

OEBB Complaint, Reconsideration and Administrative Review
 Policy and Procedures

EFFECTIVE DATE: December 11, 2008
 APPROVED: December 11, 2008
 REVISED DATE: September 24, 2009
 APPROVED:

POLICY/ PURPOSE:	The purpose of the OEBB Complaint, <u>Reconsideration</u> and Administrative Review Policy and Procedures is to provide a process for OEBB Members to request an administrative review relating to an eligibility or coverage issue.	Deleted: Policy Form¶
APPLICABILITY:	OEBB Members	
DEFINITIONS:	OEBB Members: Employees, former employees <u>and early</u> retirees of any participating school district, education service district, community college or charter school <u>and their eligible dependents.</u>	Deleted: and eligible
	<u>OEBB Staff: the Benefit Manager, Lead Benefit Analyst and Benefit Analysts</u>	
	OEBB <u>Management Team</u> : the Deputy Administrator and Director of Operations	Deleted: management
	OEBB Administrative Review Committee: <u>The committee made up of</u> OEBB Board members appointed by the Board Chair	Deleted: team
	<u>OAR 111-080-0030; Administrative Review Committee Charter; OEBB Board Bylaws</u>	Deleted: Administrator, Deleted: and Benefit Manager
GUIDELINES:	I. OEBB Staff, <u>the OEBB Management Team</u> and the Administrative Review Committee shall review and make determinations on Complaints, Requests for Reconsiderations and Administrative Reviews, <u>respectively</u> , efficiently and within the timeframes stated in the Procedure steps below.	Deleted: Three
	II. Determinations will be made consistently and fairly between members, employee groups and educational entities while also considering collective	Deleted: with approval of the Board members
		Deleted: These three committee members are appointed to evaluate and make the appropriate determination within their scope as defined under the Administrative Review section in this policy and in accordance with OEBB OAR's and carrier contracts.
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bargaining agreement (CBA) provisions and formal districtwide policies.

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III. Insurance benefit and claim appeals must be directed to the insurance carrier to follow their multi-level appeals process unless it is an issue that can be clarified and addressed by OEGB.

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IV. The Carrier appeals process or the OEGB Complaint and Request for Reconsideration processes must be exhausted before a complaint can be presented to the Administrative Review Committee.

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V. Administrative Review requests related to coverage of a benefit or service will be limited to a determination of whether a service or benefit was intended (by the Board) to be covered under the current contract.

Deleted: Once the OEGB complaint or carrier appeal process is completed and all levels are exhausted, the member has the right to request an Administrative Review provided the request meets the criteria in the OAR.

VI. Administrative Review requests related to enrollment or eligibility will be limited to a determination of whether: 1) OEGB staff followed established policy and procedures in a timely manner; 2) OEGB rules and policies were applied appropriately; and 3) decisions by staff were reasonable based on the information provided.

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VII. Members have the right to appear before the Administrative Review Committee and the right to representation. Administrative Reviews are held in a public meeting unless content meets exemption criteria under Oregon Public Meeting Law.

VIII. No Personal Health Information (PHI) will be requested at any time during the Complaint, Request for Reconsideration, or Administrative Review process.

IV. Questions or comments about the Complaints, Reconsideration and Administrative Review Policy and Procedures must be directed to the Benefit Manager or Lead Benefit Analyst.

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The Complaint and Request for Reconsideration procedures below apply to eligibility and enrollment related issues. The Administrative Review process follows the Complaint and Request for Reconsideration processes or the Carrier's multi-level appeals process.

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PROCEDURES:

Complaint

1. A formal Complaint is received - Complaint must be in writing and can be mailed, hand-delivered, or e-mailed to the Member Service team.

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2. The Complaint is logged into the tracking database and a file is set up within two business days from the date the complaint was received.

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3. The Benefit Analyst gathers or requests all pertinent information including information in the MyOEGB system, additional information from the Member, information from the educational entity, and information from the carrier to ensure a thorough review. The educational entity and carrier will be given 5 business days to provide the additional information.

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4. If the Benefit Analyst needs additional information from the Member, the

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Member will be given 30 calendar days to provide the additional information. Additional information is entered into the file. If the additional requested information is not received within 30 calendar days, the Complaint will be closed and the Member will be notified by certified mail within 5 business days from the date the file is closed. A Complaint closed due to an untimely response from a member may be reopened if the additional information requested is received within 10 business days of the postmarked notice of the Complaint being closed. In the event information from the educational entity or carrier is not received within 5 business days, a decision will be made based on the information OEGB has received.

5. OEGB Staff reviews the Complaint and makes a predetermination within 5 business days from the date all the information is received, or the response deadline, whichever is sooner.

6. The educational entity affiliated with the Member is notified of OEGB's predetermination and given 5 business days to provide additional information, comments, or feedback relating to the OEGB decision.

7. The Member will be notified of the decision via certified mail within 5 business days from the date a final determination is made. The written notification will include the reason for the decision and options available if the Member is not satisfied with the outcome.

Request for Reconsideration

1. The Request for Reconsideration is received, logged into the tracking database, added to the initial Complaint file, and forwarded to the OEGB Management Team within two business days of receiving. The Request for Reconsideration must be received within 30 days from the postmark date of the written Complaint Determination notification.

2. The OEGB Management Team will review the Request and identify whether additional information is needed to make a determination. If additional information is needed, OEGB Staff will contact relevant parties and obtain requested information within 5 business days.

3. If the OEGB Management Team needs additional information from the Member, the Member will be given 30 calendar days to provide the additional information. Additional information is entered into the file. If the additional requested information is not received within 30 calendar days, the Request for Reconsideration will be closed and the Member will be notified by certified mail within 5 business days from the date the file is closed. A Request for Reconsideration closed due to an untimely response from a member may be reopened if the additional information requested is received within 10 business days of the postmark notifying the Member that the Request for Reconsideration has been closed. In the event information from the educational entity or carrier is not received within 5 business days, a decision will be made based on the

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information OEBB has received,

4. The OEBB Management Team will review the Request for Reconsideration and make a determination within 5 business days from the date all the information is received, or the response deadline, whichever is sooner.

5. If additional information received will change the Complaint decision, the determination on the Request for Reconsideration will be sent to the educational entity affiliated with the Member. The educational entity will be given 5 business days to provide additional information, comments, or feedback relating to the OEBB Management Team decision.

6. The member will be notified via certified mail within 5 business days from the date a final determination is made. The written notification will include the reason for the decision and options available if the Member is not satisfied with the outcome.

Administrative Review

1. The Administrative Review Request is received, logged into the tracking database and added to the initial Complaint file within two business days. The Administrative Review Request must be received within 30 calendar days from the postmark date of the Request for Reconsideration determination or Carrier's final decision. If the Administrative Review request pertains to an eligibility or enrollment issue, then step 2 can be skipped since it only applies to carrier denials of services or benefits.

2. The OEBB Contract Officer reviews the Administrative Review Request within 5 business days from the date received to ensure it meets the criteria outlined in OAR 111-080-0030 that limits Administrative Review requests relating to denied benefits or services to a "determination of whether or not a service or benefit was intended to be covered under the current contract." The initial review will ensure the decision the carrier made complies with the contract. If the Administrative Review request does not meet the specified criteria, the Member will be notified in writing within 5 business days from the date of the OEBB Contract Officer's decision. This information will be reported to the Administrative Review Committee on a monthly basis.

3. Once it is determined the Administrative Review request meets the criteria and timelines for consideration by the Administrative Review Committee, OEBB staff will schedule an Administrative Review Committee meeting to be held within 15 business days of the determination, but no more than 30 calendar days from the date the request is received. OEBB staff will notify the Member and all applicable parties and request any additional information that may be needed allowing not less than 5 business days for a response. For requests relating to denied benefits or services, additional information gathered may include:

- Carrier coverage, limitation and exclusion information on the benefit or

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- service being appealed from all OEGB contracted carriers.
- Success rates, evidence, standard practices and other pertinent information.
- Carrier contracts and other related carrier materials and information.

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Note: No personal health information (PHI) will be gathered. When the Administrative Review is presented, it will not contain any personal information. The Member will be given a unique identification number. The unique identification number will be included in the log, file and on all documents related to the Administrative Review.

4. All information obtained will be added to the file. Information may come from the educational entity, carrier, or consultant or through staff research. Staff will document the source of all information. If additional requested information from the Member is not received within 30 days, the Administrative Review will be closed and the Member will be notified via certified mail within 5 business days from the date the Administrative Review is closed. An Administrative Review closed due to an untimely response from a member may be reopened if the additional information requested is received within 10 business days of the postmark notifying the Member that the Administrative Review has been closed. In the event information from the educational entity or carrier is not received within 5 business days, a decision will be made based on the information OEGB has received.

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5. When a request for Administrative Review is presented to the Administrative Review Committee, the Member or a representative may be present when their case is being reviewed by the Administrative Review Committee and may provide public comment to the Committee relating to the request under consideration as directed by the Committee Chair.

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All Administrative Reviews will be held in public meetings unless content is exempt under Oregon Public Meeting Law. Determinations by the Administrative Review Committee require unanimous agreement by all Committee members. If agreement can not be reached, the Administrative Review will be referred to the full Board. Decisions by the full Board shall require a majority vote.

If the Administrative Review Committee determines the benefit or service falls within the scope of the contract, the relevant carrier or carriers will be notified.

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Additional information from the carriers, consultants and staff may need to be obtained including the potential cost and premium impact. The additional information will be used by staff, consultants and the Board to determine when and how implementation will occur.

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meets the criteria as specified in the OEBB administrative rules, a collective bargaining agreement, or documented district policy, the educational entity and applicable carrier will be notified.

OEBB staff will partner with the carriers and educational entities to provide consistency wherever applicable.

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6. The member will be notified via certified mail within 5 business days of the Administrative Review Committee's determination. The written notification will include the reason for the decision and options available if the Member is not satisfied with the outcome.

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A member may appeal decisions made at the Complaint, Request for Reconsideration or the Administrative Review levels under the Oregon Administrative Procedures Act, Oregon Revised Statutes Chapter 183.

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(ORS Chapter 183 covers agency administrative reviews, contested case hearings and judicial reviews)

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, or the date in which the Educational Entity provided comments. The written notification will include the reason and outcome of the determination.

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by the Member Service team who will

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and if applicable, add to the initial Complaint file. The Administrative Review request must be received within 30 days from the date the written notification of the Request for Reconsideration or from the date the carrier appeal process is completed.

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OEBB management team will

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from the date of the OEBB management team's decision for additional information