

1680 South Garfield Ave., #205, Alhambra, CA 91801 • Toll: (888) 554-4562 • Main: (626) 282-0288

June 1, 2022

RE: Timely Response to Grievance Requests

Dear Providers,

The purpose of this memo is to stress the requirements of **timely response to Member and Health Plan** grievances/complaints. We appreciate your partnership in our unwavering goal to address the needs of our Members – so they may benefit from timely and accessible care.

A **grievance** is any expression of dissatisfaction, either oral or written received from health plans, investigated by Quality Management. A copy of the grievance will be forwarded to the involved provider/vendor, along with request for written response and supporting medical records.

* The provider must submit this information to the Quality Management Department within 5 days upon receipt of the request *

The grievance resolution process will be monitored to ensure compliance within the turnaround time (TAT) guidelines given. Any significant Provider non-response rates will be addressed during our Quality Management and Peer Review Committees for further actions.

During our investigation, our goals are to:

- 1) Resolve all Member grievances and complaints
- 2) Correct negative trends and potential problems related to:
 - a) Access to Care
 - b) Quality of Care
 - c) Denial of Service
 - d) Continuity of Care
 - e) Staff, Confidentiality, or Provider Network Issue
- 3) Monitor Provider timely response to grievance request

Provider participation in the investigation is imperative to determine if the Member's grievance is substantiated or unsubstantiated. Without Provider response, the Health Plans are required to resolve the grievance within the required regulatory timeframes and in favor of the Member.

If the Health Plans is found to have a significant Provider non-response rate to Member grievances, CMS, DHCS, DMHC, and NCQA are authorized to take action against Health Plans and/or our delegates, which may include financial sanctions.

Should you have any questions or concerns related to this requirement, please feel free to contact us at (626) 282-0288 or email QualityManagementDept@networkmedicalmanagement.com

Sincerely, Quality Management Department

LaSalle Medical Group Network Medical Management