

## *Appendix-E-- Grievance and Appeals Process*

### **Provider Grievance, Appeal & Dispute Process**

The DFCS Office of Provider Management (OPM) is committed to an effective partnership with Providers. Providers are encouraged to contact OPM when they have concerns regarding monitoring results, program designation decisions, or performance based scoring. OPM will work with the Provider to resolve any concerns as expeditiously as possible.

### **Provider Performance Based Placement (PBP) Score Report Disputes**

#### *PBP Score Report Dispute Procedure*

OPM will notify Providers of quarterly PBP score results by email.

**Note:** Unless there is a noted exception, each Provider must enter all data reported to GA+SCORE by the 10<sup>th</sup> of the following month to receive credit for PBP compliance. Accuracy and timeliness in monthly reporting are major contributors to the overall accuracy of the quarterly PBP score report.

A Provider has 10 calendar days from the date of receipt of the PBP score report to submit an appeal request, by mail or email, to the Department of Human Services (DHS) Appeals Coordinator with any dispute related to the quarterly PBP score report. Each appeal request must include:

- a short and plain statement that identifies what the Provider disagrees with, explains why the Provider disagrees, and describes the resolution the Provider seeks, and
- relevant, mitigating information related to the disputed PBP score, including any official documentation such as case records, submitted monthly reports (e.g., ECEM reports, monthly summary reports), treatment records, clinical assessment results, physician statements, and financial invoices.

Within 10 calendar days of receipt of the Provider's appeal request, DHS will coordinate a dispute resolution meeting between OPM and the Provider. Such dispute resolution meeting may be continued if OPM determines that further review is necessary for OPM to reach a decision confirming or revising the disputed PBP score report.

Within 30 calendar days of such dispute resolution meeting, DHS will send to the Provider, via email or mail, a notice confirming or revising the disputed PBP score report. If the disputed PBP score report is revised, the notice will outline OPM's changes to the score report. If the disputed PBP score report is confirmed, the notice will outline the OPM's rationale confirming the score report.

If applicable, OPM will issue a revised score report within 30 calendar days of the conclusion of any appeal. Any revisions to the scoring will be incorporated into the overall results for the Provider's performance results.

### ***PBP Score Report Appeal Delivery Options***

Acceptable methods of submitting an appeal request for a PBP score report include mail or email. The appeal request must be made using an OPM Provider Dispute Form—available at <https://www.gascore.com/content/page.cfm/300>—and include any mitigating information related to the disputed PBP score report. The Provider must ensure a copy of all submitted documentation is maintained by the sender; no packets will be returned. Limit the number of pages submitted to 10 pages.

Mailing Address:                      Jacob Davis, Appeals Coordinator  
Department of Human Services, Office of General Counsel  
2 Peachtree Street, N.W., Suite 29.210  
Atlanta, Georgia 30303-3141

Email Address:                      [CWPscores@dhs.ga.gov](mailto:CWPscores@dhs.ga.gov)

### **Provider Annual Comprehensive Review Disputes**

#### ***Annual Comprehensive Review Dispute Procedures***

OPM will notify Providers in writing of annual comprehensive review results by email. A Provider has 10 calendar days from the date of receipt of the annual comprehensive review results to submit an appeal request, by mail or email, to the DHS Appeals Coordinator with any dispute related to the annual comprehensive review results. Each appeal request must include:

- a short and plain statement that identifies what the Provider disagrees with, explains why the Provider disagrees, and describes the resolution the Provider seeks, and
- relevant, mitigating information related to each specific category of the disputed annual comprehensive review results, including any official documentation such as case records, submitted monthly reports (e.g., ECEM reports, monthly summary reports), treatment records, clinical assessment results, physician statements, and financial invoices.

Within 10 calendar days of receipt of the Provider's appeal request, DHS will coordinate a dispute resolution meeting between OPM and the Provider. Such dispute resolution meeting may be continued if OPM determines that further review is necessary for OPM to reach a decision confirming or revising the disputed annual comprehensive review results.

Within 30 calendar days of such dispute resolution meeting, DHS will send to the Provider, via email or mail, a notice confirming or revising the disputed annual comprehensive review results. If the disputed annual comprehensive review results are revised, the notice will outline OPM's changes to the score. If the disputed annual comprehensive review results are confirmed, the notice will outline OPM's rationale confirming the score.

The decision reached after this meeting is final.

If applicable, OPM will issue revised annual comprehensive review results within 30 calendar days of the conclusion of the dispute resolution meeting. Any revisions to the scoring will be incorporated into the overall results for the Provider's performance results.

### ***Annual Comprehensive Review Appeal Delivery Options***

Acceptable methods of submitting an appeal request for an annual comprehensive review report include mail or email. The appeal request must be made using an OPM Provider Dispute Form—available at <https://www.gascore.com/content/page.cfm/300>—and include any mitigating information related to the disputed annual comprehensive review report. The Provider must ensure a copy of all submitted documentation is maintained by the sender; no packets will be returned. Limit the number of pages submitted to 10 pages.

Mailing Address:                      Jacob Davis, Appeals Coordinator  
Department of Human Services, Office of General Counsel  
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Email Address:                        [CWPscores@dhs.ga.gov](mailto:CWPscores@dhs.ga.gov)

### **General Grievances/Constituent Complaints**

#### ***General Grievances/Constituent Complaints Procedure***

A grievance is any area of complaint that is outside the scope of specific PBP scoring results or annual comprehensive review results but related to administrative operations and the Provider's interface with the Department of Family and Children Services. All grievances should be documented on the Provider Dispute Form and submitted to OPM.

If the grievance is related to the interpretation of minimum standards, policy or contract deliverables, please be specific about the area in question.

OPM will acknowledge receipt of the grievance within 10 business days of its receipt and respond within 30 days.

#### ***General Grievances/Constituent Complaints Appeal Delivery Options***

Acceptable methods of submitting a grievance include hand delivery, mail, email, or fax. The grievance must be made using an OPM Provider Dispute Form—available at <https://www.gascore.com/content/page.cfm/300>—and include any relevant documentation. The Provider must ensure a copy of all submitted documentation is maintained by the sender; no packets will be returned. Limit the number of pages submitted to 10 pages.

Hand Delivery Address: DFCS Office of Provider Management  
Floor 18 Front Reception Desk  
2 Peachtree Street, N.W., Floor 18  
Atlanta, Georgia 30303-3141

Mailing Address: DFCS Office of Provider Management  
Attn: \_\_\_\_\_, Director  
2 Peachtree Street, N.W., Floor 18  
Atlanta, Georgia 30303-3141

Email Address: [opmreports@dhs.ga.gov](mailto:opmreports@dhs.ga.gov)

Fax Number: (770) 359-5335

Alternatively, grievances can always be submitted to DFCS Constituent Services within 30 days of the event, if event specific. The DFCS - Constituent Services Unit contact information is:

Attn: Yvonne Davenport, Unit Manager  
2 Peachtree St., N.W., Floor 18  
Atlanta, Georgia 30303-3141  
[yvonne.davenport@dhs.ga.gov](mailto:yvonne.davenport@dhs.ga.gov)