

Neighborhood Health Plan of Rhode Island (Neighborhood) has a comprehensive process to review and respond to clinical appeals. The table below shows the levels of appeal available for each Neighborhood line of business. Providers must complete a [Provider Clinical Appeal Form](#) and return it to Neighborhood's Grievance and Appeals Unit (GAU) according to the stated timeframes. For more information, please refer to the [Neighborhood Provider Manual](#).

Line of Business	Internal Appeal		Next Level/External Appeal, if available
Product	Filing Timeline	Decision	Filing Timeline
<b>Medicaid</b>	60 calendar Days from initial decision	72 hours for expedited 30 days for standard	<ul style="list-style-type: none"> <li>Qualified Cases*: Request external appeal within four (4) months of appeal denial letter; and/or</li> <li>Request a State fair hearing within 120 calendar days of appeal denial letter</li> </ul>
<b>Commercial - Health Benefits Exchange (HBE)</b>	180 calendar days from initial decision	<b>Medical:</b> 72 hours for expedited <b>Pharmacy:</b> 24-72 hours for expedited 30 days for standard	<ul style="list-style-type: none"> <li>Qualified Cases* Request external appeal within four (4) months of appeal denial letter</li> </ul> <p>* a fee may apply for HBE external reviews</p>
<b>INTEGRITY - MMP Part C</b>	60 calendar days from initial decision	72 hours for expedited 30 days for standard	<p><u>For Medicare only and overlap services:</u></p> <ul style="list-style-type: none"> <li>Appeals are auto forwarded to MAXIMUS if upheld by GAU</li> </ul> <p><u>For overlap and Medicaid only services:</u></p> <ul style="list-style-type: none"> <li>Qualified Cases*: Request external appeal within four (4) months of appeal denial letter; and/or</li> <li>Request a State fair hearing within 120 calendar days of appeal denial letter</li> </ul>
<b>INTEGRITY - MMP Part B</b> Pre-service appeals (Part B = "buy and bill" drugs)	60 calendar days from Pharmacy decision letter	72 hours for expedited 7 days for standard	<ul style="list-style-type: none"> <li>All Part B appeals are auto-forwarded to MAXIMUS if upheld by GAU</li> </ul>
<b>INTEGRITY - MMP Part D</b> (Handled by CVS Caremark)	60 calendar days from initial decision	72 hours for expedited 7 days for standard	<ul style="list-style-type: none"> <li>Member or provider must request external appeal directly with MAXIMUS within 60 calendar days of appeal denial letter</li> </ul>
<i>All appeal filing deadlines, appeal levels, turnaround times, and external appeal review rules are compliant with applicable regulations and Neighborhood policy. Absence of the required form(s) or no response to the requests sent by GAU will result in dismissal of appeal.</i>			

**GAU Fax Number:** (401) 709-7005

**GAU Email:** [GAUMailbox@nhpri.org](mailto:GAUMailbox@nhpri.org)

\*External appeal process is only available when a clinical decision has been rendered on the internal appeal.

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