

March 10, 2023



Subject Line: An HHSC Policy Flexibility for Member Appeals Is Ending March 31

In January 2020, the federal government declared a public health emergency (PHE) in response to COVID-19. Under the PHE, the Texas Health and Human Services Commission (HHSC) has provided certain flexibilities, including allowing managed care members more time to request an appeal. Instead of the required 60 days, members were given 90 days to request an appeal during the PHE.

HHSC will be ending this flexibility on March 31, 2023.

Starting April 1, 2023, if you receive an “Adverse Benefit Determination” notice and want to appeal it, you must file your appeal within 60 days of the date the notice is mailed. Appeals filed past this deadline may not be reviewed. If you have any questions, please reach out to your health plan representative.

Appeals Department