



Community Health Plan

PO Box 11740

Eugene, OR 97440-3940

Provider Compliance Attestation Form

Seclusion and Restraint

I am a medical professional serving Trillium Medicaid members and I attest to complying with all state and federal regulations related to the use of Seclusion and Restraint.

Date

Name (please print)

Signature

Trillium Community Health Plan is committed to delivering the highest quality of health care to its members and ensuring their rights are protected under Medicaid law.

Oregon Administrative Rule 410-141-3590

MCE Member Relations: Member Rights and Responsibilities

(2) MCE members shall have the following rights and are entitled to:

(cc) Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation, as specified in other federal regulations on the use of restraints and seclusion.

Code of Federal Regulations

§438.100 Enrollee rights.

(b) Specific rights—(1) Basic requirement. The State must ensure that each managed care enrollee is guaranteed the rights as specified in paragraphs (b)(2) and (3) of this section.

(2) An enrollee of an MCO, PIHP, PAHP, PCCM, or PCCM entity has the following rights:
The right to—

(v) Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, as specified in other Federal regulations on the use of restraints and seclusion.