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Document Scope: (applies to Policy & Procedure only)

- The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.
 - The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers².
 - The requirements herein apply both to GCBH BH-ASO and its network providers². Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.
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PURPOSE: To define requirements for communicating information regarding Mental Health Advance Directives and Medical Advance Directives, also known as Health Care Directive and/or Living Will.

DEFINITIONS

- I. **Adult:** An individual who has attained the age of majority or is an emancipated minor.
- II. **Agent:** Has the same meaning as an attorney-in-fact or agent as provided in RCW 11.94.
- III. **Individual:** For purposes of this policy, an adult[†] who has applied for, is eligible for or has received mental health services from a Greater Columbia Behavioral Health (GCBH BH-ASO) network provider.
- IV. **Incapacitated:** An adult who: (a) is unable to understand the nature, character, and anticipated results of proposed treatment or alternatives; understand the recognized serious possible risks, complications, and anticipated benefits in treatments and alternatives, including non-treatment; or communicate his or her understanding or treatment decisions; or (b) has been found to be incompetent pursuant to RCW 11.88.010(1)(e).
- V. **Mental Disorder:** Any organic, mental, or emotional impairment which has substantial adverse effects on an individual's cognitive or volitional functions, which includes individuals diagnosed with a Substance Use Disorder as per RCW 71.05.
- VI. **Mental Health Advance Directive:** A written document in which the principal makes a declaration of instructions or preferences or appoints an agent to make decisions on behalf of the principal regarding the principal's mental health treatment, or both, and that is consistent with the provision of RCW 71.32.
- VII. **Medical Advance Directive:** a legal document specifying your wishes regarding the care you receive at the end of life should you be unable to communicate them. In Washington State, the Directive is used only if you have a terminal condition where life-sustaining treatment would only artificially prolong the process of dying or if you are in an irreversible coma and there is no reasonable hope of recovery that is consistent with the provision of RCW 70.122.

POLICY

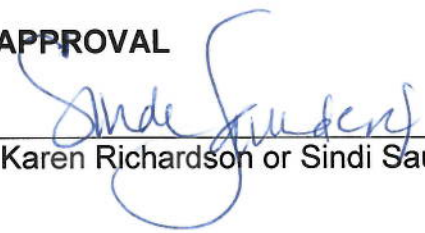
- A. Consistent with 42 CFR 422.128, network providers assure that all individuals[†] receive written information regarding Mental Health Advance Directives and Medical Advance Directives during Intake or upon request, and documents in the individual's records whether or not they have executed such Directives. These Directives are encouraged and honored, but under no circumstances are they a pre-condition to the provision of mental health care or are individuals discriminated against based on their execution or lack thereof.
- B. If an individual is incapacitated and therefore unable to receive information regarding Advance Directives, or to articulate whether he/she has executed an Advance Directive, this information may be provided to the individual's family, surrogate, or agent in the same manner that it issues other materials about policies and procedures to the family of the incapacitated individual or to their agent, a surrogate or other concerned persons in accordance with State statutes. Network providers ensure that this information is given to the individual once they are no longer incapacitated or unable to receive it. Determinations of capacity are made in accord with the provisions of RCW 71.32.110 and 71.32.130.
- C. Mental Health Advance Directives executed in accordance with Chapter 71.32 RCW are presumed valid. The inability to honor one or more provisions of a Directive does not affect the validity of the remaining provisions.
- D. Individuals are informed that complaints concerning noncompliance with Mental Health Advance Directives may be filed with the Department of Health by calling 1-360-236-2620 or by following the written instructions contained in the Washington State Health Care Authority (HCA) Mental Health Benefit Booklet.
- E. The GCBH BH-ASO Central Office is responsible for monitoring for changes in State laws regarding Advance Directives, for notifying network providers of such changes, and for assuring that a revised policy is available to all network providers within ninety (90) days of the effective date of the State law.

PROCEDURE

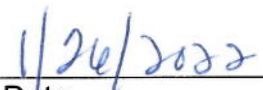
1. Mental Health Advance Directive forms, brochures, and additional information are available on the HCA website: <https://www.hca.wa.gov/health-care-services-and-supports/behavioral-health-recovery/mental-health-advance-directives>
Medical Advance Directive (Living Will) forms, brochures, and additional information are available on the following website: <https://wsma.org/advance-directives>
2. Provision of information regarding Advance Directives is documented in each individual's record via a signed Attestation verifying that the individual has received and understands the information regarding Advanced Directives, and either has or has not chosen to execute either/or of the Advance Directives.
 - 2.1. A sample Attestation is available on the GCBH BH-ASO website at www.gcbhllc.org, under Consumer Information.
3. On-site audits of network providers conducted by GCBH BH-ASO include checks for evidence of compliance with the provisions of this policy. When a need for corrective action is identified during such audits, network providers address compliance issues via their quality improvement processes and provide evidence of sustained improvement. GCBH BH-ASO staff review audit findings for trends requiring system level intervention, and report to the GCBH BH-ASO Quality Management

Oversight Committee for recommendations which are then presented to the GCBH BH-ASO Executive Committee for action.

APPROVAL



Karen Richardson or Sindi Saunders, Co-Directors



Date