

CHELAN-DOUGLAS RSN/PHP POLICY AND PROCEDURE MANUAL		Chapter:	2.13
Title:	MANAGED CARE SERVICES	Page:	1 of 2
		Date Effective:	July 1, 2002
Subject:	APPEAL OF CDRSN/PHP CARE MANAGEMENT OR CASE MANAGER DECISION	Date Revised:	May 23, 2002
		Authorizing Signature:	

AUTHORITY: Guiding Principle(s): Consumer Focused, Holistic/Humanitarian, Normalizing/Non-Stigmatizing, Responsive
WAC 388-865-0225, Resource Management
RCW 71.24.025, Community Mental Health Services Act, Definitions
DSHS Standard Work Order, RSN/PHP Services
DSHS Title XIX Contract and Federal Waiver

SCOPE: This policy applies to Chelan-Douglas Regional Support Network/Prepaid Health Plan (CDRSN/PHP) and its contractors (agencies/providers), and subcontractors (referred to as contractors or agencies or providers throughout this policy).

PURPOSE: This policy assures providers of their right to appeal a decision of ACDRSN/PHP Care Management.

DEFINITIONS: n/a

- POLICY:**
- A. Provider Appeal of CDRSN/PHP Care Management decision.
 1. Providers may appeal a CDRSN/PHP Care Management team decision by phone or in writing when they disagree with the CDRSN/PHP Care Management decision.
 2. CDRSN/PHP Care Management staff will render a written decision, within **two (2)** working days.
 3. A second reconsideration step may be initiated by provider staff if dissatisfied with CDRSN/PHP Care Management team decision, by submitting all written materials to the Care Management Clinical Director for review.
 4. The Clinical Director will respond in writing within **five (5)** working days. The Clinical Director's decision will be final.
 - B. Consumer Appeal of Case Manager Decision.
 1. A consumer who believes his or her case manager is not authorizing medically necessary services has the right to a second opinion by another participating staff in the consumer's assigned prepaid health plan (WAC 388-865-0355).
 2. If the consumer is not satisfied, he or she may follow the complaint/grievance process detailed in Chapter 7.1

SEE ALSO: Chapter 2.1, Medical Necessity--Level One and Level Two Criteria
Chapter 2.7, Service Level Determination and Authorization
Chapter 2.8, Reauthorization for Level of Care Services
Chapter 2.9, Residential Level of Care for RSN-Funded Residential
Facilities/Services
Chapter 2.12, Service Level/Residential Level of Care Change
Chapter 8.1, Complaints, Grievance, and Fair Hearing
Glossary of Terms and Acronyms