

**Policies & Procedures**

**TIME FRAMES FOR GRIEVANCES**

**Section:** Grievance Policies

**Pages:** 1

**Subject:** Time Frames for Grievances

**Effective Date:**

**Revision Date:** 08/19/2021

**POLICY**

DBH will resolve grievances within required time frames.

**PROCEDURE**

1. When an Enrollee, his/her authorized representative, or a provider with the Enrollee's consent files a Grievance, DBH will dispose of the Grievance with written notice to all affected parties as expeditiously as the Enrollee's health condition requires, but not to exceed 90 days from the day DBH receives the Grievance. An extension of up to 14 calendar days for disposition of a grievance is allowed if:
  - a. the Enrollee requests an extension, or
  - b. DBH can justify (to the Utah Department of Health upon request) the need for additional information
  - c. DBH states how the extension is in the Enrollee's interest
2. If there has been no Adverse Benefit Determination identified by staff to resolve the matter within one week, supervisors will be notified to take on resolution.
3. If DBH extends the time frame, and the Enrollee did not request the extension, DBH will give the Enrollee written notice of the reason for the delay within 2 calendar days. In addition, reasonable efforts to give the member prompt oral notice of the delay will be attempted. This written notice will include the enrollees right to specifically grieve about the extension.
4. If DBH does not resolve a Grievance within the required time frame, DBH will give the Enrollee an Adverse Benefit Determination letter at the time DBH determines the required time frame will not be met.
5. By declaring DBH's failure to provide resolution of the Grievance within the

required time frame is an Adverse Benefit Determination, the Enrollee may nowfile an Appeal.