BERRIEN MENTAL HEALTH AUTHORITY
PROCEDURE

SUBJECT: Right to Changes in Type of Treatment	SECTION: 01-21-01 Page 1 of 2
APPLICATIONS: All Direct Operated Inpatient & Residential Programs EFFECTIVE DATE: 05/01/2002 APPROVED BY: _____ Chief Executive Officer REVISED: 6/03, 9/03, 7/04, 2/05	REQUIRED BY: MHC 712, 752; AR 7199 (2) (j)

POLICY
Berrien Mental Health Authority (BMHA) will ensure that recipients are receiving appropriate treatment and care suited to their condition. Treatment shall be maintained in the least restrictive environment appropriate and available. Opportunity for the recipient/parent/guardian to request and receive a review of the appropriateness of the type of mental health services being provided by BMHA shall be given.

PURPOSE
To assure consumers in inpatient and residential facilities receive appropriate treatment and care; to provide opportunity for the consumer/parent/guardian to request and receive a review of the appropriateness of the type of treatment and care being provided, as well as, the intensity, scope and duration of those services in inpatient, outpatient, or residential programs and; provide staff with expectations of the processes available.

STANDARDS
- A review requested of the person designated in charge of developing the PCP must be completed within 30 days of the request and shall include participation of the consumer/parent/guardian.
- Changes in treatment being given without the consent of the consumer/parent/guardian shall be given a minimum 12-day advance notice of this action.

DEFINITIONS

PROCEDURE
1. A consumer shall remain in an inpatient or residential program until discharge as required by law, or until the consumer has, in the judgment of his/her treatment team, received the maximum benefit from the program and a determination is made that a less restrictive setting would be more appropriate.

2. If it is determined that a less restrictive placement is appropriate but not available, the person in charge of the person centered plan shall document all efforts made to find one, as well as, what steps will be taken to secure or develop an appropriate setting and within what timeframes.

3. The Person-Centered Plan of Service (PCP) or Addendum shall contain the specific date or dates that the overall plan and any of its sub-components will be formally reviewed for possible modification or revision. The PCP shall be kept current and be modified when significant changes occur with the recipient.

4. Justification for a change from one type of treatment and care to another within the program shall be in writing and made part of the consumer's Person-Centered Treatment Plan or Addendum.

5. Consumers shall be informed of their clinical status and progress at reasonable and appropriate intervals for their clinical condition. The intervals shall be established in the PCP and communicated both orally and in writing to the person. A consumer shall be informed when it is determined by his/her treatment team that he/she is ready for a change to another type of treatment and care, ready for release/discharge or has received the maximum benefit from the program. The reason(s) for change in services, and expected benefits and risks of the change shall be explained to the consumer, parent of a minor, or guardian. Written informed consent for changes shall be obtained through the Person-Centered Planning process, including verification that a copy of their 'Hearing Rights' to appeal (for medicaid recipients) and/or Local Dispute Resolution process through BMHA Customer Services and/or the Office of Recipient Rights Complaint process (for medicaid and non-medicaid recipients) was given. This is considered *Adequate Notice.*

6. Consumers, parents, and guardians may request and receive a review of the appropriateness of the type of treatment and care a consumer is receiving. This request will be made to the treating psychiatrist for consumers receiving inpatient care and to the primary clinician for consumers receiving residential or outpatient care. The treatment team will provide this review with the participation of the consumer, parents and/or guardian within 30 days.

7. If a clinical decision to change treatment and suspend/reduce/terminate the mental health services being provided, without written consent of the recipient, parent, guardian or person with the authority to make such decisions; a written notice of this adverse action shall be given to **ALL** recipients, no less than 12 days in advance of the action to be taken. For medicaid recipients, the *Advance Notice of Adverse Action* document will be utilized and rights to the Fair Hearing process will be given. Medicaid and non-medicaid consumers shall have access to the Local Dispute Resolution process through BMHA Center Customer Services and/or the Office of Recipient Rights Complaint process. Justification for this change shall also be documented in the clinical record.

8. If a Fair Hearing request is made to the MDHHS Administrative Tribunal, services shall be continued at the same level they were prior to the appeal, until the Administrative Law Judge renders a decision. The consumer/parent/guardian shall also be informed that payment for those services may be their responsibility if their appeal is not upheld.

9. A consumer receiving inpatient care who is involuntarily admitted, admitted on a formal voluntary or on an administrative status based on an application of a parent, person in loco parentis, or guardian shall be provided treatment and care which consists of not less than:

    a. Weekly therapeutic consultation with a mental health professional for documented duration.
    b. Habilitation or rehabilitation services

FORMS:
PCP/Addendum which contains 'hearing rights' and appeal language for adequate notice-or-Notice of Hearing Rights document and Verification of Receipt
Consent for Services
Request for an Administrative Hearing Form (enclosed by party mailing the advance notice)

Reviewer: Office of Recipient Rights
Reviewed: 4/07, 3/08, 3/09, 6/10, 9/11, 9/12, 7/13, 4/14, 7/15, 7/16, 4/17, 7/18, 5/19, 4/2020, 9/2021, 7/2022, 8/2023, 8/2024, 8/2025