



June 2, 2023

### Grievance and Appeal Updates

Dear Provider,

Due to recent changes by the Department of Health Care Services (DHCS) to Grievance and Appeals regulations, Kern Health Systems (KHS) will no longer be able to pend or extend a member's grievance and/or appeal and must close all grievances and appeals within 30 calendar days.

#### **What that means for Providers**

To thoroughly investigate and resolve all grievances and appeals within 30 calendar days, KHS will require providers to respond to any requests for a response and/or medical records within 7 calendar days. If the request is not fulfilled by the 7<sup>th</sup> calendar day, then a 3-day follow-up letter will be sent to the provider. KHS will no longer be able to pend or extend a grievance or appeal upon request of a provider to allow more time to respond and send records. If KHS is unable to resolve a member's grievance or appeal within 30 calendar days due to lack of a response/records from a provider, then KHS shall verbally notify the provider that corrective action will be taken for further offenses.

KHS will update Policy 5.01-P to reflect this update. The policy should be available on the KHS website by mid to late June 2023.

For more information on regulatory requirements related to grievance and appeals, please see DHCS APL 21-011. [APL 21-011 \(ca.gov\)](https://www.cdph.ca.gov/Programs/OPA/Pages/APL21-011.aspx)

KHS posts all bulletins on the KHS website, [www.kernfamilyhealthcare.com](http://www.kernfamilyhealthcare.com), choose Provider, then Bulletins. For any questions, please contact your Provider Relations Representative at 1-800-391-2000.

Sincerely,

Melissa McGuire  
Deputy Director of Provider Network  
Kern Health Systems