

Dear Member,

Please see below changes we will make to our STAR Member Handbook when we print them again. These changes are about how to file an appeal and the State Fair Hearing process.

If you need help understanding these updates, please call Member Services toll-free at 1.888.760.2600.

**These changes are effective May 1, 2022.**

### **Page 11 - Information That Must be Available as a Community Health Choice Member on an Annual Basis**

Updated bullet:

- Information on Complaint, appeal, External Medical Review and State Fair Hearing procedures.

### **Page 39 - Member Rights**

Updated number 5:

5. You have the right to use each complaint and appeal process available through the managed care organization and through Medicaid, and get a timely response to complaints, appeals, External Medical Reviews, and State Fair Hearings. That includes the right to:

- a) Make a complaint to your health plan or to the state Medicaid program about your health care, your Provider or your health plan.
- b) MDCP/DBMD escalation help line for Members receiving Waiver services via the Medically Dependent Children Program or Deaf/Blind Multi-Disability Program.
- c) Get a timely answer to your complaint.
- d) Use the plan's appeal process and be told how to use it.
- e) Ask for an External Medical Review and State Fair Hearing or a State Fair Hearing only from the state Medicaid program and get information about how those processes works.
- f)





Fax: 713.576.0394/Attention: BH Appeals Coordinator

If you ask for a fair hearing, you will get a packet of information letting you know the date, time, and location of the hearing from the State Representative. Most fair hearings are held by telephone. At that time, you or your representative can tell why you need the service the health plan denied.

**Pages 46 - 47**

### **State Fair Hearing**

#### **Can I ask for a State Fair Hearing?**

If you believe that waiting for a State Fair Hearing will seriously jeopardize your life or health, or your ability to attain, maintain, or regain maximum function, you or your representative may ask for an emergency State Fair Hearing by writing or calling Community Health Choice. To qualify for an emergency State Fair Hearing through HHSC, you must first complete Community Health Choice's internal appeals process.

#### **External Medical Review Information**

Can a Member ask for an External Medical Review? If a Member, as a member of the health plan, disagrees with the health plan's internal appeal decision, the Member has the right to ask for an External Medical Review. An External Medical Review is an optional, extra step the Member can take to get the case reviewed for free before the State Fair Hearing. The Member may name someone to represent him or her by writing a letter to the health plan telling Community Health Choice the name of the person the

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keep getting any service the health plan denied, at least until the final State Fair Hearing decision is made. If the Member does not request an External Medical Review within 10 days from the time the Member gets the appeal decision from the health plan, the service the health plan denied will be stopped.

The Member may withdraw the Member's request for an External Medical Review before it is assigned to an Independent Review Organization or while the Independent Review Organization is reviewing the Member's External Medical Review request. An Independent Review Organization is a third-party organization contracted by HHSC that conducts an External Medical Review during Member appeal processes related to Adverse Benefit Determination and Denial of Coverage. The Member may request an External Medical Review at any time during the appeal process. The Member must request an External Medical Review within 10 days of receiving the appeal decision from the health plan. If the Member does not request an External Medical Review within 10 days from the time the Member gets the appeal decision from the health plan, the service the health plan denied will be stopped. )TMC /P 3MCID 2 BDC 0 -2.3w n)1 c)-1 (d t)-E-5 (l E)1 (k)4 (t)-3 (r)-3 (al)1 (M)-3 (e)-5 (



## **Can I ask for an emergency External Medical Review?**

If you believe that waiting for a standard External Medical Review will seriously jeopardize your life or health, or your ability to attain, maintain, or regain maximum function, you, your parent or your legally authorized representative may ask for an emergency External Medical Review and emergency State Fair Hearing by writing or calling Community Health Choice. To qualify for an emergency External Medical Review and emergency State Fair Hearing review through HHSC, you must first complete Community Health Choice's internal appeals process.