

- 1 6003-G STATE ONLY AND ARIZONA LONG TERM CARE SYSTEM
- 2 MEMBER INQUIRY Y-AND GRIEVANCE RESOLUTION PROCESS
- 3 REVISION DATE: <u>xx/xx/2023</u>, 4/29/2020, 8/14/2019, 4/10/2019,
- 4 6/10/2016, 3/2/2015
- 5 EFFECTIVE DATE: July 31, 1993
- 6 REFERENCES: 45 CFR Part 164, 42 CFR Part 438, Subpart F, 42 CFR
- 7 §§ 438.408(a) and (b), A.A.C. Chapter 34: R9-34-202, R9-34-209,
- 8 R9-34-210 and R9-34-212, 42 CFR Part 438, Subpart F, 42 CFR §§
- 9 438.408(a) and (b) AHCCCS Contract, Section D, Program
- 10 Requirements, Network 20, Grievance and Appeal System, AHCCCS
- 11 Contract, Section F, Attachment F1Section F1.

## 13 **PURPOSE**

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- 14 This policy outlines the Division's responsibilities when an Inquiry is
- 15 received or a gGrievance is filed with the Division's Customer Service
- 16 Center (CSC). This includes Members with Serious Mental Illness
- 17 (SMI) orand /or with a Children's Rehabilitative Services (CRS) eligible
- 18 condition. Responsible Person, including Members with Serious
- 19 Mental Illness (SMI) condition, have a grievance. Formal grievances
- 20 can be filed for a Member with a Serious Mental Illness (SMI) and or
- 21 with a Children's Rehabilitative Services (CRS) eligible condition. The
- 22 Division shall encourage the Responsible Person to discuss any
- 23 problems or grievances with their Support Coordinator as soon as they



24	<del>arise.</del>
25	For Grievances and Investigations concerning persons with Serious
26	Mental Illness rRefer to Division Operations Policy Manual Chapter 446
27	for Grievances and Investigations concerning persons designated with
28	a Serious Mental Illness.
29	For Provider Inquiries and Grievances, refer to Division Operations
30	Policy 6003-H.
31	Refer to Provider Policy Manual Chapter 11 for Provider Inquiries and
32	<u>Grievances.</u>
33	<u>DEFINITIONS</u> <del>Definitions</del>
34	"Inquiry" means a question received by the Customer Service Center.
35	1. "Business Days" means 8:00 a.m. to 5:00 p.m., Monday
36	through Friday, excluding holidays listed in A.R.S. § 1-301.
37	"Complaint" means a concern that is brought to the lowest level
38	within the Ffunctional Aarea to resolve.
39	2. "Complainant" means the person(s) expressing the



40		dissatisfaction or requesting to file a grievance.
41	<u>3.</u>	"Functional Area" means a business unit or department
42		within the Division.
43	<u>4.</u>	"Grievance" means a verbal or written expression of
44		dissatisfaction with any matter, other than an adverse
45		benefit determination.
46	<u>5.</u>	"Grievance Manager" means the individual who is assigned
47		to work with the complainant through resolution.
48	<u>6.</u>	"Inquiry" means a question received by the Customer
49		Service Center.
50	<u>7.</u>	"Planning Team" means a defined group of individuals
51		comprised of the Member, the Responsible Person if other
52	Ç)	than the Member, and, with the Responsible Person's
53	.0	consent, any individuals important in the member's life,
54	0)	including extended family members, friends, service
55	_	providers, community resource providers, representatives
56		from religious/spiritual organizations, and agents from



57	other service systems.
58	8. "Member" means the same as "Client" as defined in A.R.S.
59	<u>§ 36-551.</u>
60	1. <u>"Member Grievance" means</u> A an verbal or written expression
61	of dissatisfaction from a member, responsible party, advocate, etc.,
62	with any aspect of a member's care other than an Adverse Benefit
63	Determination.
64	<u>"Provider Grievance" means</u> A a provider's expression of
65	dissatisfaction with unresolved issues.
	ČO.
66	9. "Quality of Care Concern" or "QOC Concern" means an
67	allegation that any aspect of care or treatment, utilization of
68	behavioral health services, or utilization of physical health
69	<u>care services that:</u>
70	a. Caused or could have caused an acute medical or
71	psychiatric condition or an exacerbation of a chronic
72	medical or psychiatric condition; and
73	b. May ultimately cause the risk of harm to a member.



74	<u>10.</u>	"Resolution System" means the application within Focus
75		used to document Member and Provider Grievances.
76	<del>2.</del> 11.	"Responsible Person" means the parent or guardian of a
77		minor with a developmental disability, the guardian of an
78		adult with a developmental disability or an adult with a
79		developmental disability who is a Member or an applicant
80		for whom no guardian has been appointed.
81	<del>3.</del> 12.	_"Support Coordinator" means the same as "Case Manager"
82		under A.R.S. § 36-551.
83	<b>POLICY</b>	
83 84	POLICY	-The CSC shall evaluate each phone call, or email or letter
	POLICY	The CSC shall evaluate each phone call, or email or letter received to determine if the correspondence is an Inquiry,
84	POLICY	
84 85	POLICY	received to determine if the correspondence is an Inquiry,
84 85 86	POLICY	received to determine if the correspondence is an Inquiry,  Grievance, or Quality of Care Concern.
84 85 86 87	POLICY	received to determine if the correspondence is an Inquiry,  Grievance, or Quality of Care Concern.  The Customer Service Center shall notify the



91	<u>exists.</u>
92	a. Refer the individual to the appropriate organizations
93	when the Iinquiry or complaint is not related to the
94	Division, its contracted entities, or authorized
95	services.
96	A. INTAKE TRIAGE
97	1. The Division's Customer Service Center (CSC) shall receive
98	Inquiries and Grievances by:
99	<u>a. Phone - 1-844-770-9500 option 1, or</u>
100	b. Email - DDDCustomerServiceCenter@azdes.gov, or
101	c. Mail - DES/DDD Customer Service Center
102	1789 W. Jefferson St.
103	Mail Drop 2HB3
104	Phoenix, AZ 85007
105	d. Referral from Division staff



106	<u>2.</u>	The CSC shall evaluate each phone call, or letter
107		received to determine if the correspondence is a Quality of
108		Care Concern (QOC), an Inquiry, or a Grievance.
109	3.	The CSC, when a QOC has been identified, shall:
110		a. Notify the appropriate Ffunctional Aarea
111		immediately, but no later than the close of the next
112		business day, when an imminent health, or safety,
113		or clinically urgent risk exists.
114		b. Inform the individual whothat contacted the CSC that
115		the concern will be elevated as a QOC and that the
116		QOC triage process will be followed per Division
117		Medical Policy 960.
118	4.	The CSC shall respond to the Inquiry or inform the
119		individual whothat contacted the CSC that they will be
120		contacted within five Business Days when the Inquiry or
121		ComplaintComplain is related to the Division, its contracted
122		entities, or authorized services.



23	<u>5.</u>	The CSC shall not disclose any confidential information in
24		accordance with 45 CFR Part 164 Health Insurance
25		Portability and Accountability Act (HIPAA) and in
26		accordance with A.R.S. § 36-2917.
27	<u>6.</u>	The CSC shall provide the individual whothat contacted the
28		CSC with the contact information for the appropriate
29		organization(s) when the Inquiry or Complaint is not
30		related to the Division, its contracted entities, or
31		authorized services.
32		<u>The CSC, when a Grievance is filed, shall provide the</u>
33		individual whothat contacted the CSC with their Grievance
34		number and inform them they will be assigned a Grievance
35		Manager who will work with them through resolution when
36	Q	<u>a Grievance is fil</u>
37	7.0	Eed.
38	B. INQU	UIRY RESOLUTION
39	1.	The CSC shall monitor Inquiries to ensure the individual



40		who contacted the CSC is assisted timely.
41	2.	The CSC shall maintain tracking logs that record the
42		receipt, relevant information, and resolution of Inquiries.
43	<u>3.</u>	The CSC shall request technical assistance when an Inquiry
44		cannot be resolved timely.
45	4.	The CSC shall resolve the Inquiry and provide the
46		individual who contacted the CSC with a
47		response. INFORMAL
48	<del>C.</del> — <del>COM</del>	IPLAINTGRIEVANCE RESOLUTIONSTATE ONLY
	ELIGIBLE	- MEMBERS
49		
50	1.—A me	ember or the member's responsible person, including
		ember or the member's responsible person, including with Serious Mental Illness (SMI) condition, may have a
50	members \	
50	members v	with Serious Mental Illness (SMI) condition, may have a
50 51 52	members v grievance such as a c	with Serious Mental Illness (SMI) condition, may have a regarding an issue unrelated to a Notice of Intended Action,
50 51 52 53	members v grievance such as a corrected	with Serious Mental Illness (SMI) condition, may have a regarding an issue unrelated to a Notice of Intended Action, quality of care issue or problems related to communication
50 51 52 53	members v grievance such as a c or courtes encourage	with Serious Mental Illness (SMI) condition, may have a regarding an issue unrelated to a Notice of Intended Action, quality of care issue or problems related to communication sy. Members and their responsible persons will be



157	The Functional Area shall attempt to resolve any
158	complaints when they complaints are received in their area.
159	——The Functional AreaSupport Coordinator shall encourage
160	the Responsible Person to discuss any complaintsproblems
161	or concerns grievances as soon as they arise and inform
162	the ComplainantResponsible Person that they may contact
163	the Supervisor or other Functional Area leader at any time
164	to discuss the Complaint.
165	The Support Coordinator shall is responsible for reviewing and
166	investigateinvestigateing any complaintsinformal grievances and
167	attempting to resolve with the Planning Teamm at the team level
168	informally with the Responsible Person before they complaint escalates
169	to reach a Grievance.the formal grievance processstage.
170	The Support Coordinator shallshould contact the District Program
171	Manager (DPM) or designee to inform them of the informal resolution.
172	The Support Coordinator shall inform the Responsible Person that they
173	At any time, the responsible person may contact the Support
174	Coordinator's Supervisor or Area Manager (AM) at any time to discuss



75	the complaint. If needed, tThe District Program Manager (DPM) or
76	designee may assist the Planning tTeam in seeking in the informal
77	resolution when applicable.
78	If the complaint cannot be resolved at the PCSP team
79	level, tThe Functional Area, when the Complaint cannot be
80	resolved, shall: inform the ComplainantResponsible Person
81	aInform the Complainant of their right to file a
01	——— <u>oInform the Complainant of their right to file a</u>
82	gGrievance, and provide themComplainant w
83	——Provide the Complainant with the Division's CSC
84	contact information.1-844-770-9500 option 1, or
0.5	DDDCustomorConviceContor@azdos gov
85	DDDCustomerServiceCenter@azdes.gov
86	2.—If no informal resolution to the problem is possible, tThe Support
87	Coordinator shallwill informadvise the member or the member's
88	rResponsible pPerson of the process for filing a formal grievance by
89	contacting the DDD Customer Service Center directly at 1-844-770-
90	9500 or DDDCustomerServiceCenter@azdes.gov.
91	B. ARIZONA LONG TERM CARE SYSTEM ELIGIBLE MEMBERS



192	3.—The Functional Area Support Coordinator shall must
193	document in the mMember's file the:
194	a. The Responsible Person's member's cComplaint.
195	informal grievance
196	b. <u>The Their</u> Support Coordinator's attempts to resolve
197	the Complaintit.
198	c.a. and the fact that the member or the member's rThat
199	the ComplainantResponsible pPerson was advised of
200	the right to file a formal gGrievance and the process
201	for doing so.
202	C. FORMAL GRIEVANCE RESOLUTION
203	Formal grievances can be filed for a member with a Serious Mental
204	Illness (SMI) and or with a Children's Rehabilitative Services (CRS)
205	eligible condition. This documentation should be included in the case
206	notes.
207	The Support Coordinator shall inform the Responsible Person to
208	contact To initiate the formal grievance process, contact the DDD



209	Customer Service Center to initiate the formal grievance process wher
210	the Responsible Person's grievancegreivance cannot be resolved
211	informallyinfomally. To contact DDD Customer Service directly: at
212	——1-844-770-9500 <u>,</u> or
213	a. <u>DDDCustomerServiceCenter@azdes.gov</u> .
214	The Customer Service Center shall evaluate and prioritize
215	each Grievance, and: for health and safety risks.
216	— The Customer Service Center shall Immediately
217	Nnotify the appropriate functional area immediately
218	when an imminent health or safety risk exists.
219	1. Refer complainant to the appropriate organizations when
220	the complaint is not related to the Division, its contracted
221	entities, or authorized services.
222	1. The CSCustomer Service Center Division shallwill provide
223	the Ceomplainant with acknowledge a verbal receipt of
224	thea gGrievance at the time the Grievance it is made and
225	when requested by the Complainant, provide a written



226		receipt of thea Grievance. in writing. when electronically,
227		orally, verbally, however if requested by the
228		complainantResponsible Person., electronically or in
229		writing.
230	<u>2.</u>	The CSC Division shall documentrecord the Rreceipt of the
231		Ggrievances wilhall be recorded and the substance of the
232		<u>Grievance</u> in the <u>Division's</u> Resolution <u>System-Tracking</u>
233		System.
234	1.	-The CSC shall provide updates to the complainant on the
235		progress of the Grievance.
236		The Customer Service Center shall document actions taken
237		and update the complainant weekly on the progress at
238		requested intervals, of the research, and investigation,
239	· C	with the exception of quality of care concerns in
240	NO.	accordance with A.R.S. § 36-2917.
241	<u>3.</u>	_The <u>CSCDivision_shall</u> will ensure that the person
242		completing the Grievance investigation and decision maker
243		assigned to the Grievance who makes a



244	d	e <u>termination</u> cision on a <u>gG</u> rievance <u>has no involvement</u>
245	₩	vas not involved in any previous level of review or
246	d	ecision-making <u>regarding the Grievance</u> .
247	Ŧ	he Customer Service Center shall evaluate and prioritize
248	<u>e</u>	ach Grievance for health and safety risks, and forward to
249	<u>tł</u>	ne appropriate functional area as soon as possible, but no
250	<u>la</u>	ater than 24 hours when imminent health or safety risks
251	<u>e</u> :	<del>xist.</del>
252	<u>4. ₩</u>	then the Division receives a grievacne regarding a denial
253	<del>0</del>	f expeditied resolution of appeal or a grievacne that
254	<u>ir</u>	nvolves clinical issues, tTThe DivisionThe CSCustomer
255	<u>S</u>	ervice Center shall, when applicable, will ensure that
256	h	ealthcare professionals, who make decisions, have the
257	а	ppropriate clinical expertise to complete an investigation
258	<u>a</u>	nd_to-make the decision_when:
259	<u>a</u>	. AThe Customer Service CenterDivision receives a
260		Grievance regarding a denial of an expedited
261		resolution of appeal is received, or



262		a.b. A Grievance that involves clinical issues.
263	<u>5.</u>	The CSCustomer Service Center shall ensure all applicable
264		documentation, including all aspects of care, is reviewed
265		prior to making a decision.
266	<u>6.</u>	The CSC <del>ustomer Service Center</del> shall engage additional
267		Functional Areas when necessary to resolve the Grievance.
268	<u>7.</u>	The CSC ustomer Service Center Division shall will resolve
269		theprovide a written notice of the gGrievance resolution to
270		the complainant decision within 10 bBusiness dDays, but
271		not to exceed 90 days, after the CSCDivision receives the
272		Grievance., and shall not exceed or no later than 90
273		calendar days. after the Division receives the gGrievance.
274	8.	The CSC shall contact the Complainant to inform them of
275	.0	the resolution.
276	9.	The CSCDivision shall mail athe-Grievance disposition
277	<b>V</b>	closure letter to the Complainant within 10 Business Days
278		of resolution.



279	<u>10.</u>	The CSC shall provide a Grievance disposition closure
280		letter that includes -that includes a summary of the
281		Grievance submitted and the resolution.
282	<u>11.</u>	The CSC shall not provide the resolution in the Grievance
283		disposition closure letter when the Grievance is closed due
284		to a QOC escalation.
285		-The CSC shall ensure documentation of the Grievance,
286		investigation steps, and actions taken for resolution are
287		documented in the Division's Resolution System.the
288		resolution is not included in the letter.
289		When the Grievance is closed due to QOC escalation, the
290		resolution is not included in the letter in accordance with
291		<u>A.R.S. § 36-2917.</u>
292		6.12. The CSC shall not disclose any confidential
293		information following the Division's Operations Manual
294		6001-A. The Division shall and will record all_progupdates
295		and results in the <u>Division's</u> Resolution Tracking System.



296	<u>E.</u>	SUPPLEMENTAL INFORMATION
297		1. Refer to Division Operations Policy 446 for Grievances and
298		Investigations concerning persons designated with a
299		Serious Mental Illness.
300	<u> </u>	For Provider Inquiries and Grievances, refer to Division
801		Operations Policy 6003-H.