



- I. As required by WAC 246-341-0600, YOU HAVE THE RIGHT TO:
- a) Receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age, or disability.
  - b) Practice the religion of choice as long as the practice does not infringe on the rights and treatment of others or the treatment service. Individual participants have the right to refuse participation in any religious practice.
  - c) Be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited English proficiency, and cultural differences.
  - d) Be treated with respect, dignity, and privacy except that staff may conduct reasonable searches to detect and prevent possession or use of contraband on the premises or to address risk of harm to the individual or others. "Reasonable" is defined as minimally invasive searches to detect contraband or invasive searches only upon the initial intake process or if there is reasonable suspicion of possession of contraband or the presence of other risk that could be used to cause harm to self or others.
  - e) Be free of any sexual harassment.
  - f) Be free of exploitation, including physical and financial exploitation.
  - g) Have all clinical and personal information treated in accord with state and federal confidentiality regulations.
  - h) Participate in the development of your recovery plan (known as a treatment plan/individual service plan) and receive a copy of the plan if you want.
  - i) Make a mental health advance directive consistent with Chapter 71.32 RCW.
  - j) Review your clinical record in the presence of the Passages CEO or designee and be given an opportunity to request amendments or corrections.
  - k) Receive a copy of Passages' grievance system upon request; and to file a grievance with Passages or the Behavioral Health Organization if you believe your rights were violated.
  - l) Submit a report to the Health Care Authority if you feel Passages has violated a WAC requirement regulating behavioral health agencies. Or you may file a complaint with the Regional Behavioral Health Ombuds, managed care organization, or public behavioral health provider if you believe your rights have been violated. If you submit a report or grievance, Passages must ensure you are free of any act of retaliation. If you want assistance, the Regional Behavioral Health Ombuds may assist you in filing a grievance. The Behavioral Health Ombuds' phone number is 509-655-2839.



- II. In addition to the above rights, as required by Federal Law, you have the right to:
- a) Receive information about your behavioral health status;
  - b) Receive all information regarding behavioral health treatment options including any alternative or self-administered treatment, in a culturally-competent manner;
  - c) Be informed that once each year, you have the right to obtain names, locations, and telephone numbers for all non-English speaking network providers currently in your service area, including information on specialists.
  - d) Receive all information needed in order to decide among all relevant behavioral health treatment options;
  - e) Receive information about the risks, benefits, and consequences of behavioral health treatment (including the option of no behavioral health treatment);
  - f) Be free to exercise your rights and to ensure that to do so does not adversely affect the way the provider treats you.
- III. Your Rights as a Person Receiving Publicly-Funded Behavioral Health Services in the Community also include:
- a) Receive quality medically necessary behavioral health services in the amount and duration you need that do not discriminate against you (for example because of your age, race or type of illness).
  - b) Receive emergency or urgent care or crisis services.
  - c) Receive post-stabilization services after you receive emergency or urgent care or crisis services that result in admission to a hospital.
  - d) Receive age and culturally appropriate services.
  - e) Be provided a certified interpreter and translated material at no cost to you.
  - f) Receive information you request, including available behavioral health benefits and the structure and operation of the behavioral health organization for your service area and help in the language or format of your choice.
  - g) Refuse any proposed treatment.
  - h) Be free of any sexual exploitation or harassment.
  - i) Receive an explanation of all medications prescribed and possible side effects.



- j) Make a behavioral health advance directive that states your choices and preferences for behavioral health care.
- k) Receive information about medical advance directives.
- l) Choose a behavioral health care provider for yourself and your child, if your child is under thirteen years of age.
- m) Change behavioral health care providers at any time for any reason.
- n) Be free from retaliation.
- o) Request and receive Passages' policies and procedures relating to your rights.
- p) Receive services in a barrier-free (physically accessible) location.
- q) Receive medically necessary services in accordance with the early periodic screening, diagnosis and treatment (EPSDT) under WAC 182-534-0100, if you are twenty years of age or younger.
- r) Receive enrollment notices, informational materials, materials related to grievances, appeals, and administrative hearings, and instructional materials relating to services provided by Passages in an easily understood format and non-English language if you prefer.
- s) Participate in treatment decisions regarding his/her behavioral health care, including the right to refuse treatment and to express preferences about future treatment decisions.
- t) Be free from seclusion or restraint used as a means of coercion, discipline, convenience or retaliation.
- u) Receive a second opinion from a qualified professional within your Behavioral Health Organization area (the term Behavioral Health Organization (BHO) applies to any county authority, group of county authorities, managed care organizations, or any other entity contracted with the Health Care Authority to provide behavioral health services) at no cost to you, or to have one arranged outside the network at no cost to you, as provided in 42 C.F.R. § 438.206(b)(3)(2015).
- v) Receive medically necessary behavioral health services outside of your service area if those services cannot be provided adequately and timely by providers within your service area.
- w) Receive a notice of adverse benefit determination so that you may appeal any decision by the BHO that denies or limits authorization of a requested service, that reduces, suspends, or terminates a previously authorized service, or that denies payment for a service, in whole or in part and file an appeal if the BHO fails to provide services in a timely manner as defined by the State.



- IV. For individuals who are currently under a less restrictive alternative treatment court order pursuant to RCW 71.05 or 71.34, the following additional rights apply:
- a) To receive adequate care and individualized treatment;
  - b) To discuss treatment plans and decisions with professional persons;
  - c) To not be denied access to treatment by spiritual means through prayer in accordance with the tenets and practices of a church or religious denomination in addition to the treatment otherwise proposed;
  - d) To make and present an informed decision about consenting to or refusing proposed antipsychotic medication
  - e) To maintain the right to be presumed competent and not lose any civil rights as a consequence of receiving evaluation and treatment for a behavioral health disorder;
  - f) Subject to RCW 71.05.745 and related regulations, persons receiving evaluation and treatment under RCW 71.05 must be given a reasonable choice of an available physician, physician assistant, psychiatric advanced registered nurse practitioner or other professional person qualified to provide such services.

Passages must ensure all research concerning an individual whose cost of care is publicly funded is done in accordance with chapter 388-04 WAC, Protection of Human Research Subjects, and other applicable state and federal rules and laws. In addition to the requirements in this section, as a Medicare and/or Medicaid provider, Passages must ensure an individual seeking or participating in behavioral health treatment services, or the person legally responsible for the individual is informed of their Medicaid rights at the time of intake and in a manner that is understandable to the individual or legally responsible person.

**If you believe your rights have been violated**, you can file a grievance with Passages Family Support and Passages staff can help you with your grievance, or you can file a grievance with the Spokane Region Behavioral Health Ombuds. The Spokane Region Behavioral Health Ombuds phone number is **509-655-2839** or you can file a grievance with your managed care organization (their number/email is listed in the grievance information you have received).