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| Notice of Extension of Timeframe to Make a Service Authorization DecisionInsert MCO logo |

Date mailed

Member's Name

Member/Representative's Street Address

City, State Zip Code

Waad salaaman tahay:

Warqaddan waa ogeysiis in aan kordhinay tirada maalmaha aan go'aan uga soo gaareysno  codsigaagii <<insert requested service or item>> <<insert number of days; for Family Care or Partnership, insert "14 calendar days"; for PACE, insert "5 calendar days">>. Codsigaagii hore ee <<insert requested service or item>> taariikh <<date of request>>.

Go'aanka aan gaareyno waxaan ku soo saareynaa kama-dambeys <<insert date MCO will reach a decision; see instructions below>>.

[**Directions to MCO: Insert the appropriate date above and then delete these directions.** For standard Family Care or Family Care Partnership request, insert 28th calendar day from date of request; OR for expedited Family Care or Family Care Partnership, insert the 17th calendar day from the date of request; OR for PACE standard, insert the 8th calendar day from the date of request.]

Waxaan kordhinay tirada maalmaha go'aanka sababtoo ah <<insert reason for the decision to extend the timeframe>>.

Haddii aad ka cabaneyso maalmaha lagu kordhiyey go'aanka, waxaad xaq u leedahay in aad soo dirsato cabasho, laakiin wakhtiga la dheereeyey waxaa lagu beddelayaa in laguu diiday adeeg ama waxa aad soo codsatay.

Waxaad cabashada u soo dirsan kartaa <<insert process and/or contact person for requesting a grievance>>.

Haddii aad u baahan tahay caawimaad, fadlan la soo xiriir <<MCO name>>’s Member Rights Specialist <<insert Member Rights Specialist’s contact information>>.

Waad ku mahadsan tahay dulqaadkaaga. Haddii aad wax su'aalo ah ka qabto warqaddan, fadlan ha ka labanlabeyn in aad nala soo xiriirto.

Mahadsanid,

<<Care Manager's Name>>

<<Care Manager title>>

<<Telephone Number>>

<<RN Care Manager's Name>>

<<RN Care Manager title>>

<<Telephone Number>>