

I. Grievance Process

A grievance is defined as a written or oral expression of dissatisfaction with service delivery or quality of care furnished.

All of us at Lutheran Senior LIFE at Jersey City share the responsibility for assuring that you are satisfied with the care you receive. We understand that sometimes there are areas of dissatisfaction that require our attention and response. If you are dissatisfied, we encourage you to express any complaints or concerns you may have. If you do not speak English, we will ensure an individual who speaks your language will facilitate the grievance process.

Lutheran Senior LIFE at Jersey City will discuss the grievance with you and provide you with written information about the specific steps that will take place to resolve your grievance. You or your designated representative can discuss your concerns or send a letter expressing them to any member of the staff or administration of Lutheran Senior LIFE at Jersey City. All services will be continued during the grievance process.

The staff member who receives your grievance will forward it to the Lutheran Senior LIFE at Jersey City Quality Assurance Director who sees that action is taken. You will receive a written acknowledgment of the grievance within five (5) working days of receiving it.

If a solution is found by the staff and agreed upon by you or designated representative within thirty (30) working days, the grievance will be considered resolved. Following resolution of the grievance, a copy of the report will be sent to you or your designated representative.

Grievance Review External Options

If you are still dissatisfied with the outcome you may pursue further steps which include an external grievance review option by contacting by phone or in writing:

New Jersey Department of Health
Division of Health Facilities, Survey and Field Operations (HFS&FO)
PO Box 367
Trenton, NJ 08625-0367

At any time you may contact the Compliant Hotline for the public by calling:

Complaint Hotline: 1-800-792-9770

OR

If you are 60 years of age or older, you may contact:

Office of Ombudsman: 1-877-582-6995 or (609) 943-3429

II. Appeal of Coverage and Payment Denials

An appeal is defined as a participant's and/or designated representative action with respect to Lutheran Senior LIFE at Jersey City non-coverage of, or non-payment for a service including denials, reductions or termination of services. Lutheran Senior LIFE at Jersey City's decision to involuntarily disenroll a participant may also be appealed.

You have a right to appeal a denial of enrollment, treatment decisions made by Lutheran Senior LIFE at Jersey City or its contracted providers, including decisions not to authorize or pay for items and services which you believe are covered by Lutheran Senior LIFE at Jersey City.

An appeal may be expressed either orally or in writing to any staff member at any time and you will be given an opportunity to present evidence related to the appeal in person or in writing.

The appeals process will be reviewed with you or your designated representative at enrollment, at least annually, and any time the Team denies any request for service or payment. You will be assisted to complete an appeal by Lutheran Senior LIFE at Jersey City if you choose to do so.

Lutheran Senior LIFE at Jersey City will continue to furnish disputed services to Medicaid participants until issuance of the final determination if the following conditions are met:

- a. Lutheran Senior LIFE at Jersey City is proposing to terminate or reduce services currently being furnished to you
- b. You request continuation of services with the understanding that you may be liable for the costs of the contested services if the determination is not made in your favor.

Note: Lutheran Senior LIFE at Jersey City is only required to continue furnishing disputed services to Medicaid participants during the appeals process.

Lutheran Senior LIFE at Jersey City will continue to furnish all other required services during the appeals process. There will be no discrimination by Lutheran Senior LIFE at Jersey City against you on the grounds that you or your designated representative filed an appeal.

Participant requests for appeal will be treated by all Lutheran Senior LIFE at Jersey City employees in a confidential manner and violations of confidentiality will result in disciplinary action.

You or your designated representative may file an appeal.

There Are Two Kinds of Appeals You Can File:

1. Standard

All appeals will be resolved as expeditiously as is required by the condition of your health, but no later than 30 days from our receipt of your appeal. You will have the opportunity to present additional evidence on your case, in person, as well as in writing. Lutheran Senior LIFE at Jersey City will provide you with a written notice of the appeal decision and reason for the denial.

If the appeal is resolved in your favor, Lutheran Senior LIFE at Jersey City will provide or pay for the disputed service immediately.

2. Expedited

Your appeal will be handled on an expedited basis if you indicated on your appeal that you believe your life, health or ability to regain or maintain maximum function could be seriously jeopardized without the disputed service.

Lutheran Senior LIFE at Jersey City will respond as expeditiously as your health condition requires, but no later than 72 hours of receipt of your appeal. Lutheran Senior LIFE at Jersey City may extend the 72 hour timeframe by up to 14 calendar days if you request an extension, or if Lutheran Senior LIFE at Jersey City can justify to the State the need for additional information and how the delay is in your best interest. You will have the opportunity to present evidence on your case, in person, as well as in writing.

How to File an Appeal

For a Standard Appeal: You or your designated representative should express your appeal verbally to a member of the staff or mail or deliver your written appeal to the address below:

Lutheran Senior LIFE at Jersey City
377 Jersey Avenue – Suite 310
Jersey City, NJ 07302
Attention: Quality Assurance Director

For an Expedited Appeal: you or your designated representative should contact us by telephone or fax:

Telephone #: (877) 543-3188 FAX #: (201) 706-2092
For the hearing impaired TTY: (800) 537-7697

If you appeal, we will review our decision and also appoint an appropriately credentialed and impartial third party who was not involved in the original action and who does not have a stake in the outcome of the appeal to review your appeal.

All appeal information will be kept confidential.

After we review this decision, if any of the services or items you requested are still denied additional appeal rights under Medicaid and Medicare are available.

Additional Appeal Rights under Medicaid or Medicare

If we do not make a decision that is in your favor, you may file an external appeal verbally or in writing through Medicare, Medicaid or the State Administrative Review Process. Lutheran Senior LIFE at Jersey City will assist you in making external appeals, including filing the appeal for you.

The Medicare program contracts with an independent review entity (IRE) to provide external review on appeals involving PACE programs like us. This review organization is completely independent of our PACE organization.

The Medicaid appeal is through the State's Fair Hearing process.

If you are enrolled in both Medicare and Medicaid, you may choose which appeals process you will use. If you wish, we can help you understand each appeals process by explaining the different processes. If you are not sure which program you are enrolled in, ask us.

Additional Appeal Rights for Private Pay Participants

The State Administering Agency conducts an independent review for participants who are not eligible for Medicaid and pay privately for a portion of PACE services.

Medicaid External Appeals Process

If you are enrolled in both Medicaid and Medicare (dually eligible), you can choose either the Medicare or Medicaid appeals process. You have the right to submit your appeal at any time.

Medicaid Fair Hearing Process

Office of Legal and Regulatory Liaison
Department of Health and Senior Services
Fair Hearing Unit
P.O. Box 712
Trenton, NJ 08652-0712
(609) 588-2655

Medicare External Appeals Process

(Cannot be used for Denials of Enrollment or Involuntary Disenrollment Appeals)

If you are enrolled in both Medicare and Medicaid (dual eligible) OR Medicare only, you may choose to appeal using Medicare's external appeals process. We will send your case file to Medicare's Independent Review Entity (IRE) for you.

If Medicare's IRE decision is in your favor and you have requested a service that you have not received, we must give you the service as quickly as your health condition requires. If you have requested payment for a service that you have already received, we must pay for the service.

If you need information or help, call us at: 1 (877) 543-3188
1-800-MEDICARE (1-800-633-4227) TTY/TTD: 1-877-486-2048

If you are eligible for **Medicare ONLY or Pay Privately** for a portion of your services, you may use the NJ Department of Human Services Administrative Review Process. This appeal process is also for those Medicare only eligible persons appealing a denial of enrollment or an involuntary discharge.

New Jersey Administrative Review Process:

New Jersey Department of Human Services
Division of Aging Services
Office of Legal and Regulatory Compliance
PO Box 715
Trenton, NJ 08625-0715
609-292-3717

