Salish Behavioral Health
Administrative Services Organization

SALISH BH-ASO POLICIES AND PROCEDURES

Policy Name: GRIEVANCE AND APPEAL SYSTEM **Policy Number:** CA402

Effective Date: 1/1/2020

Revision Date(s): 8/28/2020; 4/30/2026

Reviewed Date: 7/16/2019; 3/27/2023; 4/22/2025

Executive Board Approval Dates: 11/1/2019; 11/20/2020; 6/3/2026

PURPOSE

To describe the Salish Behavioral Health Administrative Service Organization's (SBH-ASO) Grievance and Appeal System which includes the Grievance Process, Appeal Process, and access to the Administrative Hearing Process for contracted services.

DEFINITIONS

Action means the denial or limited authorization of an SBH-ASO contracted service based on medical necessity.

Administrative Hearing (or Fair Hearing) means an adjudicative proceeding before an Administrative Law Judge or a Presiding Officer that is governed by RCW Chapter 34.05 or the Agency's hearing rules found in WAC Chapter 182-526 and other applicable laws.

Appeal means a request for review of an Action.

Appeal Process means SBH-ASO's procedures for reviewing an Action.

Expedited appeal process Means a review process for Appeals when SBH-ASO determines or a provider indicates that taking the time for a standard resolution could seriously jeopardize the Individual's life or health or ability to attain, maintain, or regain maximum function.

Grievance means an expression of dissatisfaction about any matter other than an Action. Possible subjects for grievances may include, but are not limited to, the quality of care or services provided, aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the Individual's rights regardless of whether

remedial action is requested. Grievance includes an Individual's right to dispute an extension of time proposed by SBH-ASO to make an authorization decision.

Grievance and Appeal System means the overall system that includes Grievances and Appeals handled by SBH-ASO and access to the Administrative Hearing system.

Grievance Process means the procedure for addressing Individuals' Grievances (42 C.F.R. § 438.400(b)).

POLICY

SBH-ASO has a Grievance and Appeal System that includes a Grievance Process, an Appeal Process, and access to the Administrative Hearing Process for contracted services (WAC 182-538C-110).

SBH-ASO is responsible for accepting, responding to, and resolving non-Medicaid grievances related to the scope of work SBH-ASO is contracted with the HCA to perform.

PROCEDURE

General Grievance System Requirements

1. SBH-ASO maintains policies and procedures addressing the Grievance system, which comply with the requirements per Health Care Authority (HCA) BH-ASO contract.

    a. SBH-ASO seeks approval in writing for all Grievance and Appeal System policies, procedures, and related notices to Individuals from HCA.

2. SBH-ASO, and SBH-ASO Providers, provide Individuals any reasonable assistance necessary in completing forms and other procedural steps for Grievances and Appeals and provide information about the availability of Office of Behavioral Health Advocacy services to assist the Individual.

    a. Individuals may use the free behavioral health Behavioral Health Advocacy services. Behavioral Health Advocacy services are offered and provided independent of SBH-ASO and are offered to Individuals at any time to help them with resolving issues or problems at the lowest possible level during the Grievance, Appeal, or Administrative Hearing processes.

3. SBH-ASO shall assure that interpreter services are provided for Individuals with a preferred language other than English or for Individuals who are deaf or hearing impaired at no cost to the Individual; this includes translation/interpreting services (including American Sign Language (ASL)) and TTY/TTD and/or Washington Relay Services all free of charge.

4. The SBH-ASO ensures adequate staffing to perform the Grievances and Appeals processes. Staffing adequacy will be monitored through Quality Assurance and Compliance Committee.

5. SBH-ASO staffs a sufficient number of trained customer service representatives able to access information and resolve Grievances and triage Appeals.

6. SBH-ASO provides the following information regarding the Grievance system for GFS/FBG funded Contracted Services to all Subcontractors, including:

    a. The toll-free numbers to file oral Grievances and Appeals.

    b. The availability of assistance in filing a Grievance or Appeal.

    c. The Individual's right to file Grievances and Appeals and their requirements and timeframes for filing.

    d. The Individual's right to an Administrative Hearing, how to obtain an Administrative Hearing; and representation rules at an Administrative Hearing.

7. SBH-ASO ensures through ongoing Staff training that conflict and Grievance resolution processes are culturally and linguistically appropriate.

8. SBH-ASO will acknowledge receipt of each Grievance, either orally or in writing, within two (2) business days.

9. SBH-ASO will acknowledge in writing, the receipt of each Appeal. SBH-ASO will provide the written notice to both the Individual and requesting provider within three (3) calendar days of receipt of the Appeal.

10. SBH-ASO will ensure that decision makers on Grievances and Appeals were not involved in previous levels of review or decision-making.

11. Decisions regarding Grievances and Appeals shall be made by Health Care Professionals with clinical expertise in treating the Individual's condition or disease if any of the following apply:

    a. If the Individual is appealing an action.

    b. If the Grievance or Appeal involves any clinical issues.

12. SBH-ASO will ensure the Health Care Professional making decisions regarding Grievances and Appeals:

    a. Has clinical expertise in treating the Individual's condition or disease that is age appropriate (e.g., a board-certified Child and Adolescent Psychiatrist for a child Individual).

b. A physician board-certified or board-eligible in Psychiatry or Child or Adolescent Psychiatry if the Grievance or Appeal is related to inpatient level of care denials for psychiatric treatment.

c. A physician board-certified or board-eligible in Addiction Medicine or a Sub-specialty in Addiction Psychiatry if the Grievance or Appeal is related to inpatient level of care denials for SUD treatment.

d. Are one or more of the following, as appropriate, if a clinical Grievance or Appeal is not related to inpatient level of care denials for psychiatric or SUD treatment (ASAM 3.7):

    i. Physicians board-certified or board-eligible in Psychiatry, Addiction Medicine, or Addiction Psychiatry;

    ii. Licensed, doctoral level clinical psychologists; or

    iii. Pharmacists.

Grievance Process

The following requirements and procedures are specific to SBH-ASO Grievance process:

1. Only an Individual or the Individual's authorized representative may file a grievance with SBH-ASO.

    a. A provider may not file a Grievance on behalf of an Individual unless the provider is acting on behalf of the Individual and with the Individual's written consent.

2. SBH-ASO will request the Individual's written consent should a provider request an Appeal on behalf of an Individual without the Individual's written consent

3. SBH-ASO will accept, document, record, and process Grievances forwarded by HCA.

4. SBH-ASO will provide a written response to HCA within three (3) business days to any constituent Grievance. For the purpose of this subsection, "constituent Grievance" means a complaint or request for information from any elected official or agency director or designee.

5. SBH-ASO will assist the Individual with all Grievance and Appeal processes and provide information about the availability of Behavioral Health Advocacy services to assist the Individual.

6. SBH-ASO will cooperate with any representative authorized in writing by the Individual.

7. SBH-ASO will consider all information submitted by the Individual or authorized representative.

8. SBH-ASO will investigate and resolve all Grievances whether received orally or in writing. SBH-ASO will not require an Individual or his/her authorized representative to provide written follow up for a Grievance or Appeal SBH-ASO received orally.

9. SBH-ASO will complete the disposition of a Grievance and notice to the affected parties as expeditiously as the Individual's health condition requires, but no later than 45 calendar days from receipt of the Grievance.

10. The notification may be made orally or in writing for Grievances not involving clinical issues. Notices of disposition for clinical issues must be in writing.

11. Individuals do not have the right to an Administrative Hearing regarding the disposition of a Grievance.

Appeal Process

1. SBH-ASO has a sufficient number of behavioral health clinical peer reviewers available to conduct Appeal reviews or to provide clinical consultation on complex cases, treatment plan issues, and other treatment needs. Clinical peer reviewers may be subcontracted and can be located outside of Washington State but shall be subject to the same supervisory oversight and quality monitoring as staff located in Washington State.

2. An Individual, the Individual's authorized representative, or a provider acting on behalf of the Individual and with the Individual's written consent, may Appeal an Action.

    a. If a provider has requested an Appeal on behalf of an Individual, but without the Individual's written consent, SBH-ASO will not dismiss the Appeal without first attempting to contact the Individual within five (5) calendar days of the provider's request, informing the Individual that an appeal has been made on the Individual's behalf, and then asking if the Individual would like to continue the Appeal.

        If the Individual wants to continue the Appeal, SBH-ASO will obtain from the Individual a written consent for the Appeal. If the Individual does not want to continue the Appeal, SBH-ASO will formally dismiss the Appeal, in writing, with appropriate Individual Appeal rights and by delivering a copy of the dismissal to the provider as well as the Individual.

    b. For expedited Appeals, SBH-ASO may bypass the requirement for the Individual's written consent and obtain the Individual's oral consent. The Individual's oral consent shall be documented in SBH-ASO's records.

3. If HCA receives a request to Appeal an Action of SBH-ASO, HCA will forward relevant information to SBH-ASO and SBH-ASO will contact the Individual with information that a provider filed an appeal.

4. For Appeals of standard service authorization decisions, an Individual, or a provider acting on behalf of the Individual, must file an Appeal, either orally or in writing, within 60 calendar days of the date on SBH-ASO's Notice of Action. This also applies to an Individual's request for an expedited Appeal.

5. Oral inquiries seeking to Appeal an Action shall be treated as Appeals, and be confirmed in writing, unless the Individual or provider requests an expedited resolution. The appeal acknowledgement letter sent by SBH-ASO to an Individual shall serve as written confirmation of an Appeal filed orally by an Individual.

6. The Appeal process shall provide the Individual a reasonable opportunity to present evidence, and allegations of fact or law in writing. SBH-ASO will inform the Individual of the limited time available for this in the case of expedited resolution.

7. The Appeal process provides the Individual and the Individual's representative opportunity, before and during the Appeals process, to examine the Individual's case file, including medical records, and any other documents and records considered during the Appeal process.

8. The Appeal process includes as parties to the Appeal, the Individual and the Individual's representative, or the legal representative of the deceased Individual's estate.

9. In any Appeal of an Action by a Subcontractor, SBH-ASO or its Subcontractor applies SBH-ASO's own clinical practice guidelines, standards, protocols, or other criteria that pertain to authorizing specific services.

10. SBH-ASO resolves each Appeal and provides notice, as expeditiously as the Individual's health condition requires, within the following timeframes:

    a. For standard resolution of Appeals, and for Appeals for termination, suspension or reduction of previously authorized services a decision must be made within 14 calendar days after receipt of the Appeal, unless SBH-ASO notifies the Individual that an extension is necessary to complete the Appeal; however, the extension cannot delay the decision beyond 28 calendar days of the request for Appeal.

    b. For any extension not requested by an Individual, SBH-ASO must give the Individual written notice of the reason for the delay.

    c. For expedited resolution of Appeals or Appeals of behavioral health drug authorization decisions, including notice to the affected parties, no longer than three (3) calendar days after SBH-ASO receives the Appeal.

11. SBH-ASO will provide notice of resolution of the Appeal in a language and format which is easily understood by the Individual. The notice of the resolution of the Appeal shall:

    a. Be in writing and sent to the Individual and the requesting provider. For notice of an expedited resolution, SBH-ASO will also make reasonable efforts to provide oral notice.

    b. Include the date completed and reasons for the determination.

    c. Include a written statement of the reasons for the decision, including how the requesting provider or Individual may obtain the review or decision-making criteria.

    d. For Appeals not resolved wholly in favor of the Individual:

        i. Include information on the Individual's right to request an Administrative Hearing and how to do so.

Expedited Appeals Process

1. SBH-ASO has an expedited Appeal review process for Appeals when SBH-ASO determines or a provider indicates that taking the time for a standard resolution could seriously jeopardize the Individual's life or health or ability to attain, maintain, or regain maximum function.

2. The Individual may submit an expedited Appeal either orally or in writing. No additional Individual follow-up is required.

3. SBH-ASO will make a decision on the Individual's request for expedited Appeal and provide written notice, as expeditiously as the Individual's health condition requires, within three (3) calendar days after SBH-ASO receives the Appeal. SBH-ASO will also make reasonable efforts to provide oral notice.

4. SBH-ASO may extend the timeframes by up to 14 calendar days if the Individual requests the extension; or SBH-ASO shows there is a need for additional information and how the delay is in the Individual's interest.

5. For any extension not requested by an Individual, SBH-ASO must give the Individual written notice of the reason for the extension.

6. SBH-ASO will ensure that punitive action is not taken against a provider who requests an expedited resolution or supports an Individual's Appeal.

7. If SBH-ASO denies a request for expedited resolution of an Appeal, it shall transfer the Appeal to the timeframe for standard resolution and make reasonable efforts to give the Individual prompt oral notice of the denial and follow up within two (2) calendar days with a written notice of denial.

Administrative Hearing

1. Only the Individual or the Individual's authorized representative may request an Administrative Hearing. A provider may not request an Administrative Hearing on behalf of an Individual.

2. If an Individual does not agree with SBH-ASO's resolution of an Appeal, the Individual may file a request for an Administrative Hearing within 120 calendar days of the date of notice of the resolution of the Appeal. SBH-ASO will not be obligated to continue services pending the results of the Administrative Hearing.

3. If the Individual requests an Administrative Hearing, SBH-ASO will provide to HCA and the Individual, upon request, and within three (3) business days, all Contractor-held documentation related to the Appeal, including, but not limited to: transcript(s), records, or written decision(s) from participating providers or delegated entities.

4. SBH-ASO is an independent party and is responsible for its own representation in any Administrative Hearing, Board of Appeals, and subsequent judicial proceedings.

5. SBH-ASO's Behavioral Health Medical Director or designee shall review all cases where an Administrative Hearing is requested and any related Appeals.

6. The Individual must exhaust all levels of resolution and Appeal within SBH-ASO's Grievance System prior to filing a request for an Administrative Hearing with HCA.

7. SBH-ASO will be bound by the final order, whether or not the final order upholds SBH-ASO's decision.

8. If the final order is not within the purview of this Contract, then HCA will be responsible for the implementation of the final order.

9. The Administrative Hearings process includes as parties to the Administrative Hearing, SBH-ASO, the Individual and the Individual's representative, or the legal representative of the deceased Individual's estate, and HCA.

Petition for Review

Any party may Appeal the initial order from the Administrative Hearing to HCA Board of Appeals in accordance with WAC Chapter 182-526. Notice of this right shall be included in the Initial Order from the Administrative Hearing.

Effect of Reversed Resolutions of Appeals and Administrative Hearings

If SBH-ASO's decision not to provide Contracted Services is reversed, either through a final order of the Washington State Office of Administrative Hearings or the HCA Board of Appeals, SBH-ASO will provide the disputed services promptly, and as

expeditiously as the Individual's health condition requires.

Recording and Reporting Grievances, Adverse Authorization Determinations, and Appeals

SBH-ASO maintains records of all Grievances, Adverse Authorization Determinations including Actions, and Appeals.

SBH-ASO will retain all records for a period of no less than 10 years after the completion of the grievance process.

1. The records include Grievances, Adverse Authorization Determinations including Actions, and Appeals handled by delegated entities, and all documents generated or obtained by SBH-ASO in the course of these activities.

2. SBH-ASO will provide separate reports to HCA, quarterly using the *Grievance, Adverse Authorization Determination, Appeals, and Administrative Hearings* reporting template. The reports are due: January 15 (October through December); April 15 (January through March); July 15 (April through June); and October (July through September).

3. SBH-ASO is responsible for maintenance of records for and reporting of these activities handled by delegated entities.

4. Reports that do not meet the Grievance and Appeal System reporting requirements shall be returned to SBH-ASO for correction. Corrected reports will be resubmitted to HCA within 30 calendar days.

5. The report medium shall be specified by HCA.

6. Reporting of Grievances shall include all expressions of Individual dissatisfaction not related to an Action. All Grievances are to be recorded and counted whether the Grievance is remedied by the Contractor immediately or through its Grievance and quality of care service procedures.

Grievance and Appeal System Terminations

When available resources are exhausted, any Appeals or Administrative Hearings related to a request for authorization of a non-Crisis Contracted Service will be terminated since non-Crisis Services cannot be authorized without funding regardless of medical necessity.

After termination of its contract with the HCA, the SBH-ASO will remain obligated to provide the administrative services associated with Individual Appeals provided to Individuals prior to the effective date of termination under the terms of the prior contract.

Grievance & Appeal Process for Medicaid Enrollees

The Managed Care Organizations (MCO) retain and do not delegate to SBH-ASO the

responsibility for responding to and resolving Grievances and Appeals for Medicaid Enrollees. SBH-ASO will transfer and refer any Grievance or Appeal for Medicaid Enrollees to the MCO with which the Individual is enrolled no later than the end of the next business day following the date of receipt, irrespective of whether such Grievance is related to the SBH-ASO, a SBH-ASO sub delegate, an MCO, or a Behavioral Health Agency (BHA).

Upon the MCO's request, SBH-ASO will provide all reasonable assistance to the MCO in its investigation and resolution of a Medicaid Grievance or Appeal. The MCO will be responsible for providing the notice of the resolution of a Medicaid Grievance or Appeal to the affected member or provider.

Grievance and Appeal System Monitoring

SBH-ASO monitors its adherence to this Policy. Any discrepancies identified (e.g., deviance from expected timelines, Behavioral Health Advocate input, or HCA feedback) will be addressed by the Quality Assurance and Compliance Committee.