



L.A. Care  
HEALTH PLAN®

For All of L.A.

# TTECAC Meeting Presentations

April 10, 2024



**ELEVATING  
HEALTHCARE**  
IN LOS ANGELES COUNTY  
SINCE 1997

# Appeals & Grievance

## Temporary Transitional Executive Community Advisory Committee



**L.A. Care**  
HEALTH PLAN®

*For All of L.A.*

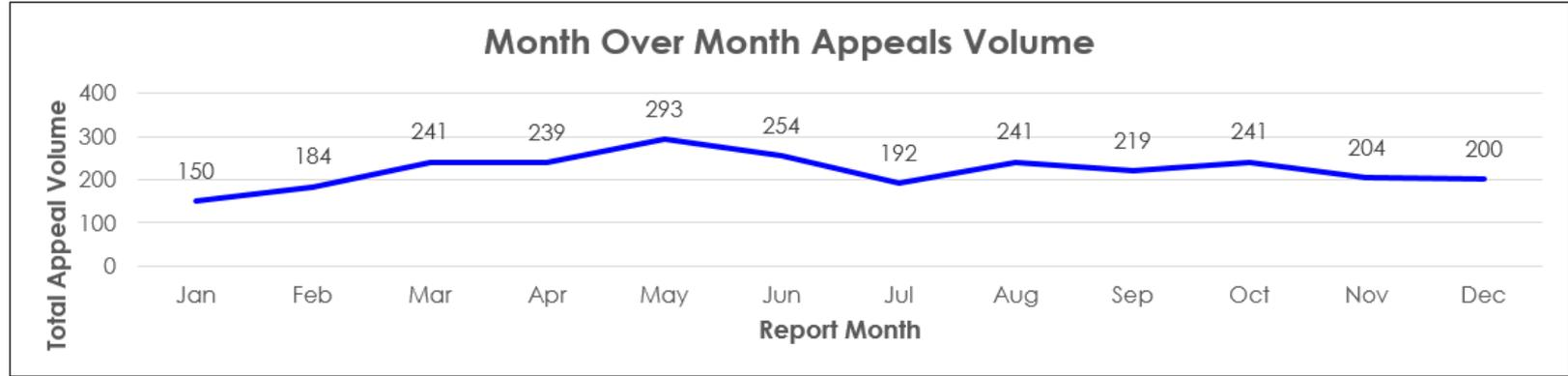


**ELEVATING  
HEALTHCARE**  
IN LOS ANGELES COUNTY  
— SINCE 1997 —

**April 2024**

# Appeals Received by Month for 2023

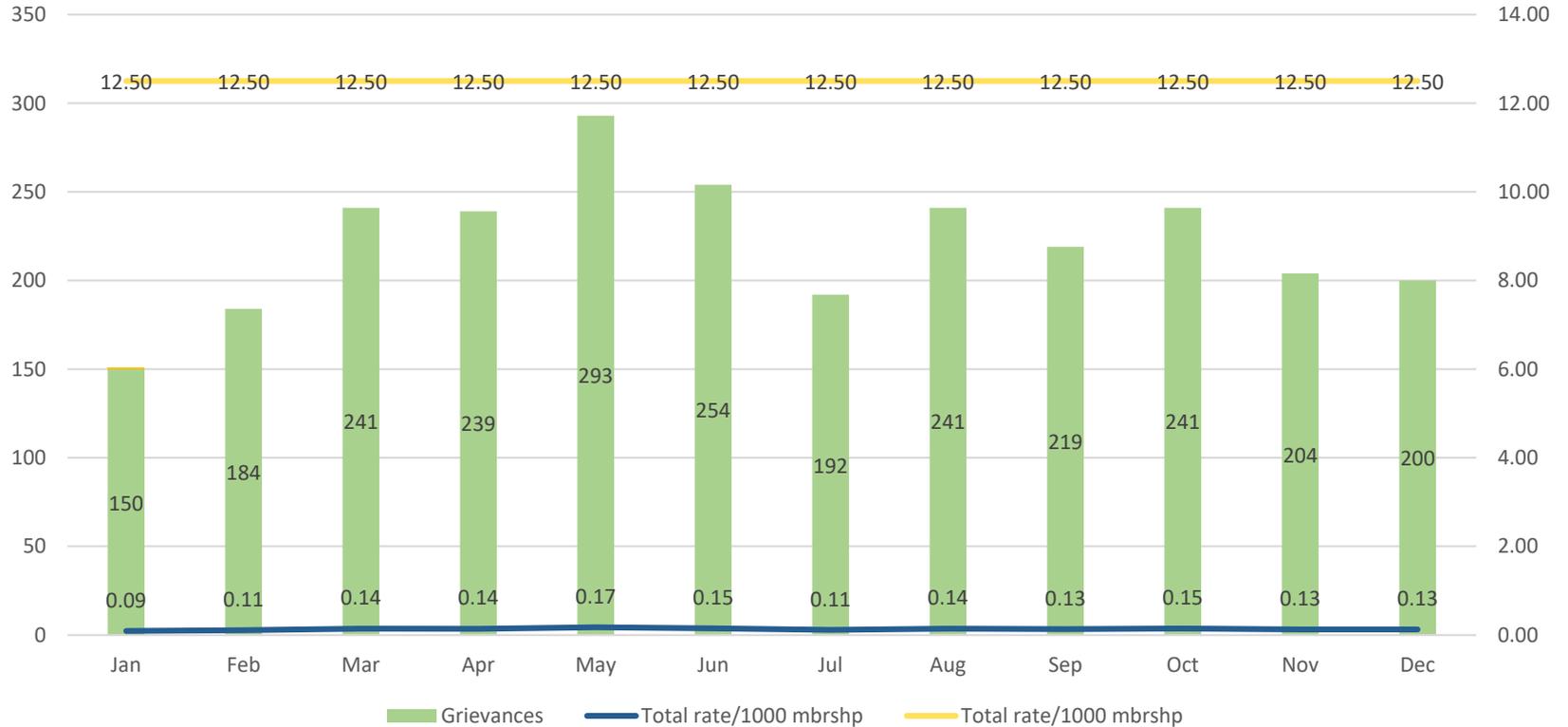
Monthly Appeals Report: Detailed Appeals Data											
Reporting Period: 2023											
Note: Cells highlighted green indicate highest volume Appeals categories/subcategories for the report month.											



Month Over Month Appeals Volume Detail												
Appeals Category	Report Month											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Access	139	176	232	235	283	230	186	222	210	229	196	164
Billing and Financial Issues	8	8	8	4	8	21	5	16	8	7	7	33
Quality of Care	3	0	1	0	2	3	1	3	1	5	1	3
<b>Total</b>	<b>150</b>	<b>184</b>	<b>241</b>	<b>239</b>	<b>293</b>	<b>254</b>	<b>192</b>	<b>241</b>	<b>219</b>	<b>241</b>	<b>204</b>	<b>200</b>



# Monthly Appeal Rate per 1000 members for 2023

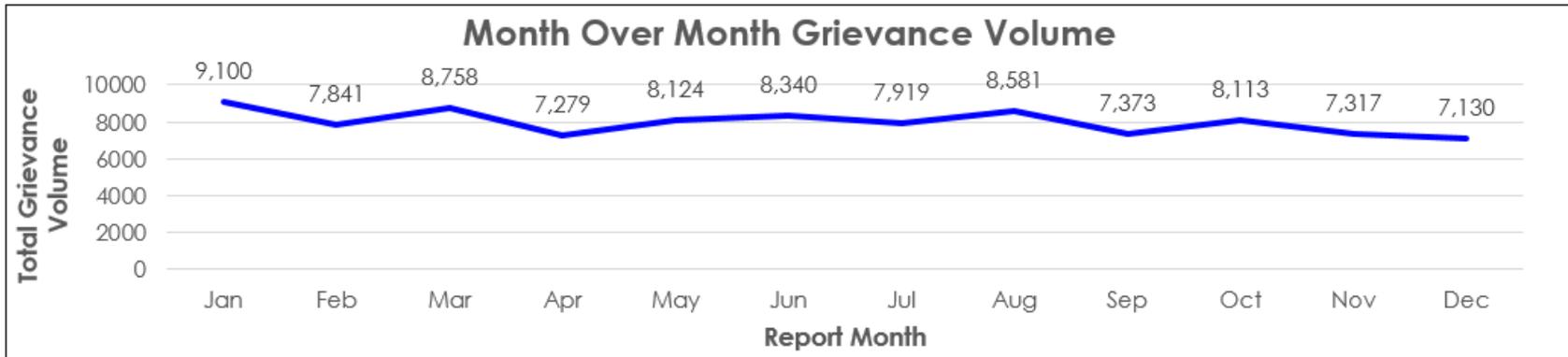


# Grievances Received by Month for 2023

## Monthly Grievances Report: Detailed Grievances Data

Reporting Period: 2023

Note: Cells highlighted green indicate top 3 highest volume grievance categories/subcategories for the report month.



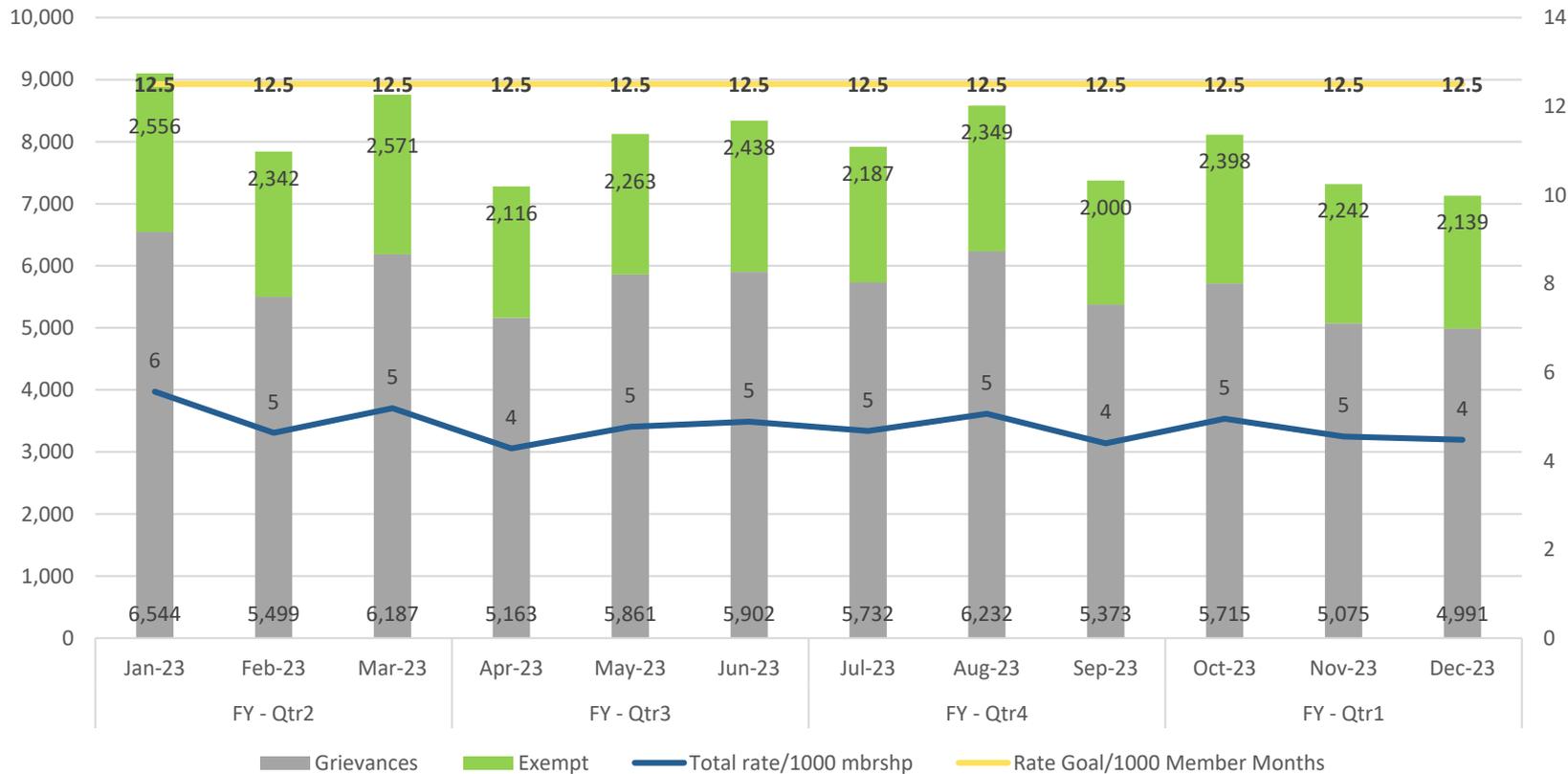
### Month Over Month Grievance Volume Detail

Grievance Category	Report Month											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Access	2,868	2,588	2,752	2,273	2,467	2,686	2,565	2,693	2,324	2,592	2,297	2,285
Attitude and Service	2,326	2,136	2,481	2,061	2,334	2,301	2,413	2,399	2,154	2,340	2,260	2,165
Billing and Financial Issues	3,509	2,788	3,130	2,598	2,895	2,879	2,495	2,933	2,391	2,716	2,417	2,369
Quality of Care	379	320	389	335	418	463	431	540	494	447	335	306
Quality of Practitioner Office Site	18	9	6	12	10	11	15	16	10	18	8	5
<b>Total</b>	<b>9,100</b>	<b>7,841</b>	<b>8,758</b>	<b>7,279</b>	<b>8,124</b>	<b>8,340</b>	<b>7,919</b>	<b>8,581</b>	<b>7,373</b>	<b>8,113</b>	<b>7,317</b>	<b>7,130</b>

Note: Cells highlighted green indicate the top 3 highest volume grievance categories/subcategories for the report month.



# Monthly Grievance Rate per 1000 members for 2023



# Know Your Rights

- How can a member submit a grievance or appeal? How does L.A. Care communicate with the member during both the grievance and appeal process?
  - There are several options available when filing a grievance or an appeal. It can be sent via mail, online at LACare.org, fax, or by calling the call center or a provider's office. The member, member representative, or their doctor (appeal only) can contact our Plan to file.
  - If a member is not happy, has problems, or has questions about the service or care they received, they can let their doctor or LA Care know. Their doctor may be able to help answer questions. If the member is still not happy, they may report their problem—or file a grievance—with L.A. Care.
  - If you believe that L.A. Care has wrongly denied, changed, or delayed a health care service because it was found not medically necessary, you have the right to file an appeal.
  - Once a grievance or appeal is filed, an acknowledgment letter and L.A. Care will send a letter to explain the resolution, which will be sent by U.S. mail. Additionally, communication by phone is also available.

## To file a grievance or an appeal

Write, visit, or call L.A. Care.  
Member Services Department  
1055 W. 7th Street, 10th Floor  
Los Angeles, CA 90017

Call us: at [1-888-839-9909](tel:1-888-839-9909), fax 213-438-5748 or fill out a grievance form at LACare.org.

L.A. Care representatives are available 24 hours a day, 7 days a week, including holidays.



# Improving Processes

- To ensure a smooth and satisfactory experience for our members, A&G will implement an interdictory call to members. This process will help us validate that we have all the information needed to fully address the member's concerns.
- A&G will ensure that the member(s) are able to access the authorized service(s) approved during the appeal or grievance process. This will enable us to improve the member experience and identify any challenges that the member's maybe experiencing related to access. This step could lead to a possible reduction of grievances.
- The A&G Team will continue to work with our internal and external business partners, sharing feedback with them to identify areas where we can improve our services to better assist the member.

By following these processes and working collaboratively with our business partners, we can ensure that our members receive the best possible experience and services.



