


LAPEER COUNTY COMMUNITY MENTAL HEALTH**Date Issued 03/13/2009****Date Revised 01/12/12; 08/25/15; 07/02/19; 11/16/22**

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| CHAPTER Service Delivery | CHAPTER 02 | SECTION 003 | SUBJECT 30 |
| SECTION Access to Services | | DESCRIPTION Intake Procedures | |
| WRITTEN BY Lauren J. Emmons, ACSW, Supervisor | REVISED BY Brooke Sankiewicz, LMSW, CAADC Adult Clinical Director | | AUTHORIZED BY  Lauren Emmons, ACSW CEO |

APPLICATION:

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| <input checked="" type="checkbox"/> CMH Staff | <input type="checkbox"/> Board Members | <input type="checkbox"/> Provider Network | <input checked="" type="checkbox"/> Employment Services Providers |
| <input type="checkbox"/> Employment Services Provider Agencies | <input checked="" type="checkbox"/> Independent Contractors | <input checked="" type="checkbox"/> Students | <input checked="" type="checkbox"/> Interns |
| <input checked="" type="checkbox"/> Volunteers | <input checked="" type="checkbox"/> Persons Served | | |

POLICY:

Lapeer County Community Mental Health (LCCMH) has intake procedures to assure compliance with all regulations relating to reporting and informed consent as set forth in the Michigan Mental Health Code and the Michigan Department of Health and Human Services (MDHHS) Administrative Rules.

STANDARDS:

- A. The Mental Health Code and MDHHS Administrative Rules require Community Mental Health to define the procedures to be used to report certain necessary non-identifying information to the Department of Health and Human Services and to obtain informed consent of persons served (or their guardian) to release the information.
- B. Consent to participate in treatment must be obtained by the intake clinician from the person served or their guardian in the electronic health record (EHR). The intake clinician explains the purpose, benefits, and risks of treatment.

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- C. LCCMH offers walk-in intakes for adults seeking services, Monday-Friday 9am-3pm.
- D. Parents and/or guardians seeking services for children/adolescents are provided with an intake appointment following their Access screening. Intakes are provided through the Children's Department.
- E. Individuals requesting services are offered an intake appointment within 14 days of Access screening.

PROCEDURES:

- A. Following an initial over the phone assessment, Access provides referral information to LCCMH staff along with preferred appointment date and time.
- B. As the individual enters the agency, they are to check in with the front desk support staff, and are asked to complete a "Personal Information Form" (LCCMH Form #93 for adults or Form #94 for children), an "Insurance Information Form" (LCCMH Form #295 for adults or Form #294 for children) and Patient Health Questionnaire (PHQ-9 for adults or PHQ-A for adolescents).
- C. The front desk support staff verifies insurance. If a fee assessment is needed the person served meets with the Finance Department designee.
 - 1. Primary source verification of the person's financial resources and insurance is obtained by the Finance Department designee.
 - 2. The individual is asked to apply for Medicaid. If they are denied, a letter from MDHHS must be submitted to the Finance Department.
 - 3. An "Ability to Pay Determination" is established. See Policy 06.003.130 Ability to Pay Determination for procedures.
The individual is made aware of any financial cost associated with treatment.
 - 4. The information is entered into the EHR.
- D. The individual meets with the intake clinician to complete a Biopsychosocial (BPS) Assessment to assess their need for services. The intake clinician completes and

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explains all the required initial consent documentation found on the “Procedure for Documentation Needed and Timeframes” LCCMH Form #339.

- E. The individual is notified of the rights guaranteed by Chapter 7 of the Michigan Mental Health Code. A complete copy of Chapters 7 and 7a is available for review if requested by the individual or applicant for services (see Section 706 of the Michigan Mental Health Code). The Orientation Checklist Form #288 is used to obtain acknowledgement of the individual having received information about brochures such as; “Your Rights When You Receive Mental Health Services” and the “Consumer Bill of Rights”.
- F. The clinical supervisor of the Intake Department approves the initial BPS Assessment to admit person served in the appropriate department. The case is assigned to a primary case holder to develop an Individual Plan of Service (IPOS) within 14 days of the BPS.
- G. The Primary Case Holder continues with the Person Centered Planning Process.
- H. Michigan Mental Health Code permits individuals ages 14 and older to request an intake appointment without consent or knowledge of parent/guardian.
- I. If individual does not show for their scheduled intake appointment, support staff provides an initial outreach call to reschedule. If the individual is not reached, at least two additional outreach attempts are provided within 30 days by LCCMH staff. If the individual does not follow through with intake, an Adverse Benefit Determination letter and Discharge Summary report is completed.

REFERENCES:

Chapter 7 of the Michigan Mental Health Code
Michigan Department of Health and Human Services Administrative Rules

BS:mgr

This policy supersedes
#03/09006 dated 03/13/2009
