

ACCOUNTABLE BEHAVIORAL HEALTH ALLIANCE

Policy No. 027

POLICY & PROCEDURE: MENTAL HEALTH DECLARATION AND MEDICAL ADVANCE DIRECTIVES

Original Policy Date:	June 16, 2003
Next Review Date:	November 13, 2006 November, 2008 October 2010
Revision History (approval):	June 16, 2003 December 8, 2006 October 24, 2008
Cross References:	2005 EQR findings

Purpose:	To ensure MHO Contract and External Quality Review compliance
Policy:	<p>Every ABHA member has the right to make decisions about his or her mental health and/or medical treatment. This includes the right to obtain information about what a Mental Health Declaration and a Medical Advance Directive is, to accept or refuse mental health or medical treatment and to fill out a Mental Health Declaration and/or a Medical Advanced Directive form.</p> <p>The Mental Health Declaration is an advanced directive that allows members to make choices about the mental health treatment they may want to receive at some future time when and if they are not capable of giving consent. The Medical Advance Directive is also a directive that allows members to make choices about the medical care they may want to receive at some future time when and if they are not capable of giving consent. This document also lets a member appoint a friend or relative to make these choices for him or her. A completed Mental Health Declaration and/or Medical Advance Directive form allows a doctor to treat a member even though the member cannot consent.</p> <p>The Mental Health Declaration and/or Medical Advanced Directive forms are available at no cost to ABHA members and can be obtained by contacting the member's respective mental health or medical care agency, ABHA or the State of Oregon, Office of Mental Health and Addiction Services.</p> <p>Accountable Behavioral Health Alliance shall provide written information to its adult OHP members about the Mental Health Declaration and Advance Directive within 14 calendar days of the OHP Member's effective date of coverage with ABHA. Information shall be provided either orally or in written format and will take into consideration member special needs for culturally diverse and disabled populations.</p>
Objective:	To inform members about their rights to obtain information regarding what a Mental Health Declaration and Advance Directive is and obtain information regarding how to complete and file such documents.

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Scope:	This policy is applicable for all client centered services
Procedure:	<ol style="list-style-type: none"> 1. ABHA will provide written information to its adult members within 14 calendar days of the OHP Member’s effective date of coverage with ABHA, informing them about their right to participate in health care decisions. 2. For adult members without decision-making capacity, ABHA providers will communicate all information about care options to the member’s family or proxy. For members under age 18, treatment options and decisions will be discussed with the member and/or parent or legal guardian, as indicated. 3. ABHA mental health care providers will do their best to honor a member’s Declaration for Mental Health Treatment and any other reliable instruction the member may have communicated. 4. All requests must be consistent with state and federal law. 5. In providing mental health care, ABHA will not discriminate against any member based on whether the member has made Declaration for Mental Health Treatment. 6. Since ABHA is a Mental Health Organization (MHO), it would be beyond the scope of this policy to assume ABHA would have expertise or specific knowledge related to any medical condition that a member might request information related to a medical Advance Directive. In the event a member would request information beyond the scope of the MHO, ABHA will direct members to appropriate resources to obtain such information and assistance. 7. ABHA encourages any member wishing to enact a Mental Health Declaration and/or a Medical Advance Directive to consult with an attorney. It would be beyond the scope of the MHO to offer any member legal advice. <p>Mental Health Declaration forms can be obtained by contacting the State of Oregon, Office of Mental Health and Addiction Services (OMHAS), P.O. Box 14250, Salem, OR 97309-0740 PH: (503) 945-9700 – FAX (503) 373-7327. http://omhs.mhd.hr.state.or.us/dataonline/forms.cfm</p> <p>Medical Advance Directive information and forms can be downloaded from the Oregon Senior Health Insurance Benefits Program at the following website: http://egov.oregon.gov/DCBS/SHIBA/advanced_directives.shtml#Advance_Directives_Information</p>
Enforcement:	Contract and EQR oversight processes

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Seth Bernstein, Executive Director

October 24, 2008

Date Approved by the Governing Board