

Great Rivers Behavioral Health Administrative Services Organization

Policy Title:	Individual Rights and Responsibilities	Policy No. 7002.02
Category:	Rights and Responsibilities	Date Adopted: 02/14/2021 Date Revised: 6/29/2021, 5/22/2023 Date Reviewed: 5/5/2021, 5/22/2023
Reference:	Washington Administrative Code (WAC) 246-341-0600; 182-538D-0680, or any successor Code of Federal Regulations (CFR) 438.100 (b)(2)(3) and (c) Washington State Department of Health (DOH); Washington State Health Care Authority (HCA) Contract NCQA Members' Rights and Responsibilities	

POLICY:

- 1.1. Individuals applying for, eligible for, or receiving Great Rivers Behavioral Health Administrative Services Organization (Great Rivers BH-ASO) services shall have the right to receive information in accordance with applicable federal and state laws that pertain to individuals' rights.
- 1.2. As an Administrative Services Organization, Great Rivers BH-ASO guarantees that each individual has the following rights:
 - 1.2.1. To information regarding the individual's behavioral health status.
 - 1.2.2. To receive all information regarding behavioral health treatment options including any alternative or self-administered treatment, in a culturally competent manner.
 - 1.2.3. To receive information about the risks, benefits, and consequences of behavioral health treatment (including the option of no treatment).
 - 1.2.4. To participate in decisions regarding his or her behavioral health care, including the right to refuse treatment and to express preferences about future treatment decisions.
 - 1.2.5. To be treated with respect and with due consideration for his or her dignity and privacy.
 - 1.2.6. To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
 - 1.2.7. To request and receive a copy of his or her medical records, and to request that they be amended or corrected, as specified in 45 CFR Part 164.
 - 1.2.8. To be free to exercise his or her rights and to ensure that to do so does not adversely affect the way the contractor treats the individual.

PROCEDURE:

- 2.1. All statements of individual rights shall incorporate the following:
 - 2.1.1. Great Rivers BH-ASO Rights and Responsibilities:
 - 2.1.1.1. A right to receive information about the organization, its services, its practitioners and providers, and member rights and responsibilities.
 - 2.1.1.2. A right to be treated with respect and recognition of their dignity and right to privacy.
 - 2.1.1.3. A right to participate with practitioners in making decisions about their health care.

- 2.1.1.4. A right to a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- 2.1.1.5. A right to voice complaints or appeals about the organization or the care it provides.
- 2.1.1.6. A right to make recommendations regarding the organization's member rights and responsibilities policy.
- 2.1.1.7. A responsibility to supply information (to the extent possible) that the organization and its practitioners and providers need in order to provide care.
- 2.1.1.8. A responsibility to follow plans and instructions for care that they have agreed to with their practitioners.
- 2.1.1.9. A responsibility to understand their health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.

- 2.1.2. Individual rights per WAC 246-341-0600:
 - 2.1.2.1. Receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age, type of illness or disability;
 - 2.1.2.2. Receive services that align with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care.
 - 2.1.2.3. Practice the religion of choice as long as the practice does not infringe on the rights and treatment of others or the treatment service. Individual participants have the right to refuse participation in any religious practice;
 - 2.1.2.4. Be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited English proficiency, and cultural differences;
 - 2.1.2.5. Be treated with respect with due consideration for individuals, dignity and privacy, except that staff may conduct reasonable searches to detect and prevent possession or use of contraband on the premises;
 - 2.1.2.6. Be free of any sexual harassment;
 - 2.1.2.7. Be free of exploitation including physical and financial exploitation;
 - 2.1.2.8. Have all clinical and personal information treated in accord with state and federal confidentiality regulations;
 - 2.1.2.9. Review your clinical record in the presence of the administrator or designee and be given an opportunity to request amendments or corrections;
 - 2.1.2.10. Receive a copy of BHA and Great Rivers BH-ASO grievance system procedures according to WAC 182-538C-110 upon request and to file a grievance with the agency, or BH-ASO, if applicable, if you believe your rights have been violated; and
 - 2.1.2.11. Submit a report to the Department of Health when you feel the agency has violated a WAC requirement regulating BHAs.

- 2.1.3. General rights apply to all people, regardless of whether a person is or is not a Medicaid recipient, include:

- 2.1.3.1. All applicable statutory and constitutional rights;
- 2.1.3.2. The participant rights provided under WAC 182-538D-0600; and
- 2.1.3.3. Applicable necessary supplemental accommodation services.
- 2.1.4. Each BHA providing services to Medicaid recipients must ensure an individual seeking or participating in behavioral health treatment services, or the person legally responsible for the individual, must be informed of their Medicaid rights at the time of admission and in a manner that is understandable to the individual or legally responsible person.
 - 2.1.4.1. Medicaid rights, per WAC 182-538D-0680, Individuals have the right to:
 - 2.1.4.1.1. Receive medically necessary behavioral health services;
 - 2.1.4.1.2. Receive the name, address, telephone number, and any languages offered other than English of providers in the catchment area;
 - 2.1.4.1.3. Receive information about the structure and operation of the BH-ASO, or other relevant funding source;
 - 2.1.4.1.4. Receive emergent or urgent care or crisis services;
 - 2.1.4.1.5. Receive post-stabilization services after you receive emergent or urgent care or crisis services that result in a hospitalization;
 - 2.1.4.1.6. Receive age and culturally-appropriate services;
 - 2.1.4.1.7. Be provided a certified interpreter and translated material at no cost to you;
 - 2.1.4.1.8. Receive information you request and help in the language or format of your choice;
 - 2.1.4.1.9. Have available treatment options and alternatives explained to you;
 - 2.1.4.1.10. Refuse any proposed treatment;
 - 2.1.4.1.11. Receive care that does not discriminate against you;
 - 2.1.4.1.12. Be free of any sexual exploitation or harassment;
 - 2.1.4.1.13. Receive an explanation of all medications prescribed and possible side effects;
 - 2.1.4.1.14. Make a mental health advance directive that states your choices and preferences for mental health care;
 - 2.1.4.1.15. Receive information about medical advance directives;
 - 2.1.4.1.16. Choose a behavioral health provider for yourself and your child (if your child is under 13 years of age);
 - 2.1.4.1.17. Change behavioral health providers at any time for any reason;

- 2.1.4.1.18. Request and receive a copy of your behavioral health treatment records. You will be told the cost for copying;
- 2.1.4.1.19. Be free from retaliation;
- 2.1.4.1.20. Request and receive policies and procedures of Great Rivers BH-ASO and Behavioral Health Agencies (BHA);
- 2.1.4.1.21. Receive the amount and duration of services you need;
- 2.1.4.1.22. Receive services in a barrier-free location (accessible);
- 2.1.4.1.23. Receive medically necessary services in accordance with the early periodic screening, diagnosis, and treatment (EPSDT) under WAC 182-534-0100, if you are twenty years of age or younger;
- 2.1.4.1.24. Receive enrollment notices, informational materials, materials related to grievances, appeals, and administrative hearings, and instructions materials relating to services provided, in an easily understood format and non-English language that is preferred;
- 2.1.4.1.25. Be treated with dignity, privacy, and respect, and to receive treatment options and alternatives in a manner that is appropriate to your condition;
- 2.1.4.1.26. Participate in decisions regarding individual's behavioral health including the right to refuse treatment;
- 2.1.4.1.27. Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, as specified in other Federal regulations of restraints and seclusion. Great Rivers BH-ASO requires that all outpatient providers ensure individuals are free from use of seclusion or restraints;
- 2.1.4.1.28. Receive a second opinion from a mental health or substance use disorder professional in the Great Rivers BH-ASO catchment area at no cost to you, as provided in 42 CFR Sec. 438.206(b)(3)(2015);
- 2.1.4.1.29. Receive medically necessary behavioral health services outside of the Great Rivers BH-ASO catchment area if those services cannot be provided adequately and timely within the region;
- 2.1.4.1.30. File a grievance if you are not satisfied with a service;
- 2.1.4.1.31. Receive a notice of adverse benefit determination so that you may appeal any decision that denies or limits authorization of

- a requested service, that reduces, suspends, or terminates previously authorized service, or that denies payment for a service, in whole or in part;
 - 2.1.4.1.32. File an appeal if services are not provided in a timely manner as defined by the state;
 - 2.1.4.1.33. Request an administrative (fair) hearing if your grievance or appeal is not resolved within the timelines as described in WAC 182-538D-0660 and 182-538D-0670;
 - 2.1.4.1.34. Request services from the Office of Behavioral Health Advocacy (OBHA) to help you file a grievance or appeal or request an administrative hearing.
 - 2.1.5. In addition to the rights above, Individuals receiving involuntary treatment services have the following rights:
 - 2.1.5.1. The right to individualized care and adequate treatment;
 - 2.1.5.2. The right to discuss treatment plans and decisions with professional persons;
 - 2.1.5.3. The right to access treatment by spiritual means through prayer in accordance with tenets and practices of a church or religious denomination in addition to medical treatment.
- 2.2. Individual rights and responsibilities are distributed to individuals upon activation of Great Rivers BH-ASO coverage. Great Rivers BH-ASO ensures that all individuals are aware that a full list of individual rights and responsibilities are located on Great Rivers BH-ASO's website and a copy can be obtained upon request.
- 2.3. Great Rivers BH-ASO ensures that all behavioral health agencies and providers receive Great Rivers BH-ASO's Individual Rights and Responsibilities policy upon initiation of contracting and joining the Great Rivers BH-ASO's provider network. All BHAs and providers contracted with Great Rivers BH-ASO will receive a copy of Great Rivers BH-ASO's Rights and Responsibilities at least annually.
- 2.4. A written statement of individual rights and grievance procedures shall be prominently posted in the public areas of provider sites in all designated HCA languages. The posting shall make clear that individuals can request copies of these. If needed, Great Rivers BH-ASO will provide hard copy or other appropriate versions for practitioners' /provider agencies upon request.
- 2.5. Individual rights and grievance policies will be provided in alternative formats for those with sensory impairments. Individuals will be informed prior to their intake that written materials can be provided in alternative formats.
- 2.6. Great Rivers BH-ASO will ensure that rights and grievance information are translated to the most commonly used languages in the Great Rivers BH-ASO service area.
- 2.7. BHAs and providers will give each individual an opportunity to review rights documentation by the second contact and will help ensure that individuals understand their rights. This shall be documented in the medical record.
- 2.8. Providers will follow Great Rivers BH-ASO procedures in reporting second opinions, which shall include use of an administrative code when a second opinion is requested, and a Second Opinion report form that documents the circumstances of the request and its outcome, sent to Great Rivers BH-ASO's Clinical Team.
- 2.9. Great Rivers BH-ASO will coordinate development of written statements of individual rights and related communications in alternative languages with its providers.

- 2.10. Great Rivers BH-ASO will announce changes to the Rights and Responsibilities at all provider meetings to ensure all service providers within the network are fully informed of the rights.

MONITORING

- 3.1. Great Rivers BH-ASO will use contract monitoring, quality reviews, concurrent, and retrospective case reviews to assess BHAs and providers' compliance with expectations regarding individual rights and provision of required information. Problems requiring corrective action shall be documented and followed up on by Great Rivers BH-ASO. Aggregate reports on compliance with individual rights may be discussed in the Quality Management Committee (QMC) and sent to Great Rivers BH-ASO Advisory and Governing Boards. Any corrective actions required shall be monitored by the Great Rivers BH-ASO Chief Executive Director (CED) or designee.
- 3.2. The QMC will also review, on at least a biannual basis, documentation compiled by the Office of Behavioral Health Advocacy regarding grievances related to individual rights. The QMC will review findings from DOH or HCA sponsored surveys relevant to individual rights. This information shall also be shared with Great Rivers BH-ASO's Advisory and Governing Boards.
- 3.3. Contract monitoring will note postings of individual rights and postings of the grievance policies. It also will include a review of the BHA or provider's privacy procedures and documents as well as use of oral and ASL interpreters. Contract monitoring will include an assessment of the performance of the provider's delegated functions.

POLICY SIGNATURE

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Trinidad I. Medina
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10/19/2023

Trinidad Medina
Chief Executive Director

Date