Complaints and Appeals

Complaints

What should I do if I have a complaint? Who do I call?

We want to help. If you have a complaint, please call us toll-free at 1-800-431-7798 to tell us about your problem. A FirstCare Member Services Advocate can help you file a complaint. Just call 1-800-431-7798. Most of the time, we can help you right away or at the most within a few days.

Once you have gone through the FirstCare complaint process, you can complain to the Health and Human Services Commission (HHSC) by calling toll-free 1-866-566-8989. If you would like to make your complaint in writing, please send it to the following address:

Texas Health and Human Services Commission MCO Research and Resolution P.O. Box 149030, MC:0210 Austin, TX 78714-9030 ATTN: Resolution Services

If you can get on the Internet, you can send your complaint in an email to HPM_Complaints@hhsc.state.tx.us.

Can someone from FirstCare help me file a complaint?

You can make a complaint by phone or in writing. If you need help filing a complaint, FirstCare can help. Call 1-800-431-7798 for help.

Once we receive your complaint, we will send you a letter letting you know we are working to resolve the problem. This letter will be mailed within 5 business days after your telephone call.

How long will it take to process my complaint? What are the requirements and timeframes for filing a complaint?

We will send you a letter telling you about our decision. You will receive this letter within 30 days after we receive your complaint. Our letter will tell you the medical or plan benefit reason for our decision.

If you have a complaint about an emergency or hospital stay, you will have a decision in one business day.

If I am not satisfied with the outcome, who else can I contact?

Once you have gone through the FirstCare complaint process, you can

complain to the Health and Human Services Commission (HHSC) by calling toll-free 1-866-566-8989. If you would like to make your complaint in writing, please send it to the following address:

Texas Health and Human Services Commission MCO Research and Resolution P.O. Box 149030, MC:0210 Austin, TX 78714-9030

If you can get on the Internet, you can send your complaint in an email to HPM_Complaints@hhsc.state.tx.us.

Is there someone outside of FirstCare to talk to for help?

If you cannot get things worked out to your satisfaction with FirstCare, you can to speak with someone at the Ombudsman Office with Health and Human Services Commission (HHSC). Their number is 1-866-566-8989.

<u>Appeals</u>

What can I do if my doctor asks for a service for me that's covered but FirstCare denies or limits it?

FirstCare STAR will let you know about action on a covered service your doctor asks for. An action means the denial or limited approval of the service. It includes:

- The denial in whole or part of payment for a service.
- The denial of a type of service.
- The reduction or end of a previously authorized service.

You have the right to request an appeal or a fair hearing if you do not agree with the action. An appeal is the process where you ask for a review of the action. Call customer service toll-free at 1-800-431-7798. A customer service advocate can help you file your request. You may file your appeal by phone or in writing. Every phone appeal received must be confirmed by a written, signed appeal by you or your representative unless it is an expedited appeal. Your request for an appeal must be filed within 60 days from when you get notice of the action.

To make sure services continue, you must file the appeal on or before the later of: 10 days following the FirstCare's mailing of the notice of the action or the intended effective date of the proposed action. The appeal process may be extended up to 14 calendar days if member requests it. Or, it can be extended if FirstCare STAR shows there is a need to learn more and the delay would be best for the member. The member will get written notice if the appeal process

is extended. You can request a State Fair Hearing any time during or after FirstCare's appeals process.

How will I find out if services are denied?

Each appeal is promptly investigated. FirstCare will send you a letter within 5 business days to let you know that we received your appeal request. FirstCare will answer you in writing with a decision about your appeal within 30 days of when we receive your appeal request. If your appeal is denied, the answer will explain the reason why it was denied and tell you how to appeal to the next level.

Can someone from FirstCare help me file an appeal?

Yes, Call FirstCare Customer Service at 1-800-431-7798.

Expedited Appeals

What is an expedited appeal?

An Expedited Appeal is when the health plan (FirstCare) has to make a decision quickly based on the condition of your health, and taking the time for a standard appeal could jeopardize your life or health.

How do I ask for an expedited appeal?

Call FirstCare Customer Service at 1-800-431-7798 if you need help.

Does my request have to be in writing?

You may ask for an expedited appeal by phone or in writing.

What are the timeframes for an expedited appeal?

After FirstCare has received your request, you will find out the answer within 3 business days. If your appeal is related to an ongoing emergency or denial of a continued hospital stay, a decision will be made and given to you within 1 business day after your request. The appeal process may be extended up to 14 calendar days if you request an extension. Or, if FirstCare shows the need and how the extension is best for you. You will receive a letter if the expedited appeal process is extended.

What happens if FirstCare denies the request for an expedited appeal? If the expedited appeal decision is not in your favor, FirstCare will give you your rights to an expedited fair hearing. If you are not satisfied or disagree with an action you can file an appeal with the state.

Who can help me file an Expedited Appeal?

FirstCare Customer Service can help you with your appeal. Call our Customer Service Department toll-free at 1-800-431-7798.

State Fair Hearing

Can I ask for a state fair hearing?

You can request for a STATE Fair hearing, only after exhausting the FirstCare Internal appeal process (Standard or expedited appeals). If you, as a member of the health plan, disagree with the health plan's decision, you have the right to ask for a fair hearing. You may name someone to represent you by writing a letter to the health plan telling them the name of the person you want to represent you. A doctor or other medical provider may be your representative. If you want to challenge a decision made by your health plan, you or your representative must ask for the fair hearing within 120 days of the date on the health plan's letter with the decision. If you do not ask for the fair hearing within 120 days, you may lose your right to a fair hearing. To ask for a fair hearing, you or your representative should either send a letter to the health plan at:

FirstCare Health Plans 12940 N. Hwy 183 Austin, TX 78750 Or call 1-800-431-7798

You have the right to keep getting any service the health plan denied or reduced, at least until the final hearing decision is made if you ask for a fair hearing by the later of: (1) 10 calendar days following the MCO's mailing of the notice of the Action, or (2) the day the health plan's letter says your service will be reduced or end. If you do not request a fair hearing by this date, the service the health plan denied will be stopped.

If you ask for a fair hearing, you will get a packet of information letting you know the date, time and location of the hearing. Most fair hearings are held by telephone. At that time, you or your representative can tell why you need the service the health plan denied.

HHSC will give you a final decision within 90 days from the date you asked for the hearing.