# BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

Chapter: 3	Member Rights and Responsibilities		
Section: 2	<b>Treatment Rights</b>		
Topic: 6	Change in Treatment		
Page: 1 of 3	Supersedes Date: Pol: 6-18-98 Proc: 3-30-11, 6-3-02, 7- 28-98	Approval Date: Pol: 6-3-02 Proc: 9-27-24	Board Chairperson Signature  Chief Executive Officer Signature
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## **Policy**

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) that a recipient shall receive progressive treatment utilizing the Person-Centered Planning (PCP) process and care until sufficiently rehabilitated or as required by laws, rules, policies, or guidelines, or until the recipient has received the maximum benefit from the program.

## **Purpose**

This policy and procedure is established to ensure that recipients receive progressive treatment utilizing the PCP process.

## **Education Applies to:**

$\boxtimes$	All BABHA Staff
	Selected BABHA Staff, as follows:
$\boxtimes$	All Contracted Providers: Policy Only Policy and Procedure
	Selected Contracted Providers, as follows:
	Policy Only Policy and Procedure
	BABHA's (Affiliates): Policy Only Policy and Procedure

### **Definitions**

N/A

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### **Procedure**

- A. The written person-centered Individual Plan of Service (IPOS) will have a specific date or dates when the overall plan and any of its subcomponents will be formally reviewed for possible modification.
- B. The IPOS shall be kept current and modified when indicated or as needed.
- C. The recipient shall be informed orally and in writing of his or her clinical status and progress at reasonable intervals established in the IPOS in a manner appropriate to his or her clinical condition.
- D. The recipient will be informed when ready for change, release, discharge, or when maximum benefit is received.
- E. If the recipient is not satisfied with his or her IPOS, the recipient or his/her guardian, or parent of a minor recipient, may make a request for review to the designated individual in charge of implementing the IPOS.
- F. The above review is to be completed within 30 days and shall be carried out in a manner approved by BABHA.
- G. A recipient will be given a choice of physician or other mental health professional in accordance with the policies of the CMHSP or service provider and within the limits of available staff.

Attachments
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N/A

#### **Related Forms**

N/A

#### **Related Materials**

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N/A

# References/Legal Authority

Department of Health and Human Services-Administrative Rules  $\{AR\ 7199\ (2)(j)\}\$  Michigan Mental Health Code 330.1712 and 330.1752.

SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
Marlene Wolber	Linda Maze	11/10/09	Changes	Triennial Review-format and language updated
Sara Heydens	Linda Maze	3/30/2011	Changes	Updated to reflect required practices regarding IPOS
		12/31/12	No changes	Triennial Review-No changes
Melissa Prusi	C. Pinter	6/27/16	No changes	Triennial Review-No changes
Melissa Prusi	C. Pinter	12/13/18	Changes	Minimal language changes. No change to policy or procedure.
Melissa Prusi	Christopher Pinter	06/19/2019	Revision	Triennial and annual review. Minor changes. No change to P&P process.
Melissa Prusi	Christopher Pinter	09/27/2024	Revision	Triennial review -added letter F and informationabout choice of provider