

## 6.1 Complaints and Grievances

The regulatory definition of a grievance is any expression of dissatisfaction regarding care and treatment that does not amount to change in scope or duration of service” includes all issues previously thought of as complaints.

- A grievance can be written or verbal.
- A grievance can be filed by the member, family/caregiver, friend or provider on behalf of the member.
- A grievance can be made to one of the Care Management Team members (nurse, social worker or service coordinator) or any other Senior Health Partners staff member.
- Grievances are tracked by a formal mechanism.
- Attempts are made to rectify grievances immediately or within required time frames, based on the nature of the issue.
- The initial determination notice includes an explanation of the reasons for the decision.
- A member who is dissatisfied with an initial grievance determination may request a second review by filing a grievance appeal.
- A report of all grievances is submitted to the Department of Health on a quarterly basis.

---

**Trial version converts only first 100000 characters. Evaluation only.**

**[- Get license for the HTML-to-RTF Pro DLL .Net](#)**