Participant Grievance and Appeals Process

At **Vista Community Clinic PACE (VCC PACE)**, we share responsibility for your care and your satisfaction with the services you receive. Our grievance process gives you or your representative an opportunity to express concerns or dissatisfaction so that we can address them in a timely and appropriate manner.

Our appeals process allows you or your representative to request a review of certain decisions regarding services or payment for services.

You will receive written information about the grievance and appeals processes when you enroll in VCC PACE and at least annually thereafter. At any time, you may ask VCC PACE staff for assistance with filing a grievance or appeal.

If you do not speak English or need communication assistance, VCC PACE will provide appropriate language or communication assistance.

You will not be discriminated against, threatened, or retaliated against because you file a grievance or appeal. Your grievance or appeal will be handled confidentially, and information related to your grievance or appeal will be disclosed only to individuals authorized to receive it or as otherwise permitted or required by law.

GRIEVANCE PROCESS

What Is a Grievance?

A grievance is a verbal or written complaint expressing dissatisfaction with the services provided or the quality of care furnished by VCC PACE, regardless of whether you request corrective action.

A grievance may include, but is not limited to:

- The quality of services you receive at home, at a VCC PACE Center, or during an inpatient stay.
- Waiting times on the telephone or in a waiting or examination area.
- The behavior of a health care provider, VCC PACE employee, contractor, or other individual involved in providing your care.
- The adequacy or condition of VCC PACE facilities.
- The quality of food provided by VCC PACE.
- Transportation services.
- A concern about your participant rights.
- Any other concern or dissatisfaction regarding the delivery of PACE services.

These examples are consistent with the current California DHCS description of PACE grievances.

Filing a Grievance

You or your representative may file a grievance verbally or in writing.

You may:

- Speak with any VCC PACE staff member.
- File your grievance in person.
- File your grievance by telephone.
- Submit your grievance in writing by mail, fax, or email.
- Ask a VCC PACE staff member to help you document your grievance.

You do not need to use a specific form to file a grievance.

When you file a grievance, please provide enough information for VCC PACE to understand your concern and investigate it appropriately. VCC PACE staff will assist you if you need help documenting or submitting your grievance.

VCC PACE Contact Information

VCC PACE
425 E Colorado St., Suite 100/110
Glendale, CA 91205

Phone: 818-237-3400
Toll-Free: 1-877-822-7223 (1-877-VCC-PACE)
TTY: 711
Fax: 818-237-3419
Email: info@vccpace.org

Grievance Review

The staff member who receives your grievance will make sure that it is appropriately documented and forwarded for review.

VCC PACE will maintain the confidentiality of information related to your grievance. The appropriate VCC PACE staff or department will investigate the concern and take appropriate action.

You will receive written acknowledgment of your grievance within **five (5) calendar days** of receiving it. VCC PACE will work to resolve medical and non-medical grievances within **30 calendar days**, while maintaining confidentiality and complying with applicable requirements.

If your grievance cannot be resolved within 30 calendar days, VCC PACE will provide you with written information about the status of your grievance and the expected timeframe for resolution, as applicable.

Expedited Grievance Review

If you believe your grievance involves a serious or imminent threat to your health, including a potential threat to your life, limb, major bodily function, severe pain, or other serious health concern, you may request an expedited review.

VCC PACE will review an expedited grievance as quickly as your health condition requires and will make reasonable efforts to resolve it within **72 hours**.

For an expedited grievance, VCC PACE will inform you or your representative of the receipt of the grievance and the steps being taken to review it.

The current California DHCS grievance policy provides for expedited review with a decision within 72 hours and requires appropriate notification when an expedited grievance is received.

Grievance Resolution

After the investigation is completed and a final resolution is reached, VCC PACE will provide you or your representative with written information about the outcome of your grievance.

The resolution information will include, as applicable:

- The concern that was reviewed.
- The actions taken to investigate or address the concern.
- The outcome of the grievance.
- Available options if you are not satisfied with the resolution.

OPTIONS IF YOU ARE NOT SATISFIED WITH A GRIEVANCE RESOLUTION

If you are not satisfied with the resolution of your grievance, you may have additional options.

If you have Medi-Cal or both Medi-Cal and Medicare, you may contact the California Department of Health Care Services (DHCS) regarding your grievance.

You may also have the right to request a California State Hearing through the California Department of Social Services (CDSS).

You do not necessarily have to wait for the entire internal grievance process to be completed if your situation represents a serious health threat. The applicable external review options and timeframes depend on the circumstances of your grievance and your coverage.

VCC PACE will provide information and assistance regarding the options available to you.

California Department of Health Care Services

For information about PACE grievances and participant assistance, contact DHCS through its current PACE resources and contact channels.

VCC PACE can assist you in identifying the appropriate DHCS contact.

California Department of Social Services – State Hearings Division

You may request a State Hearing regarding applicable Medi-Cal matters.

California Department of Social Services
State Hearings Division
P.O. Box 944243, Mail Station 19-37
Sacramento, CA 94244-2430

Phone: 1-800-952-5253
TTY: 1-800-952-8349

State Hearing deadlines can vary depending on the action being challenged. VCC PACE will provide you with the applicable information and deadline when a State Hearing right applies.

APPEALS PROCESS

What Is an Appeal?

An appeal is an action taken by a participant, representative, or treating provider to request review of a VCC PACE decision concerning the non-coverage or non-payment of a service.

An appeal may involve a decision to:

- Deny a requested service.
- Defer a requested service.
- Reduce a service.
- Modify a service.
- Terminate a service.
- Deny payment for a service.

You have the right to appeal a decision concerning VCC PACE's failure to approve, furnish, arrange for, continue, or pay for a service that you believe should be provided or covered.

California DHCS defines a PACE appeal in substantially the same way.

Who May File an Appeal?

An appeal may be filed by:

- You, the VCC PACE participant.
- Your designated representative.
- Your treating provider, when permitted by applicable requirements.

You may appoint a representative to assist you with the grievance or appeal process. See **Appointing a Representative** for more information.

How to File an Appeal

You may file an appeal:

- Verbally, in person.
- By telephone.
- In writing.
- With the assistance of a VCC PACE staff member.

You may submit relevant facts, medical information, documents, or other evidence supporting your appeal.

Contact VCC PACE

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Glendale, CA 91205

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If VCC PACE denies, defers, reduces, modifies, or terminates a requested service or denies payment for a service, you will receive written information explaining the decision and your applicable appeal rights.

STANDARD APPEAL

A standard appeal is an appeal that does not qualify for expedited review.

VCC PACE will review and resolve a standard appeal as quickly as your health condition requires, but no later than **30 calendar days** after receiving the appeal.

You or your representative may provide relevant facts and evidence in person or in writing.

The person or group reviewing your appeal will be appropriately qualified and will not have been involved in the original decision or have a stake in the outcome of the appeal.

These requirements are included in the current California DHCS PACE Appeal Policy.

VCC PACE will provide written notification of the appeal decision.

If the decision is fully in your favor, VCC PACE will provide or arrange for the service as quickly as your health condition requires.

EXPEDITED APPEAL

You may request an expedited appeal if you believe that waiting for a standard appeal decision could seriously jeopardize your life, health, or ability to regain maximum function.

VCC PACE will resolve an expedited appeal as quickly as your health condition requires, but no later than **72 hours** after receiving the appeal.

The 72-hour timeframe may be extended by up to **14 calendar days** if:

1. You request the extension; or
2. VCC PACE justifies to the State Administering Agency the need for additional information and explains how the delay is in your best interest.

These are the current timeframes in the California DHCS PACE Appeal Policy.

If VCC PACE determines that an appeal does not qualify for expedited review, you will be notified and the appeal will be handled as a standard appeal.

APPEAL ACKNOWLEDGMENT AND REVIEW

For a standard appeal, VCC PACE will provide written acknowledgment of receipt in accordance with applicable requirements.

For an expedited appeal, VCC PACE will promptly notify you or your representative that the expedited appeal has been received.

The appeal will be reviewed by an appropriately qualified and impartial individual or group that was not involved in the original decision and does not have a stake in the outcome.

You or your representative may submit relevant information and evidence for consideration.

VCC PACE will provide written notification of the appeal decision.

ADDITIONAL APPEAL RIGHTS

If VCC PACE does not decide fully in your favor or does not provide a decision within the applicable timeframe, you may have additional appeal rights through Medicare, Medi-Cal, or both, depending on your coverage and the nature of the decision.

VCC PACE will provide written information explaining the external appeal rights available to you.

If you are enrolled in both Medicare and Medi-Cal, VCC PACE will provide information to help you understand the applicable options.

Medi-Cal State Hearing

For applicable Medi-Cal matters, you may request a State Hearing through the California Department of Social Services.

California Department of Social Services
State Hearings Division
P.O. Box 944243, Mail Station 19-37
Sacramento, CA 94244-2430

Phone: 1-800-952-5253
TTY: 1-800-952-8349

VCC PACE will provide the applicable State Hearing deadline and instructions when you receive a decision for which a State Hearing is available.

Medicare External Appeal

If you are enrolled in Medicare, you may have the right to an external review by the current Medicare-contracted independent review entity.

Because Medicare's external-review contractor and procedures can change, VCC PACE will provide the **current contractor name, address, telephone number, fax number, and filing instructions** in the notice explaining your external appeal rights.

CONTINUATION OF SERVICES DURING AN APPEAL

If you are receiving a service that VCC PACE proposes to reduce, suspend, or terminate, you may have the right to continue receiving the service while an appeal is pending, subject to applicable PACE, Medicare, and Medi-Cal requirements.

VCC PACE will provide information about whether continued services are available and whether you may be responsible for payment if the final decision is not in your favor.

PAYMENT APPEALS

If your appeal concerns payment for a service you have already received, VCC PACE will review the appeal in accordance with applicable PACE requirements.

If the appeal is decided fully in your favor, VCC PACE will provide or arrange for payment within the applicable timeframe.

For payment appeals, the applicable timeframe may differ from the timeframe for a service request. VCC PACE will explain the applicable timeframe in the information provided to you.

AUTOMATIC APPEAL

When required by applicable PACE requirements, if VCC PACE does not make a timely decision on a service request, the request may be processed as an automatic appeal.

If an automatic appeal is initiated, VCC PACE will provide you with written notice explaining the process and your rights.

APPOINTING A REPRESENTATIVE

You have the right to appoint someone to assist you with your grievance or appeal.

You may appoint an attorney, family member, friend, caregiver, or another individual to act as your representative.

For more information, please see **Appointing a Representative** or contact VCC PACE.

ASSISTANCE WITH GRIEVANCES AND APPEALS

You do not have to navigate the grievance or appeal process alone.

VCC PACE staff can:

- Explain the grievance and appeals processes.
- Help you document a grievance or appeal.
- Provide the appropriate forms.

- Explain applicable deadlines.
- Help you understand written notices.
- Provide language or communication assistance.
- Explain your rights to appoint a representative.
- Provide information about applicable external review options.

If you need assistance, contact:

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VCC PACE will treat you with respect throughout the grievance and appeals process and will not discriminate or retaliate against you for exercising your rights.