

YES Rights and Resolutions

COMPLAINTS AND APPEALS
APRIL 1 - JUNE 30, 2022
SFY 2022, Q4

QUALITY
MANAGEMENT
IMPROVEMENT AND
ACCOUNTABILITY
OCTOBER 21, 2022

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YES Rights and Resolutions
 COMPLAINTS AND APPEALS
 APRIL 1, 2022 - JUNE 30, 2022 (SFY 2022, Q4)

The Youth Empowerment Services (YES) Quality Management Improvement and Accountability (QMIA) Council believes that complaints are a valuable source of information about the YES system of care and that each complaint received offers an opportunity to monitor and improve Idaho’s behavioral health system for youth and families.

The YES system of care is complex. It is comprised of multiple partners including the Idaho Department of Health and Welfare divisions of Behavioral Health (DBH), Medicaid, and Family and Community Services (FACS), the State Department of Education (SDE), and the Idaho Department of Juvenile Corrections (IDJC). The YES complaint system has been designed to facilitate youth and families being at the center of their own care. However, the overall complexity of the YES system of care is reflected in the current need for each YES system partners to follow their respective state and/or Federal reporting obligations. Therefore, each partner has their own complaint tracking method and contributes information individually to this report. The QMIA Council continues to work with the YES partners to improve complaint reporting and thoroughly understand the complaints themselves with the goal of developing of targeted quality improvement projects to address common issues within the overall YES system.

Overview of YES Complaints

As of State Fiscal Year (SFY) 2022, new categories of complaints have been included in the YES Rights and Resolution reports. In Q1, new information regarding Early and Periodic Screening, Diagnostic, and Treatment (EPSDT), Liberty Healthcare Idaho Independent Assessment Services, and Medical Transportation Management (MTM) was added. Beginning in Q2, YES Centralized Complaints from the YES Website or the YES 1-855 number were added as a specific category. These complaints were previously noted as DBH complaints. The DBH complaints category now reflects only complaints related to DBH Regional Clinics.

A total of 92 YES complaints, and 0 appeals, have been received in SFY 2022 during Q1, Q2, Q3, and Q4.

Table 1: YES Complaints Q1, Q2, Q3, and Q4

	YES	DBH	Optum	EPSDT**	MTM	Liberty	IDJC	FACS	SDE*	Total
Q1	7	-	6	0	8	0	5	0	-	26
Q2	0	-	4	0	10	1	5	0	-	20
Q3	5	1	4	0	5	0	4	0	-	19
Q4	10	0	13	0	2	0	2	0	-	27
SFY to date	22	1	27	0	25	1	16	0	-	92

*SDE data will be shown separately as it is analyzed/presented by the school year. ** Currently, there is no formal tracking process of EPSDT complaints.

Beginning in Q1 for SFY 2023, another summary table will be added under this section that addressed timeliness of resolution and will include “average days to resolution” and “range of days to resolution.”

Detailed Breakout of Complaint Reporting for Q4 (April 1, 2022 – June 30, 2022)

YES Centralized Complaints: The category includes all complaints filed via the YES Website, YES 1-855#, and the YES inquiry email. Complaints captured in this category may be about any YES service provided by any partner in the YES system of care and may be duplicated by the partner in their own report section.

Table 2- YES Centralized Complaints

Region	Date of Complaint	Source of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
UKN*	April 2022	Director’s Office	YES Complaint, Director, Legislator, Administrator	UKN	Case Transferred to Child Welfare, DBH QAUM Manager, Candace Falsetti followed up with Child Welfare, no response	UKN
5	4/23/2022	Director’s Office	Family filed complaint which contained multiple issues (51) with Access, Rights, Quality of Care, Clinical Care, Systems and Collaboration issues.	Open	Root Cause Analysis in progress	UKN
UKN	5/6/2022	Phone Call	Daughter was denied Medicaid for the YES program.	Closed	Family was contacted three times with no response.	7
5	5/24/2022	Website	Family needs services applied for Early Periodic Screening, Diagnosis, and Treatment (EPSDT) twice, but application was not reviewed. Will lose spot in housing without funding.	Closed	ESPDT moved forward with the application process despite eligibility type remaining Katie Beckett. ESPDT will proceed with scheduling an intake to determine if member meets medical necessity for treatment in a Psychiatric Residential Treatment Facility (PRTF). Identified need for	8

					improved cross training for staff re: complex situations.	
5	5/27/2022	Website	2 nd complaint received in relation to one previously entered on 5/24/22. Parent requesting to have son's EPSDT application reviewed/processed	Closed	ESPDT moved forward with the application process despite eligibility type remaining Katie Beckett. ESPDT will proceed with scheduling an intake to determine if member meets medical necessity for treatment in PRTF. Identified need for improved cross training for staff re: complex situations.	7
4	6/3/2022	Website	Family facing access issues for services and denial from SHW, RTC and ESPDT	Closed	No complaint information for follow up. Notified on 8/31/22 member was admitted to PRTF placement effective 8/17/22, closure recommended (*days after PRFT placement not counted as issue resolved by client being placed)	76*
4	6/8/2022	Website	Family needs help regarding PRTF services, concern over EPSDT process, and open communication regarding child's care, treatment, and discharge plans.	Closed	Participant received new Child and Adolescent Needs and Strengths (CANS) assessment on 6/7/22, day prior to this submission. There were 2 EPSDT PRTF reviews/Telligen denied 6/10/2022: Primarily presents with SX of conduct disorder & RAD. PRTF placement not recommended due to/to the absence of behavioral intervention or family work. Strongly recommended client receive TX fitting with diagnoses, including MST and family therapy. Notified on 8/29/22 client was admitted to PRTF effective 8/23/22(**days after PRFT placement not counted as issue resolved by client being placed)	77**

4	6/15/22	Personal report at QFAS	Family needs DD and SED and has medical needs. Needs different level of care and support.	Closed	Family did not want response and reported this at the QFAS for tracking purposes only	1
6	6/16/22	Website	Family wants protection from their child, seeking placement options.	Closed	Looked up in WITS for additional information. Per enrollment screen, member was placed in a CMH residential placement at the Patriot Center on 6/21/22. Had remained open on tracking sheet. Follow-up call to mother on 8/31/22. Received message: "Number you are calling does not have a voice mail box set up, please try again at a later time." Resolution, child placed out of the home within 5 days, but remained as open in tracker until 8/31/22 (*** days after PRFT placement not counted as issue resolved by client being placed)	5***
UNK	6/21/22	Email	Child has been denied from all local hospitals due to intensity of need. Family still needs services and support.	Closed	Not enough information to follow up with complaint (****days until closure counted due to oversight of new staff taking over complaint tracking)	77****

*UKN is abbreviated for unknown.

Division of Behavioral Health (DBH) Co

Table 3: This category includes complaints about DBH Regional Clinics

Region	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
		No complaints reported			

Division of Medicaid (Medicaid)

Table 4: Includes complaints filed with the EPSDT Team

Region	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
		No complaints reported			

Table 5: Optum complaints:

Type	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (calendar days)
Service	4/05/2022	Staff/Other Against Provider	Resolved, 4/07/2022	Unsubstantiated	2 business days
Service	4/07/2022	Non-QOC Alleged Violation of Patient Rights	Resolved, 4/18/2022	Substantiated	8 business days
Access	4/13/20200	Staff/Other Against Provider	Resolved, 4/21/2022	Unsubstantiated	7 business days
Service	4/19/2022	Staff/Other Against UBH	Resolved, 5/02/2022	Unsubstantiated	10 business days
Clinical	4/20/2022	Staff/Other Against Provider	Resolved, 4/22/2022	Internal Use Only – Unsubstantiated	2 calendar days
Clinical	4/23/2022	Staff/Other Against Provider	Resolved, 5/10/2022	Unsubstantiated	17 calendar days
Service	5/6/2022	Staff/Other Against Provider	Resolved, 5/9/2022	Unsubstantiated	2 business days
Clinical	5/11/2022	Staff/Other Against Provider	Resolved, 5/18/2022	Unsubstantiated	7 calendar days
Clinical	5/13/2022	Staff/Other Against Provider	Resolved, 5/25/2022	Unsubstantiated	12 calendar days
Clinical	5/19/2022	Staff/Other Against Provider	Resolved, 5/25/2022	Unsubstantiated	6 calendar days
Clinical	5/19/2022	Staff/Other Against Provider	Resolved, 6/02/2022	Unsubstantiated	14 calendar days

Clinical	5/19/2022	Staff/Other Against Provider (duplicate entry not counted in the total number in Table 1)	Resolved, 6/02/2022	Unsubstantiated	14 calendar days
Billing & Financial	5/20/2022	Staff/Other Against Provider	Resolved, 6/16/2022	Unsubstantiated	20 business days

Table 6: Liberty Healthcare Idaho Independent Assessment Services complaints:

Type	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
		No complaints reported			

Table 7: MTM complaints:

Region	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
3	4/28/2022	Trip Request	Resolved, 5/10/2022	Substantiated – Quality Resolutions has provided notice to the Logistics Department to review their procedures as well as the member’s service area to ensure all trips are able to be set with a provider on time and member must be made aware of any transportation issues prior to their appointment.	8 business days
4	5/3/2022	Trip Request	Resolved, 5/15/2022	Substantiated – Quality Resolutions has provided notice to the Logistics Department to review their procedures as well as the member’s service area to ensure all trips are able to be set with a provider on time and member must be made aware of any transportation issues prior to their appointment.	8 business days

Idaho Department of Juvenile Corrections (IDJC) (YES Class Families/Youth)

There were two youth and no family complaints during the 4th quarter of SFY 2022. Of the complaints received by IDJC staff, all complaints were resolved in five (5) calendar days or less.

Table 8 & 9: IDJC Complaint Detail, SFY 2022, Q4

Families <i>Family members of YES class members whose complaint/concern was directed to the Superintendent</i>					
Region	Date of Complaint	Type of Concern	Status as June 30	Resolution	Timeliness to Resolution (days)
No complaints received this quarter.					

Youth <i>YES class members whose complaint/concern was formally received by IDJC staff</i>					
Region	Date of Complaint	Type of Concern	Status as of June 30	Resolution	Timeliness to Resolution (days)
1	5/31/2022	Complaint not getting Large Muscle Activity because group he was attached to were on a group movement.	Resolved	This was discussed at team meeting to ensure he is receiving his Large Muscle Activity time.	2
2	4/02/2022	Youth state that she felt scared for her life because a staff yelled at her.	Resolved	Youth worked this issue with staff and stated that she no longer has a complaint against him.	5

Idaho State Department of Education (SDE)

The Department of Education provides several “Dispute Resolution Processes” in the districts to help families resolve complaints, including Mediation, Facilitation, State Complaints, and Due Process Hearings. Facilitation and Mediation are voluntary processes structured to increase understanding and reach resolution before a conflict develops into a formal dispute. State Complaints can be filed by any individual or organization alleging any violation of the Individuals with Disabilities Act IDEA, including an alleged failure to comply with a previous due process hearing decision. Due Process Hearings involves an allegation or a series of allegations by either a parent/adult student or the district on issues relating to the identification, evaluation, educational placement, and the provision of free, appropriate public education (FAPE.)

Data about SDE complaints is updated annually.

Table 10: SDE Complaint Detail, 2020-2022 At the time this report was submitted no updated information.

Section A: Written, Signed Complaints		
Item #	Item description	2021-2022
1	Total number of written signed complaints filed.	-
1.1	Complaints with reports issued.	-
1.1.a	Reports with findings of noncompliance.	-
1.1.b	Reports within timelines.	-
1.1.c	Reports within extended timelines.	-
1.2	Complaints pending.	-
1.2.a	Complaints pending a due process hearing.	-
1.3	Complaints withdrawn or dismissed.	-
Section B: Mediation Requests		
Item #	Item description	2021-2022
2	Total number of mediation requests received through all dispute resolution processes.	-
2.1	Mediations held.	-
2.1.a	Mediations held related to due process complaints.	-
2.1.a.i	Mediation agreements related to due process complaints.	-
2.1.b	Mediations held not related to due process complaints.	-
2.1.b.i	Mediation agreements not related to due process complaints.	-
2.2	Mediations pending.	-
2.3	Mediations withdrawn or not held.	-
Section C: Due Process Complaints		
Item #	Item description	2021-2022
3	Total number of due process complaints filed.	-
3.1	Resolution meetings.	-
3.1.a	Written settlement agreements reached through resolution meetings.	-
3.2	Hearings fully adjudicated.	-
3.2.a	Decisions within timeline (include expedited).	-
3.2.b	Decisions within extended timeline.	-
3.3	Due process complaints pending.	-
3.4	Due process complaints withdrawn or dismissed (including resolved without a hearing).	-
Section D: Expedited Due Process Complaints (Related to Disciplinary Decision)		
Item #	Item description	2021-2022
4	Total number of expedited due process complaints filed.	-
4.1	Expedited resolution meetings.	-

4.1.a	Expedited written settlement agreements.	-
4.2	Expedited hearings fully adjudicated.	-
4.2.a	Change of placement ordered.	-
4.3	Expedited due process complaints pending.	-
4.4	Expedited due process complaints withdrawn or dismissed.	-

Appeals:

Appeals are formal requests for a review of decisions made about eligibility for services

DBH: No Appeals for Q4

Medicaid:

EPSDT - 3 Appeals for Q4

Member Region	Type of Appeal	Date Received	Description	Case Status	Receipt Method	Member Age	Member Eligibility Category	Date Resolved	Decision Summary	Number of Days to Resolve	Number of Days Pending
5	Standard	4/8/2022	PRTF Denial	Withdrawn	Electronic	18	YES Medicaid	4/28/2022	Withdrawal	20	N/A
4	Standard	4/17/2022	PRTF Denial	Withdrawn after PRTF approval	Electronic	13	Basic	5/9/2022	Withdrawal	20	N/A
3	Standard	4/22/2022	PRTF Denial	Withdrawn	Electronic	12	YES Medicaid	5/12/2022	Withdrawal	20	N/a

Optum No Appeals for Q4

Month	CC		44		N/A	
	Member Appeals Received	Member Appeals Closed	Member Appeals Received	Member Appeals Closed	Member Appeals Received	Member Appeals Closed
April 2022	0	0	0	0	0	0
May 2022	0	0	0	0	0	0
June 2022	0	0	0	0	0	0

PROVIDER DISPUTES FOR MEMBERS AGES 0 TO 18

CC 44 N/A

Month	Provider Disputes Received	Provider Disputes Closed	Provider Disputes Received	Provider Disputes Closed	Provider Disputes Received	Provider Disputes Closed
Apr-22	0	1	0	0	7	10
May-22	2	2	0	1	1	2
Jun-22	0	1	0	0	2	1

Telligen: 7 Appeals for Q4

Member Region	Type of Appeal	Date Received	Description	Case Status	Receipt Method	Member Age	Member Eligibility Category	Date Resolved	Decision Summary	Number of Days to Resolve	Number of Days Pending
3	standard	3/29/2022	acute psych	closed	Electronic	16	Enhanced	5/12/2022	Reverse Decision		N/A
7	standard	3/30/2022	acute psych	closed	Electronic	14	Basic	6/7/2022	Reverse Decision		N/A
4	standard	3/30/2022	acute psych	closed	Electronic	16	Enhanced	4/21/2022	Reverse Decision		N/A
4	standard	4/15/2022	acute psych	closed	Electronic	12	Basic	5/17/2022	Agree with Decision		N/A
3	standard	5/11/2022	acute psych	closed	Electronic	14	Basic	6/7/2022	Agree with Decision		N/A
3	standard	5/11/2022	acute psych	closed	Electronic	15	Enhanced	6/8/2022	Agree with Decision		N/A
4	standard	3/23/2022	acute psych	closed	Electronic	17	Enhanced	6/8/2022	Reverse Decision		N/A

Liberty Healthcare Idaho Independent Assessment Services: No Appeals for Q4

Quality Management Improvement and Accountability (QMIA)

The Quality Management Improvement and Accountability (QMIA) Council brings together DBH, Medicaid, FACS, IDJC, and SDE to collaborate in YES quality monitoring. The Council has a Subcommittee, the QMIA Family Advisory Subcommittee (Q-FAS) which presents an opportunity to gather and learn from family's stories. Q-FAS solicits family members' and family advocates' first-hand input on families' experiences accessing and utilizing YES services. The feedback received about successes, challenges and barriers to care is used to identify areas that need increased focus and to prioritize quality improvement projects. This subcommittee helps to guide YES partners work, providing children, youth, and families in Idaho access to appropriate and effective mental health care. Below is a summary of issues that have been discussed by the Q-FAS.

Summary of Barriers to Care

Area	Noted issues
Access to care	Services not available within reasonable distance Services not coordinated between MH and DD Waitlist for Respite and Family Support Partners Respite process through Medicaid too demanding due to need for updated CANS
Clinical care	Repeating the CANS with multiple providers is traumatic Diagnosis not accurate Therapist not knowledgeable of de-escalation techniques Stigmatization and blaming attitudes towards families Families need more information about services (e.g., Case Management)
Outpatient services	No service providers in the area where family needs care Services needed were not available, so families are referred to the services that are available Not enough expertise in services for high needs kids (e.g., Trust Based Relationships, Family Preservation) Some services only available through other systems: e.g., DD, Judicial Families having to find services themselves based on just a list of providers- and even the lists at times are too old to be useful
Crisis services	Access to immediate care had to go through detention Safety Plans not developed with family or not effective
24 hour services: Hospitals/Residential	Not enough local beds Length of time for EPSDT determination Support needed by families during the EPSDT process, and after while waiting for placement Medication changes wo input from family Family not involved in discharge planning Family threatened with charges of abandonment or neglect Children with high needs and repeat admissions may be denied access Child not in hospital long enough for meds to take effect Care in local residential facilities does not provide specialized care that is needed
School issues	Too long to get an Individualized Education Plan (IEP) School makes choices that don't match needs of the child Safety Plans from schools not developed with family input
Other family concerns	Too many appointments and other children with needs Need one case manager/TCC type person Information on how access care not available Transportation not available DBH Gas vouchers only at specific gas stations

