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Owner:	Tashika Lee: Outreach	
	coordinator	
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References:		

Job Description - Intake Specialist

JOB TITLE: Intake Specialist

I. General Summary

Under supervision of the OTP Clinical Administrator provides front line intake services to clients coming in to the OTP and mental health programs. This position is accountable for reviewing eligibility and program expectations prior to clients meeting with their assigned clinical workers. This position requires a thorough understanding of the clinic's philosophy of treatment, admission process and criteria. A basic knowledge of substance abuse and dual diagnosis is essential. The individual is responsible for ensuring that clinical and administrative intake services are provided for patients.

II. Principle Responsibilities and Tasks

- Checks the electronic verification system (EVS) system to verify current health insurance coverage. Assists individuals without health insurance to apply.
- Calls Value Options to speak with live representative to prevent dual registration in OTP, check eligibility status to prevent dual registration and approval of admission to OTP.
- Enter Value Options authorizations for all services sought. Ensure approval of authorization approvals and track denials.
- Initiates the intake assessment and treatment plan.
- Explains program to patient and ensures patient comprehends informed consent. This is too include:
- Note patient's learning style and limitations.
- State specific requirements, program policies and the need to report any suspected child abuse and neglect forms of abuse.
- Patient has been involved in collaborative treatment options to include their goals for treatment. Patient signature should be included for acknowledgement verification.
- · Medication assisted treatment of methadone and/or suboxone, advantages, disadvantages, side effects
- · Signs/symptoms of overdose / Managing withdrawal symptoms
- Importance of treatment compliance and goal of finding a stable dosage in coordination with counseling follow up
- Resources for comorbidities, dual diagnosis if needed.
- Patients' rights and responsibilities.
- All program options available to patient, his/her rights and responsibilities in the program.
- The grievance and appeals procedures.
- Ways in which input is given regarding the quality of care, achievement of outcomes, and satisfaction of the person served.

- The organization's services and activities; expectations; hours of operations; access to after-hour services; code of ethics; and confidentiality policy.
- Any and all financial obligations, fees, and financial arrangements for services provided by the organization.
- Familiarize patient with the premises and emergency equipment.
- Program's policies regarding the use of seclusion or restraint, use of tobacco products, illicit or licit drugs brought into the program, and weapons brought into the program.
- Identify the person responsible for coordinating services for the patient.
- Provide a Patient Handbook explaining the program, expectations, rules, rights, and explanation of behaviors or attitudes that may lead to the loss of rights or privileges.
- Educate regarding advance directives.
- Identify the purpose of the assessment and the process.
- How the individual plan will be developed and the person's participation in it.
- Transition criteria and procedures.
- · Common misunderstandings regarding opioid treatment.
- Explain infectious disease testing for HIV, syphilis and TB.
- Discuss drug safety issues and requirement for a lock box and return of take home bottles.
- Voluntary participation in the program.
- Compliance with Federal Confidentiality Regulations.
- The risk concerning all treatment procedures including the use of opioid agonist medication.
- Overall goal of opioid agonist medication therapy is improved quality of life and freedom of illicit drugs.
- All new admits and readmits will be oriented; if possible, the first day of treatment. In all cases, orientation must take place within seven working days of admission to treatment.
- Ensure that all demographic, and insurance eligibility information is obtained and verified prior to the patient being admitted. In case the Patient is admitted at another facility, the Financial Counselor will make sure:
- The patient will contact his current Clinic and inform them of his/her last day of medication with them.
- Request that a Clinical Counselor will submit a completed DHMH Discharge Summary form to his current Medicaid MCO.
- Ensure that all appropriate signatures and demographics are obtained prior to the patient being admitted.
- Inform any patients who have lost their Medicaid coverage, and inform them of their weekly responsibility to pay each week.
- Check CRISP weekly for all existing clients regarding coordination of care and inform treatment team of findings.

I. Qualifications and Requirements

- LGSW required.
- Maintains a cooperative and positive attitude and approach to patients, staff and visitors.
- Employee is expected to perform all duties within their scheduled work week.
- Complies with State/Federal requirements.
- Ability to use electronic health record and most general office computer systems
- Effective written and verbal communication.

Attachments:	No Attachments		
	Approver	Date	
	Barbara Wahl: Business Operations Director	12/2015	