

Grievances (Part D) 2022

Organization Name:

Contract Number:

Reporting Section:

Grievances (Pa

Last Updated:

Date of Site Visit (on-site or virtual):

Name of Reviewer:

Name of Peer Reviewer:

Instructions:

1) In the "Data Sources and Review Results:" column, enter the review results and/or data sources used for each standard or sub-standard.

2) Enter "Y" if the requirements for the standard or sub-standard have been completely met. If any requirement for the standard or sub-standard has not been met, enter "N". If any standard or sub-standard does not apply, enter "N/A".

3) For standards 1c, 1d, 1e, 1g, 1h, and 2e, enter 'Findings' as follows based on the five-point scale: Select "1" if plan data has more than 20% error, select "2" if plan data has between 15.1% - 20.0% error, select "3" if plan data has between 10.1% - 15.0% error, select "4" if plan data has between 5.1% - 10.0% error, select "5" if plan data has less than or equal to a 5% error. Enter "N/A" if standard does not apply.

Standard/Sub-standard ID	Reporting Section Criteria ID	Standard/Sub-standard Description	Data Element	Data Sources and Review Results: Enter review results and/or data sources	Enter 'Findings' using the applicable choice in the appropriate cells. Cells marked with an "*" should not be edited.
1		A review of source documents (e.g., programming code, spreadsheet formulas, analysis plans, saved data queries, file layouts, process flows) indicates that all source documents accurately capture required data fields and are properly documented.		Data Sources:	*
1.a		Source documents are properly secured so that source documents can be retrieved at any time to validate the information submitted to CMS via HPMS.		Review Results:	
1.b		Source documents create all required data fields for reporting requirements.		Review Results:	
1.c		Source documents are error-free (e.g., programming code and spreadsheet formulas have no messages or warnings indicating errors, use correct fields, have appropriate data selection, etc.).		Review Results:	
1.d		All data fields have meaningful, consistent labels (e.g., label field for patient ID as Patient ID, rather than Field1 and maintain the same field name across data sets).		Review Results:	
1.e		Data file locations are referenced correctly.		Review Results:	
1.f		If used, macros are properly documented.		Review Results:	
1.g		Source documents are clearly and adequately documented.		Review Results:	

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1.h		Titles and footnotes on reports and tables are accurate.		Review Results:	
1.i		Version control of source documents is appropriately applied.		Review Results:	
2		A review of source documents (e.g., programming code, spreadsheet formulas, analysis plans, saved data queries, file layouts, process flows) and census or sample data, whichever is applicable, indicates that data elements for each reporting section are accurately identified, processed, and calculated.		Data Sources:	*
2.a	RSC-1	The appropriate date range(s) for the reporting period(s) is captured. Organization reports data based on the periods of 1/1 through 3/31, 4/1 through 6/30, 7/1 through 9/30, and 10/1 through 12/31.		Review Results:	
2.b	RSC-2	Data are assigned at the applicable level (e.g., plan benefit package or contract level). Organization properly assigns data to the applicable CMS contract.		Review Results:	
2.c	RSC-3	Appropriate deadlines are met for reporting data (e.g., quarterly). Organization meets deadlines for reporting data to CMS by 2/6/2023. <i>[Note to reviewer: If the organization has, for any reason, re-submitted its data to CMS for this reporting section, the reviewer should verify that the organization's original data submissions met the CMS deadline in order to have a finding of "yes" for this reporting section criterion. However, if the organization resubmits data for any reason and if the re-submission was completed by 3/31 of the data validation year, the reviewer should use the organization's corrected data submission for the review of this reporting section.]</i>		Review Results:	
2.d	RSC-4	Terms used are properly defined per CMS regulations, guidance, Reporting Requirements, and Technical Specifications. Organization properly defines the term "Grievance" in accordance with 42 CFR §422.564 and the Parts C & D Enrollee Grievances, Organization/Coverage Determinations and Appeals Manual. This includes applying all relevant guidance properly when performing its calculations.		Review Results:	
2.e	RSC-5	The number of expected counts (e.g., number of members, claims, grievances, procedures) are verified; ranges of data fields are verified; all calculations (e.g., derived data fields) are verified; missing data has been properly addressed; reporting output matches corresponding source documents (e.g., programming code, saved queries, analysis plans); version control of reported data elements is appropriately applied; QA checks/thresholds are applied to detect outlier or erroneous data prior to data submission. RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. a: Number of total grievances in which timely notification was given (Data Element B) does not exceed number of total grievances (Data Element A).		Data Sources:	*

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2.e	RSC-5.a	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. a. Number of total grievances in which timely notification was given (Data Element B) does not exceed number of total grievances (Data Element A).		Data Sources:	
2.e	RSC-5.a		Data Element B	Review Results:	
2.e	RSC-5.b	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. b: Number of expedited grievances in which timely notification was given (Data Element D) does not exceed number of total grievances in which timely notification was given (Data Element B).		Data Sources:	*
2.e	RSC-5.b		Data Element D	Review Results:	
2.e	RSC-5.c	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. c: Number of expedited grievances (Data Element C) does not exceed total grievances (Data Element A).		Data Sources:	*
2.e	RSC-5.c		Data Element C	Review Results:	
2.e	RSC-5.d	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. d: Number of expedited grievances in which timely notification was given (Data Element D) does not exceed total expedited grievances (Data Element C).		Data Sources:	*
2.e	RSC-5.d		Data Element D	Review Results:	
2.e	RSC-5.e	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. e: Number of dismissed grievances (Data Element E) are excluded from the total.		Data Sources:	*
2.e	RSC-5.e		Data Element E	Review Results:	

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2.e	RSC-5.f	RSC-5: Organization accurately reports data by applying data integrity checks listed below and uploads it into HPMS. f: If the organization received a CMS outlier/data integrity notice, validate whether or not an internal procedure change was warranted or resubmission through HPMS.		Data Sources:	*
2.e	RSC-5.f		Data Elements A-E	Review Results:	
2.e	RSC-6.a	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: a: Includes all grievances that were completed (i.e., organization has notified member of its decision) during the reporting period, regardless of when the grievance was received.		Data Sources:	*
2.e	RSC-6.a		Data Element A	Review Results:	
2.e	RSC-6.a		Data Element B	Review Results:	
2.e	RSC-6.a		Data Element C	Review Results:	
2.e	RSC-6.a		Data Element D	Review Results:	
2.e	RSC-6.a		Data Element E	Review Results:	
2.e	RSC-6.b	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: b: If a grievance contains multiple issues filed by a single complainant, each issue is calculated as a separate grievance.		Data Sources:	*
2.e	RSC-6.b		Data Element A	Review Results:	
2.e	RSC-6.b		Data Element B	Review Results:	

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2.e	RSC-6.b		Data Element C	Review Results:	
2.e	RSC-6.b		Data Element D	Review Results:	
2.e	RSC-6.b		Data Element E	Review Results:	
2.e	RSC-6.c	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: c: If a member files a grievance and then files a subsequent grievance on the same issue prior to the organization's decision or deadline for decision notification (whichever is earlier), then the issue is counted as one grievance.		Data Sources:	*
2.e	RSC-6.c		Data Element A	Review Results:	
2.e	RSC-6.c		Data Element B	Review Results:	
2.e	RSC-6.c		Data Element C	Review Results:	
2.e	RSC-6.c		Data Element D	Review Results:	
2.e	RSC-6.c		Data Element E	Review Results:	
2.e	RSC-6.d	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: d: If a member files a grievance and then files a subsequent grievance on the same issue after the organization's decision or deadline for decision notification (whichever is earlier), then the issue is counted as a separate grievance.		Data Sources:	*
2.e	RSC-6.d		Data Element A	Review Results:	
2.e	RSC-6.d		Data Element B	Review Results:	

Standard/Sub-standard ID	Reporting Section Criteria ID	Standard/Sub-standard Description	Data Element	Data Sources and Review Results: Enter review results and/or data sources	Enter 'Findings' using the applicable choice in the appropriate cells. Cells marked with an "*" should not be edited.
2.e	RSC-6.d		Data Element C	Review Results:	
2.e	RSC-6.d		Data Element D	Review Results:	
2.e	RSC-6.d		Data Element E	Review Results:	
2.e	RSC-6.e	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: e: Includes all methods of grievance receipt (e.g., telephone, letter, fax, and in person).		Data Sources:	*
2.e	RSC-6.e		Data Element A	Review Results:	
2.e	RSC-6.e		Data Element B	Review Results:	
2.e	RSC-6.e		Data Element C	Review Results:	
2.e	RSC-6.e		Data Element D	Review Results:	
2.e	RSC-6.e		Data Element E	Review Results:	
2.e	RSC-6.f	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: f: Includes all grievances regardless of who filed the grievance (e.g., member or appointed representative).		Data Sources:	*
2.e	RSC-6.f		Data Element A	Review Results:	
2.e	RSC-6.f		Data Element B	Review Results:	

Standard/Sub-standard ID	Reporting Section Criteria ID	Standard/Sub-standard Description	Data Element	Data Sources and Review Results: Enter review results and/or data sources	Enter 'Findings' using the applicable choice in the appropriate cells. Cells marked with an '*' should not be edited.
2.e	RSC-6.f		Data Element C	Review Results:	
2.e	RSC-6.f		Data Element D	Review Results:	
2.e	RSC-6.f		Data Element E	Review Results:	
2.e	RSC-6.g	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: g: Excludes complaints received only by 1-800 Medicare or recorded only in the CMS Complaint Tracking Module (CTM); however, complaints filed separately as grievances with the organization are included.		Data Sources:	*
2.e	RSC-6.g		Data Element A	Review Results:	
2.e	RSC-6.g		Data Element B	Review Results:	
2.e	RSC-6.g		Data Element C	Review Results:	
2.e	RSC-6.g		Data Element D	Review Results:	
2.e	RSC-6.g		Data Element E	Review Results:	
2.e	RSC-6.h	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: h: Excludes withdrawn Part D grievances.		Data Sources:	*
2.e	RSC-6.h		Data Element A	Review Results:	
2.e	RSC-6.h		Data Element B	Review Results:	

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2.e	RSC-6.h		Data Element C	Review Results:	
2.e	RSC-6.h		Data Element D	Review Results:	
2.e	RSC-6.h		Data Element E	Review Results:	
2.e	RSC-6.i	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: i: For MA-PD contracts : Includes only grievances that apply to the Part D benefit and were processed through the Part D grievance process. If a clear distinction cannot be made for an MA-PD, cases are calculated as Part C grievances.		Data Sources:	*
2.e	RSC-6.i		Data Element A	Review Results:	
2.e	RSC-6.i		Data Element B	Review Results:	
2.e	RSC-6.i		Data Element C	Review Results:	
2.e	RSC-6.i		Data Element D	Review Results:	
2.e	RSC-6.i		Data Element E	Review Results:	
2.e	RSC-6.j	RSC-6: Organization accurately calculates and uploads into HPMS the total number of grievances, including the following criteria: j: Counts grievances for the contract to which the member belongs at the time the grievance was filed, even if the beneficiary enrolled in a new contract before the grievance is resolved (e.g., if a grievance is resolved within the reporting period for a member that has disenrolled from a plan and enrolled in a new plan, then the member's previous plan is still responsible for investigating, resolving and reporting the grievance).		Data Sources:	*
2.e	RSC-6.j		Data Element A	Review Results:	

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2.e	RSC-6.j		Data Element B	Review Results:	
2.e	RSC-6.j		Data Element C	Review Results:	
2.e	RSC-6.j		Data Element D	Review Results:	
2.e	RSC-6.j		Data Element E	Review Results:	
2.e	RSC-7.a	RSC-7: Organization accurately calculates the number of grievances which the Part D sponsor provided timely notification of the decision, including the following criteria: a: Includes only grievances for which the member is notified of decision according to the following timelines:		Data Sources:	*
2.e	RSC-7.ai	RSC-7.a.i: For standard grievances: no later than 30 days after receipt of grievance.	Data Element B	Review Results:	
2.e	RSC-7.ii	RSC-7.a.ii: For standard grievances with an extension taken: no later than 44 days after receipt of grievance.	Data Element B	Review Results:	
2.e	RSC-7.iii	RSC-7.a.iii: For expedited grievances: no later than 24 hours after receipt of grievance.	Data Element B	Review Results:	
3		Organization implements policies and procedures for data submission, including the following:		Data Sources:	*
3.a		Data elements are accurately uploaded into HPMS and entries match corresponding source documents.	Data Element A	Review Results:	
3.a			Data Element B	Review Results:	
3.a			Data Element C	Review Results:	

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3.a			Data Element D	Review Results:	
3.a			Data Element E	Review Results:	
3.b		All source, intermediate, and final stage data sets and other outputs relied upon to enter data into HPMS are archived.		Review Results:	
4		Organization implements policies and procedures for periodic data system updates (e.g., changes in enrollment, provider/pharmacy status, and claims adjustments).		Review Results:	
5		Organization implements policies and procedures for archiving and restoring data in each data system (e.g., disaster recovery plan).		Review Results:	
6		If organization's data systems underwent any changes during the reporting period (e.g., because of a merger, acquisition, or upgrade): Organization provided documentation on the data system changes and, upon review, there were no issues that adversely impacted data reported.		Review Results:	
7		If data collection and/or reporting for this reporting section is delegated to another entity; Organization regularly monitors the quality and timeliness of the data collected and/or reported by the delegated entity or first tier/downstream contractor.		Review Results:	