



Grievances, Appeals, & Fair Hearings- Quick Guide

There are processes in place for individuals receiving services from The Right Door who are not satisfied with the services or who do not agree with the services being denied, reduced or terminated. This is to ensure quality of care and to give individuals a voice in their own treatment.

Individuals should be notified of their grievance and appeal rights 1) annually as part of person centered planning process, 2) whenever there is an action or change to the Individual Plan of Service, and 3) whenever an individual expresses a concern that is not resolved by the end of the conversation. Grievances and appeals are filed with The Right Door Customer Service at (616) 527-1790 or CustomerService@rightdoor.org

A grievance (complaint), appeal, or fair hearing can be filed by an individual receiving services, guardian, parent of a minor, authorized representative, or provider if requested by the individual and confirmed in writing.

Key Terms

Action: a decision that adversely impacts an individual's claims for services due to:

- Denial or limited authorization of a requested service
- Reduction, suspension or termination of a previously authorized service
- Denial, in whole or in part, of payment for a service
- Failure to make an authorization decision within 14 calendar days or 3 business days (expedited)
- Failure to provide services within 14 calendar days of agreed upon start date
- Failure to act on a request for a local appeal within 45 calendar days or 3 business days (expedited)
- Failure to provide disposition of a grievance within 60 calendar days

Adequate Notice is used for *denial of a requested service or a denial of a new authorization* and must be given at the time an action takes effect or at the time of the signing of the IPOS, within 14 days (standard) or 3 days (expedited.)

Advance Notice is used for reduction, suspension or termination of a service *currently being provided* and must be given 12 calendar days before an action (Medicaid) or 10 business days before an action (Non-Medicaid.)

Grievances (Complaints)

A **grievance** is an individual's expression of dissatisfaction about **any** matter related to services, other than an adverse action (defined above) and not involving a rights complaint. Examples of grievances:

- "My therapist ended my appointment 20 minutes early"
- "I'm not satisfied with my case manager and I want to transfer to another agency"
- "The waiting room is dirty"
- "I don't feel like the psychiatrist listens to my input or suggestions"
- "I don't agree with my PCP"
- "My therapist is always booked up"

When a grievance is filed, individuals will receive a letter acknowledging their concern. The Right Door Customer Services will look into the issue and provide written disposition within 60 days.

Appeals

An **appeal** is a challenge to an action (see reverse side for definition) and a request for a review of that action. Examples:

- “My son had a screening for services, but they said he doesn’t meet medical necessity. I don’t agree.”
- “I used to receive CLS 6 hours a week, but in my new IPOS they only gave me 4 hours. I still need 6 hours.”
- “I got a letter stating that I am no longer receiving services due to “no-shows.” I only didn’t show up because there was no flexibility with appointment times.”

Types of appeals include:

- **Local Appeal:** Individuals must request a local appeal within 45 calendar days from the date of notice of the adverse action. Staff who make decisions on the appeal were not involved in any previous review or decision-making on the current issue and are health care professionals with appropriate clinical expertise. Appeals are reviewed within 45 calendar days (Medicaid) or within 15 business days (Non-Medicaid.) Individuals will receive an acknowledgement letter and a disposition letter with the outcome of the appeal.
- **Medicaid Fair Hearing:** A Medicaid beneficiary who has received notice of an action has the right to request a State Fair Hearing with a MDHHS Administrative Law Judge (ALJ). A Medicaid Fair Hearing must be requested within 90 calendar days of the date of the notice of action.
- **Alternative Dispute Resolution Process:** For individuals not enrolled in or eligible for Medicaid, there are state-level appeal rights known as the Alternative Dispute Resolution Process. The individual must first file a local appeal. If still dissatisfied, they must make the request within 10 business days of the local appeal outcome, and MDHHS shall complete its review of the dispute within 15 business days.

Other Processes available:

- **Second Opinions** are available for the denial of psychiatric inpatient hospitalization or denial of access into the mental health system for individuals not receiving The Right Door services.
- The **Recipient Rights** office is available to process complaints involving Rights protected under the Mental Health Code. Individuals may file a Rights Complaint and a grievance or appeal at the same time.

Medicaid Fair Hearings

- To request a hearing, individuals fill out a form or write their own request and send to the Michigan Administrative Hearing System (MAHS) or to The Right Door Customer Services. This request form is mailed along with the notice of denial, reduction, termination or suspension of services or is available at the front desk. Individuals may have an attorney, advocate, or friend/family represent them at the hearing.
- After MAHS receives the request, a notice of the date, time, and location of the hearing is mailed to the individual and to The Right Door Customer Services within a couple of weeks. Customer Services will reach out to staff involved to let them know about the hearing and next steps that need to be taken.
- Hearings are recorded and conducted as a phone conference at The Right Door office. The Administrative Law Judge will call the hearing to order and explain what will happen. The individual or representative requesting the hearing will have the opportunity to tell the judge the reason for requesting the hearing and can present evidence supporting their case. The Right Door representatives will explain the agency’s reasons for the action and present supporting evidence. Each party will be allowed to present questions and witnesses. Decisions are not made on the day of the hearing—a written decision will be mailed to the parties within a couple of weeks.