

NORTHWEST IOWA CARE CONNECTIONS APPEAL PROCESS

According to IAC 441-25.21(1)I.(1) Individuals, families, individual representatives (with the consent of the individual), and providers may appeal the decisions of the region or any of its designees or contractors at any time. Such individuals or organizations may also file a grievance about the actions or behavior of a party associated with the regionally managed system of care at any time.

How to Appeal:

If you wish to appeal, you must complete an appeal form and return it to the Northwest Iowa Care Connections Office listed on the Notice of Decision (NOD) within ten (10) working days of receipt.

Reconsideration - The Northwest Iowa Care Connections' Staff person who sent the Notice of Decision will review your appeal and/or grievance. After reviewing your appeal, this Northwest Iowa Care Connections' Staff will contact you not more than five (5) working days after the written appeal is received. This Northwest Iowa Care Connections' Regional staff person will collect additional information from you and other sources, if necessary and consent is given from you to gather more information. Following a review of additional information and all relevant facts, a written decision is issued no later than five (5) working days following this contact with you. A copy of the decision is sent to you and/or your representative by regular mail.

Administrative Review - If no resolution is agreed upon through this Reconsideration step, then you can arrange a meeting with the Northwest Iowa Care Connections Chief Executive Officer (CEO) within ten (10) working days of the final decision of the Reconsideration step. You will be notified of the meeting time, day, and location of this meeting with the CEO by regular mail.

The Northwest Iowa Care Connections CEO will discuss the facts of the decision and will consider additional information you submit that is relevant to the appeal. A written decision is issued no later than five (5) working days following the date of this meeting. A copy of the decision is sent to you and/or your representative by regular mail.

If a resolution is not agreed upon through Administrative Review, then you can pursue a hearing through a state Administrative Law Judge (ALJ). The decision of the state ALJ shall be the final decision.

Northwest Iowa Care Connections does not pay legal fees for you. If you cannot afford legal representation, you may contact Legal Services of Iowa at 1-800-532-1275 or <http://www.iowalegalaid.org/>

Expedited Appeals Process (IAC 441-25.21(1)I.2) This appeals process is performed by a mental health professional who is either the Administrator of the Division of Mental Health and Disability Services of the Iowa Department of Human Services or the Administrator's designee. The process is used when the decision of Northwest Iowa Care Connections concerning your care varies from the type and amount of service identified to be necessary when a clinical determination is made by a mental health professional who believes that the failure to provide the type and amount of service identified could cause an immediate danger to the individual's health and safety.

Please use the written appeal forms attached to the Notice of Decision form.

1. This appeal shall be filed within 5 days of receiving the Northwest Iowa Care Connections Notice of Decision. The expedited review by the Division Administrator or designee shall take place within 2 days of receiving the request, unless more information is needed. There is an extension of 2 days from the time the new information is received.
2. The Administrator issues an order, including a brief statement of findings of fact, conclusions of law, and policy reasons for the order, to justify the decision made concerning the expedited review. If the decision concurs with the contention that there is an immediate danger to the individual's health or safety, the order identifies the type and amount of service, which is provided for the individual. The Administrator or designee gives such notice as is practicable to individuals who are required to comply with the order. The order is effective when issued.
3. The decision of the Administrator or designee shall be considered a final agency action and is subject to judicial review in accordance with section 17A.19.

TO: Northwest Iowa Care Connections

The reason for this appeal is:

I, therefore, respectfully make application for a review by the Northwest Iowa Care Connections of the grievance as stated above.

DATE: _____

SIGNATURE OF APPELLANT: _____

ADDRESS: _____

TELEPHONE (if applicable): _____