WAC 182-538D-0262 Behavioral health administrative service organizations and managed care organizations—Behavioral health ombuds office. (1) A behavioral health administrative service organization (BH-ASO) must provide unencumbered access to and maintain the independence of the behavioral health ombuds. Managed care organizations (MCOs) must ensure the BH-ASO provides access to omsbuds for medicaid managed care enrollees.

(2) Behavioral health ombuds must be current consumers of the mental health or substance use disorder system, or past consumers or family members of past consumers.

(3) The BH-ASO must maintain a behavioral health ombuds office that:

(a) Is reflective of the age and demographic character of the region and assists and advocates for people with resolving issues at the lowest possible level;

(b) Is independent of the BH-ASO, MCO, medicaid agency, and the provider network, unless by written exception from the medicaid agency;

(c) Supports people, family members, and other interested parties regarding issues, grievances, and appeals;

(d) Is accessible to people, including having a toll-free, independent phone line for access;

(e) Is able to access provider sites and records relating to people with appropriate releases so that it can reach out to people and help to resolve issues, grievances, and appeals;

(f) Receives training and adheres to confidentiality consistent with this chapter and chapters 71.05, 71.24, and 71.34 RCW;

(g) Involves other people, at the person's request;

(h) Supports people in the pursuit of a formal resolution;

(i) If necessary, continues to assist the person through the administrative hearing process;

(j) Coordinates and collaborates with allied services to improve the effectiveness of advocacy and to reduce duplication when serving the same person;

(k) Provides information on grievances to the BH-ASO;

(1) Provides reports and formalized recommendations at least biennially to the BH-ASO and local consumer and family advocacy groups; and

(m) Posts and makes information available to people regarding the behavioral health ombuds office consistent with WAC 182-538D-0262, and local advocacy organizations that may assist people in understanding their rights.

[Statutory Authority: RCW 41.05.021, 41.05.160, 2019 c 325, 2014 c 225, and 2018 c 201. WSR 19-24-063, § 182-538D-0262, filed 11/27/19, effective 1/1/20.]