



UPDATE: NOABD/APPEAL/ GRIEVANCE

Quality Improvement and Utilization Management
Provider Meeting
Tuesday, February 25, 2019





GRIEVANCES/ADVERSE BENEFIT DETERMINATION /APPEAL

MHSUDS 18-010E

- Requires the plan to establish internal grievance procedures for Medical beneficiaries or providers on their behalf.
- Requires the plan to notify beneficiaries and their providers in writing of adverse action based on their benefit determination.
- Requires the plan to implement appropriate appeals processes

Grievance/Complaints

- Written notification of receipt sent within 5 days
- DHCS required template (or electronic equivalent for EHR):
 - Notification of Grievance Resolution

Adverse Benefit Determination Notices

- DHCS required templates:
 - 9 different types of Notices of Adverse Benefit Determination
 - 1 “Your Rights” attachment
 - 1 Non-Discrimination statement
 - 1 Language tag-lines



LANGUAGE ASSISTANCE

English

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you. Call (888) 742-7900 (TTY: 711).

ATTENTION: Auxiliary aids and services, including but not limited to large print documents and alternative formats, are available to you free of charge upon request. Call (888) 742-7900 (TTY: 711).

Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (888) 742-7900 (TTY: 711).

Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (888) 742-7900 (TTY: 711).

Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (888) 742-7900 (TTY: 711).

한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (888) 742-7900 (TTY: 711)번으로 전화해 주십시오.

繁體中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 (888) 742-7900 (TTY: 711)。

Հայերեն (Armenian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Չանգահարեք (888) 742-7900 (TTY (հեռատիպ)՝ 711):

Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (888) 742-7900 (телетайп: 711).



UPDATES ON SAPC NOABD IMPLEMENTATION

- In final stages of incorporating NOABD & grievance into Sage (Avatar)
- Training on NOABD will take place for all treatment providers
- NOABD/Appeal/Grievance documents will be translated into threshold languages and available in electronic and hard copy.
- Providers may have direct responsibility for:
 - NOABD - Termination
 - NOABD - Timely Access to Services (TBD)
 - Placing grievance forms in prominent & accessible locations within each facility
 - Posting grievance procedures in prominent and visible locations
 - Providing assistance/guidance to patients who receive NOABD or wish to file a grievance.