# Medicaid/Exchange Complaints – (Tracking, Resolving & Closing Cases)

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**Description:** Instructions for the Medicaid / Exchange Complaint Resolution team to track, resolve and close a Salesforce.com case for Medicaid / Exchange complaints. It also includes the process for the Offline Research Team to forward correspondence received for a Medicaid / Exchange member.

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| Important Reminders |

An email will be sent out weekly advising who is responsible for the Medicaid Grievance chat daily.

The person responsible for the chat will also be responsible for the following:

* Quality of Care Grievances
* Non-Healthfirst Grievances
* Grievances closed/resolved or closed/unresolved by the CCR in error

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| Process |

Perform the below steps to track, resolve, and close the open Medicaid / Exchange complaints submitted through Salesforce:

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| **Step** | **Action** | | |
| **1** | Access the Salesforce site to review the Grievances pending. | | |
| **2** | Open and review the complaint information in Salesforce. | | |
| **3** | On the Grievances / Compliances tab, ensure you are displaying all Grievances. | | |
| **4** | Locate the complaint and open by clicking the **Grievance / Compliance** number. | | |
| **5** | * Access the member’s profile in Compass and assess the situation.   **Note:** Ensure all the demographic information is entered correctly and matches what is listed in Compass.   * Review the following:  1. Does the Requestor Relationship match who is requesting the Grievance? 2. Was a subcategory selected? 3. Was the correct priority selected? 4. Did the description of the issue indicate dissatisfaction? 5. Was a PA submitted if applicable?   **Note:** If the notes indicate the call was disconnected by the CCR and no follow up was done with the member (possible phone issue, system reboots), the person working the Grievance must call the member to resolve their concerns. | | |
| **If...** | **Then...** | |
| Our PBM can address the grievance | Proceed to the **next step.** | |
| The plan handles the grievance such as:  (Unless indicated on the CIF)   * Enrollment/Disenrollment * Marketing Materials * Doctor’s Office Issues * Quality of Care not related to Mail / Retail * Other grievances not related to PBM processes | Follow the steps below: | |
| **Step** | **Action** |
| **1** | Mark the complaint as a plan related grievance and close in Salesforce as Closed / Unresolved. |
| **2** | In Compass, log the complaint as grievance received, forwarded to the plan, and to refer to Salesforce for details. |
| C:\Jen's Stuff\Subcommittee Stuff\Icon_-_Important_Information.png An exception is identified, as in the case of a health risk, urgent issue, or legal action | Follow the steps below: | |
| **Step** | **Action** |
| **1** | Create an e-mail to the account team.   * In the Subject line, inpute the following: E-mail plan related Grievance Health Risk Identified * In the body of the e-mail, identify the case # then copy and paste case notes. |
| **2** | Close the grievance case as resolved. |
| **6** | a. Coordinate with internal business partners to resolve the complaint as necessary using the guidance below.  **Note:** The Grievance can remain open to 10 calendar days while resolving. Day 1 is considered the day the Grievance is filed.  If in **New York** and there is a significant risk to member’s health, the complaint must be resolved in 48 hours.  b. Attach the final e-mail conversation to each grievance case for documentation.  In your Actions Taken / Resolution, always include the pharmacy and prescriber information if applicable.  You should summarize your findings of the call including information such as:   * Dates PA and Appeals were submitted and approval or denial reasons * Quantity limit if the issue is a Quantity rejection * Pharmacy Name and phone number * Prescriber Name and phone number | | |
| **Complaint / Grievance Category** | **Process** | |
| **Prior Authorization / Appeals** | * If no ePA Key or RM Task is present, submit the task to start the review request. * Review the progress of the existing task and document the status in the Salesforce. * Ensure the name of the medication and the prescriber’s information is included in the notes. * If a previous task was submitted, please include those details as well including the date the task was submitted and status. * Ensure the Grievance is only filed on the Process. | |
| **Plan Benefit Overrides (PBO)** | * Review the CIF for the PBO process and then contact the Account Manager to review the member situation, if applicable. * Attach the e-mail communication to the grievance and summarize the Account Manager’s response in the resolution section in Salesforce. | |
| **Pharmacy Restriction based the plan set up**  **(pharmacy lock in)** | * Access the CIF and review the Need-to-Know section for any processes. * Contact the Account Manager to review member situation if applicable. * Attach the e-mail communication to the grievance and summarize the Account Manager’s response in the resolution section in Salesforce.com.   **Healthfirst**   * Open a Salesforce case. * **General Case Required Fields:**    + Category Business Area: Sales & Account Services   + Category: Account Management   + Case Type: Research * **Subject:**  “Healthfirst Grievance – Pharmacy Restriction” and notate in the case description that the pharmacy restriction has now caused a Healthfirst grievance. Include the information for the pharmacy the member is requesting to use.   Metroplus: Refer member to plan. | |
| **Benefits** | * Review all Plan Summaries, CIFs, and Test Claim functions available to validate the setup and reach out to the AM where needed. Attach any communication that you have had with the Account Manager to the Grievance. Indicate this communication information in the resolution section the findings.   **Exception:** If the Account Manager identifies the plan is incorrect and the member needs an outreach, then add a note to the Grievance with the outcome of the member call. | |
| **Enrollment / Disenrollment** | * Add a note to the case resolution section, indicating “Plan Related Grievance Case – no pharmacy or member contact required.” | |
| **Marketing** | * Add a note to the case resolution section, indicating “Plan Related Grievance Case – no pharmacy or member contact required.” | |
| **Other** | * The research will be based on the grievance notes (as per the benefits section above). | |
| **Quality of Care** | * Create an e-mail to the Account team. * In the Subject Line, include: Grievance Health Risk Identified. * In the body of the email, identify the case # and copy and paste case notes. * Follow up with the Account Manager/Other Partners as needed to resolve. | |
| **Complaints involving the Retail Pharmacy** | * Refer to section below titled: [Complaints about a Retail Pharmacy](#_Complaints_about_CVS/pharmacy). | |
| **If...** | **Then...** | |
| **Resolved**  Start the Actions Taken/Resolution section with the Contact ID from the call. | * Summarize all your findings in your action taken/resolution. The Grievance can remain open to 10 calendar days while resolving. * Include: * Outreach to pharmacy * Outreach to member * Outreach to prescriber * PA/Appeal approvals or denials * Contact ID as well as any additional content that the CCR did not capture when filing the Grievance * Next fill date or Quantity limit if applicable * How much medication the member has on hand * Mark the complaint in Salesforce: Closed/resolved. * In Compass, notate that the complaint has been resolved. * Enter the resolution comments with the case # in the Capture Activity field. | |
| **Not resolved**  Start the Actions Taken/Resolution section with the Contact ID from the call. | * Summarize all your findings in your action taken/resolution. All Grievances should be worked to resolution. The Grievance can remain open to 10 days while resolving. * Include: * Outreach to pharmacy * Outreach to member * Outreach to prescriber * PA/Appeal approvals or denials * Contact ID as well as any additional content that the CCR did not capture when filing the Grievance * Next fill date or Quantity limit if applicable * How much medication the member has on hand * Continue to follow up with business partners until resolved. | |
| **First Call Resolution Grievance**  Start the Actions Taken/Resolution section with the Contact ID from the call. | * Summarize all finding in the action taken/resolution. * Include: * Outreach to pharmacy * Outreach to member * Outreach to prescriber * PA/Appeal approvals or denials * Contact ID as well as any additional content that the CCR did not capture when filing the Grievance * Next fill date or Quantity limit if applicable * How much medication the member has on hand * In Compass, notate that the complaint has been resolved. * Enter the resolution comments with the case # in the Capture Activity field. | |
| **Closed/Filed in Error** | * Inquiry   + Call ID 123456- The CCR’s notes did not indicate dissatisfaction. The call was reviewed and was an Inquiry. * Duplicate   + Duplicate to G/C 123456 filed on mm/dd/yy (only used if previous grievance was resolved) * Member over 18/No POA on file * Upload a copy of the G/C in the Deleted G/C section of teams, Delete G/C in Salesforce. | |
| **Member Disconnected** | * Work the Grievance with the information that has been provided Member Disconnected-filing per NY Guidelines. * Close the Grievance as Closed/Unresolved. | |
| **Member Declined** | * Member Declined-filing per NY Guidelines. * Close the Grievance as Closed/Unresolved. | |
| **Closing the Grievance-First Call Resolution versus Closed/Resolved or Closed/Unresolved** | * If an agent files a Grievance as First Call Resolution, and you work the Grievance and determine it was not a First Call Resolution, close the Grievance as Closed/Resolved. * If an agent files a Grievance as New Grievance, pending initial review and you determine if should have been a First Call Resolution Grievance, close the Grievance as First Call Resolution. * If a Grievance is worked and the member still does not have medication, close the G/C as Closed/Unresolved. | |

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| Complaints About a Retail Pharmacy |

Follow the steps below when the complaint involves a Retail Pharmacy:

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| **Step** | **Action** | | |
| **1** | Obtain the member’s name, address, phone number, DOB (for pharmacy issues), store address, and a summary of the issue from the Salesforce.com case.  **Note:** This information should be available in the Grievance request. | | |
| **2** | Use the information below based on the urgency and type of the complaint. | | |
| **If...** | **Then...** | |
| Urgent issue such as media threat, life threatening, child ingestion, legal action, etc. | Contact Customer Relations by phone: **1-888-447-7524.**  **Hours of Operation:** Monday thru Friday 7:30 am - 6 pm CT (no weekend hours) | |
| All other non-urgent / non-pharmacy compliance complaints about our **CVS Retail Pharmacies**   * Wait Times * Out of Stock Items * Store Cleanliness * Rude Employees   + Except when physical or verbal abuse is involved | * Submit a SalesForce General Case to CVS Pharmacy Complaint, Category Business Area - CVS/Pharmacy Retail. * Include the Grievance ID number in the description.   **Note:** The Grievance can remain open to 10 days while resolving.   * Included questions that need to answered by the pharmacy to address the member’s concerns. * Once you receive a response from the case, add the details to the Action taken/Resolution of the Grievance and close the Grievance. | |
| All other non-urgent / non-pharmacy compliance complaints about **non-CVS Pharmacies**   * Wait Times * Out of Stock Items * Store Cleanliness * Rude Employees   + Except when physical or verbal abuse is involved   **Note:** Overall store complaints are considered customer service issues which are not handled by the Non-Compliance team | If the notes do not indicate the member was directed to contact the store manager:   * Grievance Team will Reach out to the pharmacy (if a single standalone Pharmacy) advise them of the complaint. Record the pharmacies response. * Mark the complaint as resolved and advise that the member has been educated, and the grievance has been filed with the store manager and closed in Salesforce. * If complaint came in via email – will respond back to email what was done. * If a chain pharmacy, please call member and inform the member use the following, put the information in the grievance and close the grievance/ update the email.   **Customer Service Information for Top Chains**  **Walgreens**   * **Phone:** 1–800–925–4733 (1–800–WALGREENS) * Website: <https://www.walgreens.com/topic/help/customerservicehelp/customer_service_help_main.jsp?foot=customer_service> * Mailing Address: ATTN: Consumer Relations Walgreen CO. 200 Wilmont Rd. MS #2002 Deerfield, IL 60015   **Walmart**   * Phone: Customer Service team at 1-800-925-6278 (1-800-WALMART) * Website: <https://corporate.walmart.com/about/contact>   **Safeway/Albertsons**   * Phone: 877-723-3929 * Mailing Address: M.S. 10501 P.O. Box 29093 Phoenix, AZ 85038   **Rite Aid**   * Phone: 1-800-RITE AID (1-800-748-3243) * Website: <https://www.riteaid.com/customer-support/contact-us>   **Kroger**   * Phone: 1-855-489-2502 * Website: <https://www.kroger.com/hc/help/contact-us>   Only if physical or verbal abuse is involved even for non-CVS stores, submit the non-compliance case, and create an e-mail to Stephanie Harris & Steven Skousen.   * The Subject line should include: Emergency Pharmacy Physical / Verbal Abuse Suspected / Reported. * The body of the email should include the case # and the details. | |
| Not urgent and is related to **Pharmacy Compliance / Contractual Requirement** such as:   * Refusing to dispense a medication due to the member not being able to pay. * Refusing to dispense a medication due to the reimbursement rate. * Fraud, Waste & Abuse   + Processing another person’s medication under that member’s account. * Collecting a dollar amount different than the adjudicated Patient Pay Amount (copay). * Vaccine Claim Submission.   + Refusal to process   + Refusal to provide   If the issue is unclear for Non-Compliance, create an email to Steven Skousen.   * In the subject indicate: Possible Non-Compliance Issue. * In the body indicate the grievance reason.   **Note:**  Steven will advise if the issue is Non-Compliance or Pharmacy Network/Store Manager Level required. | Follow the steps below: | |
| **Step** | **Action** |
| **1** | If you were able to resolve the issue by reaching out to the pharmacy, you do not need to submit a pharmacy noncompliance case. |
| **2** | * If you are unable to resolve the issue, Submit a SalesForce case to Pharmacy Non-Compliance.   **Note:** The Grievance can remain open to 10 days while resolving.   * Once you receive a response from the case, add the details to the Action taken/Resolution of the Grievance and close the Grievance. * Chatter the AM in SalesForce so they have visibility on the issue. * If physical or verbal abuse is involved even for non-CVS stores, submit the non-compliance case, and create an e-mail to Stephanie Harris & Steven Skousen.   + The Subject line should include: Emergency Pharmacy Physical/Verbal Abuse Suspected/Reported.   + The body of the email should include the case # and the details.          * **Case Record Type:** Pharmacy Network Non-Compliance * Subject: **<Client Name> Grievance-Pharmacy Non-Compliance** (**Example:**  Healthfirst Grievance-Pharmacy Non-Compliance) * The Salesforce case must contain the following: * Pharmacy NCPDP and/or NPI number * Member example regarding alleged pharmacy violation * Member Name and Cardholder ID number * Prescription number(s) and date(s) of fill (or date(s) of attempted fill) * Receipt copy if allegation is regarding overcharge/undercharge * Detailed description outlining the alleged pharmacy contract violation/what occurred at the pharmacy * Any other documentation pertaining to the allegation (receipts, letters, Rx copies if already obtained, member attestations)   If it is a Grievance, the Grievance ID number is required. |
| Not urgent and is related to **Retail Pharmacy dispensing errors** such as:   * Retail pharmacy dispenses wrong strength or wrong drug. * Prescription Bottle contains two different types of drugs. | * **Case Record Type:** Networks * Category: Retail Pharmacy Audit * Subject: Client Name Grievance (**Example:**  Healthfirst Grievance)      * The Salesforce case must contain the following: * Pharmacy NCPDP and/or NPI number * Member example regarding alleged pharmacy violation * Member Name and Cardholder ID number * Prescription number(s) and date(s) of fill (or date(s) of attempted fill) * Detailed description outlining the alleged dispensing error * Any other documentation pertaining to the allegation (receipts, letters, Rx copies if already obtained, member attestations)   If it is a Grievance, the Grievance ID number is required. | |
| All Pharmacy Privacy Breaches | * Follow the disclosure process. * Note the grievance case that a privacy disclosure has been filed and close the case.   **Note:** Refer to [HIPAA - Disclosure Reporting and Complaints (027852)](https://thesource.cvshealth.com/nuxeo/thesource/" \l "!/view?docid=555c2e42-bed9-4648-91b9-19dc103b0ff1" \t "_blank) and [HIPAA Disclosure Form](https://app.radarfirst.com/incidents/landing/?token=a14b6ed3-a9be-4a8f-9d69-0b3ea9ebff81#/) | |

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| Complaints about CVS Specialty Pharmacy |

Follow the step below when the complaint involves CVS Specialty Pharmacy:

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| **Step** | **Action** |
| **1** | * Open a Salesforce Case for Specialty Pharmacy Operations   + Category Business Area: Customer Care/Member Services   + Category: Specialty Pharmacy Operations   + Case Type:  Specialty Member Complaint     **Note:** Include the member information and nature of the complaint. Include the Salesforce case number in the Grievance. |

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| Logging Retail Pharmacy Complaints in the Actions Taken/Resolution |

Perform the following step documenting pharmacy complaints in your resolution:

**Note:** After the call is reviewed, include the Contact ID at the beginning of the Actions Taken/Resolution.

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| **If the Pharmacy Complaint is…** | **Then Document the Complaint as Follows…** |
| **Closed/Resolved** | * **Retail Complaints-CVS:**   A case was opened for Pharmacy Complaint. The case number is <case number>. We received a response back advising: <include the response from CVS Resolution>. Please reach out to the account manager with any additional questions.   * **Retail Complaints-Non-CVS:**   The member was advised that all retail pharmacy complaints need to be made with the store manager. Provided the member the phone number for the pharmacy.   * **Pharmacy Non-Compliance:**   A case was opened for Non-Compliance. The case number is <case number>. We received a response back advising: <include the response from CVS Non-Compliance>. Please reach out to the account manager with any additional questions. |

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| Calls Transferred to Senior Team |

Perform the following steps if the Grievance was transferred to Senior Team:

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| **Step** | **Action** |
| **1** | Review the Grievance.  **Note:** If the notes indicate the call has been transferred to senior team, include those notes in the Actions Taken / Resolution after the Grievance team review. |
| **2** | * Summarize your findings. * Include the following statement followed by a summary of your findings from the senior team call: “Call was transferred to Senior Team: ”   **Note:** Listen to the call if needed. |

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| Grievances Listened to Due to Notes Being Unclear |

Perform the following steps if the Description of Issue are unclear:

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| **Step** | **Action** |
| **1** | * Listen to the call for dissatisfaction. * Summarize the details of the call.   **Example:** Contact ID 123456 - The CCR’s notes did not indicate dissatisfaction. Upon review, dissatisfaction was confirmed. |

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| Support Task Research Team |

Perform the following steps if correspondence for a Medicaid / Exchange member is received:

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| **Step** | **Action** |
| **1** | Follow normal correspondence procedures to create a Support Task to record the receipt of correspondence. |
| **2** | Review the CIF to determine if our PBM handles complaints / grievances for the client. |
| **3** | Overnight the original correspondence documents to the Medicaid/Exchange Complaint team or email to Medicaid Grievance Mailbox: [\_MedicaidGrievanceMailbox@CVSHealth.com](mailto:_MedicaidGrievanceMailbox@CVSHealth.com).  Address for mailing:  <PBM Name>  Attn: Medicaid Team  105 Mall Boulevard, Mail Code 870  Monroeville, PA 15146 |

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| Related Documents |

**Parent Documents:**

* [CALL 0049 Customer Care Internal and External Call Handling](https://policy.corp.cvscaremark.com/pnp/faces/DocRenderer?documentId=CALL-0049)

**Abbreviations/Definitions:** [Customer Care Abbreviations, Definitions, and Terms Index (017428)](file:///C:\Users\u011342\Downloads\CMS-2-017428)

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