Grievances

What is a Grievance?

When Magellan denies, decreases, or approves a service different than the service you requested because it is not medically necessary, you will get a notice telling you Magellan's decision.

A Grievance is when you tell Magellan you disagree with Magellan's decision.

What should I do if I have a Grievance?

To file a Grievance:

- Call Magellan at Member Services and tell Magellan your Grievance, or
- Write down your Grievance and send it to Magellan by mail or fax.

Magellan Behavioral Health of Pennsylvania, Inc.

Attn: Complaints/Grievances 105 Terry Drive, Suite 103 Newtown, PA 18940

Fax: 1-888-656-2380

Your provider can file a Grievance for you if you give the provider your consent in writing to do so. If your provider files a Grievance for you, you cannot file a separate Grievance on your own.

When should I file a Grievance?

You must file a Grievance within **60 days from the date you get the notice** telling you about the denial, decrease, or approval of a different service for you.

What happens after I file a Grievance?

After you file your Grievance, you will get a letter from Magellan telling you that Magellan has received your Grievance, and about the Grievance review process.

You may ask Magellan to see any information that Magellan used to make the decision you filed your Grievance about at no cost to you. You may also send information that you have about your Grievance to Magellan.

You may attend the Grievance review if you want to attend it. Magellan will tell you the location, date, and time of the Grievance review at least 10 days before the day of the Grievance review. You may appear at the Grievance review in person or by phone. If you decide that you do not want to attend the Grievance review, it will not affect the decision.

A committee of 3 or more people, including a licensed doctor, will meet to decide your Grievance. The Magellan staff on the committee will not have been involved in and will not have worked for someone who was involved in the issue you filed your Grievance about. Magellan will mail you a notice within 30 days from the date you filed your Grievance to tell you the decision on your Grievance. The notice will also tell you what you can do if you do not like the decision.

If you need more information about help during the Grievance process, see page 42.

What to do to continue getting services:

If you have been getting services that are being reduced, changed, or denied and you file a Grievance verbally, or that is faxed, postmarked, or hand-delivered within 1 day of the date on the notice telling you that acute inpatient services you have been receiving are being reduced, changed or denied or within 10 days of the date on the notice telling you that any other services you have been receiving are being reduced, changed, or denied, the services will continue until a decision is made.

What if I do not like Magellan's decision?

You may ask for an external Grievance review or a Fair Hearing, or you may ask for both. A Fair Hearing is your appeal presented at the DHS, Bureau of Hearings and Appeals to make a decision regarding your complaint. An external Grievance review is a review by a doctor who does not work for Magellan.

You must ask for an external Grievance review within 15 days of the date you got the Grievance decision notice.

You must ask for a Fair Hearing from the Department of Human Services within 120 days from the date on the notice telling you the Grievance decision.

For information about Fair Hearings, see page 52. For information about External Grievance Review, see below. If you need more information about help during the Grievance process, see page 42.

External Grievance Review

How do I ask for an External Grievance Review?

To ask for an external Grievance review:

- · Call Magellan at Member Services and tell Magellan your Grievance, or
- Write down your Grievance and send it to Magellan by mail or fax.

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Magellan will send your request for an external Grievance review to the Department of Health.

What happens after I ask for an External Grievance Review?

The Department of Health will notify you of the external Grievance reviewer's name, address and phone number. You will also be given information about the external Grievance review process.

Magellan will send your Grievance file to the reviewer. You may provide additional information that may help with the external review of your Grievance to the reviewer within 15 days of filing the request for an external Grievance review.

You will receive a decision letter within 60 days of the date you asked for an external Grievance review. This letter will tell you all the reason(s) for the decision and what you can do if you do not like the decision.

What to do to continue getting services:

If you have been getting the services that are being reduced, changed, or denied and you ask for an external Grievance review verbally or in a letter that is postmarked or hand-delivered within 1 day of the date on the notice telling you Magellan's Grievance decision that acute inpatient services you have been receiving are being reduced, changed or denied or within 10 days of the date on the notice telling you Magellan's Grievance decision that any other services you have been receiving are being reduced, changed or denied, the services will continue until a decision is made.

Expedited Complaints and Grievances

What can I do if my health is at immediate risk?

If your doctor believes that waiting 30 days to get a decision about your Complaint or Grievance could harm your health, you or your doctor may ask that your Complaint or Grievance be decided more quickly. For your Complaint or Grievance to be decided more quickly:

- You must ask Magellan for an early decision by calling Magellan at Member Services or faxing a letter to 1-888-656-2380.
- Your doctor should fax a signed letter to 1-888-656-2380 within 72 hours of your request for an early decision that explains why Magellan taking 30 days to tell you the decision about your Complaint or Grievance could harm your health.

If Magellan does not receive a letter from your doctor and the information provided does not show that taking the usual amount of time to decide your Complaint or Grievance could harm your health, Magellan will decide your Complaint or Grievance in the usual time frame of 30 days from when Magellan first got your Complaint or Grievance.

Expedited Complaint and Expedited External Complaint

Your expedited Complaint will be reviewed by a committee that includes a licensed doctor. Members of the committee will not have been involved in and will not have worked for someone who was involved in the issue you filed your Complaint about.

You may attend the expedited Complaint review if you want to attend it. You can attend the Complaint review in person, but may have to appear by phone because Magellan has a short amount of time to decide an expedited Complaint. If you decide that you do not want to attend the Complaint review, it will not affect the decision.

Magellan will tell you the decision about your Complaint within 48 hours of when Magellan gets your doctor's letter explaining why the usual time frame for deciding your Complaint will harm your health or within 72 hours from when Magellan gets your request for an early decision, whichever is sooner, unless you ask Magellan to take more time to decide your Complaint. You can ask Magellan to take up to 14 more days to decide your Complaint. You will also get a notice telling you the reason(s) for the decision and how to ask for expedited external Complaint review, if you do not like the decision.

If you did not like the expedited Complaint decision, you may ask for an expedited external Complaint review from the Department of Health within 2 business days from the date you get the expedited Complaint decision notice. To ask for expedited external review of a Complaint:

- · Call Magellan at Member Services and tell Magellan your Complaint, or
- Write down your Complaint and send it to Magellan by mail or fax.

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Fax: 1-888-656-2380

Expedited Grievance and Expedited External Grievance

A committee of 3 or more people, including a licensed doctor, will meet to decide your Grievance. The Magellan staff on the committee will not have been involved in and will not have worked for someone who was involved in the issue you filed your Grievance about.

You may attend the expedited Grievance review if you want to attend it. You can attend the Grievance review in person, but may have to appear by phone because Magellan has a short amount of time to decide the expedited Grievance. If you decide that you do not want to attend the Grievance review, it will not affect the decision.

Magellan will tell you the decision about your Grievance within 48 hours of when Magellan gets your doctor's letter explaining why the usual time frame for deciding your Grievance will harm your health or within 72 hours from when Magellan gets your request for an early decision, whichever is sooner, unless you ask Magellan to take more time to decide your Grievance. You can ask Magellan to take up to 14 more days to decide your Grievance. You will also get a notice telling you the reason(s) for the decision and what to do if you do not like the decision.

If you do not like the expedited Grievance decision, you may ask for an expedited external Grievance review or an expedited Fair Hearing by the Department of Human Services or both an expedited external Grievance review and an expedited Fair Hearing.

You must ask for an expedited external Grievance review by the Department of Health within **2 business days from the date you get the expedited Grievance decision notice.** To ask for an expedited external review of a Grievance:

- · Call Magellan at Member Services and tell Magellan your Grievance, or
- Write down your Grievance and send it to Magellan by mail or fax.

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Magellan will send your request to the Department of Health within 24 hours after receiving it.

You must ask for a Fair Hearing within **120 days from the date on the notice** telling you the expedited Grievance decision.

What kind of help can I have with the Complaint and Grievance processes?

If you need help filing your Complaint or Grievance, a staff member of Magellan will help you. This person can also represent you during the Complaint or Grievance process. You do not have to pay for the help of a staff member. This staff member will not have been involved in any decision about your Complaint or Grievance.

You may also have a family member, friend, lawyer or other person help you file your Complaint or Grievance. This person can also help you if you decide you want to appear at the Complaint or Grievance review.

At any time during the Complaint or Grievance process, you can have someone you know represent you or act for you. If you decide to have someone represent or act for you, tell Magellan, in writing, the name of that person and how Magellan can reach him or her.

You or the person you choose to represent you may ask Magellan to see any information Magellan has about the issue you filed your Complaint or Grievance about at no cost to you.

You may call Member Services at Magellan if you need help or have questions about Complaints and Grievances, you can contact your local legal aid office at 1-800-322-7572 or call the Pennsylvania Health Law Project at 1-800-274-3258.

Persons whose primary language is not English

If you ask for language services, Magellan will provide the services at no cost to you. These services may include:

- Providing in-person language interpreters.
- Providing language interpreters over the phone.
- Providing document translation.

Persons with disabilities

Magellan will provide persons with disabilities with the following help in presenting Complaints or Grievances at no cost, if needed. This help includes:

- Providing sign language interpreters.
- Providing information submitted by Magellan at the Complaint or Grievance review in an alternative format. The alternative format version will be given to you before the review.
- Providing someone to help copy and present information.

Department of Human Services Fair Hearings

In some cases you can ask the Department of Human Services to hold a hearing because you are unhappy about or do not agree with something Magellan did or did not do. These hearings are called "Fair Hearings." You can ask for a Fair Hearing after Magellan decides your First Level Complaint or decides your Grievance.

What can I request a Fair Hearing about and by when do I have to ask for a Fair Hearing?

Your request for a Fair Hearing must be postmarked within **120 days from the date on the notice** telling you Magellan's decision on your First Level Complaint or Grievance about the following:

- The denial of a service you want because it is not a covered service.
- The denial of payment to a provider for a service you got and the provider can bill you for the service.
- Magellan's failure to decide a First Level Complaint or Grievance you told Magellan about within 30 days from when Magellan got your Complaint or Grievance.
- The denial of your request to disagree with Magellan's decision that you have to pay your provider.
- The denial of a service, decrease of a service, or approval of a service different from the service you requested because it was not medically necessary.
- You're not getting a service within the time by which you should have received a service.

You can also request a Fair Hearing within 120 days from the date on the notice telling you that Magellan failed to decide a First Level Complaint or Grievance you told Magellan about within 30 days from when Magellan got your Complaint or Grievance.

How do I ask for a Fair Hearing?

Your request for a Fair Hearing must be in writing.

Your Fair Hearing request needs to include the following information:

- Your (the member's) name and date of birth.
- A telephone number where you can be reached during the day.
- Whether you want to have the Fair Hearing in person or by telephone.
- The reason(s) you are asking for a Fair Hearing.
- A copy of any letter you received about the issue you are asking for a Fair Hearing about.

You may mail your request for a Fair Hearing to the following address:

Department of Human Services
Office of Mental Health Substance Abuse Services
Division of Quality Management
Commonwealth Towers, 12th Floor
P.O. Box 2675
Harrisburg, PA 17105-2675

Or

You may fax your request for a Fair Hearing to the following fax number: 717-772-7827

What happens after I ask for a Fair Hearing?

You will get a letter from the Department of Human Services' Bureau of Hearings and Appeals telling you where the hearing will be held and the date and time for the hearing. You will receive this letter at least 10 days before the date of the hearing.

You may come to where the Fair Hearing will be held or be included by phone. A family member, friend, lawyer or other person may help you during the Fair Hearing. You **MUST** participate in the Fair Hearing.

Magellan will also go to your Fair Hearing to explain why Magellan made the decision or explain what happened.

You may ask Magellan to give you any records, reports and other information about the issue you requested your Fair Hearing about at no cost to you.

When will the Fair Hearing be decided?

The Fair Hearing will be decided within 90 days from when you filed your Complaint or Grievance with Magellan, not including the number of days between the date on the written notice of the Magellan's First Level Complaint decision or Grievance decision and the date you asked for a Fair Hearing.

If you requested a Fair Hearing because Magellan did not tell you its decision about a Complaint or Grievance you told Magellan about within 30 days from when Magellan got your Complaint or Grievance, your Fair Hearing will be decided within 90 days from when you filed your Complaint or Grievance with Magellan, not including the number of days between the date on the notice telling you that Magellan failed to timely decide your Complaint or Grievance and the date you asked for a Fair Hearing.

The Department of Human Services will send you the decision in writing and tell you what to do if you do not like the decision.

If your Fair Hearing is not decided within 90 days from the date the Department of Human Services receives your request, you may be able to get your services until your Fair Hearing is decided. You can call the Department of Human Services at 1-800-798-2339 to ask for your services.

What to do to continue getting services:

If you have been getting the services that are being reduced, changed or denied and you ask for a Fair Hearing and your request is postmarked or hand-delivered within 1 day of the date on the notice telling you Magellan's First Level Complaint or Grievance decision that acute inpatient services you have been receiving are being reduced, changed or denied or within 10 days of the date on the notice telling you Magellan's First Level Complaint or Grievance decision that any other services you have been receiving are being reduced, changed or denied, the services will continue until a decision is made.

Expedited Fair Hearing

What can I do if my health is at immediate risk?

If your doctor believes that waiting the usual time frame for deciding a Fair Hearing could harm your health, you may ask that the Fair Hearing take place more quickly. This is called an expedited Fair Hearing. You can ask for an early decision by calling the Department at 1-800-798-2339 or by faxing a letter to 717-772-6328. Your doctor must fax a signed letter to 717-772-6328 explaining why taking the usual amount of time to decide your Fair Hearing could harm your health. If your doctor does not send a letter, your doctor must testify at the Fair Hearing to explain why taking the usual amount of time to decide your Fair Hearing could harm your health.

The Bureau of Hearings and Appeals will schedule a telephone hearing and will tell you its decision within 3 business days after you asked for a Fair Hearing.

If your doctor does not send a written statement and does not testify at the Fair Hearing, the Fair Hearing decision will not be expedited. Another hearing will be scheduled and the Fair Hearing will be decided using the usual time frame for deciding a Fair Hearing.

You may call Member Services at Magellan if you need help or have questions about Fair Hearings, you can contact your local legal aid office at 1-800-322-7572 or call the Pennsylvania Health Law Project at 1-800-274-3258.