

SHIBA Complaints Process

As of July 1, 2018, there's a different process for SHIBA clients to submit a complaint.

Clients should now use the Office of the Insurance Commissioner's (OIC) online Complaint form or they can file by US mail at:

<https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>.

The benefits of using the online version is that it supports uploading additional documents, and clients can track the status of their complaint. If clients decide to use the paper form, they can attach any additional documents when they mail the form. They just won't be able to track the status. The SHIBA Resolution Coordinator will continue to work on these complaints as in the past.

If the client's experiencing an URGENT issue, (i.e., the client has less than 3 days of medications or is unable to access needed health care), the volunteer or the client can call 1-800-562-6900 and request to speak to the SHIBA Assist Line.

What you need to do first:

Please review this checklist to determine if the client should file a complaint with the OIC:

- Is this actually a question about whether the plan will cover a service or what it might cost? If so, educate and assist the client to contact their plan to ask their questions.
- Is this actually a billing problem? If so, educate the client about contacting the medical provider or billing office to make sure the correct billing and insurance information is on file.
- Is this actually a GRIEVANCE? (a complaint about quality of care or service) If so, educate and assist the client to submit it to the appropriate place. See: <https://www.medicare.gov/claims-and-appeals/file-a-complaint/complaint.html>
- Is this actually an APPEAL? (Medicare or a plan's refusal to cover a service, supply or prescription.) If so, educate and assist the client to submit it to Medicare or the plan as appropriate. See: <https://www.medicare.gov/claims-and-appeals/file-an-appeal/appeals.html>

- Is this about suspected FRAUD? Consult with your Volunteer Coordinator or Regional Training Consultant.

Why the change?

Unlike SHIBA Online, the new STARS (SHIP Tracking and Referral System) database does not have the capacity to accept or track SHIBA complaints.

How can SHIBA volunteers help?

- Review the checklist on the previous page. If possible, help the client take the needed steps to resolve their issue before they submit a complaint to the OIC.
- If needed, help your clients complete and submit the online or paper complaint form and any supporting documents.
<https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status> .
- Most SHIBA complaints involving Medicare require the beneficiary's Medicare number or date of birth. Help our clients add this information to the narrative section of the complaint form.
- Help the client to clearly state in the complaint the desired outcome they want.
- If the client submits a complaint to the OIC, they should expect a phone call or letter within 7 to 10 business days.
- If you have questions about how to proceed, check with your Volunteer Coordinator, Regional Training Consultant, or the SHIBA Complaints Resolution Coordinator.
- Don't forget to complete a Beneficiary Contact form in STARS.

Resources:

- Medicare Appeals - Official government booklet:
<https://www.medicare.gov/Pubs/pdf/11525-Medicare-Appeals.pdf>
- Livanta: 1-877-588-1123 for people in Washington state
https://bfccqioarea5.com/file/flyer_wa.pdf
 - Discharge appeals – services ending too soon (hospitals, skilled nursing facilities, rehabilitation facilities, etc.)
 - Grievances - quality of care reviews.
 - Medical necessity reviews