Important Changes to Medicaid Managed Care and Medicaid Managed Long Term Care Enrollees’ Appeal and Fair Hearing Rights

Procedures Prior to May 1, 2018:

• Enrollee is entitled to written notice at least 10 days before the plan says it will reduce or stop any services.

• Enrollee has 60 days to request a State Fair Hearing. May request online, via fax or mail, or by telephone.

• Enrollee has the option of requesting an Internal Plan Appeal, either before or concurrently with the request for a State Fair Hearing. Requesting an Internal Plan Appeal does not toll the 60 day deadline to request a State Fair Hearing.

• Enrollee must request a State Fair Hearing within 10 days of the adverse determination in order to receive aide continuing upon request. Enrollee must explicitly request aide continuing in order to receive services unchanged while the hearing is pending.

• Enrollee may request a State Fair Hearing without receiving any Notice from their Plan in some circumstances.

New Procedures, Effective May 1, 2018:

• Enrollee is entitled to written notice at least 10 days before the plan says it will reduce or stop any services (this is unchanged).

• EXHAUSTION REQUIREMENT: Enrollee MUST first request an Internal Plan Appeal and receive a Final Adverse Determination BEFORE requesting a State Fair Hearing. Enrollee has 60 days to make this request.

• Enrollee may request an Internal Plan Appeal orally via telephone, but must follow up an oral request with a written request by mail or fax. Enrollee must give written authorization to anyone requesting an appeal on their behalf, or the appeal may not be processed.

• Aide Continuing must be requested twice during the appeals process – you must request aide continuing directly from the plan before the proposed reduction or denial goes into effect – essentially, Enrollees have approximately 10 days to request aide continuing at this stage. Once you receive a Final Adverse Determination from the Plan, you must again request aide continuing from OTDA when you request a State Fair Hearing. This request must also occur within 10 days of the Final Adverse Determination, even though you have 120 days to request a Fair Hearing.

• Enrollees have 120 days to request a State Fair Hearing from the date of the Final Adverse Determination. Only Exception: if Plan fails to timely respond to Internal Plan Appeal, Enrollee may request a State Fair Hearing without receiving a Final Adverse Determination from the Plan.

➔ Note: Even if a Plan fails to issue a Notice for an action, such as a reduction in services, the Enrollee still must request an Internal Plan Appeal. If the Plan fails to process such an appeal, the Enrollee may request a State Fair Hearing and argue that ‘exhaustion’ has been deemed by the Plan’s failure to respond.

By: Kelly M. Barrett, Esq. Last revised: April 18, 2018