

APPEAL PROCESS

We hope that you are always satisfied with the service you receive from us. We know, however, that from time to time you may have a problem or concern that you want us to address. If you have a question, concern or complaint, call PHPMM -FC's Customer Service Department at the telephone number shown on your PHPMM -FC ID card. Our Customer Service staff will try very hard to respond to your questions and concerns right away. If you are still not satisfied, you can take the following steps however, you must file your appeal within 90 days following an adverse determination notice in order to accept your appeal request:

Step 1

- Write or call PHPMM-FC and explain your dissatisfaction. We will help you fill out the form if necessary. You may also file a complaint directly with the State of Michigan.
- If you want to have a representative present at your appeal hearing, you must tell PHPMM-FC in writing.
- PHPMM-FC will tell you the date and time of the Appeal Committee hearing. You or your representative may attend in person or by telephone.
- If you or your representative are unable to attend the Appeal Committee hearing in person or by telephone, you may ask to delay the hearing. A written request must be sent to PHPMM-FC if you wish to delay the hearing. Otherwise, PHPMM-FC will make a final decision on your appeal after reviewing the information available at the time of the hearing.
- PHPMM-FC will send you a letter within 30 days from the date of your appeal, unless you asked to delay the hearing. The letter will tell you PHPMM-FC's final decision.

Step 2

- If you are not happy with PHPMM-FC's final decision, you have the right to an external review. For information and forms, contact the Office of Financial and Insurance Regulation (OFIR).
- Insurance Commissioner at the address provided below. PHPMM-FC will provide a copy of the OFIR Request for External Review Form.
- You must send your request for an external review within 60 days from the date you receive PHPMM-FC's decision. You must finish the PHPMM-FC appeal process before asking for an external review by OFIR; unless there is an urgent situation as described below (see your Certificate of Coverage for details on alternative external review processes, which include the Fair Hearing Process).

Exceptions for Urgent Situations

The above appeal Procedures do not apply if you have a dispute with PHPMM -FC over an upcoming health service which, in the opinion of a doctor, needs to be treated as an urgent situation due to a risk to your life or health. In urgent situations:

- The doctor needs to notify PHPMM -FC, orally or in writing, to confirm that an urgent situation exists and special procedures for appeal are needed.
- PHPMM-FC will tell you and the doctor its initial decision within 72 hours after the doctor notifies PHPMM-FC of the urgent situation. If our initial decision is not in writing, we will put it in writing no later than two (2) business days after speaking with you.
- For urgent situations, you may ask for a review by the Commissioner of Financial and Insurance Regulation at the same time that you go through the PHPMM -FC appeal process. You have 10 days after receipt of PHPMM -FC's determination of your expedited appeal to request a review of the Office of Financial and Insurance Regulation (OFIR). For more information about requesting a review of an urgent situation by the Insurance Commissioner, you should contact the office at 877-999-6442.

Office of Financial and Insurance Regulation

Health Plans Division
611 West Ottawa
P.O. Box 30220, Lansing, MI 48909-7720
Phone: 517-335-2057 or 877-999-6442
Fax: 517-241-4168
Website: www.michigan.gov/ofir

State Office of Administrative Hearings and Rules (SOAHR)

You may also file a complaint directly with the State. You do not have to file a complaint with the plan's Customer Service Department before you contact the State. The PHPMM-FC Customer Service Department can send you the form and help you fill it out. Listed below are the steps for the State's Medicaid Fair Hearing Process.

Step 1

- Call 1-800-833-0870 or 517-334-9500 to have a hearing request (complaint) form sent to you.
- Or write to them at:
State office of Administrative Hearings and Rules
For Department of Community Health
Administrative Tribunal
P.O. Box 30763
Lansing, MI 48909
Fax: 517-334-9505

You may also call to ask questions about the hearing process. You may call the

Beneficiary Help line (1-800-642-3195) to have a form sent to you. PHPMM-FC Customer Service can help you in filling out and submitting this form.

Step 2

- Fill out the complaint form and return it to the address listed on the form.

Step 3

- You will be sent a letter telling you when and where your hearing will be held.

Step 4

- The results will be mailed to you after the hearing is held. If your complaint is taken care of before your hearing date, you must call to ask for a Hearing Request Withdrawal form. Call 1-800-833-0870 to request this form.