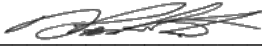


Chapter: **CUSTOMER SERVICE**  
Title: **SECOND OPINION RIGHTS**

Prior Approval Date: 08/29/12  
Current Approval Date: **06/22/22**

Proposed by:  06/22/2022  
Chief Executive Officer Date  
Approved by: Al Lorenzo 06/22/2022  
County Executive Office Date

## I. ABSTRACT

This policy establishes the standards and procedures of Macomb County Community Mental Health (MCCMH), an official agency of the County of Macomb, to assure a person's served right to request a second opinion for denial of inpatient behavioral health treatment or denied entry into the community mental health system.

## II. APPLICATION

This policy shall apply to all directly-operated and contract network providers of MCCMH.

## III. POLICY

It is the policy of MCCMH to follow all federal and state requirements regarding denial of inpatient behavioral health treatment or denied entry into the community mental health system. MCCMH persons served and/or their legal representatives shall have consistent access to second opinion rights.

## IV. DEFINITIONS

None.

## V. STANDARDS

- A. MCCMH's Managed Care Operations Division (MCO) shall determine a person's eligibility for services; authorize assessments; and determine type, level, and duration of hospitalization and/or mental health services.
- B. MCCMH shall ensure individuals are aware of their right to access the Local Appeal, State

Fair Hearing, Second Opinion, and/or Alternative Dispute Resolution processes.

- C. MCCMH shall ensure individuals who voluntarily request inpatient behavioral health treatment or apply for mental health services and are denied authorization by MCO are informed of their right to request, at no cost to the individual, a second opinion from the MCCMH Chief Executive Officer or designee.
- D. Individuals shall be made aware of their right to file a recipient rights complaint, pursuant to Chapter 7 and 7a of the Michigan Mental Health Code, if the request for a second opinion is denied. A recipient rights complaint may be made at any time, in addition to or in lieu of the processes outlined in Section V.B.
- E. Second opinion protocol for denial of inpatient behavioral health treatment and access to mental health services shall be based upon eligibility criteria determined by the Michigan Mental Health Code, Michigan Department of Health and Human Services (MDHHS) Administrative Rules, MDHHS Medicaid Provider Manual and the Michigan Certified Community Behavioral Health Clinic (CCBHC) Handbook.
- F. MCCMH shall maintain record of second opinion requests and findings for denials of inpatient behavioral health treatment or denied entry into MCCMH's community mental health system.

## **VI. PROCEDURES**

### **A. MCCMH Services (Non-Hospitalization)**

- 1. MCO shall determine the eligibility of a new applicant for MCCMH-provided mental health services (non-hospitalization).
- 2. If the new applicant for MCCMH mental health services is denied services, the applicant, his or her guardian if one has been appointed, or the applicant's parent(s) if the applicant is a minor, shall be informed of his/her right to request a second opinion, at no cost to the applicant, from the MCCMH Chief Executive Officer or designee.
- 3. The Chief Executive Officer or designee, upon receipt of a written request for a second opinion, shall secure the second opinion from a psychiatrist or licensed psychologist not involved in the original determination within seventy-two (72) hours, excluding Sundays and legal holidays.
- 4. The individual secured to perform the second opinion may, at his or her discretion, recommend a face-to-face assessment of the applicant.
- 5. If the individual providing the second opinion determines that the applicant has a serious mental illness, serious emotional disturbance, or developmental disability, or is experiencing an emergent or urgent situation requiring a community inpatient level of

care, the individual shall direct services to the applicant.

6. MCCMH shall notify the individual in writing of second opinion results and coordinate services or referrals, as appropriate.

B. Inpatient Behavioral Health Treatment – Adults

1. Upon MCO's denial of suitability for inpatient behavioral health treatment, the individual shall be notified of his/her right to request a second opinion, at no cost to the individual, and informed of the proper procedures for submission of the request to the MCCMH Chief Executive Officer or designee.
2. When a second opinion is requested, a psychiatrist or licensed psychologist not involved in the original determination shall perform an additional evaluation within seventy-two (72) hours, excluding Sundays and legal holidays.
3. The second opinion shall be confirmed in writing to the individual who requested the second opinion. The confirming document shall include the signatures of the Chief Executive Officer or designee and Chief Medical Officer's MD/DO designee.
4. If the individual is assessed and determined to not be clinically suitable for psychiatric hospitalization, MCCMH shall provide referral to appropriate alternative services.

C. Inpatient Behavioral Health Treatment - Minors

1. Hospitals shall notify MCO when there is a request for inpatient behavioral health treatment of a minor (whether emergent or non-emergent).
2. The MCO Children's Diagnostic and Treatment Services team shall review all requests for hospitalization of minors.
3. If the MCO Children's Diagnostic and Treatment Services team denies hospitalization, the minor's parent(s), guardian, or person in loco parentis shall be informed of his/her right to request a second opinion, at no cost to the individual, from the MCCMH Chief Executive Officer or designee.
4. When a second opinion is requested, an additional evaluation by a psychiatrist or licensed psychologist not involved in the original determination shall be performed within seventy-two (72) hours, excluding Sundays and legal holidays.
5. The second opinion shall be confirmed in writing to the individual who requested the second opinion. The confirming document shall include the signatures of the Chief Executive Officer or designee and Chief Medical Officer's MD/DO designee.

**VII. REFERENCES / LEGAL AUTHORITY**

- A. MCL 330.1409

- B. MCL 330.1498e
- C. MCL 330.1705
- D. MDHHS/PIHP Medicaid Managed Specialty Supports and Services Contract FY 2022
- E. MI Certified Community Behavioral Health Clinic (CCBHC) Handbook
- F. MDHHS Medicaid Provider Manual
- G. MCCMH MCO Policy 9-510, "Recipient Rights Investigation"
- H. MCCMH MCO Policy 4-004, "Due Process System"

**VIII. EXHIBITS**

None.