

SAMPLE WRITTEN RESOLUTION LETTER FOLLOWING ACO/RBPO APPEALS PROCESS

[Name and address/Letterhead of Provider/Practice and/or ACO/RBPO]

[Date]

Dear Patient [or Authorized Representative],

We received your appeal on [date] requesting [state what patient is requesting, for example: a referral to a specialist who does not participate in the ACO/RBPO].

The [title of clinical reviewer] of [name of ACO/RBPO or practice] reviewed your appeal. [State the clinical reviewer's decision and a clear summary explanation of the basis for the decision including a substantive clinical justification.] The clinical reviewer considered the following information: [list of documents and information available to the patient, including a list of the patient's medical records and other documents and information relied upon in the internal appeal].

You have the right to access the documents and information relied upon in making this decision. You can obtain these documents by [instructions on how to obtain the documents].

IF DENIAL: [List the treatments, providers, or other services that are available to this patient.]

IF APPROVAL: [Describe next steps for the patient, for example: Your PCP has been instructed to submit the referral to your health insurance company. Please contact your health insurance company to ensure the referral is in place before your scheduled appointment.]

If you disagree with this decision, you may be eligible to request an external review through the Massachusetts Office of Patient Protection (OPP) at no cost to you. You have 30 days from the receipt of this notice to request an external review. If you believe that you have an urgent medical need, you may request an expedited external review. You can file a request for an external review by completing the enclosed form and faxing it to 617-624-5046 or mailing it to the address indicated on the form. The form is also available on OPP's website at www.mass.gov/hpc/opp. For more information on this process, contact OPP at:

Toll-free hotline 1-800-436-7757

Email hpc-opp@mass.gov