

Provider Complaint & Appeal Summary Report

BAYOU HEALTH Reporting

Health Plan ID: 2162934
 Health Plan Name: LaCare
 Health Plan Contact: ***
 Contact Email: ***
 Report Period Start Date: 20130101
 Report Period End Date: 20130131

Document ID: PI182
 Document Name: **PROVIDER COMPLAINT & APPEAL SUMMARY REPORT**
 Reporting Frequency: Monthly
 Report Due Date: 15th of the month following end of reporting period
 File Type: Excel
 Subject Matter: Informatics (I)

Summary of Appeal Decisions	By Health Plan	By Arbitration
Total # Decisions	9	0
% Upheld	67	0
% Overturned	33	0
% Withdrawn	0	0

Reporting Period	COMPLAINT STATUS	Total # of Provider Complaints	# of COMPLAINTS by ISSUE CATEGORY							# Complaints Pending or Closed 31 to 90 Days Post File Date ¹	# Complaints Pending or Closed >90 Days Post File Date ¹	Total Provider Appeals	By Appeal Type		# Appeals Pending or Closed 31 to 90 Days Post File Date ²	# Appeals Pending or Closed >90 Days Post File Date ²		
			Claims / Payments	Covered Services	PAs/Referrals	PCP Auto-Assign/Linkages	Provider Registry/Directory	Lack of Information /Response	Other				Pre-Service Denial	Payment Denial				
Jan-2013	Received this Month	1003	922	1	12	0	2	1	65			9	9					
	Total Closed this Month	1056	976	1	11	0	4	1	63	12	0	9	9					
	Withdrawn by Provider																	
	Per Internal Plan Action/Decision	1056	976	1	11	0	4	1	63	12	0	9	9					
	Per Independent Arbitration																	
	Per DHH Review																	
	Other (Review determined not a complaint)																	
	Total Pending (cumulative as of month end)	29	24	0	2	0	0	0	0	3	2	0	0	0				
	Information needed from Provider																	
	Internal Plan Review	29	24	0	2	0	0	0	0	3	2	0	0	0				
	Independent Arbitration																	
DHH Review																		
Other (Review determined not a complaint)																		
2013 Year to Date (YTD)	Total Complaints Received YTD	1003	922	1	12	0	2	1	65			9	9					
	Total Closed YTD	1056	976	1	11	0	4	1	63	12	0	9	9					
	Withdrawn by Provider																	
	Per Internal Plan Decision/Correction	1056	976	1	11	0	4	1	63	12	0	9	9					
	Per Independent Arbitration																	
	Per DHH Decision																	
Other (Review determined not a complaint)																		

¹You must submit Attachment 1 - Complaint Summary Listing detailing all pending or closed (A1) complaints not resolved within 30 to 90 days

²You must submit Attachment 2 - Appeal Summary Listing detailing all pending or closed (A1) appeals not resolved within 30 to 90 days.

PI 182 - Attachment 1: Summary listing of Complaints Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: LaCare
 Reporting Period: Jan-2013

Status Category Codes	
Pending	Closed
P1-Information needed from Provider P2-Internal Plan Review P3-Per Independent Arbitration P4-Referred to DHH P5-Other	C1-Withdrawn by Provider C2-Per Internal Plan Action/Decision C3-Per Independent Arbitration C4-Per DHH Review C5-Other

Date Filed (YYYYMMDD)	Name of Person Filing Complaint	Organization	Summary of Complaint	Summary of Attempts to Resolve Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
06-Dec-12	Linda	RUSHING, BRANDI N.	Claims / Payments	Provider Agreement updated/under review		57	P2
26-Dec-12	ashley	CUCCIA, CHARMAINE	Claims / Payments	Provider Agreement updated/under review		37	P2
15-Oct-12	Caeli	TOURO INFIRMARY	Claims / Payments	work request needed	03-Jan-13	80	C2
17-Oct-12	Nikki	ALLEN PARISH HOSPITAL RURAL HEALTH CENTER	Provider Registry/ Directory	Provider Agreement updated/under review	03-Jan-13	78	C2
18-Oct-12	Stacey	VICK, STEPHEN R.	Claims / Payments	Provider Agreement updated/under review	03-Jan-13	77	C2
31-Oct-12	Lillian	BORNE, JESSICA	Claims / Payments	Provider Agreement updated/under review	15-Jan-13	76	C2
12-Nov-12	Deborah	LEBLANC, BRIAN J.	Claims / Payments	work request needed	04-Jan-13	53	C2
12-Nov-12	Beth	SANFORD, ALISON L.	Claims / Payments	Provider Agreement updated/under review	02-Jan-13	51	C2
14-Nov-12	Nirupa	SAINI, SATINDER	Claims / Payments	prov education	02-Jan-13	49	C2
16-Nov-12	Sally	COOLEY, BRETT A.	Claims / Payments	Provider Agreement updated/under review	03-Jan-13	48	C2
29-Nov-12	Jade	RAMSEY, ROSS D.	Claims / Payments	Provider Agreement updated/under review	03-Jan-13	35	C2
30-Nov-12	Toni	SCHWAB, JOHN K.	Claims / Payments	prov education	03-Jan-13	34	C2
30-Nov-12	chase	TAYLOR, FLYNN A.	Claims / Payments	sent to PM	03-Jan-13	34	C2
06-Dec-12	Netta	SMOTHERS, RUTH L.	Claims / Payments	Provider Agreement updated	15-Jan-13	40	C2

PI 182 - Attachment 2: Summary listing of Appeals Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: LaCare
 Reporting Period: Jan-2013

Status Category Codes	
Pending	Closed
P1-Information needed from Provider	C1-Withdrawn by Provider
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision
P3-Per Independent Arbitration	C3-Per Independent Arbitration
P5-Other	C5-Other

Date Filed (YYYYMMDD)	Name of Person Filing Appeal	Organization	Summary of Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
No data to report						