

PACE SOUTHEAST MICHIGAN

POLICY MANUAL

Policy Title: Grievance Process
Section Title: Administrative Policies
Origination Date: 1999
Revised Date: 12/2021

Policy #: 1.16
CMS Regulation: 460.120
State of MI Regulation:

DEFINITION:

A grievance is defined as a complaint, either written or oral, expressing dissatisfaction with service delivery or the quality of care furnished.

POLICY:

Participants and their designated representative of the PACE Southeast Michigan (SEMI) program, who have a concern or complaint about their quality of care or service delivery, have access to the established grievance process. Moreover, it is PACE SEMI's policy to uphold all participant rights. All reasonable efforts to resolve these grievances through a timely manner and in compliance with regulatory requirements. Participants can file a formal grievance either orally or in writing. Participants/designated representative have the right to voice their concerns, free of any restraint, interference, coercion, discrimination or reprisal by the PACE SEMI staff.

Grievances are kept confidential. PACE SEMI will keep the complaint private, to the extent possible. The Center Manager will decide who needs to be notified of the grievance. Confidentiality is part of the annual mandatory in-service and violations of the policy will result in disciplinary action. Contracted providers will be held accountable to all grievance procedures established by PACE SEMI. PACE SEMI will monitor providers' compliance with this requirement. The grievance process and applicable procedures will be reviewed both orally and in writing with the participant/designated representative by the designated staff member at the time of enrollment and at least annually at time of annual review. Beneficiary notification will include the availability of assistance with completing a grievance. The grievance policy and procedure will be made available upon request to the participant/designated representative.

A written record of all grievances and resolutions shall be maintained and reviewed at least quarterly by the Quality and Compliance Department and PACE SEMI leadership. The Center Manager is responsible for documenting the grievance in the participant's medical record in the grievance module of Truchart. The Quality and Compliance Department is responsible for maintaining, aggregating, analyzing and reporting this information.

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PROCEDURE:

Filing a Grievance

1. A complaint/grievance may be expressed either orally or in writing to the participant's any member of the IDT. If assistance in filing a grievance is needed, any member of the IDT can provide this service.
2. Upon receipt of the grievance, the PACE SEMI Center Manager verbally discusses and provides specific steps, including the timeframe for the response, with the complainant in writing within 5 business days.
3. If the participant/family member/representative wishes to file a grievance during non-center hours, the administrator on call will be responsible for receiving and then communicating the grievance to the PACE SEMI Center Manager the next business day.

Documentation of Grievances

1. Grievance Log is maintained in the grievance module in our electronic medical record
2. It is the responsibility of the Center Manager to ensure documentation and follow up on the grievance.

Resolution

1. Notification of the receipt of the grievance will be mailed to the participant or representative within five business days of receipt of the complaint. It is the responsibility of the Center Manager to investigate and seek resolution of the grievance within thirty (30) calendar days from the date it was received.
2. PACE SEMI will continue to furnish all required services to the participant during the Grievance Process.
3. The Center Manager investigates the problem, determine the best method to solve the problem, and take the necessary steps needed to settle the matter, including meeting with parties involved when necessary, or taking the matter up with the Executive Team.
4. Once the grievance response has been determined, the participant/designated representative is sent a written copy of the proposed resolution. Included in the letter are steps that can be taken if the participant/designated representative are not satisfied with the resolution.

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Dissatisfaction

1. Any participant/designated representative who is dissatisfied with the outcome of the grievance resolution can take further action by contacting the PACE SEMI Director of Operations within thirty (30) calendar days of the proposed resolution.
2. All efforts are made by the PACE SEMI Director of Operations to resolve the ongoing grievance and inform the participant of the final proposed resolution within thirty (30) calendar days.

TRACKING, ANALYSIS AND REPORTING:

1. Information on all Grievances is shared with the PACE SEMI Quality & Compliance Department to maintain, aggregate and analyze information. This information shall be used to populate the Grievance Record Layout and reported to CMS for audit purposes.
2. All Grievance related documentation is maintained in the electronic medical record.
3. Grievance data shall be reviewed on monthly a basis by PACE SEMI Quality & Compliance Department and shared on a quarterly basis with leadership. Also the data is utilized in PACE SEMI internal quality improvement program.