



# HOPE

## **Service Determination Requests, Grievances and Appeals**

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There may be times that you may wish to see another doctor or specialist because of a new medical condition. Furthermore, you may wish to receive equipment or services you currently do not receive including medications. The IDT must approve these services before Ascension Living HOPE will pay for them. If you see a doctor or obtain a service including medications that is not approved by the IDT, you may have to pay for that service and any other expenses incurred.

### **Service Determination Requests**

A service determination request is a participant's or their representative's request to initiate, modify an existing service, including to increase, reduce, eliminate, or otherwise change a service including medications. You, your caregiver, or designated representative may submit a service determination request to your any ASCENSION LIVING HOPE employee at any time.

The IDT will notify you of its decision to approve or deny the request as expeditiously as your condition requires, but no later than 3 calendar days after the date the IDT receives the service determination request, or an additional 5 calendar days if an extension is requested. Extensions are granted if you request an extension or the IDT believes it's in your best interest.

Approved service determination requests will be reported to you verbally. Denied service determination requests including medications will be reported to you verbally and in writing explaining the reason for the denial and describing both standard and expedited appeal rights process.

### **Grievances**

A grievance is a written or oral complaint expressing dissatisfaction with service delivery, or the quality of care furnished. The grievance can be medical or non-medical in nature. You, your family member, caregiver or designated representative may submit a grievance to any ASCENSION LIVING HOPE employee at any time. You will receive a letter of acknowledgment within 72 hours of filing the grievance.

Grievances will be resolved within 30 calendar days of receipt of the grievance. If a resolution cannot be reached within 30 calendar days, a letter of extension will be mailed to the participant, caregiver, family member or designated representative.

We encourage you to use Ascension Living HOPE's internal grievance process so that we may address your concerns as soon as possible.

If your grievance is related to quality of care and you have Medicare; you, your caregiver, family member or designated representative may also file a written complaint to the Quality Improvement Organization for Kansas, Livanta at:

BFCC-QIO Program  
Livanta LLC  
PO Box 2687  
Virginia Beach, VA 23450

Upon admission to an Assisted Living Facility or Nursing Facility, participants may have additional grievance rights and processes to follow. These additional rights and processes should be discussed with participant, his/her caregiver, or authorized representative by staff at that time.

### **Appeals**

An appeal is a participant's action taken with respect to Ascension Living HOPE's noncoverage of, or nonpayment for, a service including denials, reductions, or termination of services that falls within the benefit package. You, your family member, or authorized representative may inform verbally or in writing any Ascension Living HOPE employee at any time that you wish to file an appeal.

All written or oral appeals will receive a first response within 72 business hours, and a final decision on the appeal within 30 days of the receipt of the written or verbal appeal, or as soon as the participant's health condition demands. If you are unhappy with the outcome of Ascension Living HOPE's appeal review you have additional appeal rights under Medicaid and Medicare, and Ascension Living HOPE will assist you in contacting one of the following agencies:

**Filing through Medicare:**

**MAXIMUS Federal Services  
PACE Appeal Project  
3750 Monroe Ave. Ste. 702  
Pittsford, New York 14534-1302  
Phone: (585) 425-5210**

**Filing through Medicaid:**

**State Fair Hearing  
Office of Administrative Hearings  
1020 S. Kansas Ave.  
Topeka, Kansas 66612  
Fax: (785) 296-4848**

**Expedited Appeal**

If you, your caregiver, or authorized representative believe that waiting to resolve the appeal for 30 days will seriously harm your health or ability to function an expedited review may take place. This review takes only 72 hours. This can only be used in cases where health services, or payment of services, are refused or discontinued. To request the expedited review, you need to tell us you want a 72 Hour Appeal Review. There are four ways to tell us you want the 72 hour review:

- 1) You may tell any Ascension Living HOPE employee at any time. They will be sure to document your request and get it to the appropriate person.
- 2) You may call (316) 858-1111, and tell the Director of Social Services or Program Administrator you would like a 72-hour or expedited review.
- 3) If you prefer to make your appeal in writing, please mail or have it delivered to:  
**Ascension Living HOPE  
Attention: Director of Social Services  
775 N. Edwards  
Wichita Kansas 67203**
- 4) You may fax your written appeal to (316) 946-5050.

**The 72-hour process will not begin until the request is received.** Ascension Living HOPE will document in writing all verbal requests. You will receive a response within 72 hours. You may request an extension of time for the 72-hour review of your appeal. If you decide that you need more time please contact us by one of the options listed above. Please note that we can only extend the 72-hour review for up to 14 calendar days.

**Ethics Committee**

Ascension Living HOPE receives guidance from the Ascension Living Ethics Committee as requested on issues that pertain to ethical dilemmas. If there is an ethical disagreement between you and the IDT regarding your plan of care, an ethics committee review may be requested. You may request a review from any Ascension Living HOPE employee at any time. The Ascension Living Ethics Committee will review the case and provide recommendations based on the Ethical and Religious Directives of the Catholic Health Care. Recommendations will be reviewed in the IDT meeting with discussion. HOPE will consider the recommendations and communicate direction to the participant and/or family.