

## Report to the Legislature

# PEBB Annual Report of Customer Service Complaints and Appeals

Substitute Senate Bill 6584, Chapter 293, Laws of 2010 RCW 41.05.630

September 16, 2015

Washington State Health Care Authority
Public Employees Benefits Division
PO Box 42684
Olympia, WA 98504-2684
(360) 725-0440

Fax: (360) 725-0771

#### **Executive Summary**

The Washington Legislature passed SSB 6584 in 2010 and it was codified as RCW 41.05.630. This statute requires the Health Care Authority (HCA) to capture customer service complaints for each health plan that provides medical coverage to the Public Employees Benefits Board (PEBB) Program and to summarize the complaints and appeals made by PEBB Program members related to these health plans.

The resulting report, delivered to the Legislature annually, contains a summary count of complaints and appeals for the previous twelve months and records annual trends that are related to the following categories:

- 1. Availability of a health care service, or
- 2. Customer service, or
- 3. Quality of a health care service.

#### Scope of the 2015 Report

Each health plan provided the number of complaints and appeals related to the three categories described above. However, the data is limited by two factors.

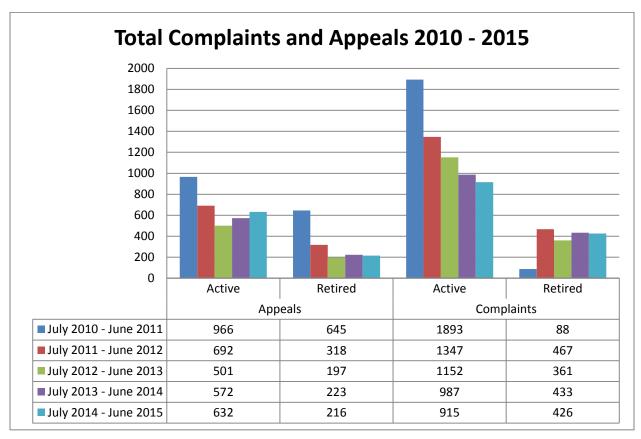
- The plans do not use these three specific categories to track complaints internally or in other reports to the HCA. Each plan individually determines the placement of complaints and appeals into these three categories. This may result in some inconsistencies in how the plans sort complaints.
- 2. This report includes only those complaints and appeals that fit into one of the three named categories. Complaints and appeals that do not fit into one of the three named categories are not included in this report.

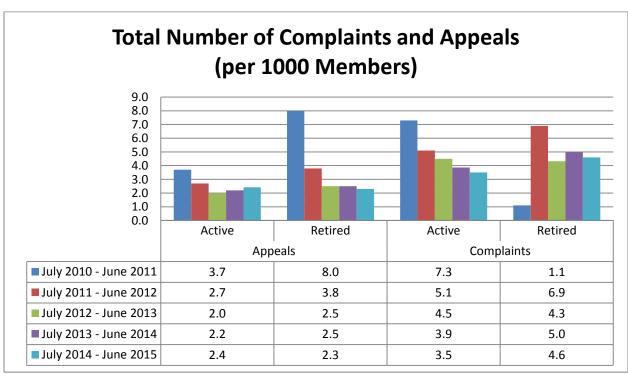
## PEBB Health Plan Complaints and Appeals Data

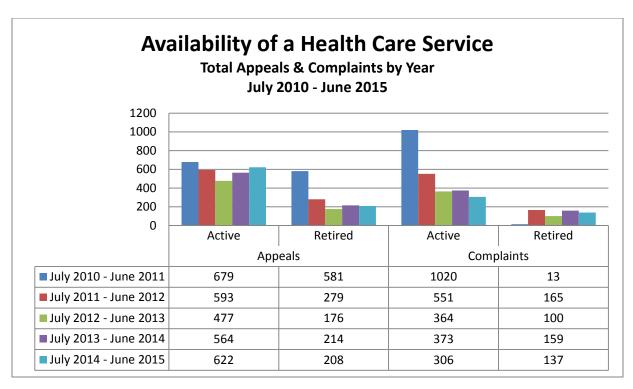
| Total Number of Appeals and Complaints |         |         |            |         |  |  |
|--|---------|---------|------------|---------|--|--|
| July 2014 - June 2015                  | Appeals |         | Complaints |         |  |  |
|  | Active  | Retired | Active     | Retired |  |  |
| Availability of a Health Care Service  | 622     | 208     | 306        | 137     |  |  |
| Customer Service                       | 8       | 8       | 519        | 229     |  |  |
| Quality of a Health Care Service       | 2       | 0       | 90         | 60      |  |  |
| Total                                  | 632     | 216     | 915        | 426     |  |  |

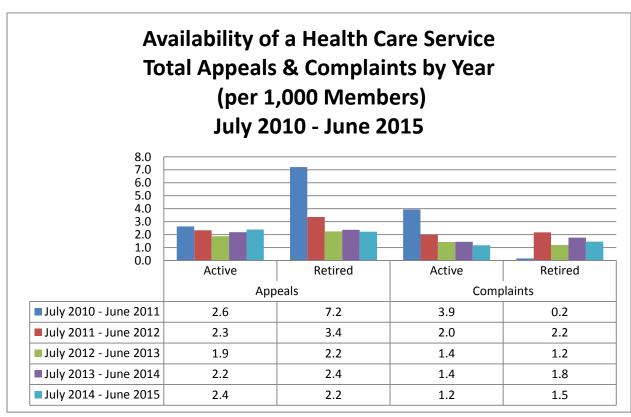
| Appeals and Complaints per 1,000 Members |         |         |            |         |  |  |
|--|---------|---------|------------|---------|--|--|
| July 2014 - June 2015                    | Appeals |         | Complaints |         |  |  |
|  | Active  | Retired | Active     | Retired |  |  |
| Availability of a Health Care Service    | 2.4     | 2.2     | 1.2        | 1.5     |  |  |
| Customer Service                         | < 1     | < 1     | 2.0        | 2.5     |  |  |
| Quality of a Health Care Service         | < 1     | < 1     | < 1        | < 1     |  |  |
| Total                                    | 2.4     | 2.3     | 3.5        | 4.6     |  |  |

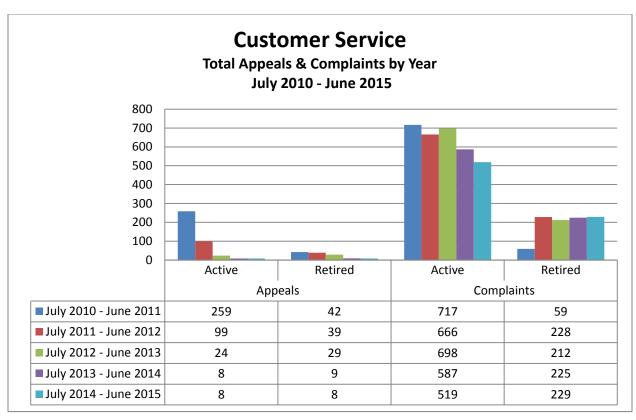
### Complaints and Appeals Data 2010-2015

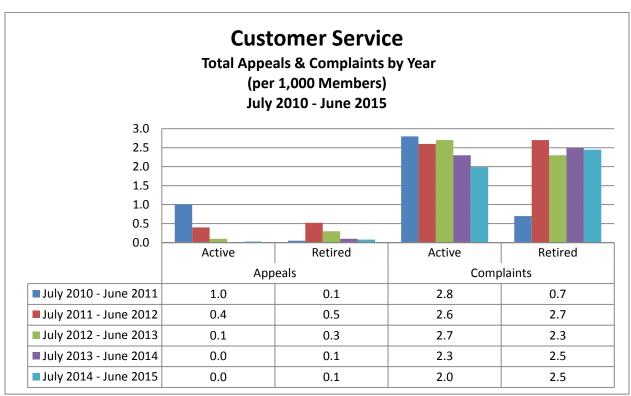


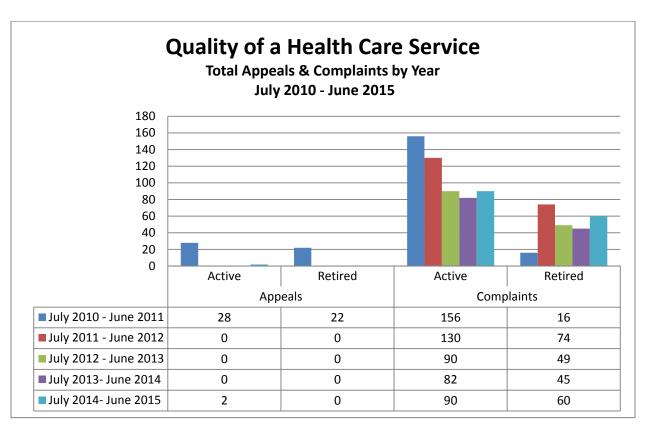


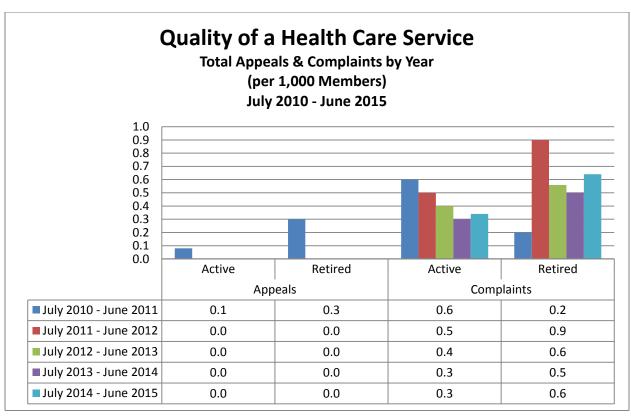












#### **Analysis**

The Public Employees Benefits (PEB) Division regularly monitors PEBB Program health plan complaints and appeals statistics. PEB Division contract management staff work with the plans to address benefit administration and plan design issues that generate any significant complaints and appeals.

During fiscal year 2015, complaints have increased slightly around *Quality of a Health Care Service*. However, when viewed as appeals per 1,000 members, the increase remains less than one per 1,000 members. *Complaints* have fallen over nearly every other category, and *Customer Service* complaints have remained steady for Retirees, while falling for Active Employees.

The total number of *Appeals* has declined over the five years tracked. From the high totals in 2010, the 2015 totals have dropped roughly 30 percent. Given that we have a July 2015 enrollment of 260,034 *Active Employees* and 93,370 *Retirees*, the number of *Appeals* is a mere 2.4 per 1,000 members for both groups.

Overall, the small number of *Complaints and Appeals* per 1,000 members does not indicate any significant complaint or appeal trend. In fact, over the last four years, it seems to show that the initial spike may have been an anomaly, due to the transition to a new Third Party Administrator for the Uniform Medical Plan.