

State of California—Health and Human Services Agency Department of Health Services



GRAY DAVIS Governor

July 7, 2003

MMCD All Plan Letter No. 03008

TO-

County Organized Health System Plans (COHS)

Geographic Managed Care (GMC) Plans 1. ffi

Prepaid Health Plans (PHP)

Two-Plan Model Plans

FROM:

Luis R. Rico, Acting Chief

Medi-Cal Managed Care Division

SUBJECT:

Quarterly Submission of Grievance Logs

PURPOSE:

The intent of this letter is to communicate the responsibility of managed care organizations (MCO) as they relate to the submission of quarterly grievance data. This data will be analyzed by the Medi-Cal Managed Care Division (MMCD) along with other data to monitor MCO performance and identify areas where additional monitoring may be necessary.

BACKGROUND:

The MMCD has initiated a change in its approach to monitoring health plan performance. This modification involves greater reliance on plan submitted data and use of selected key performance indicators. MMCD is currently reviewing data it regularly receives from plans for this purpose and is also considering other types of data it currently does not receive. MMCD will evaluate the data received over a period of 12 to 18 months and then determine if changes are warranted.

All Two-Plan, GMC and COHS Plans are contractually required to maintain a grievance system in accordance with California Code of Regulation (CCR) Title 28, Section 1300.68 which states, in part:



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- Every health care service plan shall establish a grievance system.
- A written record shall be made for each grievance received by the plan, including the date received, the plan representative recording the grievance, a summary or other document describing the grievance, and its disposition.
- The plan shall maintain a log of all grievances received over the phone, which
 includes the complainant name, nature of resolution and the plan representative's
 name that took the call.

In addition, Two-Plan and GMC Plans must also comply with Sections 53858(e) and 53914(e), respectively, which state, in part:

"The member grievance procedures shall at a minimum provide for:

- (1) The recording of a grievance log of each grievance received by the GMC and Two Plan, either verbally or in writing. The grievance log shall include the following information:
 - (A) The date and time the grievance is filed with the plan or provider.
 - (B) The name of the member filing the grievance.
 - (C) The name of the plan provider or staff person receiving the grievance.
 - (D) A description of the complaint or problem.
 - (E) A description of the action taken by the plan or provider to investigate and resolve the grievance.
 - (F) The proposed resolution by the plan or provider.
 - (G)) The name of the plan provide poststiff person responsible for resolving the grievance.
 - (H) The date of notification of the member of the proposed resolution."

PROCEDURE:

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Effective immediately, all plans will be required quarterly to submit to their respective MMCD contract manager copies of their grievance logs, and the grievance logs of any sub-contracting entity delegated the responsibility to maintain and resolve grievances. Grievance logs shall be mailed to the Department of Health Services, Medi-Cal Managed Care Division, P. O. Box 942732, Sacramento, CA 94234-7320. Please submit grievance logs according to the following schedule, commencing with the October 31 due date:

Quarter	<u>Due</u>
Aprill-Jume	July 311
July - September	October 311
October - December	Jamuany 311
January - March	April 300

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Submitted grievance logs shall include all the required information listed in the references cited above.

If you have any questions regarding this All Plan letter, please contact your contract manager.