Grievance and Appeals

February 2024



How is a Grievance Filed?

What is a grievance?

Any expression of dissatisfaction

When can a grievance be filed?

Anytime you are dissatisfied with your Wellpoint services

Who can file a grievance?

• Member, Member Representative (with consent) or Provider on behalf of member (with consent)

How do I file a grievance?

- You or your representative can call Member Services at the phone number listed on the back of your ID card
- Use the online grievance form located at: Iowa Medicaid Health Insurance | Wellpoint, form is located at the bottom of page.
- Mail a grievance in to:
 - Grievances and Appeals Dept
 - Wellpoint Iowa
 - 4800 Westown Parkway, Ste. 200
 - Wes Des Moines, IA 50266
- Ask your provider to help you file one on your behalf



How is a Grievance Handled?

What information is needed when you file a grievance?

- Member ID, phone number and address verification
- Detailed description of issue
- Provider information if its against a provider
- Date of incident
- All related information about your grievance

What happens once Wellpoint receives your grievance?

- You will receive an acknowledgement letter within 3 business days of when we receive your grievance
- We will review and investigate your grievance
- You will receive a resolution letter within 30 calendar days of when we receive your grievance



How is an Appeal Filed?

What is an appeal?

- A request to review a denied service or referral.
- You can appeal our decision if a service was denied, reduced or ended early.

When can an appeal be filed?

• Within 60 calendar days from the date in our first denial letter (adverse benefit determination letter)

Who can file an appeal?

• You, your approved representative (with written consent), or your provider on your behalf of you (with written consent).

How do I file an appeal?

- Call: 1-800-600-4441 (TTY 711) or direct at 515-327-7012 (TTY 711)
- Fax: 1-844-400-3465
- Email: NationalMedicaidGAIntake@anthem.com
- Mail: Grievances and Appeals Department
 - Wellpoint Iowa, Inc.
 - 4800 Westown Parkway, Ste. 200
 - West Des Moines, IA 50266



How is an Appeal Handled?

What information is needed when you file an appeal?

- Member ID, phone number and address verification
- Prior Authorization reference number (listed on your denial letter)
- Name of provider
- Type of Service
- Iowa Department of Human Services Authorized Representative for Managed Care Appeals Form (470-5526) for member representatives, or provider on your behalf member appeals.
- You can send any other information to help with this review.

What happens once Anthem receives your appeal?

- We will send you a letter within three business days. The letter will let you know we got your appeal.
- We may request additional information from your doctor/provider.
- A different provider than the one who made the first decision will review your appeal.

How will I be notified?

- We'll send you and your provider a letter with the answer to your appeal
 - Within 72 hours if your appeal is expedited.
 - Within 30 calendar days from when we get your appeal if your appeal is not expedited.



How is an Appeal Handled?

What will the letter tell me?

- Let you and your provider know what we decided.
 - ✓If Overturned/Approved- Services can be scheduled/completed.
 - ✓ If Upheld/Denied- Tell you and your provider how to find out more about the decision and your rights to a fair hearing.

What do you do if you disagree with the appeal decision?

- You, your approved representative, or your provider on your behalf and with your written consent has the right to ask for a state fair hearing after you have gone through our appeal process.
- You must ask for a state fair hearing within 120 calendar days from the date on the letter from us that tells you the result of your appeal.

How to file for a State Fair Hearing?

Please mail, fax or email your appeal to:

Department of Health and Human Services

Administrative Rules and Appeals Bureau, Compliance Division

1305 E Walnut St 5th Floor

Des Moines, Iowa 50319-0114

Fax: (515) 564-4044

Email: appeals@dhs.state.ia.us



