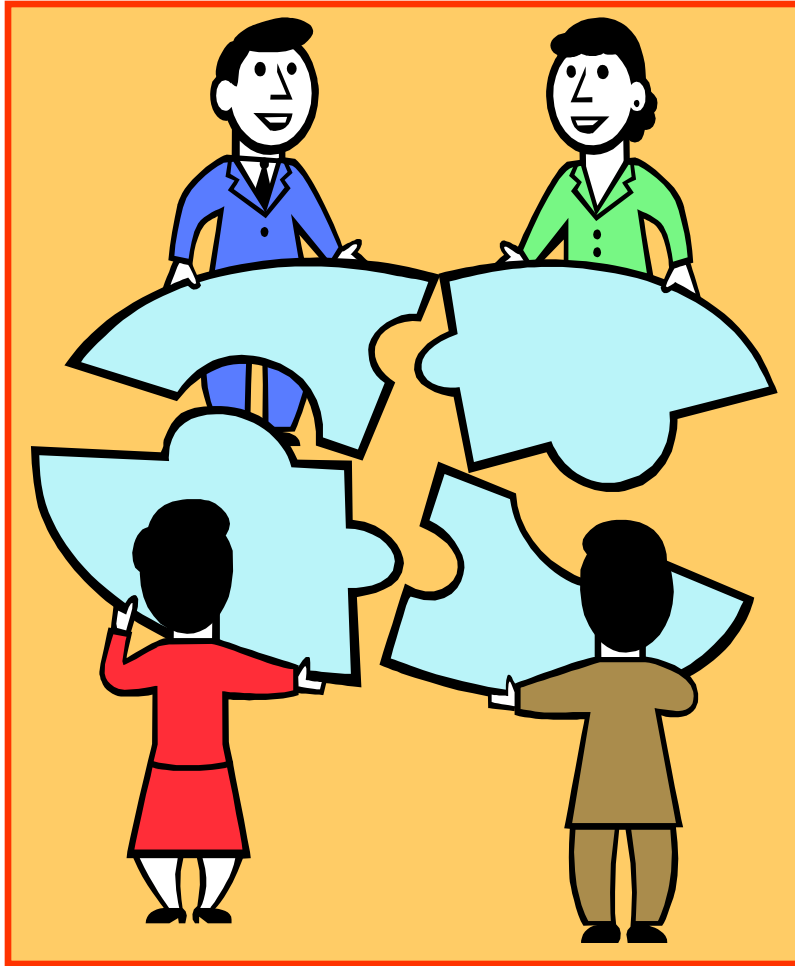


How Do I Get Help With A HealthChoices Grievance



Developed by Beacon Health Options (formerly Value Behavioral Health of PA) in partnership with the counties of Armstrong, Beaver, Butler, Crawford, Fayette, Indiana, Lawrence, Mercer, Venango, Washington, and Westmoreland.

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WHAT IS A GRIEVANCE?

A ***grievance*** is your request to have Beacon Health Options (Beacon) reconsider a decision concerning the medical necessity and appropriateness of a covered service you (or your provider) have requested that is:

- ***Not a covered service.***
- ***A covered service but not for this specific member (due to age, etc.)***
- ***Lacking enough information to determine that the service is medically necessary***
- ***Not medically necessary***

WHEN SHOULD YOU FILE A GRIEVANCE?

You can file a grievance if Beacon does any one of these things:

- Disapproves the service request completely
- Approves the requested service(s) but for a lesser amount, scope, or duration
- Disapproves the requested services, but approves a different service
- Reduces, suspends, or terminates a previously authorized service

If Beacon does not completely approve a service, they will send you a letter. The letter will tell you how to file a grievance.

HOW DO I FILE A GRIEVANCE?



STEPS TO FILING A GRIEVANCE

There are **three ways** to file a grievance:

- You may **telephone** and talk with a Beacon staff member.
- You may **write** a letter to Beacon.
- Your **provider** can file for you if you give them permission in writing* to do so. If your provider files for you, you cannot file a separate grievance on your own.

*Beacon will still proceed with the grievance even if the written permission is not received.

You have a total of **60 calendar days** from the date you receive the Beacon letter to file a grievance.

You should know... that HealthChoices members have the right to file a grievance. Neither Beacon nor your provider are permitted to take any action against you for exercising your right to file a grievance.

- To file a grievance over the telephone, call the **toll-free number for your county** listed on page nine of this booklet or have someone call for you.
- Beacon staff persons are available to take your grievance **24 hours a day**, 7 days a week.
- If needed, interpreter services are available at no charge.
- If you are **deaf, hard of hearing, or have difficulty speaking**, you may call the PA Relay Operator at 711 or the TTY-TTD telephone number at 1-877-615-8502.
- Or you can **write** to:
Beacon Health Options
P.O. Box 1840
Cranberry Township, PA 16066
Attention: Appeals and Grievances

!! IMPORTANT !!

TO CONTINUE GETTING SERVICES:

- If you disagree with a decision to discontinue, reduce, or change your service, you must file your grievance within 1 calendar day for inpatient or 10 calendar days for any other services from the date of the letter.
- These services will continue until a decision is made about the grievance you filed.
- The letters you receive from Beacon will tell you more about how to continue receiving services.

WHAT KIND OF HELP CAN I HAVE WITH THE GRIEVANCE PROCESS?

- Beacon Staff and/or your representative can both assist you in filing a grievance.
- In some counties, an **OMBUDSMAN*** can help you! An OMBUDSMAN is a person that works with the Mental Health Association and can assist you in getting help with your grievance.
- If you need help making the phone call or writing the letter to Beacon, OMBUDSMAN* services can help. ALL calls and services to the OMBUDSMAN are **FREE AND CONFIDENTIAL**.
- You may call the OMBUDSMAN at the following numbers for your county if you live in one of the counties below:

Butler (888) 329-0468

Beaver & Lawrence (724) 775-4165

Washington (724) 225-2061

Armstrong, Indiana & Westmoreland (800) 871-4445

*Ombudsman services are NOT available in Crawford, Fayette, Mercer, or Venango Counties

HELP is also available in ALL counties by contacting:

- The local Legal Aid Office in your county
- The Pennsylvania Health Law Project
1-800-274-3258

WHAT HAPPENS AFTER I FILE A GRIEVANCE?

- Beacon will send you a letter to let you know your grievance was received.
- Beacon will include a list of advocacy groups that may be able to help you with your grievance.
- The letter will tell you about the **grievance** process.
- You may ask Beacon to see any information they have about your grievance in advance.
- You may also send Beacon any information that may help with your grievance.
- With your permission, the provider can attend the grievance and/or can be identified as your representative.



You can be a part of the **grievance** review process.

- The letter you receive from Beacon will explain how you can be a part of the grievance review.

IF YOU WANT TO BE A PART OF THE GRIEVANCE REVIEW

- You can come in person (at a location convenient to you) or call in by phone to be a part of the review.
- This is your choice – you do not have to attend if you do not want to.
- If you do not attend – this will not affect the decision about your grievance.

HOW IS A DECISION MADE ABOUT MY GRIEVANCE?

- A committee will review your grievance.
- The committee includes a doctor or licensed psychologist and someone who is not an employee of Beacon.
- The committee may also include a member or parent/guardian of a HealthChoices member.
- The people on the committee will be people who were not involved in the issue regarding the grievance you filed.
- The committee will make a decision and Beacon will mail you a letter within **30 calendar days** from the date Beacon receives your grievance.
- This letter will explain the reason(s) for the decision.

Fair Hearing and/or External Review Process.

- You must receive the grievance decision letter before you file a request for a Fair Hearing and/or an External Review.
- If you are not happy with the grievance decision, you can file a request for a Fair Hearing (within 120 calendar days) or External Review (within 15 calendar days) or both.
- **The decision letter will give you details of how to file a Fair Hearing and/or an External Review.**

How do I ask for a Fair Hearing?

To ask for a Fair Hearing, put it in writing and send it to:

Department of Human Services
Office of Mental Health and Substance Abuse
Services
Division of Grievances and Appeals
Beechmont Building #32, 2nd Floor
P.O. Box 2675
Harrisburgh, PA 17105-2675

How do I ask for an External Review?

To ask for an External Review, call or send a letter to Beacon. Beacon will then send your request to the Department of Health (DOH). Beacon toll-free numbers are listed on page nine and Beacon's address can be found on page three.

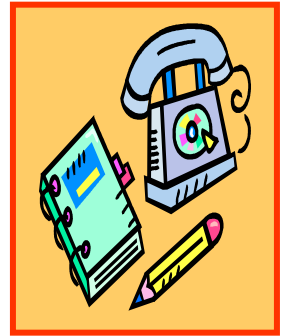
WHAT CAN I DO IF MY HEALTH IS AT IMMEDIATE RISK?

Expedited Grievances

- If you or your provider believes that the usual timeframes for deciding your grievance will harm your health, you or your provider can call Beacon at the county toll-free number and ask that your grievance be decided faster.
- Your provider is not required to provide Beacon with a written letter UNLESS Beacon cannot decide that waiting the usual timeframes will harm your health based on your initial request.
- You may need to have a letter from your provider faxed to Beacon to explain how the usual timeframe will harm your health.
- If Beacon cannot make that decision, and if your provider does not send us the requested letter within 72 hours of your request, then we will decide the grievance within the usual timeframes.

If you would like more information on how to get help with a HealthChoices grievance:

Call the Beacon toll-free number for your county listed below. Available 24 hours a day, 7 days a week.



Armstrong.....	(877) 688 – 5969
Beaver.....	(877) 688 – 5970
Butler.....	(877) 688 – 5971
Crawford.....	(866) 404 – 4561
Fayette.....	(877) 688 – 5972
Indiana.....	(877) 688 – 5969
Lawrence.....	(877) 688 – 5975
Mercer.....	(866) 404 – 4561
Venango.....	(866) 404 – 4561
Washington.....	(877) 688 – 5976
Westmoreland...	(877) 688 – 5977
PA TTY Relay Operator	711

NOTES

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call your county toll-free number or 1-877-615-8503.

Beacon Health Options does not discriminate against members based on race, sex, religion, national origin, disability, age, sexual orientation, gender identity, or any other basis prohibited by law.

More details on the Grievance processes, including Expedited Grievances, External Reviews, and Fair Hearings, can also be found in your HealthChoices Member Handbook. If you need a member handbook, please contact Beacon Health Options. Also, check us out on the Web at pa.beaconhealthoptions.com for more information.

