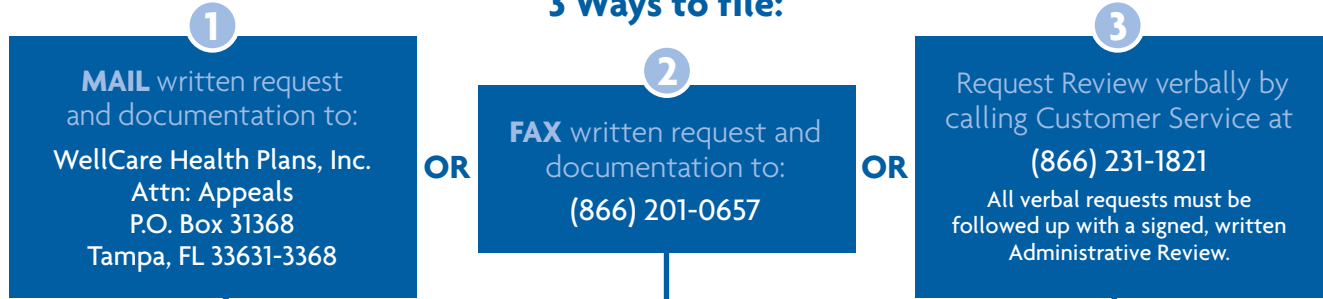


Filing an Administrative Review for WellCare Medicaid Members in Georgia

This process is for members to address issues with a decision or proposed action such as what services are covered, the level of care received, or what WellCare will pay for a service. Member, Member's Representative, Legal Guardian or Provider (with member's written consent) files a Request for an Administrative Review. Must be completed within 30 calendar days Notice of Proposed Action.

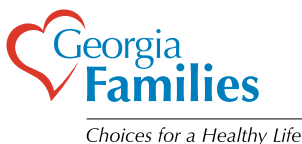
3 Ways to file:



Each request will be categorized as follows:

| Expedited Request | Standard Pre-Service Request | Retrospective Request |
|--|---|--|
| Granted if applying the standard procedure could seriously jeopardize the member's life, health, or ability to regain maximum function. | Applied to all requests that are not Expedited or Retrospective. | Applied to requests for services that have been rendered (i.e., claim denials where member has financial liability). |
| Request an Expedited Determination verbally by calling Customer Service or in writing to the Appeals & Grievance Department. WellCare will notify the Member immediately by phone if the request will be expedited. If the request for Expedited Determination is denied, the request will be transferred to the Standard Pre-Service process. | WellCare will mail an acknowledgement letter to the member within 10 business days of receipt of the request. | WellCare will mail an acknowledgement letter to the member within 10 business days of receipt of the request. |
| WellCare must resolve request within 72 hours. | WellCare must resolve request within 45 calendar days. | WellCare must resolve request within 45 calendar days. |

- The Expedited, Standard Pre-Service and Retrospective determination periods may be extended by up to 14 days if the member voluntarily requests an extension.
- If the proposed action is upheld by WellCare, the Member, Member's Representative or Provider will be notified verbally and in writing.
- If WellCare overturns the proposed action, the Member, Member's Representative or Provider will be notified verbally and in writing.



Please see the WellCare Provider Handbook for additional information. Visit our Web site at <http://georgia.wellcare.com> for regular updates.

