

Michigan Department of Corrections

Substance Use Referral - FAQ

What is an “Access Eligibility Screening”?

Access Eligibility Screenings determine “medical necessity” for Higher Levels of Care (HLOC) for substance use services. An individual in need of only (intensive) outpatient service does not require a screening and an agent should refer the individual directly to the substance use provider. The MDOC Substance Use Provider list can be found at <http://mdoc.oaklandchn.org>

Once the "Request for Access Screening" is submitted through the “MDOC Online Referral Form,” the individual is contacted to offer a phone or in-person Access Eligibility Screening within 24 hours. The screenings are completed by Oakland Community Health Network (OCHN) Access Screeners, who coordinate appointments based on the services that the individual qualifies for. Individuals are always permitted to choose their Substance Use Provider.

What services are considered a “Higher Level of Care (HLOC)”?

HLOC services include: Domiciliary Intensive Outpatient Services, Medication Assisted Treatment, Recovery Housing, Residential or Withdrawal Management.

What is a “Substance Use Assessment”?

Substance Use Assessments are conducted at the provider level. The assessment determines the nature of the substance use concern and provides a diagnosis, while developing treatment recommendations to address the diagnosis.

What to do if an individual appears to need immediate Higher Level of Care (HLOC) services?

If the agent believes that the individual is in immediate need of HLOC services, they can refer the individual to the Sober Support Unit (SSU) for immediate treatment, consideration and evaluation. A referral with the “Request for Access Screening” still needs to be submitted through the MDOC Online Referral Form. A flyer for the Sober Support Unit can be found at <http://mdoc.oaklandchn.org>

What happens if an individual is not submitted through the “MDOC Online Referral Form?”

Not submitting a referral through the “MDOC Online Referral Form” can delay treatment, as it prevents OCHN from contacting the individual to offer an Access Eligibility Screening, assist with care coordination and removal of barriers to treatment.

Can a referral be backdated on the “MDOC Online Referral Form”?

The referral date should reflect the current date and not be backdated.

Can a referral be submitted without a “Consent to Share Behavioral Health Information” or with verbal consent only?

A referral can be submitted without having obtained a signed consent. However, OCHN will not be able to share information with the agent without the signed consent. Verbal consent does not suffice to share information for substance use services.

The consent can still be obtained and submitted via email by the agent after the referral has been made. Additionally, an individual can sign a Release of Information at the Substance Use Provider, which will allow the provider to share necessary information with agents.

Instructions (MDOC Release of Information FAQ) on how to accurately complete the “Consent to Share Behavioral Health Information,” as well as the current version (MDOC Release of Information), can be found at <http://mdoc.oaklandchn.org> A consent that was not properly filled out can delay information sharing with the referral source.

Substance Use Referral Steps

1. Go to <http://mdoc.oaklandchn.org>
 - a. As alternative: www.oaklandchn.org and enter "MDOC" in the search box.
 - b. Select the search result "OCHN - MDOC Referral and Information Page."
2. Click on "MDOC Online Referral Form"



OCHN - MDOC Referral and Information Page

Welcome to OCHN's Michigan Department of Corrections (MDOC) information and referral page. All important documents associated with substance use services through the Oakland County public mental health system are located at this site.



(Please click the blue box above to complete the online referral form)

3. Select "Reason for Referral"
 - a. Request for Access Screening

Reason for Referral *

Individual's Demographic Information

Please enter all information pertaining to the individual below.

4. Fill out all mandatory fields marked with an asterisk (*) throughout online form.
5. Complete non-mandatory fields to provide additional information.
6. Additional comments: Provide information not captured in form.
7. If Consent to Share Behavioral Health Information was obtained, please attach under File Attachments.

Additional Comments *

Please provide any additional information not covered above.

Please attach the Consent to Share Behavioral Information (Release of Information)

File Attachments

Drag and drop files here or [browse files](#)

Send me a copy of my responses

Submit