



2021 ANNUAL REPORT

SERVICES CLOSE TO HOME

ANTRIM • CHARLEVOIX • CHEBOYGAN • EMMET • KALKASKA • OTSEGO COUNTIES

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Administration (231) 347-7890

norcocmh.org



**YOU
MATTER**

**YOU ARE
NOT
ALONE**



**HELP IS
JUST A
PHONE CALL
AWAY**

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(877) 470-7130**

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North Country Community Mental Health (NCCMH) operates under provisions of the Michigan Mental Health Code for the purpose of providing services to residents of Antrim, Charlevoix, Cheboygan, Emmet, Kalkaska and Otsego Counties. As the community mental health service provider for these counties, NCCMH serves community members by assuring local access, organizing and integrating the provision of services, coordinating care, implementing public policy, ensuring interagency collaboration, and preserving public interest.

TO THE COMMUNITY:

Ed and I are pleased to share our **Annual Report to the Community** highlighting the numerous achievements of our organization, our staff and provider network and, most of all, of the people we are privileged to serve. Even while the global COVID pandemic continued to challenge us with staffing shortages, limits on in-person services, and an increasing demand for crisis services, North Country Community Mental Health (NCCMH) remained strong and mission-focused serving over 4000 individuals across Antrim, Charlevoix, Cheboygan, Emmet, Kalkaska, and Otsego Counties.

In FY 21, NCCMH received four **Mental Health Block Grants** totaling \$292,132. These funds were used to provide housing assistance for people and families experiencing homelessness; to hire a second Criminal Justice Liaison to provide crisis services to jail inmates and consultation and training to jail personnel; and to create a new Juvenile Justice Liaison position to provide mental health screenings for youth and connecting them with treatment providers and other resources. Grant funds were also used to launch the free web-based wellness program called myStrength to everyone in the community.

NCCMH also launched the 'HATCH' program – **Holistic Approach to Coordinated Healthcare**—that integrates and coordinates behavioral and physical health care to help individuals achieve better health outcomes.

We're grateful to the individuals who were willing to share their personal stories of **hope and recovery** in this report. Their hope is that their stories may ease someone else's journey. With one in four people experiencing a mental health crisis in their lifetime, it's likely that each of us has lived experience with mental illnesses or substance misuse. If we all can find the courage to share our stories, we will overcome the stigma of seeking behavioral health services.

We are also extremely grateful to our network of residential and community integration providers who managed to meet the challenges brought on by the direct care staffing shortage. These **essential workers** and administrators adapted and sacrificed to ensure services were continued in a safe environment.

Disappointedly, since 2016 the community mental health system has been threatened with privatization and loss of local governance. Senate Bills 597-598 and House Bills 4925-4927, introduced in 2021, would dismantle the current CMH system, undermining our role as the safety net for our most vulnerable citizens and as the convener for interagency collaborations that meet the unique local needs of rural northern Michigan. **We need your voice to preserve the local public community mental health system!**

This will be my last report to you as NCCMH's Chief Executive Officer as I will retire on July 1, 2022. I have been honored to lead North Country CMH these past five years and very proud of all that we've accomplished through our community partnerships. I leave with greater awareness, more compassion, deep appreciation, and eternal optimism...inspired by those we serve and those who serve.

Be well.



Ed Ginop
Chairperson
Board of Directors



Christine Gebhard
Chief Executive Officer

ABOUT NCCMH

MISSION

To provide behavioral health services that inspire hope and promote recovery, resilience, and wellness to eligible residents.

VISION

All community members will have responsive high quality integrated health care leading to a fulfilled life.

2021 BOARD MEMBERS

ANTRIM COUNTY

Caroline Loper
Christian Marcus

CHARLEVOIX COUNTY

Robert Draves
Dennis Priess

CHEBOYGAN COUNTY

Robert Boyd
Edward Ginop, Board Chair
Michael Newman

EMMET COUNTY

Karla Sherman
David White

KALKASKA COUNTY

Katina Banko
Sr. Augusta Stratz

OTSEGO COUNTY

Ron Iseler
Paul L. Liss

NCCMH EXECUTIVE TEAM

Christine Gebhard, Chief Executive Officer
Brian Babbitt, Chief Operating Officer
Stacey Chipman, Chief Clinical Officer
Kevin Hartley, Chief Financial Officer
Amy Christie, Chief Quality Officer
Joseph Balberde, Chief Information Officer



CARF ACCREDITED
MENTAL HEALTH PROGRAMS:
ACCREDITED THROUGH NOVEMBER 30, 2022

Assertive Community Treatment: Adults
Case Management/Services Coordination: Adults
Case Management/Services Coordination: Children & Adolescents
Community Integration: Adults
Crisis Intervention: Adults
Crisis Intervention: Children & Adolescents
Outpatient Treatment: Adults
Outpatient Treatment: Children & Adolescents

2021 HIGHLIGHTS

- NCCMH was awarded \$25,000 in Mental Health Block Grant funds through the Michigan Department of Health and Human Services (MDHHS), allowing for the addition of a second **Criminal Justice Liaison (CJL)**. The role of the Criminal Justice Liaison is to provide a non-emergent mental health contact to any inmate in a facility that requests a visit, or to any inmate that is identified by jail staff as being in need. In 2021, our CJLs provided 918 mental health contacts. The CJL, along with the Emergency Services Therapists, provide emergency care for inmates experiencing a mental health crisis. In the upcoming year, these staff will be linking inmates to behavioral health and social services in the community to support their successful reentry. In addition, we are promoting Stepping Up, which is a national initiative to reduce the number of people with mental illness in jails. The Stepping Up initiative is active in Charlevoix, Emmet, Cheboygan, Antrim Counties.

- In 2020 North Country received a Mental Health Block Grant through MDHHS totaling \$95,405 to provide mental health access screening to **divert youth from the juvenile justice system**. The Juvenile Justice Liaison (JJL) launched a pilot program in Cheboygan County to screen any youth ages 10-17 prior to adjudication. The JJL is now connecting these youth and families with appropriate behavioral health and community services. The JJL is meeting with community partners in each county to promote the program and engage families in this service.



- MDHHS awarded NCCMH \$75,277 in grants for housing. These grants are specifically for CMH clients and families who are experiencing homelessness, or at-risk of homelessness, and have been diagnosed with a serious mental illness. **Independent housing and transitional housing services** were provided to 13 individuals in Charlevoix, Cheboygan, Emmet, and Otsego Counties.

- Mental Illness and Substance Use Disorder (SUD) often occur together and interactions between these two disorders can worsen the course of both. A comprehensive treatment approach will address both disorders at the same time. NCCMH continued enhancing **Co-Occurring Mental Health and Substance Use Disorder** services, adding a new SUD screening tool, a new treatment and referral decision-making tool, and offering co-occurring support groups. Fifteen staff obtained addiction counseling competencies and Certified Advanced Alcohol and Drug Counselor (CAADC) credentialing, improving NCCMH's capacity to assess and provide treatment to individuals with co-occurring disorders.



New Program Launched: **BEHAVIORAL HEALTH HOME “HATCH” PROGRAM**

NCCMH launched a new program—Holistic Approach To Coordinated Healthcare, or “HATCH” — which “wraps an extra layer of help and care” around people who are beneficiaries of Medicaid, Healthy Michigan, and MI Child who are enrolled in order to help individuals achieve their health and wellness goals.

HATCH is a “behavioral health home” program expanded by MDHHS in 2020 to serve individuals in all 21 counties of the Northern Michigan Regional Entity.

A “health home” is not a physical place; rather, it is a healthcare delivery approach that integrates and coordinates behavioral health care, physical and specialty health care, and social support services. The program includes a whole team of healthcare professionals who work with the individual to assist with coordination of care, support, and managing a variety of health care and social needs.

The HATCH Nurse Care Manager helps the NCCMH teams understand how to refer and educate potential clients and families on the services and benefits of being part of the program. The HATCH program grew to 40 participants during 2021.

NCCMH staff also participate in integrated care coordination meetings with Alcona Health Center in Harbor Springs and Cheboygan, East Jordan and Bellaire Family Health Centers, Otsego Medical Group, and Thunder Bay Health Center.

NCCMH is excited to offer this collaborative program proven at achieving better health outcomes.

There are 6 main services provided:



Comprehensive Care Management to help identify and achieve health/wellness goals



Care Coordination among provider(s) including specialists



Health Promotion and education opportunities and resources



Transitional Care during changes, such as leaving the hospital



Individual and Family Support and opportunities for self-growth



Referral to Community and Social Support and help accessing resources

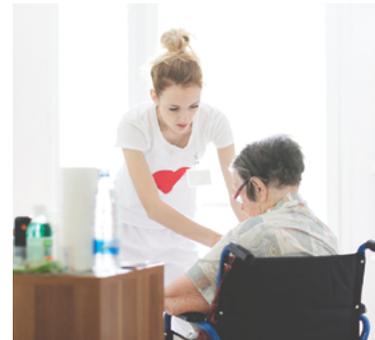


A SPECIAL THANK YOU TO OUR RESIDENTIAL PROVIDERS FOR THEIR DEDICATION AND COMMITMENT!

An integral part of North Country CMH's mission is to help people live their lives as independently as possible. While most of the adults and children we serve reside in their own home or family home, there are many who receive assistance through community living supports. NCCMH contracts with 64 residential providers for community living supports in 159 private residences and licensed residential facilities.

NCCMH would like to recognize the organizations and individuals for their tireless service to ensure a safe and healthy environment for our most vulnerable people.

Residential providers struggled to retain and recruit staff during the past two years of the COVID-19 pandemic. With latitude from the Michigan Department of Health and Human Services, NCCMH was able to assist our residential provider network to remain financially stable by funding \$965,300 for recruitment and retention of direct care workers and to pass on an additional \$2.1 million in direct care worker wages appropriated by the Michigan legislature.



HEALTH AND WELLNESS APP

NCCMH subscribes to the **myStrength health and wellness application** to benefit everyone in the community. MyStrength is an evidence-based, self-help resource available 24/7 in the privacy of your own home. The app is packed with engaging content, videos, and tips that people can immediately put to use about stress, anxiety, depression, and issues such as early parenting, chronic pain, insomnia, and much more.

MyStrength was launched in May and staff were trained on the use of the resources within the program. This free community resource is funded through a \$94,500 Mental Health Block Grant through MDHHS, allowing NCCMH to provide trainings to schools and community partners, and develop marketing materials such as billboards, radio, and television spots to promote the app. Over 580 individuals are enrolled and using myStrength.

For your free account, download the app or access it through www.norcocmh.org.
The free access code is NCCMHcomm



myStrength

A HELPING HAND – NCCMH CLIENT SPECIAL NEEDS FUND

Our priority is helping people achieve their treatment goals and goals are as varied as the individuals we serve, such as managing symptoms of depression or anxiety; obtaining and maintaining employment; living as independently as possible; furthering their education; or improving their physical health. Often, this requires goods or services that can't be purchased with public funds—things like textbooks, special work clothes, rent deposit, emergency travel or car repairs to name a few.

Fund raising events and private donations for the Client Special Needs Fund provides the financial support for these endeavors. A special thanks to these organizations and individuals, and others, who contributed a total of \$8,169 to the Client Special Needs Fund this year-- Calvary Lutheran Church, Knights of Columbus, Antrim Women's Alliance, Elk Rapids Lions Club, Northwest Michigan Community Action, Village Market, and Goodwill Industries. You make a difference in someone's life!

You can make a donation to the Client Special Needs Fund through PayPal, using this link: [I Want To Donate](https://bit.ly/3sauXpk) (<https://bit.ly/3sauXpk>).

PARTNERING FOR MORE CRISIS OPTIONS

Christine Gebhard, along with Northern Lakes CMH and Munson Healthcare staff, met with Senator Debbie Stabenow in Traverse City to share information about the actions underway in our region to improve mental health services. As a first step, North Country, Northern Lakes, McLaren, and Munson commissioned a crisis assessment by TBD Solutions which identified needs in our regional crisis continuum of care. As a result, work has intensified across the [Northwest Michigan Community Health Innovation Region](#) to add crisis stabilization and crisis residential services for both adults and children. North Country has been an integral partner in the efforts.



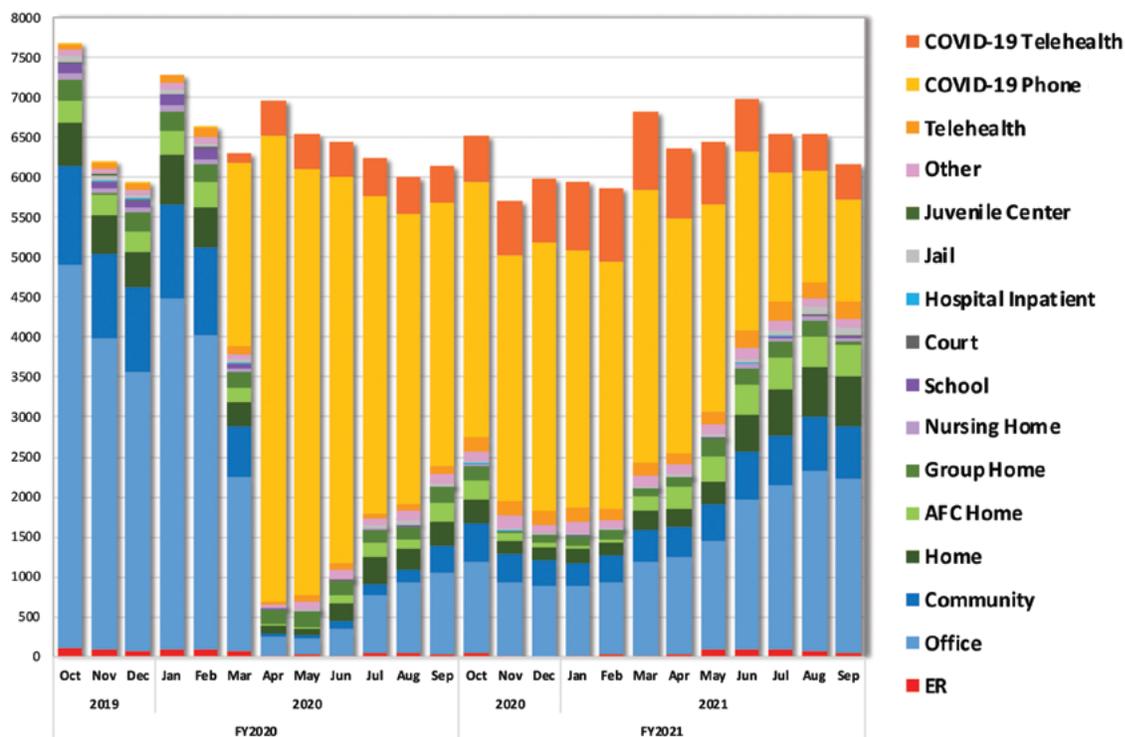
Ed Ness, President & CEO, Munson Healthcare; Christine Gebhard, CEO, North Country CMH; Terri LaCroix-Kelty, Munson Medical Center; Gabe Schneider, Munson Healthcare; Senator Debbie Stabenow; Nancy Stevenson; Joanie Blamer, Northern Lakes CMH; Stacey Kaminski, Northern Lakes CMH; and Dr. Christine Nefcy, Munson Healthcare.

HOMETOWN HEROES

Kalkaska Kiwanis Club presented the Hometown Hero award to the NCCMH Kalkaska Office along with Kalkaska Health Department #10 in recognition of their response to serving the community and helping with the mental health challenges experienced during COVID-19. All NCCMH staff have been Hometown Heroes—last year and always!



SERVICE LOCATION PIVOT FROM IN-PERSON TO REMOTE



The chart above shows the pivot from outpatient office and community-based services (blues) to telehealth and telephone (yellows) which began with the pandemic in March during FY2020 and the return to office-based and in-person services in FY2021.

STORIES OF HOPE AND RECOVERY

Mental illness is common and treatable. While everyone's journey to recovery is different, the people we serve often say that sharing their experiences to help ease others' journeys is empowering and helps in their own recovery. Here are a few of their stories.

● **THERAPY ALWAYS THERE WHEN NEEDED—** My journey in Mental Health Care with the agency began in 1992 when it was Antrim Kalkaska Community Mental Health. I had a doctor and therapist then. That counseling went fairly well and I was discharged from care. A couple of years later I had a breakdown at work and was hospitalized. So, I once again entered into therapy. While there I also had group therapy. After a while I was well enough to be discharged. By the next time I needed services again, the agency had merged and became North Country Community Mental Health (NCCMH). I was meeting with a therapist until the day my car was repossessed. I had called the Bellaire office and told them I would not be able to keep my appointment that day. She asked "Why not?" I told her that I had taken 30 sleeping pills. She immediately put me through to my therapist. We were talking and the next thing I remember is waking up in the hospital. I spent a few days in the hospital developing discharge plans and receiving treatment. After discharge from the hospital my care in the agency was transferred to ACT (Assertive Community Treatment). While under their treatment, they introduced me to New Horizons Clubhouse, in which I am very active. ACT taught me DBT (Dialectical Behavior Therapy) skills. DBT's main goal is to teach people how to live in the moment, develop healthy ways to cope with stress, regulate their emotions, and improve their relationships with others. ACT and Clubhouse have shown me that I have value as a person. I became too well for such intensive services as ACT provides and my treatment was transferred to a therapist. It was an easy transition because she was known to me. We continued with the DBT skills. I was approached by my therapist to file an application to fill a vacancy on the NCCMH Board of Directors. I did and was awarded the spot. I have served on the Board since May of 2017. Once again I became too well for therapy, and the agency and I have decided that at this time the services that I receive from NCCMH are from the doctor, nurse, and Clubhouse. It is good to know that the option of therapy is available if I ever need it again. Thank you to all of NCCMH who have helped me in my journey! – *By Caroline Loper*

● **GETTING HELP MAKES ALL THE DIFFERENCE—** Gregory (Benny) Bennett came to us seeking psychiatry and case management services to assist him with getting his life back on track after experiencing a manic episode that led to his being incarcerated for eighteen months. Benny set a clear goal of taking the steps necessary to be able to return home to his wife. After he was released from prison, Benny was placed at the Coach Motel in Petoskey until he finished the requirements to return home. Benny worked hard with his psychiatrist, case manager and parole officer. Within a couple of months, he finished his requirements and was able to



Benny

achieve his goal of going back home to his wife. Benny has been in services for almost a year and has remained stable. Benny's case manager has expressed that it has been "an honor to walk side by side with him through this process and a pleasure to provide him support as he reunited with his wife and community."

● **YOU ARE NEVER ALONE**— It wasn't until my early twenties that I experienced my first manic episode with Bipolar disorder. I was fortunate enough that my family and my Community Mental Health family have been there for me. There is a lot of stigma placed upon people with mental illness but through living with a mental illness, I have learned how to be a healthy member of society. My first realization wasn't until I was detained by police in 2009, I was 23. I was picked up walking in traffic, taken to a holding cell, admitted into the E.R. and involuntarily committed into the Psych Ward. It was the beginning of numerous times making official people like police officers, medical providers, and professors cry and I didn't know why. I remember the doctors had to observe me and my behaviors before my initial diagnosis of having Bipolar disorder. Sometimes it's the little things like relationships that hurt the most when you lose out because of a mental illness. I faced denial for many years about my mental health. I would always think I was doing well and didn't need my medications every time I started feeling better. I had many people give up on me but a main support for me in my life has been Community Mental Health (CMH) and they have never turned their backs on me. The people there want to help people like me to live well and to our fullest potential. NCCMH has been there for me through some of the toughest times in my life, like almost losing custody of my daughter because of my mental illness, and the death of my father. They genuinely care about each one of their clients that walks through the door and want to provide every aspect of the ability for us to grow as individuals. I feel thankful that there is help for me. I don't have to face this mental illness on my own and I am not alone. — *Sincerely, A Client of CMH*

● **LEARNING TO LIVE WITH AUTISM**— Justin began to show issues in preschool and things intensified on entering kindergarten. Weeks into his school year he was removed and entered into the Char-Em program in Boyne Falls. Things got worse from there. He was experiencing aggressive behavior with both peers and teachers, and was unable to focus on lessons. He was placed on medication for Attention Deficit and Hyperactivity Disorder (ADHD) to alleviate some of his issues and behaviors but things just got progressively worse. Following another bad episode which landed him in the Emergency Department, he was admitted to Marquette Hospital in 2013. It was there that he was suspected to have Autism. He was diagnosed a short time later. He started on some new medications but continued to have issues, and his behaviors worsened as he got older. He was unable to complete a full day of school without having meltdowns or issues. He was in and out mental hospitals and was placed in a couple different Listening Ear homes. He also spent a week in the juvenile detention center in St. Ignace, after a severe episode involving property damage. Unfortunately, psychiatric hospital beds were in short supply so he was placed on a waiting list. He eventually was placed at the Hawthorn Center in Northville, Michigan. It was here that things started to change for him. We

are so thankful that he was able to get into that program. He was released following 10 weeks at Hawthorn and came to live with us (his grandparents) full time. He began to do better at school. He is now able to stay in school the entire day. His medications have been reduced and he is doing much better interacting with other kids. He recognizes when he needs a break and is able to step away or ask for help. He is helping at school with some of the children in wheelchairs. He has been helpful at home. He is sleeping much better. His atmosphere is quiet and simple at home and we believe that has helped immensely.

We are so thankful to all the staff for all the services they have provided over the years. I believe that Justin will continue to improve and we are confident his life will only get better from here. We look forward to watching him grow and will be by his side every step of the way.

From his mother: In 15 years my son has faced many obstacles and many challenges. Having autism never stopped him from becoming the young man he is today. As his mother I've gotten the joy and privilege to see him find himself through the stormy seas of behaviors, hospital stays and realizing what was best for him. As a mother I became his voice and he became my heart. My parents have helped him develop emotionally, mentally and physically. For that, I am forever grateful and lucky to have their support. Justin enjoys working on jeeps with my dad and fishing. He's doing well in school and is making friends. Through all of this he found a happy stable life. It's a great honor to be his mother and we are all super proud of him.

● **DREAM BIG: YOU ARE WORTH IT**—Caitlin came to NCCMH at the end of July 2021; she reported being diagnosed with Bipolar disorder and Tourette's Syndrome by a previous psychologist. In addition to her health challenges, Caitlin has had some tough life experiences. Her mom passed away of lung cancer in 2019 and her dad passed away 26 days later. Caitlin is very intelligent and insightful and since she has started working with us she has continued to grow and do the self-work needed to improve the quality of her life. She says that her suicidal thoughts have ceased. Her depression has lessened and she has started making big changes in her lifestyle by improving her diet and activity level and has lost 23 lbs. She also has made changes in her relationships. She left a significant, toxic relationship and is pursuing a new relationship. She is happy at the pace and setting limits and boundaries that align with her values. Caitlin also had the privilege to house her sister, fiancé and their five kids temporarily while they got a home of their own. They even battled COVID during this time together while navigating all their different schedules and demands. This time with family gave Caitlin a break from her anxiety that would often show up in the evenings and when she felt alone physically and mentally. Caitlin continues to dream big and attack her goals. She is gaining confidence and combating her limiting beliefs about herself regarding her worthiness. She is worthy and deserving of life's opportunities for her and we are honored to be able to assist her on her journey.



Caitlin

● **HAPPY WITH HER LIFE**—Hazel has an Intellectual Developmental Disability and has been receiving mental health service since 1996. She lives in an Adult Foster Care home and views her housemates and staff as family. She enjoys going into the community with her home staff along with Gaylord Alpine Workshop. Hazel was in foster care as a young child, bouncing from home to home because of her behavior towards others. She has been able to remain living at her current AFC home for several years. She has improved on her social skills and even wants to help around her home. She is learning healthy eating habits and enjoying learning different types of exercises. Hazel enjoys getting her hair, make-up, and nails done and she and her boyfriend have attended the “Night to Shine” event, which is a Prom for people with disabilities in which everyone is crowned King or Queen. With supports, Hazel would like to find a part-time job in the community. She is happy with her life and finds joy in being around others. She is focusing on her abilities and developing lasting friendship with others.



Caitlin

A SPECIAL TRIBUTE TO JULIE MORAN



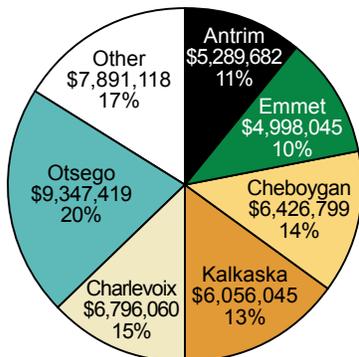
We were deeply saddened by the passing of our colleague, Julie Moran. Julie’s 32-year career with North Country CMH was devoted to improving the lives of people with intellectual and developmental disabilities. Where resources were missing, she created them. She innovated a housing grant to promote independence. She originated the idea of an annual Christmas Party—spanning 30 years—that’s become the highlight of the holidays for staff and clients alike. She was a founding member of the Traverse Area Poverty Initiative and volunteered with the homeless census. Julie encouraged and arranged for clients to travel to Lansing to advocate with lawmakers. She created Art Speaks! to provide everyone the opportunity for artistic expression and community involvement regardless of ability. Julie was a pioneer in self-determination, person-centered planning, and supported independent living before they became buzzwords. Dale Murton, a colleague, recalls that “Julie was a moral compass and compassionate advocate, always thinking about the person first.” Steve Purdue, former CEO of Grand Traverse Industries, recalls that “Julie was a valued and trusted colleague for well over 30 years, whose dedication to the folks was in her heart and soul.” Julie’s unwavering belief in human potential is the legacy she leaves with us.

2021 BY THE NUMBERS

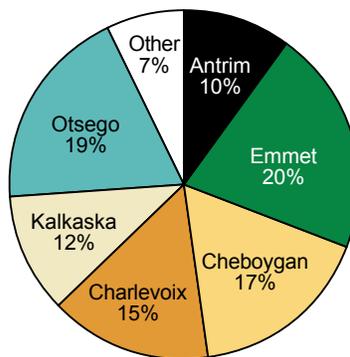
Fiscal Year October 1, 2020 - September 30, 2021

<u>MENTAL HEALTH SPENDING BY PROGRAM</u>	<u>COST</u>	<u>PERCENT</u>
Community Living Supports	\$21,180,060	40.11%
Non-licensed Community Living Supports	8,683,461	16.44%
Case Management / Treatment Planning	4,798,757	9.09%
Inpatient	3,316,541	6.28%
Psychotherapy	2,956,328	5.60%
Autism Services	1,607,866	3.04%
Medication Evaluation and Management	1,593,301	3.02%
Assessments and Testing	1,474,531	2.79%
Skill Building	1,203,620	2.28%
Assertive Community Treatment (ACT)	1,131,301	2.14%
Other	992,670	1.88%
Additional Support Services	956,717	1.81%
Crisis Services	914,677	1.73%
Vocational Supports	900,035	1.70%
Prevention and Early Intervention	295,748	0.56%
Medication Administration	284,428	0.54%
Psychiatric Diagnostic Evaluation	246,536	0.47%
Residential Services	177,061	0.34%
Outpatient Services	56,056	0.11%
Other Therapy	41,693	0.08%
Total	\$ 52,811,388	100.00%

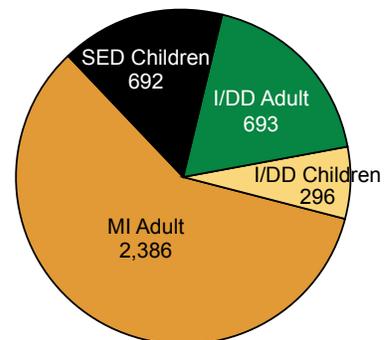
EXPENDITURES BY COUNTY



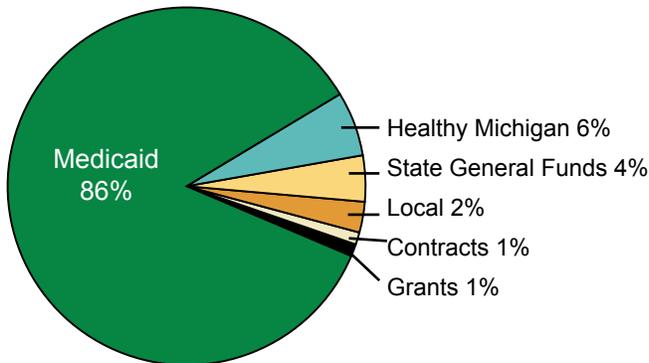
INDIVIDUALS SERVED BY COUNTY



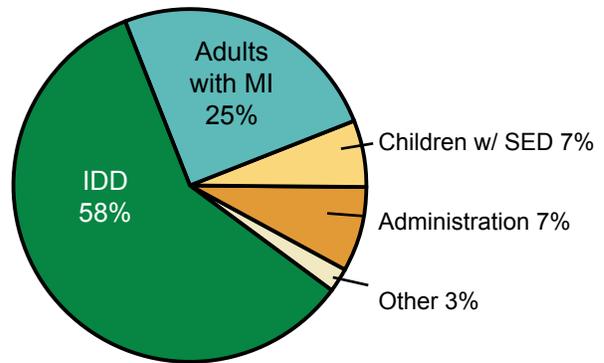
INDIVIDUALS SERVED BY POPULATION



Revenues



Expenditures



Revenues

Medicaid	\$48,633,507
Healthy Michigan	3,590,472
State General Funds	2,086,044
Local	1,488,861
Contractual/Other	391,470
Grants	282,309
Reimbursements	<u>64,182</u>
Total Revenue	\$56,536,845

Expenditures

Persons w/ Intellectual and Developmental Disabilities	\$32,281,279
Adults with Mental Illness	13,684,477
Children with Mental Illness	3,744,571
Board/Administration	4,053,811
Older Adults	124,285
Other	<u>1,688,932</u>
Total Expenditures	\$55,607,355

2021 PSYCHIATRIC INPATIENT SERVICES

Community Hospital

Admissions	546
Discharges	483
Days	5384
Average Length of Stay	9.97

State Hospital

Admissions	7
Discharges	8
Days	3251
Average Length of Stay	192.75

**Number of
Persons
Employed 207**

**Provider Contracts
\$ 36,039,906
(68% of Budget)**

MAIN LOCATIONS | CONTACT INFORMATION

Administrative Office

1420 Plaza Drive
 Petoskey, MI 49770
 (231) 347-7890
 TTY: Dial 711

NMRE Region



- AuSable Valley
- Centra Wellness
- North Country
- Northeast
- Northern Lakes

Emmet County

1420 Plaza Drive
 Petoskey, MI 49770
 (231) 347-6701

Charlevoix County

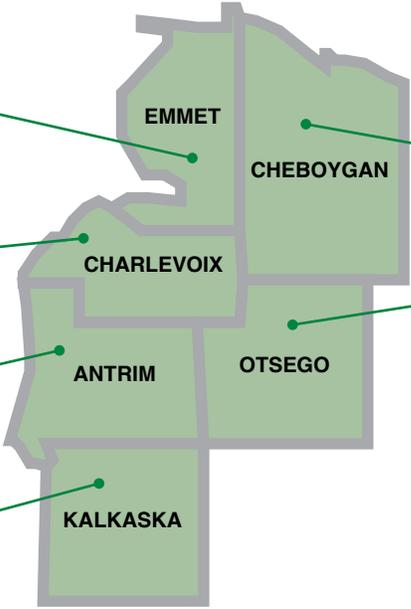
6250 M-66 North
 Charlevoix, MI 49720
 (231) 547-5885

Antrim County

203 E. Cayuga
 Bellaire, MI 49615
 (231) 533-8619

Kalkaska County

625 Courthouse Drive
 Kalkaska, MI 49646
 (231) 258-5133



Cheboygan County

825 S. Huron, Suite 4
 Cheboygan, MI 49721
 (231) 627-5627

Otsego County

800 Livingston Blvd.
 Gaylord, MI 49735
 (989) 732-7558
 (989) 732-6292



ACCESS **877-470-7130**
 WARM LINE **877-470-7130**
 CRISIS LINE **877-470-4668**

PRIORITY POPULATIONS SERVED

NCCMH is contracted by the Michigan Department of Health and Human Services ([MDHHS](#)) as a Community Mental Health Services Program (CMHSP). In this role, defined by the Michigan Mental Health Code, NCCMH provides and manages services for adults with serious mental illness, children with severe emotional disturbance, individuals with intellectual and developmental disabilities, and individuals with a co-occurring substance use disorder in Antrim, Charlevoix, Cheboygan, Emmet, Kalkaska, and Otsego counties. There are 46 CMHSPs in Michigan.

NCCMH is a member of the 21-county Northern Michigan Regional Entity ([NMRE](#)). The NMRE is one of ten Prepaid Inpatient Health Plans (PIHPs) in the state of Michigan that manage Medicaid funding for behavioral health and substance use disorder services for special populations. The NMRE is jointly owned by its member CMHSPs. See [nmre.org](#) for more information.

Funding for this publication was provided by the Michigan Department of Health and Human Services