

HOW TO FILE A COMPLAINT OR GRIEVANCE

for Magellan Behavioral Health of Pennsylvania HealthChoices members

What is a complaint?

A complaint is when you tell us you are unhappy with Magellan or your provider. If you have a complaint about your provider, try to solve it by talking directly with them first.



Some examples of a complaint include:

- You are unhappy with the care you are getting.
- You are unhappy that you cannot get the service you want because it is not a covered service.
- You are unhappy that you have not received services that you have been approved to get.

(Magellan's providers must provide services within one hour for emergencies. If a treatment plan is approved, services must be provided according to the prescribed treatment plan.)

If you are unable to solve the concern with your provider directly, contact Magellan.

What is a grievance?

A grievance is what you file when you do not agree with Magellan's decision that a service that you or your provider asked for is not medically necessary.



You can file a grievance if Magellan does any of these things:

- Denies coverage for a service.
- Approves less than what your provider asked for.
- Approves a different service from the one that was asked for.

If Magellan does not completely approve a service for you, we will tell you in a letter. The letter will tell you how to file a first-level grievance. You have 60 days from the date you receive this letter to file a grievance.

Your provider can file a grievance for you, if you give the provider your consent in writing. Should you decide to do this, you cannot file a separate grievance on your own.

What should I do if I have a complaint or grievance?



Call Member Services in your county

Bucks - (877) 769-9784
Cambria - (800) 424-0485
Lehigh - (866) 238-2311
Montgomery - (877) 769-9782
Northampton - (866) 238-2312



Fax to
1-888-656-2380



Mail to
Magellan Behavioral Health of PA
105 Terry Dr. #103,
Newtown, PA 18940

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ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-800-424-3515 (TTY: PA Relay 7-1-1).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-424-3515 (TTY: PA Relay 7-1-1).