Mental Health & Substance Abuse Services

Services Overview
The Adult Behavioral Health (ABH) Department provides Mental Health and Substance Abuse services to clients who meet criteria for either Substance Abuse (SA) or dependence, and/or for Severe Persistent Mental Illness (SPMI). Services include case management, individual or group therapy, and psychiatric services when deemed appropriate.

Service Hours
- Services are available from Monday-Thursday 8:30 am to 9:00 pm and Friday 8:30 am to 5 pm.
- Intakes are conducted daily with Tuesday and Thursday being "Open Access" days or walk in days where no appointment is necessary.
- Groups vary in length from 1.5 hours for outpatient to 4 hours for intensive outpatient services (IOP).
- Individual therapy, case management and psychiatric services scheduled based on Person-Centered plan.

Emergency Care Service and/or After Hour Emergency Assistance
- For psychiatric emergency services during business hours, call 1-734-785-7701.
- For psychiatric emergency services after business hours, call 1-866-690-8257.

Types of Services Provided
- Substance Abuse and mental health services can include individual therapy, group therapy, peer recovery coach supports, and nursing services. Services may vary in duration and intensity in accordance to the individualized treatment plan goals.
- At intake, eligibility is determined if they meet criteria for Substance Abuse (SA) and/or Severe Persistent Mental Illness (SPMI).

Services Association
- Reports to Program Manager or in her/his absence to the Director of Adult Behavioral Health Department.

Eligibility Requirements
- Must be 18 years and older.
**Condition of Services**

- As a partner of the team, we require a Case Manager to be involved with every client diagnosed with primary mental health symptoms. The frequency of these contacts should be individualized but not to exceed less than once every 90 days.

- If a client goes a prolonged period with no contact with their Case Manager, three outreach calls are made within a 2-week period to attempt to schedule an appointment. If there is no response, then a 12-day letter is sent informing the client that the case will be closed should their worker does not hear from him/her. The exception to the requirement of seeing a Case Manager is for those with private insurance.

- Treatment goals are to stabilize the client, which is ideally 6 months to one year of treatment. After this period of treatment, the client is recommended for the Primary Care Physician (PCP) or another facility to provide psychiatric services.

**Fee for Service Payment & Insurance Coverage Structure**

- SEMCA distributes funds for Substance Abuse (SA) services to the Medicaid and uninsured population. Third party and self-pay are also accepted for those seeking Substance Abuse services.

- All Mental Health services are covered by private insurance, Medicaid and/or Medicare. For those who are not eligible for Medicaid/Medicare or other funding available, we accept self-pay.

**Referral Process & Requirements**

**Referral Process**

- Referrals for Mental Health (MH) services are screened by clinical therapists for eligibility and need of care services. Must meet SPMI criteria for eligibility of Mental Health services.

- Referrals for Substance Abuse are screened by clinical therapists for eligibility and need of care services. Must meet criteria for Substance Abuse or dependence.

**Requirements**

- Must be 18 years and older.

- Meet criteria for Substance Abuse (SA) and/or Severe Persistent Mental Illness (SPMI) conditions.
Common Abbreviations

- **ABH** - Adult Behavioral Health
- **IOP** - Intensive Outpatient.
- **OP** - Outpatient.
- **PCP** - Primary care physician
- **SA** - Substance Abuse.
- **SPMI** - Severe Persistent Mental Illness.

Forms

- Not listed at this time.
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*New Client Intake Process*

Client is referred to The Guidance Center (TGC) Mental Health & Substance Abuse unit.

Client is referred to the initial intake process and screened by a clinical therapist for eligibility determination.

**YES**

*Is the client 18 years or older & meet eligibility criteria for Substance Abuse (SA) and/or Severe Persistent Mental Illness (SPMI)?*

**NO**

The client must meet the eligibility requirements to receive treatment & services.

Customer referred to another Mental Health organization for services & case is closed.

**AND**

*Was the client referred from SEMCA, CareLink, or a Private Insurance carrier that covers SA and/or SPMI?*

**NO**

The client may have to pay directly for services.

**YES**

Appointment made for initial visit & workup is done to determine type of services needed for client.

End *New Client Intake Process*
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New Client Case Management/Therapy Treatment Process

New client receives case management and/or therapy workup to determine “Plan of Care.”

Client receives treatment and/or other supportive services based on “Person Centered” plan.

Substance Abuse (SA) services are time limited for groups & vary for individual therapy according to treatment plan & goals.

After the treatment period, the client recommended to Primary Care Physician (PCP) or to another facility for psychiatric care services.

Outpatient services for groups are 1.5 hours and up to 4 hours for Intensive Outpatient (IOP) services.

End

New Client Case Management/Therapy Treatment Process

Individual therapy, case management & psychiatric services are by appointment.
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**Client Discharge or Discontinuation of Services Process**

Case Manager, therapist and/or intake specialist calls client regarding "No-show" appointments.

**Does client has sufficient reason for missing scheduled appointment(s)?**

- **NO**
  - Client receives three (3) outreach calls to reschedule an appointment.
  - If no response from the client, then a 12th day letter sent to client.
  - If no response, then the client’s case is closed & explanation of termination is documented in client’s chart. Termination of Services letter sent to client.

- **YES**
  - Case Manager and/or therapist meet with client, review needs & update client’s treatment plan.
  - Continue to provide therapy and/or treatment services to client, as needed.
  - Quarterly review of the treatment goals are conducted and discharge planning will begin when the client maintains stability and goals have been achieved.

**End**

**Discharge of Client Treatment Services.**