Notice of Dismissal of Coverage Request

<Date>

Member Name:

Member ID: (Insert non-contract provider name, if applicable):

Plan Name: <Blue Shield TotalDual Plan (HMO D-SNP) H5928-005 OR Blue Shield TotalDual Plan (HMO D-SNP) H5928-055 OR Blue Shield Inspire (HMO D-SNP) H5928-054>

Phone: <delegate phone> Fax: <delegate fax>

We dismissed the coverage request you filed on (insert date).

We can't process your request because: *(explain the specific reason for dismissal and what is missing from the request)*

Do You Have Questions?

If you have questions about this notice, please contact <delegate name> at: Toll Free: <delegate phone> (TTY: 711), <delegate hours of operation>

If you disagree with our decision to dismiss your coverage request, you have two options:

 If you think we have incorrectly dismissed your coverage request (for example, you believe <*insert reason* (e.g., you are a proper party)>), you may request that we review our dismissal. Your appeal must be received by us at

Blue Shield of California Medicare Appeals and Grievances Department P.O. Box 927 Woodland Hills, CA 91365-9856 Phone: 800-452-4413 (TTY: 711) Fax: (916) 350-6510

within 60 calendar days of the date of this dismissal notice. Include a copy of this *Notice of Dismissal of Coverage Request* along with any supporting information with your appeal and explain why you believe the dismissal was incorrect.

2. You may request that we vacate (set aside) the dismissal action. If we determine there is good cause to vacate the dismissal because <*insert reason for finding good cause--e.g., a finding that the person who made the request is a proper party*>, we will vacate our dismissal and review your coverage request. Your request to vacate this dismissal must be received by our office at:

<delegate phone, address, fax>

within 6 months of the date of this notice. Include a copy of this *Notice of Dismissal of Coverage Request* along with any supporting information with your request.

Enclosure(s): "Notice of Non-Discrimination" "Language Assistance Notice"