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**HAS COMPLETED:**


**The Michigan Center for Clinical Systems Improvement (Mi-CCSI) Webinar  
Complex Case Management Case Review**

**Topic of the Case Review Session:** \_\_\_\_\_

**Participation mode (live or recorded)** \_\_\_\_\_

**Date Participated:** \_\_\_\_\_

**Participation in this session can be used for 1.5 Continued Learning Activity**

  
PROGRAM DIRECTOR, MI-CCSI

**LOCATION:**  
**GRAND RAPIDS MASONIC CENTER**  
**233 EAST FULTON STREET**  
**GRAND RAPIDS, MI 49503**