

**Department of Managed Health Care
Provider Complaint Unit Statistics
January 1, 2013 – December 31, 2013**

The information below represents statistics related to provider complaints received by the Department's Provider Complaint Unit pursuant to Health and Safety Code Section 1371.39(a). The submission of a provider complaint itself does not mean that the health care service plan has violated applicable provisions of California law.

¹Total Provider Complaints Received

Calendar Quarter	Number of Complaints
First Quarter	941
Second Quarter	971
Third Quarter	829
Fourth Quarter	985

²Total Funds Recovered

Calendar Quarter	Amount Recovered
First Quarter	\$1,411,262.99
Second Quarter	\$1,700,000.11
Third Quarter	\$1,141,740.95
Fourth Quarter	\$551,282.09

³Total Provider Complaints Received by Provider Type

Provider Type	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Ambulance	25	5	83	20
Anesthesiology	39	12	13	36
Chiropractic	21	0	0	0
Durable Medical Equipment	48	25	2	8

¹ Total Provider Complaints Received

Data represents provider complaint cases received during the reporting period.

² Total Funds Recovered

Recovered amounts are based on provider complaint cases closed during the reporting period.

³ Total Provider Complaints Received by Provider Type

Data represents provider complaint cases received during the reporting period.

Provider Type	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
ER Physician	127	34	23	17
Family/General Practice	6	59	114	64
Home Health Services	3	0	17	7
Hospital/Institutional	274	305	316	300
Hospital-based Physician	52	28	13	8
Internal Medicine	2	7	6	1
Laboratory Services	0	2	1	0
Mental Health	69	125	15	62
OB/GYN	35	58	2	10
On Call Physicians (Not ER)	4	1	6	9
Other Ancillary Service Providers	13	6	11	11
Other Specialist Providers	86	192	137	59
Pediatrics	5	3	38	230
Pharmacy	28	7	5	5
Physical/Speech/Occupational Therapy	82	29	0	64
Skilled Nursing Facility	4	58	19	58
Vision	0	9	0	0
Totals	941	971	829	985

⁴Total Provider Complaints Received by Health Plan

Health Plan	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Aetna Health of California, Inc.	39	52	127	134
Alameda Alliance For Health	1	0	0	0
Blue Cross of California	232	240	201	154
Blue Shield (Calif. Physicians Network)	51	116	46	38
Care 1st Health Plan	105	97	79	107
CareMore Health Plan	1	0	0	1
Central Health Plan of California, Inc.	1	0	1	1
Cigna Behavioral Health of California, Inc.	1	0	0	0

⁴ Total Provider Complaints Received by Health Plan

Data represents provider complaints received during the reporting period broken out by health plan

Health Plan	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Cigna HealthCare of California, Inc.	9	30	24	36
Community Care Health Plan, Inc.	0	1	0	1
Community Health Group	8	12	22	15
County of Ventura	2	1	0	0
Delta Dental of California	15	3	4	0
Dental Benefit Providers of California, Inc.	0	2	1	0
Fresno Kings Madera Regional Health Authority	0	1	0	0
Easy Choice Health Plan, Inc.	0	0	1	0
EPIC Health Plan	0	0	29	16
Health Net Community Solutions, Inc.	0	0	1	0
Health Net of California, Inc.	183	139	131	174
Health and Human Resource Center	0	0	0	1
Heritage Provider Network, Inc.	2	1	1	0
Human Affairs International of California	0	1	0	0
Humana Health Plan of California, Inc.	1	1	0	3
IEHP Health Access (QIF)	0	1	0	0
Inland Empire Health Plan	26	3	14	6
Kaiser Foundation Health Plan, Inc.	34	107	19	36
Kern Health Systems	0	0	0	1
Local Initiative Health Authority For L.A. County	31	8	23	46
MD Care, Inc.	16	0	0	0
Managed Dental Care	0	1	0	0
Managed Health Network	2	5	1	0
MediExcel, SA de CV	0	0	0	1
Molina Healthcare of CA Partner Plan, Inc. (QIF)	0	1	0	0
Molina Healthcare of California	20	83	37	76
Orange County Health Authority	3	0	1	0
PRIMECARE Medical Network, Inc.	1	0	3	0
Partnership HealthPlan of California	4	2	0	0
Premier Health Plan Services, Inc.	0	0	1	0
San Francisco Community Health Authority	0	2	0	1

Health Plan	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Santa Barbara San Luis Obispo Regional Health Authority	0	0	0	1
Santa Clara County	0	5	1	0
Scan Health Plan	6	1	1	1
Scripps Health Plan Services, Inc.	14	0	0	1
Sharp Health Plan	0	0	0	7
Sistemas Medicos Nacionales, S.A.de C.V.	0	0	1	0
U. S. Behavioral Health Plan, California	17	10	13	35
United Concordia Dental Plans of CA, Inc.	0	0	2	16
Value Options of California, Inc.	7	0	0	0
Vision Service Plan	0	9	0	0
Western Health Advantage	0	3	1	0
Totals	941	971	829	985

**Provider Complaint Unit
Dispute Issues Selected by Providers
January 1, 2013 – December 31, 2013**

Provider Complaint Dispute Issues Identified	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Failed to accept late claim	12	2	9	3
Payor failed to timely pay claim	111	46	55	149
Payor failed to pay claim for emergency care	73	85	52	43
Payor failed to pay claim for poststabilization care	31	6	5	9
Payor rescinded or modified an authorization after services were provided	16	55	20	34
Payor paid non-contracted emergency services at less than the reasonable and customary rate. (See IDRP process)	19	20	117	6
Payor paid the claim at less than the contracted rate	166	277	90	176
General claims processing difficulties	171	100	69	48

Provider Complaint Dispute Issues Identified	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
Payor requested documentation in excess of the amount necessary to adjudicate the claim	6	17	4	1
General dispute resolution mechanism difficulties	154	129	78	120
Payor failed to pay a Medi-Cal claim at the amount required under the governing statute, regulation, all-plan letter, or other applicable document	90	112	160	232
Payor denied the claim as not medically necessary, non-emergent/urgent or investigational/experimental	89	119	166	86
Totals	941	971	829	985