BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

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Chapter: 3	Member Rights and Responsibilities		
Section: 2	Treatment Rights		
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:

All BABHA Staff	
Selected BABHA Staff, as follows:	
All Contracted Providers: Policy Only	Policy and Procedure
Selected Contracted Providers, as follows:	
Policy Only Policy and Proced	ure
BABHA's (Affiliates): Policy Only	
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.
- F.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

N/A

Related Forms

N/A

Related Materials

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N/A

<u>References/Legal Authority</u>

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.
<u>Melissa Prusi</u>	Christopher Pinter	<u>09/27/2024</u>	<u>Revision</u>	<u>Triennial review</u> -added letter F and information-about choice of provider