



Behavioral Health  
Emi Botzler-Rodgers, MFT, Director  
720 Wood Street, Eureka, CA 95501  
phone: (707) 268-2990 | fax: (707) 476-4049

## NOTICE OF ADVERSE BENEFIT DETERMINATION—GRIEVANCE OR APPEAL RESOLUTION

### About Your Grievance or Appeal

Date

Beneficiary's Name  
Address  
City, State Zip

Treating Provider's Name  
Address  
City, State Zip

RE: Service requested

Our records show that you filed a grievance or appeal with the Humboldt County Mental Health Plan on date filed. Unfortunately, the Humboldt County Mental Health Plan did not finish reviewing the grievance or appeal within the required timeline.

We apologize for the delay in processing your grievance or appeal. We are working on it and will provide you with a decision as soon as possible.

You may appeal this decision if you think it is incorrect. The enclosed "Your Rights" information notice tells you how. It also tells you where you can get help with your appeal. This also means free legal help. You are encouraged to send with your appeal any information or documents that could help your appeal. The enclosed "Your Rights" information notice provides timelines you must follow when requesting an appeal.

The Plan can help you with any questions you have about this notice. For help, you may call Humboldt County Mental Health Plan between 8:00 AM and 5:00 PM at 707-268-2955. If you have trouble speaking or hearing, please call TTY/TTD number 1-800-735 2922.

If you need this notice and/or other documents from the Plan in an alternative communication format such as large font, Braille, or an electronic format, or, if you would like help reading the material, please contact Humboldt County Mental Health Plan by calling 707-268-2955.



DHHS Administration  
phone: (707) 441-5400  
fax: (707) 441-5412

Public Health  
phone: (707) 445-6200  
fax: (707) 445-6097

Social Services  
phone: (707) 476-4700  
fax: (707) 441-2096

If the Plan does not help you to your satisfaction and/or you need additional help, the State Medi-Cal Managed Care Ombudsman Office can help you with any questions. You may call them Monday through Friday, 8am to 5pm PST, excluding holidays, at 1-888-452-8609.

This notice does not affect any of your other Medi-Cal services.

Signature Block

Enclosed:   Your Rights  
              Language Assistance Taglines  
              Beneficiary Non-Discrimination Notice

*(Enclose notices with each letter)*

