



## PENINSULA RSN

### COMPLAINT, GRIEVANCES AND APPEALS POLICIES AND PROCEDURES

**Policy Name:** COMPLAINT & GRIEVANCE OVERSIGHT  
AND RECORDKEEPING

**Policy Number:** 6.07

**Reference:** 42 CFR 438.416;  
DSHS Contract - Exhibit N

**Effective Date:** 9/2005

**Revision Date(s):** 11/2010

**Approved by:** PRSN Executive Board

#### CROSS REFERENCES

- Form: Exhibit N Forms
- Form: PRSN Authorization Tracking Log
- Form: Quarterly Agency Complaint Tracking Form
- Policy: Exhibit N Report Instructions

#### PURPOSE

It is the policy of the Peninsula Regional Support Network (PRSN) to establish a centralized process for recording and providing oversight to track all complaints, grievances, appeals/ denials, and Fair Hearings.

#### DEFINITIONS

A complaint is an agency-based issue of dissatisfaction with some aspect of mental health services that a client (or their designated advocate) expresses verbally or in writing.

A grievance is an issue of dissatisfaction that a client (or their designated advocate) expresses at the RSN level. All verbal grievances must be followed-up with a written and signed statement within seven (7) days.

- Issues of dissatisfaction related to Medicaid *actions* (authorization decisions) are resolved through the RSN appeal process.

Appeal means a request for review of an action. An Action in the context of Medicaid services includes:

- The denial or limited authorization of a requested service
- The reduction, suspension, or termination of a previously authorized service
- The denial in whole or in part, of payment for a service
- The failure of the PRSN to act within the timeframes provided in section 42 CFR 438(b) or
- For a resident of a rural area with only one managed care organization (MCO), the denial of an enrollee's request to exercise his or her right, under section 42 CFR 438.52 (b) (2) (ii), to obtain services outside the network

DSHS Administrative Fair Hearing means a hearing conducted through the auspices of the state Office of Administrative Hearings in accordance with Washington Administrative Code (WAC) 388-02. An issue of dissatisfaction must complete the PRSN Grievance/and Grievance Appeal process prior to requesting an Administrative Fair Hearings. The term Fair Hearing is synonymous with Administrative Hearing.

## PROCEDURE

1. Standard procedure for establishing a centralized process for recording and providing oversight to agency complaints and PRSN grievances shall include:
  - a. The PRSN compiles the following reports:
    - Quarterly Agency Complaint Forms
    - Monthly Ombuds Activity Sheet
    - Six-month Exhibit N- Medicaid, non-Medicaid, and Appeals Forms
    - Monthly PRSN Denial and Appeal Tracking Report
2. All written complaints will be recorded by the network agencies and Ombuds on the quarterly agency complaint form (combined Medicaid/ non-Medicaid forms) and submit to the PRSN quarterly for QUIC review.
3. The Exhibit N form compiles the number of formal grievances to the PRSN, appeals requests through the contracted Administrative Service Organization (ASO), Office of Administrative Hearings Fair Hearings, and the Department.
  - a. The Exhibit N form tracks the PRSN system-wide information, in a consistent and standardized way.
    - The form provides the information in aggregate for Medicaid recipients and non-Medicaid recipients for adult and children's services.
    - The form includes the number and nature of the issues reported throughout the PRSN system.
    - The form includes timeframes within the matter of concern was resolved or disposed.

- The number and nature of how the issues were resolved (i.e. meditation).
  - b. The PRSN provides a summary report and analysis of the data for six-month trends identifying findings and plausible explanations. The PRSN includes information about how the system will adjust given the findings, including what measures may be taken to address undesirable patterns.
4. The PRSN Quality Improvement Committee (QUIC) provides the oversight to the complaints, grievances, appeal and Fair Hearing filed. The PRSN QUIC reviews the PRSN compiled Exhibit N summary report and forms submitted to the Department. The QUIC will identify trends and establish procedural steps to resolve trends.
    - The QUIC may appoint subcommittees to address specific trends, such as the PRSN Utilization Management (UM) Committee for access issues or the PRSN clinical directors for dignity and respect issues.
    - The QUIC may require PRSN corrective action.
  5. The PRSN subcontractor for authorization of services (ASO) shall keep a separate tracking log for outpatient, inpatient, and residential authorizations requested and the determination. The tracking sheet shall indicate when an appeal was conducted.
  6. The PRSN shall maintain these records for at least six (6) years after the completion of the complaint/grievance issue. The records will be kept in confidential files, apart from the clinical record.

## **MONITORING**

This policy is a federal statute and contract mandate.

1. The PRSN Grievance Oversight and Tracking policy and procedures are routinely monitored through:
  - 100% PRSN review of faxed copies of NOA letters mailed
  - PRSN Authorization Tracking Log submitted by CommCare
  - Annual PRSN Provider and Subcontractor Administrative Review
  - Exhibit N Agency Complaint and PRSN Grievance Tracking
  - Random checks of provider Complaint files with a cross-reference chart review
  - Quality Management Plan activities, such as review targeted issues for trends and recommendations, such as the biennial ancillary provider satisfaction survey.

- Review of previous Provider Corrective Action Plans related to Age and Cultural Competence policy, including provider profiles related to performance on targeted indicators
  - The Department conducts the Mental Health Statistical Improvement Project (MHSIP) every year, one year for adults and the alternating the next year for children/ youth. The MHSIP measures general consumer satisfaction with the existing service delivery system, appropriateness and quality of services, participation in treatment goals, access to services, and perceived outcomes of services they received. The PRSN requests over sampling of the region to gather specific catchment area data and analyze for trends.
2. If a provider/contractor performs below expected standards during any of the reviews listed above a Corrective Action will be required for PRSN approval.