Client Rights Procedures
Complaints and Grievances
Rev. 10/18/2018

Categories in the grievance process generally include: 1) **Complaints** in which an individual or individual’s representative expresses dissatisfaction with some aspect of the services or operation of CHW (Access, Interpersonal interactions, Clinical Care, Member rights, Quality of Service) other than an Action/Denial of service; and 2) **Appeal** by the individual or representative of a Notice of Action generated regarding a denial, change or reduction of service or benefit.

CHW does identify some complaints that may fall outside the formal Complaint and Grievance Process. These Informal Complaints may include complaints made in an anonymous fashion, those that request no formal resolution and those that involve a simple, expedient resolution. Use of this informal process should in no way be utilized to weaken the Complaint and Grievance process but, rather should serve to broaden the scope of CHW’s responsiveness to the individual.

**Complaint Procedure:**

1. At the time of enrollment all individuals receive a copy of the **Notification of Rights and Responsibilities Form** which includes information on how to file a complaint. Additionally, Advanced Health CCO enrollees have rights as indicated by their Member Handbook which clearly outlines Grievance and Appeal Procedures. Individuals are also given a copy of the Notice of Privacy Practices and advised that they may contact the Privacy Officer if they object or have concerns regarding the disclosure of their health information.

2. Individuals can utilize the CHW **Complaint Form** to make a complaint. Advanced Health members can also make a complaint directly to the CCO Advanced Health by contacting the Member Hotline. Complaints can also be filed directly with the Health Systems Division and Disability Rights Oregon. See **Grievance Posting**.

3. All CHW staff should aid individuals in accessing the Complaint and Grievance Process, inquiring when applicable if an individual would like a formal and/or expedited resolution to their complaint or grievance. CHW staff offer assistance in the completion of any forms and/or complete a Complaint Form based on an oral complaint.

4. In cases of Informal Complaints, CHW staff will advise individuals of their ability to utilize the Complaint and Grievance process. The staff member will also consider other appropriate responses including notifying any involved staff, altering in some way an existing clinical relationship, seeking clinical consultation, discussion with management/QA staff, et cetera.

5. All Complaints and Grievances should be directed to the Quality Assurance Manager via scanning in and sending by email to the QA department or CHW Behavioral Director for review and resolution as soon as it is received. If further information is needed, the CHW staff will obtained it as quickly as possible to allow the Grievance to be reviewed by the QA Manager within 2 working days of initial receipt.

6. For standard complaints and grievances CHW will investigate, and respond to the individual within 5 working days of receipt. If it is not possible to meet this deadline, CHW will notify the individual of this fact and provide written notification of the need for up to 30 days to process and respond.

7. The Complainant shall be provided with a written notice, should the client request a written notice of the outcome and date of the resolution. All written communication must be reviewed for 6th grade readability. If the resolution is not in favor of the individual, the communication shall include all elements of appeal options and information on how to
request a DHS Administrative Hearing. In the case of an appeal of a notice of action all OHP/ Advanced Health policies and procedures will be followed.

8. Any clinical information related to the complaint/appeal request will be kept confidential except to the extent permitted or required. Releases of information will be obtained from the complainant as needed to complete the investigation, excepting discussions with the individual, their representative and the involved participating provider(s).

9. Expressions of disagreement or dissatisfaction shall be viewed as an opportunity to review services and procedures with the focus towards improving service quality. CHW will assure the individual that no retaliatory action against them will occur for making a complaint, and that a staff member will assist them in presenting the complaint, or in obtaining an advocate if desired.

10. Each Formal Complaint/Appeal will be included in the Quarterly Grievance and Appeal Log that is submitted to the Quality Management Committee for service improvement purposes. The Grievance and Appeal quarterly log regarding Advanced Health enrollees is also submitted to the Advanced Health QA Committee as a part of the CCO required processes.