

Washtenaw County Mental Health and Substance Use Service Gaps Assessment July 2016

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Introduction

In December 2015 CHRT conducted interviews with 19 key stakeholders in Washtenaw County to describe existing gaps in behavioral health services. This report is a summary of the identified gaps and, where available, relevant data to illustrate the magnitude of each gap¹.

Appendix A of this report includes prevalence information about behavioral health conditions in Washtenaw County benchmarked against state and/or national data. **Appendix B** is a list of mental health and substance use programs and larger providers groups or organizations in the County including information about numbers of providers, bed capacity and accepted insurance. **Appendix C** lists the stakeholders who were interviewed to identify the gaps in services.

Gaps Related to Provider-Supply Issues Causing Delayed Receipt of Appropriate Services

Most key informants (16/19) identified delayed receipt of appropriate services as a major gap in care in Washtenaw County. Delays include waiting for outpatient appointments for medication management, supportive therapy, other specialty services (e.g., injectibles), and long waits in emergency departments.

- 17 out of 25 outpatient providers/programs included in this analysis had a waitlist for services. The average wait time for services was three weeks. The longest wait reported was four months for psychiatrist evaluations. **Appendix A**
- In Michigan overall, physicians reported adult and child psychiatry as the first and second most difficult specialties to schedule a referral, respectively. Addiction medicine was the fourth most difficult specialty for referrals. **Figure 1**

Figure 1. Greatest Difficulty Scheduling Referrals, by Specialty Area, 2012

Specialty	Percentage of active physicians indicating difficulty scheduling a referral to the identified specialty
Psychiatry (Adult)	12%
Psychiatry (Child & Adolescent)	8
Rheumatology	8
Addiction Medicine	7
Endocrinology	7
Dermatology	6
Neurology	6
Pain Medicine	6

SOURCE: Michigan Department of Community Health Survey of Physicians, 2012:
http://www.michigan.gov/documents/lara/2012_Physician_Report_W_Comparisons_428507_7.pdf

Delays in appropriate care were also attributed to the fact that too few providers in the county accept Medicaid, Medicare or any insurance. Of the providers included in this analysis, over half did not provide a sliding fee scale or other financial assistance options.

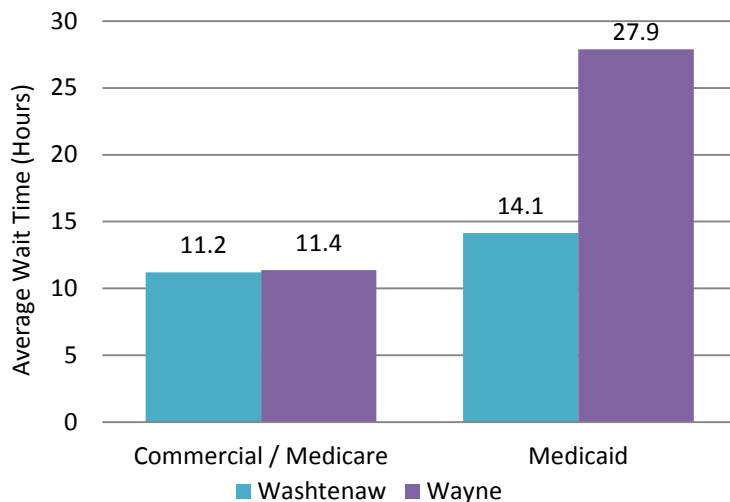
¹ Quantitative data about wait times and other gaps were collected in May-June 2016. Data derived from communication with a stakeholder reflects estimated averages.

Extended Wait Times in Psychiatric Emergency Departments

Seven of 19 stakeholders reported that patients have very long waits in emergency services departments for psychiatric services. Some waiting was caused by the lack of availability of inpatient beds.

- Two of the five inpatient psychiatric units in Washtenaw County continuously have a waitlist.
- Average wait times at UMHS PES for patients admitted to inpatient units or transferred:
 - Up to 14 hours for Washtenaw residents, and up to 28 hours for Wayne County residents; **Figure 2**
 - 12 hours for all patients; **Figure 3**
- In addition, approximately 40 UMHS PES patients per month are transferred to a different provider than the UMHS Adult Inpatient Psychiatry for lack of an available bed. An estimated 1-2 patients per week wait for more than 24 hours in UMHS PES for placement in the UMHS Child and Adolescent Psychiatry Inpatient Program.^{2,3} At St. Joseph Mercy Chelsea Emergency Department, wait times range from a few hours to a few days to admit a child to an inpatient unit.⁴

Figure 2. Average Wait Times for UMHS PES Patients Awaiting Inpatient Placement or Transfer, January - March 2016



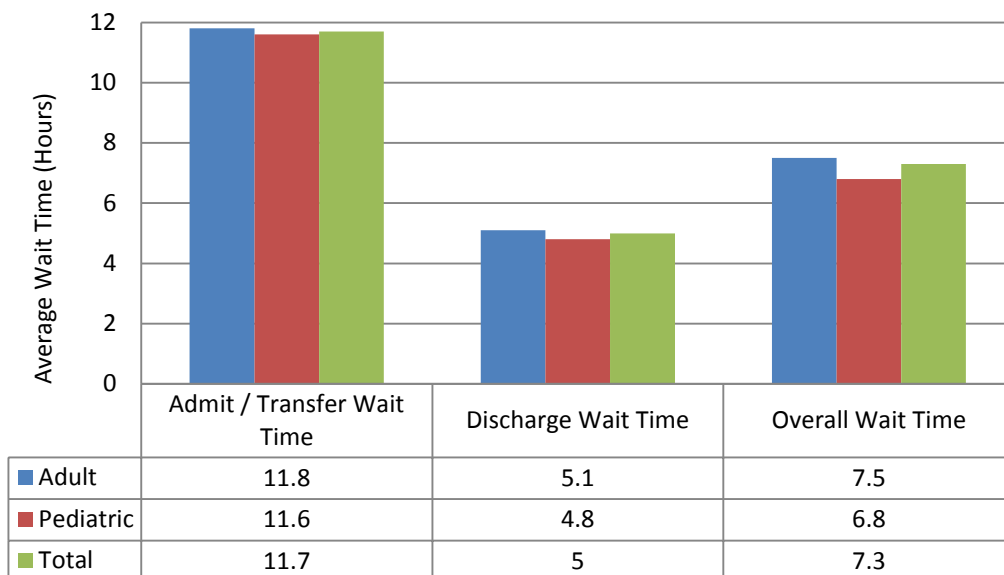
SOURCE: UMHS PES Analysis, May 2016.

² Communication with Ben Biermann, Child and Adolescent Psychiatry Inpatient Director, UMHS, May 2016.

³ Ben Biermann, Director of the UMHS Child and Adolescent Psychiatry Inpatient Program describes the program's patient population as the entire state of Michigan.

⁴ Communication with Nancy Siegrist, May 2016.

Figure 3. Average Wait Times for UMHS PES Patients, by Age and Discharge Status, January - March 2016.



SOURCE: UMHS PES Analysis, May 2016.

In addition to waiting for inpatient placement, some patients experience long waits in the ED for CMH evaluation, either for WCCMH or for other county CMH evaluations.

- In 2016, Washtenaw County Medicaid patients who were admitted or transferred to an inpatient unit had an average wait of 3 hours longer in UMHS PES than patients with commercial insurance or Medicare. Wayne County Medicaid patients have longer wait times because they must be evaluated in Wayne County (WCCMH cannot make determinations for Wayne County CMH, unlike other counties that have reciprocity with WCCMH). Between January and May 2016, UMHS PES saw six Wayne County Medicaid patients with average wait time in UMHS PES of 28 hours. **Figure 2**

Some extended wait times in the ED are due to difficulty connecting a patient to an appropriate outpatient community provider. At SJMHS Ann Arbor, approximately 10-15% patients return to the ED within a month of a previous ED visit, which may be an indication of poor connection with a community provider.⁵ The UMHS does have a Crisis Support Clinic that provides psychiatric short-term stabilization and bridging services for patients transitioning from the hospital to a community provider. The wait time for a first appointment at the Crisis Support Clinic is approximately 10-14 days.⁶

Some extended ED wait times may also be due to the fact that the county has no community crisis/short-term stay facility (e.g., Common Ground⁷ in Oakland County). Currently, there are no crisis beds in Washtenaw County that act as short-term stay beds or walk-in capacity for

⁵ Communication with Tiffany Turner-Baldwin, LMSW in Psychiatric Access at SJMHS, May 2016.

⁶ Communication with Laura Hirshbein, MD PhD, May 2016.

⁷ <http://commongroundhelps.org/>

mental health services. Crisis/short-term stay beds can help divert patients from psychiatric EDs, provide stability between an ED visit and outpatient care, and act as step-down settings from inpatient to outpatient care.

Delays Receiving Mental Health Services for Certain Subpopulations

In addition to issues with wait times in EDs, receipt of appropriate outpatient mental health services is particularly difficult for certain subpopulations of patients in Washtenaw County. Seven of 19 stakeholders reported that there are too few providers for individuals actively using substances, geriatric and homebound, developmentally disabled, those with language barriers and those needing long term services. Figure 4 includes estimates of unmet need and waitlists for these subpopulations.

Figure 4. Subpopulation Service Gaps at 3 County Providers

Population	Jewish Family Services (JFS)	Catholic Social Services (CSS)	Huron Valley PACE
Active substance abusers	Unable to serve 5-10 patients/mo. (JFS cannot serve patients with SUD as primary issue)	Unable to serve approx. 7 patients/mo. due to high severity or need for medication therapy	Unable to serve 5-10 patients/mo. who would otherwise qualify for PACE services
Geriatric / older adult	JFS serves all patients over 60 years old; occasionally has a waitlist	Unable to serve approx. 2 patients/mo.	No gaps reported for those who qualify for PACE
Home-bound elderly	Waitlist of approx. 3 weeks	CSS does not serve homebound	No gaps reported for those who qualify for PACE
Developmental disability with mental illness	Unable to serve 1-5 patients/mo. JFS cannot serve DD patients	Unable to serve approx. 2 patients/mo.	No gaps reported for those who qualify for PACE
Require long-term medical care, either in facility/at home	Unable to serve 1-3 patients/mo.	CSS does not serve homebound or those in LTC facilities	N/A - do not qualify for PACE if in a facility
Need long-term therapy	There is a two week wait for long-term therapy. Currently, there is no one on the waitlist.	Limited capacity for long-term therapy	No gaps reported for those who qualify for PACE
Language barriers	Unable to serve approx. 5 patients/mo. (JFS has 1 Arabic-speaking therapist and 1 Russian-speaking therapist).	Unable to serve about 1 patient per month. (CSS can accept Spanish- and French-speaking clients).	No gaps reported for those who qualify for PACE

Sources: Communications with Kate Papachristau, LCSW, at JFS, Steve Sheldon, LMSW at CSS, and Rick Bluhm, JD at Huron Valley PACE, 2016.

Delayed Discharges from Inpatient Settings

Some inpatients experience delayed discharges/longer than necessary inpatient stays because there is no appropriate provider available for their transition to the community. Four of 19 stakeholders interviewed identified this gap. In particular, often there is no safe place to discharge homeless patients.

- At UMHS Adult Inpatient Psychiatry, approximately 10% of patients (5-10 patients/mo.) are discharged without needed supportive housing. This rate is slightly higher in the winter months.⁸
 - Staff of the PATH⁹ program refer to the Delonis clinic for psychiatric appointments. The clinic has a waitlist of approximately 3 patients for a wait of 1-2 weeks.¹⁰
- At the UMHS Child and Adolescent Psychiatry Inpatient Program, 2-3 patients/year are difficult to place due to the need for a new foster care assignment; the placement process usually takes a few weeks.¹¹
- At St. Joseph Mercy Chelsea Inpatient Behavioral Health Services, 10-12 patients/year are difficult to place in the community due to homelessness.¹²
- At St. Joseph Chelsea Inpatient Behavioral Services, 3-5 patients/mo. have a delayed discharge or are discharged with a less than desirable care plan due to a lack of insurance coverage for residential substance use treatment and/or limited capacity at existing residential treatment programs.¹³

In addition to delayed discharges, some patients are discharged but to inadequate community supports.

- When discharged from UMHS Adult Inpatient Psychiatry, some patients wait 10-15 days for an outpatient appointment, and up to two months for a psychiatry appointment. Approximately 50% of patients per month are connected to a primary care physician or therapist for continuity of care, but this level of support is not adequate care for many patients¹⁴.
- At UMHS Child and Adolescent Psychiatry Inpatient Program, approximately 25% of discharged patients are difficult to place within the community. About 1 in 50 patients is discharged without a community support in place.¹⁵ Approximately 10-12 patients per year are difficult to place due to need for residential treatment, which usually takes between 1-3 weeks.¹⁶

⁸ Patients without supportive housing include those who are going to stay with friends, referred to a shelter, or otherwise have no housing. Communication with Laura Hirshbein, May and June 2016.

⁹ The Projects for Assistance in Transition from Homelessness (PATH) conducts outreach to homeless individuals and connects them to necessary services. PATH accepts referrals from psychiatric EDs and inpatient units and often connects them to the psychiatric clinic in the Delonis Center.

¹⁰ Communication with John Schippers, Director of Programs and Operations, Shelter Association of Washtenaw County, May 2016.

¹¹ Communication with Ben Biermann, May 2016; the UMHS Child and Adolescent Psychiatry Inpatient Program sees patients from across Michigan.

¹² Communication with Nancy Siegrist, May 2016.

¹³ Communication with Nancy Siegrist, June 2016.

¹⁴ Communication with Dr. Laura Hirshbein, May 2016.

¹⁵ Communication with Dr. Ben Biermann. Discharge without a community support is usually due to: (1) precipitous notification from an insurer that an extension of an inpatient stay is not approved or (2) an outpatient appointment requires parental/guardian consent but family refuses/is not involved. May 2016.

¹⁶ Communication with Ben Biermann, May 2016.

Paradoxically, at the same time that many patients have difficulty getting appointments for appropriate and timely outpatient services, many providers have high no-show rates for outpatient services.

- JFS has an outpatient no-show rate of approximately 10%, or 5-10 patients per month.¹⁷
- CSS has an outpatient no-show rate of 23%.¹⁸

Gaps Associated with Funding/Reimbursement

Many of the gaps in mental health and substance use services in the county are attributable to reductions in funding for services for individuals previously served by the WCCMH (e.g., those covered by State of Michigan General Funds (GF)) or to the lack of stable funding sources for necessary services (e.g., case management).

Community Providers are Challenged Managing Higher Acuity Patients

Many patients who were previously treated by WCCMH and recently discharged due to cuts in GF are higher acuity patients than community providers typically treat. For example, many patients require injectable medications but few providers in the community are able and willing to treat these patients. Fifteen of 19 stakeholders interviewed for this assessment identified this gap.

- From November 2014 through April 2016, approximately 350 WCCMH patients were discharged from CMH care to community care due mainly to reductions in GF.¹⁹ At any given time, UMHS Adult Inpatient Psychiatry serves approximately 2-3 patients who were previously served by CMH; this is 10% of all adult psychiatry inpatients.²⁰
- Since fall 2015, UMHS PES has treated approximately 20 to 30 patients who were previously served by WCCMH.²¹

Some patients recently discharged from CMH, who were either ineligible for WCCMH services or were transferred out because they did not have a form of Medicaid, who previously experienced long-term stability of their mental health conditions are requiring inpatient care. Below are three example of patient experiences with UMHS Adult Inpatient Psychiatric Program all from December 2015:

“38 year old man with a long history of schizophrenia, formerly followed by [WCCMH] and on regular Haldol decanoate injections. He had been stable for more than 8 years. He was dropped from [WCCMH] in May of 2015 because of his insurance (private payer) and was sent to his PCP who switched him to Seroquel. The patient decompensated and got very paranoid. He was admitted to [UMHS Adult Inpatient Psychiatric Program] because he was very paranoid that the government was trying to poison both him and his son.”

¹⁷ Communication with Kata Papachristau, Manager of Clinical and Community Services, JFS, May 2016.

¹⁸ Communication with Steve Sheldon, Business Operations Director, CSS, May 2016.

¹⁹ Communication with Mike Harding, May 2016.

²⁰ Communication with Laura Hirshbein, May 2016.

²¹ Communication with Rachel Glick, May 2016.

“40 year old man with a very serious polysubstance use disorder and schizophrenia who had been stable in the past on clozapine. He is very psychotic and hears voices telling him to either use drugs or kill himself. He has been hospitalized twice in the past few weeks because his only outpatient treatment is at Home of New Vision and they can't handle his level of psychosis. He is not eligible for CMH because he has Medicare.”

“25 year old man with a long history of schizophrenia, refractory to all medications other than clozapine. He had been stable on his medication and followed by [WCCMH] but was discharged from their care because of his Medicare. His PCP was managing his clozapine and listened to the patient about tapering off the medication. The patient became acutely psychotic and needed readmission. There is no way to get him outpatient treatment with someone who is comfortable with managing clozapine for a psychotic illness and who takes Medicare.”²²

Community Mental Health providers in some counties, including Washtenaw, had been able to help patients reach Medicaid spend down thresholds each month so that they could qualify for Medicaid coverage of their CMH services. Due to recent cuts to GFs, the WCCMH has had to limit the number of clients they can help reach spend down thresholds.²³ Three of 19 stakeholders interviewed for this assessment identified this gap.

- About 1 to 2 spend-down patients are put on a waitlist each month. At any given time, there are 3-4 patients on the waitlist. WCCMH helps approximately 190 patients reach spend down each month. WCCMH spends an average of \$800 per patient/mo. for Medicaid spend down, ranging from \$200 to \$1,800 per patient/mo.

Lack of Reimbursement for Case Management Services

Community providers such as FQHCs and other safety net providers cannot bill for needed, evidenced-based case management services for patients who do not qualify for CMH services covered by Medicaid. Medicaid and private insurers do not reimburse providers for case management for patients with mild to moderate mental health needs. Thirteen of nineteen stakeholders interviewed for this assessment identified this as a gap.

- Of the providers and programs assessed in this report, most (42/60) provided some case management services but were not reimbursed for them.

Mislabeled of Students with Mental Health Needs

Many students in the public schools with undiagnosed and/or untreated mental health needs have behaviors mislabeled by teachers and others. Teachers in the WISD and other parts of the public school system lack adequate training to identify potential mental health issues in young children because there is inadequate funding for training. Two of the 19 stakeholders interviewed for this assessment identified this gap.

²² Communication with Laura Hirshbein, December 2015.

²³ Communication with Mike Harding, May 2016.

Addressing Gaps in Mental Health Services in Washtenaw County

Providers and payers for services in Washtenaw County have a unique opportunity to address the gaps identified in this assessment together using the structure of the WHI Mental Health/Substance Use workgroup.

Proposed solutions to the gaps include the following:

- Policies to encourage more psychiatrists to take Medicaid and Medicare patients. This could include working with CMS, DHHS and health plans to make changes in Medicare and/or Medicaid payment rates, or with health systems to identify other approaches to support willing providers;
- Increased funding for low-cost integrated care models in safety net clinics. This could include working with CMS, DHHS and health plans to pay for care management services as well as psychiatry panel review;
- Training/transfer of skills from CMHs to community providers for injectibles or other needed specialty services;
- Statewide psychiatric bed registry. Work with DHHS to create and support a statewide registry that ties to active/staffing provider availability and criteria for admission;
- Develop support for a comprehensive community mental health program, separate from EDs, with walk-in capability, observation, short stays, appointments for follow-up care, and social assistance, programming with first responders, shelter. This long-term solution would require multi-pronged approach to development and funding, including multi-county CMHs/PIHP, health systems, grant funding, law enforcement and others (an approach like Common Ground in Oakland County).

Appendix A. Mental Health and Substance Use Prevalence Statistics

Table 1. Mental Health Status in Washtenaw County, Michigan, and the U.S.

Mental Health Indicator	Washtenaw County	Michigan	U.S.
Average number of poor mental health days in last month ²⁴	3.4 days	4.2 days	3.7 days
Anxiety disorder	18% (521) ²⁵	18% (173) ²⁶	12% (91,339) ²⁷
Depressive disorder	20% (567) ²⁵	21% (1,641) ²⁴	19% (88,233) ²⁴

Patients served by WCCMH, FY2015 (Oct. 2015 – September 2016):²⁸

- Approximately 5,400 total unique patients.
- Approximately 1,200 (22%) were not eligible for CMH services.
- On average, about 3,500 patients per month.

Insurance status of patients served by WCCMH Oct. 2015 – Feb. 2016:²⁹

- Medicaid: 72% (3,002)
- Healthy Michigan Plan: 14% (593)
- General Fund: 14% (602)

Table 2. Insurance Status, Washtenaw County and Michigan, 2015

Insurance Status	Washtenaw County ²⁵	Michigan ²⁶
Medicaid or Healthy Michigan Plan	10%	10%
Medicare	14%	20%
Private	68%	55%
Uninsured	8%	5%

Table 3. Psychiatrists in Washtenaw County, Michigan, and the U.S.

Providers	Washtenaw County	Michigan	U.S.
Active Psychiatrists ³⁰	141	830	30,300
Active Psychiatrists per 100,000 people ³⁰	40.1	8.4	9.6
Percent of active psychiatrists over 55 or 60 years old	N/A	52% (over 55) ³¹	59% (over 60) ³²

²⁴ Behavioral Risk Factor Surveillance System (BRFSS), 2014.

²⁵ Washtenaw County Health Improvement Plan (HIP) Survey, 2015

²⁶ Cover Michigan, 2015.

²⁷ BRFSS, 2008: http://www.cdc.gov/mmwr/preview/mmwrhtml/su6003a1.htm?s_cid=su6003a1_w#Tab14

²⁸ Communication with Mike Harding, May 2016.

²⁹ WCCMH Budget/Finance Committee Materials, April 11, 2016.

³⁰ Health Resources Comparison Tool, 2013. Health Resources and Services Administration (HRSA).

³¹ Association of American Medical Colleges (AAMC), Michigan Profile:

<https://www.aamc.org/download/447190/data/michiganprofile.pdf>

³² 2014 Physician Specialty Data Book, 2014. Center for Workforce Studies:

<https://members.aamc.org/eweb/upload/Physician%20Specialty%20Databook%202014.pdf>

Appendix B. Behavioral Health Resources – Washtenaw County

Primary Care / Safety Net

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	IHA Academic Internal Medicine (SJM) 533 McAuley Dr. #4001, Ypsilanti 48197	TaMMS only; existing primary care patients with mild and moderate mental illness. Counseling and Rx mgmt. ³³	Addictionist will do Rx mgmt.; otherwise refer to community detox services.	Adult	1 hr/wk of consult for TaMMS (FTE uncertain)	0 (primary care only)	1 (1 FTE)	1 (0.5 FTE) TaMMS care mgr.	~1-4 weeks for MSW TaMMS: existing primary care patients only, accommodates 50 patients at a time	0	TaMMS is grant funded; no insurance restrictions			
	Shelter Association Delonis Center 312 W. Huron St. Ann Arbor, 48103	Case mgmt. for clients; conducts homeless outreach and MH services through the PATH grant with WCCMH; connects patients to WCCMH's PORT program.	Substance abuse assessments only; will link to Dawn Farms or Home of New Vision.	Adult	1 (0.1 FTE) for ½ day per week (plus 2 residents) (provider is from WCCMH)	0	13 (1 MSW FTE and 3 BSW FTE) and 1 MSW (1 FTE) for PATH	All MSW do case mgmt.	No	0 for MH (75 for temp. homeless)	Free service			
	Packard Health 3174 Packard Rd Ann Arbor 48108 501 N. Maple Rd Ann Arbor 48103 200 Arnet #150, Ypsilanti 48198	Short term counseling for existing patients; Rx mgmt. by PCP if it is not narcotic, benzodiazepine, or stimulant. TaMMS program: existing primary care patients with mild and moderate mental illness. Counseling and Rx mgmt. ³³	None, but will refer out to community detox services.	All (TaMMS is adult only)	1 (0.1 FTE) ½ per week at 1 of 3 locations (plus 2 residents) (provided by WCCMH); 1 hr/wk of consult for TaMMS (FTE uncertain)	0 (primary care only)	1 (1 FTE) (provided by WCCMH)	1 (0.5 FTE) TaMMS care mgr.	~2 weeks to see MSW TaMMS: existing primary care patients only, accommodates 50 patients at a time	0	Yes	Yes	Yes	Yes, sliding scale
	Regional Alliance of Healthy Schools (six locations)	Individual/group/family counseling, risk assessments, depression Rx mgmt., anger mgmt., yoga, referrals to community resources.	Some substance abuse education and linking to community resources.	Students only	0	8 (6 FTE)	8 (6 FTE)	0	2 months Ypsilanti Community and Lincoln Consolidated	7 MH exam rooms	Does not bill insurance; all services sliding scale			

³³ TaMMS is 100% grant-funded, meaning the service is free to existing patients (however, the program can only accept about 50 patients at a time); program is funded through 9/20/2016

Primary Care / Safety Net (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	Ypsilanti Health Center (UMHS) 200 Arnet St. Ypsilanti 48198	Existing patients: psychiatry consultation & limited psychotherapy. TaMMS program: existing adult primary care patients with mild and moderate mental illness. Care mgmt. and Rx mgmt. Others referred out. ³⁴ Pediatrics: Developmental-Behavioral Pediatrics and Frankel Child Behavioral Outpatient.	Sees dual-diagnosis, but not purely substance abuse disorders. Referred to UMHS Ambulatory Psychiatry or community resource depending on insurance.	All (TaMMS is adult only)	1 hr/wk of consult for TaMMS (FTE uncertain)	0 (only primary care)	2 (1 FTE) MSW for short-term intervention & concrete needs; 2 ped. therapists (FTEs uncertain)	1 (0.5 FTE) TaMMS MSW care mgr.	2-3 weeks for Frankel pediatric; few months for child behavioral TaMMS: existing primary care patients only, accommodates 50 patients at a time	0	Yes	Yes	Yes	Financial support available but limited TaMMS is grant funded; no insurance restrictions
	Taubman General Medicine (UMHS) 1500 E. Medical Ctr. #3116 Ann Arbor, 48109	TaMMS only; existing adult primary care patients with mild and moderate mental illness. Care mgmt. and Rx mgmt. ³⁴ Refers to UMHS Ambulatory Psychiatric or community resources.	None, but refers to UMHS Ambulatory Psychiatry or community resources based on insurance.	Adult	1 hr/wk of consult for TaMMS (FTE uncertain)	0	1 MSW (.4 FTE)	1 (0.5 FTE) TaMMS care mgr.	Existing primary care patients only, accommodates 50 patients at a time	0	TaMMS is granted funded; no insurance restrictions			
Mental Health & Substance Abuse	Corner Health Center 47 N. Huron Ypsilanti, 48198	Short-term individual counseling (includes stress mgmt., bullying support, eating disorders, LGBTQ+ support, depression, anxiety, ADHD).	Screening, Brief Intervention, and Referral to Treatment (SBIRT): motivational interviewing, individual therapy, addiction medicine physicians from SJM; smoking cessation; refers to Dawn Farm, HONV or other program.	12-25	1 (.25 FTE) plus 1 resident (both in-kind from UMHS)	0 (only primary care)	4.5 (3 FTE) MSW 1 (1 FTE) Health Promotion Coordinator does SBI but not therapy	MSWs do case mgmt. 1 (0.8 FTE) Behavioral Health Supervisor	35 individuals on waitlist, but expect to decrease once two positions are filled	0	Yes	Yes	Yes	Yes, sliding scale

³⁴ TaMMS is 100% grant-funded, meaning the service is free to existing patients (however, the program can only accept about 50 patients at a time); program is funded through 9/20/2016

Outpatient Services

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Age s	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	Jewish Family Services 2245 S. State St, #200 Ann Arbor, 48104	Individual, couple and group therapy, food pantry, social services, caregiver support, employment assistance, smoking cessation, and more. Case mgmt. for patients 60+ years old.	None. Refers to Home of New Vision or Dawn Farms.	≥12	0	0	9 (all part-time, FTEs uncertain)	1 MSW and 2 BSW (all part time, FTEs uncertain) ³⁵	No	0	Yes, except straight Medicaid	Yes	Yes	Yes, sliding scale
	St. Mary Mercy Outpatient Psychiatric Services (SJM Outpatient Behavioral) 2006 Hogback Ste. 1 Ann Arbor, 48105 Canton location & Brighton location (share providers)	Psychiatric evaluation, Rx mgmt, outpatient therapy specialty groups. Treats depression, anxiety, phobias, grief, chronic illness adjustments, ADHD, PTSD, relationship concerns, self-esteem, stress mgmt., gender identify, body image and weight issues, childhood trauma, anger mgmt.	Will see dual-diagnosis or refer/link to other resources in hospital or community.	All	3 child, 1 child & adult, 1 adult-only (2.5 FTE total) plus residents for adult-only	0	12 (8 FTEs) (currently recruiting to increase FTEs)	0	6 weeks for psychiatry unless pt. is willing to see a resident	0	Yes	Yes	Yes	Yes, financial support available
	SJM Chelsea Community Hospital Outpatient Behavioral Health Clinic 350 N. Main #150, Chelsea 7089 Dexter-Ann Arbor Rd, Dexter	Evaluation and individual/group/family therapy. Evaluation and treatment available for children and adults.	Provides evaluation and treatment and may refer to other internal or community resources.	All	1 geriatric (0.6 FTE), 2 adult (2 FTE), 1 child (0.6 FTE)	2 psychiatric RNs (1.1 FTE)	14 (11 FTE) (includes mix of adult, child & geriatric)	0	~4 weeks for adult psychiatric evaluation	0	Yes	Yes	Yes	Yes, financial support available
	POWER, Inc. 103 Arnet St. Ypsilanti, 48198	Individual, couples, family, group; Christian-centered therapy; therapy for homeless; case mgmt.	Addiction counseling.	All	0	0	8 MSW (all part-time, FTEs uncertain) (4 are interns)	Yes, all MSW do case mgmt.	No	0	No	Yes	Yes	Yes, sliding scale

³⁵ Case management is predominantly for patients 60 years and older. There are MSW and BSW interns who provide case management for patients under 60 years old, but capacity is very limited.

Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	UMHS Ambulatory Psychiatric Services - Adult Rachel Upjohn Building 4250 Plymouth Rd, Ann Arbor 48109	11 clinics/programs (includes anxiety, sleep medicine, bipolar, depression, geriatric, chronic illness mgmt., personality disorders, psychotherapy, rTMS & ECT, women & infant). Refers to SJM for intensive outpatient.	See UMATS.	Adult	12 (3.5 FTE) (adult plus limited geriatric)	6 NP (5.5 FTE) and 2 RN (1.8 FTE)	10 (6 FTE)	5 MSW (4 FTE) and 10 BSW (0.2 FTE)	49% of new pt. are seen within 4 weeks	0	Yes	Yes	Yes	Yes, financial support available; otherwise, sliding scale
	UMHS Ambulatory Psychiatric Services – Child & Adolescent Rachel Upjohn Building 4250 Plymouth Rd, Ann Arbor 48109	11 clinics/programs (includes ADHD, autism spectrum, depression, infant & early child, anxiety & tic, collaborative care, risk evaluation, trauma & grief, ECT). Refers to SJM for intensive outpatient.	See UMATS.	Approx. 4 – 18	11 (2.7 FTE)	1 NP (0.4 FTE) and 1 RN (1.0 FTE)	10 (4.5 FTE)	1 BSW (0.8 FTE)	50% of new pt. are seen within 4 weeks	0	Yes	Yes	Yes	Yes, financial support available; otherwise, sliding scale
	VA Mental Health Clinic 2215 Fuller Road Ann Arbor 48105	Psychiatric primary care program, intensive and assertive community treatment, case management, suicide prevention, clinical teams for disorders (anxiety, depression, SUD).	If dual-diagnosis then will work with internal mental health clinic. See VA Substance Abuse Clinic	Adult – Eligible Veterans Only	8 (5.4 FTE)	1 RN (1 FTE)	7 (7 FTE)	2 (2 FTE) SW do case mgmt.	1-2 weeks	0	Yes	Yes	Yes	Yes
	VA Outpatient PTSD Program 2215 Fuller Road Ann Arbor 48105	Targeted PTSD psychotherapy and pharmacology, both group and individual therapy.	May link with VA Substance Abuse Clinic	Adult – Eligible Veterans Only	4 (1.9 FTE)	1 NP (1 FTE)	7 (5 FTE)	0.5 FTE SW do case mgmt.	1-2 weeks	0	Yes	Yes	Yes	Yes

Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	WCCMH 555 Towner, Ypsilanti, 48107 2140 Ellsworth, Ypsilanti 48197 110 N. Fourth Ave. Ann Arbor, 48104	Case mgmt., assertive community treatment (ACT), group counseling, limited individual counseling, Rx, long-acting injectables, consultation, and case mgmt. for adult and juvenile jail, court-ordered treatment, hospitalization care coordination, complex/high-need care, services for homeless individuals. Must be enrolled in Medicaid and have clinical eligibility for services.	None (provides mental health services to pt. with dual-dx. If only addiction dx then refer to Dawn Farm or Home of New Vision)	All	5 (4.5 FTE)	5 NP (3.0 FTE); 23 RNs (23 FTE); 1 Nurse Manager (1 FTE)	46 Mental Health Professionals (MHP) (37 filled and 9 vacant) (46 FTE)	90 case mgr. (68 filled and 22 vacant) (90 FTE); 10 Peer Support Specialists (10 FTE)	~30 day intake process; will take longer if not yet enrolled in Medicaid	0	Yes	No	No	No
	Projects for Assistance in Transition from Homelessness (PATH) ³⁶ 110 N. Fourth Ave. Ann Arbor, 48104	Outreach and coordinating services for homeless individuals . Includes housing assistance, mental health screenings and care facilitation, advocacy, transportation assistance, assistance obtaining SSI/SSDI benefits if eligible.	Will assist with referrals.	20+	Schedule at Deloniss Center	1 RN (FTE uncertain)	2 SWs (FTE uncertain)	1 Peer Specialist (FTE uncertain)	No, but will refer to provider outside of Washtenaw County if needed	0	PATH is grant funded.			
	WCCMH Health Home / Integrated Health Pilot (program funding ends July 2016)	Disease mgmt., counseling, dietician, physical activity programs, etc. Takes patients already in CMH system or those with SMI or DD + Axis 1 Disorder and high utilization rates (inpatient or ER in last 18 months) and Medicaid.	None, but refers to Dawn Farms or Home of New Vision.	Adult	0	4 RN (4 FTE)	0	0	No, but must be approved for enrollment	0	Enhanced Medicaid or CMH-enrolled	No	No	No
	The Women's Center of Southeastern Michigan 510 S. Maple Road Ann Arbor, 48103	Individual counseling, divorce support, job coaching, financial coaching. Referrals to community. Counseling available for hearing impaired/deaf and transgender population	None	Adult	0	0	1 PhD (4 days/wk, FTE uncertain); 13 MSW/LC grad students (FTE uncertain); 7 (<7 FTE) MSW	All MSW/LC do case mgmt.	3 weeks –to 3 months for sliding scale; 1-2 weeks for private	0	Yes, except straight Medicaid	Yes	Yes	Yes, sliding scale

³⁶ Many of the services provided by PATH were previously provided by the CMH Project Outreach Team (PORT) program.

Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	Samaritan Counseling Services 2890 Carpenter Road #1600 Ann Arbor, 48108 1501 W. Liberty Street Ann Arbor, 48103	Adult & pediatric individual, family, and couple counseling (CBT, DBT, IPT, EMDR, psychodynamic); play therapy; animal-assisted therapy, psychological testing; veterans counseling	Substance abuse counseling	All	0 (currently recruiting)	0	4 MSW, 6 Counselors (4 BH, 1 SU, 1 veteran), 1 Clinical Psychologist (FTEs uncertain)	0	A few weeks (1-2 clients on waitlist)	0	Yes (BCC, Meridian)	Yes	Yes	Not currently; may get sliding scale in near future
	Eastern Michigan University Counseling Clinic Porter Building #135 Ypsilanti, 48197	Individual, child, family, couples counseling. All services are provided by graduate students and supervised by faculty. Free counseling to Ypsilanti Community Schools.	None	All	0	0	3 (3 FTE) clinical therapists (plus 3-4 graduate students per semester)	Therapist will walk pt. to CAPS if eligible	1-2 weeks	0	No	No	No	Yes, sliding scale (free for EMU students, staff & faculty)
	Eastern Michigan Psychology Clinic 611 W. Cross Street Ypsilanti, 48197	Psychological assessments, individual therapy, group therapy (CBT, psychotherapy, IPT, behavioral).	None	All	0	0	Clinical psych. grad. students, under faculty supervision (# varies; FTE vary)	0	Depends on service	0	No	No	Yes	Yes, out-of-pocket
	Huron Valley Consultation Center 2750 S. State St. Ann Arbor, 48104	Adult individual, child & family, couples therapy; psychiatric evaluation; psychological testing.	None	Adult	6 (1 full time, 5 part-time; FTEs uncertain)	0	23 MSW (varies by clinician and week); 4 PsyD/PhD psychology (same as above)	0	2-4 weeks for therapy and 4 months for psychiatry	0	Yes (only BCC)	Yes	Yes	Yes, sliding scale
	University of Michigan Psychology Clinic 530 Church St. #1465 Ann Arbor, 48109	Individual, family, couples, group therapy (CBT, DBT, psychodynamic, IPT, CBASP); psychological testing; Rx mgmt.	None, but may expand soon.	Adult	1 (about .25 and increasing to .5)	0	~20 PhD clinical psychology interns and MSW interns per year (FTEs vary)	0	2-3 weeks for evaluation and another 3 weeks for first therapy appointment	0	Yes (BCC, Meridian, Midwest)	No	Yes	No, out-of-pocket (\$145-\$175)

Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	University of Michigan Center for the Child and Family 530 Church St. #1465 Ann Arbor, 48109	Individual, family, parental, group therapy; psychological testing; Rx mgmt.; grief and loss support; education; Autism treatment; attention & learning problems;	None, but expanding to outpatient substance abuse.	<18	1 (about .25 FTE, recruiting to reach .5 FTE)	0	~20 PhD clinical psychology interns and MSW interns per year (FTEs vary)	0	~4 weeks for evaluation and another 4 weeks for first therapeutic app.	0	Yes (BCC, Meridian, Midwest)	No	Yes	Yes, out-of-pocket (\$145-\$175)
	Ozone House Non-Residential Services 1705 Washtenaw, Ann Arbor 48104	Individual therapy, family therapy, case mgmt., physical exams, low level primary care.	Screen for substance use risk and refer to Corner Health or Dawn Farms.	Counseling for 10-20; Case mgmt. for 17-20	0 (refers to Corner Health)	2 NP (~.1 FTE) (provided by Corner Health)	4 (~2 FTE)	3 BSW (3 FTE) at all Ozone House Services	~3 weeks for case mgmt.	0	All services are free of charge.			
MH and Sub. Abuse	Catholic Social Services 4925 Packard Road Ann Arbor, 48108	Individual, couple, family, group therapy; Rx mgmt., coping skills, grief support, domestic violence intervention.	Two programs: 8-session program for mild cases; 15-session program for formerly incarcerated or severe cases	All	2 (1 day/wk, FTE uncertain)	1 psych NP (1 day/wk, FTE uncertain)	25 MSW (~15 FTE)	0	4 months for psychiatric evaluation and 2-4 weeks for therapy	0	Yes (except straight Medicaid)	Yes	Yes	Yes, sliding scale
Substance Abuse	Home of New Vision 3115 Professional Dr. Ann Arbor, 48104	Refers to Engagement Center.	Outpatient treatment, crisis management at Engagement Center	≥14	2 (1.5 FTE)	0	6 (4 FTE)	7 case workers; 4 Recovery Coaches (FTE uncertain)	No	0	Medicaid (CMHPSM)	Yes, but only for outpatient therapy		Yes, out-of-pocket

Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Substance Abuse	SJM Greenbrook Recovery Center 5401 McAuley Drive, Ann Arbor, MI 48106	Treats co-occurring disorders.	Assessment, education, family therapy, psychiatric care, individual therapy, adolescent & adult outpatient. Works with Health Care Professionals Recovery Network.	Adult	1 Internal Medicine Addictionist (0.2 FTE); 1 Psychiatrist (0.2 FTE); recruiting 3 FTE	0	3 (2.5 FTE)	0	No	0	Yes	Yes	Yes	Yes, financial support available
	UMATS – UMHS Addiction Treatment Services Rachel Upjohn Building 4250 Plymouth Rd, Ann Arbor, 48109	Will assess for mental health treatment needs. May refer to UMHS outpatient behavioral health clinics or community references.	Assessment, individual/group/family/couples therapy, Rx (addiction & psychiatric), outpatient detox	≥12	4 (1.7 FTE)	2 RN (1.5 FTE)	7 (4.5 FTE)	0.1 FTE MSW do case mgmt.	~2 weeks.	0	No	Yes	Yes	Yes, financial support available; otherwise, sliding scale
	VA Substance Abuse Clinic 2215 Fuller Road Ann Arbor 48105	If dual-diagnosis then will work with internal mental health clinic and address psychiatric comorbidities. See VA Mental Health Clinic.	Individual/group therapies, Rx, Rx management, work therapy, opioid treatment/substitution.	Adult – Eligible Veterans Only	3 (2.1 FTE)	3 RN (3 FTE)	6 (4.1 FTE)	0.5 FTE SW do case mgmt.	1-2 weeks	0	Yes	Yes	Yes	Yes
	Dawn Farms 320 Miller, # 100 Ann Arbor, 48104	Provides initial assessment but no new diagnoses or targeted treatment.	For ages 13+ with a substance use disorder, provides outpatient	≥14	0	1 NP (0.4 FTE)	12 MSW and 6 BSW (FTE uncertain)	MSWs and Recovery Support Specialists (FTE uncertain)	Depends on service (faster if already in another Dawn Farms program or are high-risk)	0	Yes (only CMH PSM)	No other insurance covers services; patients must pay out-of-pocket		

Partial Day / Intensive Outpatient Services

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	SJM Adult Partial Hospitalization Program 5401 McAuley Drive Ann Arbor, 48106	Day programs with intensive outpatient, goal setting, group therapy, recreation, case mgmt., CBT, DBT, mindfulness, coping skills, anger mgmt., nutrition, medication mgmt., Avg. length of stay 10 days. Typically takes referrals from WCCMH Crisis Team.	Will accept dual-diagnosis, but not intended for persons with addiction as primary problem.	Adult	Number varies (1.8 FTE)	2 RN (1.8 FTE)	4 (3.48 FTE)	RN and MSW staff do case mgmt.	Yes, few weeks	30 chairs / treatment slots – no caps	Yes	Yes	Yes	Yes, financial support available
	SJM Adolescent Partial Hospitalization Program 5401 McAuley Drive Ann Arbor, 48106	Day programs with intensive outpatient, goal setting, group therapy, recreation, case mgmt., family therapy, individual therapy, parental support. Typically takes referrals from WCCMH Crisis Team.	Will accept dual-diagnosis, but not intended for persons with addiction as primary problem.	13-18	Number varies (1.5 FTE)	1 psychiatric RN (0.2 FTE)	1 PhD psychologist (1 FTE) and 1 MSW (1 FTE)	RN and MSW staff do case mgmt.	Yes, few weeks	15 chairs / treatment slots – no caps	Yes	Yes	Yes	Yes, financial support available
	UMHS Comprehensive Eating Disorders Program C.S. Mott Children’s Hospital 1500 East Medical Dr. Ann Arbor, 48105	Individual, group and family-based therapy. Patients come in 3 times per week for about 2-3 weeks. Partial Hospitalization Program and Intensive Outpatient Program step-down available.	None.	Approx. 13-22	1 psychiatrist (1 FTE) and 2 adolescent medicine physicians (1 FTE)	0	1 PhD psychology (1 FTE) and 4 MSW (4 FTE)	MSWs do case mgmt.	Yes, few weeks	0	Yes	Yes	Yes	Yes, financial support available; otherwise, sliding scale

Partial Day / Intensive Outpatient Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Substance Abuse	SJM Chelsea Community Hospital Older Adult Recovery Center Intensive Outpatient Program 350 N. Main #120 Chelsea, 48118	If dual-diagnosis, may be referred to outpatient.	Addiction treatment, individual/group therapy, recreational activities, grief support, medication mgmt., and socialization. No detox.	Approx. ≥40	1 adult geriatric psychiatrist (1-2 hrs/wk, FTE uncertain)	NPs at Chelsea Outpatient support need here (1.1 FTE)	1 (1 FTE)	0	No	0	Yes	Yes	Yes	Yes, financial support available
	VA Substance Use Disorder Intensive Outpatient Program 2215 Fuller Road Ann Arbor 48105	If dual-diagnosis then will work with VA Mental Health Clinic and address psychiatric comorbidities.	Program includes day-treatment, partial hospitalization, and clinic-based treatment for ≥3 hours/day ≥3 days/week for each patient	Adult – Eligible Veterans Only	2 (.95 FTE)	1 RN (1 FTE)	3 (3 FTE)	All SW do case mgmt.	1-2 weeks	0	Yes	Yes	Yes	Yes

Community-Based Crisis Services

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	Ozone House Crisis Line and Crisis Counseling 1705 Washtenaw, Ann Arbor 48104	Crisis intervention, referrals and scheduling for services by Ozone by volunteers; 1 MSW/BSW person on call at all time	Screen and refer to Corner Health or Dawn Farms.	All (follow-up services are for 10-20)	0	0	1 for crisis line (about 0.25 FTE) 24/7 availability	None for crisis line; crisis line is staffed by about 40 trained volunteers	No	0	All services are free of charge			
	Ozone House Drop-In Center 102 N Hamilton Ypsilanti, 48197	Drop-in center open M-F 4-6pm, Wed 6-8pm Pride Zone support group LGBT youth, Thursday night alternate activity (e.g. group discussions, career panel, poetry, etc.); initial interview, hot meal, laundry, shower, referrals to other Ozone services or community-based services.	Screen and refer to Corner Health or Dawn Farms.	13-20	0	0	1 crisis intervention specialist (MSW) (FTE uncertain)	3 BSW (3 FTE) total throughout all Ozone House Services	No	0	All services are free of charge			
	UMHS Crisis Support Clinic - Adult Rachel Upjohn Building 4250 Plymouth Rd, Ann Arbor, 48109	Transitional support from hospital to outpatient / community resources; short-term stabilization of 1-3 months.	None.	Adult	½ day per week	None – but can pull from UMHS Ambulatory if needed	1 available; rotate from Ambulatory (0.25 FTE); no therapy, only support for MD or case mgmt.	MSW from Ambulatory is available if needed.	1-2 weeks	0	Yes	Yes	Yes	Yes, financial support available; otherwise, sliding scale
	UMHS Crisis Support Clinic – Child Rachel Upjohn Building 4250 Plymouth Rd, Ann Arbor, 48109	Transitional support from hospital to outpatient / community resources; short-term stabilization of 1-3 months.	None.	<18	½ day per week	None – but can pull from UMHS Ambulatory if needed	1 available; rotate from Ambulatory (0.25 FTE); no therapy, only support for MD or case mgmt.	MSW from Ambulatory are available	1-2 weeks	0	Yes	Yes	Yes	Yes, financial support available; otherwise, sliding scale

Community-Based Crisis Services (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	WCCMHA Community Crisis Response Team 555 Towner, Ypsilanti 48107 2140 Ellsworth, Ypsilanti 48197	24/7 availability to assess emergent issues, provide pre-screening for psychiatric hospitals, and direct patients to appropriate care. Check-ins to monitor transition may last 1 day to a few months and can be over the phone or in person.	Refers to Dawn Farms or Home of New Vision.	All	1 on call 24/7	0	17 mental health professionals (11 are filled and 6 are vacant); available 24/7 (# of MHP available per shift varies)	0	No	0	All services are free of charge. If patient does not have Medicaid, they are subject to an Ability to Pay assessment; if able to pay for services, they may receive a bill; however, this is a rare occurrence			
Substance Abuse	Engagement Center (Home of New Vision) 512 N Hamilton Ypsilanti, 48197 <i>Arnet location will open in Jan. 2016</i>	If evaluation shows mental health need, agency will connect person with resources	23-hour sobering center. Includes beds, showers, laundry.	Adult	0	0	~1 per day (sometimes more than 1, FTE uncertain)	7 certified case workers; 4 Recovery Coaches (FTE uncertain)	No	8	All services are free of charge			

Residential Programs

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	Ozone House 1705 Washtenaw, Ann Arbor 48104	Miller House: supportive living group home for 18-20 year olds in school or working; 18 month max. stay; therapy; case mgmt.; life skills; 1 Youth Specialist at residence Safe Stay: respite / family reunification for 10-17 year olds; individual and group therapy every day and family therapy every week; residence is staffed 24/7 with 1-3 Youth Specialist. Transitional apartment housing available for patients already engaged in Ozone case mgmt.	Screen for substance use risk and refer to Corner Health or Dawn Farms.	Miller House: 18-20 Safe Stay: 10-17	0	1 NP (3-4 hrs/wk, shared with other local shelters, FTE uncertain)	4 MSW therapy (~3 FTE and 4 MSW admin (FTE uncertain)	3 BSW (3 FTE) total throughout all Ozone House Services	Miller: 3-6 months Safe Stay: usually no waitlist, but can start non-residential therapy if there is a wait (few weeks at most)	Miller: 6 beds Safe Stay: 5 beds Apartment housing: varies	All services are free of charge			
	WCCMH Crisis Residential Services (CRS) 555 Towner, Ypsilanti 48107 2140 Ellsworth, Ypsilanti 48197	24/7 community-based intervention for those with SMI or DD and Axis 1 in crisis. Intended to be short-term stabilization (diversion or step down from hospital)	Refers to Dawn Farms or Home of New Vision.	Adult	1 (0.2 FTE)	1 NP (0.2 FTE), 1 RN (1 FTE), plus on call for 24/7 support	1 MSW Service Coordinator (1 FTE)	Service Coordinator does all case mgmt.	No	6	All services are free of charge. If patient does not have Medicaid, they are subject to an Ability to Pay assessment; if able to pay, they may receive a bill, but this is rare			
	WCCMH Specialized Residential Multiple locations	Long-term residential / group home for high-need SMI; psychiatry, case mgmt., ADL mgmt, 24/7 staff support in house.	None.	Adult	Varies per location; all non-SW are contracted through a separate provider (e.g. Renaissance)		5-6 MSW or BSW (FTE uncertain)	All MSW/BSW do case mgmt.	None, will refer outside of county if needed	Varies per location	Medicaid and clinical eligibility required			

Residential Programs (continued)

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Substance Abuse	Dawn Farms Residential Program 6633 Stony Creek Rd. Ypsilanti, 48197	Reviews current mental health diagnoses and medications. If no clear independent SMI then may request the resident to discontinue their medications.	3- and 6-month stays in either a rural or urban setting. Involves daily group/individual therapy, education, recreation. Transitional housing upon discharge.	Adult	0	1 NP (0.4 FTE)	12 MSW, 6 BSW (FTE uncertain)	MSWs and Recovery Support Specialists	Depends on service and severity	49 long term residential, 18 detox, 172 transitional housing	Only if pre-screened and eligible via CMHPSM.	No insurance will cover services, patients must pay out-of-pocket; \$3,600 per month		
	Dawn Farms Spera Recovery Program (Detox) 502 W. Huron St. Ann Arbor, 48104	None on site. May refer/link to community resources.	3 to 5-day stays involving assessment, treatment, recovery support, mutual aid groups. Emphasis on 12-Steps	Adult	0	1 NP (0.4 FTE)	12 MSW, 6 BSW (FTE uncertain)	MSWs and Recovery Support Specialists (FTE uncertain)	Depends on service and severity	49 long term residential, 18 detox, 172 transitional housing	Free – funded through donations and WCCMH			
	Home of New Vision Residential 1505 S. State St. Ann Arbor, 48104	Includes life-skills groups related to anger management, anxiety, and depression.	2-3 week program involving both group and individual therapy; social setting within a house.	Adult	2 (FTE uncertain)	1 (FTE uncertain)	5 (FTE uncertain)	7 certified case workers; 4 Recovery Coaches (across all HONV services)	~1-2 weeks	7	Only if pre-screened and eligible via CMHPSM	No insurance covers services, must pay out-of-pocket; \$150 for an assessment and \$115 per day		
	Home of New Vision Detox 3115 Professional Dr. Ann Arbor, 48104	Will refer to outpatient care or community resources.	Multi-day detox	Adult	2 (FTE uncertain)	1 (FTE uncertain)	5 (FTE uncertain)	7 certified case workers; 4 Recovery Coaches (across all HONV services)	~1-3 days	2	No insurance covers services; must pay out-of-pocket			

Emergency Services

Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
SJM Psychiatric Access (Emergency Department) 5301 McAuley Dr. Ann Arbor, 48106	Outpatient care with mild to crises-level situations, assessment, prescriptions (if psychiatrist is reachable), discharge planning, linking with other resources and ongoing mental health services.	None, but will link with Dawn Farm or Home of New Vision.	All	1 (0.1 FTE)	1 psychiatric nurse (1 FTE); 24/7 support between nurses and MSW	12 (7.1 FTE); 24/7 support between nurses and MSW	0	N/A	N/A	Yes	Yes	Yes	Yes, out-of-pocket
SJM Chelsea Community Hospital Emergency Department 775 S. Main St. Chelsea, 48118	Sees psychiatric patients but no specialized staff. Will refer/link with internal behavioral health services or community resources based on needs and insurance.	Sees patients with substance abuse needs but no specialized staff. Will refer/link with internal or community resources based on needs and insurance.	All	Consult via phone only	0	MSW available during day (FTE uncertain); 24/7 phone support	0	N/A	N/A	Yes	Yes	Yes	Yes, out-of-pocket
UMHS Psychiatric Emergency Services - Adult & Pediatric 1500 East Medical Dr. Ann Arbor, MI 48109	Psychiatric emergency care for patients with severe to mild presentations. Assessment of level of need. Refers to inpatient, partial, or outpatient. Treatment initiation and follow-up care as needed.	None, but will link with Dawn Farms or Home of New Vision.	All	3 (3 FTE), 1 on call 24/7	2 RN during day (10.2 FTE)	2 available 24/7 (13.2 FTE)	MSW will only arrange transition to outpatient.	N/A	N/A	Yes	Yes	Yes	Yes
VA Emergency Department 2215 Fuller Road Ann Arbor 48105	Mental health staff present during business hours. After hours there is a resident psychiatrist on call.	None.	Adult – Eligible Veterans Only	1 (0.8 FTE)	0	1 (1 FTE)	MSW does case mgmt.	N/A	17 (1 designated for high risk MH patients)	Yes	Yes	Yes	Yes

Inpatient Care

	Provider / Agency Name	Behavioral Health Services	Substance Abuse Services	Ages	# Psychiatrists	# BH Nurses	# MSW	# Case Mgr.	Waitlist	# of Beds	Medicaid	Medicare	Private	Uninsured
Mental Health	SJM Chelsea Community Hospital Inpatient Behavioral Health Services 775 S. Main St. Chelsea, 48118	Inpatient treatment with multidisciplinary team. Individual/group/ family therapy, recreational therapy.	Will treat substance abuse disorders in dual-diagnoses. May refer/link to substance abuse resources upon discharge.	Adult	4 (2.9 FTE)	(16.55 FTE)	4 MSW (3.37 FTE)	MSWs do case mgmt.	No	24	Yes	Yes	Yes	Yes, financial support available
	SJM Inpatient Psychiatric Program 5301 E. Huron River Dr. Ann Arbor, 48106	Intensive therapy from 9am-8pm (m-f) and 9am-4pm (sa-su): individual, group, Rx, wellness, leisure activities.	Will address substance abuse disorders in dual-diagnoses. May refer/link to substance abuse resources upon discharge.	Adult	3 (2.0 FTE); recruiting to 5 (3.95 FTE) total	24 RN (18.52 FTE)	5 (3.7 FTE)	MSWs do case mgmt.	No, but intake depends on bed openings	24	Yes	Yes	Yes	Yes, financial support available
	UMHS Adult Inpatient Psychiatry 1500 East Medical Dr. Ann Arbor, 48109	Diagnostic evaluation and various therapies, psychotherapy, Rx, ETC.	Involves UMATS during stay and refers to UMATS upon discharge.	Adult	3 (3 FTE); 1 on call 24/7	33 RN (uncertain FTEs)	5 (5 FTE); some are consult liaisons for medical care	MSWs do case mgmt..	Varies, but always a waitlist.	25	Yes	Yes	Yes	Yes
	UMHS Child and Adolescent Psychiatry Inpatient Program C.S. Mott Children's Hospital 1500 East Medical Dr. Ann Arbor, 48105	Diagnoses, individual/group/family therapy, Rx, ECT, parent guidance. Services for behavioral and developmental disorders; average stay is 7 days.	Involves UMATS during stay and refers to UMATS upon discharge.	4-17	1 (1 FTE); 1 on call 24/7	17 RN (1 FTE)	5 (5 FTEs); some are consult liaisons for medical care	MSWs do case mgmt..	Varies, but always a waitlist	14 (16 by Spring 2016)	Yes	Yes	Yes	Yes
	VA Acute Psychiatric Inpatient Unit 2215 Fuller Road Ann Arbor 48105	General inpatient psychiatry, individual and group therapy, case management, Rx, and some ECT.	Will address substance abuse disorders in dual-diagnoses. May refer/link to substance abuse resources upon discharge.	Adult – Eligible Veterans Only	2 (1.85 FTE)	1 NP (1 FTE)	2 (2 FTE)	2 SW do case mgmt.	No, but if beds are full, pt. sent to another part of VA or another hospital	18	Yes	Yes	Yes	Yes

NOTE: Some data, such as waitlists and FTEs, may change over time, thus the current table reflects an estimate of mental health and substance use services in Washtenaw County in February 2016. In addition, not all providers are included, such as private practices, due to feasibility.

Appendix C: List of Interviewees

In December 2015 CHRT conducted a total of 19 interviews with the following individuals:

- Rachel Glick, MD at UMHS Psychiatric Emergency Services;
- Donna Fox, RN and Heather Rye, MSW at UMHS Complex Care Management Program;
- Caroline Richardson, MD at Ypsilanti Health Center;
- William Beecroft, MD at Blue Care Network;
- Stephen Pinals, MD at SJMHS Psychiatry;
- Ray Rion, MD at Packard Health;
- Gregory Dalack, MD at UMHS Psychiatry;
- Mary Martin, MPA at UMHS Operations and Clinical Services;
- Ellen Rabinowitz, MUP at Washtenaw County Public Health and Washtenaw Health Plan;
- Tom Fluent, MD at UMHS Outpatient Psychiatry;
- Kate Papchristou, LCSW at Jewish Family Services;
- Tim Florence, MD at Washtenaw CMH;
- Steve Sheldon, LMSW at Catholic Social Services;
- Scott Menzel, PhD at WISD;
- Brent Williams, MD at UMHS Complex Care Management Program;
- Laura Hirshbein, MD PhD at UMHS Inpatient Psychiatry;
- Rick Bluhm, JD at Huron Valley PACE;
- Carol McCabe, MSW at Avalon Housing; and
- Aubrey Patiño, MSW at Avalon Housing.