

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: 20130301
 Report Period End Date: 20130331

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	33	0
% Upheld	79%	0
% Overturned	21%	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% Withdrawn	0	0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		
Mar-2013	Received this Month	757	719	1	1	0	0	1	35		37	37				
	Total Closed this Month	750	713	1	1	0	0	1	34	0	33	33				
	Withdrawn by Provider															
	Per Internal Plan Action/Decision	750	713	1	1	0	0	1	34	0	33	33				
	Per Independent Arbitration															
	Per DHH Review															
	Other (Review determined not a complaint)															
	Total Pending (cumulative as of month end)	28	26	0	0	0	0	0	2	0	4	4				
	Information needed from Provider															
	Internal Plan Review	28	26	0	0	0	0	0	2	0	4	4				
	Independent Arbitration															
DHH Review																
Other (Review determined not a complaint)																
2013 Year to Date (YTD)	Total Complaints Received YTD	2756	2585	5	14	0	3	3	146		50	50				
	Total Closed YTD	2810	2637	5	15	0	5	3	145	14	46	46				
	Withdrawn by Provider															
	Per Internal Plan Decision/Correction	2810	2637	5	15	0	5	3	145	14	46	46				
	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.

