

## Provider Complaint Summary Report

Health Plan ID: 2162446  
 Health Plan Name: CHS  
 Health Plan Contact: [REDACTED]  
 Contact Email: [REDACTED]  
 Report Period Start Date: 7/14/2012  
 Report Period End Date: 7/31/2012

## BAYOU HEALTH Reporting

Document ID: SI182  
 Document Name: PROVIDER COMPLAINT SUMMARY REPORT  
 Reporting Frequency: Monthly  
 Report Due Date: 15th of the month following end of reporting period  
 File Type: Excel  
 Subject Matter: Informatics (I)

Reporting Period	COMPLAINT STATUS	Total # of Complaints	CLAIMS by ISSUE CATEGORY						# Pending or Closed 31 to 90 Days Post File Date <sup>1</sup>	# Pending or Closed >90 Days Post File Date <sup>1</sup>
			Claims/ Payment	Covered Services	PAs/Referrals	PCP Auto-Assign/ Linkages	Provider Registry/ Directory	Lack of Information /Response		
Jul-2012	Complaints Received this Month	7	2				2	1	2	
	Total Closed this Month									
	Withdrawn by Provider									
	Per Internal Plan Complaint Process	6								
	Per DHH Review									
	Other									
	Total Pending (cumulative as of month end)	1								
	Information needed from Provider									
	Internal Plan Review									
	Referred to DHH									
Other	1									
Total Complaints Received YTD										
Total Closed YTD										
Withdrawn by Provider										
Per Internal Plan Complaint Process										
Per DHH Review										
Other										
2012 Year to Date (YTD)										

This purpose of this report is to capture and track the volume, type and status of PROVIDER complaints. A complaint includes any provider dispute of the CCN's policies, procedures, or any aspect of the CCNs administrative functions. It DOES NOT include any provider appeals for the denial, reduction or suspension of medically necessary services nor any grievances or appeals filed by providers on behalf of members, those are reported on the State Fair Hearing reports. Complaints should be relevant to Health Plan specific policies and practices and NOT to individual claim items. Please refer to Definitions for status & category details.

<sup>1</sup>You must submit a complaint summary sheet detailing all pending or closed (A1) complaints not resolved within 30 to 90 days a(see format on "SI 182-attachment" TABS)