Complaints and Appeals

Complaints

What should I do if I have a complaint?

We want to help. If you have a complaint, please call us toll-free at 1-877-639-2447 to tell us about your problem. A FirstCare Member Advocate can help you file a complaint. Just call 1-877-639-2447. Most of the time, we can help you right away or at the most within a few days. FirstCare cannot take any action against you as a result of your filing a complaint.

Who do I call?

To make a complaint by telephone, call FirstCare Customer Service toll-free at 1-877-639-2447 (TTY 7-1-1).

Or, to make a complaint in writing, send it to:

FirstCare Health Plans

Attn: Complaints and Appeals Department 1206 West Campus Drive Temple, TX 76502

Fax: 806-784-4319

You can also file a complaint with myFirstCare Self-Service on my.FirstCare.com. To do so, simply log into the portal, choose "Send a Message" in the Message Center and then select "Complaint" under Message Type.

Can someone from FirstCare help me file a complaint?

Yes. If you need help filing a complaint, FirstCare can help. Call FirstCare Customer Service at 1-877-639-2447.

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 five 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?

If you are not satisfied with the answer to your complaint, you can also complain to the Texas Department of Insurance by calling toll-free at 1-800-252-3439. If you would like to make your request in writing send it to:

Texas Department of Insurance Consumer Protection PO Box 12030 Austin, Texas 78711-2030

If you can get on the Internet, you can send your complaint in an email to: http://www.tdi.texas.gov/consumer/complfrm.html

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 speak with someone at the Ombudsman Office with Health and Human Services Commission (HHSC). Their number is 1-866-566-8989, Monday to Friday, 8 a.m. to 5 p.m. CST.

Do I have the right to meet with a complaint appeal panel?

Yes. If you are not satisfied with FirstCare's response to your complaint, you have the right to meet with a complaint appeal panel. The panel is made up of members, providers and FirstCare staff.

Your appeal of a complaint will be sent to an appeal panel. When you ask for an appeal, we will send you a letter within five business days followed by a scheduling letter that will tell you the date and time of the appeal panel. You do not need to appeal in person; you can attend on the phone. You can attend the hearing, or you can write to the appeal panel. Before the appeal hearing, you will be given instructions for you to submit written comments, documents, or other information relating to the appeal.

The panel will meet with you and a final response to your complaint will be completed within 30 calendar days of receiving your written request for an appeal.

Appeals

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

You have the right to appeal. You can ask for an appeal if you are not happy with FirstCare CHIP's decision. You can call FirstCare Customer Service toll-free at 1-877-639-2447. Customer Service can help you with your appeal.

How will I find out if services are denied?

FirstCare CHIP will let you or your authorized representative know in writing when a

covered service has been denied or limited.

What are the time frames for the appeal process?

You can ask for an appeal if you do not agree with what FirstCare has told you. You or your representative can ask for an appeal. You can ask for an appeal by phone or in writing.

FirstCare CHIP will send you a letter within five days after we get your verbal or written appeal. This lets you know that your written appeal has been received and will identify any information we may need to review your appeal.

FirstCare CHIP will review your request for appeal. You or your representative, and your doctor or health care provider will get a response. This will come within 30 days of when your written request is received.

Your appeal about an emergency or hospital stay will be decided in one business day once we have all the information followed by a letter within 72 hours.

When do I have the right to ask for an appeal?

You can ask for an appeal any time you disagree with FirstCare's decision. The decision can be about ending or limiting health services. If you are not happy with our decision, you can appeal.

You have only 180 days from the date on the letter to file an appeal. If you do not file your appeal within 180 days, the initial decision is final, and you have no further appeal rights with FirstCare. The appeal is not a court of law.

Does my request have to be in writing?

You can ask for an appeal by phone or in writing. Call FirstCare Customer Service at 1-877-639-2447 or write to us at:

FirstCare Health Plans Attn: Complaints and Appeals Department 1206 W Campus Drive Temple, TX 76502

Or, fax to: 806-784-4319.

If you call FirstCare to request an appeal, you can follow up your phone call with a request in writing.

Can someone from FirstCare help me file an appeal?

Yes. Call FirstCare Customer Service at 1-877-639-2447.

Expedited Appeals

What is an expedited appeal?

An expedited appeal is when the health plan 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? Does my request have to be in writing?

You may ask for an expedited appeal by phone or in writing. Call FirstCare Customer Service at 1-877-639-2447 if you need help. If you call FirstCare to request an expedited appeal, you do not have to follow up in writing.

What are the timeframes for an expedited appeal?

A decision will be made and given to you within one working day from the date all information is received. We will notify you by phone to be followed by a letter within 72 hours.

If your expedited appeal is about an ongoing emergency or denial to stay in the hospital, FirstCare will review your case and get back to you within one (1) workday after we receive your request. We will notify you by phone followed by a letter within three days. Other expedited appeals will be decided within 72 hours.

What happens if FirstCare denies an expedited appeal?

You or your representative can request an independent review if you are not happy with the decision about your appeal.

Who can help me in filing an expedited appeal?

FirstCare Customer Service can help you with your appeal. Call Customer Service toll-free at 1-877-639-2447.

Independent Review Organization Process

What is an Independent Review Organization (IRO)?

An IRO is a process for final administrative review of the medical necessity and appropriateness of health care provided or proposed to patients. The IRO's decision is binding on the health care plan. In circumstances involving a life-threating condition or when a request for an expedited appeal is denied, members are entitled to an immediate appeal to an IRO.

Do I have the right to appeal to an IRO?

If a decision is made to end medical care, you have the right to appeal to an IRO. This is a process to make a final decision.

The IRO's decision is binding on the health care plan.