

Appeals and Grievances

Tufts Health Plan Senior Care Options (HMO-SNP) is dedicated to providing its members with comprehensive health care coverage. However, there may be times when you have concerns or problems related to your coverage or care. In these instances, you have the right to make formal complaints to Tufts Health Plan Senior Care Options and/or to request an appeal with the Board of Hearings. If you make a complaint to Tufts Health Plan Senior Care Options, we must be fair in how we handle it, and you cannot be disenrolled or penalized for your complaint.

There are two types of formal complaints you can make. They are **appeals** and **grievances**.

Appeals

An "appeal" is a complaint you make when you want us or the Board of Hearings to change a decision we have made about your health care (including a delay in providing, arranging for or approving services which you believe will negatively affect your health). You may also have a right to appeal to the Board of Hearings if you believe we took too long and failed to make a decision within the time frame for your appeal to us.

Grievances

A "grievance" is a type of complaint you can file with us about something that makes you unhappy. It can be about us or one of our network providers or a pharmacy, including a complaint about the quality of your care. If you have a grievance, we encourage you to call Customer Relations. All grievances will be documented and referred to the Appeals and Grievances Department. You can request a response in writing. All grievances related to quality of care issues will be responded to in writing, whether you request a response or not.

For more detailed information about appeals and grievances, or to file an appeal or grievance, please see your Evidence of Cover-age booklet, or call Customer Relations at **1-855-670-5934 (TTY: 711)***.

*Representatives are available Monday–Friday 8 a.m.–8 p.m. (From October 1 to March 31, representatives are available 7 days a week, 8 a.m.–8 p.m.) Tufts Health Plan is an HMO-SNP plan with a Medicare contract. Enrollment in Tufts Health Plan depends on contract renewal. Tufts Health Plan is a voluntary MassHealth (Medicaid) program in association with the Executive Office of Health and Human services (EOHHS) and the Centers for Medicare & Medicaid Services (CMS). This document may be available upon request in an alternate format such as Braille, larger print, or audio. Tufts Health Plan 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 855-670-5934 (TTY: 711). ATENÇÃO:Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 855-670-5934 (TTY: 711). H8330_2021_142_C