

OASIS · AT A GLANCE

Michigan's PIHP maze

Why the county line you live on decides whether your autistic adult gets day programming, crisis support, and respite, or waits years for any of it.

BY JIM PALASTY · 11 MIN READ · ADULT AUTISM SERVICES

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PIHP REGIONS

Ten sets of rules. One state.

How it works

THREE STEPS

STEP 1

State Medicaid funding



STEP 2

10 PIHPs manage the funds



STEP 3

CMH boards deliver services

The ten PIHP regions

Northeast	Alpena, Montmorency, Presque Isle
Mackinac Straits	Mackinac, Luce, Schoolcraft
Northwest	Emmet, Charlevoix, Antrim
Northpointe	Benzie, Manistee, Mason, Wexford
Mid-Michigan	Eaton, Clinton, Gratiot, Ionia, Montcalm
Genesee Health Plan	Genesee, Lapeer, Sanilac, Huron, Tuscola
Mid-Central (C4)	Saginaw, Midland, Bay
Catchment 5	Ingham, Clinton
Southwest (C6)	Kalamazoo, Van Buren, Allegan, Barry, Calhoun
Southeast (C7)	Wayne, Oakland, Macomb, Livingston, Monroe, Lenawee, Washtenaw

THE COUNTY LOTTERY

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Darnell's family got twelve hours of weekly day programming in Southwest Catchment. They moved fifty miles to rural Eaton County, transferred to Mid-Michigan PIHP, and the slot evaporated. Same income. Same kid. Closed waitlist.

SAME STATE. DIFFERENT RULES. BY DESIGN.

What matters, at a glance

MICHIGAN SPECIFIC

Eligibility

One region's "medical necessity" is another region's flat denial. The same documentation can work in Kalamazoo and fail in Lansing.

Day program slots

Robust networks in some regions. Closed waitlists in others that stretch for years.

Crisis response

Mobile teams in some regions. A single clinic forty minutes away in others. Response time can stretch from minutes to hours depending on your postal code.

Respite reimbursement

Hourly rates shift by region, which changes who is willing to work, how often, and how consistently. The same respite hour pays differently in Kalamazoo than it does in Bay City.

Waitlist

Months in some regions. Closed entirely in others. Habilitation Supports Waiver access varies that much.

Case managers

Independent hiring by each region. Consistency, caseload, and competence vary accordingly.

BRING THESE · CHECK AS YOU GO

- | | |
|---|--|
| ☐ Medicaid card or proof of coverage | ☐ Diagnosis paperwork, recent assessments |
| ☐ School evaluations (IEPs, reports) | ☐ Psychiatric medications and dosing |
| ☐ Therapy reports and behavioral data | ☐ Private insurance information |
| ☐ Log of crisis episodes and ER visits | ☐ Two copies of everything |

YOUR MOVE

When CMH says no, here is what you do

- 1 Start with your case manager.
- 2 If stalled, the CMH supervisor.
- 3 Stonewalled? The CMH director.
- 4 Contact your PIHP regional office.
- 5 File a state complaint through MDHHS.
- 6 If the system fails you, get a lawyer.

Most problems get solved at steps two or three. You just have to know the ladder exists and be willing to climb it.

RESOURCES NAMED IN THIS POST

cmham.org · <https://cmham.org>

Informational only. Not legal or medical advice. Verify current program rules before acting.

ABOUT THE AUTHOR



Jim Palasty

Jim Palasty is the founder of OASIS for Autism and a single father of an adult autistic daughter in Michigan.