Further Information for Your Advocacy

The following is from Alan Bolter of the Michigan Association of Community Mental Health Boards. The language and information are relevant. It also suggests that, if the legislature does insist on pilots or demonstrations, they need to include certain protections for enrollees and adequate evaluation of the pilots.

Please use as you see fit, but most of all continue your advocacy. Mental Health supports and services should remain under public authority, not privatized or “profitized”.

Thank you,
Dohn Hoyle
The Arc Michigan Director of Public Policy

As you know, both the House and Senate have passed their FY18 budget recommendations. Now legislative leaders will come together to mold their two separate budgets into one compromised budget bill for FY18. These discussions will begin to heat
up again this week and should be finalized sometime over the next three weeks.

Now is not the time to ease up, we must have a strong finish to our advocacy efforts. Thanks to your help our last two ACTION ALERTS generated over 2000 emails to House and Senate offices - we need to do even better with this next one!!

REQUEST FOR URGENT ACTION: Please contact your House and Senate members urging them to make sensible changes to the final 298 boilerplate language. **Timing is critical, we have roughly three weeks to put pressure on lawmakers as they finalize the FY18 budget. We are asking that you reach out to your lawmakers between now and June 2, urging them to remove the Senate language in Section 234 and to not include health plan run pilot programs in the final version of section 298.**

We also need you to ask that the members of your Board of Directors, your staff, and your community partners make those same contacts - **SIMPLY FORWARD THEM THE ACTION ALERT.** These contacts are critical, legislators must hear from us in order to counter the efforts by others opposed to the public management of the state's publicly sponsored behavioral health and intellectual/developmental disability services and supports system.

Below are quick talking points:

- **REMOVE LANGUAGE** - Section 234 of the Senate DHHS budget, specifically language referring to total Medicaid benefit and financial integration by 9/30/20, which would transfer all Medicaid resources to Medicaid Health plans.

- This language predetermines the outcome of the process without any input from pilots or other measurables and completely ignores the 298 workgroup process and the will of the people.

- **INCLUDE LANGUAGE** - Ensure that the policy and management role for Michigan's Medicaid behavioral health and intellectual/developmental disability services and supports system remains public.

*Concerns Regarding a Health Plan Run Pilot*
Health Plans do not have a good track record managing behavioral health services

- Mild/moderate services track record
- Duals initiative

Less money available for services

- Higher overhead cost

What are we trying to accomplish?

- What are we measuring? Outcomes/metrics?

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