

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 24, 2014

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Executive Summary

The Washington Legislature passed legislation (SSB 6584) in 2010, which requires the Health Care Authority to capture customer service complaints and requires each health plan that provides Public Employees Benefits Board (PEBB) Program medical coverage to submit a summary of customer service complaints and appeals to the agency.

This bill was codified as RCW 41.05.630. It directs the Health Care Authority to report to the legislature annually, beginning in September 2011, summarizing the complaints and appeals made by PEBB Program members related to the Health Care Authority PEBB Program health plans. The report is to contain a summary count of complaints and appeals for the previous twelve months and annual trends that are related to the following categories:

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

Scope of the 2014 Report

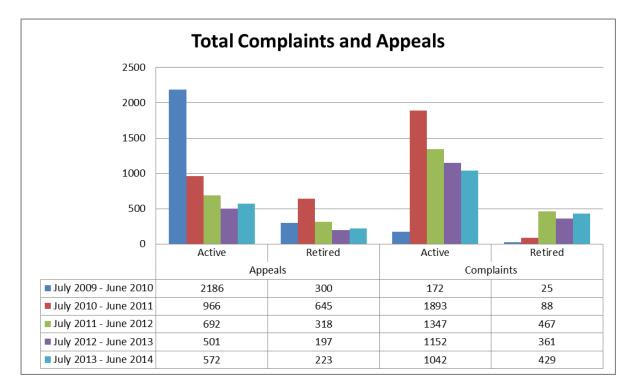
Each health plan provided the number of complaints and appeals related to the three categories described above. However, there are two limitations to keep in mind when interpreting this report.

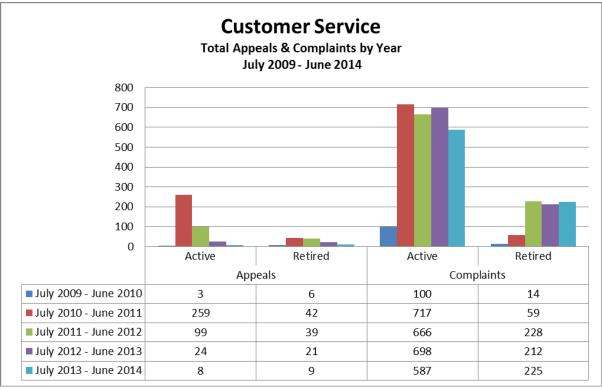
- The plans do not use these three specific categories to track complaints internally or in other reports to the Health Care Authority. Each plan individually determined the placement of complaints and appeals into these three categories. This may result in some inconsistencies in how the plans sorted complaints into these categories.
- 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.

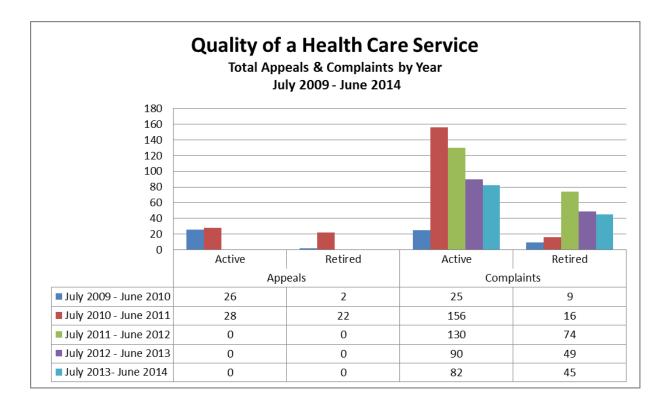
PEBB Health Plan Complaints and Appeals Data

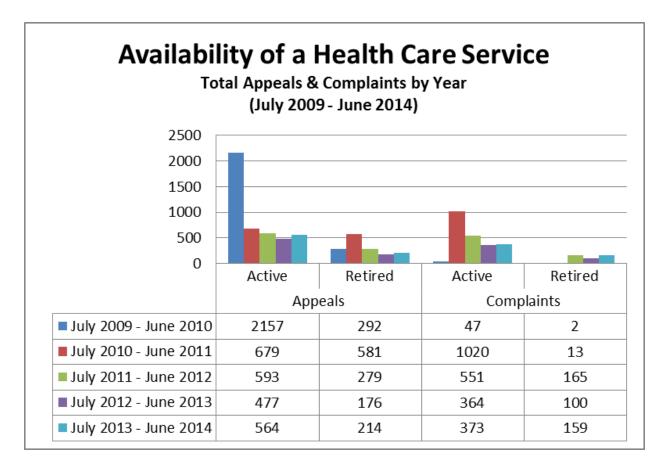
Total Number of Appeals and Complaints						
July 2013 - June 2014	Appeals		Complaints			
	Active	Retired	Active	Retired		
Customer Service	8	9	587	225		
Quality of a Health Care Service	0	0	82	45		
Availability of a Health Care Service	564	214	373	159		
Total	572	223	1042	429		

Appeals and Complaints per 1000 Members						
July 2013 - June 2014	Appeals		Complaints			
	Active	Retired	Active	Retired		
Customer Service	0.03	.1	2.27	2.5		
Quality of a Health Care Service	0	0	0.31	0.5		
Availability of a Health Care Service	2.18	2.37	1.44	1.76		
Total	2.21	2.47	4.02	4.76		

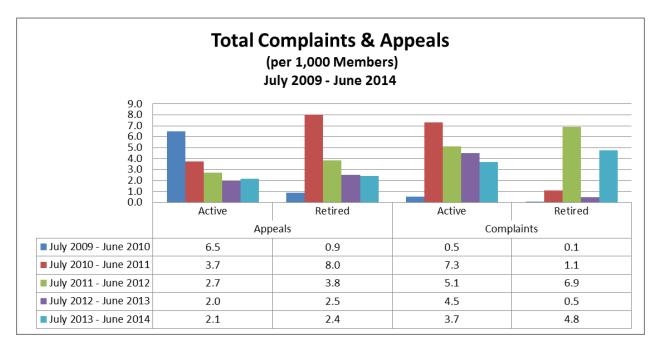


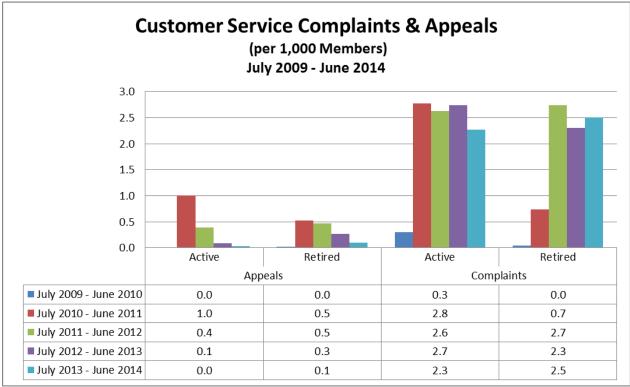


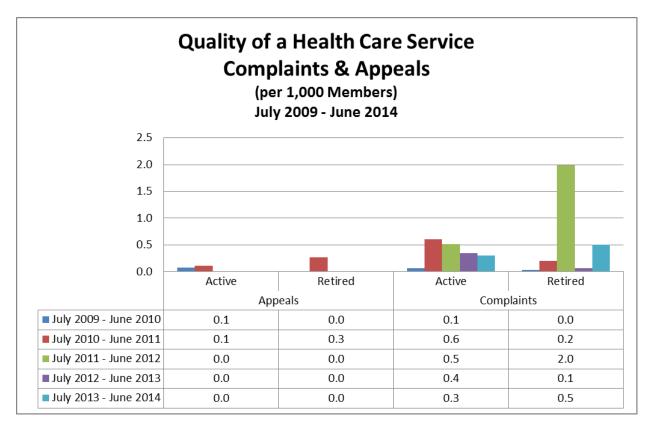


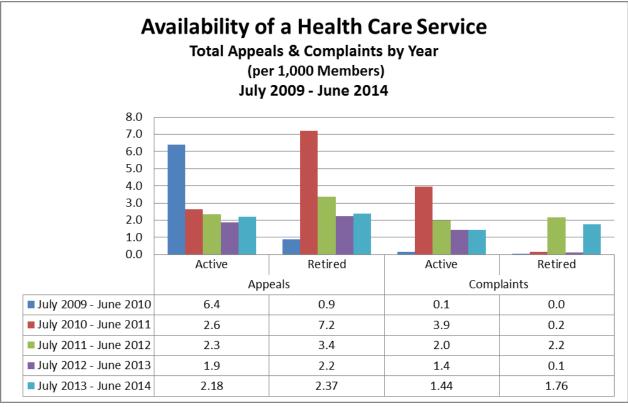


Complaints and Appeals Data per 1000 Members 2009-2014









Analysis

Between fiscal year 2013 and 2014, complaints by retirees have increased, primarily around Availability of a Health Care Service; however, when viewed as appeals per 1000 members, the increase remains under two per 1000. Additionally, in preparing this year's report, we discovered an error in one of the 2013 charts which made it appear that Customer Service complaints per thousand had dropped significantly during that fiscal year. With the error corrected, Customer Service complaints have remained steady over the last three fiscal years.

Overall, the small number of complaints and appeals per 1000 members does not indicate any significant complaint or appeal trend. There are too few complaints and appeals overall to provide for any credible analysis of data based on the three topics measured for this report.

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.