

<b>SUBJECT</b> Community Living – Releasing Individuals from Institutions (State Facility)		<b>CHAPTER</b> 05	<b>SECTION</b> 02	<b>SUBJECT</b> 02
<b>CHAPTER</b> Clinical Practice Guidelines		<b>SECTION</b> Care Delivery		
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**I. APPLICATION:**

- PIHP Board     
  CMH Providers     
  SUD Providers  
 PIHP Staff     
  CMH Subcontractors

**II. POLICY STATEMENT:**

It shall be the policy of the Region 10 PIHP that for persons with qualifying conditions who are discharged from State Institutions/Facilities, the services, programs and activities they receive within the PIHP network be provided in the most integrated setting appropriate to their needs. Such a setting is one that enables such individuals with disabilities to interact with nondisabled persons to the fullest extent possible.

**III. DEFINITIONS:**

**Community:** Where people under a local government structure come together and establish a common identity and develop shared interests and resources.

**Inclusion:** Recognizing and accepting people with mental health needs as valued members of their community.

**Integration:** Enabling mental health service recipients to become or continue to be participants and integral members of their community.

**State Facility:** A State Facility is a center or a hospital operated by the Michigan Department of Community Health.

**IV. STANDARDS:**

- A. The PIHP shall eliminate any eligibility criteria for participation in a PIHP (residential and other community-based) program, activity and service that screens out or tends to screen out persons with disabilities, unless it can establish that the requirements are necessary for the provision of the service, program or entity.
- B. The PIHP may adopt legitimate safety requirements necessary for safe operations if such are based on real risks and not on stereotypes or generalizations about individuals with disabilities.
- C. The PIHP must reasonably modify its policies, practices, or procedures to avoid discrimination, unless it can demonstrate that a particular modification would fundamentally alter the nature of its service, program, or activity.
- D. Provider programs with the PIHP network will operate in adherence to Medicaid Managed Specialty Supports and Service Contract Attachment P.6.8.2.1 (Inclusion Practice Guideline), Contract Attachment P.6.8.2.2 (Housing Practice Guideline), and Contract Attachment P.6.8.2.3 (Consumerism Practice Guideline).

**V. PROCEDURES:**

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Community Living – Releasing Individuals from Institutions (State Facility)	05	02	02
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**PIHP Director**

1. Ensures all provider network programs daily operational task work consistent with the Title II integration mandate of the Americans with Disabilities Act.
2. Develops a provider network performance indicator system to periodically monitor provider network compliance in this area and MDCH Master Contract Attachments as specified.

VI. REFERENCES:

28 CFR: 35.130(d)

28 CFR 35, App. B at 673

Medicaid Managed Specialty Supports and Service Contract Attachment P.6.8.2.1

Medicaid Managed Specialty Supports and Service Contract Attachment P.6.8.2.2

Medicaid Managed Specialty Supports and Service Contract Attachment P.6.8.2.3

Michigan Mental Health Code

[www.ada.gov/olmstead/index.htm](http://www.ada.gov/olmstead/index.htm)

VII. EXHIBITS: N/A