Patient Advocacy



Resolution of Appeals

San Diego County Beneficiary Appeal Resolution Process

When an appeal is filed with the Jewish Family Service Patient Advocacy Program regarding termination or denial of services provided by inpatient facilities or behavioral health residential facilities in San Diego County, Patient Advocates must follow State and Federally required procedures to investigate and determine whether service termination or denial of services is appropriate.

The process may include:

- Obtaining written consent from the client to release information from treatment providers to Patient Advocates.
- Contacting the provider to notify them of the appeal, investigating issues through interviews, medical chart review, and if necessary, clinical consultation by an independent clinical reviewer. If the appeal is for termination of services, Patient Advocates can advocate for clients to receive Aid Paid Pending (APP) which is a federal Medicaid (Medi-Cal for California) benefit that would allow a client to continue to receive services while the appeal investigation takes place (up to 30 days). APP must be requested within 10 days of receiving the Notice of Adverse Benefit Determination (NOABD).

(Process continues on reverse)

Information & Assistance

Jewish Family Service Patient Advocacy Program (619) 282-1134 | 1-800-479-2233 www.jfssd.org/PatientAdvocacy

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Resolution of Appeals

(Process, continued from front)

 If the appeal is for a denial of services (or the reason for the termination of services is clinical in nature), we may request that a client's file is reviewed by an independent clinical consultant to determine whether the decision was clinically appropriate.

Resolution of Appeals

- Resolution of an appeal must occur within 30 days of the initial request.
- Resolution of the appeal will result in a letter summarizing the investigation process and will be sent to the client, San Diego County Health and Human Services (Quality Assurance Unit), and the treatment provider.
- If the investigation reveals a violation of clients' rights, the Patient Advocacy Program may make a request to work with the facility (through a Plan of Correction) to create changes which will ensure compliance with clients' rights statutes.
- Appeal Denied/Upheld = Facility had good cause to discharge client, the NOABD is valid/accepted.
- Appeal Overturned = NOABD at time of issuance was not valid/appropriate, client may choose to stay in program if currently meeting medical necessity.





COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY

The Patient Advocacy Program is funded by the County of San Diego

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