



GENESEE COUNTY COMMUNITY MENTAL HEALTH



Artwork by Margaret Yannello

Consumer Handbook

*"Our imagination is the only limit to what we can hope
to have in the future." Charles Kettering*

(Disponible en Espanol)

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GCCMH Customer Services: (810) 257-3705 Toll Free: (866) 211-5455 TTY: (810) 257-1346

"Our imagination is the only limit to what we can hope to have in the future." Charles Kettering

WELCOME!

Welcome to Genesee County Community Mental Health (GCCMH). We are pleased to assist you, and we want you to feel welcome anywhere in our network of services. Both mental health and substance use disorder services are available, and we want you to know that we believe recovery is possible!



Danis Russell, CEO

This booklet was made with you in mind. It provides you with information on GCCMH services as well as services in the community. We realize that this information is of the greatest importance, and we want you to be able to use what is included here to improve your services and experience at GCCMH.

Our goals at GCCMH are:

- To assist you in getting services quickly and easily.
- To provide you with choices about treatment and services.
- To overcome barriers in obtaining services at GCCMH or in the community.

This booklet gives you information about what services are available, how to obtain those services, what your rights and responsibilities are, and what to do if you are not satisfied with your services. This booklet will also provide information on self-help and advocacy groups, educational information, other services available in the community, and other important information.

Your opinion counts. Please contact our Customer Services Department with your feedback, ideas, and suggestions. Their contact information is located at the bottom of this page and throughout this booklet.

Again, welcome to GCCMH services! We are here to serve you.

A handwritten signature in blue ink that reads "Danis Russell".

Danis Russell
Chief Executive Officer
Genesee County Community Mental Health

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DIRECTORY

Mental Health and Substance Use Access Center:

LaDon G. McNeil, Manager
420 W. Fifth Avenue—First Floor
8 a.m.—5 p.m. Monday—Friday
Phone: (810) 257-3742
TTY: (810) 232-6310
Crisis Line: (810) 257-3740
Toll Free: (877) 346-3648

Customer Services:

LaDon G. McNeil, Manager
420 W. Fifth Avenue—First Floor
8 a.m.—5 p.m. Monday—Friday
Other hours available by appointment
Phone: (810) 257-3705
TTY: (810) 257-1346
Toll Free: (866) 211-5455

Chief Executive Officer:

Danis Russell
420 W. Fifth Avenue
Flint, MI 48503
(810) 257-3707

Recipient Rights:

Cheryl Rousseau, Director
420 W. Fifth Avenue—First Floor
8 a.m.—5 p.m. Monday—Friday
Phone: (810) 257-3710
TTY: (810) 257-1346
Toll Free: (877) 668-8933

Medical Director:

Ronald Bradley DO PhD
420 W. Fifth Ave.
Flint, MI 48503
(810) 257-3707

GCCMH MISSION STATEMENT, VISION, AND VALUES

Our Mission: We are dedicated to providing the highest quality, most effective services and supports available to meet the mental health, developmental disability, and substance use disorder needs of the adults, children, and families we serve in Genesee County. These services will be provided in a welcoming, supportive way that is helpful to symptom stabilization, long-term recovery, and achievement of the varied life goals envisioned by the people in our care.

Our Vision: We will set a new standard for excellence in the management and delivery of mental health and substance use disorder services to individuals and families in Genesee County. We will realize our vision through cultivation of an experienced and dedicated work force; innovative, person-centered implementation of best practices; good stewardship of our resources; and a fundamental interest in fostering an improved quality of life for all persons served.

Our Values:

Excellence — In access and results.

Stewardship — Corporate responsibility to the Public Good.

Participation — Inclusion and advocacy at all levels.

Growth — Through adaptive leadership, valuing staff, and best practice.

Trust — Sensitivity to cultural, ethnic, spiritual, and safety needs.

Communication — Clear and concise, in the languages of persons served.

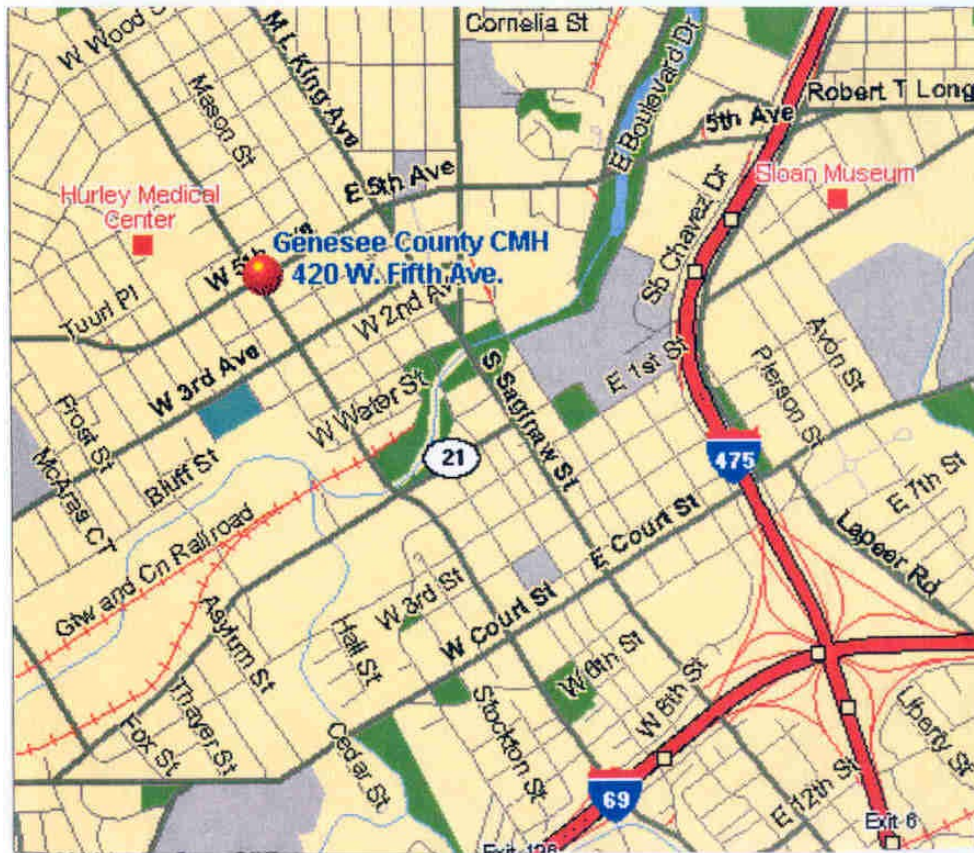
Consistency — Awareness of diverse needs and the importance of even-handedness and fairness for persons served and staff.

Kindness — Ethical and responsive Customer Services to persons served and to each other.

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MAP AND DIRECTIONS TO GENESEE COUNTY CMH



North/South Directions:

Take I-475 towards Flint to Robert T. Longway Blvd.— exit 8A. Go west on Longway Blvd. towards the Flint Farmer’s Market. After Saginaw Street, Longway Blvd. becomes W. Fifth Avenue. Turn right at Mason Street. Visitor parking for CMH is to your immediate left. The visitors’ overflow parking lot is located on your right.

East/West Directions:

Take I-69 towards Flint to I-475 North. Take I-475 North to Robert T. Longway Blvd. — exit 8A. Go west on Longway Blvd. towards the Flint Farmer’s Market. After Saginaw Street, Longway Blvd. becomes W. Fifth Avenue. Turn right at Mason Street. Visitor parking for CMH is to your immediate left. The visitors’ overflow parking lot is located on your right.

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CUSTOMER SERVICES

Customer Services is here to assist you when:

- You are dissatisfied with your services.
- You need help with service choices or changing providers.
- You are looking for information about the GCCMH Network.
- You want help locating information about places to get help.
- You are interested in participating in groups and trainings that are both informative and fun.
- You would like to borrow from our resource library which has videos and pamphlets on a wide range of interesting subjects.
- You need accurate information provided in a professional, friendly manner.

Customer Services:

- Provides presentations, distributes information, and participates in health fairs in the community.
- Provides follow-up surveys, evaluations, and maintains a suggestion box in our lobby — WE CARE ABOUT YOUR OPINIONS!
- Provides accurate information in a professional and friendly manner.
- Has friendly, knowledgeable staff.

WITHOUT YOU, WE WOULDN'T BE HERE!

Genesee County Community Mental Health
Customer Services—Main Campus
420 W. Fifth Avenue—First Floor
Flint, Michigan 48503
Open 8 a.m.—5 p.m. Monday through Friday

To contact Customer Services after regular business hours, call the Customer Services at the number(s) below and leave a message with the following information:

- Your name
- How to contact you
- What time of day you would like to be contacted
- A brief description of the issue you need help with

Someone from Customer Services will contact you within 24 hours.

Telephone: (810) 257-3705
Toll Free: (866) 211-5455
TTY Line: (810) 257-1346
Website: www.gencmh.org

If you have a mental health emergency, you should seek help right away. At any time during the day or night, call:

**24 Hour Crisis Line (810) 257-3740, toll free (877) 346-3648, or
TTY (810) 232-6310;**

Or you can call 911

GCCMH Customer Services: (810) 257-3705 Toll Free: (866) 211-5455 TTY: (810) 257-1346

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ACCESSING SERVICES

Access Center

The Access Center is located on the 1st floor of the Main Campus at 420 W. Fifth Avenue. Hours of operation are Monday through Friday from 8:00 a.m. to 5:00 p.m. Adults are served on a walk in basis, first come first served, or by appointment via the telephone. Children are provided services by calling the department or presenting in person to receive an appointment for a full intake assessment at one of our four contracted providers. The Access Center can assist you in accessing services whether you have an emergency or not. A trained Access staff member will conduct a "screening" in response to your request for services. This interview will allow you to tell staff about the problems that you may be having. Staff will ask questions in order to determine what services may be appropriate for your situation. When you present at Access, you should bring the following information with you:

- Medical insurance card or number
- Social Security number
- Names of current medicines
- Guardianship or court papers
- Special education or other school records for children

Screening to assess if you are eligible for specialty services and supports is provided at no cost to you.

Payment for Services

Fees for services are based on your ability to pay. Staff will need to know your household income and the number of your dependents. Your ability to pay will be determined at the time of your screening.

If you are enrolled in Medicaid and meet the criteria for the specialty mental health and substance use disorder services, the total cost of your authorized mental health or substance use disorder treatment will be covered.

If you are a Medicaid beneficiary with a deductible (or "spend-down") as determined by the Michigan Department of Human Services (DHS), you may be responsible for the cost of a portion of your services.

Your ability to pay:

Staff will help you schedule an appointment to determine your monthly ability to pay for the services you have received at GCCMH. Please bring your insurance card(s) to this meeting. If you have a job, you should bring a recent pay stub or letter from your employer stating how much income you have earned from your job.

Your responsibility:

You are required to pay for services received from GCCMH based upon your ability to pay. Services are billed monthly and payment is expected within 30 days of billing. We will work out a payment schedule with you, if necessary.

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Emergency and After-Hours Access to Services

If you have a mental health emergency, you should seek help right away. You may call our **24-Hour Crisis Line (810) 257-3740, toll free (877) 346-3648, or TTY (810) 232-6310**, to get the help you need during an emergency.

If during the emergency you believe there is a real danger to yourself or someone else, you should call 911 immediately.

Crisis and After-Hours Services

Helpful and willing staff are available to talk to you by phone or in person if you need help. If you come in person to be seen, professional staff will meet with you and review your choices with you. Don't hesitate to call us if you are having a mental health emergency.

A **mental health emergency** is when (1) a person is experiencing a serious mental illness or a developmental disability, or a child is experiencing a serious emotional disturbance, and can reasonably be expected in the near future to harm him/herself or another; or (2) because of his/her inability to meet his/her basic needs is at risk of harm; or (3) the person's judgment is so impaired that he/she is unable to understand the need for treatment and that his/her condition is expected to result in harm to him/herself or another individual in the near future. You have the right to receive emergency services at any time, 24 hours a day, seven days a week, without prior authorization for payment of care.

If you have a mental health emergency, you should seek help right away. At any time during the day or night, call:

24-Hour Crisis Line (810) 257-3740, toll free (877) 346-3648, or TTY (810) 232-6310;

OR YOU CAN CALL 911;

If your mental health emergency occurs after hours:

You can go to any hospital or other setting that offers emergency care and be treated and have it paid for by your insurance plan.

Please note that if the medical facility you go to does not view your situation as an emergency, or if you do not have insurance, you may be charged for the visit.

The major emergency medical centers in Genesee County are:

Hurley Medical Center
One Hurley Plaza
Flint, MI 48503
(810) 257-9000

McLaren Regional Medical Center
401 S. Ballenger Highway
Flint, MI 48532
(810) 342-2000

Genesys Regional Medical Center
One Genesys Parkway
Grand Blanc, MI 48439
(810) 606-5000

If you and the crisis member agree that you or your minor child needs constant help, the staff will help you get to the hospital or to the Crisis Residential Treatment Program. If you need help but you don't need someone with you 24 hours a day, Crisis Stabilization may be a program that can help you solve your problems. The crisis staff will let you know what choices you have. If you feel that you are in need of these services and you are already seeing someone at GCCMH, contact your primary support professional.

Post-Stabilization Care Services

After you receive emergency mental health care and your condition is under control, you may receive mental health services to make sure your condition continues to stabilize and improve. Examples of post-stabilization services are crisis residential, case management, outpatient therapy, and/or medication reviews.



ACCESSIBILITY AND ACCOMMODATIONS

In accordance with federal and state laws, all buildings and programs of GCCMH are required to be physically accessible to individuals with all qualifying disabilities. Any individual who receives emotional, visual, or mobility support from a service animal such as a dog will be given access, along with the service animal, to all buildings and programs of GCCMH. If you need more information or if you have questions about accessibility or service/support animals, contact Customer Services at (810) 257-3705, or TTY (810) 257-1346.

If you need to request an accommodation on behalf of yourself, a family member, or a friend, you can contact Customer Services at (810) 257-3705, or TTY (810) 257-1346.

You will be told how to request an accommodation (this can be done over the phone, in person and/or in writing) and you will be told who at the agency is responsible for handling accommodation requests.

Language Assistance

If you use a TTY, please contact Customer Services at the following TTY number: (810) 257-1346.

If you need a sign language interpreter, contact Customer Services at (810) 257-3705 as soon as possible so that one can be made available. Sign language interpreters are available at **no cost** to you.

If you do not speak English, contact Customer Services at (810) 257-3705 so that arrangements can be made for an interpreter for you. Language interpreters are available at **no cost** to you.

This Handbook is available in English, English large print, English audio tape, Spanish large print, and Spanish audio tape. If you use a TTY, please contact Customer Services at (810) 257-1346.



PERSON CENTERED PLANNING

Coordination of Care

To improve the quality of your services, GCCMH wants to coordinate your care with the medical provider who cares for your physical health. If you are receiving substance use disorder services, your mental health care should be coordinated with those services. Coordinating with all providers involved in treating you greatly improves your chances for recovery, relief of symptoms, and improved functioning. Therefore, we encourage you to sign a Release of Information so that information can be shared. If you do not have a medical doctor and need one, GCCMH will assist you in getting one.

Person Centered Planning – It’s All About You!

The process used to design your individual plan of mental health or substance use disorder supports, service, or treatment is called “Person-Centered Planning” (PCP). PCP is your right and is protected by the Michigan Mental Health Code.

The process begins when you determine whom you would like at your PCP meetings (such as family members or friends), and which staff from your provider(s) you would like to attend. You can decide when and where the PCP meetings will be held. You can also decide what assistance you might need to help you participate in and understand the meetings.

During your PCP meeting, you will be asked what your hopes and dreams are, and will be helped to develop the goals or outcomes you want to achieve. The people attending this meeting will help you decide what supports, services, or treatment you need, whom you would like to provide this service, how often you need the service, and where it will be provided. You have the right, under federal and state laws, to choose your provider.

After you begin receiving services, you will be asked from time to time how you feel about the supports, services, or treatment you are receiving and whether any changes need to be made. You are encouraged to give feedback during surveys. You have the right to ask at any time for a new PCP meeting if you want to talk about changing your plan of service.

You have the right to “Independent Facilitation” of the PCP process. This means you may request that someone other than your staff person conduct your planning meetings. You have the right to choose from available independent facilitators.

Children under the age of 18 with developmental disabilities or serious emotional disturbance also have the right to PCP. However, person-centered planning must recognize the importance of the family and the fact that supports and services impact the entire family. The parent(s) or guardian(s) of children will be involved in pre-planning and person-centered planning using “family-centered practice” in the delivery of supports, services, and treatment to their children.

Topics covered during Person-Centered Planning (PCP)

During the PCP process, you will be told about natural supports, psychiatric advance directives, a crisis plan, and self-determination (see descriptions below). You will have the right to choose to develop any, all, or none of these:

Natural Supports

Natural supports are people who may help you with a variety of tasks. They are people you know that are not paid to help you. Your friends and family are natural supports, and we want you to use and obtain help from as many people as possible to make your life better. While you do have support from GCCMH, we want to help you to improve your life without having to rely on only the staff from GCCMH. This will allow you to become more independent and able to function better in your everyday life.

Psychiatric Advance Directive

Adults have the right under Michigan law to a "psychiatric advance directive." A psychiatric advance directive is a tool for making decisions before a crisis in which you may become unable to make a decision about the kind of treatment you want and the kind of treatment you do not want. This lets other people, including family, friends, and service providers, know what you want when you cannot speak for yourself. There is a brochure available for you to review and decide if you want to have an advance directive. If you would like to receive a copy of this brochure, or if you have questions about this process, contact Customer Services at (810) 257-3705, or TTY (810) 257-1346.

Crisis Plan

You have the right to develop a "crisis plan." A crisis plan is intended to direct your care if you begin to have problems managing your life or become unable to make decisions and care for yourself. The crisis plan gives information and direction to others about what you would like to have done in time of crisis. Examples are emergency contacts; friends or relatives to be called; preferred medicines; or care of children, pets or bills.

Self-Determination

Self-Determination is an option for payment of medically necessary services you might request if you are an adult beneficiary receiving mental health or substance user disorder services in Michigan. It is a process that will help you to design and exercise control over your own life by directing a fixed amount of dollars that will be spent on your authorized supports and services. This is often referred to as an "individual budget." You would also be supported in your management of providers if you choose such control.

Consumer Involvement

Have you ever gone into a business or agency and thought you could give them some suggestions on how their business would be more helpful to their customers? All of us have probably thought that at one time or another. This is your chance to have a voice in Genesee County Community Mental Health decisions. There are many ways to get involved in GCCMH business. The purpose of getting involved in this way is to help GCCMH better understand the needs of the people we serve.

To find out more about the different ways to get involved, contact Customer Services at (810) 257-3705, or TTY (810) 257-1346, and ask for a Customer Services representative who will explain all the ways in which you can be involved at GCCMH.

RECOVERY AND RESILIENCY

Recovery

Mental health and substance use disorder recovery is a journey of healing and transformation, enabling individuals to live meaningful lives in their community of choice while striving to achieve their potential.

Recovery is an individual journey that follows different paths and leads to different locations. Recovery is a process that we enter into and is a lifelong attitude. Recovery is unique to each individual and can be truly defined only by the individual. What might be recovery for one person may be only part of the process for another. Recovery may also be defined as wellness. Mental health/substance use disorder supports and services help people in their recovery journeys. The person-centered planning process is used to identify the supports needed for individual recovery.

In recovery there may be relapses. A relapse is not a failure, but rather a challenge. If a relapse is prepared for, and the tools and skills that have been learned throughout the recovery journey are used, a person can overcome and come out a stronger individual. But it all takes time, and that is why recovery is a process leading to a future that holds many days of pleasure and the energy to persevere through the trials of life.

Resiliency

Resiliency and development are the guiding principles for children with serious emotional disturbance. Resiliency is the ability to “bounce back” and is a characteristic that is important to nurture in children with serious emotional disturbance, and their families. It refers to the individual’s ability to become successful despite the challenges he or she may face throughout his or her life.

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SERVICE AUTHORIZATION

Service Authorization

Services you request must be authorized or approved by GCCMH. GCCMH may approve all, some, or none of your requests. You will receive notice of a decision within 14 calendar days after you have requested the service during person-centered planning, or within 3 business days if the request requires a quick decision.

Any decision to deny a service you requested, or to deny the amount, scope, or duration of that service, will be made by a health care professional who has appropriate clinical experience in treating your condition. Authorizations are made according to medical necessity. If you do not agree with a decision that denies, reduces, suspends, or terminates a service, you may file an appeal (**see the sections on Grievances and Appeals beginning on page 24**).

An individual may have need for a service or may request a service provider not currently available in the existing provider network. Initiation for securing non-network providers may come from agency staff or individuals served. In either case, initial justification for service provision must be part of a person-centered planning process.

Qualifying for Services

GCCMH serves people who have Medicaid insurance or who are covered by an Adult Benefits Waiver, those enrolled in the MI CHILD program, or people who have no insurance and cannot pay for services but meet eligibility requirements. GCCMH refers most people who have other insurance to agencies that are connected to that insurance group. Under special circumstances, we may provide specialty services to some people who have insurance.

Michigan has a managed care delivery system for mental health and substance use disorder services. The Michigan Department of Community Health (MDCH) sets rules and regulations that we must follow. This includes the types of services that are provided and the criteria used to determine if someone qualifies to receive services. Medicaid recipients are guaranteed to receive services that are medically necessary.

Things to Remember

- Bring your Medicaid or insurance card every time you visit.
- Remember the name of the staff member you are working with. Carry his or her business card with you.
- If you have to cancel an appointment, call the person you have the appointment with. If he or she is not available, leave a message.
- Transportation is a problem that many people struggle with. If you use the public transportation system (MTA), you may ask your staff member to assist you in getting a discounted monthly bus pass that will save you money and allow you to get around the community.

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- If you are taking any kind of medication, you need to remember to keep it in the sealed, original container and away from children. It is very important to tell your support staff and your doctor how the medications you are taking affect you so they may help you use the medications that will work best for you.

Mental Health Services When You're Out of Town

You should carry your Medicaid or other insurance card with you at all times. If you receive Medicaid, you are covered for emergency mental health services anywhere in Michigan. You are also covered to stay in the hospital anywhere in the United States. If you have a mental health emergency while you are out of town, you should contact the Community Mental Health office where you are. They will then contact us at GCCMH to arrange for your care. If you do not know how to contact the Community Mental Health office where you are, call GCCMH Customer Services at (810) 257-3705, or TTY (810) 257-1346, and we will help you.



SERVICE ARRAY

MENTAL HEALTH MEDICAID SPECIALTY SUPPORTS AND SERVICES DESCRIPTIONS

Note: If you are a Medicaid beneficiary and have a serious mental illness, serious emotional disturbance, developmental disability, or substance use disorder, you may be eligible for some of the Mental Health Medicaid Specialty Supports and Services listed below. Before services can be started, you will take part in an assessment to find out if you are eligible for services. The assessment will also identify the services that can best meet your needs. You need to know that not all people who come to us are eligible, and not all services are available to everyone we serve. If a service cannot help you, GCCMH will not pay for it. Medicaid will not pay for services that are otherwise available to you from other resources in the community.

During the person-centered planning process, you will receive assistance in deciding the medically necessary services that you need and the sufficient amount, scope, and duration required to achieve the purpose of those services. You will also be able to choose who provides your supports and services. You will receive an individual plan of service that provides all of this information.

In addition to meeting medically necessary criteria, services listed below marked with an asterisk * require a doctor's prescription.

Note: The Michigan Medicaid Provider Manual contains complete definitions of the following services as well as eligibility criteria and provider qualifications. The Manual may be accessed online at:
www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf

Access includes a comprehensive psychiatric evaluation, psychological testing, substance use disorder screening, or other assessments (except for physical health) conducted to determine a person's level of functioning and mental health treatment needs.

Assertive Community Treatment (ACT) provides basic services and supports essential for people with serious mental illness to maintain independence in the community. An ACT team will provide mental health therapy and help with medications. The team may also help access community resources and supports needed to maintain wellness and participate in social, educational, and vocational activities.

***Assistive Technology** includes adaptive devices and supplies that are not covered under the individual's Medicaid Health Plan or by other community resources. These devices help individuals to better take care of themselves, or to better interact with the community in which they live, work, and play.

**Requires a doctor's prescription.*

Behavior Treatment (Review): If a person's illness or disability involves behaviors that they or others who work with them want to change, the individual plan of services may include a plan that talks about the behavior. This plan is often called a "behavior treatment plan." The behavior management plan is developed during person-centered planning and is approved and reviewed regularly by a team of specialists to make sure that it is effective and dignified, and continues to meet the person's needs.

Clubhouse Programs are programs where members (consumers) and staff work side by side to operate the clubhouse and to encourage participation in the greater community. Clubhouse programs focus on fostering recovery, competency, and social supports, as well as vocational skills and opportunities.

Community Inpatient Services are hospital services used to stabilize a mental health condition in the event of a significant change in symptoms, or in a mental health emergency. Community hospital services are provided in licensed psychiatric hospitals and in licensed psychiatric units of general hospitals.

Community Living Supports (CLS) are activities provided by paid staff that help adults with either serious mental illness or developmental disabilities live independently and participate actively in the community. Community Living Supports may also help families who have children with special needs (such as developmental disabilities or serious emotional disturbance).

Crisis Interventions are unscheduled individual or group services aimed at reducing or eliminating the impact of unexpected events on mental health and well-being.

Crisis Residential Services are short-term alternatives to inpatient hospitalization provided in a licensed residential setting.

Dialectical Behavior Therapy (DBT) is a treatment designed to meet the treatment needs of individuals who have self-harm behaviors such as cutting, burning, suicidal thoughts or other harmful urges including suicide. Sometimes, people entering DBT also have urges that result in eating disorders or alcohol and drug problems. Often, people who have thoughts and behaviors like these also struggle with depression and anxiety.

***Enhanced Pharmacy** includes doctor-ordered nonprescription or over-the-counter items (such as vitamins or cough syrup) necessary to manage a health condition(s) when the person's Medicaid Health Plan does not cover these items.
**Requires a doctor's prescription.*

***Environmental Modifications** are physical changes to a person's home, car, or work environment that are of direct medical or remedial benefit to the person. Modifications ensure access, protect health and safety, or enable greater independence for a person with physical disabilities. Note that other sources of funding must be explored first, before using Medicaid funds for environmental modifications.

**Requires a doctor's prescription.*

Extended Observation Beds (or 23-hour stay units) are used to stabilize a mental health emergency when a person needs to be in the hospital for only a short time. An extended observation bed allows hospital staff to observe and treat the person's condition for up to one day before they are discharged to another community-based outpatient service or admitted to the hospital.

Family Skills Training is education and training for families who live with and/or care for a family member who is eligible for specialty services or the Children's Waiver Program.

Fiscal Intermediary Services help individuals manage their service and supports budget and pay providers if they are using a "self-determination" approach.

Health Services include assessment, treatment, and professional monitoring of health conditions that are related to or impacted by a person's mental health condition. A person's primary doctor will treat any other health conditions he or she may have.

Home-Based Services for Children and Families are provided in the family home or in another community setting. Services are designed individually for each family and can include things like mental health therapy, crisis intervention, service coordination, or other supports to the family.

Housing Assistance is assistance with short-term, transitional, or one-time-only expenses in an individual's own home that his or her resources and other community resources could not cover.

Intensive Crisis Stabilization is another short-term alternative to inpatient hospitalization. Intensive crisis stabilization services are structured treatment and support activities provided by a mental health crisis team in the person's home or in another community setting.

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Intermediate Care Facility for Persons with Mental Retardation (ICF/MR) provides 24-hour intensive supervision, health, and rehabilitative services and basic needs to persons with developmental disabilities.

Medication Administration is when a doctor, nurse, or other licensed medical provider gives an injection, oral medication, or topical medication.

Medication Review is the evaluation and monitoring of medicines used to treat a person's mental health condition, their effects, and the need for continuing or changing medicines.

Mental Health Therapy and Counseling for Adults, Children, and Families includes therapy or counseling designed to help improve functioning and relationships with other people.

Nursing Home Mental Health Assessment and Monitoring includes a review of a nursing home resident's need for, and response to, mental health treatment along with consultations with nursing home staff.

***Occupational Therapy** includes the evaluation by an occupational therapist of an individual's ability to do things in order to take care of him/herself every day, and treatments to help increase these abilities.

**Requires a doctor's prescription.*

Partial Hospital Services include psychiatric, psychological, social, occupational, nursing, music therapy, and therapeutic recreational services in a hospital setting, under a doctor's supervision. Partial hospital services are provided during the day — participants go home at night.

Peer-Delivered and Peer Specialist Services such as drop-in centers are entirely run by consumers of mental health services. They offer help with food, clothing, socialization, housing, and support to begin or maintain mental health treatment. Peer Specialist services are activities designed to help persons with serious mental illness in their individual recovery journeys and are provided by individuals who are themselves in recovery from serious mental illness.

Personal Care in Specialized Residential Settings assists adults with mental illness or developmental disabilities with activities of daily living, self-care, and basic needs while they are living in a specialized residential setting in the community.

***Physical Therapy** includes the evaluation by a physical therapist of a person's physical abilities (such as the way they move, use their arms or hands, or hold their body) and treatments to help improve their physical abilities.

**Requires a doctor's prescription.*

Prevention Service Models (such as Infant Mental Health, School Success, etc.) use both individual and group interventions designed to reduce the likelihood that individuals will need treatment from the public mental health system.

Respite Care Services provide short-term relief to the unpaid primary caregivers of people eligible for specialty services. Respite provides temporary alternative care, either in the family home or in another community setting chosen by the family.

Skill-Building Assistance includes supports, services, and training to help individuals participate actively at school, work, volunteer, or community settings, or to learn social skills they may need to support themselves or get around in the community.

***Speech and Language Therapy** includes the evaluation by a speech therapist of a person's ability to use and understand language and communicate with others, or to manage swallowing or related conditions, and treatments to help enhance speech, communication, or swallowing.

Substance Use Disorder Services (descriptions follow the mental health services—see page 22)

Supports Coordination or Targeted Case Management: A supports coordinator or case manager is a staff person who helps write an individual plan of service and makes sure the services are delivered. His or her role is to listen to a person's goals, and to help find the services and providers inside and outside the local Community Mental Health services program that will help achieve the goals. The supports coordinator or case manager may also connect a person to resources in the community for employment, community living, education, public benefits, and recreational activities.

Supported/Integrated Employment Services provide initial and ongoing supports, services, and training (usually provided at the job site) to help adults who are eligible for mental health services find and keep paid employment in the community.

Transportation may be provided to and from a person's home in order for him or her to take part in a non-medical Medicaid covered service.

Treatment Planning assists a person, and other individuals of his or her choosing, in the development and periodic review of the individual plan of services.

Wraparound Services for Children and Adolescents with serious emotional disturbance, and their families, include treatment and supports necessary to maintain the child in the family home.

Services for Habilitation Supports Waiver (HSW) and Children's Waiver Participants Only

Some Medicaid beneficiaries are eligible for special services that help them avoid having to go to an institution for people with developmental disabilities or a nursing home. These special services are called the Habilitation Supports Waiver and the Children's Waiver. In order to receive these services, people with developmental disabilities need to be enrolled in either of these "waivers." The availability of these waivers is very limited. People enrolled in the waivers have access to the services listed above as well as those listed here:

Chore Services (for Habilitation Supports Waiver enrollees) are provided by paid staff to help keep the person's home clean and safe.

Non-Family Training (for Children's Waiver enrollees) is customized training for the paid in-home support staff who provide care for a child enrolled in the Waiver.

Out-of-Home Non-Vocational Supports and Services (for HSW enrollees) provide assistance to gain, retain, or improve in self-help, socialization, or adaptive skills.

Personal Emergency Response Devices (for HSW enrollees) help a person maintain independence and safety in his or her own home or in a community setting. These devices are used to call for help in an emergency.

Prevocational Services (for HSW enrollees) include supports, services, and training to prepare a person for paid employment or community volunteer work.

Private Duty Nursing (for HSW enrollees) is individualized nursing service provided in the home as needed to meet specialized health needs.

Specialty Services (for Children's Waiver enrollees) are music, recreation, art, or massage therapies that may be provided to help reduce or manage the symptoms of a child's mental health condition or developmental disability. Specialty services might also include specialized child and family training, coaching, staff supervision, or monitoring of program goals.



Services for Persons With Substance Use Disorders

The substance use disorder treatment services listed below are covered by Medicaid. These services are available through IARC, our access point for substance use disorders. Call (810) 235-9555 for a screening for services.

Access, Assessment, and Referral determine the need for substance use disorder services and assist in directing an individual to the right services and providers.

Outpatient Treatment includes counseling for the individual, family, and group therapy in an office setting.

Intensive Outpatient (IOP) is a service that provides more frequent and longer counseling sessions each week and may include day or evening programs.

Methadone and LAAM Treatment is provided to people who have heroin or other opioid dependence. Treatment consists of opiate substitution monitored by a doctor as well as nursing services and lab tests. This treatment is usually provided along with substance use disorder outpatient treatment.

Sub-Acute Detoxification is medical care in a residential setting for people who are withdrawing from alcohol or other drugs.

Residential Treatment is intensive therapeutic services which include overnight stays in a staffed licensed facility.

If you receive Medicaid, you may be entitled to other medical services not listed above. Services necessary to maintain your physical health are provided or ordered by your primary care doctor. If you receive Community Mental Health services, GCCMH will work with your primary care doctor to coordinate your physical and mental health services. If you do not have a primary care doctor, GCCMH will help you find one.

Note: The **Home Help Program** is another service available to Medicaid beneficiaries who require in-home assistance with activities of daily living and household chores. In order to learn more about this service, you may call the local Michigan Department of Human Services at (810) 760-2200, or contact Customer Services at (810) 257-3705, or TTY (810) 257-1346, for assistance.

RIGHTS AND RESPONSIBILITIES

What can I do if I have a complaint about my care?

We have identified three types of complaints that consumers of services may have:

- 1) Recipient Rights Complaints of Michigan Mental Health Code protected rights.
- 2) Grievances about anything else you may be unhappy with.
- 3) Appeals of service "action."

Recipient Rights

Every person who receives public mental health services has certain rights. The Michigan Mental Health Code protects some rights. Some of your rights include:

- The right to be free from abuse and neglect
- The right to confidentiality
- The right to be treated with dignity and respect
- The right to treatment suited to condition

More information about your many rights is contained in the booklet titled "Your Rights." You will be given this booklet and have your rights explained to you when you first start services, and then once again every year. You can also ask for this booklet at any time.

You may file a Recipient Rights complaint at *any time* if you think staff violated your rights. You can make a rights complaint orally or in writing. To make a complaint, contact your local Office of Recipient Rights Office (ORR) at **(810) 257-3710, or TTY (810) 257-1346**. Once a complaint is reviewed by ORR staff, the person who made the complaint will be notified in writing what action will be taken. Under certain circumstances, the complainant may appeal the outcome of an investigation, and ORR staff will assist in the appeal process upon request. To learn more about these complaints, look at the booklet titled "Your Rights" for Mental Health services.

Substance Use Disorder Services

If you receive substance use disorder services, you have rights protected by the Michigan Public Health Code. These rights will be explained to you when you start services and then once again every year. You can find more information about your rights while getting substance use disorder services in the "Know Your Rights" pamphlet. To make a complaint, contact the local Coordinating Agency for Substance Use Disorder Services office at **(810) 496-5542**.

You may contact GCCMH to talk with a Recipient Rights Officer about any questions you have about your rights, or to get help making a complaint. Customer Services can also help you file a complaint. You can contact Customer Services at **(810) 257-3705, or TTY (810) 257-1346**.

Grievances

You have the right to say that you are unhappy with your services or supports, or the staff who provide them, by filing a “grievance.” You can file a grievance *any time* by calling, visiting, or writing to GCCMH Customer Services. Assistance with the filing process is available by contacting Customer Services Monday through Friday from 8 a.m.—5 p.m. at **(810) 257-3705, or TTY (810) 257-1346**. You will be given detailed information about the grievance and appeal processes when you first start services, and then again annually. You may ask for this information at any time by contacting Customer Services at the above numbers.

Appeals

You will be given notice when a decision is made that denies your request for services, or reduces, suspends, or terminates the services you already receive. You have the right to file an appeal when you do not agree with such a decision. There are two ways you can appeal these decisions. There are also time limits on when you can file an appeal once you receive a decision about your services.

You may:

- Ask for a “Local Appeal” by contacting the Due Process Office at **(810) 424-6065, or TTY (810) 257-1346**.
- You can ask at any time for a Medicaid Fair Hearing before an administrative law judge (a state appeal). You must have Medicaid coverage to file for a Medicaid Fair Hearing.

Your appeal will be completed quickly, and you will have the chance to provide information or have someone speak for you regarding the appeal. You may ask for assistance from Customer Services to file an appeal.

Procedures for Appeals

An *Appeal* is a formal request to review an “action” or decision related to your services such as:

- Service denials, or limitations on requested services
- Suspension, reduction, or termination of services previously authorized
- Being unhappy with the content of a person-centered plan
- The denial, in whole or in part, of payment for a service
- The failure to provide services in a timely manner
- The failure to act within timeframes for resolving an appeal or complaint
- If you live in a rural area, the denial of a request for services outside of the provider network when services are not available within the provider network

You will be given notice when a decision is made that denies your request for services, or reduces, suspends, or terminates the services you already receive. All consumers have local appeal rights to the PIHP authorizing and/or providing their services. You have 45 days from the date of your Action Notice to file an appeal. You may contact Customer Services at **(810)257-3705**, toll free **(866)211-5455** or TTY **(810) 257-1346**, for assistance filing an appeal.

You may ask for a "Local Appeal" by contacting the Due Process Office at **(810) 424-6065, or TTY (810) 257-1346.**

An Appeal can take up to 45 days to be resolved. Do you think your life, health, or well-being is in danger? If so, you can ask for an "expedited" appeal. This will tell staff that you are concerned about your health and safety. Please note that if your request for an "expedited" appeal is denied, we will call and write to you within three (3) calendar days.

If you have Medicaid, you can ask for a state-level review called a Medicaid Fair Hearing. You can ask for a Medicaid Fair Hearing before an administrative law judge (a state appeal) within 90 days of the date of a notice.

When you receive the notice, you should also receive a form titled "Request for Hearing." You may complete the form and send it in the envelope provided to the State of Michigan Office of Administrative Hearings & Rules, Administrative Tribunal & Appeals.

For consumers who are not Medicaid beneficiaries, a State of Michigan Alternative Dispute Resolution Process is available if you do not like the result of your appeal. You must ask for a Local Appeal first.

You may choose to have another person represent you during an appeal:

- This person can be anyone you choose.
- This person may request a hearing for you.
- This person may also represent you at the hearing.
- You must give this person written permission to represent you. You may provide a letter or copy of a court order naming this person as your guardian or conservator.
- You do not need any written permission if this person is your spouse or attorney.

Note about service costs: If you request an appeal, you may ask to have services continue while your case is being reviewed. In some cases you may have to pay for the cost of your services. This may happen if:

- Your state level appeal upholds the action of your CMH;
- You withdraw your appeal; or
- You or the other person representing you does not participate.

Confidentiality and Access to Information

You have the right to have information about your mental health treatment kept private. You also have the right to look at your own clinical records and add a formal statement about them if there is something you do not like. Generally, information about you can only be given to others with your permission. However, there are times when your information is shared in order to coordinate your treatment or when it is required by law.

Family members have the right to provide information to GCCMH about you. However, without a Release of Information signed by you, GCCMH may not give information about you to a family member. Generally for minor children under the age of 18 years, custodial parents and guardians are provided information about their child and must sign a Release of Information to share with others.

If you are a minor who is 14 years of age or older, you are entitled to ask for, and receive, outpatient mental health services (not including psychotropic medication or pregnancy termination referral services) *without* the consent or knowledge of your parent or guardian. These services are limited to twelve (12) sessions or four (4) months for each request.

If you receive substance use disorder services, you have rights related to confidentiality specific to substance use disorder services.

Under the Health Insurance Portability and Accountability Act (HIPAA), you will be provided with an official Notice of Privacy Practices from GCCMH. This notice will tell you all the ways that information about you can be used or disclosed. It will also include a listing of your rights provided under HIPAA and the Michigan Mental Health Code and/or Public Health Code and how you can file a complaint if you feel your right to privacy has been violated.

If you feel your confidentiality rights have been violated, contact the Office of Recipient Rights at **(810) 257-3710, or TTY (810) 257-1346.**

Freedom from Retaliation

If you use public mental health or substance use disorder services, you are free to exercise your rights, and to use the rights protection system without fear of retaliation, harassment, or discrimination. In addition, under no circumstances will the public mental health system use seclusion or restraint as a means of coercion, discipline, convenience, or retaliation.

Right to Receive Information

As a consumer of services from GCCMH, you have the right to receive the following information annually: Names, locations, and telephone numbers of, and non-English languages spoken by, current contracted providers in your area. You also have the right to receive other information, such as the GCCMH Organizational Chart or the GCCMH Annual Report. To request this or any other information, please contact Customer Services at **(810) 257-3705, or TTY (810) 257-1346.**



MENTAL HEALTH GLOSSARY

Access: The entry point to the Prepaid Inpatient Health Plan (PIHP), sometimes called an “access center,” where Medicaid beneficiaries and others can call or go to request mental health services. Genesee County Community Mental Health is the PIHP in Genesee County.

Adult Benefits Waiver: Michigan health care program for certain low-income adults who are not eligible for the Medicaid program. Contact Customer Services for more information. This is a narrowly defined benefit that does not entitle you to all of the services and supports described in this brochure.

Amount, Duration, and Scope: How much, how long, and in what ways the Medicaid services that are listed in a person’s individual plan of service will be provided.

Beneficiary: An individual who is eligible for, and enrolled in, the Medicaid program in Michigan.

CA: An acronym for Substance Abuse Coordinating Agency. The CAs in Michigan manage services for people with substance use disorders. Genesee County Community Mental Health is the CA in Genesee County.

CMHSP: An acronym for Community Mental Health Services Program. There are 46 CMHSPs in Michigan that provide services in their local areas to people with mental illness and developmental disabilities. Genesee County Community Mental Health is the CMHSP in Genesee County.

Fair Hearing: A state-level review of beneficiaries’ disagreements with health plans’ denial, reduction, suspension, or termination of Medicaid services. State administrative law judges who are independent of the Michigan Department of Community Health perform the reviews.

Deductible (or Spend-Down): A term used when individuals qualify for Medicaid coverage even though their countable incomes are higher than the usual Medicaid income standard. Under this process, the medical expenses that an individual incurs during a month are subtracted from the individual’s income during that month. Once the individual’s income has been reduced to a state-specified level, the individual qualifies for Medicaid benefits for the remainder of the month.

Developmental Disability: As defined in the Michigan Mental Health Code, means either of the following: (a) If applied to a person older than five years, a severe chronic condition that is attributable to a mental or physical impairment or both, and is manifested before the age of 22 years; is likely to continue indefinitely; and results in substantial functional limitations in three (3) or more areas of the following major life activities: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency; and reflects the need for a combination and sequence of

special, interdisciplinary, or generic care, treatment, or other services that are of lifelong or extended duration; or (b) If applied to a minor from birth to age 5, a substantial developmental delay or a specific congenital or acquired condition with a high probability of resulting in a developmental disability.

Health Insurance Portability and Accountability Act of 1996

(HIPAA): This legislation is aimed, in part, at protecting the privacy and confidentiality of patient information. "Patient" means any recipient of public or private health care services, including mental health care.

MDCH: An acronym for the Michigan Department of Community Health. This state department, located in Lansing, oversees public-funded services provided in local communities and state facilities to people with mental illness, developmental disabilities, and substance use disorders.

Medically Necessary: A term used to describe one of the criteria that must be met in order for a beneficiary to receive Medicaid services. It means that the specific service is expected to help the beneficiary with his or her mental health, developmental disability, or substance use disorder (or any other medical) condition. Some services assess needs and some services help maintain or improve functioning.

Michigan Mental Health Code: The state law that governs public mental health services provided to adults and children with mental illness, serious emotional disturbance, and developmental disabilities by local community mental health services programs and in state facilities.

MICHild: A Michigan health care program for low-income children who are not eligible for the Medicaid program. This is a limited benefit. Contact Customer Services for more information.

PIHP: An acronym for Prepaid Inpatient Health Plan. There are 18 PIHPs in Michigan that manage the Medicaid mental health, developmental disabilities, and substance use disorder services in their geographic areas. All 18 PIHPs are also community mental health services programs. Genesee County Community Mental Health is the PIHP in Genesee County.

Recovery: A journey of healing and change allowing a person to live a meaningful life in a community of his or her choice, while working toward his or her full potential.

Resiliency: The ability to "bounce back." This is a characteristic important to nurture in children with serious emotional disturbance, and their families. It refers to the individual's ability to become successful despite challenges he or she may face throughout his or her life.

Specialty Supports and Services: A term that means Medicaid-funded mental health, developmental disabilities, and substance use disorder supports and services that are managed by the Prepaid Inpatient Health Plans.

SED: An acronym for Serious Emotional Disturbance, and as defined by the Michigan Mental Health Code, means a diagnosable mental, behavioral, or emotional disorder affecting a child that exists or has existed during the past year for a period of time sufficient to meet diagnostic criteria specified in the most recent Diagnostic and Statistical Manual of Mental Disorders; and has resulted in functional impairment that substantially interferes with or limits the child’s role or functioning in family, school, or community activities.

Serious Mental Illness: Is defined by the Michigan Mental Health Code to mean a diagnosable mental, behavioral, or emotional disorder affecting an adult that exists or has existed within the past year for a period of time sufficient to meet diagnostic criteria specified in the most recent Diagnostic and Statistical Manual of Mental Disorders; and that has resulted in function impairment that substantially interferes with, or limits, one or more major life activities.

Substance Use Disorder (or Substance Abuse): Is defined in the Michigan Public Health Code to mean the taking of alcohol or other drugs at dosages that place an individual’s social, economic, psychological, and physical welfare in potential hazard; or to the extent that an individual loses the power of self-control as a result of the use of alcohol or drugs; or while habitually under the influence of alcohol or drugs, endangers public health, morals, safety, or welfare; or a combination thereof.



MEDICAID HEALTH PLAN SERVICES

- Ambulance
- Chiropractic
- Doctor visits
- Family planning
- Health check ups
- Hearing aids
- Hearing and speech therapy
- Home health care
- Immunizations (shots)
- Lab and X-ray
- Nursing home care
- Medical supplies
- Medicine
- Mental Health (limit of 20 outpatient visits)
- Physical and Occupational therapy
- Prenatal care and delivery
- Surgery
- Transportation to medical appointments
- Vision

If you already are enrolled in one of the health plans listed below, you can contact the health plan directly for more information about the services listed above. If you are not enrolled in a health plan or do not know the name of your health plan, you can contact the GCCMH Customer Services Department for assistance.

Health Plus Medicaid

Hurley Mental Health Associates

1125 South Linden Rd.
Flint, MI 48532
(810) 230-3370

Hope Network Insight

1110 Eldon Baker Drive
Flint, MI 48507
(810) 744-3600

McLaren Medicaid

Hope Network Insight

1110 Eldon Baker Drive
Flint, MI 48507
(810) 744-3600

Hope Network Insight

4413 Corunna Rd.
Flint, MI 48532
(810) 733-0900

Catholic Charities

901 Chippewa St.
Flint, MI 48503
(810) 232-9950

CCMH Customer Services: (810) 257-3705 Toll Free: (866) 211-5455 TTY: (810) 257-1346

"Our imagination is the only limit to what we can hope to have in the future." Charles Kettering

COMMUNITY RESOURCES

Social Security	(800) 772-1213
24 hr. automated national TTY.....	(800) 325-0778
Robert T. Longway	(810) 239-5608
Local TTY.....	(810) 233-6635
Clio Rd.	(810) 789-2164
Mich. Department of Human Services (formerly FIA)	(810) 760-2200
McCree Building	(810) 760-7310
Mich. Department of Community Health	(517) 374-6848
Genesee County Health Department	(810) 257-3612
Michigan Relay Center	(800) 649-3777
Legal Services of Eastern Michigan	(810) 234-2621
Disability Network	(810) 742-1800
TTY.....	(810) 742-7647
MTA—Your Ride:	
Burton	(810) 767-5992
Clio	(810) 780-8920
Davison	(810) 780-8910
Fenton	(810) 780-8965
Flint East	(810) 767-5541
Flint West	(810) 233-4751
Flushing	(810) 780-8930
Grand Blanc	(810) 780-8960
Mt. Morris	(810) 780-8970
Otisville	(810) 780-8940
Swartz Creek	(810) 780-8950
Customer Service	(810) 767-0100
Michigan Rehabilitation Services	(810) 760-2103
Resource Center	(810) 767-0500
Genesee Free Clinic	(810) 235-4211
Salvation Army	(810) 232-2196
Hamilton Community Health Network Main Clinic	(810) 789-9141
One Stop Housing Resource Center	(810) 600-4525
Health Access HOPE Health Outreach Program	(810) 762-4736
Red Cross	(810) 762-9960

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ADVOCACY ORGANIZATIONS

NAMI Michigan (Alliance for the Mentally Ill)	(800) 331-4264
NAMI of Genesee County	(810) 232-6498
Association for Children’s Mental Health	(517) 336-7222
Toll Free	(800) 782-0883
The ARC-Michigan: A State Organization on Developmental Disabilities	(517) 487-5426
Toll Free	(800) 292-7851
Citizens for Better Care	(989) 746-9216
Toll Free	(800) 284-0046
Michigan Protection and Advocacy Services, Inc.	(517) 487-1755
Toll Free	(800) 288-5923
United Cerebral Palsy of Michigan	(800) 828-2714
Project VOX (substance use disorder recovery)	(810) 496-5599
Weiss Advocacy Center	(810) 238-3333

Toll Free Help Lines

Poison Control
1-800-222-1222

Parent Help Line
24 hrs.—7 days a week
Confidential & Anonymous
Toll Free and TTY: (800) 942-4357

Runaway Assistance
(800) 292-4517

NO Means NO
(877) 666-3267

Vulnerable Adult Abuse & Exploitation Help Line
(800) 996-6228

GCCMH Customer Services: (810) 257-3705 Toll Free: (866) 211-5455 TTY: (810) 257-1346

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MY IMPORTANT NAMES AND NUMBERS

Please fill this out and keep it in a place that's easy to find.

My support staff (case manager, supports coordinator, therapist) is:

Name:

Phone Number:

My psychiatrist is:

Name:

Phone Number:

My medical doctor is:

Name:

Phone Number:

My pharmacy is:

Name:

Phone Number:

I am allergic to:

In case of an emergency call:

Name:

Phone Number:

Name:

Phone Number:



Genesee County Community Mental Health
Customer Services
420 W. Fifth Avenue
Flint, MI 48503
(810) 257-3705
Toll Free (866) 211-5455
TTY (810) 257-1346
www.gencmh.org