

Chapter:	Customer Service		
Title:	Advance Directives		
Policy: <input checked="" type="checkbox"/> Procedure: <input type="checkbox"/> Page: 1 of 2	Review Cycle: Biennial Author: Chief Compliance and Quality Officer, Customer Service Committee	Adopted Date: 09.02.2014 Review Date: 07.05.2022 Revision Eff. Date:	Related Policies: Customer Service Policy

Purpose

To ensure that adult beneficiaries of Mid-State Health Network (MSHN), receive information on advance directives in accordance with 42 CFR 422.128 and 42 CFR 438.3.

Policy

MSHN delegates the responsibility for providing adult beneficiaries with information related to advance directives to its CMHSP Participants/SUD Provider Network.

1. CMHSP Participants/SUD Provider Network must maintain written policies and procedures concerning advance directives with respect to all adult individuals receiving care by or through the organization.
2. CMHSP Participants/SUD Provider Network:
 - A. Are not required to provide care that conflicts with an advance directive; and
 - B. Are not required to implement an advance directive if, as a matter of conscience, the provider cannot implement an advance directive.
 - C. Are prohibited from conditioning the provision of care based on whether or not the individual has executed an advance directive.
3. MSHN Standards for Advance Directives shall ensure that the CMHSP Participants/SUD Provider Network:
 - A. Provides adult beneficiaries with written information on advance directives at the time of initial enrollment;
 - B. Supplies information that includes a description of applicable state law and rights under applicable laws;
 - C. Document in a prominent part of the individual’s current medical record whether or not the individual has executed an advanced directive;
 - D. Not condition the provision of care or otherwise discriminate against an individual based on whether or not the individual has executed an advance directive;
 - E. Continuously updates written information to reflect any changes in state law as soon as possible but no later than 90 days after it becomes effective; and
 - F. Informs individuals that grievances concerning noncompliance with the advance directive requirements may be filed with Customer Services.

Applies to:

- All Mid-State Health Network Staff
- Selected MSHN Staff, as follows:
- MSHN’s CMHSP Participants: Policy Only Policy and Procedure
- Other: Sub-contract Providers

Definitions:

Advance Directive: Document(s) or documentation allowing a person to give directions about future medical care and/or psychiatric care or to designate another person(s) to make medical decisions if the individual loses decision making capacity. Advance directives may include living wills, durable powers of attorney for health care, do-not-resuscitate (DNRs) orders and right to die or similar documents listed in the Patient Self-Determination Act that express the individual’s preferences

CMHSP: Community Mental Health Service Program

CMHSP Participants/SUD Provider Network: refers to a CMHSP Participant and all Substance Use Disorder Prevention and Treatment Providers that are directly under contract with PIHP MSHN to provide services and/or supports through direct operations or through the CMHSP’s subcontractors.

MSHN: Mid-State Health Network

PIHP: Pre-paid Inpatient Health Plan

Other Related Materials:

N/A

References/Legal Authority:

1. State of Michigan/PIHP Contract: Schedule A: Statement of Work Contract Activities: Q. Observance of State and Federal Laws: 4. Advance Directives Compliance
2. Balanced Budget Act 438.3(j)
3. Center for Medicare and Medicaid Monitoring Medicaid Managed Care Organizations and Prepaid Inpatient Health Plans- A Protocol for Determining Compliance with 42 CFR.
4. Michigan Mental Health Code 330.1433 & 330.1469a
5. Federal Patient Self-Determination Act Part 489
6. 42 CFR 422.128 and 42 CFR 438.3(j)

Change Log:

Date of Change	Description of Change	Responsible Party
09.2014	New Policy	Chief Compliance Officer
11.2015	Annual Review	Director of Compliance, Customer Service and QI
11.21.2016	Annual Review	Customer Service Committee
12.18.2017	Annual Review	Customer Service Committee
12.03.2018	Annual Review, addition of requirements	Customer Service Committee
03.16.2020	Annual Review, Reference/Legal Authority reference correction	Customer Service Committee
11.15.2021	Bi-annual Review, language added to meet contract requirements	Customer Service Committee