

## Medical Compliance

**SUBJECT:** Hotline Policy and Procedure

**PURPOSE:** To provide a confidential telephone Hotline, among an individual's options, for exercising their right to file complaint, and methods for processing, responding to and investigating complaints

**POLICY CATEGORY:** HIPAA 45 CFR 164.530(d), (j)

**STAFF GOVERNED BY THIS POLICY:** All persons who have access to PHI at Eastern Band of Cherokee Indians, Cherokee Indian Hospital Authority, Tsali Care, and through the EBCI Health Plans (currently including CIHA, TCC, TBE, TCGE, VOC, QHA, CBC, TGC, and Museum).

**EFFECTIVE DATE:** APRIL 14, 2003

**DATE REVIEWED OR REVISED:**

**DISTRIBUTION:** All staff governed.

**POLICY:** A Hotline shall be maintained to provide individual's full range of options for presenting complaints to a confidential, and objective source. The Office of Internal Audit shall oversee the Hotline contract.

### **PROCEDURES:**

1. Internal Audit to establish a contract.
  - a. General contract terms. Internal Audit shall select and contract with a qualified contractor having sufficient staff and facility capacity and experience to operate a Hotline. Contract terms shall be one year or less in length. Contract terms shall state procedures for the secure maintenance of records relating to the Hotline, shall state that we are the owner of said records, and shall require HIPAA compliance by contractor, its facilities and equipment, and persons it hires or contracts with that come into contact with any aspect of the Hotline or its records. The contract must state that the central purpose of the contract is to gather and distribute complaints to Privacy Officers of the various EBCI Plan participants and Providers, and that time is of the essence in distributing complaints.
  - b. State operating procedures. The Internal Audit Director shall ensure that contract terms will include procedures for:
    - -maintaining confidentiality of calls,
    - -allowing anonymity of callers,
    - -obtaining sufficient information to facilitate prioritization of complaints,
    - -routing of complaints to applicable Privacy Officers.

The procedures must require that calls initiate by re-routing any callers having medical emergencies to 911, and include alerting callers that no insurance

coverage can be bound or changed through the Hotline, routing them to the Benefits office for this. The procedures must show agreed methods for:

- -tracking each complaint, such as through assigning it a number,
- -informing the Privacy Officer or his/her designee, personally and not by message, of complaints,
- -when and how to escalate efforts to contact the Privacy Officer,
- -concluding exhaustive efforts to inform Privacy Officers of complaints before the expiration of 24 hours excluding weekends and holidays,
- -returning records to specified entity representatives at the end of the contract term
- -methods for entity receiving end-of-term Hotline providers to receive and store those records

c. State measurable performance goals. The contract will include measurable goals for the contractor to meet on the issues of:

- -timely submission of complaints,
- -submission of accurate information
- -submission to the correct entity/provider's Privacy Officer.

The contract should base payment upon meeting those goals.

d. Responsibilities of Providers and Entities participating in the Health Plan.

- (i) Privacy Officer must personally receive Hotline complaints within 24 hours. The Privacy Officer for each entity must prioritize the handling of all complaints within his overall job duties. His immediate supervisor must require this, support efforts to achieve this, and monitor this in performance evaluations. The Privacy Officer must maintain confirmable contact with the Hotline, via contractually agreed, HIPAA-compliant methods (ex: secure office phone, cell phone, Email) so that the Hotline may fully transmit complaints, and get confirmation that the Privacy Officer has fully received them, within 24 hours of Hotline's first effort to contact.
- (ii) Privacy Officer may have backups. Each Entity/Provider may assign a person(s) as the backup to the Privacy Officer for receiving complaints. The assignment of backups is discretionary, but must enable each Entity/Provider to achieve the mandate of having a trained person who is on record with the Hotline, to personally answer the call of the Hotline regarding a complaint, within 24 hours, regardless of travel, vacation, illness, or other job responsibilities. The Entity/Provider's Privacy Officer and his/her immediate supervisor are responsible for keeping the Internal Audit Director promptly notified of changes to the name or contact information of the Privacy Officers and his/her backup(s). The Internal Audit Director shall keep the Hotline officials promptly notified of these changes. The Privacy Officer shall make the complaint log continuously available to the backup(s).
- (iii) Duties of backups. Backups have all authority that Privacy Officers have for receiving complaints, sending acknowledgement letters, and initiating investigation in order to preserve deadlines. Privacy Officers have sole responsibility for the strategy and

oversight of the investigation. Backups may participate fully in the remainder of the investigation, but only at the direction of the Privacy Officer.

- e. Procedures for receipt of a complaint from the Hotline
  - i. Normal receipt. Upon receiving a complaint, the Privacy Officer shall immediately mark it in the log. At that time, send appropriate correspondence (acknowledgement letter) to the complainant.
  - ii. Erroneous receipt. If upon receipt, the Privacy Officer recognizes that the complaint has been misdirected to his/her office, and actually relates to another Provider/Entity, s/he shall nevertheless log it in. The Privacy Officer shall, within a priority time frame, take it to the correct office, and obtain verification (such as a signature, or Email to which a “read” receipt or response from the intended is attached) of receipt by the correct Privacy Officer. The Privacy Officer will take it to the correct office, and obtain a signature of receipt from the correct Privacy Officer. If a signature form is used, appropriate language could be: “I, [name], received Hotline complaint number \_\_\_\_\_ from [name of person delivering] at \_\_:\_\_ o’clock on \_\_/\_\_/\_\_. [name of person delivering] states it was misdirected to his/her office.” The Privacy Officer delivering it shall note this transfer in his/her log, and attach the form to the notation. The Privacy Officer receiving it shall log it in and send appropriate correspondence (acknowledgement letter) in a priority time frame.

