

Staff at San Francisco Health Plan (SFHP) is "Here for You." We can help you fill-out this form over the phone. Call us Monday through Friday at **(415) 547-7800** or **(800) 288-5555** from 8:30am to 5:30pm. Or, someone will contact you by phone or mail as soon as we receive this form. We will work closely with you to understand your complaint. We want to understand the problem and help to solve it. We will assist you in any way we can and answer any questions that you have. We can help you in any language.

We want you to know that:

- It is your right to complain. No one will "punish" you.
- You can complain about your doctor, your nurse, or San Francisco Health Plan.
- We will assist you with filing your complaint verbally or in writing.
- Every complaint is important to San Francisco Health Plan.
- Your doctor or nurse will still give you medical care while we look into your complaint.
- We try to answer serious complaints within 24 hours and in no more than 72 hours, so bad things do not happen to you while you wait for an answer.

The California Department of Managed Health Care is responsible for regulating health care service plans. If you have a grievance against your health plan, you should first telephone your health plan at (800) 288-5555 and use your health plan's grievance process before contacting the department. Utilizing this grievance procedure does not prohibit any potential legal rights or remedies that may be available to you. If you need help with a grievance involving an emergency, a grievance that has not been satisfactorily resolved by your health plan, or a grievance that has remained unresolved for more than 30 days, you may call the department for assistance. You may also be eligible for an Independent Medical Review (IMR). If you are eligible for IMR, the IMR process will provide an impartial review of medical decisions made by a health plan related to the medical necessity of a proposed service or treatment, coverage decisions for treatments that are experimental or investigational in nature and payment disputes for emergency or urgent medical services. The department also has a toll-free telephone number (888) HMO-2219

and a TDD line (877) 688-9891 for the hearing and speech impaired. The department's Internet Web site <http://www.hmohelp.ca.gov> has complaint forms, IMR application forms and instructions online."

If you are a Medi-Cal beneficiary:

You can request a State Fair Hearing. If you decide to request a hearing, you must do so within 90 days of the mailing of this notice. Please contact San Francisco Health Plan for the forms that you need. They are also available from the San Francisco Department of Social Services.

Information about the State Fair Hearing process is also available by writing:

California Department of Social Services (CDSS)

State Hearing Division
PO Box 944243,
MS 19-37
Sacramento, CA 94244-2430

Or by calling **(800) 952-5253**. The TDD number is **(800) 952-8349**.

You have a right to examine the materials that make up the record for the State Fair Hearing decision. Any information you provide may be shared with the Department of Social Services or with the United States Department of Health and Human Services. You can locate your record by contacting the Public Inquiry and Response Unit at **(800) 952-5253**. The Public Inquiry and Response Unit also can help you find someone to represent you at the hearing, or you can ask someone to represent you, or represent yourself.

The State of California Office of the Ombudsman will also help you with your grievance and State Fair Hearing. You can call them, toll-free, at **(888) 452-8609**. The TDD number is **(800) 952-8349**. Its office hours are Monday-Friday, 8:00am to 5:00pm, closed on State holidays.