**Section 4520.90 Record of Complaints**

a) Complaint, as used in this Section, means any communication primarily expressing a grievance to the health care plan by, or on behalf of, the enrollee, or by the health care provider. For purposes of this definition, "communication" shall include the following:

1) A written notice relating to the health care plan's determinations, procedures and administration as stated in Sections 45 and 50 of the Act; and

2) Written or oral notice filed under the expedited health care services appeal process or under the utilization review process.

b) The health care plan shall submit to the Director a report by April 1 for the previous calendar year that shall include a record of the plan's complaints in the format prescribed in Exhibit A. Beginning April 1, 2005, all plans or companies must electronically submit the record of complaints to the Director in a format prescribed by the Director.

c) Any plan or company failing to file a complaint report by April 1 for the previous calendar year may be subject to a late fee of $100 for each day the report is late.

(Source: Amended at 38 Ill. Reg. 2253, effective January 2, 2014)