



Funding Available to Expand First Episode Psychosis Services in Michigan

Funding Opportunity

Network180 has received grant funding for implementation of First Episode Psychosis (FEP) services for the state of Michigan, through a contract with the Michigan Department of Health and Human Services. Additional Grant funding is now available for FY 2024 and subsequent years. This additional funding is specifically for expanding the service area in Michigan.

Current programs are established in Kent County (Network180), Lansing/East Lansing (Community Mental health Authority of Clinton, Eaton, and Ingham Counties), Oakland County (Easter Seals Michigan), Wayne County (Hegira Health) and Kalamazoo County (Integrated Services of Kalamazoo). Applications to initiate programs outside of these established service areas will be considered. While this statement shall not be assumed as guarantee of continued funding, we anticipate continued funding for this service through Federal Mental Health Block Grant (MHBG) and other sources of revenue.

General Information

Network180, a governmental authority, located at 790 Fuller Avenue, NE Grand Rapids, Michigan, 4950/. Network180 and the Michigan Department of Health and Human Services have established a contractual relationship where Network180 is a recipient of Michigan's 10% set aside of Mental Health Block Grant Funds. Network180 seeks to establish subawards to fulfill its responsibly under the grant award.

The Network180 fiscal year begins October 1. The contract term for this application is three months beginning in July 2024 and is eligible for renewal each fiscal year (October 1 – September 30).

It is the intent of Network180 to award one new contract through this application process, however, Network180 reserves the right not to award contracts for FEP services.

Interested organizations must submit this application no later than May 31, 2024, at 12:00pm (noon) Eastern Standard Time. Applicants must email their completed application and all supporting documentation to Anne Ellermets at Anne.Ellermets@network180.org All application information must be contained in one email, with attachments easily identifiable.

Application & Workshop Information

Communication between Network180 staff and interested organizations will remain open during the funding process. The application will be thoroughly reviewed at two different General Information workshops scheduled on Tuesday, May 21, 2024, from 1:30 pm to 3:30 pm and Thursday, May 23, 2024, from 1:30 pm to 3:00 pm. The same information will be provided at each session. Email Anne Ellermets at Anne.Ellermets@network180.org to obtain the virtual meeting link. The application is due May 31, 2024, at 12:00 pm.

Information on First Episode Psychosis Services

It is estimated that 10 per 100,000 individuals experience their first episode of psychosis annually. Early intervention during an individual's course of their experiences of psychosis can alter the course of the illness, enabling individuals to function more fully and participate in family and the community. In 2008 the National Institute of Mental Health began a research initiative, Recovery After an Initial Schizophrenia Episode (RAISE), to develop, test and implement Coordinated Specialty Care (CSC) for individuals who recently experienced their first episode of psychosis. Initial and subsequent outcomes of the initiative continue to support the efficacy of the model of care.

In 2014, following the conclusion of the RAISE research project, President Obama directed that the Substance Abuse and Mental Health Services Administration (SAMHSA) require that five (5) percent of their Mental Health Block Grant (MHBG) funding be allocated to support "evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders." Funding was first allocated in the state of Michigan beginning July 1, 2014. Funding has continued to be renewed each fiscal year since that time. Additionally, effective in mid-fiscal year 2016, funding was increased to equate to ten (10) percent of the MHBG. SAMSHA has further directed that intervention be focused only on the models of care used in RAISE.

Coordinated Specialty Care programs (CSC) have been proven effective treatment for first episode psychosis (FEP) as early intervention services for psychosis can improve symptoms and restore functioning that is superior to the usual care. Coordinated Specialty Care is a team-based multi-aspect approach to treating FEP. Components of CSC include assertive case management, individual/group psychotherapy, supported employment and education services, family education and support, and psychopharmacologic treatment and monitoring. At its base, CSC is recovery-oriented and collaborative in nature.

NAVIGATE is a CSC treatment model developed by the RAISE Early Treatment Program research team. Contracted teams will be trained in the NAVIGATE model and will then implement the program within their geographical area. A team of 4-6 clinicians fulfill key roles in implementation of this model. Roles include Project Director, Supported Employment/Education Specialist, Individual Resilience Therapist, Family

Therapist, Psychiatrist/Prescriber, Nurse/Care Manager, Peer, and Family Peer Partner Case Management functions may be necessary, though not part of the prescribed treatment model, and are typically performed by the members of the team. The target population is individuals aged 15-30 who have experienced FEP within the previous 18 months.

Implementation of the program will include education and development of referral sources; education, recruitment, and enrollment of program participants; delivery of services; ongoing consultation and training from NAVIGATE trainers; and work towards development of funding sources or structures independent of grant funding.

It is anticipated that most program participants will initially have commercial insurance benefits or no benefits. Most program components are not included as a part of commercial insurance benefits. The project will require teams require teams to ensure enrollment in benefits for which an individual may be eligible, and paneling of eligible disciplines for that insurer. Reimbursement by commercial insurances or other third-party payers for eligible services provided through this program must be sought and maximized by service grantees, in support of the state of Michigan's focus on sustainability of the program.

Navigate Staffing and Training

The full capacity for one team is a minimum of thirty individuals receiving services. Below is an outline of the expected staffing for a full team. The first six (6) months most staffing is lower as program participants are recruited, and enrollment is built. Note that the Project Director's FTE begins at the expected ongoing level as the role of that individual includes outreach, education, and establishment of referral sources. Network180 staff will work individually with each interested organization to determine suggested staffing based on the proposed service area and organization's current staffing capacity.

Suggested Staffing:

<u>Position</u>	<u>Months 1-6</u>	<u>Months 7-12</u>
*Project Director/Family Therapist	1.0 FTE	1.0 FTE
Supported Employment/ Education Specialist	0.5 FTE	0.75 to 1.0 FTE
Individual Resilience Therapist	0.5 FTE	1.0 FTE
Psychiatrist/Prescriber	0.125 FTE	0.25 FTE
Peer Services	0.25 FTE	0.5 FTE
Nurse/Care Manager	0.3 FTE	0.3 FTE
Family Peer Partner	0.2 FTE	0.4 FTE

It is typical for the Project Director and Family Therapist positions to be filled by the same individual, i.e., one professional fulfilling both roles.

All team members will receive extensive training to be certified and maintain certification in the NAVIGATE model of care under the responsibility of ETCH, LLC trainers. All staff will participate in bi-monthly consultation calls with statewide NAVIGATE staff.

Additional Resources on First Episode Psychosis services

- National Institute on Mental Health's (NIMH) website on RAISE <https://www.nimh.nih.gov/health/topics/schizophrenia/raise/index.shtml>
- "Evidence-Based Treatments for First Episode Psychosis: Components of Coordinated Specialty Care," Heinssen, Robert K., Golstein, Amy B., Azrin, Susan T. [nimh-white-paper-csc-for-fep.pdf \(nih.gov\)](https://www.nimh.nih.gov/white-paper-csc-for-fep.pdf)
- Psychosis-Risk and Early Psychosis Program Network (PEPPNET) website <https://med.stanford.edu/peppnet.html>
- Michigan Minds Empowered website www.michiganminds.org
- NAVIGATE website <http://navigateconsultants.org/>

Timeline

May 7, 2024	Application materials released.
May 21, 2024	General Information Workshop will be held virtually from 1:30 pm to 3:00 pm. The same material will be covered at both sessions.
May 23, 2024	General Information Workshop will be held virtually from 8:30 am to 10:00 am.
May 31, 2024	Application is due to Network180 by 12:00 p.m. (noon)
June 2024	Network180 staff and organizations that have applied will continue to communicate as needed during this period to determine an organization's capacity to provide FEP. Notification of awards will be completed.
July 2024	Pending receipt of contract from MDHHS, contracts sent to award Grantees.
September 2024	Training for new teams on the model of care and implementation of services.