

Ombudsman for State Managed Health Care Programs

Helping people who have Medical Assistance or MinnesotaCare and are in a health plan

The ombudsman helps enrollees get needed health care and resolve billing problems. The ombudsman provides information and assistance with the managed care grievance and appeal process available through the health plan and the state.

What is an ombudsman?

- A problem solver
- A neutral investigator
- An advocate for fair and equal treatment.

What can the managed care ombudsman do?

- Help you identify issues and possible solutions
- Help you know your rights
- Investigate complaints
- Negotiate with your health plan to help you get the care you need
- Resolve billing issues
- Explain how to file a grievance, appeal or state fair hearing
- Help you navigate the health care system.

When should I call an ombudsman for help?

- You are not getting the care that you need
- You are getting bills that you think your health plan should pay
- You cannot solve a problem by talking to your health care provider or health plan
- You do not know how to make a complaint.

What other options are there to resolve problems with my health plan?

- You can file an appeal. An appeal is when you ask the health plan to review their decision to deny, terminate or reduce a service or deny payment of a service.
- You can request a state fair hearing. This is when you ask the state to review a decision made by the health plan.
- You can file a grievance with the health plan. This is when you complain to the health plan about anything other than a decision made by the health plan. Some examples of grievances are the quality of care or services you received, rudeness of a provider, or health plan staff not respecting your rights.

Ombudsman for State Managed Health Care Programs
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