

# The Michigan Department of Health and Human Services

- The River of Opportunity
- New way to structure government that puts people first
- Efficient, effective, and accountable government that collaborates to provide good service
- Builds on the Pathways to Potential Program, placing caseworkers in schools so they can focus on the whole person/family
- EO 2015-4: Creates Michigan Department of Health and Human Services (MDHHS)

# MDHHS Principles

- Interrupt generational poverty and support families and individuals on their road to self-sufficiency
- Ensure the Safety, well-being and permanency of the children in our care and the safety of the elderly and adults in our care
- Improve the health of Michiganders in a cost effective manner

# MDHHS Principles

- Treat each person as a whole person with respect
- Deliver services in a smarter way with less fragmentation
- Support dignity in all stages of life
- Improve program outcomes through integration and coordination
- Self-determination: Customers will have a voice in how their own services are provided.

# How Could the River of Opportunity Help a Child?

## Care coordination/Collaboration

- Family with two children a 12 year old girl and 14 year old boy.
- Both experienced significant family abuse, loss and trauma, Child Protective Services removed both children and placed them in foster care in separate homes.
- The children experienced severe Anxiety, Post Traumatic Stress Disorder, Depression and school avoidance, Substance Abuse Disorder and behavioral issues.
- Addressing the needs of this family can easily involve multiple case workers responsible for programs such as CMH Home Based, Psychiatric, Respite, Juvenile Court, School Special Education, Foster Care, Child Protective Services and Psychiatric Services.
- Case workers could represent different treatment/case plans and goals with no primary case worker responsible for coordinating care across courts, juvenile justice, CMH and other systems.
- Collaboration is crucial to provide an intensive level of care to maintain the children in the community in the least restrictive setting with ongoing planning for permanency in the community while maintaining the sibling relationship.

# Focus on Children

## **CHILDREN**

- Ensure children are protected and supported on their path to adulthood.
- Combining children's services into one agency allows for increased coordination
- Remove barriers and enhance opportunities to help children.

# Adults and Seniors

## **AGING AND ADULT SERVICES**

- Currently, services to senior citizens and person with disabilities are spread over multiple programs and departments.
- By creating Aging and Adult Services area, we can increase program collaboration to help ensure citizens are getting the services that best fit their needs.

# Service Delivery

## **SERVICE DELIVERY—COMMUNITY OPERATIONS**

- Build on a strong service delivery network across the state to ensure greater ease in providing customers with the services and supports they need to be healthy, safe and productive.

# Health Services and Family Support

## **HEALTH SERVICES AND FAMILY SUPPORT**

- The Medicaid program has been enhanced to better focus on health outcomes through the Healthy Michigan Plan.
- Providing a comprehensive approach to health care through integration.

# Population Health and Community Services

## **POPULATION HEALTH AND COMMUNITY SERVICES**

- Increased coordination and collaboration of direct services programming in communities will allow for improving health indicators.
- We can lower health care costs by better focusing prevention strategies where citizens live and work.

# Other Key Areas

**OPERATIONS & SUPPORT**

**INSPECTOR GENERAL**

**LEGAL**

**POLICY**

**COMMUNICATIONS**

**LEGISLATIVE**

# Employee and Stakeholder Engagement

Key components to the success of the Michigan Department of Health and Human Services will be employee engagement and stakeholder engagement.

- Seeking feedback from employees across the state to get their thoughts on better aligning services moving forward. This involves staff at local offices as well as central office operations.
- Stakeholder groups will continue to be engaged in discussions to better identify opportunities for success.

# Executive Order 2015-4

## Department of Health and Human Services

<i>Fiscal Year 2015 Authorized Funding</i>		(in millions)
<b>GF/GP</b>		\$ 4,235.2
<b>Federal</b>		\$ 17,109.0
<b>Other Funds:</b>		
Private		\$ 147.3
Local		\$ 260.5
State Restricted		\$ 2,187.6
<b>Total DHHS</b>		\$ 23,939.6
Total FTEs	15,870	

# Federal Programs

<b>PROGRAM</b>	<b>DCH</b>	<b>DHS</b>	<b>TOTAL</b>
Health & Human Services	12,026,014,200	1,521,744,973	<b>13,547,759,173</b>
U.S. Department of Agriculture	216,722,000	2,941,296,183	<b>3,158,018,183</b>
Department of Education	275,288	111,980,468	<b>112,255,756</b>
Social Security Administration		80,173,516	<b>80,173,516</b>
Department of Justice	21,248,500	9,066,561	<b>30,315,061</b>
Administration for Children/Families		27,979,201	<b>27,979,201</b>
Housing & Urban Development	11,271,500	1,739,213	<b>13,010,713</b>
Corporation for National & Community Service		8,638,500	<b>8,638,500</b>
Department of Labor	3,663,500		<b>3,663,500</b>
Environmental Protection Agency	936,700		<b>936,700</b>
Department of the Interior	300,000		<b>300,000</b>
Department Homeland Security	100,000		<b>100,000</b>