

Appeals and Grievances Presentation

Presenters:

Libby Graves, Vice President of Customer
Experience

Myriam Jackson, Contact Center Director

Joseph Tierney, Appeals and Grievances
Supervisor



Improving care for people with disabilities and chronic health needs



Types of Complaints

- Members have the right to file a complaint with CCA regarding processes, service delivery, quality of care, etc.
- Complaints can be reported in these different ways:
 - By telephone
 - In writing
 - In person

Formal Complaint:

- **Appeal**
- **Grievance**

How to File a Grievance

With CCA



Member Services Department

(866) 610-2273

Translation available

Outside CCA

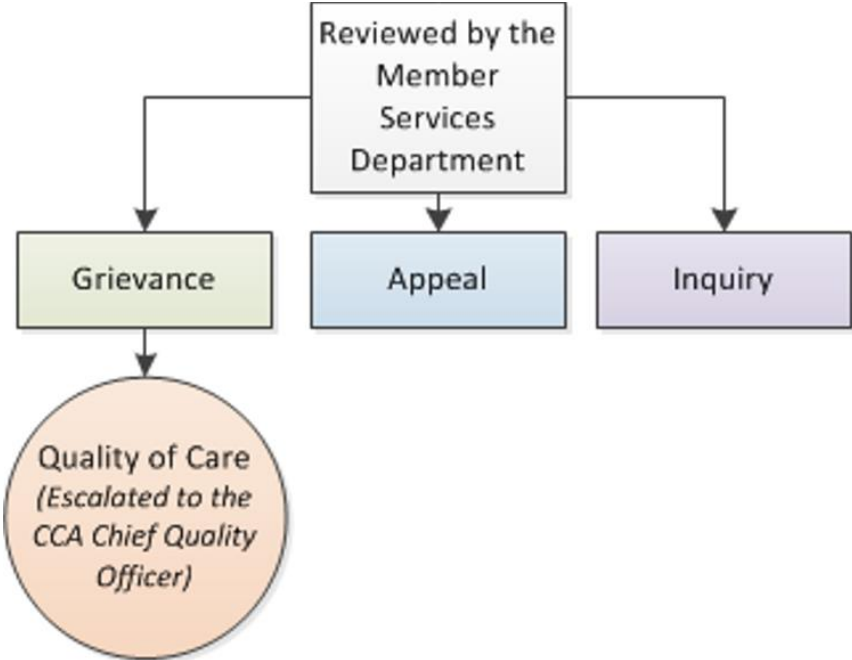


Members have the Right to Elect a Representative

- Appointment of Representative
- Power of Attorney
- Legal Guardian



Complaint Workflow



Quality of Care Grievances



"His pacemaker keeps opening and shutting the garage door."

Complaint Timeframes

Non-Pharmacy Appeal	Timeframe
Standard Appeal	30 calendar days
Expedited Appeal	72 hours

Pharmacy Appeal	Timeframe
Standard Appeal	7 calendar days
Expedited Appeal	72 hours

Grievance	Timeframe
Standard	30 calendar days
Expedited	24 hours

*Cases may be extended by 14 calendar days if CCA believes the extension is in the member's best interest

Who reviews the appeal?

- A qualified clinician
- Separate from the initial reviewer
- Joint-reviewers at times



Appeal Review Levels

Level 1 Internal Appeals

***Level 2 Independent Review Entity (Maximus) and/or Board of Hearings**

Level 3 Administrative Law Judge (ALJ)

Level 4 Medicare Appeals Council (MAC)

Level 5 Federal District Court



**Appeals which deny a Medicare covered service or item is automatically sent to Maximus by CCA*