

CHELAN-DOUGLAS RSN/PHP POLICY AND PROCEDURE MANUAL		Chapter:	9.1.3.1
Title:	COMPLAINTS, CONFLICTS, AND DISPUTES	Page:	1 of 1
		Date Effective:	July 1, 2004
SUBJECT:	EXPEDITED AUTHORIZATION DECISIONS	Date Revised:	May 1, 2005
		Authorizing Signature:	

AUTHORITY: Guiding Principle(s): Consumer Focused, Holistic/Humanitarian, Accessible, Normalizing/Non-Stigmatizing, Responsive, Effectively Managed
WAC 388-865-0255, Consumer Grievance Process
Chelan-Douglas Contract, Basic Agreement
DSHS Standard Work Order, RSN/PHP Services, Grievance Procedure
DSHS Title XIX Contract and Federal Waiver
42 CFR 438.404(a)(b)(c)
Reference to 42 CFR 438.10 (c)(d)—P&P # 2
State MHD Quality Strategy Doc Sec V
State MHD Grievance System Template Doc

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 establishes that the CDRSN/PIHP or its contracted provider takes responsibility for notifying an enrollee if there is an intent to deny, limit, reduce, suspend, or terminate a service or to deny payment for a service, or to deny the enrollee's request to exercise his or her right to obtain services outside the network.

POLICY: In instances where enrollee life or health is seriously at risk, the CDRSN/PIHP amends routine authorization procedures and expedites authorization decisions and issuance of notice of action.

PROCEDURE Within three working days receiving a request for expedited authorization for extenuating circumstances related to risks of health, the CDRSN/PIHP issues an authorization decision and if necessary provide notice of action.

Further, at the request of the provider or enrollee, the three working day requirement may be extended up to but not exceeding fourteen calendar days.