



3/23/2021

FREEDOM CARE LLC
3118 QUENTIN RD
BROOKLYN, NY 11234

RE: Temporary Approval of Personal Care Services

Appeal ID: [REDACTED]
Appeal Decision Date: 1/5/2021
Enrollee ID: [REDACTED]
Authorization Number: [REDACTED]

Dear [REDACTED]

We recently discovered an issue regarding your appeal request.

Our Level 1 appeal decision was not fully in your favor and we should have sent your appeal to the Integrated Administrative Hearings Office (IAHO) to review our decision.

This letter is to notify you that due to the administrative mistake which caused the delay in sending your appeal to IAHO, at the direction of the New York State Department of Health, Healthfirst is overriding our Level 1 appeal decision and is administratively approving your request for Home Health, CDPAS. This temporary approval will take effect on 3/24/2021 and continue through the end of your current authorization of services or until your next reassessment, whichever is sooner.

If you already paid for some or all of the requested services after the Level 1 appeal decision and before 3/24/2021, we will reimburse you for covered benefits upon proof of payment. To request reimbursement, or if you have any other questions or concerns, please feel free to call us at **1-866-237-0997** (TTY 1-888-542-3821) and tell the representative you are calling about your "Temporary Approval". We are available 7 days a week, 8am–8pm (October through March), and Monday to Friday, 8am–8pm (April through September).

If we do not resolve your issue and you wish to file a complaint, you may contact the New York State Department of Health Managed Long Term Care complaint line at 1-866-712-7197.

You may also contact the Independent Consumer Advocacy Network (ICAN). ICAN is independent, and they can help answer your questions about this and other issues. Call ICAN at 1-844-614-8800. TTY users call 711, then follow the prompts to dial 844-614-8800. You can also reach them by email at ican@cssny.org, or go to their website at www.icannys.org.

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We're sorry for any inconvenience this may have caused you.

Sincerely,



Sheryl Markowitz
Senior Vice President
Clinical Operations

Coverage is provided by Healthfirst Health Plan, Inc.

Healthfirst complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-305-0408 (TTY 1-888-867-4132).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-305-0408 (TTY 1-888-542-3821)。

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