

ABC Health Plan header/
logo here, if applicable

Sub-contractor's/vendor's
logo/header here, if applicable

Notice of Denial

September 13, 2019

Brandy Wine
123 Healthy Street
Tiny Town, LA 70000

Dear Brandy Wine:

We are writing to tell you that your request 20 hours of Community Psychiatric Supportive Treatment (CPST) and 20 hours of Psychosocial Rehabilitation Services (PSR) for dates of service 09/16/19 – 11/21/19 is denied and ABC Health Plan will not pay for the care.

To find out why we won't pay, keep reading. If you think we made a mistake, you may ask for an appeal).

If you have questions, call ABC Health Plan at **1-800-123-4567**. **TTY users call 1-800-111-1111**. **This call is free**. Your doctor also got a copy of this letter, so you should also talk to your doctor.

Why won't ABC Health Plan pay for 20 hours of CPST and 20 hours of PSR for dates of service 09/16/19 – 11/21/19?

The ABC's Health Plan Criteria for Community Psychiatric Support Treatment and Psychosocial Rehabilitative Services guidelines were not met. To meet the guidelines for approval your provider must send us information showing you have all of the following within the last month:

- ✓ Decreased functioning (for example, not taking your medicine);
- ✓ An increase in your behaviors (for example, being a danger to yourself or others);
- ✓ A need for more care by the provider (for example, an after-hours crisis or behavioral health hospitalization).

We reviewed the notes sent in by your provider and you do not have decreased functioning, increased behaviors, and you don't need additional care. Therefore the request for these services is denied. We think you can benefit from other covered services such as therapy and someone from ABC Health Plan will be calling you to help you get those services.

10000 Medical Avenue, Suite 220 | Baton Rouge, LA 70806 | 800-123-4567 (P) | 800-139-5236 (F) | www.ABCHealthPlan.com

Because of all the reasons stated, ABC Health Plan does not think the care requested is medically necessary.

You or someone legally authorized to do so, can ask for a **free** copy of the criteria, guidelines or any other information we used to make this decision by calling **1-800-123-4567**.

Do you have questions? Call us at **1-800-123-4567** or **[TTY XXX]**. You may also want to talk to your doctor.

Does your doctor want to talk to someone about this decision? Your doctor can call ABC Health at **1-800-123-4567**.

What can you do if you think ABC Health Plan made a mistake?

If you think we made a mistake, you may ask for an appeal. If you want to request an appeal, you must do so within 60 calendar days from date of this notice. You can choose to file an appeal yourself, or you can choose another person, including an attorney or your doctor, to act on your behalf. If your doctor or someone else appeals for you, you must give them written permission before requesting an appeal.

How do you ask for an appeal?

There are three ways you can ask for an appeal:

- ✓ **Call** ABC Health Plan at **1-800-123-4567**.
- ✓ **Mail** the Request for Appeal form to:
ABC Health Plan Appeal Processing
P.O. Box 123456
Baton Rouge, LA 70806-1234
- ✓ **Fax** the Request for Appeal form to **1-800-111-2222**.

How long does it take to make a decision about my appeal?

We will review your appeal and send a written decision within 30 calendar days of our receipt of your appeal.

You can do the appeal yourself, or you can choose someone else to do the appeal for you. Your representative can be someone you trust such as a lawyer, a family member or friend. You, your representative, or your doctor also has the right to give us information about your appeal. That information can be in person or in writing. You or your representative can also see your case file both before and during the appeal.

What if you need a fast decision?

If your condition is considered urgent, we may be able to make a decision about your appeal within 72 hours of receipt. You may need a fast decision if, by not getting the requested services, one of the following is likely to happen:

- ✓ You will be at risk of serious health problems, or you may die;
- ✓ You will have serious problems with your heart, lungs, or other body parts; or
- ✓ You will need to go into a hospital.

Your doctor must agree that you have an urgent need.

State Fair Hearing

Once you have completed [Health Plan's] appeal process, and you still disagree with our decision, you can request a State Fair Hearing. Instructions on how to file a State Fair Hearing will be sent with your appeal decision letter.

How do I continue to receive this service during the appeal?

If you are already receiving this service, you have the right to continue benefits while an appeal is in process. You must ask for this within 10 calendar days from the date of this notice by calling ABC Health Plan at 1-800-123-4567. If the appeal decision or state fair hearing agrees with the denial, you may have to pay the cost of the service you received.

Do you need help with this letter? Call ABC Health Plan at **1-800-123-4567**.

If you need help in another language, call 1-800-123-4567 (toll-free).

Para obtener ayuda para traducir o entender esta información, sírvase llamar al **1-800-123-4567** TDD/TTY **1-800-123-4567**, entre 8 a.m. y 5 p.m.

Để được giúp phiên dịch hoặc hiểu phần này, xin gọi số **1-800-123-4567** hoặc TDD/TTY **1-800-123-4567**

Sincerely,

Sarah Nice, MD, MPA
Director of Specialty Health
ABC Health Plan

Enclosure: Request for Appeal Form

cc: Timothy Provider, MD
Best Medical Care Center