



GRIEVANCE AND APPEAL PROCESS

Salish Behavioral Health Administrative Services Organization

Grievance Process

You can file a grievance if you are not happy with the way you were treated, the quality of care or services you received, or you have problems getting care. If you need help filing a grievance, call (360) 337-7050 or toll free at 1-800-525-5637, or if you have a machine for telephone calls because you do not hear well, please call TTD/TTY: 711. To file a grievance, contact:

Name: Salish Behavioral Health Administrative Services Organization (SBH-ASO)

Phone: (360) 337-7050 or toll free at 1-800-525-5637

Address: 614 Division Street, MS-23

City State Zip: Port Orchard, WA 98366

Fax: 360-337-5721

We will keep your grievance private. We will let you know we received your grievance within two business days. We will try to take care of your grievance right away. We will resolve your grievance within 45 days and tell you how it was resolved.

Appeal Process

An appeal is a request to review a denied service or referral. You can appeal our decision if a service was denied, reduced, or ended early. Below are the steps in the appeal process:

STEP 1: SBH-ASO

STEP 2: State Administrative Hearing

STEP 3: Health Care Authority (HCA) Board of Appeals Review Judge

STEP 1 – SBH-ASO Appeal

You have 60 calendar days after the date of our denial letter to ask for an appeal. You or your representative may request an appeal or may submit information about your case over the phone or in writing. You may fax the information to (360) 337-5721. Within 72 hours, we will let you know in writing that we got your appeal. We can help you file your appeal. If you need help filing an appeal, call (360) 337-7050 or toll free at 1-800-525-5637.

You may choose someone, including a lawyer or provider, to represent you and act on your behalf. You must sign a consent form allowing this person to represent you. We do not cover any fees or payments to your representatives. That is your responsibility.

Before or during the appeal, you or your representative may look at your file, medical records, or other documents considered in the appeal. If you want copies of the guidelines we used to make our decision, we can give them to you. We will keep your appeal private. We will send you our decision in writing within 14 calendar days, unless we tell you we need more time. Our review will not take longer than 28 calendar days, unless you give us written consent.

STEP 2 – State Administrative Hearing

If you disagree with our decision, you can ask for a State Administrative Hearing. You must complete our appeal process before you can have an administrative hearing. You must ask for a hearing within 120 calendar days of the date on the appeal decision letter. When you ask for a hearing, you need to say what service was denied, when it was denied, and the reason it was denied. Your provider may not ask for a hearing on your behalf. To ask for an Administrative Hearing, contact:



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Office of Administrative Hearings

Phone: 1-800-583-8271

P.O. Box 42489, Olympia, WA 98504-2489

You may consult with a lawyer or have another person represent you at the hearing. If you need help finding a lawyer, check with the nearest Legal Services Office or call the NW Justice CLEAR line at 1-888-201-1014 or visit their website at www.nwjustice.org.

STEP 3 – Health Care Authority (HCA) Board of Appeals

You can ask for a final review of your case by the HCA Board of Appeals Review Judge. Notice of this right shall be included in the Initial Order from the Administrative Hearing. The decision of the HCA Board of Appeals is final. To ask for this review contact:

HCA Board of Appeals

P.O. Box 42700

Olympia, WA 98504-2700

Phone: (360) 725-0910

Toll-free: (844) 728-5212

Fax: (360) 507-9018

Expedited (faster) Decisions: If you or your provider think waiting for a decision would put your health at risk, you may ask for an expedited (faster) appeal or Administrative Hearing. Information you think we need to look at must be given to us quickly. We will review your request and make a fast decision. If we decide your health is not at risk, we will let you know, and we will follow the regular timeframe to make our decision.

Funding for some services is Limited by Available Money: Services paid by State Only or Federal Block Grant dollars are limited. If the money runs out, we cannot approve the service for you even if we agree the service is needed. If you are in the middle of an appeal or administrative hearing when the money runs out, we cannot continue the process.

Other Information

Billed for services: If you get a bill for services call (360) 337-7050 or toll free at 1-800-525-5637.

Regional BH-ASO Ombuds

The Ombuds is someone that can help you with questions and filing grievances. For help, contact:



BRIDGES Behavioral Health Ombuds Service

(360) 692-1582 or toll free at 1-888-377-8174

9004 Washington Ave

Silverdale, WA 98383

www.kitsapdrc.org