid has been updated identifying new legislation as well as legislation that is supported or opposed by the Board association.

PREVENTION UPDATES – Amy Embury

Prevention Providers – The Prevention Agency Guide is published annually and provides an overview of all prevention providers and programs available through Lakeshore Regional Entity providers.

Gambling Grant Allocation – The state recently sent notification that additional funds will be allocated into the gambling grant. Amendments to the agreements will be distributed to providers. A Gifting responsibly gambling awareness campaign will be kicked off in December.

Marihuana Operation and Oversight Grants – Grants are open for each county and is based on the number of licenses in each county. LRE is not a fiduciary for this grant, but information is shared with providers to encourage application for these funds.

SUD TREATMENT UPDATES – Amanda Tarantowski

All grants (ARPA, COVID, SOR) continue. The Our Hope residential unit is nearing completion, and an open house will be scheduled. WSS FY23 site visits are completed. Ms. Tarantowski attended an Impaired Driving Summit with several drug recognition experts, attorneys, AAA, and individuals in the mental health field. Currently, there is no way to determine the amount of THC in an individual's system and it is not clear how to determine if someone is able to drive.

NEXT MEETING

March 6, 2024 – 4:00 PM – CMHOC Board Room

ADJOURNMENT

OPB 23-022 Motion: To adjourn the December 6, 2023 Lakeshore Regional Entity Oversight Policy Board meeting.

Moved by: Kanten

Support: Parnin

MOTION CARRIED

Mr. Sweeney adjourned the December 6, 2023 Lakeshore Regional Entity Oversight Policy Board meeting at 5:04 p.m.

Patrick Sweeney, OPB Chair

Sarah Sobel, Secretary

Substance Use Disorder Oversight Policy Board Roster
 1/1/2024

Seat	County	Member	Contact Information	Term Notes
1	ALLEGAN	Mark DeYoung Commissioner	4169 Hickory Street Dorr, Michigan 49323 (616) 681-9413 – home/business (616) 318-9612 – cell mdeyoung@allegancounty.org	Appoint: 5/2016 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2025
2	ALLEGAN	James Storey Commissioner	344 W 35th Street Holland, MI 49423 (616) 848-9767 jstorey@allegancounty.org	Appoint: 10/1/2014 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2025
3	KENT	Joe Stone	12309 Podunk Avenue Greenville, MI 48838 (616) 303-9444 Stonejoe09@gmail.com	Appoint: 1/1/2024 Expire: 12/31/2026
4	KENT	Shellie Cole-Mickens	1137 Kalamazoo SE Grand Rapids, MI 49507 (616) 634-1972 – work (616) 634-1972 – cell shelliec123@yahoo.com	Appoint: 10/2016 Expire: 12/31/2018 Re-appt: 1/1/2019 Expire: 12/31/2021 Re-appt: 1/1/2021 Expire: 12/31/2024
5	KENT	VACANT		Appoint: 1/1/2023 Expire: 12/31/2025
6	KENT	Stan Ponstein	3967 Edgewood Grandville, MI 49418 sjponstein@gmail.com (616) 460-8138	Appoint: 1/1/2019 Expire: 12/31/2019 Re-appt: 1/1/2020 Expire: 12/31/2022 Re-appt: 1/1/2023 Expire: 12/31/2024
7	KENT	VACANT		Appoint: 1/1/2024 Expire:
8	KENT	Sarah Sobel	865 Anita Ave. NW Grand Rapids, MI 49534 Cell: 616.283.6281 sarahmsobel@gmail.com	Appoint: 1/1/2019 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2026
9	KENT	Patrick Sweeney Chair	233 Centennial Ave Grand Rapids, MI 49504 (989) 854-2444 – cell (616) 233-5262 – work psweeney@rhoadesmckee.com	Appoint: 10/2014 Expire: 12/31/2016 Re-appt: 1/1/2017 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2026

10	LAKE	Clyde Welford Commissioner	560 Lynn St. Baldwin, MI 49304 (231) 480-4802 cwelford@co.lake.mi.us	Appoint:: 8/1/2023 Expire: 12/31/2024
11	MASON	Rebecca Lange	503 N. Delia St. Ludington, MI 49431 (231) 425-4325 – home (231) 852-0744 – cell beckylange80@hotmail.com	Appoint: 10/1/2014 Expire: 12/31/2016 Re-appt: 1/1/2017 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2026
12	MUSKEGON	Louis Churchwell	Mr. Louis Churchwell 1984 Clinton Street Muskegon, MI 49442 231-670-4007 lchurch12@gmail.com	Appoint: 1/1/2024 Expire: 12/31/2026
13	MUSKEGON	Marcia Hovey- Wright Commissioner	3430 Pigeon Hill Court, Muskegon 49441 (231) 740-8492 hoveywrightma@muskegoncounty.net	Appoint: 12/2019 Expire: 12/31/2020 Re-appt: 1/5/2021 Expire: 12/31/2022 Re-appt: 1/4/2023 Expire: 12/31/2024
14	OCEANA	Robert Walker	rwalker@oceana.mi.us	Appoint: 1/1/2023 Expire: 12/31/2024
15	OTTAWA	David Parnin	14466 Brigham Drive Grand Haven, MI 49417 (231) 206-3834 drparnin@msn.com	Appoint: 12/1/2017 Expire: 12/31/2020 Re-appt: 2/9/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2025
16	OTTAWA	Richard Kanten	3112 Beech Forest Street Hudsonville, MI 49426 (616) 669-0863 richardkanten1953@gmail.com	Appoint: 10/2014 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 2/9/2021 Expire: 12/31/2023 Re-appt: 1/1/2024 Expire: 12/31/2025
17	OTTAWA	Doug Zylstra Commissioner	152 E. 24 th Street Holland, MI 49423 (616) 443-4281 dzylstra@miottawa.org	Appoint: 1/1/2022 Expire: 12/31/2024

**Lakeshore Regional Entity
Substance Use Disorders
FY24 Block Grant Expenditures**

Block Grant	Year Ending	Year To Date		Budget to Actual Variance
	9/30/2024	1/31/2024		
	FY24 Budget Budget Am1	FY24 Budget to Date	Actual	
Operating Revenues				
SUD Block Grant (includes SDA)	6,951,088	2,317,029	36,518	2,280,511
SUD Block Grant SOR	3,438,502	1,146,167	316,204	829,964
SUD Block Grant Gambling	221,306	73,769	0	73,769
SUD Block Grant COVID	1,274,820	424,940	0	424,940
Drug Free Communities (DFC) Grant	142,215	47,405	37,196	10,209
SUD Block Grant Amer Rescue Plan Act (ARPA)	669,060	223,020	0	223,020
Total Operating Revenues	12,696,991	4,232,330	389,918	3,842,412
Expenditures - Treatment				
LRE Direct & Regional Administration - Treatment	311,418	103,806	47,350	56,456
LRE Direct & Administration - SOR	281,364	93,788	52,431	41,357
LRE Administration - COVID	45,513	15,171	23,334	(8,163)
LRE Administration - ARPA	10,100	3,367	6,771	(3,404)
Treatment Payments to Members				
OnPoint (Allegan Co CMH) - Treatment	488,460	162,820	13,335	149,485
OnPoint (Allegan Co CMH) - SOR	228,651	76,217	19,870	56,347
OnPoint (Allegan Co CMH) - COVID	171,963	57,321	7,065	50,256
Healthwest - Treatment	751,523	250,508	86,690	163,818
Healthwest ARPA	164,900	54,967	0	54,967
Healthwest SOR	1,180,955	393,652	106,261	287,390
Healthwest - COVID	70,830	23,610	20,739	2,871
Network180 - Treatment	2,721,264	907,088	769,119	137,969
Network 180 - SOR	1,139,341	379,780	194,677	185,103
Network 180 - ARPA	175,000	58,333	44,505	13,829
Network180 - COVID	229,006	76,335	31,970	44,366
CMH of Ottawa County - Treatment	824,524	274,841	237,161	37,680
CMH of Ottawa County - SOR	167,742	55,914	24,788	31,126
CMH of Ottawa County - ARPA	150,000	50,000	35,644	14,356
CMH of Ottawa County - COVID	220,000	73,333	30,688	42,645
West Michigan CMH - Treatment	411,819	137,273	113,714	23,559
West Michigan CMH - SOR	185,068	61,689	44,594	17,095
West Michigan CMH - COVID	65,000	21,667	0	21,667
Expenditures - Prevention				
LRE Direct & Regional Administration - Prevention	105,930	35,310	5,917	29,393
LRE Direct & Regional Administration - COVID	111,050	37,017	31,983	5,034
LRE Direct & Regional Administration - ARPA	36,441	12,147	1,250	10,897
LRE Direct & Regional Administration - Prevention SOR	41,147	13,716	10,198	3,518
LRE Direct Administration - Gambling	99,306	33,102	12,244	20,858
LRE Direct Administration - DFC	25,000	8,333	5,689	2,644

Expenditures - Prevention - continued

OnPoint (Allegan Co CMH) - Prevention	133,818	44,606	58,359	(13,753)
OnPoint (Allegan Co CMH) - Prevention SOR	39,000	13,000	10,758	2,242
OnPoint (Allegan Co CMH) - Prevention ARPA	16,660	5,553	5,279	274
OnPoint (Allegan Co CMH) - Prevention COVID	70,758	23,586	38,588	(15,002)
Arbor Circle / Pathways - Prevention	304,452	101,484	142,717	(41,233)
Arbor Circle / Pathways - Prevention SOR	25,000	8,333	7,966	367
Arbor Circle / Pathways - Prevention Gambling	40,000	13,333	8,616	4,718
Arbor Circle / Pathways - ARPA	31,908	10,636	9,749	887
Arbor Circle - COVID	50,000	16,667	21,437	(4,770)
District 10 Health Department - Prevention	72,648	24,216	31,077	(6,861)
District 10 Health Department - SOR	37,200	12,400	13,715	(1,315)
District 10 Health Department - ARPA	14,766	4,922	460	4,462
District 10 Health Department - COVID	25,000	8,333	5,884	2,449
District 10 Health Department - DFC	117,215	39,072	39,898	(826)
District 10 Health Department - Gambling	32,000	10,667	4,231	6,436
Kent County Health Department - Prevention	259,861	86,620	164,246	(77,626)
Kent County Health Department - Prevention SOR	65,000	21,667	21,938	(271)
Kent County Health Department - ARPA	16,667	5,556	398	5,157
Kent County Health Department - COVID	35,000	11,667	1,925	9,741
Mercy Health - Prevention	49,750	16,583	10,607	5,976
Mercy Health - COVID	25,000	8,333	13,956	(5,623)
Mercy Health - ARPA	9,170	3,057	0	3,057
Network 180 - Prevention	192,088	64,029	0	64,029
Network 180 - COVID	60,000	20,000	3,214	16,786
Ottawa County Health Department - Prevention	98,963	32,988	9,081	23,907
Ottawa County Health Department - Prevention SOR	28,000	9,333	400	8,933
Ottawa County Health Department - ARPA	8,810	2,937	0	2,937
Ottawa County Health Department - COVID	0	0	0	0
Community Mental Health of Ottawa County - COVID	24,000	8,000	0	8,000
Community Mental Health of Ottawa County - ARPA	8,810	2,937	0	2,937
Public Health Muskegon County - Prevention	137,482	45,827	79,459	(33,632)
Public Health Muskegon County - Prevention Gambling	50,000	16,667	4,879	11,787
Public Health Muskegon County - Prevention SOR	20,034	6,678	491	6,187
Public Health Muskegon County - ARPA	9,168	3,056	1,381	1,675
Public Health Muskegon County - COVID	30,000	10,000	1,675	8,325
Wedgwood Christian Services - Prevention	87,088	29,029	39,937	(10,908)
Wedgwood Christian Services - COVID	41,700	13,900	14,884	(984)
Wedgwood Christian Services - ARPA	16,660	5,553	5,843	(290)

Total Expenditures	12,696,991	4,232,330	2,751,037	1,481,293
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Total Change in Net Assets	0	0	(2,361,119)	2,361,119
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**Lakeshore Regional Entity
Substance Use Disorders
FY24 PA2 Expenditures**

	Year Ending	Year To Date		Budget to Actual Variance
	9/30/2024	1/31/2024		
PA2	FY24 Budget Initial Budget	FY24 Budget to Date	Actual	
Operating Revenues				
PA2 Liquor Tax - Current FY	3,748,366	1,249,455	63,402	1,186,054
PA2 Liquor Tax - Reserves	0	0	0	0
Total Operating Revenues	3,748,366	1,249,455	63,402	1,186,054
Expenditures - Prevention				
OnPoint (Allegan Co CMH) - Prevention	191,925	63,975	0	63,975
Arbor Circle / Pathways - Prevention	234,597	78,199	0	78,199
District 10 Health Department - Prevention	60,702	20,234	0	20,234
Kent County Health Department - Prevention	180,000	60,000	2,369	57,631
Mercy Health - Prevention	30,000	10,000	8,002	1,998
Network 180 - Prevention	200,000	66,667	0	66,667
Community Mental Health of Ottawa County	82,763	27,588	26,511	1,077
Ottawa County Health Department - Prevention	72,825	24,275	0	24,275
Public Health Muskegon County - Prevention	209,424	69,808	0	69,808
Wedgwood Christian Services - Prevention	65,000	21,667	0	21,667
Expenditures - Treatment				
Treatment Payments to Members				
Healthwest	180,511	60,170	6,032	54,138
Network180	1,447,774	482,591	144,934	337,657
CMH of Ottawa County	327,723	109,241	59,287	49,953
West Michigan CMH	20,000	6,667	0	6,667
Total Expenditures	3,303,244	1,101,081	247,136	853,945
Total Change in Net Assets	445,122	148,374	(183,734)	332,108

As of 2/28/24

**Lakeshore Regional Entity
Substance Use Disorders
FY24 Medicaid Treatment Expenditures**

Year To Date Through 1/31/24

CATEGORY	CMHSP Medicaid YTD Totals	LRE Admin Med YTD Totals	LRE Medicaid Budget Totals	LRE % of Budget Spent
Total Expenditures for Treatment Services				
	\$ 2,078,861.07	\$ -	\$ 7,209,226	28.84%
Women's Specialty Services	\$ 150,282.15	\$ -	\$ 524,491	28.65%
Other Specialty Services	\$ -	\$ -	\$ -	0.00%
Access Management System	\$ 94,792.22	\$ -	\$ 316,327	29.97%
General Administration	\$ 47,894.18	\$ 116,504.78	\$ 538,048	30.55%
GRAND TOTAL OF SA EXPENDITURES	\$ 2,371,829.62	\$ 116,504.78	\$ 8,588,092	28.97%
SOURCE OF FUNDS				
Medicaid	\$ 2,371,829.62	\$ 116,504.78	\$ 8,588,092	28.97%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
TOTAL FUNDING	\$ 2,371,829.62	\$ 116,504.78	\$ 8,588,092	28.97%

As of 2/28/24

**Lakeshore Regional Entity
Substance Use Disorders
FY24 Healthy MI Plan Treatment Expenditures**

Year To Date Through 1/31/24

CATEGORY	CMHSP HMP YTD Totals	LRE Admin HMP YTD Totals	LRE HMP Budget Totals	LRE % of Budget Spent
Total Expenditures for Treatment Services				
	\$ 3,309,456.27	\$ -	\$ 9,233,750	35.84%
Women's Specialty Services	\$ 68,872.28	\$ -	\$ 415,835	16.56%
Other Specialty Services	\$ -	\$ -	\$ -	0.00%
Access Management System	\$ 150,704.85	\$ -	\$ 553,912	27.21%
General Administration	\$ 75,241.25	\$ 173,838.03	\$ 844,659	29.49%
GRAND TOTAL OF SA EXPENDITURES	\$ 3,604,274.65	\$ 173,838.03	\$ 11,048,156	34.20%
SOURCE OF FUNDS				
Healthy MI Plan	\$ 3,604,274.65	\$ 173,838.03	\$ 11,048,156	34.20%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
TOTAL FUNDING	\$ 3,604,274.65	\$ 173,838.03	\$ 11,048,156	34.20%

As of 2/28/24

Lakeshore Regional Entity Oversight Policy Board

ACTION REQUEST

SUBJECT: FY2024 LRE SUD Budget Amendment 2

- Approval of PA2 Funds
- Advice and Recommendation to LRE Board for Budgets Containing non-PA2 Funds

MEETING DATE: March 6, 2024

PREPARED BY: Stacia Chick, LRE Chief Financial Officer

RECOMMENDED MOTION:

The Oversight Policy Board:

- (a) Approves the allocation of PA2 funds for the LRE SUD Budget as summarized below.**
- (b) Advises and recommends that the LRE Board approve the non-PA2 fund budgets for SUD services as summarized below.**

PROPOSED TO GO TO THE BOARD ON MARCH 27, 2024

SUMMARY OF REQUEST/INFORMATION:

- Public Act 500 of 2012 requires each PIHP region to establish an Oversight Policy Board with certain roles and responsibilities relative to substance abuse services.
- The Lakeshore Regional Entity Oversight Policy Board is the Oversight Policy Board for Region 3 PIHP.
- Among other functions, the Oversight Policy Board is responsible to approve budgets which contain local funds and to advise and recommend budgets containing non-local funds to the LRE board for services within the region.

STAFF: Stacia Chick, LRE Chief Financial Officer

DATE: February 28, 2024

FY2024 LRE SUD Budget Amendment 2 Summary:

<u>PREVENTION (direct by LRE)</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan County</i>	\$ 191,925	\$ 133,818	\$ 39,000	\$ 16,660	\$ 70,758	\$ -	\$ -	\$ -		\$ 452,161
<i>Kent County</i>	\$ 479,597	\$ 656,135	\$ 65,000	\$ 33,327	\$ 186,700	\$ -	\$ -	\$ -	\$ -	\$ 1,420,759
<i>Lake County</i>	\$ 4,340	\$ 11,225	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 15,565
<i>Oceana County</i>	\$ 27,058	\$ 25,852	\$ -	\$ -	\$ -	\$ -	\$ 116,701	\$ -	\$ -	\$ 169,611
<i>Mason County</i>	\$ 29,304	\$ 35,571	\$ 37,200	\$ 14,766	\$ 25,000	\$ 32,000	\$ -	\$ -	\$ -	\$ 173,841
<i>Muskegon County</i>	\$ 239,424	\$ 187,232	\$ 20,034	\$ 18,338	\$ 55,000	\$ 50,000	\$ -	\$ -	\$ -	\$ 570,028
<i>Ottawa County</i>	\$ 355,588	\$ 286,317	\$ 53,000	\$ 49,528	\$ -	\$ 40,000	\$ -	\$ -	\$ -	\$ 784,433
<i>LRE Regional Projects</i>	\$ -	\$ 73,300	\$ -	\$ 21,700	\$ 80,500	\$ 64,000	\$ -	\$ -	\$ -	\$ 239,500
<i>LRE Staffing</i>	\$ -	\$ 32,630	\$ 41,147	\$ 14,741	\$ 30,550	\$ 35,306	\$ 25,000	\$ -	\$ -	\$ 179,374
<i>Unallocated</i>	\$ -	\$ -	\$ -	\$ -	\$ 24,000	\$ -	\$ -	\$ -	\$ -	\$ 24,000
PREVENTION TOTAL	\$ 1,327,236	\$ 1,442,080	\$ 255,381	\$ 169,060	\$ 472,508	\$ 221,306	\$ 141,701	\$ -	\$ -	\$ 4,029,272

<u>TREATMENT (delegated to CMH members)</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan</i>	\$ -	\$ 488,460	\$ 228,651	\$ 75,000	\$ 171,963	\$ -	\$ -	\$ 685,665	\$ 952,728	\$ 2,602,466
<i>Healthwest</i>	\$ 180,511	\$ 751,523	\$ 1,180,955	\$ 137,124	\$ 70,830	\$ -	\$ -	\$ 1,692,188	\$ 2,191,484	\$ 6,204,615
<i>Network 180</i>	\$ 1,447,774	\$ 2,721,264	\$ 1,139,341	\$ 175,000	\$ 229,006	\$ -	\$ -	\$ 4,222,449	\$ 5,221,872	\$ 15,156,706
<i>Ottawa</i>	\$ 327,723	\$ 824,524	\$ 157,542	\$ 150,000	\$ 220,000	\$ -	\$ -	\$ 1,086,173	\$ 1,711,336	\$ 4,477,297
<i>West Michigan (Lake, Mason Oceana)</i>	\$ -	\$ 411,819	\$ 185,068	\$ -	\$ 65,000	\$ -	\$ -	\$ 552,104	\$ 449,222	\$ 1,663,212
<i>LRE Staffing & Regional Projects</i>	\$ -	\$ 311,418	\$ 211,645	\$ 35,100	\$ 56,313	\$ -	\$ -	\$ 349,514	\$ 521,514	\$ 1,485,504
<i>Unallocated</i>	\$ 465,122	\$ 281,306	\$ 92,975	\$ 50,000	\$ 379,392	\$ -	\$ -	\$ -	\$ -	\$ 1,268,795
TREATMENT TOTAL	\$ 2,421,130	\$ 5,790,314	\$ 3,196,177	\$ 622,224	\$ 1,192,504	\$ -	\$ -	\$ 8,588,092	\$ 11,048,156	\$ 32,858,596
TOTAL PREVENTION & TREATMENT	\$ 3,748,366	\$ 7,232,394	\$ 3,451,558	\$ 791,284	\$ 1,665,012	\$ 221,306	\$ 141,701	\$ 8,588,092	\$ 11,048,156	\$ 36,887,868

Lakeshore Regional Entity FY 2024 SUD Budget

Prevention	Budget Am 1 FY24 Allocation	Budget Am 2 FY24 Allocation	Block Grants	SOR	Amer Rescue Plan Act	COVID-19	PA2	Gambling	DFC
Allegan County									
OnPoint (Allegan Co CMH)	452,161	452,161	133,818	39,000	16,660	70,758	191,925	-	-
Total	452,161	452,161	133,818	39,000	16,660	70,758	191,925	-	-
Kent County									
Arbor Circle	201,695	201,695	117,098	-	-	50,000	34,597	-	-
Kent County Health Department	556,528	556,528	259,861	65,000	16,667	35,000	180,000	-	-
Network 180	452,088	452,088	192,088	-	-	60,000	200,000	-	-
Wedgwood	210,448	210,448	87,088	-	16,660	41,700	65,000	-	-
Total	1,420,759	1,420,759	656,135	65,000	33,327	186,700	479,597	-	-
Lake County									
District Health Department #10	15,565	15,565	11,225	-	-	-	4,340	-	-
Total	15,565	15,565	11,225	-	-	-	4,340	-	-
Oceana County									
District Health Department #10	170,125	169,611	25,852	-	-	-	27,058	-	116,701
Total	170,125	169,611	25,852	-	-	-	27,058	-	116,701
Mason County									
District Health Department #10	173,841	173,841	35,571	37,200	14,766	25,000	29,304	32,000	-
Total	173,841	173,841	35,571	37,200	14,766	25,000	29,304	32,000	-
Muskegon County									
Public Health Muskegon County	456,108	456,108	137,482	20,034	9,168	30,000	209,424	50,000	-
Mercy Health	113,920	113,920	49,750	-	9,170	25,000	30,000	-	-
Total	570,028	570,028	187,232	20,034	18,338	55,000	239,424	50,000	-
Ottawa County									
Arbor Circle (Ottawa Co)	484,262	484,262	187,354	25,000	31,908	-	200,000	40,000	-
CMH of Ottawa County	115,573	91,573	-	-	8,810	-	82,763	-	-
Ottawa County Department of Public Health	208,598	208,598	98,963	28,000	8,810	-	72,825	-	-
Total	808,433	784,433	286,317	53,000	49,528	-	355,588	40,000	-
LRE Regional Projects (TalkSooner, Trainings, Conference, Tech. Assistance, Family Meals Month)									
LRE Staffing	239,500	239,500	73,300	-	21,700	80,500	-	64,000	-
Unallocated	179,374	179,374	32,630	41,147	14,741	30,550	-	35,306	25,000
Total	418,874	442,874	105,930	41,147	36,441	135,050	-	99,306	25,000
Overall Prevention Total	4,029,786	4,029,272	1,442,080	255,381	169,060	472,508	1,327,236	221,306	141,701

Treatment	Budget Am 1 FY24 Allocation	Budget Am 2 FY24 Allocation	Block Grants (incl. SDA)	SOR	Amer Rescue Plan Act	COVID-19	PA2	Medicaid	Healthy Michigan
OnPoint (Allegan Co CMH)	2,527,466	2,602,466	488,460	228,651	75,000	171,963	-	685,665	952,728
Healthwest	6,232,391	6,204,615	751,523	1,180,955	137,124	70,830	180,511	1,692,188	2,191,484
Network 180	15,156,706	15,156,706	2,721,264	1,139,341	175,000	229,006	1,447,774	4,222,449	5,221,872
CMH of Ottawa County	4,487,497	4,477,297	824,524	157,542	150,000	220,000	327,723	1,086,173	1,711,336
West Michigan CMH (Lake, Mason Oceana)	1,683,212	1,663,212	411,819	185,068	-	65,000	-	552,104	449,222
LRE Staffing & Regional Projects	1,519,423	1,485,504	311,418	211,645	35,100	56,313	-	349,514	521,514
Unallocated	1,129,676	1,268,795	281,306	92,975	50,000	379,392	465,122	-	-
Overall Treatment Total	32,736,372	32,858,596	5,790,314	3,196,177	622,224	1,192,504	2,421,130	8,588,092	11,048,156
SUD Total Prevention + Treatment:	36,766,158	36,887,868	7,232,394	3,451,558	791,284	1,665,012	3,748,366	8,809,398	11,189,857

Lakeshore Regional Entity's Legislative Update – 02/20/2024

This document contains a summary and status of bills in the House and Senate, and other political and noteworthy happenings that pertain to both mental and behavioral health, and substance use disorder in Michigan and the United States.

Prepared by Melanie Misiuk, SEDW & 1915(i)SPA Specialist & Stephanie VanDerKooi, Chief Operating Officer

ATTACHMENT 6

Highlight = new updates
Highlight = old bill, no longer active
Highlight = Suggestions for Action & Supported/Opposed by CMHAM (Community Mental Health Association of Michigan)

STATE LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	SB 27	Legislation that would require insurers to provide coverage for mental health and substance abuse disorder services on the same level as that of coverage for physical illness. Federal law requires mental health coverage to be equal to physical illness. The bill would require insurance coverage for mental health conditions, including substance use disorders, to be no more restrictive than insurance coverage for other medical conditions. *Supported by CMHAM	Sarah Anthony	1/18/23 – Introduced to the Senate; Referred to Committee on Health Policy 10/12/23 – Reported favorably with substitute; Referred to committee oof the whole with substitute 10/18/23 – Passed the Senate, Referred to House Committee on Insurance and Financial Services
***	HB 4576 & 4577	Reintroduced versions of Sen. Shirkey’s legislation (SB 597 & 598) from 2022. Legislation to create an integrated plan to merge the administration and provision of Medicaid physical health care services and behavioral health specialty services. *Opposed by CMHAM	Curtis VanderWall	5/16/23 – Introduced, read, and referred to Committee on Health Policy
	HB 4320 & 4387	<i>Provides for penalties for coercing a vulnerable adult into providing sexually explicit visual material; and provides sentencing guidelines for crime of coercing vulnerable adult into providing sexually explicit visual material</i>	Sharon MacDonell	3/22/23 – Introduced; referred to Committee on Families, Children and Seniors 6/27/23 – Referred to a second reading 10/5/23 – Read a second time; substitute adopted; placed on third reading 10/17/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety 11/7/23 – Reported favorably without amendment; Referred to Committee of the Whole

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
				12/31/23 – Signed by the Governor, assigned PA 275'23 & 276'23
	HB 4081	Establishes a minimum number of school counselors to be employed by a school district, intermediate school district or public school academy	Felicia Brabec	2/14/23 – Introduced; referred to Committee on Health Policy
	HB 4495 & 4496	Provides general changes to the medical assistance program	Will Snyder Graham Filler	5/2/23 – Introduced; referred to Committee on Health Policy 6/13/23 – Passed House 6/27/23 – Passed Senate 7/10/23 – Presented to Governor 7/19/23 – Approved by the Governor; Filed with Secretary of State; assigned PA 98'23 with immediate effect
	HB 4523	Modifies eligibility for mental health court for those with violent offenses	Kara Hope	5/4/23 – Introduced; referred to Committee on Judiciary 6/7/23 - reported with recommendation with substitute (H-1), referred to a second reading 10/31/23 – read a third time, passed given immediate effect 11/1/23 - Referred to Committee on Civil Rights, Judiciary, and Public Safety 2/22/24 – Passed the House, Returned to the Senate
	HB 4579, 4580, & 4131	Requires reimbursement rate for telehealth visits to be the same as office visits *Supported by CMHAM	Natalie Price, Felicia Brabec	5/16/23 – Introduced; referred to Committee on Health Policy 10/31/23 – Referred to a second reading 11/14/23 – Referred to Committee on Health Policy
	HB 4649	Require height-adjustable, adult-sized changing tables in public restrooms	Lori Stone	5/23/23 – Introduced; referred to Committee on Regulatory Reform
	HB 4745-4749	Bills related to access to assisted outpatient treatment, outpatient treatment for misdemeanor offenders, hospital evaluations, mediation, and competency exams	Brian BeGole, Donni Steele, Tom Kuhn, Mark Tisdell	6/14/23 – Introduced; referred to Committee on Health Policy
	HB 4171	Modifies the priority of a professional guardian.	Curtis VanderWall	3/2/23 – Introduced; Read; referred to Committee on Judiciary
***	HB	HB 4909-12 would institute long-awaited reforms to Michigan’s guardianship statutes, and HB 5047	Kelly Breen	7/18/23 – Introduced; Referred to Committee on

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	4909-12 & 5047	would create the Office of State Guardian. Supported by the Department of Attorney General, Disability Rights Michigan, the Michigan Elder Justice Initiative, AARP, Alzheimer's Association, and The Michigan Long Term Care Ombudsman Program.		Judiciary 10/11/23 – Reported with recommendation with substitute (H-1); Referred to a second reading 10/24/23 – Read a third time 10/25/23 – Referred to Committee on Civil Rights, Judiciary, and Public Safety
	HB 5184 & 5185	Legislation would remove the social work test as a criterion for social work licensure and replace it with the strengthening of the supervised clinical experience requirements already required for licensure. *Supported by CMHAM	Felicia Brabec	10/19/23 – Introduced, Read a first time, Referred to Committee on Health Policy 11/9/23 – CMHAM (Bob Sheehan) provided testimony in favor of the bills.
	HB 5276-5280	A bill to create the office of mental health and suicide prevention in the Michigan veterans affairs agency and provide for its powers and duties; and to provide for the powers and duties of certain state governmental officers and entities.	Jennifer Conlin	10/26/23 – Introduced, read a first time, referred to Committee on Military, Veterans, and Homeland Security.
	SB 227	Would amend the childcare licensing Act to allow for emergency physical management/therapeutic de-escalation (certain levels of restraint & seclusion) in certain children's residential settings.	Dan Lauwers Kevin Hertel Stephanie Chang	3/22/23 – Introduced 10/12/23-11/8/23 – Read several times, voted on, vote reconsidered, enrollment vacated 1/10/24 – Returned to Senate 1/11/24 – Returned to the House 1/18/24 – defeated Roll Call
	HB 4693	Would allow for remote participation for a CMH & PIHP meeting	John Fitzgerald	5/30/23 – Introduced, read, referred to Committee on Local Government and Municipal Finance
	HB 5343-5347	The "Advancing MI Health" Package seeks to increase access to care by cutting red tape encountered by many mental and behavioral health practitioners in applying to join insurance network panels. Additionally, the package assists the State of Michigan in monitoring health insurers' compliance with federal laws mandating coverage parity for mental and behavioral health services.	Noah Arbit Felicia Brabec Betsy Coffia Denise Mentzer	11/14/23 – Introduced, read, referred to Committee on Health Policy.
	HB 5371 & 5372	The department must develop a prospective payment system under the medical assistance program for funding certified community behavioral health clinics. The payment system must fully comply with all federal payment methodologies. The department must submit to the federal Centers for Medicare Medicaid Services any approval request necessary for a Medicaid 1115 waiver.	Felicia Brabec Phil Green	11/14/23 – Introduced, read, referred to Committee on Health Policy.
	SB 625& 626	These bills would address Limited Licensed Psychologists and the ability or inability to diagnose Autism.	Michael Webber Sam Singh	11/1/23 - Introduced, referred to Committee on Health Policy.

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	SB 649 & 650 SB 651 & 652 SB 648 SB 647 SB 654 SB 653	Protect MI Kids Bill Package: Keep MI Kids Tobacco Free Alliance is working on a legislative package that will address the areas of Tobacco Retail Licensure, Taxation on Vaping Products & Parity, Ending the Sale of Flavored Tobacco, and Preemption Removal (Restoration of local authority to regulate tobacco control at the municipal level)	Keep MI Kids Tobacco Free Alliance Sam Singh John Cherry Stephanie Chang Paul Wojno Sue Shink Mary Cavanaugh	Preemption one pager (d31hzhk6di2h5.cloudfront.net) 10/17/23 – Anticipating Senator Singh will be introducing the bill package this week. 11/9/23 – Introduced, Referred to Committee on Regulatory Affairs
	HB 4049	A bill to require CRA to consider all applications by spouses of government officials for licensed marijuana establishments, and to not deny them based on their spouse’s government affiliation.	Pat Outman	1/31/23 - Introduced and referred to Committee on Regulatory Reform
	HB 4061	Kratom Consumer Protection Act: A bill to regulate the distribution, sale, and manufacture of kratom products	Lori Stone	2/1/23 - Introduced and referred to Committee on Regulatory Reform
	<i>SB 133</i>	<i>A bill to provide for the review and prevention of deaths from drug overdose; allow for creation of overdose fatality review teams and power and duties of those teams; and for other purposes</i>	<i>Sean McCann</i>	<i>3/2/23-Introduced and referred to Committee on Health Policy 10/5/23 – Reported and referred by committee of the whole favorably with substitute; passed roll call 10/10/23 – Referred to Committee on Health Policy 11/2/23 – Referred to second reading 11/8/23 - read a second time, placed on immediate passage, passed; given immediate effect, returned to Senate 11/9/23 - ORDERED ENROLLED 12/6/23 - PRESENTED TO GOVERNOR 12/13/23 – Approved by Governor 12/29/23 – Assigned PA 0313’23</i>
	HB 4430	A bill to require all marijuana sales to provide safety information at the point of sale. Safety info includes: Safe storage, proper disposal, poison control information and the following statements: (A) To avoid dangerous drug interactions, it is recommended that you consult with your prescriber or pharmacist before consuming this product. (B) Exercise care if you consume this product with alcohol. (C) Consuming this product with a controlled substance could increase the	Veronica Paiz	4/19/23-introduced and referred to Committee on Regulatory Reform

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		risk of side effects or overdose. (D) Do not operate heavy machinery or perform other dangerous tasks under the influence of this product unless you know how this product affects you.		
	SB 180/179	Allow the Cannabis Regulatory Agency (CRA) to enter into an agreement with an Indian tribe pertaining to marijuana related business if the agreement and the Indian tribe met certain conditions. It prohibits the CRA from employing any individual with pecuniary interests in tribal marijuana; and specifies that sales of marijuana by a tribal marijuana business on Indian lands would be exempt from the State's 10% excise tax on marijuana. Require the Department of Treasury to deposit money into the Marihuana Regulation Fund that was collected under an Indian Tribe Agreement.	Roger Hauck	6/14/23-Passed Senate and received in House Committee on Regulatory Reform 10/5/23 – Reported with recommendation without amendment; referred to second reading; place on third reading; passed by ¾ vote; returned to Senate 10/10/23 – Ordered enrolled 10/24/23 – Signed by Governor and given immediate effect, assigned PA 0166'23
	SB 141/HB 4201	The bill would amend the Michigan Liquor Control Code to eliminate a January 1, 2026, sunset on provisions that allow a qualified licensee to fill and sell qualified containers with alcoholic liquor for the purpose of off-the-premises consumption and to deliver alcoholic liquor to a consumer in the State if the qualified licensee meets certain conditions.	Mallory McMorrow & Kristian Grant	6/13/23 - Passed Senate, referred for second reading in House Committee on Regulatory Reform. 5/3/23 - Passed House, referred to Senate Committee on Regulatory Affairs 7/19/23-Assigned PA 0095'23 with immediate effect
	HB 4833	The bill would amend the public health code to eliminate the requirement for acute care and behavioral health hospitals to carry a SUD Service Program license. The issue was identified through a LARA workgroup revealing duplicate licensure in some circumstances. The endeavor is to clean up the duplication and reduce burden on LARA as well as our members.	Ranjeev Puri	6/22/23 - referred to Committee on Health Policy
	HB 4913	A bill to criminalize all possession or distribution of Xylazine under the Controlled Substances Act.	Kelly Breen	7/18/23-Introduced and referred to Committee on Judiciary
	SB 247	The bill would allow the holder of a special license issued by the MLCC to sell and serve alcoholic liquor on the premises of a licensed public area of a facility used for intercollegiate athletic events on dates and times other than the dates and times provided to the MLCC. A licensee that had been issued a catering permit could deliver and serve alcoholic liquor at a private event on the premises on dates and times other than the dates and times provided to the MLCC.	Sean McCann	7/19/23-Assigned PA 0096'23 with immediate effect
	HB 4734/4735 /4736	A bill package to require all school districts to have an opioid antagonist in each school building, and at least one trained staff in each building; require local health departments to provide antagonist and training to schools & staff.	David Prestin John Fitzgerald Matt Koleszar	6/13/23-Introduced and referred to Committee on Education
	HB 4322	The bill would allow individuals who are 19 years of age or older to be employed at or volunteer for marijuana establishments, with the direct supervision of a person 21+.	Kevin Coleman	6/28/23-Read a third time in House, substitute adopted, and postponed temporarily
	HB 4600	The bill would prohibit the CRA from denying an application based on spouses of applicants holding positions in certain governmental bodies	Mike McFall	5/18/23-Introduced and referred to Committee on Regulatory Reform

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
				9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third reading
	HB 4601	The bill to include within a Cannabis Processor License the ability to extract THC concentrates and package for sale on the premises; allow for transfer of products amongst other licensed establishments both on the same location and to other locations; prohibit the denial of a license based upon the background check of an applicant’s spouse.	Mike McFall	5/23/23-Introduced and referred to Committee on Regulatory Reform 9/12/23 – Reported with recommendation without amendment, referred to a second reading. 9/28/23 – Read a second time; placed on third reading
***	HB 4707	The bill would amend the Insurance Code to require health insurers in Michigan to provide coverage for medically necessary treatment of a mental health or substance abuse disorder. The bill would set requirements for coverage of out-of-network services and emergency services, as well as requirements related to prior authorization, utilization review, and the determination of level of care for insured individuals. The bill states that it would not apply to any entity or contracting provider that performs utilization review or utilization management functions on an insurer’s behalf. ***Supported by CMHAM.	Felicia Brabec	6/7/23 – Introduced, read, and referred to Committee on Insurance and Financial Services 6/21/23 – Reported with recommendation without amendment, referred to a second reading 10/24/23 – Read a second time, placed on third reading 10/25/23 – Removed from the House Agenda CMHAM REQUEST FOR ACTION: We are asking you to reach out to your legislators (House & Senate) and the Governor and URGE them to support HB 4707 and encourage their leadership to bring the bill up for a vote in the fall legislative session. HB 4707 will go a long way in improving people’s lives across the state.
	HB 4213	The bill would require telemedicine coverage for SUD and behavioral health services *Supported by CMHAM	Christine Morse	3/8/23 – Introduced; Referred to Committee on Health Policy 10/31/23 – Referred to second reading 11/9/23 - read a second time, placed on immediate passage, passed; given immediate effect 11/14/23 – Referred to Committee on Health Policy
	HB 4690	Secular Recovery Bill: This bill would amend the Code of Criminal Procedure to require a court that orders a defendant to attend a court-ordered substance use disorder recovery program as part of a sentence or deferred proceeding to ask on the record whether the defendant has an	Betsy Coffia	5/30/23 – Introduced, Read, and referred to the Committee on Judiciary

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		objection to a religious element of that program. If the defendant objects to a religious element, the court would have to identify a secular treatment program that the defendant confirms on the record eliminates their religious objection. The court would have to allow the defendant to participate in a secular treatment program online if one is not available locally		
	S 542	A bill to allow government agencies who are providing opioid antagonists free of charge the choice of formulation, dosage, and route of administration for opioid antagonists	Kevin Hertel	10/3/23-Introduced and referred to Committee on Health Policy
	HB 5078	A bill to allow a dispensing prescriber or pharmacist may dispense an opioid antagonist to any of the following: (a) An individual patient at risk of experiencing an opioid-related overdose. (b) A family member, friend, or other individual in a position to assist an individual at risk of experiencing an opioid-related overdose.	Carrie Rheingans	10/4/23-Introduced and referred to Committee on Health Policy
	HB 5063 & 5064	A bill to protect the use of Medical Marijuana-A qualifying patient who has been issued and possesses a registry card must not be denied any right or privilege and it allows students to be treated with medical marijuana and CBD products during school; a public school or nonpublic school shall do all of the following: (a) Authorize a qualified guardian of a qualified pupil to administer a marihuana-infused product or CBD product to the qualified pupil on the school premises, on a school bus, or at a school-sponsored activity in a location off of the school premises at which the use of a marihuana-infused product or CBD product is not prohibited. (b) Authorize a designated staff member to administer a marihuana-infused product or CBD product to a qualified pupil as described in subsection (2). (c) Authorize a qualified pupil to use or self-administer a marihuana-infused product or CBD product under the direct supervision of a designated staff member as described in subsection	Dylan Wegela Jimmie Wilson Jr.	9/28/23-Introduced and referred to Committee on Regulatory Reform
	S 466	<i>The bill would amend Part 126 (Smoking in Public Places) of the Public Health Code to allow a cigar bar that met specified conditions and whose smoking ban exemption had lapsed to requalify for the exemption if the owner or operator of the bar filed an affidavit certifying those conditions.</i>	Kristen McDonald Rivet	9/6/23 – Introduced, Referred to Committee on Regulatory Affairs 10/10/23 – Referred to Committee on the Whole 10/24/23 – Referred to Committee on Regulatory Reform 11/9/23 – rule suspended, motion to discharge committee approval, read a second time, read a third time, passed; given immediate effect, returned to Senate, given immediate effect, ordered enrolled 12/6/23 – presented to the Governor 12/13/23 – Approved by Governor 12/29/23 – Assigned PA 0318’23 with immediate effect

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HB 5198	An act to prohibit the selling, giving, or furnishing of tobacco products, vapor products, and alternative nicotine products to minors; to prohibit the purchase, possession, or use of tobacco products, vapor products, and alternative nicotine products by minors; Disallow all references to cake, candy, cupcake, pastry, pie, or any variation thereof in any advertising. Disallow reference to any food product marketed to children-cereal, ice cream, juice, Disallow references to any character/personality/celebrity, video game, mythical creature or school supply. To regulate the retail sale of tobacco products, vapor products, alternative nicotine products, and liquid nicotine containers; To prohibit certain practices that relate to the distribution and sale of certain vapor products; To authorize the seizure, forfeiture, and destruction of certain vapor products; To prescribe penalties and civil sanctions; and to prescribe the powers and duties of certain state and local agencies and departments-Compliance checks	Alabas Farhat	10/24/23- Introduced and referred to Committee on Regulatory Reform

FEDERAL LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	S. 2993	<p>Ensuring Excellence in Mental Health Act: The legislation would amend the Social Security Act and the Public Health Service Act to permanently authorize Certified Community Behavioral Health Clinics (CCBHCs) – it establishes a federal definition of CCBHCs into law and create the infrastructure needed to achieve the long-term vision of the model.</p> <p style="background-color: #90EE90;">*Supported by CMHAM</p>	Debbie Stabenow	09/28/2023 - Read twice and referred to the Committee on Finance.

BILLS & REGULATIONS PERTAINING TO SUD				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	H.Res. 39	A res. Requesting that all illicit fentanyl and illicit fentanyl-related substances should be permanently placed in Schedule I; and for other purposes.	Neal Dunn	1/17/23-Introduced and referred to Committee on Energy and Commerce & Committee on the Judiciary 1/27/23 - Referred to the House Subcommittee on Health.
	N/A – Proposed Rule	There is a proposed rule by the Substance Abuse and Mental Health Services Administration (SAMHSA) that would permanently allow providers to prescribe buprenorphine specifically for opioid use disorder treatment without an in-person visit in an opioid treatment program, but this is still in the proposal phase with comments due on Feb. 14, 2023.	SAMHSA	12/16/22 – Proposed 2/14/23 – Public Comment Due Federal Register :: Medications for the Treatment of Opioid Use Disorder
	HR 901	To require the Food and Drug Administration to prioritize enforcement of disposable electronic nicotine delivery system products.	Sheila Cherfilus-McCormick	2/09/2023 - Referred to the House Committee on Energy and Commerce. 2/17/23 - Referred to the House Subcommittee on Health.
	S. 464	A bill to amend the Internal Revenue Code of 1986 to deny the deduction for advertising and promotional expenses for tobacco products and electronic nicotine delivery systems.	Jeanne Shaheen	2/16/2023 - Read twice and referred to the Committee on Finance.

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 610	Marijuana 1-3 Act of 2023: A bill to provide for the rescheduling of marijuana into schedule III of the Controlled Substances Act.	Gregory Steube	1/27/23 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary
	HR 467	HALT Fentanyl Act (S.1141): This bill places fentanyl-related substances as a class into schedule I of the Controlled Substances Act; the bill establishes a new, alternative registration process for schedule I research that is funded by the Department of Health and Human Services or the Department of Veterans Affairs or that is conducted under an investigative new drug exemption from the Food and Drug Administration.	H. Morgan Griffith/Bill Cassidy 5	03/24/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 27 – 19 (S)-3/30/23-Read twice and referred to the Committee on the Judiciary. 5/17/2023 - Placed on Union Calendar #47 5/25/2023 – House adopted the amendment 5/30/2023 – Received in Senate and referred to the committee on the Judiciary.
	HR 1291	Stopping Overdoses of Fentanyl Analogues Act: To amend the Controlled Substances Act to list fentanyl-related substances as schedule I controlled substances.	Scott Fitzgerald	03/01/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 3/10/23 - Referred to the Subcommittee on Health.
	HR 1839	Combating Illicit Xylazine Act (S.993): To prohibit certain uses of xylazine.	Jimmy Panetta/ Catherine Cortez Masto 7	03/28/2023 Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary (S)-3/28/23-Read twice and referred to the Committee on the Judiciary 4/7/23 – Referred to the Subcommittee on Health
	S.983	Overcoming Prevalent Inadequacies in Overdose Information Data Sets Act or “OPIOIDS” Act: The Attorney General may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness.	Rick Scott	03/27/2023 Read twice and referred to the committee on the Judiciary

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 1734	TRANQ Research Act: To require coordinated National Institute of Standards and Technology science and research activities regarding illicit drugs containing xylazine, novel synthetic opioids, and other substances of concern, and for other purposes.	Mike Collins	03/29/2023 Ordered to be Reported (Amended) by the Yeas and Nays: 36 – 0 5/15/23 - Passed in House, Received in Senate 6/26/23 – Passed in Senate 6/26/23 – Message on Senate action sent to the House 12/4/23 - Mr. Lucas moved that the House suspend the rules and agree to the Senate amendment; DEBATE - The House proceeded with forty minutes of debate on the motion to suspend the rules and agree to the Senate amendment to H.R. 1734; On motion that the House suspend the rules and agree to the Senate amendment Agreed to by voice vote; Motion to reconsider laid on the table Agreed to without objection. 12/14/23 – Presented to the President 12/19/23 – Signed by the President, became Public Law No.: 118-23.
	S 606	To require the Food and Drug Administration to revoke the approval of one opioid pain medication for each new opioid pain medication approved.	Joe Manchin	03/01/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	HR 2867 & S 1235	Bruce’s Law: Re-introduced as new bills (formerly HR 9221 in 2022). To establish an awareness campaign related to the lethality of fentanyl and fentanyl-contaminated drugs, to establish a Federal Interagency Work Group on Fentanyl Contamination of Drugs, and to provide community-based coalition enhancement grants to mitigate the effects of drug use.	David Trone & Lisa Murkowski	04/20/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions. 04/25/2023 - Referred to the House Committee on Energy and Commerce 04/28/2023 – Referred to the Subcommittee on Health
***	HR 2891 & S 1323	SAFE Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes. ***The LRE opposes this bill, as it indirectly supports the federal legalization of marijuana.	David Joyce & Jeff Merkley	5/3/23 - Referred to Subcommittee on Economic Opportunity 5/11/23 - Referred to Committee on Banking, Housing, and Urban Affairs

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
***	S 2860	SafER Banking Act: To create protections for financial institutions that provide financial services to State-sanctioned marijuana businesses and service providers for such businesses, and for other purposes.	Jeff Merkley	9/20/2023 - Read twice and referred to the committee on Banking, Housing, and Urban Affairs. 9/28/2023 - Placed on Senate Legislative Calendar under General Orders. Calendar No. 215. 12/6/23 - Committee on Banking, Housing, and Urban Affairs. Hearings held.
	HR 3375	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids, and for other purposes.	Ann Kuster	05/16/2023-Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary 5/19/2023 – Referred to the Subcommittee on Health
	HR 4106	To amend the 21st Century Cures Act to expressly authorize the use of certain grants to implement substance use disorder and overdose prevention activities with respect to fentanyl and xylazine test strips.	Jasmine Crockett	06/14/2023 - Referred to the House Committee on Energy and Commerce 06/16/2023 - Referred to the Subcommittee on Health.
	S. 1785	To establish programs to address addiction and overdoses caused by illicit fentanyl and other opioids; i.e, enhanced surveillance, collection of overdose data, increase fentanyl detection and screening abilities, and other purposes.	Ed. Markey	05/31/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	HR 3563	STRIP Act: To amend the Controlled Substances Act to exempt from punishment the possession, sale, or purchase of fentanyl drug testing equipment.	Jasmine Crockett	05/22/2023 - Referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce 05/26/2023 - Referred to the Subcommittee on Health.

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	S. 1080	Cooper Davis Act – This legislation would require Big Tech to take a more proactive role against drug dealing on their social media platforms. It will amend the Controlled Substances Act to require electronic communication service providers and remote computing services to report to the Attorney General certain controlled substances violations. <i>(Any and all electronic communications programs/applications will be required to submit reports of communications that include the sale of any counterfeit or illicit substance within a reasonable time; failure to do so will result in penalties.)</i>	Roger Marshall	3/30/2023 - Read twice and referred to the Committee on the Judiciary. 7/13/2023 - Committee on the Judiciary. Ordered to be reported with an amendment in the nature of a substitute favorably. 09/05/2023 - Committee on the Judiciary. Reported by Senator Durbin with an amendment in the nature of a substitute. Without written report, Placed on Senate Legislative Calendar under General Orders. Calendar No. 200.
	HR 3684	To direct the Secretary of Defense to establish a grant program for using psychedelic substances to treat certain conditions, and for other purposes.	Dan Crenshaw	5/25/2023-Referred to the House Committee on Armed Services.
	HR 4531 & S 2433	Support for Patients and Communities Reauthorization Act: The bill was originally passed in 2018. This bill would reauthorize certain programs under the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, and for other purposes. <i>(Reauthorize Block Grant Funding for current programs, and expansion of MAT Studies for OUD, FASD support, and others.)</i>	Brett Guthrie Bill Cassidy	7/11/2023 – Introduced in House, referred to House Energy and Commerce Committee 7/19/23 - Ordered to be Reported (Amended) by the Yeas and Nays: 49 – 0 07/20/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions 9/28/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 29-3. 12/12/23 - Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended Agreed to by the Yeas and Nays: (2/3 required): 386 - 37
	HR 3521	Saving America’s Future by Educating Kids Act of 2023: To direct the Secretary of Education to develop and disseminate an evidence-based curriculum for kindergarten through grade 12 on the dangers of vaping and misusing opioids, synthetic drugs, and related substances	Alexander Mooney	5/18/2023 - Referred to the House Committee on Education and the Workforce.

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 4105 & S 1475	To amend the Controlled Substances Act to prohibit certain acts related to fentanyl, analogues of fentanyl, and counterfeit substances, Drug Enforcement Administration shall establish and implement an operation and response plan to address counterfeit fentanyl or methamphetamine substances that includes specific ways that prevention and education efforts stop the use of counterfeit pills, how ongoing efforts are effective in increasing education and prevention, how they are tailored to youth and teen access, and how those programs can be tailored, adjusted, or improved to better address the flow of counterfeit fentanyl or methamphetamine; and for other purposes.	Ken Buck Chuck Grassley	05/09/2023 - Read twice and referred to the Committee on the Judiciary 06/16/2023 - Referred to the Subcommittee on Health
	HR 3570	To provide public awareness and outreach regarding the dangers of fentanyl, to expand the grants authorized under the Comprehensive Opioid Abuse Grant Program, to expand treatment and recovery services for people with opioid addictions, and to increase and to provide enhanced penalties for certain offenses involving counterfeit pills.	Sheila Jackson Lee	05/26/2023 - Referred to the Subcommittee on Health.
	HR 4582	Protecting Kids from Fentanyl Act of 2023: To amend the Public Health Service Act to authorize the use of Preventive Health and Health Services Block Grants to purchase life-saving opioid antagonists for schools and to provide related training and education to students and teachers, and for other purposes.	Doug Lamborn	07/12/2023 - Referred to the House Committee on Energy and Commerce. 07/14/2023 Referred to the Subcommittee on Health.
	S 2699	Opioid RADAR Act: To combat the fentanyl crisis by: 1. Secretary of Health and Human Services may award grants to States, territories, and localities to support improved data and surveillance on opioid-related overdoses, including for activities to improve postmortem toxicology testing, data linkage across data systems throughout the United States, electronic death reporting, or the comprehensiveness of data on fatal and nonfatal opioid-related overdoses. 2. Director of the Centers for Disease Control and Prevention, in collaboration with the Attorney General or their designee, shall carry out a pilot program to award grants on a competitive basis to municipal wastewater treatment facilities in order to conduct wastewater analysis to determine the prevalence of certain illicit substances, such as fentanyl or xylazine, 3. The Secretary may award grants to eligible entities to provide for the administration, at public and private elementary and secondary schools under the jurisdiction of the eligible entity, of drugs and devices for emergency treatment of known or suspected opioid overdose.	Rick Scott	07/27/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	S 2484	To ensure that States do not prohibit an individual from obtaining, possessing, distributing, or using life-saving drug testing technologies, and for other purposes. <i>(More than 12 states currently have laws prohibiting the purchase, use, or possession of fentanyl testing strips)</i>	Cory Booker	07/25/2023 - Read twice and referred to the Committee on the Judiciary

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5040	To amend the Intelligence Reform and Terrorism Prevention Act of 2004 to limit the consideration of marihuana use when making a security clearance or employment suitability determination, and for other purposes.	Jamie Raskin	07/27/2023 - Referred to the House Committee on Oversight and Accountability 9/20/2023 - Committee Consideration and Mark-up Session Held, Ordered to be Reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30 - 14.
	S 2650	To establish a Commission on the Federal Regulation of Cannabis to study a prompt and plausible pathway to the Federal regulation of cannabis, and for other purposes	John Hickenlooper	07/27/2023 - Read twice and referred to the Committee on the Judiciary 9/20/23 – Committee consideration and mark-up sessions held; ordered to be reported in the Nature of a Substitute (Amended) by the Yeas and Nays: 30-14
	HR 5625	To establish education partnership programs between public schools and public health agencies to prevent the misuse and overdose of synthetic opioids by youth	Suzanne Bonamici	09/21/2023 - Referred to the Committee on Education and the Workforce, and in addition to the Committee on Energy and Commerce
	HR 5506	HANDS Act: To amend titles XVIII and XIX of the Social Security Act and title 10, United States Code, to provide no-cost coverage for the preventive distribution of opioid overdose reversal drugs.	Brittany Pettersen	09/14/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Armed Services
	HR 5420	Workplace Overdose Reversal Kits to Save Lives Act: To require the Secretary of Labor to issue guidance and regulations regarding opioid overdose reversal medication and employee training via OSHA	Bonnie Watson-Coleman	9/12/2023 - Referred to the House Committee on Education and the Workforce
	HR 5323	Stop Pot Act: To amend title 23, United States Code, to establish a national requirement against the use of marijuana for recreational purposes.	Chuck Edwards	9/05/2023 Referred to the Subcommittee on Highways and Transit
	HR 5715 & S2929	Tobacco Tax Equity Act of 2023: This bill increases the excise tax on cigarettes and cigars and equalizes tax rates among all other tobacco products. It also imposes a tax on nicotine for use in vaping.	Raja Krishnamoorthi	9/26/2023 Referred to the House Committee on Ways and Means 09/26/2023 Read twice and referred to the Committee on Finance
	HR 5652	Stop Overdose in Schools Act: To amend the 21st Century Cures Act to require funds to be set aside for opioid reversal agent administration training in schools, and for other purposes.	Newhouse	9/21/2023 Referred to the House Committee on Energy and Commerce

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 5801	Preventing Overdoses with Test Strips Act: To ensure that expenses relating to the acquisition or use of devices for use in the detection of fentanyl, xylazine, and other emerging adulterant substances, including test strips, are allowable expenses under any grant, contract, or cooperative agreement entered into by the Substance Abuse and Mental Health Services Administration under this Act.	Josh Gottheimer	9/28/2023 Referred to the House Committee on Energy and Commerce. 9/28/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2919	ALERT Communities Act : Administrator of the Drug Enforcement Administration, shall develop and make publicly available research and marketing frameworks for developing, improving, and evaluating test strip technology for detecting fentanyl and other dangerous substances; The Secretary of Health and Human Services shall— conduct a study on the impact of the availability, accessibility, and usage of drug checking supplies, including test strips, on frequency of overdose, overdose deaths, and engagement in substance use disorder treatment and report the findings to Congress.	Margaret Wood Hassan	9/26/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S2946	School Access to Naloxone Act of 2023: To amend the Public Health Service Act to provide funding for trained school personnel to administer drugs and devices for emergency treatment of known or suspected opioid overdose	Jeff Merkley	9/27/2023 Read twice and referred to the Committee on Health, Education, Labor, and Pensions
	S 3070	Youth Prevention and Recovery Reauthorization Act: A bill to reauthorize funding to hospitals, local governments, and other eligible entities to increase access to opioid addiction medications for adolescents and young adults who have been diagnosed with opioid use disorder, improve local awareness among youth of the risks associated with fentanyl, and train healthcare providers, families, and school personnel on the best practices to support children and adolescents with opioid use disorder. Reauthorize the Youth Prevention and Recovery Initiative, which has provided three-year grants to youth-focused entities for carrying out substance use disorder treatment, prevention, and recovery support services. The legislation also expanded an existing youth substance use disorder program to include services for young adults as well as children and adolescents.	Gary Peters	10/18/23 – Introduced; Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	HR 3721	United States Postal Service Shipping Equity Act: This bill authorizes the mailing of alcoholic beverages by certain entities in accordance with the delivery requirements otherwise applicable to a privately carried shipment; directs the U.S. Postal Service (USPS) to prescribe regulations (1) requiring direct delivery to a duly authorized agent at a postal facility or to the addressee, who must be at least 21 years of age and present a valid, government-issued photo identification at the time of delivery; (2) prohibiting such alcoholic beverages from being for resale or any other commercial purpose; and (3) requiring such entity to certify that the mailing is not in violation of applicable laws or regulations and to provide other information as directed by the USPS.	Newhouse	5/25/2023 Referred to the Committee on Oversight and Accountability, and in addition to the Committee on the Judiciary

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	S. 3006	SAFE in Recovery Act: To create a Task Force amongst government agency stakeholders to create and ensure a streamlined process for families to receive comprehensive wraparound services if a member is undergoing SUD Treatment	Ed Markey	10/03/2023 - Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
	HR 6038 & S. 3108	PROTECT Act - Preventing Opportunities for Teen E-Cigarette and Tobacco Addiction Act: bill to amend the Public Health Service Act to provide for and fund a Reducing Youth Use of E-Cigarettes Initiative- 1. Research on products, patterns of use, initiation of cigarette use following vaping, demographic patterns of use, means of access, media and exposure to advertising, marketing, reasons for use, extent of dependency, quitting resources for youth, nicotine levels and biomarkers of exposure. 2. Collaboration to develop medical and treatment guidance on youth nicotine interventions and identifying promising strategies to prevent and reduce use, develop new cessation methods and quit support 3. Increasing access to treatment, and identifying effective messaging.	Debbie Wasserman-Schultz	10/25/2023 - Referred to the House Committee on Energy and Commerce 11/3/23 – Referred to the Committee on Health
	HR 6251	HERO Act: To establish a grant program to provide schools with opioid overdose reversal drugs, to direct schools receiving Federal funds to report to certain Federal information systems any distribution of an opioid overdose reversal drug	Adam Schiff	11/06/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on Education and the Workforce
	HR 6243	To direct the Secretary of Labor to issue an occupational safety and health standard that requires employers to keep opioid overdose reversal drugs onsite and develop and implement training plans to respond to drug overdose emergencies and to amend the Omnibus Crime Control and Safe Streets Act of 1968 to expand the grants authorized under the Comprehensive Opioid Abuse Grant Program.	Ruben Gallego	11/06/2023 - Referred to the Committee on Education and the Workforce, and in addition to the Committee on the Judiciary
	HR 6144	Combatting Fentanyl Poisonings Act of 2023: To award grants to State and local law enforcement agencies to assist such agencies in planning, designing, establishing, or operating locally based, proactive programs to combat the sale, marketing, or distribution of controlled substances	Mike Garcia	11/01/2023 - Referred to the House Committee on the Judiciary
	HR 5905 & S 3039	Federal Kratom Consumer Protection Act : To require Congress to hold at least one hearing regarding Kratom and potential dangers, benefits, contribution to drug overdose deaths, and other topics. Within 2 years, the FDA must establish safety guidelines and testing as compatible with other adult dietary supplements.	Mark Pocan	10/25/2023 - Referred to the House Committee on Energy and Commerce
	HR 5592	Validating Independence for State Initiatives on Organic Natural Substances Act of 2023: To prohibit the use of Federal funds from preventing a State from implementing their own laws with respect to psilocybin.	Robert Garcia	09/20/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 6028	States Reform Act of 2023: A bill to remove Cannabis from the list of Scheduled Substances, defer to states on prohibition, and decriminalize cannabis offenses.	Nancy Mace	10/25/2023 - Referred to the Committee on Energy and Commerce, and in addition to the Committees on the Judiciary, Natural Resources, Agriculture, Transportation and Infrastructure, Armed Services, Ways and Means, Small Business, Veterans' Affairs, Oversight and Accountability, Education and the Workforce, aviation, coast guard and maritime transportation, Highways and transit, railroads, pipelines, and hazardous materials, and Foreign Affairs
	HR 5601	MORE Act: A bill that removes marijuana from the list of scheduled substances under the Controlled Substances Act and eliminates criminal penalties for an individual who manufactures, distributes, or possesses marijuana. Also 1. requires the Bureau of Labor Statistics to regularly publish demographic data on cannabis business owners and employees, 2. establishes a trust fund to support various programs and services for individuals and businesses in communities impacted by the war on drugs, 3. imposes an excise tax on cannabis products produced in or imported into the United States and an occupational tax on cannabis production facilities and export warehouses, 4. makes Small Business Administration loans and services available to entities that are cannabis-related legitimate businesses or service providers, 5. prohibits the denial of federal public benefits to a person on the basis of certain cannabis-related conduct or convictions, 6. prohibits the denial of benefits and protections under immigration laws on the basis of an event (e.g., conduct or conviction) relating to possession or use of cannabis that is no longer prohibited under the bill, 7. establishes a process to expunge convictions and conduct sentencing review hearings related to federal cannabis offenses, and 8. directs the Government Accountability Office to study the societal impact of cannabis legalization.	Jerrold Nadler	09/21/2023 - Referred to the Subcommittee on Highways and Transit
	HR 3721	United States Postal Service Shipping Equity Act: This bill authorizes the mailing of alcoholic beverages by certain entities in accordance with the delivery requirements otherwise applicable to a privately carried shipment; directs the U.S. Postal Service (USPS) to prescribe regulations (1) requiring direct delivery to a duly authorized agent at a postal facility or to the addressee, who must be at least 21 years of age and present a valid, government-issued photo identification at the time of delivery; (2) prohibiting such alcoholic beverages from being for resale or any other commercial purpose; and (3) requiring such entity to certify that the mailing is not in violation of applicable laws or regulations and to provide other information as directed by the USPS.	Dan Newhouse	5/25/2023 Referred to the Committee on Oversight and Accountability, and in addition to the Committee on the Judiciary

	S. 3579 & H.R. 6982	The GRIT Act would set aside a portion of the federal sports excise tax revenue to fund programs for gambling addiction prevention, treatment, and research. The GRIT Act provides direct and vital support to state health agencies and nonprofits addressing problem gambling. It also creates investment in best practices and comprehensive research at the national level.	Richard Blumenthal (S) Andrea Salinas (HR)	Senate: 01/11/2024 – Introduced, Read twice and referred to the Committee on Health, Education, Labor, and Pensions House: 01/11/2024 – Introduced, Referred to the House Committee on Energy and Commerce
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LEGISLATIVE CONCERNS

LOCAL THREATS AND CHALLENGES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	End of PHE Medicaid Beneficiary Renewals	MDHHS has started mailing renewal letters for Medicaid redeterminations following the end of the Public Health Emergency . Emergency Medicaid coverage protection extended during the COVID-19 pandemic expired on April 1st. This could result in up to 400,000 Michigan residents losing Medicaid coverage.		www.Michigan.gov/2023BenefitChanges Medicaid review could drop 400,000 Michigan residents from coverage Bridge Michigan

MISCELLANEOUS UPDATES

MISCELLANEOUS UPDATES				
	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	FY24 State Budget Recommendations	<p>Governor Whitmer’s FY2024 State Budget Recommendation includes the following areas related to behavioral health and SUD:</p> <ul style="list-style-type: none"> • \$300 million for student mental health to ensure students’ needs can be identified and provided with the right support. • \$210.1 million for Direct Care Worker Wages (\$74.5 million general fund) to increase wage support to direct care professionals providing Medicaid behavioral health services, care at skilled nursing facilities, community-based supports through MI Choice, MI Health Link, and Home Help programs and in-home services funded through area agencies on agencies. These funds support an increase that would average about \$1.50 / hour (10%) • \$5 million for behavioral health recruitment supports (general fund) that would fund scholarships and other recruiting tools to attract and support people interested in training to become behavioral health providers. 		<p>Access budget material at:</p> https://www.michigan.gov/budget
	MIHealthyLife	In fall 2023, MDHHS will ask Medicaid health plans for new contract proposals to provide health services to people enrolled in Medicaid, including Behavioral Health. MDHHS is providing a survey for stakeholders to submit ideas to make the program better and collecting input about potential changes to the new contracts.		MIHealthyLife (michigan.gov)

	ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
	CMS Plan for States to Use Medicaid for Incarcerated Substance Use Treatment	Recently, the Director of the Office of National Drug Control Policy (ONDCP), Dr. Rahul Gupta, announced that all federal prisons will offer medication-assisted treatment (MAT) for substance use disorder by this summer. Additionally, Dr. Gupta noted that the Centers for Medicare and Medicaid Services (CMS) will release guidance to support states in using Medicaid 1115 waivers to cover substance use treatment for people who are incarcerated		A disappointing report card for primary care - POLITICO (relevant information is about halfway down the page)
	Post-Pandemic Telehealth Policy	The recently released Michigan Medicaid bulletin reflects all of the recommendations of the CMHA Behavioral Telehealth Advisory Group		Final Bulletin MMP 23-10-Telemedicine.pdf (govdelivery.com)
	Biden-Harris Administration Announce New Proposed Parity Rules	The Biden Administration's new proposal would significantly strengthen the nation's parity enforcement and ensure that people with mental health and substance use conditions do not face arbitrary barriers to receiving care. The proposed rule is aimed at improving health plan compliance with the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA), which requires health plans to provide mental health and substance use coverage at parity with medical/surgical coverage. A public comment period on the proposed rule will follow.		7/25/2023: Departments of Labor, Health and Human Services, Treasury announce proposed rules to strengthen Mental Health Parity and Addiction Equity Act HHS.gov

Elected Officials

FEDERAL			
NAME		NATIONAL OFFICE CONTACT INFORMATION	LOCAL OFFICE CONTACT INFORMATION
US Senate	Debbie Stabenow	731 Hart Senate Office Building Washington, D.C. 20510-2204 Phone: (202) 224-4822	1025 Spaulding Avenue Southeast Suite C Grand Rapids, MI 49546 Phone: (616) 975-0052
US Senate	Gary Peters	Hart Senate Office Building Suite 724 Washington, D.C. 20510 Phone: (202) 224-6221	110 Michigan Street NW Suite 720 Grand Rapids, MI 49503 Phone: (616) 233-9150
US Representative	Bill Huizenga	2232 Rayburn HOB Washington, D.C. 20515 Phone: (202) 225-4401	170 College Ave. Suite 160 Holland, MI 49423 Phone: (616) 251-6741
US Representative	Hillary Scholten	1317 Longworth House Office Building Washington, DC 20515 Phone: (202) 225-3831	110 Michigan Street NW Grand Rapids, MI 49503 Phone: (616) 451-8383
US Representative	John Moolenaar	246 Cannon House Office Building Washington, DC 20515 Phone: (202) 225-3561	8980 North Rodgers Court Suite H Caledonia, MI 49316 Phone: (616) 528-7100

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SUD PREVENTION

SUMMARY OF ACTIVITIES

FY21-23

An overview of substance use disorder (SUD) prevention initiatives supported through the LRE between October 1, 2021 and September 30, 2023 with review of related metrics.

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INTRODUCTION

Background Information:

The following report provides an overview of substance use disorder (SUD) prevention initiatives supported through the LRE during fiscal year 2020/2021 (FY21), 2021/2022 (FY22), and 2022/2023 (FY23). As one of ten Prepaid Inpatient Health Plans (PIHP) in Michigan, the LRE is responsible for managing substance abuse prevention services provided under contract with the Michigan Department of Health and Human Services (MDHHS). The LRE service region includes Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa counties.

Funding to support the initiatives discussed in this report were provided by Block Grant, Public Act 2, and other short-term specialty grants managed by the LRE and dedicated to SUD prevention services. Initiatives supported under the Medical Marijuana Operation and Oversight Grants are not managed by the LRE, however initiatives are referenced throughout this report where they overlap with LRE supported initiatives.

This report provides a record of activities to inform multi-year outcome evaluation for regional prevention services. Data reviewed in this report has been updated as available. The most recent youth survey data available at the time of this report's publication was for school year 2022. An addendum to this report will be provided once 2024 data is available.

Prevention providers funded during this time period include:

OnPoint - *formerly Allegan County Community Mental Health Services*
Arbor Circle (AC)
Community Mental Health of Ottawa County (CMHOC)
District 10 Health Department (D10HD)
Family Outreach Centers (FOC)
Kent County Health Department (KCHD)
Network 180 (N180)
Muskegon Community Health Project, Trinity Health (MCHP)
Ottawa County Department of Public Health (OCDPH)
Public Health Muskegon County (PHMC)
Wedgwood Christian Services (WW)

*The acronyms provided above will be referenced throughout this report.

SERVICES PROVIDED

Persons Served: 299,822

Between FY21 and FY23, almost 300,000 individuals received prevention services throughout the region.

During FY21, providers began offering many services using a virtual format rather than in-person due to Covid-19. For many initiatives, virtual programming has continued where it was found to be beneficial.

Persons Served	FY21	FY22	FY23
Allegan	8,660	10,356	10,922
Kent	137,260	41,156	36,131
Lake, Mason & Oceana	4,219	4,860	6,686
Muskegon	5,278	3,801	7,986
Ottawa	7,073	8,392	7,103
Total	162,490	68,565	68,828

During FY21, prevention providers proactively responded to limitations caused by COVID-19. Prevention providers digitized existing programs and resources that schools that could use in remote settings which ensured service continuation. Providers remained flexible and accommodating to ensure communities received the services needed as situations evolved.

Estimated Reach: 16.3M

Estimated reach is collected for activities where when an official count of persons is not possible. Providers estimate that they have achieved more than 16 million impressions through campaigns such as TalkSooner, Above the Influence, and others. Estimated reach for the LRE region totaled 3M in FY21, 10.9M in FY22, and 2.4M in FY23. The increased reach during FY22 was likely due to additional time-limited specialty grants, many of which were used to support marketing campaigns.

Hours of Service: 34,463

More than 34,000 hours of service were provided in the following strategies:

	FY21	FY22	FY23
Education	2,969	3,822	2,902
Community-Based	5,329	4,306	5,025
Environmental	3,664	705	980
Information Dissemination	561	212	623
Student Assistance/ Prevention Assmt	632	664	979
Alternative	383	168	541
Total	13,537	9,877	11,049

Prevention Goal Areas:

Efforts throughout the region are developed to align with the LRE's regional prevention strategic plan. A corresponding logic model provides a framework for how local efforts across the region work together to cumulatively impact regional priorities. Each provider uses local data to determine which priorities of the LRE strategic plan to address within their area.

Priorities established in the strategic plan, the targeted intervening variables for each, and the page on which you will find information about each are as follows.

Reduce Underage Alcohol Usep.4

- Reducing youth access
- Increasing awareness of consequences
- Promoting accurate perceptions of use

Reduce Underage Marijuana Usep.9

- Reducing youth access
- Increasing perception of risk

Reduce Underage Tobacco Use, inc. Vaping p.12

- Reducing youth access
- Increasing perception of risk

Reduce Opioid and Prescription Drug Misusep.15

- Reducing youth access
- Increasing perception of risk

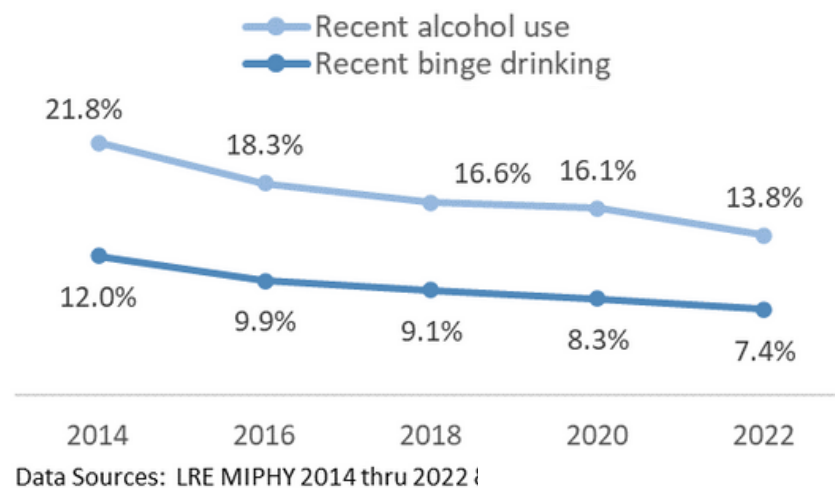
Reduce Early Initiation of Substance Usep.18

- Increase perception of risk
- Association with positive peers
- Promote positive family dynamics
- Coping with life stressors

ALCOHOL

Within the LRE region, the rate of high school students reporting recent alcohol use decreased between 2020 and 2022 to a low of 13.8%. Rates of recent binge drinking also decreased to a low of 7.4% in 2022. Childhood and underage drinking use has been declining in the LRE region and continues to be lower than statewide rates with 25.4% of high school (HS) students state-wide.

Recent Alcohol Use Among HS Students, LRE Region



To address underage drinking, the LRE has developed strategies targeting the following:

Easy Access: In 2020, more than half (59%) of HS students in the region, reported it would be 'sort of' or 'very easy' to get alcohol. The rate remained stable in 2022 at 58%.

Low Perception of Risk: In 2020, 29.2% of HS students in the region reported that drinking 5+ drinks once or twice each weekend is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 30.4%.

Perception of Peer Use: In 2020, more than 1-in-4 HS students (26.6%) reported believing that more than half of the students in their grade had drunk alcohol in the past month, when only 16% actually had. The rate worsened slightly in 2022 (28.7%).

ACCESS: SOCIAL

Reduce access to alcohol in the home, and from family members.

Regional Strategies:

Increase awareness of social host laws and the legal consequences of providing alcohol to a minor for parents & college students age 21+.

Incorporate parent responsibility info into existing programs serving parents throughout the region.

Enhance enforcement for underage drinking parties to raise visibility of enforcement and encourage community reporting.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Increase awareness of social host laws and the legal consequences of providing alcohol to a minor for parents & college students age 21+.		✓ FY21		✓ FY21			✓
Incorporate parent responsibility info into existing programs serving parents throughout the region.		✓ FY21		✓ FY21		✓ FY22	✓
Enhance enforcement for underage drinking parties to raise visibility of enforcement and encourage community reporting.		✓ FY21		✓ FY21			✓

Local Programming:

- **Kent County, N180:** All populations targeted through Above the Influence Campaign activities.
- **Mason County, D10HD:** Created and distributed post card with social hosting laws and consequences to parents through various methods.
- **Oceana County, D10HD:** Created and distributed post card with social hosting laws and consequences to parents through various methods.
- **Ottawa County, AC:** Through the ROADD Task Force the following initiatives were implemented:
 - Education on the consequences of providing alcohol to minors in partnership with local colleges and universities through informational resources for parents provided to schools.
 - Party patrols in the fall and spring resulted in 99 law enforcement encounters in FY21 where they issued citations and provided prevention education. This program continued in FY22.
 - Distributed information on the risks of alcohol and marijuana use on youth bodies at events, in partnership with teen driving schools, and through the schools.
 - Offered information to retailers.

ACCESS: RETAIL

Ensure alcohol retailers do not sell to underage individuals.

Regional Strategies:

Support and education for retailers to prevent sales to minors through responsible beverage and vendor education.

Safe Prom and Graduation initiatives to inform retailers of upcoming local events to be vigilant to avoid alcohol sales to youth. Often paired with increased enforcement efforts.

Partner with law enforcement to conduct compliance checks.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Support and education for retailers to prevent sales to minors through responsible beverage and vendor education.	✓	✓		✓ FY21	✓		✓
Safe Prom and Graduation initiatives to inform retailers of upcoming local events to be vigilant to avoid alcohol sales to youth. Often paired with increased enforcement efforts.		✓			✓		✓
Partner with law enforcement to conduct compliance checks.	✓	✓			✓		✓

Local Programming:

- **Allegan County, OnPoint:** Provided in-person TIPS training for retailers and partnered with law enforcement for compliance checks.
- **Kent County**
 - KCHD: Partnered with Kent County Sheriff Department during DYTUR activities.
 - N180: Above the Influence Campaign activities including Sticker Shock which provides messaging to deter social provision of alcohol to minors.
- **Mason County, D10HD:** Referred area businesses interested in training to TIPS online training resources.
- **Muskegon County**
 - PHMC: Provided TIPS training and technical assistance for retailers who had a liquor control violation or requested additional information.
 - MCHP: ALI coalition members supported retailer education, compliance checks, and recognize retailers that successfully restrict sales to minors.
- **Ottawa County, AC:** ROADD task force offered information to retailers; limited due to COVID-19 in FY21. Safe Prom initiative began in FY22, reaching over 200 alcohol retailers and 400 other businesses associated with prom to prevent alcohol sales to minors annually.

PERCEPTION OF RISK

Increase awareness of the legal consequences of underage alcohol use.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Increase efforts and visibility of Minor-In-Possession (MIP) enforcement at prom, graduations, and underage drinking parties.					✓		✓
MIP brochure distribution with local law enforcement.							✓
FaceTheBook Campaign					✓		

Note: Additional efforts targeting perception of risk included under Early Age of Onset.

Local Programming:

- **Muskegon County**
 - MCHP: Annual campaigns for middle and high schools through media contest promoting the FacetheBook Campaign. Coordinated by MCHP's coalitions.
 - PHMC: In FY23 began working with EXIT and their MIP Program in efforts to get messaging out to youth on the risks.
- **Ottawa County, OCDPH:** Developed a flyer outlining MIP consequences, amnesty laws, and Good Moral Standing criteria for college program admission.

SOCIAL NORMS:

Increase visibility of youth who choose to not use substances and work to offset the common youth perception that most of their peers drink alcohol.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Engage area HS groups in development and distribution of normative messaging.		✓ FY21			✓		✓
Train local youth to promote messaging among their peers.	✓	✓ FY21			✓		
Provide youth leadership development opportunities.	✓	✓			✓		
Support youth-developed messaging.		✓			✓		
Education and messaging to decrease normality of heavy/excessive drinking among adults.	✓ FY22	✓	✓ FY23		✓		✓

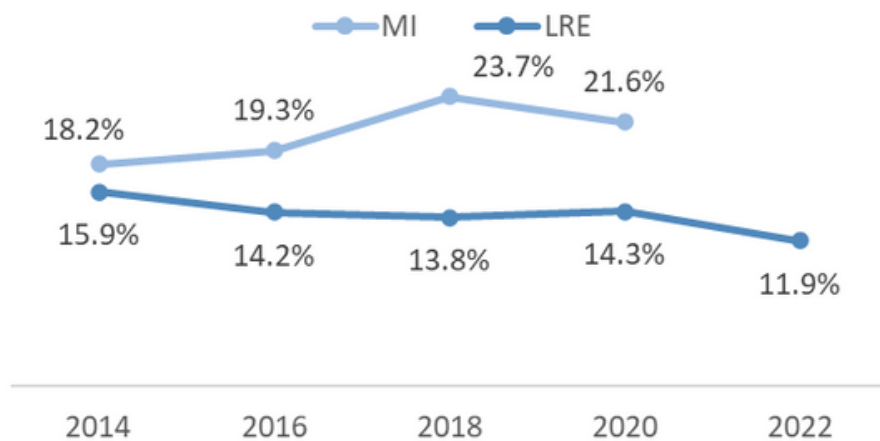
Local Programming:

- **Allegan County, OnPoint:** PAL’s youth attend the Youth-to-Youth Conference.
- **Kent County**
 - AC: Began promoting the "Make Good Choices, Your Future Awaits" materials in FY22 through various events. In addition, began a campaign where youth share why they don't use substances and how they cope with mental health challenges.
 - FOC: leadership opportunities focused on programming that strengthened the leadership skills of the individual students.
 - KCHD: Adult Heavy Drinking Campaign, 'About Last Night". Messaging released just before holidays. Campaign materials were refreshed in FY22 and are promoted through digital media, billboards, bud ads, Johnny ads, and display ads with partnering companies.
 - N180: Above the Influence Campaign.
 - WW: Teens provide input into awareness campaigns at their school each year. They are encouraged to submit blogs and videos that address the challenges teens face and positive ways to respond. The blogs and videos are then posted on the website and social media pages.
- **Lake County, D10HD:** D10HD: In FY 23, created a targeted campaign that promoted positive messaging regarding most people choosing not to drink in Lake and Mason County.
- **Muskegon County, PHMC:** Messaging distributed re. alcohol use among older adults.
- **Ottawa County**
 - AC: Provide educational information about serving size in partnership with our colleges and universities. Partnered with SLIC youth coalition to develop messaging that was distributed throughout the year. Safe Summer promotion through driving schools with 800 post cards mailed.
 - OCDPH: Prime for life programming provided.

MARIJUANA

In 2020, 14.3% of HS students in the LRE region reported recent use of marijuana, decreasing to 11.9% in 2022. Rates remain lower than state-wide and remained relatively stable following legalization of recreational marijuana use in 2019.

**Recent Marijuana Use Among HS Students,
LRE Region vs. Michigan**



Data Sources: LRE: MIPHY 2014 - 2022 & MI: YRBS 2013 - 2019

To address underage marijuana use, the LRE has developed strategies targeting the following:

Easy Access: In 2020, almost half (47%) of HS students in the region, reported it would be 'sort of' or 'very easy' to get marijuana. The rate decreased by 10% in 2022 to 43%.

Low Perception of Risk: In 2020, more than half (55%) of HS students in the region reported that using marijuana once or twice per week is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 55%.

REDUCE YOUTH ACCESS

Ensure proper storage of marijuana in the home to prevent youth access and advocate for appropriate regulatory oversight of marijuana sales and distribution.

Regional Strategies:

Promote safe storage of marijuana in the home through education of consumers and distribution of lockboxes to medical marijuana consumers.

Advocate for appropriate regulatory oversight including standards for packaging, distribution, sales, and adequate monitoring for compliance.

Promote local policies that restrict or disallow retailer density, dispensaries near places frequented by youth such as schools and churches, and/or free samples and community events with marijuana.

Develop and promote model policies for local adoption.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Promote safe storage of marijuana in the home through education of consumers and distribution of lockboxes to medical marijuana consumers.	✓	✓			✓	✓	✓
Advocate for appropriate regulatory oversight including standards for packaging, distribution, sales, and adequate monitoring for compliance.					✓		
Promote local policies that restrict or disallow retailer density, dispensaries near places frequented by youth such as schools and churches, and/or free samples and community events with marijuana.					✓		✓
Develop and promote model policies for local adoption.				✓	✓		✓ FY22

Local Programming:

- **Allegan County, OnPoint:** Distributed several hundred lock bags each year to local dispensaries for distribution to families. Schools were also provided bags to distribute as needed.
- **Kent County, KCHD:** Worked on Medical marijuana efforts, including a comprehensive safe storage messaging campaign and in FY23 began distribution of locked storage bags throughout the county. LARA funds support both.
- **Mason County, D10HD:** Hosted speakers for city officials to educate re. marijuana policies.
- **Muskegon County, PHMC:** Distributed lock bags to provisioning centers along with other youth access messaging. Worked with Michigan Prevention Association to assure legislators are aware of issues and needs for regulation. Worked with local municipalities to consider long term public health impact of marijuana use/sales in public spaces and neighborhoods.
- **Oceana County, D10HD:** Promoted and distributed lock boxes for safe storage in the home.
- **Ottawa County**
 - AC: Promoted safe storage and monitoring of marijuana in the home. Hosted a training around marijuana policy for local municipalities in FY21.
 - OCPHD: Provided lock bags free to the public and distributed at multiple locations. Disseminated information promoting effective marijuana dispensary policy (re. advertising, location and staff training).

PERCEPTION OF RISK

Increase awareness of the risks of marijuana use.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Incorporate marijuana info into existing educational efforts, including Prime For Life's new curricula component for marijuana.	✓	✓	✓ FY23		✓	✓ FY22	
Provide information on the risks of marijuana use while pregnant.	✓	✓		✓	✓	✓	✓
Raise awareness of the risks of driving after using marijuana.		✓		✓	✓	✓ FY21 & 22	✓

Note: Additional efforts targeting perception of risk included under Early Age of Onset.

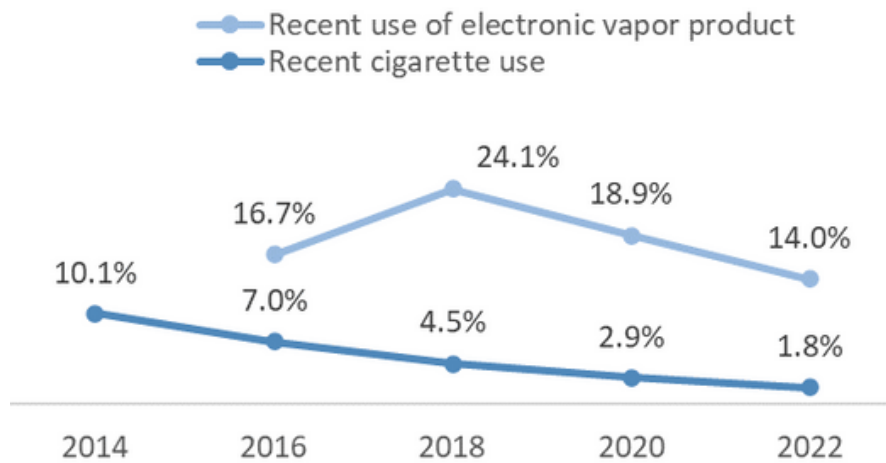
Local Programming:

- **Allegan County, OnPoint:** Brochures were created and distributed on marijuana and pregnancy. Prime for Life programming provided at local middle schools and high schools when youth are caught with marijuana at school or school events.
- **Kent County**
 - AC: School groups using the Prime for Life curriculum for youth who self-identified as wanting to avoid risky behaviors despite primary peer groups engaging in harmful use behaviors.
 - KCHD: In FY22, COVID SUD funds were used to develop a campaign on the risks of driving under the influence of marijuana, alcohol or pills; with 8 messages were designed.
 - N180: Above the Influence campaign.
 - WW: Risks covered in Project SUCCESS and small group education including suspension reduction groups for students caught vaping and/or using marijuana.
- **Lake County, DHD10:** Taught a classroom session on the dangers of marijuana. Distributed fact sheets that were distributed at back to school night and family meals month.
- **Mason County, D10HD:** Hosted a presentation for coalition members on the impact of marijuana legalization on communities. Staff provided webinar training on risks of use while pregnant.
- **Muskegon County, MCHP:** "Shattering the Myths" campaign of Alliance for Marijuana Prevention Coalition conducted annually within the Muskegon Area School Districts.
- **Oceana County, D10HD:** Press release and social media messaging on risks of driving under the influence of substances, including marijuana with emphasis during National Driving Impaired Awareness Month in FY22. Materials about risks of using marijuana while pregnant provided at tabling events and in parent resource bags.
- **Ottawa County**
 - AC: In FY22 promoted the "Don't Drive Buzzed" campaign to raise awareness of driving under the influence of marijuana or alcohol.
 - OCDPH: Distributed educational materials and provided marijuana lock bags.

TOBACCO

In 2020, only 2.9% of HS students in the region reported recent smoking, lower than state-wide (4.5%) and decreasing substantially in recent years. Rates of HS students reporting recent vaping has been decreasing since a high of 24.1% in 2018 to 18.9% in 2020 and 14.0% in 2022.

Recent Tobacco Use Among HS Students, LRE Region



Data Sources: LRE: MIPHY 2014-2022

To address underage use of tobacco and vaping products, the LRE has developed strategies designed to address the following:

Easy Access: In 2020, 38% of HS students in the region, reported it would be 'sort of' or 'very easy' to get cigarettes, improving substantially in 2022 to 20%. In FY20, 1-in-10 tobacco retailers (9.5%) were willing to sell to an underage decoy during compliance checks, decreasing to 5.4% in 2021, then increasing again in 2022 to 9.9%.

Low Perception of Risk: In 2020, almost 1-in-5 (18%) of HS students in the region reported that smoking one or more packs per day is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 17%.

Regional data is not available for vaping, however data was collected in Ottawa and Lake counties. In Ottawa County in 2019, 24% of Ottawa HS students reported vaping is low risk, improving in 2021 to 20.1%. In Lake County, 39% of HS students (in 2020) reported that vaping is low-risk, in 2022 this worsened to 47%.

REDUCE YOUTH ACCESS

Ensure retailers do not sell tobacco products to persons under age 21.

Regional Strategies:

Utilized Regional No Cigs For Our Kids Campaign which consists of year-round law enforcement compliance checks for retailers, education and support for retailers. Consistent branding is used to enhance visibility.

Incorporated efforts to ensure retailers do not sell vaping products to minors. *

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
✓	✓	✓	✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓

Youth Tobacco Access: The Federal Synar Amendment requires states to enact and enforce laws prohibiting the sale of tobacco products to individuals under the age of 18. In December of 2019 federal law was enacted to restrict tobacco sales to anyone under the age of 21. Each state must conduct annual unannounced inspections for a random sample of tobacco retailers and achieve a success rate of at least 80%. If they do not, the state risks loss of up to 40% of the Substance Abuse Prevention and Treatment (SAPT) Block Grant funds. Checks conducted as part of this sample are called Synar compliance checks.

Synar Compliance Rate:

For statewide assessment purposes, a random selection of retailers is provided annually to each PIHP. The sample provides meaningful results statewide, but is too small to provide meaningful results for the region.

Synar Compliance Check Results	FY21	FY22	FY23
# Checks Completed	45	63	49
# Retailers that Refused Sale	38	58	41
Compliance Rate	84.4%	92.1%	83.7%

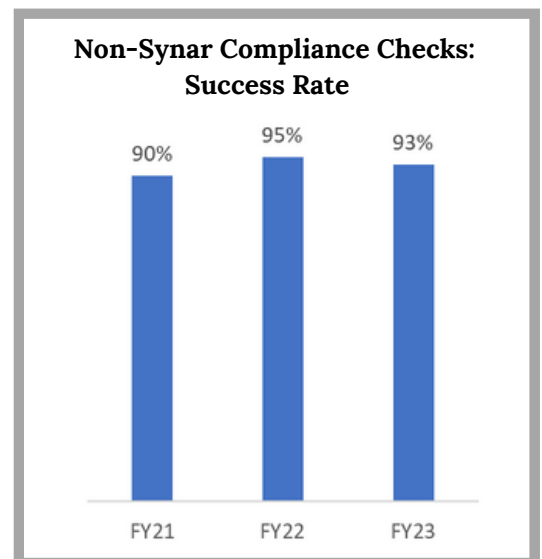
No Cigs For Our Kids Campaign:

To ensure success during the Synar assessment and prevent youth access to tobacco products, the LRE region’s No Cigs for Our Kids Campaign has law enforcement conduct compliance checks throughout the year that result in citations for those who fail plus a vendor education visit. These checks are referred to as non-Synar compliance checks.

All retailers that pass a non-Synar compliance check are mailed a letter notifying them of the results along with a Certificate of Compliance. All retailers that fail receive a vendor education visit and the clerk is issued a citation. Corporate headquarters is also notified of the results for retailers that are part of a larger corporation.

In addition, a minimum of 25% of retailers in each county receive a vendor education visit annually.

Of the more than 900 tobacco retailers region-wide, a large proportion receives a compliance check each year; 27% in FY21, 49% in FY22, and 46% in FY23. These checks resulted in a compliance rate of 90% or higher each year during the reporting period as shown in the chart to the right.



PERCEPTION OF RISK

Educate youth on risks of tobacco use:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Education on risks of tobacco use, including vaping.	✓	✓	✓	✓	✓	✓	✓
Incorporate info on e-cigs into educational programming, materials and presentations.	✓	✓	✓	✓	✓		✓
Increase Parent Communication:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Presentations, workshops, and informational materials to help parents and caregivers understand the health risks of vaping, identify use in their child, and communicate risks to their youth.		✓					✓
Increase consequences for vaping:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Promote enhanced school policy and enforcement for vaping.							
Develop model policies regarding vaping and promote adoption.							
Support school personnel in identifying vaping use, provide appropriate consequences, and support youth who vape.					✓		

Local Programming:

- **Kent County**

- KCHD: Updated material for all programming with current info. Vape Education classes for parents and MS/HS students. In FY23, trained school personnel to provide the program, CATCH My Breath.
- N180: Provided information through ATI.
- WW: Info on risks of vaping included in Project SUCCESS, small group education, & parent education.

- **Lake County, D10HD:** Offered a classroom education session on the dangers of vaping and purchased quitting resources to distribute to youth.

- **Muskegon County**

- MCHP: Annual campaign with most districts in the county. FaceTheBook campaign incorporated vaping information in FY22.
- PHMC: Included vaping in tobacco outreach efforts. Provided model ordinances for local municipalities and helped to develop compliance check efforts with law enforcement. In FY22 added vaping education for students; also coordinated a vape disposal program.

- **Oceana County, D10HD:** Provided educational sessions for youth caught vaping at school and virtual vaping presentations for youth for schools. In FY22 provided Vape Educate licenses to schools as an alternative to suspension. Partnered with TOPPC youth to present to MS students. In FY23, Incorporated the risks of vaping & tobacco use into MS life skills classes.

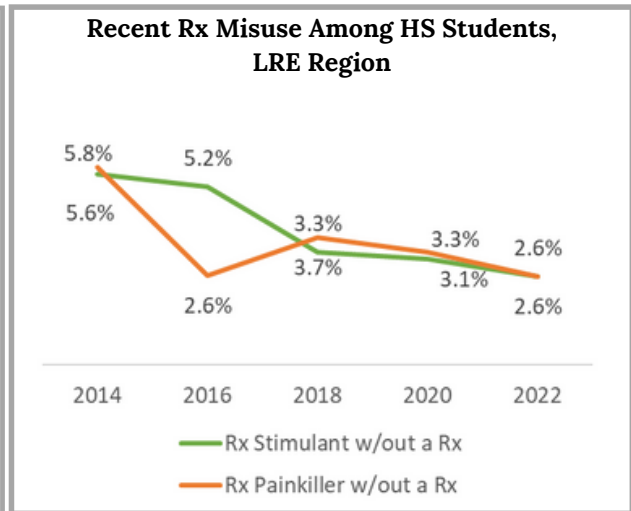
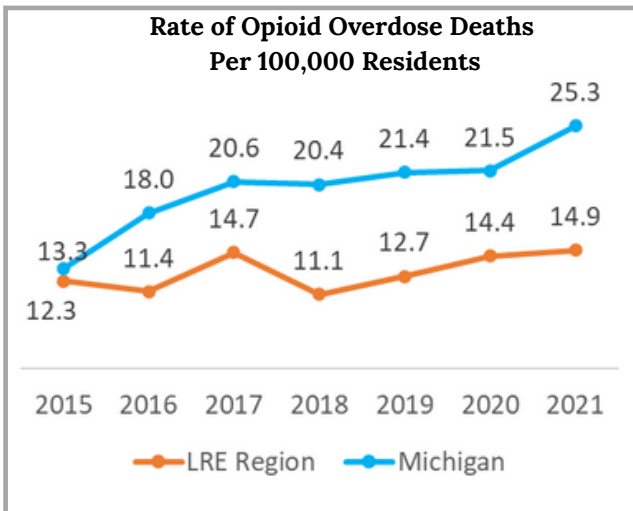
- **Ottawa County**

- AC: Provided info on My Life, My Quit including social media ads in FY21. Info on vaping provided in all youth and adult programming. Promoted the virtual teen room and promoted vape disposal.
- OCDPH: Vape Education class provided in FY21. In FY22 supported school staff to provide vape education to students during detention, implemented in Holland and Hudsonville public schools.

OPIOID AND PRESCRIPTION DRUG MISUSE

In 2021, there were 197 deaths in the LRE region due to opioid related overdoses (prescription and illicit). The rate of opioid overdose deaths has been increasing in the region since 2018 but remains lower than state-wide.

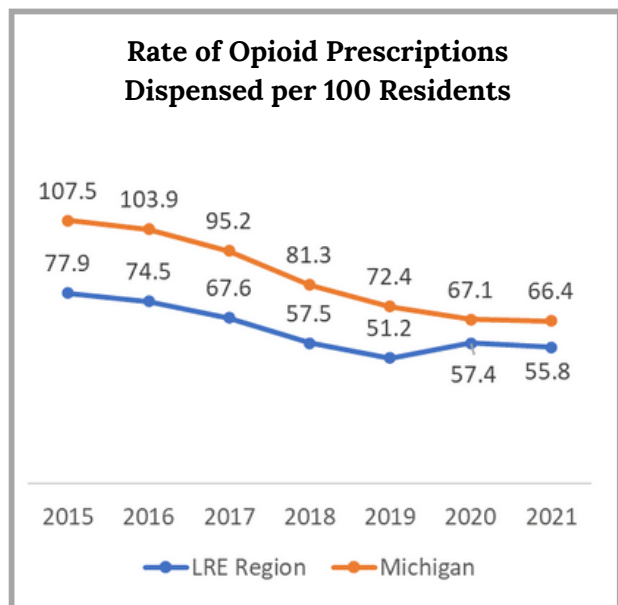
Prescription drug (Rx) misuse among HS students has decreased in recent years to a low of 3.1% for Rx stimulants and 3.3% for Rx painkillers in 2022.



To address opioid misuse, the LRE has developed strategies targeting the following:

Reduce Youth Access: The rate of opioid prescriptions dispensed has been decreasing statewide since 2018 but have remained relatively stable in the LRE region. In 2020 rates varied greatly by county with the lowest in Ottawa (44.6) and Kent (50.2) and the highest in Mason (89.0) and Oceana (88.3%).

Low Perception of Risk: In 2020, 1-in-5 (21.3%) HS students reported that taking a prescription drug not prescribed to you is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 20.9%.



REDUCE YOUTH ACCESS

To reduce over-prescribing and educate about storage and disposal of medications.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Education and support for pharmacists and physicians to support safe prescribing, promote disposal, identification and referral to treatment.			✓		✓		✓
Increase proper disposal of medications through disposal opportunities and awareness of the importance of proper disposal.	✓		✓	✓	✓	✓	✓
Education and resources to support parents to manage, monitor, and dispose of medications in the home.	✓		✓	✓	✓	✓	✓
Raise awareness of the risks and legal consequences of sharing prescribed medications.		✓					

Local Programming:

- **Allegan County, OnPoint:** Safe disposal locations are promoted at all events and brochures are distributed. Also promote safe syringe disposal at these locations.
- **Kent County**
 - AC: In FY22, developed and distributed approximately 40 packets to schools on the impact of youth substance use disorder.
 - KCHD: In FY23, offered education through multiple curriculums for student’s 6th – 12 grades and parents. Prevention messaging campaign about using pills and driving, and a campaign for 14–25-year-olds about prescription meds.
- **Mason County, D10HD:** Supported household hazardous waste event in FY21. Created and distributed mailers to county residents noting proper disposal methods and local options for disposal. Social media posts on storage and disposal.
- **Muskegon County**
 - MCHP: Host take back events and permanent take backs disposal boxes at all law enforcement agencies and Trinity pharmacies.
 - PHMC: Created MAPS awareness campaign; supported pharmacies to advertise use of system. Provided ad printing, staffing, & distribution for local collection events. Lock box exchange program.
- **Oceana County, D10HD:** Host drug take back events and provided educational materials on proper storage and disposal of medications. Distributed Dispose Rx packets for in FY21. In FY 22 provided medication lock boxes. Paid advertising to promote safe storage and medication lock box resources.
- **Ottawa County**
 - AC: Partnered with local municipalities to promote the prescription drug disposal boxes and take back events in water bills. In FY22 promotion increased with social media ads. Communicated to parents about managing and monitoring prescription medication.
 - CMHOC: Through the Opiate Taskforce, increased permanent disposal sites. Provide medication lock boxes to community members to safely lock prescriptions. Developed a list of Suboxone providers in Ottawa County and provided this list to treatment providers.

PERCEPTION OF RISK

Regional Strategies:

Develop materials for schools and organizations to share with youth and families on signs, symptoms, consequences of RX abuse, and resources for youth who need help.

Incorporate information into presentations for health education classes and other community presentations.

Promote the risks of Rx drug misuse through the Talk Sooner Campaign.

Partner with pharmacists to develop and promote information to patients on the risks of Rx opioids.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Develop materials for schools and organizations to share with youth and families on signs, symptoms, consequences of RX abuse, and resources for youth who need help.		✓			✓		
Incorporate information into presentations for health education classes and other community presentations.		✓			✓	✓	✓
Promote the risks of Rx drug misuse through the Talk Sooner Campaign.		✓	✓	✓	✓		
Partner with pharmacists to develop and promote information to patients on the risks of Rx opioids.					✓ FY21		✓ FY21

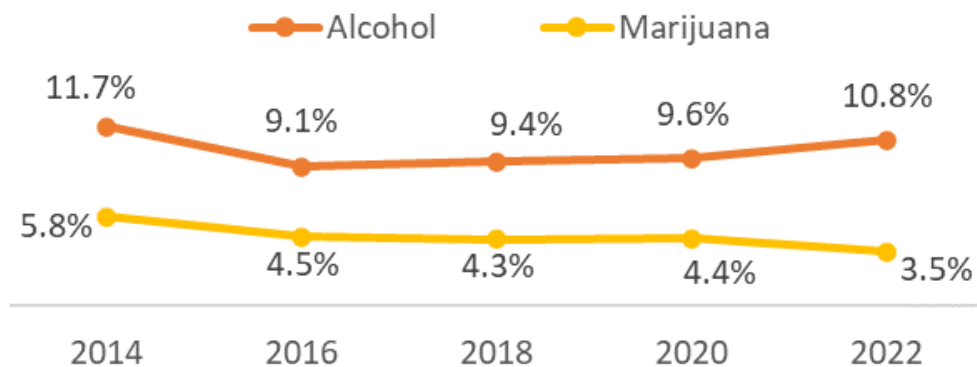
Local Programming:

- **Kent County, N180:** Provided information through ATI campaign and the regional marketing implementation plan.
- **Mason County, D10HD:** Promoted TalkSooner at a variety of events and outreach opportunities. This program includes RX abuse education. Distributed materials at medication take back events with information on risks.
- **Muskegon County, AC:** Included information for parents in parenting classes.
- **Oceana County, D10HD:** Coalition hosted a harm reduction presentation.
- **Ottawa County**
 - AC: Provided information in presentations, parenting classes, Botvin's Transitions Programs, and Raise Your Voice programming.
 - CMHOC: Partnered with a pharmacist to develop a list of dangerous co-prescriptions and disseminated this information to stakeholders in FY21. In FY22, the pharmacist and local providers have taken responsibility for this education.
 - OCDPH: Included in Prevention Education as well as parent education on current trends in drug use.

EARLY INITIATION

Research has consistently found that alcohol or drug use at an early age increases the likelihood of developing addiction as an adult. In 2020, 9.6% of high school students in the LRE region reported use of alcohol before the age of 13 and 4.4% reported use of marijuana before age 13. Across the region, early use of alcohol ranges from a high of 20.4% in Mason, to a low of 7.4% in Oceana. Early use of marijuana ranges from a low of 2.7% in Oceana to a high of 12.6% in Lake County.

HS Students Reporting Use Before Age 13, LRE Region



To delay the onset of substance misuse among youth, the LRE has developed strategies targeting the following:

Low Perception of Risk: Among MS students,

- Two-fifths (41%) reported marijuana use is low risk, remaining stable in 2022 (41%).
- One-third (32%) reported binge drinking once or twice per weekend is low risk in 2020, improving to 29% in 2022.
- One-fourth reported that taking a prescription drug not prescribed to you is low risk in 2020, remaining relatively stable at 23% in 2022.

Positive Peers: In 2020, 72% of students (MS and HS) in the region reported they had at least one close friend who had committed to being drug-free in the past year, remaining relatively stable at 74% in 2022.

Family Dynamics: In 2020, 84% of MS students reported they could ask their mom or dad for help with a personal problem, remaining relatively stable at 83% in 2022.

Family Communication: In 2020, 67% of MS students reported that their parents had ever talked to them about their expectations regarding alcohol and other drugs, remaining stable in 2022 at 68%.

Life Stressors: In 2020, 28% of MS students reported depression in the past year increasing to 30% in 2022. Among HS students, in 2020, 18% reported having seriously considered suicide in the past year, increasing to 20% in 2022.

PERCEPTION OF RISK

Increase awareness of risks among elementary & middle school aged youth

Regional Strategies:

Educate elementary and MS students about immediate and long-term effects of alcohol and other drug use through youth and family programming.

Peer refusal skills training of high school students. In addition, presenting this training to younger students as well as peer counseling.

Provide Drug Risk Teaching Toolkit to teachers to provide relevant content on the risks of youth substance abuse.

Participate in national awareness weeks to promote true alcohol facts and educate youth on the risks of underage drinking (i.e. National Drug Facts Week, Red Ribbon Week, etc.)

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Educate elementary and MS students about immediate and long-term effects of alcohol and other drug use through youth and family programming.	✓	✓	✓ FY22	✓	✓		✓
Peer refusal skills training of high school students. In addition, presenting this training to younger students as well as peer counseling.		✓	✓ FY22		✓		✓
Provide Drug Risk Teaching Toolkit to teachers to provide relevant content on the risks of youth substance abuse.		✓					✓
Participate in national awareness weeks to promote true alcohol facts and educate youth on the risks of underage drinking (i.e. National Drug Facts Week, Red Ribbon Week, etc.)	✓	✓	✓ FY22	✓	✓	✓	✓

Local Programming:

- **Allegan County, OnPoint:** Partner with Fennville and Otsego Middle Schools in Red Ribbon Week., providing resources and education to students.
- **Kent County**
 - AC: Presentations on recognizing risk factors/behaviors. Groups on decision-making and learning ways to identify activities that have a positive impact. Risk information is incorporated into the Total Trek Quest program for MS students.
 - FOC: Used PALS curriculum to teach about the effects of ATOD, inc. refusal skills. Worked to increase community partnerships and expanding service sites in FY22.
 - KCHD: Elementary, MS, and HS LifeSkills Trainings, Yo Puedo Program, Juvenile Detention LifeSkills Training, and Girl's Court Programming. In FY23, MIP education provided as a requirement for all youth referred by the courts with 117 MIPs referrals, and many for vaping. Also, provided peer refusal skills training to students in grades 3 – 12, participating in a SUD curriculum.
 - N180: All strategies incorporated in the ATI mobile experiences. Youth Summit, Mobile Pop Up via prevention on wheels; Classroom Mobile Experiences; ICreate Art Prize; ATI Chronicles, and Faith Based Experience.
 - WW: Project SUCCESS lessons on the effects of alcohol and other drugs as well as strategies for saying no substances is provided to MS and HS based on needs. Promoted Red Ribbon Week and National Drug Facts Week. In FY22 began providing after school prevention programming with focus on employment training was delivered youth from middle and high school, alternative schools, probation, and local clinical service participants. In FY23 also offered info at school staff development days on SUD prevention, trends, and resources available.

PERCEPTION OF RISK

Local Programming, continued:

- **Lake County, D10HD:** Red ribbon mailer promotion. Info distributed as part of a toolkit for parents and kids.
- **Mason County, D10HD:** Provide direct vaping education to students caught vaping. Shared information on social media for National Drug Facts Week. Summer media campaign educating youth on risks of underage drinking. Participated in school homecomings with a table on vaping prevention. Partnered with school counselors to promote vape cessation resources.
- **Muskegon County**
 - AC: Provided Strengthening Families Program (SFP 10-14) and booster session, includes risks of SUD in youth portion. Total Trek Quest program educates youth on the risks of substance use.
 - PHMC Muskegon: Prime for Life, LifeSkills, and working with ALI coalition on national awareness week.
- **Oceana County, D10HD:** Promoted posts for youth on social media to promote national drug facts week. TOPPC youth committee implemented a vaping presentation with MS students including refusal skills in FY22. In FY22 and FY23 social media posts were shared via Facebook and Instagram.
- **Ottawa County**
 - AC: Info about risks of alcohol and other drug use through TTQ and SFP 10-14. Updated and promoted virtual DRTT and in FY22 incorporated a video on mental health skills. Promoted National Drug Facts week, Red Ribbon Week and Prevention week. Provided Raise Your Voice in schools, training HS students who then present to MS students in FY22 and 23.
 - OCDPH: Vape Education classes and Prime for Life for MS and HS students, including peer refusal and risks.

POSITIVE PEERS

Support youth in developing relationships with positive peers.

Regional Strategies:

Peer refusal skills training of HS students. Inc. training younger peers and peer counseling.

Youth leadership opportunities to develop leadership skills and provide opportunities for projects, including Annual Youth Summit.

Project Success- School wide awareness & community outreach activities inc. alcohol free activities, campaigns to increase awareness & student-developed, pro-social messaging.

Yo Puedo Program - Recruitment of high-risk youth, visits to local universities, community service projects and recreational activities.

Strong Voices. Bold Choices - Youth promote messaging to peers

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Peer refusal skills training of HS students. Inc. training younger peers and peer counseling.	✓	✓					✓
Youth leadership opportunities to develop leadership skills and provide opportunities for projects, including Annual Youth Summit.		✓	✓ FY23			✓	✓
Project Success- School wide awareness & community outreach activities inc. alcohol free activities, campaigns to increase awareness & student-developed, pro-social messaging.		✓					
Yo Puedo Program - Recruitment of high-risk youth, visits to local universities, community service projects and recreational activities.		✓					
Strong Voices. Bold Choices - Youth promote messaging to peers		✓					

Local Programming:

- **Allegan County, OnPoint:** In FY23 provided Signs of Suicide curriculum to 10th graders in Wayland and Saugatuck High Schools.
- **Kent County**
 - AC: Presentations provided to MS and HS youth on how to identify mental health red-flags and seek help and support. Presentations targeted to youth who identified that mental health concerns were connected to poor decision making and unhealthy behaviors.
 - N180: Mobilization of thousands of youth via the creation and advancement of the Above the Influence (ATI) -Kent County movement which celebrates the choices youth make daily to live above negative influences around them. Through ATI, the coalition creates spaces for even the most vulnerable to use their voice to make a difference.
 - WW: Student input is sought each year in planning school awareness campaigns encouraging youth leadership opportunities. School-wide awareness campaigns beyond Red Ribbon Week and National Drug Fact Week included Skills for Success at school, and social media safety.
- **Oceana County, D10HD:** Hosted TOPPC youth meetings and youth participated in community service projects and attended the Youth Summit, leading the icebreaker and an activity. In FY23, youth conducted fundraising to buy books and items to create hygiene kits for students. They also helped plan the 2023 youth summit and led several activities at the youth summit.
- **Ottawa County**
 - AC: Continued to provide the SLIC youth coalition with meetings once a month. Provided monthly youth leadership trainings on various topics of interest to youth.
 - OCDPH: Prime for Life taught to MS and HS students.

FAMILY DYNAMICS

Parent education and skills training.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Parenting Skills programming					✓		✓
Parent workshops on how to identify and respond to drug use.	✓	✓			✓ FY22 & 23		✓
Teach communication skills and how to prevent substance use and promote healthy choices.	✓	✓		✓			
Coordinate a collaborative committee to plan and implement enhanced parenting services and supports.	✓		✓	✓	✓		✓

Local Programming:

- **Allegan County, OnPoint:** Hosted Tall Cop to present on drug trends at an in-person event in the summer of FY23. Also distributed codes for parents and community members to attend his webinars throughout the year.
- **Kent County**
 - AC: Groups with MS and HS youth on healthy relationships and building positive, pro-social communication skills.
 - KCHD: Parent programming was conducted for Girl's Court groups. In FY22 Yo Puedo parent groups were also provided.
 - N180: Annual Lunch & Learns and Family Day activities
 - WW: Parent workshop on current trends in substance use, how to recognize a problem, talking to your child about substance use and resources for help. A video encouraging healthy communication with teens was developed for parents. Hosted virtual parent workshops were provided that include current trends, how to recognize and respond to youth substance use, and how to talk to your child about substance use beginning in FY22. In addition, an in-person workshop was offered on social media safety and a video about social media safety was promoted to parents.
- **Lake County, D10HD:** An ACEs committee was established as part of the prevention coalition. Presentations and resources shared with healthcare provider providers, community health workers and board members from Children's Trust Fund and community members.
- **Mason County, D10HD:** Parent prevention packets shared through community partners (ex. libraries). Coordinated with great start collaborative to plan parent/family events. In FY22, started Family Meals Month partnership with local food pantry to hand out parent prevention packets which included a family baking activity. In FY23, created updated parent prevention packets and shared at community events. Continued promoting Family Meals Month by partnering with local school events to hand out parent prevention packets which included a family lunch bag.

FAMILY DYNAMICS

Local Programming, continued:

- **Muskegon County**
 - AC: Provided the SFP 10-14 program, Nurturing Parenting Program, and 24/7 dads' programs. Provided a virtual parenting program similar to Circle of Parents bi-weekly. Coordinated collaborative with the Muskegon Parents' Initiative to increase parent education and support. Distributed interactive vaping graphic and virtual teen room to educate on signs and symptoms. Began offering Conscious Discipline skills in FY22.
 - MCHP: Provide Hidden in Plain Sight presentations in schools.
 - PHMC: Offered Parent Cafes, facilitated Fathers Matter Collaborative; participated in Muskegon Parenting Collaborative activities. During FY22 worked with released offenders through the EXIT program and Fresh Coast Alliance program to provide parenting skills. Also used the Dad Movement Podcast to promote and reinforce positive parenting skills.
- **Ottawa County, AC:** Provided the SFP 10-14 program, Nurturing Parenting Program, and 24/7 dads' programs. Provided a virtual parenting program similar to Circle of Parents bi-weekly. Coordinated collaborative with Ottawa County SCAN Council that works to increase parent education and support. Creation of a digital interactive Vaping Graphic and interactive virtual teen room to educate parents on signs and symptoms, also a parent education video series. Began offering Conscious Discipline skills training for parents in FY22.

FAMILY COMMUNICATION

Encourage parent communication regarding substance use.

Regional Strategies:

Promoted Talk Sooner Campaign to educate parents on the consequences of teen use, how to talk to their youth about the consequences through community events, social media, lunch and learns, and newsletters.

Had Family Meals Month to promote TalkSooner & family communication.

Provided info to parents at community events on how to talk to their kids.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Promoted Talk Sooner Campaign to educate parents on the consequences of teen use, how to talk to their youth about the consequences through community events, social media, lunch and learns, and newsletters.	✓	✓	✓	✓	✓	✓	✓
Had Family Meals Month to promote TalkSooner & family communication.	✓	✓ FY21	✓	✓		✓	✓
Provided info to parents at community events on how to talk to their kids.	✓	✓	✓	✓	✓	✓	✓ FY22 & 23

Regional Efforts:



The regional TalkSooner campaign continued in FY21 and FY22. This campaign, developed in 2007, encourages parents of youth ages 10-18 to begin talking to their children about alcohol and other drugs at an earlier age. Marketing materials direct parents to visit the locally managed Talksooner.org website. The campaign has continued to expand with more than 30 counties throughout Michigan participating.

TalkSooner is also used as a platform to promote Family Meals Month. This nationwide event is designed to underscore the benefits of family meals and help families share one more meal at home per week.

The LRE and prevention providers work collectively to promote Family Meals Month, host local events and develop regional promotional materials to support local efforts and to promote TalkSooner & family communication and involvement.



FAMILY COMMUNICATION, CONTINUED...

TalkSooner Campaign: FY23

During FY21, the most frequently visited pages of Talksooner.org were the “Trending Drugs” links and Talking Tips page. Other media efforts include:

- Homepage updated to include Conversation Starter Videos and the Virtual Teen Room.
- Social posts on Facebook and Instagram to promote Tips and Tricks for parents.
- Partnered with MDOT for the *Make the Chatter Matter* campaign. Posters from TalkSooner.org in English and Spanish were displayed at most of MDOT's 77 rest areas and Welcome Centers around the state to encourage family conversations.

Media Coverage and Partner Shares

In addition to the paid promotion the following free coverage was received through media coverage and promotion by partner organizations.

- The River interviewed Prevention Specialist Vicki Kavanaugh regarding Holiday Drinking.
- WOTV continued to re-air the 30 min. “Truth About Youth Vaping” special
- WOODTV/Channel 8 and WGVU Morning Show published stories regarding National Drug Take Back Day.
- MDOT-Talksooner hosted a news conference on March 28 to unveil “Make the Chatter Matter” campaign
- Regional Media outlets (Fox 17/WXMI, WGHN, WOOD-TV, WZZM-TV, Fox 17/WXMI) shared the Mayoral Proclamation from the Cities of Grand Rapids & Grand Haven, who declared 4/20 Day as “Talksooner Day”

Family Meals Month Promotion

During September 2023, Talksooner.org promoted Family Meals Month to highlight the campaign “Any Way you Slice it, Prevention Matters.” Our team partnered with 5 locally owned pizza shop owners to share prevention messaging while WOOD TV/Fox 17 Morning Mix/9&10 News promoted the campaign with live interviews of Talksooner Prevention Specialists and pizza owners. Pizza shops distributed over 5,000 fliers and pizza cutters with Talksooner messaging. This generated a total PR Value of \$45,262 in free messaging.



Participating Pizza Shops included:

- Cadena Brothers (Muskegon County)
- Don Petrino's Pizzeria (Ottawa County)
- Russo's (Kent County)
- Chuckwagon (Mason County)
- Pompeil's (Lake County)

FAMILY COMMUNICATION, CONTINUED...

TalkSooner Campaign: FY22

During FY2, Talksooner.org and the Lakeshore Regional Entity teamed up with Maranda from WOTV 4/WOOD-TV/Channel 8 to bring an original streaming “series” of mini segments on the “Truth About Teen Vaping” to West Michigan.

The series ran from April 18 through April 22, with a special all-day streaming on 4/20/22. Maranda canvassed all seven counties, interviewing more than twenty-five teens, parents, prevention specialists, principals, physicians, a prosecutor and more.

These segments continue to be available via: [Watch: Talk Sooner anti-vaping program](#)

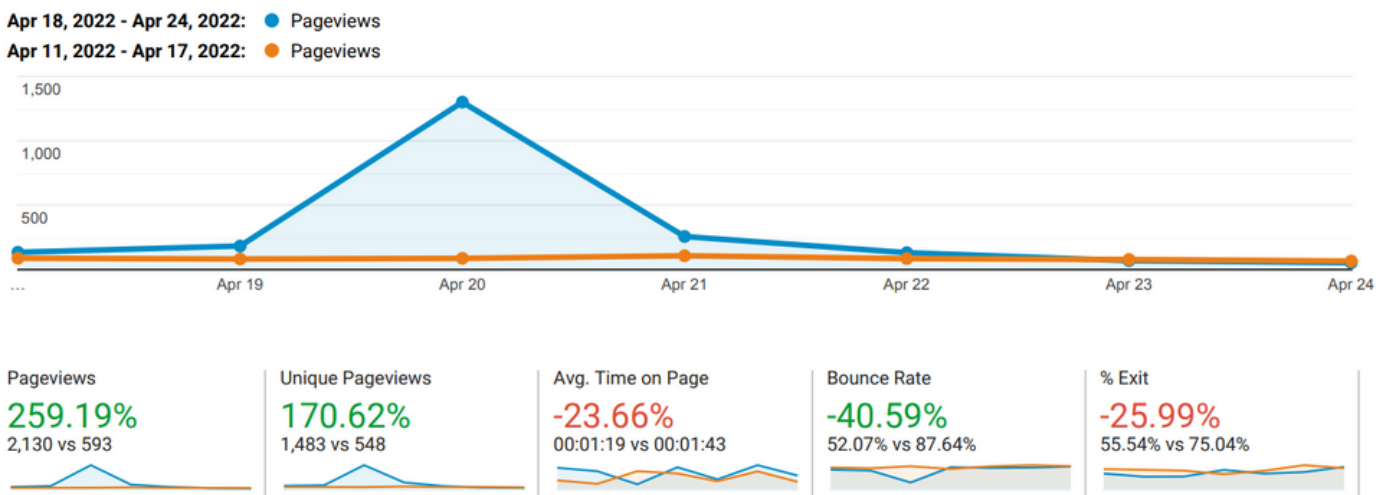
Among visitors during the campaign week the majority were from Norton Shores (25%), followed by Grand Rapids (10%), Grand haven (4%), Wyoming (3%), and Allegan (2%).



Watch: Talk Sooner antivaping program
Learn to Talk Sooner in this special program from Maranda Where You Live.

Throughout the five-day campaign push, website traffic increased from an average of 104 users the previous week to an average of 196 users per day during the campaign. In addition, the bounce rate decreased indicating that more people were navigated beyond the homepage to explore the content, tips, and information TalkSooner has to offer.

Website traffic analysis during the campaign, compared to the prior week is summarized below:



FAMILY COMMUNICATION, CONTINUED...

TalkSooner Campaign: FY21

During FY21, TalkSooner.org was visited 210 times, by 98 unique individuals resulting in 558 page visits. The average session duration was 1 minute and 45 seconds and the most frequently visited page was the 'What's Trending?' page.

- Homepage updated to include a new cover image and promote testimonials.
- Social posts on Facebook promoted the partnership between local healthcare providers, educators, law officials, and other community members with TalkSooner. Over a dozen posts with individual testimonies were shared.
- Partnered with mParks and the Michigan DNR to place promotional materials at ten Michigan parks, 77 rest stops, and 14 MDOT Welcome Centers. The posters will remain displayed indefinitely.



Media Coverage and Partner Shares

In addition to the paid promotion the following free coverage was received through media coverage and promotion by partner organizations.

- Cherry Health publicly shared its partnership with TalkSooner.
- Interview ran on WGTV news radio with a supplemental web story.
- Interview including a pediatrician at Metro Health – University of Michigan Health – with Channel 17's WXMI.
- Priority Health published a 'Think Health' article on website promoting TalkSooner.
- WOODYTV/Channel 8 and WGTV Morning Show published stories regarding National Drug Take Back Day.
- WILX News in Lansing, and Fox 17 News ran stories about TalkSooner partnership with MDNR/mParks.
- MDOT issued a news release announcing its partnership with Talksooner.
- Channel 13/WZZM aired public service announcements regarding Family Meals Month, and a sponsored Facebook article and banner ads on their website.
- Michigan State Parks distributed an e-newsletter to 595,047 people with article about TalkSooner resulting in 99 visits to the site.



FAMILY COMMUNICATION, CONTINUED...

Local Programming:

- **Allegan County, OnPoint:** During FY21 and FY22 all events (virtual and in-person) are promoted along with TalkSooner resources and materials. Virtual promotion of Family Meals Month via flyers and social media was also conducted.
- **Kent County**
 - AC: During FY22 began promoting TalkSooner throughout prevention programming.
 - FOC: Disseminated TalkSooner brochures during resource fairs and community events and spoke to parents on how to talk to their kids about drugs and alcohol.
 - KCHD: In FY22 coordinated a youth vaping event with local news personality emceeding; event was offered in-person, streamed live, and was available for streaming 3 weeks following the event. The recording was watched approximately 750 times. TalkSooner info was promoted throughout the event and also included in all parent programming.
 - Network 180: In FY21 promoted via the region's TalkSooner marketing implementation plan. Information about the TalkSooner website and app is always included in parent presentations and community resource fairs that we participate in.
- **Lake County, D10HD:** Social media posts on TalkSooner. Family meals month promoted with bag giveaway. Partnered with food pantry and also Spectrum Health's Veggie Van on events. Toolkits provided at local library included TalkSooner information. TalkSooner info shared at various community events.
- **Mason County, D10HD:** Promoted TalkSooner campaign and Family Meals Month by providing info to parents at community outreach events. Partnered with local food pantry in FY22 to hand out prevention packets, including a family baking activity. In FY22 created family friendly "escape the vape" portable escape room where families work together to solve riddles while learning about the risks of vaping. In FY23, created an updated TalkSooner parent toolkit.
- **Muskegon County**
 - AC: Provided TalkSooner information to families at all events and programming.
 - PHMC: In FY21, promoted TalkSooner at all outreach events. Support and facilitate the Fathers Matter collaborative, including promoting at outreach events. In FY23, facilitated parent cafes in local schools and community based organizations.
- **Oceana County, D10HD:** TS included in all community outreach, social media efforts were implemented, and partnered with Shelby Public Schools for family meals month for the county's annual coat drive. Provided bags with educational materials during a local food distribution event.
- **Ottawa County**
 - AC: Promoted TalkSooner through our OSAP Digital Ecosystem (communication platforms), youth and parenting programming, and at community events. Promoted Family Meals Month through local food pantries, other organizations working on food insecurity, and OSAP Coalition.
 - OCDPH: TalkSooner is promoted on Marijuana lock bag information sheets and as a resource provided to parents during the Vape Education class.

LIFE STRESSORS

Develop coping and refusal skills.

Regional Strategies:

Disseminate educational prevention material at community events.

Youth education and early intervention programs that teach refusal skills, social emotional skills, and encourage healthy choices.

Train students to provide support/mentoring to other students.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Disseminate educational prevention material at community events.	✓	✓			✓	✓	✓
Youth education and early intervention programs that teach refusal skills, social emotional skills, and encourage healthy choices.	✓	✓	✓ FY23		✓	✓	✓
Train students to provide support/mentoring to other students.	✓ FY22 & 23	✓				✓	

Local Programming:

During the pandemic, youth experienced enhanced stressors that exacerbated mental health issues. Providers and coalitions throughout the region expanded efforts to support youth and their families to enhance coping skills and promote resiliency.

- **Allegan County, OnPoint:** Signs of Suicide was conducted in Waland High School in coordination with PAL’s. The Saugatuck High School PAL’s were trained in the SOS curriculum in Spring of 2023.
- **Kent County**
 - AC: School groups and after-school programming on social skill building, relational aggression, positive peer relationships, and healthy life skills. ABC groups focused on decision making and caregiver-child relationships to reduce delinquent behaviors.
 - FOC Kent: Youth leadership programming included strategies for making good choices and peer pressure. In FY22 used the PALs curriculum in area after school programs which incorporates leadership as well as social-emotional skills building and making healthy choices.
 - KCHD: MIP Diversion Program offered monthly to youth referred by the courts.
 - N180: ATI Kent County. Youth Mental Health First Aid.
- **Muskegon County**
 - AC: Total Trek Quest teaches peer refusal skills, coping skills, and how to make healthy choices.
 - PHMC: Offer Mental Health First Aid each year and QPR trainings in FY21 and 22.
- **Oceana County, D10HD:** TOPPC youth group conducted community service projects with outreach on suicide prevention. In FY23, TOPPC work groups focused on mental health and body image/self-confidence. The annual youth summit had a focus on mental health and choosing healthy coping skills rather than turning to drugs and alcohol.
- **Ottawa County**
 - AC: Provided suicide prevention info at events and assisted the Ottawa County Suicide Prevention Coalition in sending a mass mailing to every home in the county in FY21. Coordinated Building Resilient Youth who attend events and marijuana. Promotes suicide prevention info. Provided QPR Presentations to youth and adults. Coordinated a youth mental health first aid training. In FY22 provided peer refusal skills presentations to HS students and produced 24 youth-driven videos on mental health promotion skills.
 - OCDPH: Addressed within Prime for Life programming.



Substance Use Disorder Treatment

EVALUATION REPORT FY21 - FY23

PROVIDED BY:



Introduction

Since 2014, the Lakeshore Regional Entity (LRE), the PIHP for Region 3, has maintained a system for providing substance use disorder (SUD) treatment and recovery services which delegates responsibility for managing treatment and recovery services to each of the five-member Community Mental Health Service Programs (CMHSP's) through subcontracts.

The 5 CMHSPs subcontracted to manage these services include:

- OnPoint (Allegan County)
- Community Mental Health of Ottawa County
- HealthWest (Muskegon County)
- Network180 (Kent County)
- West Michigan Community Mental Health System (Lake, Mason, and Oceana Counties)

A Strategic Plan for SUD Treatment services was developed to guide efforts during FY21 through FY23. This plan identified priority areas with metrics to monitor progress. An overview of the plan and evaluation framework is provided in the [LRE SUD Treatment Logic Model](#).

This report provides an annual update on efforts and trend data through FY23. Service access by priority populations and Treatment Performance Measures as reported for National Outcome Measures are also reviewed.

Data to inform this report includes Behavioral Health Treatment Episode Data Set (BH TEDS) (refreshed on 12/14/23) and encounter data for services provided (refreshed on 12/13/23). It should be noted that data for prior fiscal years may change from previous reports due to ongoing data entry.

Where a benchmark is provided it represents the LRE's regional rate for FY23.

Contents

Throughout this report, underlined text indicates a hyperlink to additional information. When viewing this report electronically, clicking on the underlined text will direct you to another portion of the report or an external resource for more information.

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- Persons Living with an Opioid Use Disorder (OUD)
- Rural Communities
- Older Adults (age 55-69)

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- Integrated Treatment
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SUMMARY OF TRENDS BY CMHSP

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Services Priorities










The following pages provide an overview of metrics related to service priorities identified within the LRE Strategic Plan for Substance Use Disorder (SUD) services, including

- Access to Services
- Engagement and Retention
- Connection to Community Supports

Access to Services

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to access for these prioritized populations as identified within the Strategic Plan.

Targeted Metrics: Access		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	21.0%	20.0%	20.0%	22.0%	24.0%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.4%	0.3%	0.3%	0.5%	0.2%	
	↑ admissions with legal status as 'in jail' (% of all admissions)	8.0%	7.0%	6.0%	8.0%	6.0%	
Persons with Opioid Use Disorder (OUD)	↓ avg days between request for medication assisted treatment (MAT) and first service	13.7	7.0	13.4	5.6	7.4	
	Maintain an average wait time of less than 3 days for persons with IVDU	6.6	6.4	9.8	7.1	8.0	
	↓ average days' time to service for Outpatient Level of Care for persons with intravenous drug use (IVDU)	9.5	6.3	9.5	5.5	7.5	
Older Adults	↑ in # of admissions for individuals aged 55-69	597	473	579	585	648	

*  Improving  Worsening  Relatively stable

Criminal Justice

In April of 2020, the LRE became responsible for supporting substance use disorder services for individuals transitioning into the community who are on probation after having been incarcerated.

Improvement Efforts

Working together with the Michigan Department of Corrections, the LRE has partnered with the SUD Regional Operations Advisory Team (ROAT) to identify ways to improve coordination and services for this population as they return to their communities. MDOC representatives attend meetings quarterly to discuss challenges and foster coordination. In March 2022, MDOC reported challenges with provider communication. CMHSP Members communicated with the provider network and the issue has not since been reported as a problem.

Efforts to expand services in the jail have been a priority, primarily with State Opioid Response funds. Medication assisted treatment (MAT) services are now offered in 5-of-7 county jails in the region.

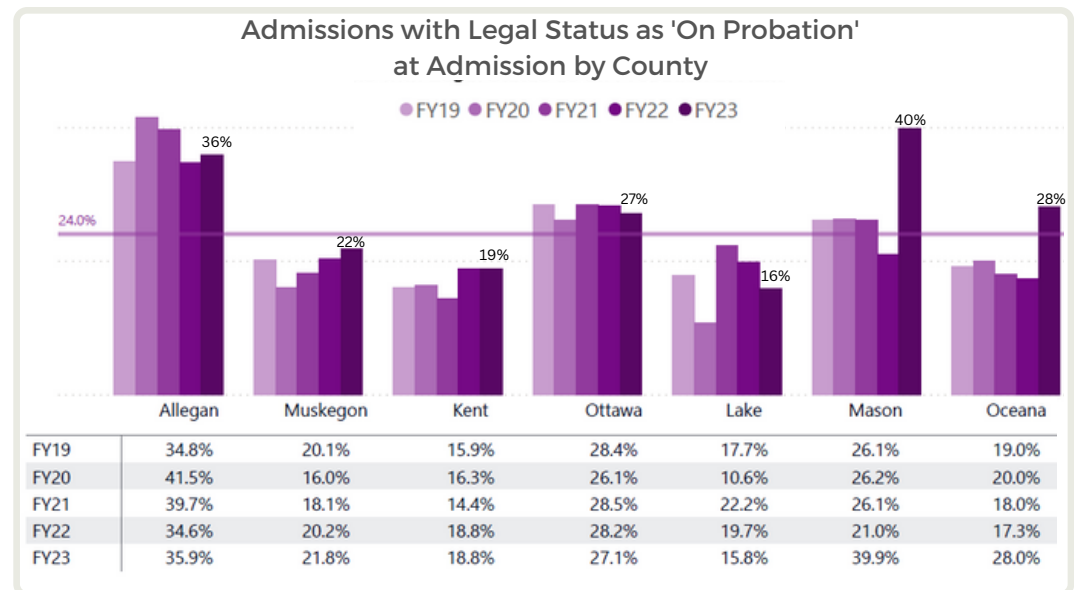
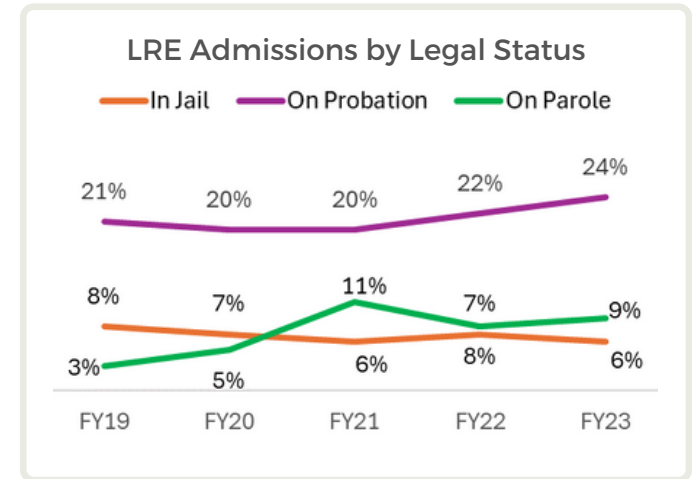
In FY21, Muskegon County established a peer recovery coach in the jail to support individuals receiving MAT while incarcerated to engage in services following release.

In FY23 the LRE hired a Priority Population Specialist to support coordination between MDOC and CMHSPs for this population.

Data Highlights

Between FY19 and FY23, the percent of admissions for individuals whose legal status was identified as 'on parole' or 'on probation' increased (from 24% to 33%) and the percent of admissions for individuals 'in jail' decreased slightly. Less than 1% of admissions reported the legal status as a 'pre booking' or 'post booking' diversion.

The percent of admissions for individuals on probation in FY23 was highest in Mason (40%) and Allegan (36%) Counties and has been increasing in Muskegon County.



Persons with OUD

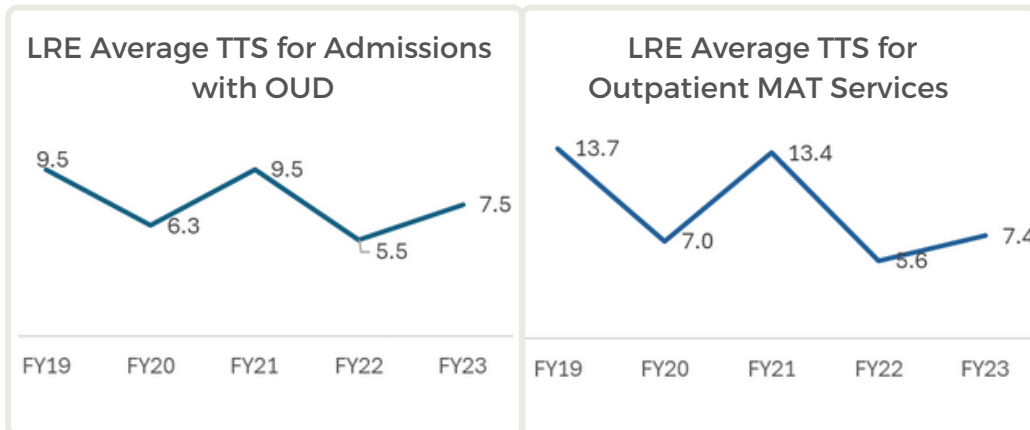
In recent years, the rate of opioid use and the need for treatment for individuals with an opioid use disorder (OUD) increased significantly. Of note was the need for increased medication assisted treatment (MAT) throughout the region.

Data Highlights

Between FY19 and FY23, the average time to service (TTS) for individuals with an OUD ranged from a low of 6.5 in FY22 to a high of 9.5 in FYs 19 and 21.

During FY21 delays in TTS were primarily due to medication assisted treatment (MAT) caused by intermittent use of a waitlist at a provider in Muskegon County. This improved substantially in FY22, with the TTS for Muskegon County's MAT services from 28.5 in FY21 and to 4.7 in FY22 and 7.2 in FY23.

When trends in time to service for MAT are reviewed by county, TTS in FYs 22 and 23 was highest in Allegan County at 9.8 and 14.8 respectively. In FY23, the remaining counties range from a low of 4.5 in Oceana to a high of 9.8 in Lake.



Improvement Efforts

State Opioid Response (SOR), State Targeted Response (STR), American Rescue Plan Act (ARPA), and COVID-19 Block grants allowed expansion of MAT services throughout the region. Projects included the addition of new Suboxone providers, providing transportation to MAT services, supporting recovery homes, and recovery management teams. In addition, these funds expanded Narcan distribution and education throughout all counties.

During FY21, efforts to address the waitlist in Muskegon County included transitioning the screening and medical assessment scheduling and managing the waitlist to HealthWest. HealthWest also began offering open intake assessment appointments and doing well-being check-ins with those on the waitlist as well as offering interim services. In addition, WCMCHS started jail-based MAT services in Lake County and provided stipends to support community-based MAT services in all 3 counties.

During FY22, efforts to increase MAT capacity include:

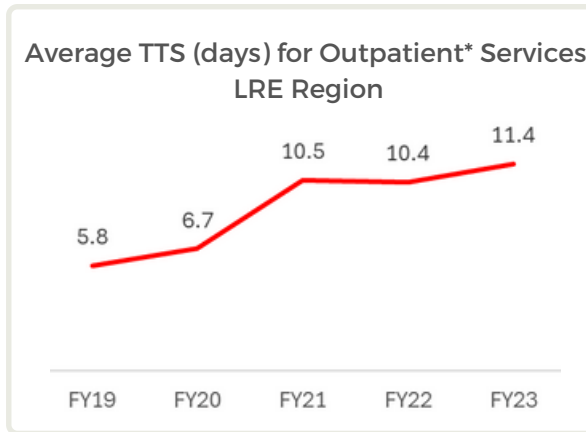
- N180 and HealthWest worked to engage additional MAT providers and provided assistance with the credentialing process. In Muskegon, Eastside began services on 10.1.22.
- To address staffing shortages N180 provided staff retention and new hire bonuses.
- HealthWest hired a recovery coach for the jail to coordinate treatment following release from jail.
- WCMCHS built capacity to provide MAT services when the provider in their counties discontinued services. Began 1.1.23 with no interruption.
- Allegan and Ottawa began providing jail-based MAT services.

Rural Communities

Access to services in rural areas has been identified as a challenge. Counties considered rural in the LRE region include Allegan, Lake, Mason, and Oceana.

To support access and respond to Covid-19 restrictions, tele-health services were established once state policy changed to allow for provider reimbursement. Innovative methods to support transportation needs include incentives for volunteers to drive consumers to and from treatment facilities in some of the rural communities in the region.

During FY22 a provider in Allegan was identified with extensive delays in TTS and a corrective action plan was put in place; with some improvement reflected in FY23 data. In addition, it was identified that some providers were using an incorrect date for the request for service for referred individuals. During FY23, the LRE worked to ensure the date of request for service was accurately recorded.



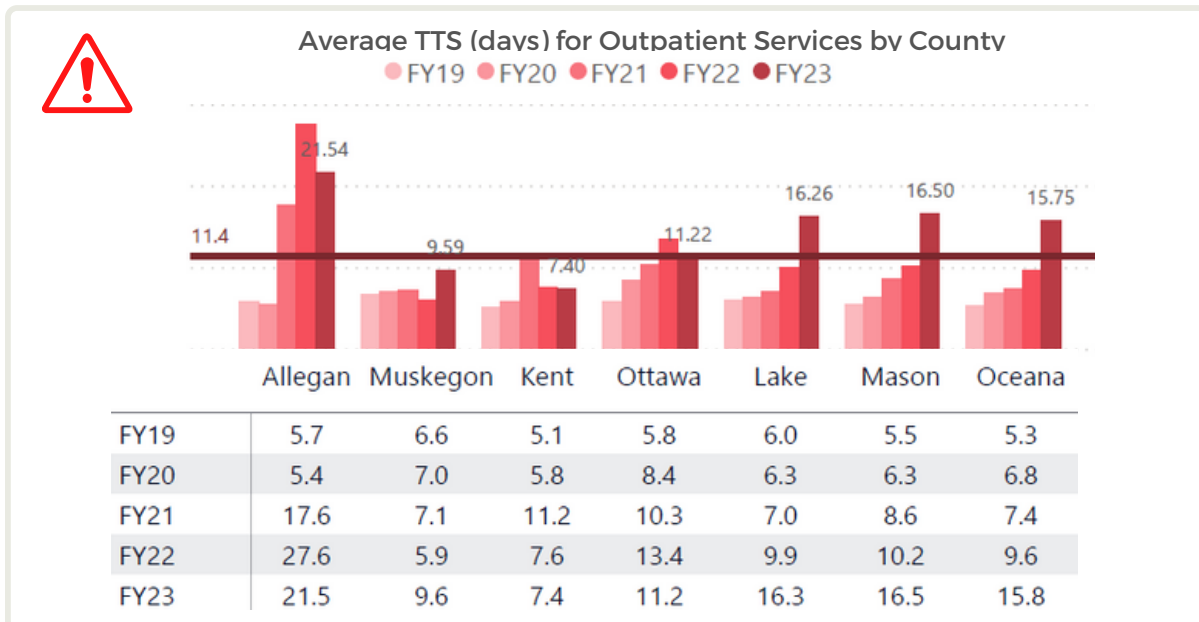
Data Highlights

Time to Service (TTS) for Outpatient services increased substantially between FY20 and FY21 and has remained high.

Among rural counties, the TTS for Outpatient services has been increasing with substantial increases between FY22 and FY23 for each rural county.

It should be noted that:

- TTS does not provide adjustments for limited client availability which delays the appointment or for the client rescheduling their appointment.
- Interim services are provided in some instances, such as peer recovery coach support, which are not reflected in the BHTEDS due to being funded by other sources.



*non-intensive & excludes MAT

Older Adults

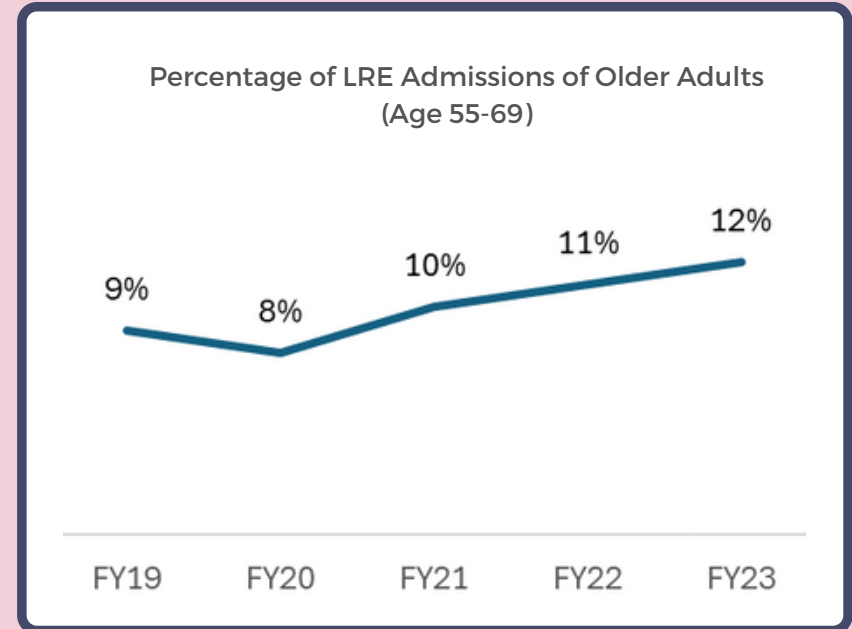
Improving access to services for older adults is currently a state-mandated priority. Planned efforts in the LRE region include promoting availability of services and the ability to access services, as well as providing training for providers on addressing behavioral health needs of older adults.

LRE leadership participated in state-level strategic planning for older adult services, which is available [here](#).

The LRE discussed older adults at the SUD ROAT and prevention meetings to assess community readiness for providing services for older adults. Potential trainings available to providers were reviewed and state trainings on the topic were promoted.

Data Highlights

The number of admissions in the region for older adults decreased substantially in FY20 which may have been due to Covid-19 restrictions. The percentage of admissions that were for older adults has been increasing since FY20 to a high of 12% in FY23.



	FY19	FY20	FY21	FY22	FY23
Admissions Older Adults	597	473	579	585	648



Engagement and Retention

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to engagement and retention in care as identified in the Strategic Plan.

Targeted Metrics: Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23	
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis who received integrated svcs	6.0%	7.0%	11.0%	14.0%	20.0%		
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	27.9%	24.8%	25.3%	29.4%	36.5%		
	↓ average # days between discharge and admission to next level of care following ST residential	w/in 7 days	2.0	2.4	1.6	1.8	1.1	
		7+ days	17.5	17.6	17.2	16.6	15.4	
	Overall	7.8	9.1	9.1	8.3	7.1		
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	Detox	25.2%	19.0%	18.2%	18.5%	29.7%	
		ST Res	67.6%	73.4%	70.5%	54.8%	71.0%	
↑ % discharges from residential svcs w/reason as 'transfer/ completed level of care'	Detox	41.8%	51.7%	53.0%	49.1%	44.2%		
	ST Res	1.7%	1.5%	1.9%	18.1%	4.7%		
Initial Engagement	↓ % of treatment episodes with no 2nd visit	11.8%	11.4%	10.1%	10.9%	8.0%		
	↑ clients seen for a 2nd encounter w/in 14 days of 1st service (of those w/ a 2nd encounter)	87.4%	88.3%	88.0%	89.5%	92.7%		

* Improving Worsening Relatively stable

Integrated Treatment

The percent of clients with a co-occurring disorder that are reported as having received integrated treatment has been historically low in the LRE region, with only 6% in FY19.

For a client to be counted as having received integrated treatment services, services can be provided by one provider, or multiple providers as long as services are coordinated and there is a joint treatment plan with input from both disciplines. A billing modifier code must also be used when reporting all encounters (HH).

IMPROVEMENT EFFORTS

The SUD ROAT reviewed this issue in FY21 and determined that data entry guidance was unclear and was being used with varying interpretations by the provider network resulting in underreporting.

To address this, and other data entry issues, the LRE hosted a BH TEDS training in August 2021 and improvement was reflected in FY22 records. In FY22 CMHSP Members worked to ensure that providers had the HH modifier activated for billing purposes. This issue was addressed again at a BH TEDS training in FY23.

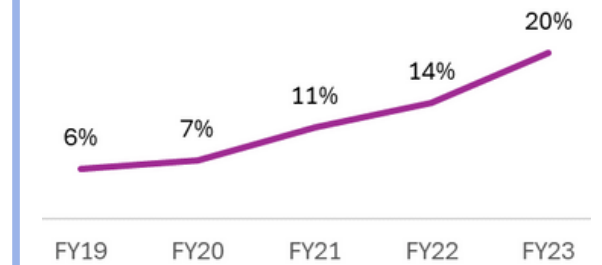
★ In FY23, CMHOC also modified how providers view medical records to make it easier to bill correctly and achieved substantial improvement with the highest rates in the region.

DATA HIGHLIGHTS

Between FY19 and FY23, the percent of clients with co-occurring disorder who received integrated treatment increased to 20% for the region.

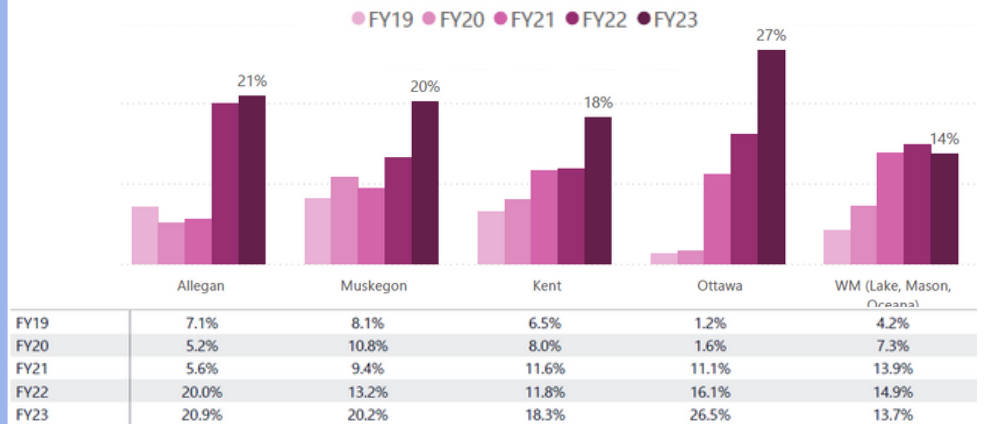
While the rate is still low, the region has achieved substantial and continual improvements since 2019.

★ Clients with Co-Occurring Disorders that Received Integrated Treatment



Between FY20 and FY23, Allegan, Muskegon, and Ottawa counties achieved substantial increases.

Clients with Co-Occurring Disorders that Received Integrated Treatment by CMHSP



Continuity of Care

It is important that clients who complete sub-acute detox and then short-term residential (ST Res) services engage in treatment at the next level of care (LOC) as soon as possible to reduce the likelihood of relapse. Also, because detox and ST Res should always be followed by a lower LOC, the discharge reason should be recorded as "Transferring/Completed Level of Care" and should **not** be recorded as "Completed Treatment".

Improvement Efforts

To address this issue during FY21, data was reviewed and discussed with the SUD ROAT and reviewed quarterly thereafter.

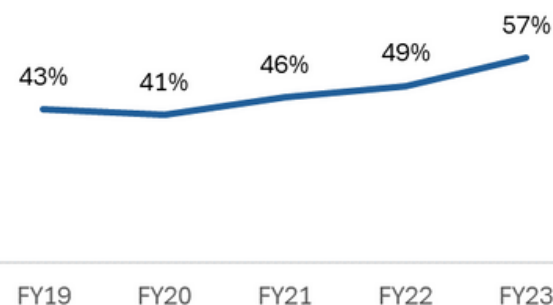
In response, each CMHSP reviewed data with their staff and provider networks. Ottawa, West MI, and Muskegon CMHSPs also engaged peer recovery coaches to assist these individuals and support engagement in local services following discharge from ST Res. In addition, accurate recording of the discharge reason was addressed during the BH TEDS training in August 2021. The benefits of these efforts are reflected in FY22 but were not sustained into FY23.

In FY23, CMHOC began monitoring consumers during this transition to ensure immediate follow-up, achieving substantial improvement with the highest rate of admissions to the next LOC within 30 days in FY23.

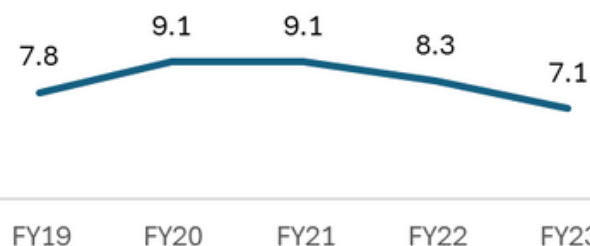
HealthWest hired a peer recovery coach in July of 2023 to assist with communication between the provider and consumer to improve engagement at the next LOC.

Data Highlights

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days

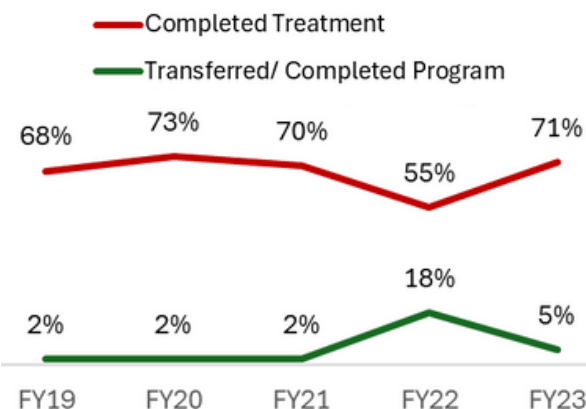


Average # Days Between ST Res Discharge and Admission to Next LOC*



*For those w/an admission within 30 days of discharge

Discharge Reason for Discharges from ST Res (Discharges from ST Res should not be recorded as 'completed treatment')



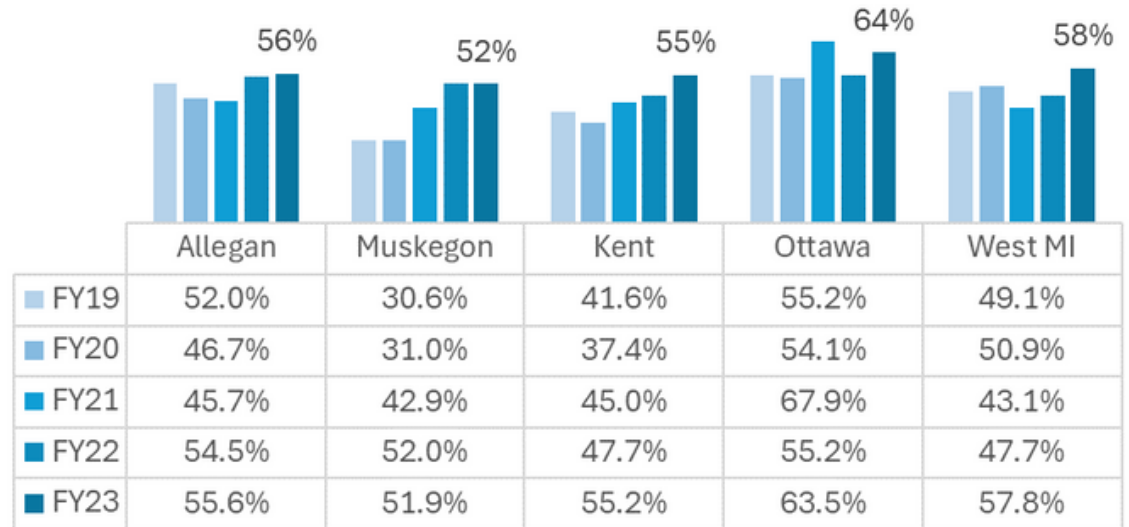
Continuity of Care

Data Highlights

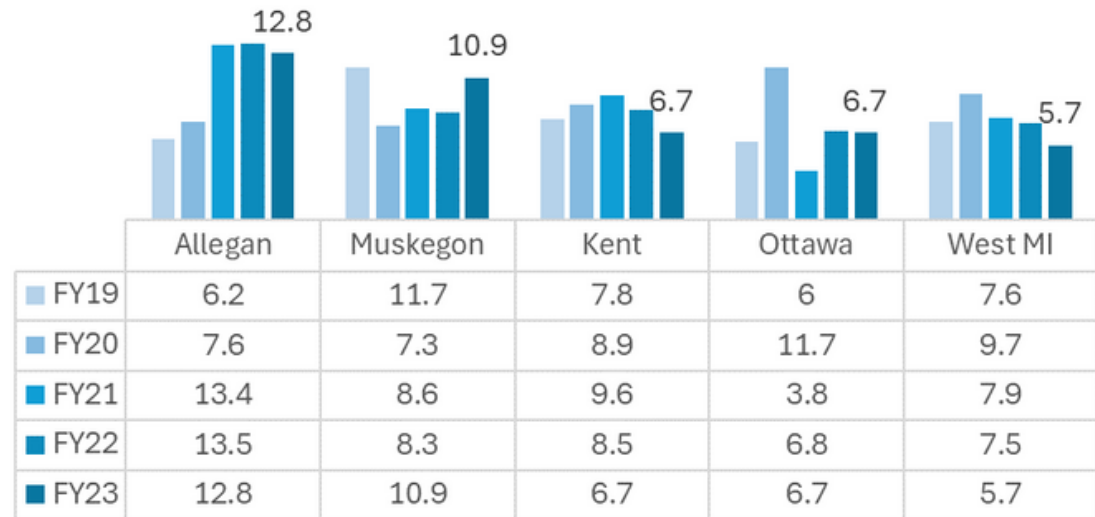
Between FY19 and FY23, the percent of clients being discharged from ST Res who were admitted to the next level of care within 30 days continued to increase region-wide, achieving a high of 57%. Improvements were achieved in each CMHSP.

The average number of days between discharge from ST Res and admission to the next LOC improved between FY21 and FY23 to an overall TTS of 7.1 days in FY23, region-wide. TTS for admissions that did not occur within 7 days also improved to 15.4 days regionally.

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days by CMHSP



Average # Days Between ST Res Discharge and Admission to Next LOC* by CMHSP



Initial Engagement

Metrics to monitor whether clients successfully engage in services after initial contact the LRE monitors how many clients had only one encounter (excluding those who did not require a second visit) and whether a client's 2nd visits occurred within 14 days of the first.

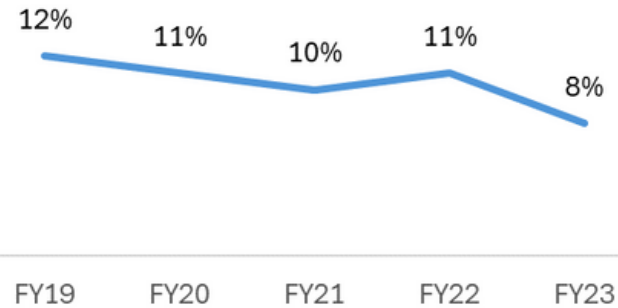
Data Highlights

Overall data indicates that the region's initial engagement of clients in SUD treatment is going well. The rate of admissions with only one visit improved achieving a low of 8% in FY23. Service categories with the highest rate of only one visit were Outpatient (14.9%) and Intensive Outpatient (10%), followed by medication assisted treatment (5.7%) and detox (4.9%).

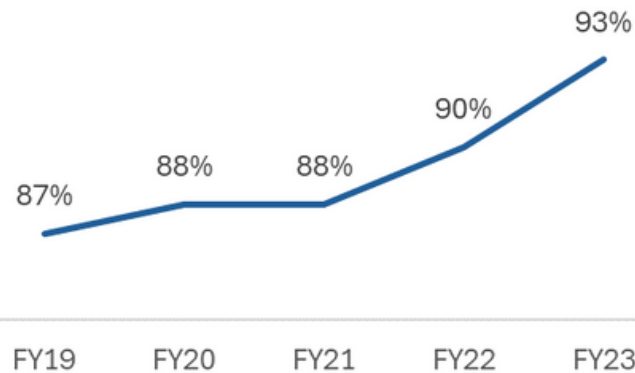
The percent of treatment episodes with the second visit occurring within 14 days of the first has been improving and achieved a high of 93% in FY23.



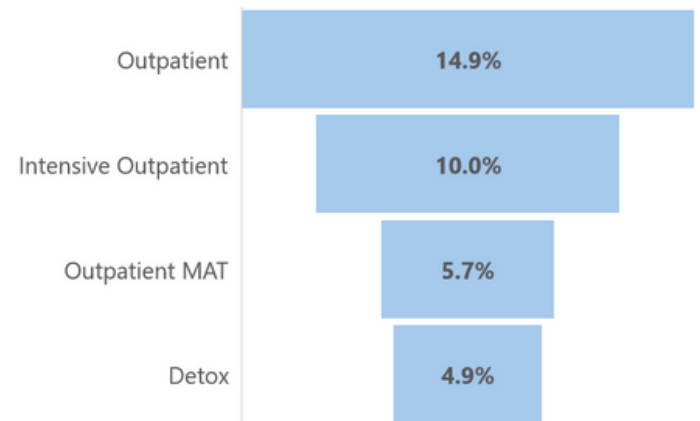
Percent of Treatment Episodes with Only One Encounter, LRE Region
Overall (All Service Categories)



Percent of Treatment Episodes Where the 2nd Visit Occurred Within 14 days of 1st Encounter, LRE Region



Percent of Treatment Episodes with Only One Encounter, LRE Region FY23
By Service Category



Responding to Methamphetamine (MA)

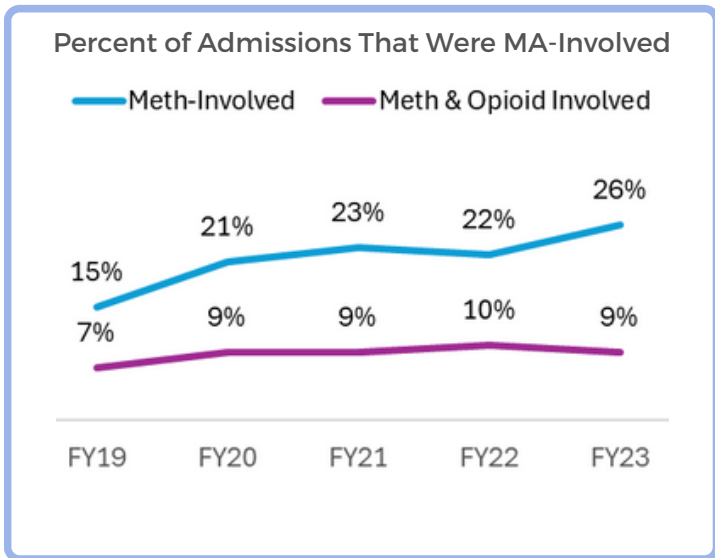
Methamphetamine emerged as a growing problem with treatment admissions for individuals reporting MA use increasing 400% between FY17 and FY21.

DATA HIGHLIGHTS

MA-involved admissions increased again in FY23 with 1-in-4 admissions involving MA (26%). Admissions involving both MA and an opioid has remained relatively stable at 9-10% of admissions.

Counties with the highest rate of MA-involved admissions were Allegan (48%), Lake (45%), and Oceana (40%); and the lowest was Kent (17%).

Counties with the highest rate of admissions involving both MA and an opioid were Oceana (18%), Muskegon (16%) and Lake (16%).

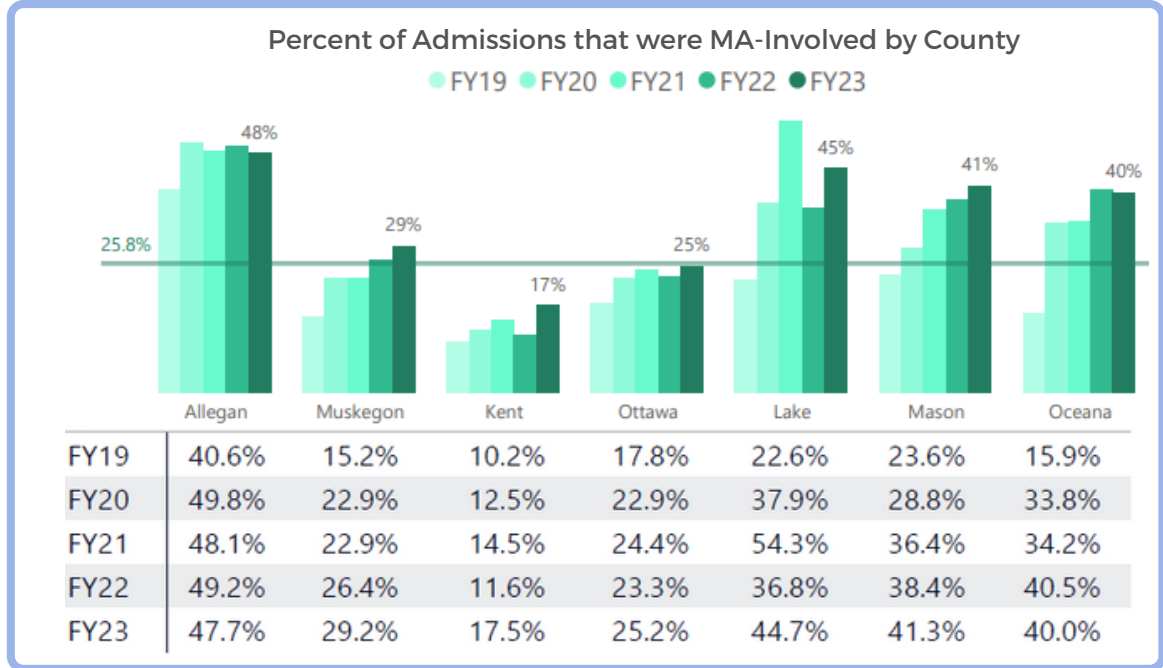


IMPROVEMENT EFFORTS

To address this issue, the LRE partnered with the Allegan Substance Abuse Prevention Task Force to commission a needs assessment for the region. In Feb. 2021, findings were presented followed by discussion to identify opportunities for action. This report is available [here](#).

In addition, the LRE promoted state training for providers on evidence-based treatment for MA, including training on Contingency Management and the Matrix Model.




Throughout the region, many providers unsuccessfully attempted to establish Contingency Management for clients using MA in outpatient settings.



Connection to Community Supports

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to connecting clients to community supports as identified in the Strategic Plan.

Targeted Metrics: Community Supports		FY19	FY20	FY21	FY22	FY23	Trend* FY19-23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	18%	23%	19%	21%	29%	
Women's Specialty Services	↑ # of pregnant women served	102	80	61	52	64	
	↑ # of pregnant women served by a Women's Specialty Provider	45	39	22	25	24	

*  Improving  Worsening  Relatively stable

Support Groups

To assist individuals in sustaining recovery following discharge from services, providers encourage individuals to attend community support groups such as Alcoholics Anonymous, Narcotics Anonymous, or SMART Recovery.

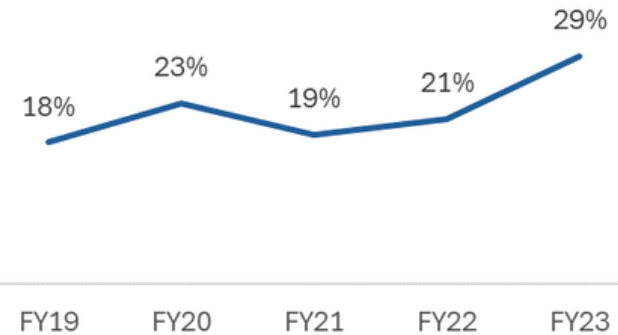
Planned efforts in the LRE region include expanding SMART recovery, and other support groups and strategies throughout the region.

Data Highlights

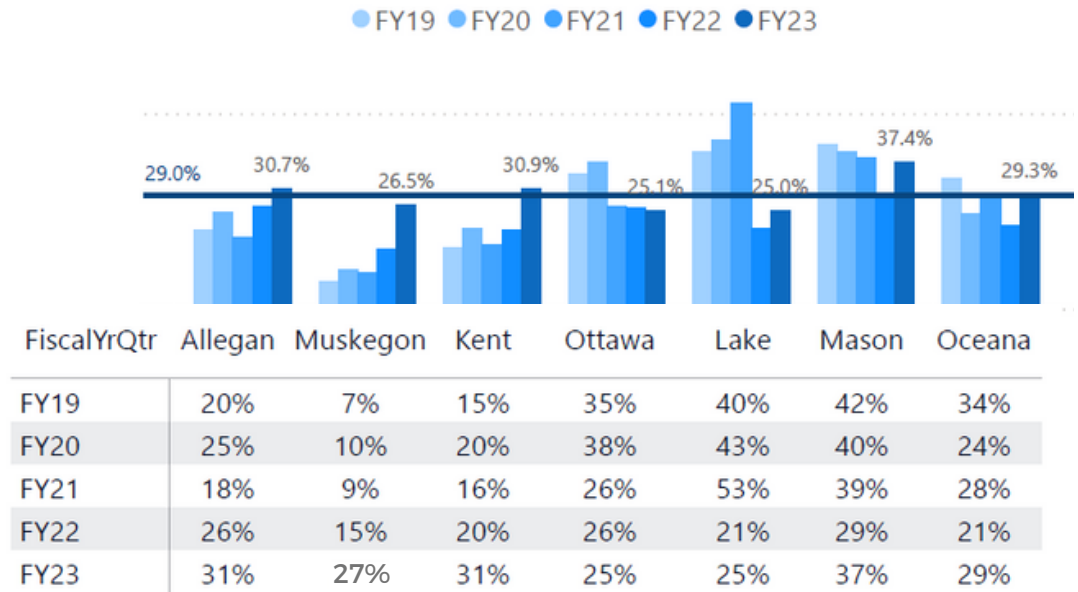
The rate of discharges with the client reporting they had attended a support group have varied since FY20 and improved in FY23 to a high of 29%.

The highest rates of reported support group involvement at discharge were in Mason (37%) and Allegan (31%) and Kent (31%), Oceana (29%). In FY23 rates improved substantially in Muskegon, Kent, Mason, and Oceana counties.

Percent of Discharges With Support Group Attendance in Past 30 Days



Percent of Discharges With Support Group Attendance in Past 30 Days by CMHSP



Women's Specialty Services

In Michigan, women who are pregnant and parenting are given priority for admission to treatment services and Substance Abuse Prevention and Treatment Block Grant requires states to spend a minimum amount each year for treatment and ancillary services for eligible women. To reduce barriers to treatment engagement, Women's Specialty Services (WSS) providers offer gender-responsive services and supports to address the unique needs of pregnant and parenting women. Ancillary services can include childcare, transportation, case management, therapeutic interventions for children, and primary medical and pediatric care.

IMPROVEMENT EFFORTS

To support WSS providers, the LRE established a regional workgroup for WSS providers in FY21. In FY22, it was decided to add Women's Specialty Services to the SUD ROAT for monthly discussion.

During FY21, COVID caused special challenges for mothers. In response, WSS providers implemented the following:

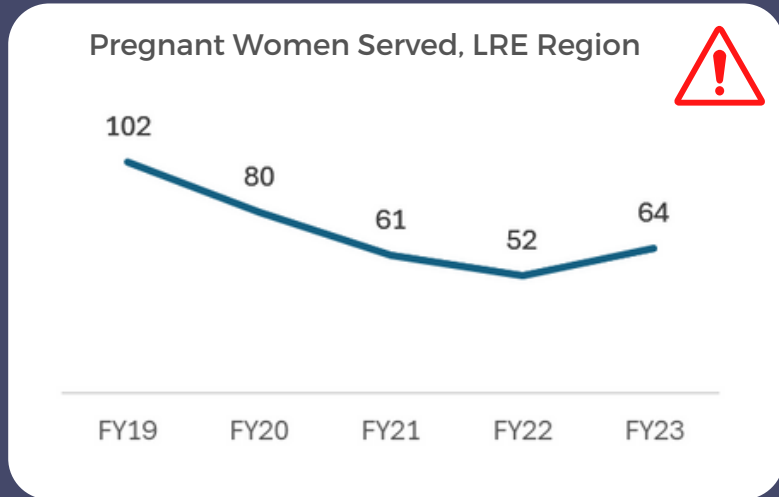
- Contingency Management child-based incentives.
- Creative solutions to ensure confidentiality during telehealth visits.
- Outreach through primary care providers, health clinics, and Dept. of Human Services. One physician began referring all pregnant women with a positive drug-screen to the WSS provider.
- Added swings and sandboxes for children to use while mother is in treatment.

IPost-COVID, WSS providers reported the following efforts to support pregnant and parenting women in treatment:

- Onsite childcare so women can focus on just themselves during services.
- Parenting skills programming such as Parenting Wisely, Safe Sleeping, and Love and Logic.
- Trauma programs such as Seeking Safety and Beyond Trauma.
- Collaboration with MDHHS to help women to access community resources such as food assistance more easily.
- Working with the public defender's office to coordinate on shared cases.
- Celebrating recovery anniversary dates and client milestones.
- Partnering with the YMCA to provide holistic health programming.
- Providing a Mentor program for young sons of moms in treatment to support positive family dynamic and involve fathers.
- Assisted moms in getting Christmas presents for their children and back to school shopping in the fall.

Data Highlights

The number of pregnant women served in the region has declined consistently and substantially since FY19, with a slight increase in FY23 to 64 pregnant women served. Of these women, 38% received services at a Women's Specialty Services Provider.



Pregnant Women Served by CMHSP

	FY19	FY20	FY21	FY22	FY23
Allegan	6	4	6	4	4
Muskegon	34	23	15	26	19
Kent	40	43	26	18	28
Ottawa	16	8	6	5	8
West MI	6	2	7	2	5
Out of Region	0	1	2	0	0
TOTAL	102	80	61	52	64

Total Number of Pregnant Women Served by Women's Specialty Providers

Women's Specialty Provider	FY 21	FY 22	FY 23
Arbor Circle	10	8	4
Family Outreach Center	3	4	2
Mercy Health Life Counseling	2	2	3
OAR - Harbor House	2	4	5
OAR - Women's Services (Grand Haven)	0	0	0
OAR - Women's Services (Holland)	2	3	6
Our Hope Association	3	2	4
Wedgwood	0	2	0
TOTAL	22	25	24



Performance Indicators

MDHHS compiles and reports treatment performance measures to the federal government. The following pages provide an overview of results for these measures for the LRE region during fiscal years 21 - 23.

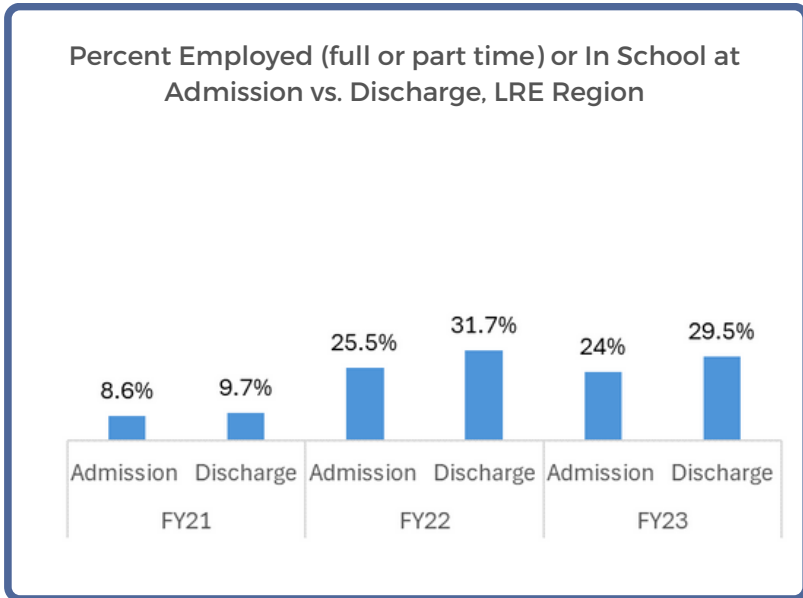


Employment/Education Status

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide during FY22 and FY23, clients were more likely to report they were employed or in school than in FY21. In addition, the region achieved a substantial improvement in FY22 (↑ 24%) and FY23 (↑ 23%) between admission and discharge, compared to 12% improvement in FY21.

Every CMHSP in the region achieved improvement between admission and discharge in FY22 and FY23.



Percent Employed (full or part time) or In School at Admission vs. Discharge

FY21	Admission	Discharge	Relative Change	Absolute Change
Allegan	11.6%	11.6%	0.0%	0.0%
Muskegon	9.0%	9.5%	5.6%	0.5%
Kent	5.2%	9.5%	8.3%	4.3%
Ottawa	9.3%	9.9%	5.9%	0.5%
West MI	7.0%	8.5%	20.0%	1.4%
REGION	8.6%	9.7%	12.2%	1.0%

FY22	Admission	Discharge	Relative Change	Absolute Change
Allegan	28.0%	36.0%	28.6%	8.0%
Muskegon	27.0%	29.1%	7.5%	2.0%
Kent	19.7%	25.4%	28.8%	5.7%
Ottawa	34.3%	44.8%	30.4%	10.4%
West MI	29.2%	33.8%	15.8%	4.6%
REGION	25.5%	31.7%	24.0%	6.1%

FY23	Admission	Discharge	Relative Change	Absolute Change
Allegan	27.5%	31.4%	14.1%	3.9%
Muskegon	20.6%	21.5%	4.36%	0.9%
Kent	19.2%	24.4%	27.0%	5.2%
Ottawa	31.7%	41.9%	32.1%	10.2%
West MI	35.4%	40.7%	14.9%	5.3%
REGION	24.1%	29.5%	18.3%	5.4%

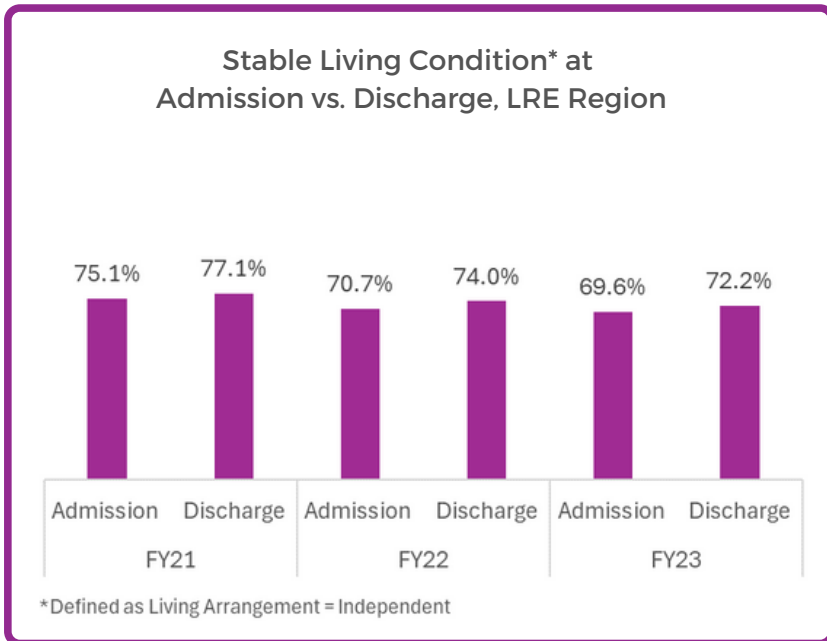


Stability of Housing

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program. Stable is defined as independent.

Region-wide, clients achieved the greatest improvement from admission to discharge in FY22 with a 4.7% improvement compared to a 2.0% improvement in FY21 and 3.7% in FY23.

Allegan achieved the greatest relative improvement in both FY22 (10%) and FY23 (13.7%).



Among Clients Discharged During FY21, the Percent Reporting A Stable Living Condition at Admission vs. Discharge*

FY21	Admission	Discharge	Relative Change	Absolute Change
Allegan	82.6%	86.0%	4.2%	3.5%
Muskegon	67.0%	70.0%	4.5%	3.0%
Kent	75.9%	81.9%	8.0%	6.0%
Ottawa	89.0%	88.5%	-0.6%	-0.5%
West MI	76.1%	69.0%	-9.3%	-7.0%
REGION	75.1%	77.1%	2.6%	2.0%

FY22	Admission	Discharge	Relative Change	Absolute Change
Allegan	80.0%	88.0%	10.0%	8.0%
Muskegon	77.7%	79.7%	2.6%	2.0%
Kent	64.1%	67.8%	5.9%	3.8%
Ottawa	80.6%	83.6%	3.7%	3.0%
West MI	63.1%	67.7%	7.3%	4.6%
REGION	70.7%	74.0%	4.7%	3.3%

FY23	Admission	Discharge	Relative Change	Absolute Change
Allegan	56.9%	64.7%	13.7%	7.8%
Muskegon	75.6%	77.5%	2.5%	1.9%
Kent	60.9%	63.5%	4.2%	2.6%
Ottawa	77.4%	80.1%	3.4%	2.7%
West MI	80.5%	82.3%	2.2%	1.8%
REGION	69.6%	72.2%	3.7%	2.6%



Housing Efforts to Date

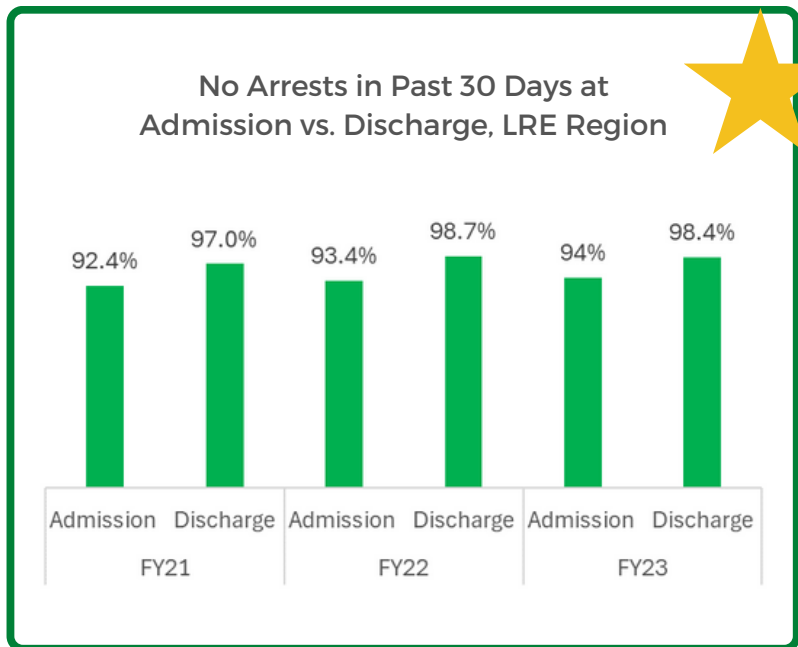
- Network 180 partnered with Mel Trotter (who provides services to individuals who are experiencing homelessness) to have two Recovery Coaches engage with guests at Mel Trotter's Engagement Center.
- Community Mental Health of Ottawa County has begun to provide outreach and services with Refresh (a shower program for individuals experiencing homelessness).
- Network 180 is working with Pine Rest and Grand Rapids Housing Commission to place a Clinician and a Recovery Coach on-site at Adam's Park Apartments.



Criminal Justice Involvement

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide, the percent of clients with no recent arrest was relatively high at admission but improved each fiscal year.



Percent with No Arrest in Prior 30 Days at Admission vs. Discharge

FY21	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	90.7%	90.7%	0.0%	0.0%
Muskegon	95.0%	98.8%	3.9%	3.8%
Kent	92.2%	95.7%	3.7%	3.4%
Ottawa	91.8%	97.3%	6.0%	5.5%
West MI	81.7%	95.8%	17.2%	14.1%
REGION	92.4%	97.0%	4.9%	4.5%

FY22	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	100%	100%	0.0%	0.0%
Muskegon	95.3%	100%	5.0%	4.7%
Kent	95.4%	98.4%	3.1%	3.0%
Ottawa	93.0%	98.0%	5.3%	5.0%
West MI	81.5%	98.5%	20.8%	16.9%
REGION	93.4%	98.7%	5.7%	5.3%

FY23	Percent with No Arrest		Relative Change	Absolute Change
	Admission	Discharge		
Allegan	94.1%	96.1%	2.1%	2.0%
Muskegon	97.1%	98.1%	1.0%	1.0%
Kent	95.5%	97.9%	2.5%	2.4%
Ottawa	90.3%	100.0%	10.7%	9.7%
West MI	90.3%	99.1%	9.7%	8.8%
REGION	94.2%	98.4%	4.4%	4.2%

Priority Populations

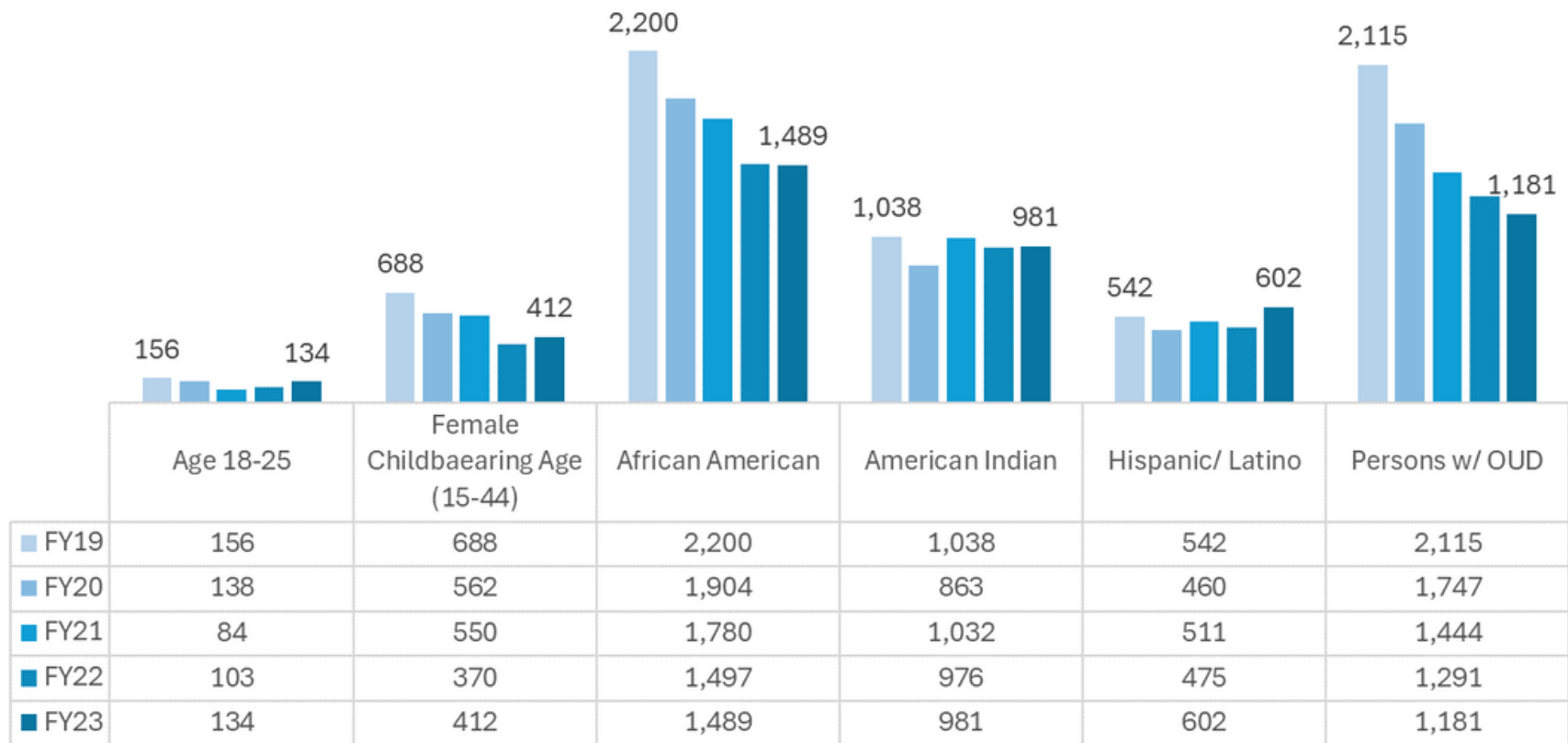
The following pages provide an overview of admissions for populations that MDHHS has identified as a priority to engage in SUD treatment. To monitor engagement, the number of admissions and percentage of total admissions for each priority population are monitored.



Priority Populations: Overview

An overview of admissions for priority populations in the region is provided below. The total number of admissions in the region decreased by 16% between FY19 and FY23 (from 6,565 to 5,496). Admissions for four of these priority populations decreased by a greater amount than can be accounted for by the overall decrease in admissions.

Number of Treatment Admissions by Priority Population, LRE Region



↓14%

↓40%

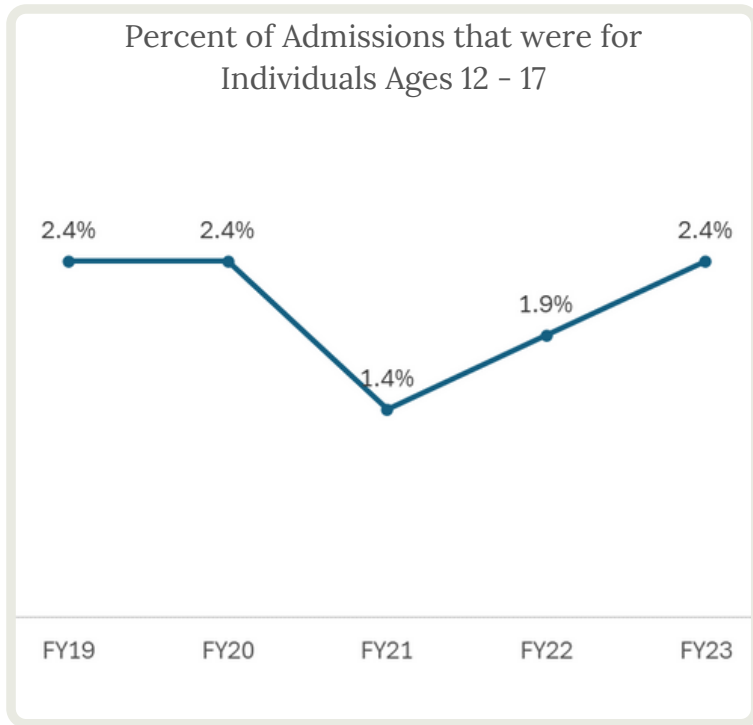
↓32%

↓5%

↓44%

Priority Population: Youth Ages 12-17

The number of admissions for youth ages 12 through 17 decreased 34% between FY19 and FY22 (from 156 to 103) but rebounded somewhat in FY23 due to an increase in Kent County. Muskegon and Ottawa counties had substantial decreases.

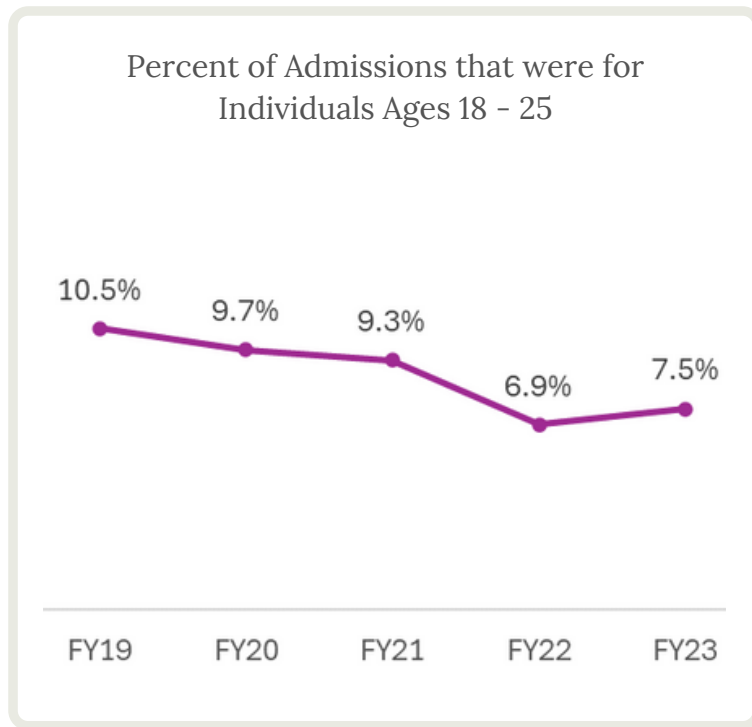


Number of Admissions for Individuals Ages 12 - 17

	FY19	FY20	FY21	FY22	FY23
Allegan	5	9	4	1	0
Muskegon	46	22	0	3	20
Kent	60	70	48	81	100
Ottawa	38	33	25	15	12
Lake	0	2	2	0	0
Mason	7	2	5	2	1
Oceana	0	0	0	1	1
Out of Region	0	0	0	0	0
REGION	156	138	84	103	134

Priority Population: Young Adults Ages 18-25

The number of admissions for young adults ages 18–25 decreased 40% between FY19 and FY23 (from 687 to 412), with substantial decreases in most counties. As a proportion of all admissions, admissions for youth ages 18–25 represented 10.5% of admissions in FY19 and 7.5% in FY23.

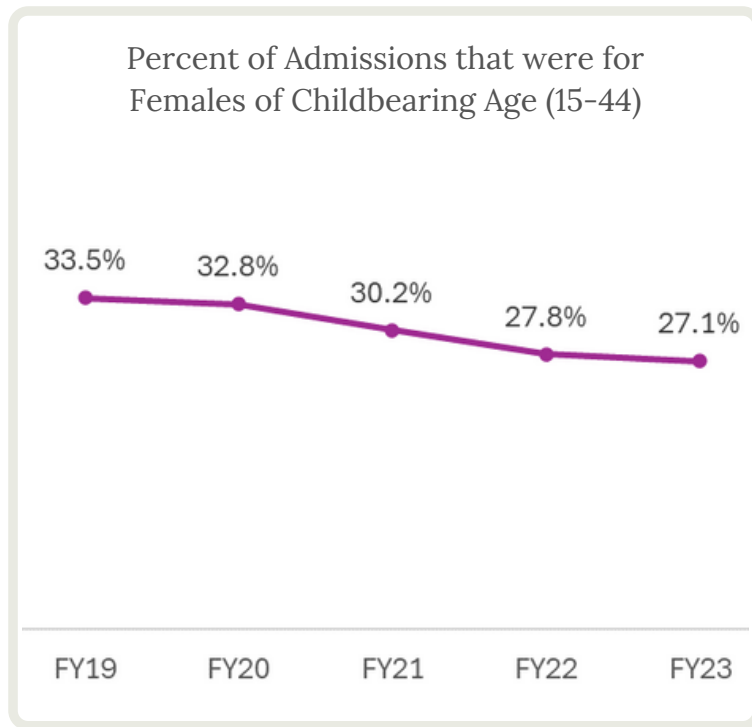


Number of Admissions for Individuals Ages 18-25

	FY19	FY20	FY21	FY22	FY23
Allegan	54	44	45	36	44
Muskegon	165	121	95	63	66
Kent	253	206	213	138	161
Ottawa	102	123	131	90	90
Lake	9	4	8	8	10
Mason	70	39	41	13	29
Oceana	30	22	13	15	12
Out of Region	5	3	4	7	0
REGION	688	562	550	370	412

Priority Population: Females of Childbearing Age (15-44)

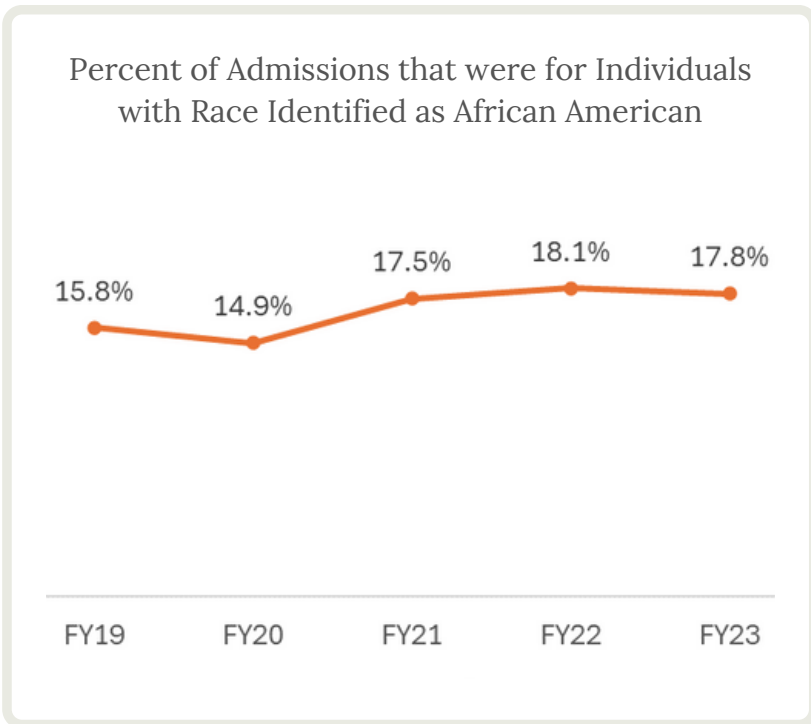
Region-wide, between FY19 and FY23 the number of admissions for females in this age range decreased 32% (from 2,200 to 1,489) with substantial decreases in most counties. As a proportion of all admissions, admissions for this population declined continually from 33.5% of admissions in FY19 to 27.0% in FY23.



	Number of Admissions for Females of Childbearing Age (15-44)				
	FY19	FY20	FY21	FY22	FY23
Allegan	158	155	130	99	115
Muskegon	601	452	404	381	362
Kent	921	835	731	577	585
Ottawa	321	325	331	269	297
Lake	23	27	33	23	14
Mason	121	59	90	85	57
Oceana	63	44	56	45	55
Out of Region	9	7	5	18	4
REGION	2,200	1,904	1,780	1,497	1,489

Priority Population: African American

Region-wide, between FY19 and FY23, the number of admissions for African American individuals decreased 5% (from 1,038 to 981) due to a substantial decrease in Muskegon County while admissions increased for all other counties. Although the number of admissions decreased, the proportion of total admissions that were representing this population has increased overall with continual increases since FY20.

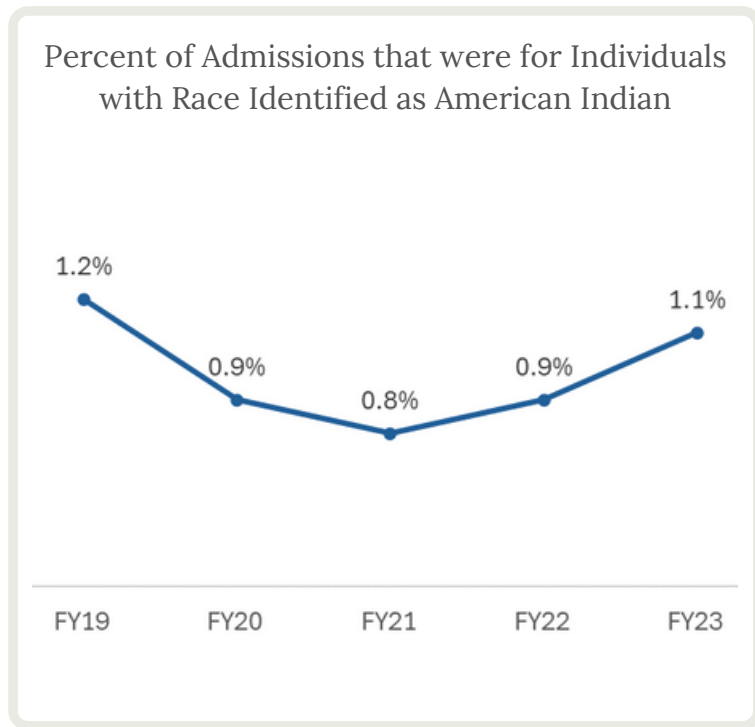


Number of Admissions with Race Identified as African American

	FY19	FY20	FY21	FY22	FY23
Allegan	8	21	17	15	9
Muskegon	373	218	245	228	241
Kent	596	561	686	626	643
Ottawa	47	56	71	93	74
Lake	6	3	8	6	3
Mason	5	3	2	3	8
Oceana	1	0	2	3	3
Out of Region	2	1	1	2	0
REGION	1,038	863	1,032	976	981

Priority Population: American Indian (non-Alaskan Native)

Region-wide, between FY19 and FY23, the number of admissions for American Indian individuals decreased 18% (from 76 to 62). The proportion of all admissions that were for this population remain very low and have decreased slightly since FY19.

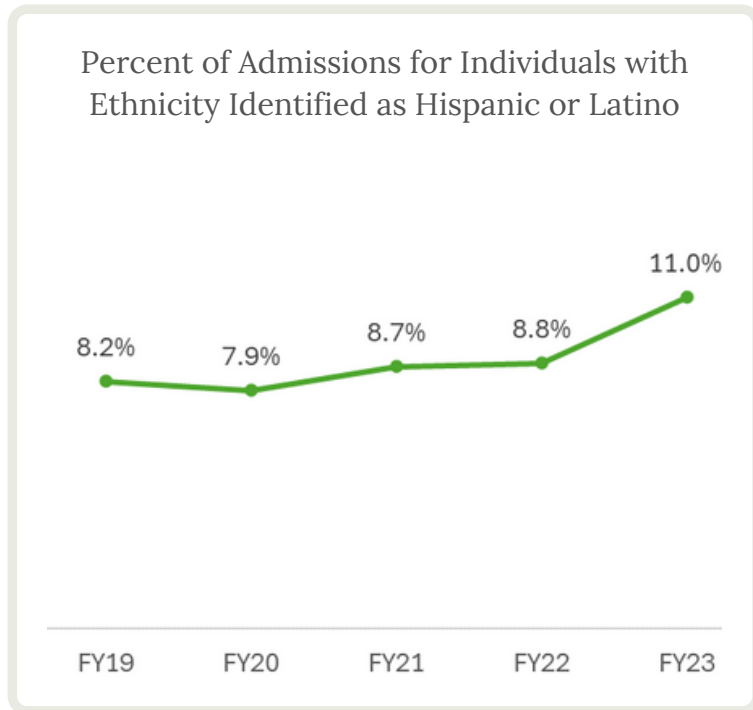


Number of Admissions for Individuals with Race Identified as American Indian

	FY19	FY20	FY21	FY22	FY23
Allegan	6	7	4	0	6
Muskegon	18	13	11	20	15
Kent	36	22	18	23	28
Ottawa	7	6	9	4	6
Lake	3	2	0	1	0
Mason	5	2	6	2	4
Oceana	1	1	2	0	2
Out of Region	0	0	0	0	1
REGION	76	53	50	50	62

Priority Population: Hispanic or Latino

Region-wide, between FY19 and FY23, the number of admissions for Hispanic or Latino individuals increased by 11% (from 542 to 602) due to a substantial increase in Ottawa County. The proportion of all admissions that were for this population increased in FY23 to a high of 11.0%.

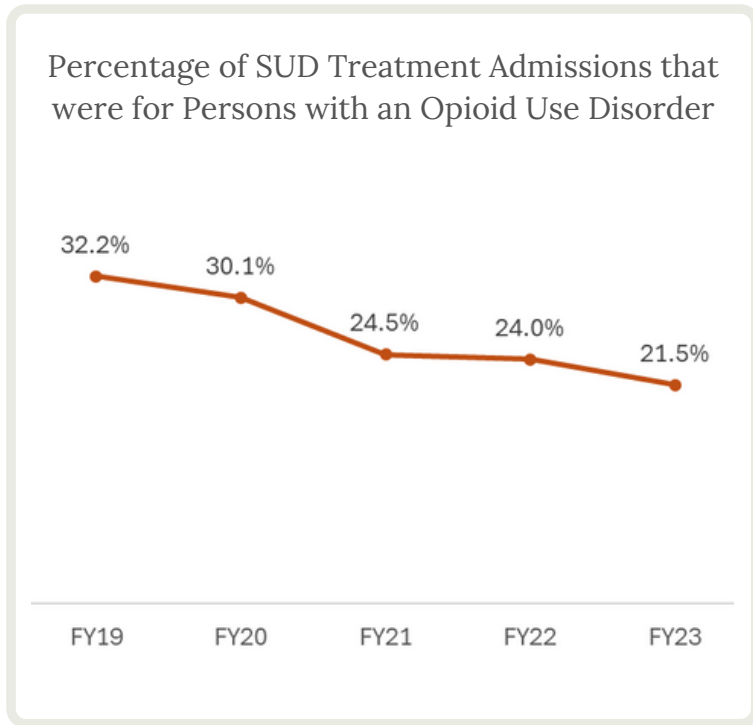


Number of Admissions for Individuals with Ethnicity Identified as Hispanic or Latino

	FY19	FY20	FY21	FY22	FY23
Allegan	32	33	31	29	33
Muskegon	63	49	37	61	68
Kent	279	206	234	194	239
Ottawa	100	123	162	153	207
Lake	3	3	4	3	5
Mason	29	16	12	7	24
Oceana	33	28	30	26	25
Out of Region	3	2	1	2	1
REGION	542	460	511	475	602

Priority Population: Persons with Opioid Use Disorder

Region-wide, between FY19 and FY23, the number of admissions for persons with an opioid use disorder decreased 44% (from 2,115 to 1,181) with substantial reductions in Allegan, Muskegon, and Kent counties. The percentage of total admissions that were for persons with an opioid use disorder also decreased between FY19 and FY23 (from 32.2% to 21.5%).



Number of SUD Treatment Admissions for Persons with an Opioid Use Disorder

	FY19	FY20	FY21	FY22	FY23
Allegan	79	66	50	37	29
Muskegon	744	533	466	493	447
Kent	810	716	543	406	338
Ottawa	237	238	200	142	225
Lake	17	25	19	28	13
Mason	148	103	108	108	67
Oceana	70	50	53	63	57
Out of Region	10	16	5	14	5
REGION	2,115	1,747	1,444	1,291	1,181

Summary of Trends



The following pages provide a snapshot of trend data for all metrics targeted in the LRE SUD Strategic Plan for each CMHSP.

OnPoint - Allegan County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions) - T1	34.8%	41.5%	39.7%	34.6%	35.9%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	n/a	0.7%	2.6%	0.3%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	12.5%	5.9%	1.4%	3.2%	0.8%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	5.15	3.26	8.84	15.46	16.10	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	3.1	3.4	6.6	9.8	14.8	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.72	5.37	17.6	27.55	21.54	11.4
Older Adults	↑ # of admissions for age 55-69	6.3%	7.6%	5.7%	7.1%	12.1%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attending support group in past 30 days	20.3%	24.7%	18.2%	26.1%	30.7%	28.8%
Women's Specialty	↑ # of pregnant women served	6	4	6	4	4	64

OnPoint - Allegan County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	7.1%	5.2%	5.6%	20.0%	20.9%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	40.0%	33.3%	8.6%	18.2%	22.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	6.2	7.6	13.4	13.5	12.8	7.1
	↓ % of discharges from ST Res with reason as 'completed treatment'	54.3%	57.5%	54.2%	68.2%	58.7%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	2.2%	5.0%	0.0%	9.1%	0.0%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	5.3%	0.0%	12.0%	10.0%	0.0%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	77.9%	73.8%	73.6%	61.5%	69.4%	84.2%
	↑ average # of treatment encounters per treatment episode	25.1	37.3	15.5	17.0	13.0	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	37.5%	47.9%	40.7%	60.4%	46.5%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	25.0%	23.9%	22.0%	22.9%	25.2%	26.4%

HealthWest - Muskegon County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	20.1%	16.0%	18.1%	20.2%	21.8%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.4%	0.6%	0.4%	0.3%	0.2%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	16.5%	17.4%	15.6%	17.0%	14.3%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	16.6	7.37	15.98	3.9	7.0	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	27.1	9.5	28.5	4.7	7.0	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	6.64	7.02	7.11	5.92	9.59	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.4%	6.8%	7.5%	7.0%	10.5%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	7.1%	10.1%	9.1%	15.3%	26.5%	28.8%
Women's Specialty	↑ # of pregnant women served	34	23	15	26	19	64

HealthWest - Muskegon County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	8.1%	10.8%	9.4%	13.2%	20.2%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	12.2%	20.7%	25.0%	34.0%	25.9%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	11.7	7.3	8.6	8.3	10.9	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	73.2%	72.5%	73.0%	56.9%	74.0%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	0.0%	0.7%	1.5%	18.2%	2.7%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	19.3%	13.4%	13.8%	15.3%	8.0%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	73.7%	73.2%	81.9%	85.5%	87.3%	84.2%
	↑ average # of treatment encounters per treatment episode	14.6	23.3	24.4	43.0	29.2	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	31.3%	22.4%	21.6%	29.4%	30.6%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	18.0%	15.5%	11.8%	10.6%	13.2%	26.4%

Network 180 - Kent County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	15.9%	16.3%	14.4%	18.8%	18.8%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	0.3%	0.2%	0.4%	0.3%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	4.5%	3.1%	1.8%	2.9%	3.4%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	4.11	6.49	6.66	5.56	5.84	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	4.0	7.1	6.6	6.1	7.2	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.08	5.83	11.2	7.59	7.40	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.5%	9.0%	12.2%	13.6%	12.8%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	15.5%	20.4%	16.4%	20.2%	30.9%	28.8%
Women's Specialty	↑ # of pregnant women served	40	43	26	18	28	64

Network 180 - Kent County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	6.5%	8.0%	11.6%	11.8%	18.3%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	27.3%	23.1%	25.2%	27.6%	36.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	7.8	8.9	9.6	8.5	6.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	63.3%	75.9%	74.1%	55.8%	78.4%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	2.1%	0.5%	1.0%	16.1%	1.8%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	8.0%	9.2%	11.6%	11.3%	10.4%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	78.8%	76.5%	78.6%	75.4%	83.9%	84.2%
	↑ average # of treatment encounters per treatment episode	24.8	25.2	21.5	16.6	20.3	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	39.1%	36.8%	26.8%	43.9%	40.2%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	30.6%	34.5%	54.5%	34.3%	31.0%	26.4%

OCCMHS - Ottawa County, Summary of Trends

Treatment Access Measures		FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	28.4%	26.1%	28.5%	28.2%	27.1%	23.6%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.7%	0.1%	0.5%	0.5%	0.2%	0.2%
	↑ admissions with legal status as 'in jail' (% of all admissions)	0.3%	2.6%	2.6%	0.5%	0.2%	5.6%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	9.59	5.99	6.15	6.42	7.99	7.3
	↓ average days between request for service for Medication Assisted Treatment (MAT)	13.4	4.5	5.2	6.5	8.4	7.4
Rural Communities	↓ average days' time to service for Outpatient* services	5.84	8.44	10.26	13.44	11.22	11.4
Older Adults	↑ # of admissions for individuals aged 55-69	9.3%	7.9%	10.3%	11.2%	12.1%	11.8%

Connection to Community Supports		FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	34.5%	37.6%	26.4%	26.0%	25.1%	28.8%
Women's Specialty	↑ # of pregnant women served	16	8	6	5	8	64

OCCMHS - Ottawa County, continued

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	1.2%	1.6%	11.1%	16.1%	26.5%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	41.4%	24.3%	46.4%	34.5%	40.4%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	6.0	11.7	3.8	6.8	6.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	70.9%	69.7%	62.2%	47.9%	67.2%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	0.0%	2.0%	2.0%	22.3%	7.2%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	14.0%	16.7%	15.1%	8.8%	12.2%	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	85.4%	73.7%	69.5%	72.9%	72.0%	84.2%
	↑ average # of treatment encounters per treatment episode	25.5	21.2	31.7	24.2	23.7	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	40.8%	44.1%	34.8%	36.1%	32.8%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	27.3%	27.5%	26.4%	37.0%	37.4%	26.4%

WCMHS - Lake, Mason and Oceana Counties, Summary of Trends

Treatment Access Measures		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	Lake	17.7%	10.6%	22.2%	19.7%	15.8%	23.6%
		Mason	26.1%	26.2%	26.1%	21.0%	39.9%	
		Oceana	19.0%	20.0%	18.0%	17.3%	28.0%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	Lake	n/a	n/a	n/a	n/a	n/a	0.2%
		Mason	0.3%	n/a	0.7%	0.4%	0.4%	
		Oceana	n/a	n/a	n/a	0.6%	n/a	
	↑ admissions with legal status as 'in jail' (% of all admissions)	Lake	9.7%	10.6%	17.3%	26.3%	19.7%	5.6%
		Mason	16.3%	10.0%	11.3%	12.1%	8.7%	
		Oceana	10.6%	9.4%	13.0%	19.1%	14.5%	
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	Lake	5.12	3.24	3.05	5.54	6.92	7.3
		Mason	4.70	5.01	5.39	6.77	8.57	
		Oceana	13.00	4.26	4.26	6.6	10.30	
	↓ average days between request for service for Medication Assisted Treatment (MAT)	Lake	7.0	2.3	1.4	6.2	9.8	7.4
		Mason	3.8	2.0	3.5	4.9	7.2	
		Oceana	22.4	1.3	1.3	6.0	4.5	

WCMCHS - Lake, Mason and Oceana Counties, cont.

Treatment Access Measures		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Rural Communities	↓ average days' time to service for Outpatient* services	Lake	5.97	6.28	6.97	9.94	16.26	11.4
		Mason	5.48	6.30	8.64	10.19	16.50	
		Oceana	5.31	6.75	7.4	9.6	15.75	
Older Adults	↑ # of admissions for individuals aged 55-69	All	8.1%	8.0%	4.9%	9.1%	8.9%	11.8%

Connection to Community Supports		Counties	FY19	FY20	FY21	FY22	FY23	Region FY23
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	Lake	40.0%	43.1%	52.8%	20.5%	25.0%	28.8%
		Mason	42.1%	40.3%	38.8%	29.3%	37.4%	
		Oceana	33.5%	24.4%	28.5%	21.2%	29.3%	
Women's Specialty	↑ # of pregnant women served	All	6	2	7	2	5	64

WCMCMHS - Lake, Mason and Oceana Counties, cont.

Engagement and Retention		FY19	FY20	FY21	FY22	FY23	Region FY23
Integrated treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	4.2%	7.3%	13.9%	14.9%	13.7%	19.9%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next LOC w/in 7 days	32.7%	30.2%	25.9%	30.8%	42.2%	36.5%
	↓ average # days between discharge and admission to next LOC following ST residential	7.6	9.7	7.9	7.5	5.7	7.1
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	78.0%	74.4%	70.2%	52.0%	59.3%	71.0%
	↑ % discharges from residential LOC with the reason as 'transfer/ completed level of care'	6.1%	6.1%	7.4%	22.5%	15.1%	4.7%
Engagement	↓ % of Outpatient* treatment episodes with no 2nd visit	n/a	0.0%	0.0%	n/a	n/a	10.0%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	73.1%	79.7%	82.1%	90.3%	89.9%	84.2%
	↑ average # of treatment encounters per treatment episode	n/a	42.0	15.7	n/a	n/a	24.5
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	61.4%	69.5%	64.1%	64.6%	51.5%	38.2%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	20.4%	11.5%	18.0%	10.4%	27.3%	26.4%