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Chapter: **SUBSTANCE USE**  
Title: **SUBSTANCE USE PROVIDER MANUAL**

Prior Approval Date: 8/1/02  
Current Approval Date:

Approved by: *Draici Smith, MA* 11-18-2024  
Chief Executive Officer Date

Approved by: *Alba L. ...* 11/20/2024  
Deputy County Executive, Macomb County Date

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**I. Abstract**

This policy establishes the incorporation of the Macomb County Community Mental Health Substance Use Disorder (MCCMH-SUD) Provider Manual into the MCCMH MCO Policy Manual.

**II. Application**

This policy shall apply to all substance use contract providers of the MCCMH Board.

**III. Policy**

It is the policy of the MCCMH Board to incorporate the MCCMH-SUD Provider Manual by reference into the MCCMH MCO Policy Manual.

**IV. Definitions**

A. None.

**V. Standards**

A. The MCCMH-SUD Office shall maintain a copy of the MCCM-SUD Provider Manual.

**VI. Procedures**

A. None.

**VII. References / Legal Authority**

A. None.

**MCCMH MCO Policy 11-001**  
**SUBSTANCE USE PROVIDER MANUAL**  
Date: 10/7/2024

**VIII. Exhibit**

- A. The Substance Use Provider Manual shall be available in the MCCMH-SUD Office.