



## Complaint Management

July 23, 2012

**How should COHBE handle consumer complaints and how should COHBE partner with health plans and other stakeholders in this process?**

### Goals/Objectives of COHBE:

- Fulfill the mission outlined in SB-200 to increase access, affordability and choice to individuals and small employers purchasing health insurance in Colorado
- Provide a user-friendly shopping experience to Coloradans
- Provide a best-in-class service experience to Coloradans utilizing the Exchange
- Meet the Exchange implementation timeline

### Background:

The COHBE mission is to increase “access, affordability, and choice” to individuals and small employers purchasing health insurance in Colorado. Providing access will also include fair, timely responses to legitimate complaints made by consumers. Thus, the Exchange must determine how it will handle complaints from customers of the Exchange and other stakeholders and incorporate improvements into its business processes to ensure consumers have a positive experience when they shop and enroll in health plans through COHBE.

While an appeal refers to an application for review by a higher authority, or a formal question as to the correctness of a ruling or decision, a complaint is defined as a grievance that is formally expressed. For example, if a person is calling to file a grievance, the complaint will be documented on a standard form and addressed within a timely fashion. This form can be filed online, manually filled out and sent in the mail to COHBE, or filed by a service representative when they are on the phone with a customer. Clarification questions or expressing need for assistance during the shopping and enrollment process is not considered a complaint and will be handled by the call center or FAQs on the website. Moreover, appealing an eligibility or enrollment decision is not considered a complaint.

The Exchange anticipates that complaints will come from a number of different sources including but not limited to: individuals and employers shopping for health plans on COHBE, health plan representatives, navigators, brokers, medical practitioners or physicians, or other stakeholders. The nature and content of the complaints will vary as will the channel through which they are received and handled. COHBE must define its strategy for receiving and handling customer complaints that is consistent with state and federal law and provides a best in class user experience.

## Applicable Law

### **Federal**

#### Section 1311

##### (d) REQUIREMENTS.—

###### (4) FUNCTIONS.—An Exchange shall, at a minimum—

(B) Provide for the operation of a toll-free telephone hotline to respond to requests for assistance;

##### (i) NAVIGATORS.—

###### (3) DUTIES.— An entity that serves as a navigator under a grant under this subsection shall—

(D) Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under section 2793 of the Public Health Service Act, or any other appropriate State agency or agencies, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage

### Recommended Guiding Principles:

- **COHBE will have a formal process for accepting complaints through a standardized form.**
  - The complaint form will be standardized and the source of the complaint will be categorized (e.g., individuals, carriers, etc.).
  - The standardized form will be available online for submission or downloadable for mail submission.
  - COHBE will allow customer service representatives to complete and submit a complaint form on behalf of a caller.
  - Complaints made on COHBE's Facebook and Twitter pages will NOT be considered formal complaints. COHBE will direct those individuals to the online form and / or the call center to submit their grievance.
- **COHBE will have a formal process for reviewing and addressing all submitted complaints.**
  - A central department of COHBE staff will review all complaints submitted through the formal process on a regular basis. Depending on the type of complaint, staff will be responsible for directly following up with the submitter to address the complaint or direct the submitter to someone that can best address the grievance.
  - This process will be developed in collaboration with other entities, including state agencies and carriers.
- **COHBE will review and address all complaints filed through the formal process in a timely manner.**
- **COHBE will handle complaints within its jurisdiction and it will act as a liaison to other organizations when another party can address the grievance more effectively.** If a grievance directly relates to activities within COHBE's jurisdiction or services provided by COHBE, COHBE staff will work to address the person's concerns. If the grievance does not fall within COHBE's control or is not directly related to COHBE services, COHBE will help direct the person to the organization that can best address the person's complaint. Some examples include:
  - Complaints about claim payment would be filed with the carrier and if the complaint was not handled appropriately by the carrier, further action can be taken by filing a complaint with the Division of Insurance.
  - Complaints about treatment given from the COHBE customer service center would be handled by COHBE staff.
  - Complaints about user experience on COHBE would be handled by COHBE staff.
  - Complaints about Navigators would be documented and handled by COHBE staff and COHBE staff would follow up with the navigator entity.

- **COHBE will record all complaints submitted through the official intake form via phone, mail, and online submission.**
- **COHBE will conduct analytics on filed complaints.** Complaint analytics will be used to identify trends and determine potential enhancements to remediate complaint trends. COHBE will report out to the public the number and types of complaints at predetermined intervals throughout the year.
- **Onboarding and continuing education for COHBE staff and customer service representatives will include complaint management training.** Complaint management training will be updated periodically to reflect the most recent best practices from the customer service industry and improved business processes based on complaint analytics.