

# APPENDIX 5

Medi-Cal Beneficiary Rights Policy



- Receive information on available treatment options and alternatives, presented in a manner appropriate to his or her condition and ability to understand;
- Participate in decisions regarding his or her health care, including the right to refuse treatment;
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation;
- Receive information in a manner and format that may be easily understood in accordance with Title 42, CFR, Section 438.10;
- Request and receive a copy of his/her medical records, and to request that they be amended or corrected, as specified in the Agency's Health Insurance Portability and Accountability Act (HIPAA) Policies and Procedures and in Title 45, CFR Sections 164.524 and 164.526; and,
- Be furnished health care services in accordance with Title 42, CFR Sections 438.206 through 438.210, which cover requirements for availability of services, assurances of adequate capacity and services, coordination and continuity of care, and coverage and authorization of services.

No Medi-Cal beneficiaries' treatment may be adversely affected as a result of them exercising their rights as outlined above.

**ADMINISTRATION:**

Mental Health Director

**DEFINITIONS:**

None

**END OF POLICY**

**PROCEDURES:**

1. Upon first request for mental health services, Medi-Cal beneficiaries shall be informed that they may receive a copy of their rights either electronically, or in paper form without charge upon request within 5 business days, as contained in the Napa County Mental Health Plan Beneficiary Handbook.
2. All new Mental Health Division employees shall receive a copy of this policy and be trained to this policy within the first 30 days of working for Napa County Mental Health Division and will review annually.
3. All Mental Health contractors who provide services to Medi-Cal beneficiaries shall be notified in their contract of their obligation to inform beneficiaries that they may receive a copy of their rights either electronically, or in paper form without charge upon request

within 5 business days, as contained in the Napa County Mental Health Plan Beneficiary Handbook when he/she first requests services.

4. A copy of the most current version of the Health and Human Services Agency’s “Mental Health Consumer Rights”, and “Grievance, Change of Provider, Appeal” posters in both English and in the county’s threshold language, currently Spanish, will be prominently displayed in the lobbies of all Mental Health Division programs where served individuals congregate, as well as the lobbies of all MHP contracted mental health service providers.

**REFERENCES:**

- Title 42, CFR, Part 438, Section 438.100
- Title 42, CFR, Part 438 section 438.10( c )(6)
- Title 42, CFR, Sections 438.206 through 438.210
- Title 45, CFR, Sections 164.524 and 164.526
- DMH Program Letter 04-05

**FORMS:**

Napa County Mental Health Plan Beneficiary Handbook  
 Provider Directory

**CONTACT PERSON(S):**

Quality Coordinator

**END OF PROCEDURES**

**REVISION HISTORY:**

<b>Revision</b>	<b>Date</b>	<b>Description of Changes</b>	<b>Requested By</b>
2101b	11/20/09	Policy due for review. No changes made to the policy	Quality Coordinator
2101c	10/27/10	Rights Posters language added	Quality Coordinator
2000201-1002-11	11/18/10	Policy due for review. Policy number updated and review frequency changed to every two years.	Mental Health Administration
2000201-1002-12	11/19/12	Policy due for review. Changes include: 1. Staff policy review during annual compliance training; and, 2. Posters available and posted in both English and Spanish	Mental Health Administration
2000201-1002-15	03/09/15	Policy due for review. No changes made to the policy	Mental Health Administration

2000201-1002-19	09/12/19	<p>Policy due for review. Policy updated to:</p> <ol style="list-style-type: none"> <li>1. Include language from 42 CFR 438.10 regarding obligation to provide paper copy of brochure at no charge within 5 business days upon request. Policy updated per 2018 DHCS Triennial Audit Plan of Correction; and,</li> <li>2. Change the name of the Napa County Guide to Medi-Cal Mental Health Services brochure to <u>Napa County Mental Health Plan Beneficiary Handbook</u>.</li> </ol>	Quality Coordinator
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