

# Provider Complaint & Appeal Summary Report

# BAYOU HEALTH Reporting

Health Plan ID: 2162845  
 Health Plan Name: Louisiana Healthcare Connections  
 Health Plan Contact: \*\*\*  
 Contact Email: \*\*\*  
 Report Period Start Date: 9/1/2013  
 Report Period End Date: 9/30/2013

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	258	
% Upheld	12%	
% Overturned	43%	
% Withdrawn	2%	

Reporting Period	COMPLAINT STATUS	Total # of Provider Complaints	# of COMPLAINTS by ISSUE CATEGORY							# Complaints Pending or Closed 31 to 90 Days Post File Date <sup>1</sup>	# Complaints Pending or Closed >90 Days Post File Date <sup>1</sup>	Total Provider Appeals	By Appeal Type		# Appeals Pending or Closed 31 to 90 Days Post File Date <sup>2</sup>	# Appeals Pending or Closed >90 Days Post File Date <sup>2</sup>
			Claims / Payments	Covered Services	PAs/Referrals	PCP Auto-Assign/Linkages	Provider Registry/Directory	Lack of Information /Response	Other				Pre-Service Denial	Payment Denial		
Sep-2013	Received this Month	207	198	0	0	0	0	1	8		50					
	<b>Total Closed this Month</b>	326	265	0	2	0	0	1	58	93	48	26				1
	Withdrawn by Provider	0	0	0	0	0	0	0	0							
	Per Internal Plan Action/Decision	326	265	0	2	0	0	1	58	93	48					
	Per Independent Arbitration															
	Per DHH Review	0	0	0	0	0	0	0	0							
	Other	0	0	0	0	0	0	0	0							
	<b>Total Pending (cumulative as of month end)</b>	139	114	0	0	0	0	0	25	30	14	31			0	0
	Information needed from Provider	0	0	0	0	0	0	0	0							
	Internal Plan Review	139	114	0	0	0	0	0	25	30	14					
	Independent Arbitration														0	0
	DHH Review	0	0	0	0	0	0	0	0							
Other	0	0	0	0	0	0	0	0								
2013 Year to Date (YTD)	<b>Total Complaints Received YTD</b>	1760	1237	8	12	1	8	6	488		260					
	<b>Total Closed YTD</b>	1621	1123	8	12	1	8	6	463	788	194	258			0	0
	Withdrawn by Provider	0	0	0	0	0	0	0	0							
	Per Internal Plan Decision/Correction	1621	1123	8	12	1	8	6	463	788	194					
	Per Independent Arbitration															
	Per DHH Decision	0	0	0	0	0	0	0	0							
Other	0	0	0	0	0	0	0	0								

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

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

This report was based on LA Healthcare Connections' understanding of the current report specifications provided by DHH. The report programming is still under review, thus any changes may result in resubmission of the report. This report should not be used for comparative purposes until all reporting format and specifications have been finalized.