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## North Sound Mental Health Administration

### Section 1000 – Administrative: Complaint and Grievance

Authorizing Source: See references Policy 1001  
Cancels: Executive Director approval 11/29/2005  
See Also:

Providers must adopt or have a policy “consistent with” this policy  
Responsible Staff: Quality Manager

Approved by: Executive Director  
Signature:

Date: 2/5/2009

## **POLICY # 1002.00**

### **SUBJECT: COMPLAINT AND GRIEVANCE**

#### **PURPOSE**

To outline the North Sound Mental Health Administration (NSMHA), provider, and formal designee complaint and grievance processes and requirements. (See 1001- NSMHA Complaint, Grievance, Appeal, Fair Hearing and Notice Policy- General Policy Requirements, 1003-NSMHA Appeal Policy, 1004-NSMHA Fair Hearing Policy, and 1005 Notice Requirement Policy for information about additional policy requirements).

#### **DEFINITIONS**

A **complaint** is a verbal statement of dissatisfaction with any aspect of mental health services. The NSMHA guiding principle is to have a flexible complaint process that allows staff to resolve complaints informally, quickly, to the consumer’s satisfaction and at the lowest possible level.

When concerns are expressed to NSMHA or provider/designee staff, they will clarify the option to resolve the concerns through the complaint or more formal grievance processes. Once the complaint process has begun, consumers or their representatives may choose to pursue a formal grievance at any time.

**Complaints** will be documented, tracked and reported for continuous quality improvement at all levels of the system. Complaints by consumers will be documented, tracked and reported for continuous quality improvement, whether or not the consumer chooses to pursue resolution of the complaint. Complaints by allied systems, advocates, family members or other parties on behalf of a consumer, where the consumer chooses not to pursue the complaint, will also be documented, tracked and reported for continuous quality improvement.

A **grievance** is a more formal way to express dissatisfaction than a complaint. Grievances may be initiated verbally by consumers or their authorized representatives but are followed up with a signed written request. An **Expedited grievance** is a request for a more immediate response to a grievance by the consumer/authorized representative.

#### **POLICY**

For Medicaid enrollees **grievances** are an expression of dissatisfaction about any matter other than an “action” as defined in the NSMHA Policy 1001. For state-funded consumers **grievances** are an expression of dissatisfaction about any matter. (Possible subjects for grievances include, but are not limited to, the quality of care or services provided, aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the enrollee's rights.)

Consumers and their representatives may examine their consumer record, including medical records, and any other documents and records considered during the complaint and grievance process. For complaints or grievances that involve clinical issues, medical necessity or grievances about the denial of an expedited

resolution of an appeal, qualified mental health care professionals who have the appropriate clinical expertise will make the decision.

Consumers may have representatives and those of their choice involved in the complaint and grievance process. *Ombuds services* are available to provide advocacy, assistance and investigation to consumers, family members and other interested parties throughout the process. Ombuds services work to assist in resolving the complaint at the lowest possible level. Ombuds services may assist callers with complaints and grievances through the provider, formal designee or NSMHA process.

Consumers and their representatives may contact Ombuds services for assistance with the complaint or grievance process or may pursue a complaint or grievance with their provider, a formal designee or with NSMHA.

Each provider and designee will have *an identified complaint and grievance contact* to receive complaints and grievances. Consumers or their representatives may initiate complaints or grievances with these identified complaint and grievance contacts. They may also initiate complaints or grievances directly with their Mental Health Care Provider or other provider/designee staff.

Consumers and their representatives may also initiate complaints and grievances with *NSMHA through NSMHA Customer Service*. For Complaints initiated through NSMHA, staff will typically arrange for follow up and resolution on the complaint with provider/designee complaint and grievance contacts depending on the nature of the complaint and needed resolution.

NSMHA staff will document complaints triaged to providers/designees as customer service. (The provider/designee will document the complaint or grievance).

## **COMPLAINT PROCEDURE**

### **A. Complaint Procedure-Provider/Designee**

1. The provider/formal designee will provide assistance to the individual with the complaint.
2. If the caller, consumer or consumer representative is not receiving assistance from Ombuds services, Ombuds services will also be offered for assistance
3. Staff will attempt to resolve complaints informally, quickly and to the consumer's satisfaction
4. Staff will attempt to resolve the complaint to the consumer's satisfaction as expeditiously as the consumer's mental health condition requires, not exceeding 30 days of receipt of the complaint by the provider/formal designee.
5. For all complaints staff will document each type of complaint, including the date of receipt, actions taken, resolution, and date the consumer/representative is notified of the resolution
6. For complaints not resolved to the consumer's satisfaction the provider/formal designee will also mail the consumer and fax to NSMHA a written response within 30 days of receipt of the complaint.
  - a) The written response will include a summary of the complaint(s), efforts to resolve the complaint(s), the right and process to pursue a grievance with the provider/formal designee or NSMHA, the right for previously authorized services to continue or be reinstated during the grievance process at the consumer or consumer representative's request, and the process and available supports if the consumer has any concerns about retaliation.

7. Staff with the authority to resolve the complaint will participate in the process and offer a face-to-face meeting as needed to resolve the complaint.
8. The provider or formal designee will arrange for staff with the authority to assure implementation of agreements to provide follow-up if needed.

## **B. Complaint Procedure-NSMHA (Complaints processed by NSMHA)**

1. NSMHA staff will provide assistance to the caller
2. If the caller is not receiving assistance from Ombuds services, Ombuds services will be offered for assistance.
3. Staff will attempt to resolve complaints informally, quickly, and to the consumer's satisfaction:
  - a) NSMHA customer service staff may provide for follow up and resolution internally by NSMHA
  - OR
  - b) NSMHA Customer service staff may resolve complaints quickly to the caller's satisfaction (requiring no further arrangements with NSMHA). On occasion NSMHA will receive complaints that the caller does not wish to pursue beyond the phone call. These will be documented as complaints.
4. As outlined above, complaints (or grievances) triaged to providers or designees will be documented by the NSMHA as customer service. For all other complaints staff will document each type of complaint, including the date of receipt, actions taken, resolution, and date of resolution to the consumer or representative.
5. For complaints not resolved to the consumer's satisfaction NSMHA will also mail the consumer a written response within 30 days of receipt of the complaint.
  - a) The written response will include a summary of the complaint(s), efforts to resolve the complaint(s), the right to pursue a grievance with the provider/formal designee or NSMHA, the right for previously authorized services to continue or be reinstated during the grievance process at the consumer or consumer representative's request, and the process and available supports if the consumer has any concerns about retaliation.
6. The NSMHA Privacy Officer will be informed of any complaint that relates to the NSMHA Privacy practices. The Privacy Officer will document all Privacy complaints received and their disposition.
7. Staff with the authority to resolve the complaint will participate in the process and offer a face-to-face meeting as needed to resolve the complaint.
8. NSMHA will arrange for staff with the authority to assure implementation of agreements to provide follow-up if needed.

If the consumer or representative is dissatisfied with the results of the complaint process, they may pursue a grievance with the provider, designee or NSMHA.

## **GRIEVANCE PROCEDURE**

### **A. Provider/Formal Designee Level Grievance (Grievances processed by Providers/Designees)**

1. The provider or formal designee will provide assistance to the individual with the grievance.
2. If the consumer or their representative is not receiving assistance from Ombuds services, Ombuds services will be offered for assistance.
3. If the grievance is initiated orally, the consumer or authorized representative will follow up within seven (7) days of the oral request with a written signed request. The start date of the grievance will be the original date of request, whether oral or written. (If a grievance is initiated orally and not followed up in writing it will be documented as a complaint).
4. Written requests for grievances should include the consumer name, how the provider/designee can best contact the consumer, the nature of the grievance, the requested resolution, and any information consumers or others wish to submit.
5. The provider or formal designee will provide verbal acknowledgement (may be by telephone) of receipt of the grievance within one business day from the oral or written grievance (whichever is first) and mail a written acknowledgement within five (5) business days of receipt of the oral or written grievance (whichever is first).
6. The written acknowledgement will include notice to the consumer or representative that previously authorized services will continue or be reinstated during the grievance process at the consumer or representative's request and notice for any circumstances in which the consumer may be asked to pay for the cost of those benefits if the grievance upholds the original decision.
7. The provider/designee will notify NSMHA in writing that they have received a grievance within two business days of the receipt of the grievance and indicate the date they received the grievance. The written notification to the NSMHA will also include whether the grievance was received orally or in writing, and the dates of the oral and written acknowledgement to the consumer and representatives. The provider/designee will also forward a copy of the written grievance to the NSMHA upon receipt from the consumer or representative.
8. Staff who have the authority to resolve the grievance or require corrective action will participate in the process and offer a face-to-face meeting with the consumer and others of their choice to discuss the grievance.
9. Staff not involved in any previous level of review or decision-making will make decisions on grievances.
10. For all grievances staff will document each type of issue, including the date of receipt, actions taken, resolution, and date of resolution to the consumer or representative.
11. The provider or formal designee will investigate the grievance and mail a written notice of resolution to the consumer and representative, (with a copy to the NSMHA) as expeditiously as the enrollee's mental health condition requires, not to exceed 28 days of the receipt of the grievance (either oral or written, whichever is first). Providers and designees will document the date of distribution to all parties and include this on the copy to the NSMHA.
12. The written notice of resolution will include the reason for the decision, the results of the resolution process, the date it was completed, the process and available supports if the consumer has any concerns about retaliation.

The written response will also include the right and process to pursue the grievance with NSMHA within 5 days of receipt of the written response, the right for previously authorized services to continue or be reinstated during the NSMHA grievance process at the consumer or consumer representative's request and notice for any circumstances in which the consumer

may be asked to pay for the cost of those benefits if the grievance upholds the original decision.

13. Providers or formal designees will issue a report upon request to NSMHA within 30 days of the decision for grievances
14. Staff with the authority to assure implementation of agreements or decisions will provide follow up.

#### **B. Provider Level Expedited Grievances-Additional Requirements**

If an expedited grievance is requested and the provider/designee determines (or the NSMHA or another provider or inpatient provider indicates in making the request on the consumer's behalf or supporting the consumer's request), that taking the time for a standard resolution could seriously jeopardize the consumer's life, health, or ability to attain, maintain or regain maximum function, the provider/designee will meet the *additional* requirements below:

1. Requests for expedited resolution may be initiated orally by the consumer or their authorized representative and are not required to be followed by a written signed request
2. The provider, network or formal designee will make a decision on the request for expedited resolution and provide written notice of resolution, as expeditiously as the consumer's mental health condition requires, within three (3) working days. They will also make reasonable efforts to provide oral notice.
3. The provider, network or formal designee will provide the consumer a reasonable opportunity to present information in person as well as in writing, and inform the consumer of the limited time available for expedited resolutions.
4. The provider, network or formal designee and NSMHA will ensure that retaliation or punitive action is not taken against a consumer who requests an expedited resolution.
5. If the provider/designee denies a request for expedited resolution of a grievance, it will transfer the grievance to the timeframe for standard resolution; and make reasonable efforts to give the consumer prompt oral notice of the denial.

#### **C. NSMHA Level Grievances (Grievances processed by NSMHA)**

1. NSMHA will provide assistance
2. If the consumer or their representative is not receiving assistance from Ombuds services, Ombuds services will be offered for assistance.
3. NSMHA staff will document the grievance, including the date of receipt, actions taken, resolution by NSMHA, and date of notification to the consumer.
4. If the initial grievance is done orally, the consumer or representative will follow up within seven (7) days of the oral request with a written signed request. The start date of the grievance will be the original date of request whether oral or written. (If a grievance is initiated orally and not followed up in writing it will be documented as a complaint).
5. Written requests for grievances should include the consumer name, how NSMHA can best contact the consumer, the nature of the grievance, the requested resolution, and any information the consumers or others wish to submit.
6. NSMHA will provide verbal acknowledgement (maybe by telephone) of receipt of the grievance within one business day from the oral or written grievance (whichever is first) and mail a written acknowledgement within five (5) business days of receipt of the oral or written grievance (whichever is first).
7. The written acknowledgement will include notice to the consumer or representative that previously authorized services will continue or be reinstated during the grievance process at the consumer or representative's request and notice for any circumstances in which the consumer

may be asked to pay for the cost of those benefits if the grievance upholds the original decision.

8. For grievances that involve a provider or designee NSMHA will notify the involved provider/designee within 2 days of receipt of a grievance.
9. Providers/designees will provide NSMHA a copy of the consumer record and a copy of the complaint and/or grievance file as requested
10. Staff not involved in any previous level of review or decision-making will make decisions on grievances.
11. NSMHA will provide a Grievance Committee to make decisions on consumer grievances. The grievance committee will be comprised of:
  - a) NSMHA staff not involved in any previous level of review or decision-making concerning the grievance;
  - b) Staff with the authority to resolve the grievance or require corrective action will participate in the process and offer a face-to-face meeting with the consumer and others of their choice to discuss the grievance;
  - c) The committee may also include the NSMHA Medical Director, a licensed, Board – certified psychiatrist. Grievances regarding adverse authorization decisions for inpatient services will include a licensed, Board certified psychiatrist.
12. Consumers, providers, designees and other involved parties will provide all documentation five (5) days in advance to allow for review prior to the grievance meeting. In situations where there is little advance notice, this timeline may be shortened. Providers or designees will be required to provide a written response for grievances that involve a provider or designee.
13. For all grievances staff will document each type of issue, including the date of receipt, actions taken, resolution, and date of resolution to the consumer or representative.
14. NSMHA will investigate the grievance and mail a written notice of resolution as expeditiously as the consumer's mental health condition requires, not to exceed 28 calendar days from the receipt of the grievance (either oral or written, whichever is first).
15. NSMHA may extend the timeframes for resolution of grievances by up to 14 calendar days if:
  - a) The consumer requests the extension

OR

  - b) NSMHA shows (to the satisfaction of MHD, upon its request) that there is need for additional information and how the delay is in the consumer's interest.

For extensions requested by the consumer NSMHA will provide written notice of the request and related dates. For extensions not requested by the consumer, NSMHA will give the consumer written notice of the reason for the delay.

16. Notices of resolution will include the reason for the decision, the results of the resolution process, the date it was completed, and the process and available supports if the enrollee has any concerns about retaliation. The notice of resolution will also include the right and process to request a fair hearing if the consumer is not satisfied with the resolution, the right to request a fair hearing at any time if they believe there has been a violation of DSHS rules, the right to request to continue to receive benefits while the hearing is pending, and notice for any circumstances in which the consumer may be asked to pay for the cost of those benefits if the hearing decision upholds the original decision.
17. For grievances regarding denial of service that are resolved in favor of the consumer, the notice of resolution will include information about how the consumer may obtain services, supports available to assist in obtaining service, and information that consumers must initiate services within sixty days.

18. For grievances that involve a provider or designee providers or designees will issue a report to NSMHA within 30 days of the decision if requested. Providers or designees will issue additional follow up reports upon request.
19. Provider or designee staff with the authority to assure implementation of agreements or decisions will provide follow up.
20. NSMHA may offer the consumer a follow up interview with the Grievance Committee to discuss any concerns about retaliation.
21. NSMHA will send a notice of action to the consumer about their right to request a fair hearing if NSMHA fails to meet the timeline for normal disposition or extension of the grievance.

**D. Expedited Grievances-Additional Requirements**

If an expedited grievance is requested and NSMHA determines (or the provider or inpatient provider indicates (in making the request on the consumer's behalf or supporting the consumer's request), that taking the time for a standard resolution could seriously jeopardize the consumer's life, health, or ability to attain, maintain or regain maximum function, NSMHA will meet the additional requirements below:

1. Requests for expedited resolution may be initiated orally and are not required to be followed by a written signed request by the consumer or representative.
2. NSMHA will make a decision on the consumer's request for expedited resolution and provide written notice of resolution, as expeditiously as the consumer's mental health condition requires, within three (3) working days. They will also make reasonable efforts to provide oral notice.
3. NSMHA may extend the three (3) working days timeframe by up to 14 calendar days if:
  - a) The consumer (or provider or representative acting on behalf of the consumer) requests the extension
  - OR
  - b) NSMHA finds that there is need for additional information and that the delay is in the consumer's interest.

For extensions requested by the enrollee NSMHA will provide written notice of the request and related dates in writing. For extensions not requested by the enrollee NSMHA will give the enrollee written notice of the reason for the delay.

4. NSMHA will provide the consumer a reasonable opportunity to present information in person as well as in writing and inform the consumer of the limited time available for expedited resolutions.
5. NSMHA will ensure that retaliation or punitive action is not taken against a consumer who requests an expedited resolution.
6. If NSMHA denies a request for expedited resolution of a grievance, it will transfer the grievance to the timeframe for standard resolution, and make reasonable efforts to give the consumer prompt oral notice of the denial.

If the consumer is dissatisfied with the results of the grievance process, they may request a fair hearing, with the Office of Administrative Hearings (OAH). The consumer may also request a fair hearing at any time if they believe there has been a violation of DSHS rules. (See 1004-NSMHA Fair Hearing Policy for additional information.)

**ATTACHMENTS**

None