

Cover Page

Qualified Health Plan (QHP) for Individual Market Attachment 3 – Performance Standards and Expectations Response to Comments

The following is the Covered California response to comments received in Cycle 2 (November 18, 2021 through December 17, 2021) for:

- 2023-2025 QHP Att 3-Performance Standards and Expectations

All documents will be posted to the Plan Management HBEX webpage:
<https://hbex.coveredca.com/stakeholders/plan-management/>.

Response to Comments - Cycle 2 (November 18, 2021 - December 17, 2021)

2023-2025 Qualified Health Plan (QHP) for Individual Market, Attachment 3 - Performance Standards and Expectations

Performance Standard #	Performance Standard Title	Comment	Covered California Response
1.3	Grievance Resolution - 99% to 95%	We feel it is important to note that plans are already required by law to resolve grievances and appeals within 30 days through the Department of Managed Health Care (DMHC) and would encourage raising this to 99% or another de minimis standard.	<p>Per the Knox-Keene Acts, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is proposing to increase the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>
1.3	Grievance Resolution - 99% to 95%	In response to the 12/9/21 draft change from 95% to 99%, we respectfully request this remain at 95%. While we recognize that Covered California is referencing DMHC grievance and appeal regulations, the DMHC audits that are performed on health plans is based on 95% compliance. We hope Covered California will remain consistent with the DMHC audits (medical surveys).	<p>Per the Knox-Keene Act, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is increasing the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>
1.3	Grievance Resolution - 99% to 95%	What we would potentially propose is an incremental increase to 97% for year 1 (2023) and 97% for year 2 (2024)	<p>Per the Knox-Keene Act, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is increasing the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>

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Performance Standard #	Performance Standard Title	Comment	Covered California Response
1.3	Grievance Resolution - 99% to 95%	Some grievances require time beyond the 30 day window to effectively address all elements of a complaint. We see merit in ensuring that grievances are responded to timely and would put forward an alternate solution. Could the Department consider a stepped standard where 95% of cases are responded to within 30 days and 99% resolved within 60 day?	<p>Per the Knox-Keene Act, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is increasing the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>
1.3	Grievance Resolution - 99% to 95%	Increasing the standard from 95% to 99% would increase the Plan's administrative costs and in an environment where the healthcare industry is committed to lowering costs, this proposal runs counter-intuitive to that. Ultimately, these costs would be translated to higher premiums for the members. We would encourage the Department to consider this implication.	<p>Per the Knox-Keene Act, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is increasing the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>
1.3	Grievance Resolution - 99% to 95%	Our only concern about the proposed changes is that given our volume of appeals and grievances, there may be some quarters where it is impossible to be at 99% (mathematically). Our goal is always 100% within 30 days, but if we miss just one case, we might drop down to less than 99%. Carrier recommends leaving it at 95% for that reason.	<p>Per the Knox-Keene Act, Section 1300.68(a), Plans are required to receive, review and resolve grievances within 30 calendar days of receipt by the plan.</p> <p>As a result, Covered CA is increasing the 2023 Performance Standard and Expectation 1.3 Grievance Resolution Expectation from 95% to 99%.</p> <p>•Performance Standard and Expectation 1.3 Grievance Resolution Expectation: 99% of Covered California enrollee grievances resolved within 30 days of initial receipt.</p>

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Performance Standard #	Performance Standard Title	Comment	Covered California Response
1.3 & 1.4	Grievance Resolution and Covered CA member Email or Written Inquiries Answered and Completed	We urge Covered California in addition to tracking data on completeness, consider requiring reporting of qualitative themes and patterns. We note for example that with call abandonment rates still at issue, it would be important for Covered California to review qualitative information from plans and DMHC on the types of grievances, emails and other communications between individuals and plans to make sure individuals are able to access providers through health plan provider directories and other channels. This qualitative data could also help Covered California identify the types of issues health plans may deem as not a grievance to make sure those issues are being addressed appropriately, and to offer a more complete picture of the types of issues consumers are attempting to resolve with their health plans. We wonder how many of these communications involve actual plan questions and how many are instead grievances or attempts to find in-network providers.	Covered CA is adding new quarterly data reporting to include details regarding grievance categories specific to Covered CA participants (similar to current quarterly reporting done for DMHC reporting): Number of Covered CA grievances reported by the following categories – Quality of Care, Quality of Service, Access and Availability, Benefit Coverage, Medical Necessity, or Other.
1.3	Grievance Resolution - Data Collection	We do have a question regarding the break out and what is expected under "Other". - Number of Covered CA grievances reported by the following categories – Quality of Care, Quality of Service, Access and Availability, Benefit Coverage, Medical Necessity, or Other	Covered CA is adding new quarterly data reporting to include details regarding grievance categories specific to Covered CA participants (similar to current quarterly reporting done for DMHC reporting): Number of Covered CA grievances reported by the following categories – Quality of Care, Quality of Service, Access and Availability, Benefit Coverage, Medical Necessity, or Other. We ask that you use the same criteria that you use to report to the Department of Managed Health Care.
1.3	Grievance Resolution - Data Collection	No concerns	Thank you.

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Performance Standard #	Performance Standard Title	Comment	Covered California Response
1.3	Grievance Resolution - Data Collection	For the additional quarterly reporting, we recommend that Covered California provide a new template for this or add additional columns to the existing reporting template.	Thank you. Covered CA will provide a template.