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Subject: Complaints against Contracted Network Providers

1.0 PURPOSE

This policy establishes guidelines to address complaints against SFBHNS's contracted network providers.

2.0 SCOPE

The policy applies to anyone filing a complaint against any one of SFBHN's contracted network providers. This includes a complainant that has already filed a formal complaint directly with the contracted network provider and is appealing the resolution.

3.0 POLICY

SFBHN values the concerns of the public and offers a policy by which to express and resolve those issues and concerns, including the option to formally file a complaint against one of its contracted network providers. The following procedure applies. The Complaint Form is recommended for use in tracking information and follow-up.

1. All complaints should be filed within thirty (30) days of the incident. Complaints filed after thirty (30) days of the incident will be excepted if the Vice President (VP) of Continuous Quality Improvement (CQI) determines there is an acceptable reason for not filing the complaint in a timely fashion.
2. Any complaint involving allegations requiring notification to a regulatory authority will be immediately reported. This includes, but is not limited to: The abuse hotline, Office of the Inspector General (OIG), Department of Health (DOH), Department of Children and Families (DCF), and Health and Human Services (HHS).
3. Upon receipt of the complaint, CQI staff will contact the complainant within five (5) working days to obtain follow-up information. A meeting will be scheduled upon the complainant's request. The complainant will be asked if they would like to be notified of the outcome.
4. After obtaining information from the complainant, a fact finding investigation will be conducted that includes interviews of individuals with relevant information related to the complaint and review of pertinent documentation. Refer to QI Policy on Monitoring Process.
5. At the conclusion of the investigation, a written report or e-mail will be submitted to the contracted network provider detailing the findings. A copy of this report will go to the SFBHN VP of CQI and the SFBHN CEO. Refer to QI Policy on CAP Process.
6. If the complainant has requested notification of the outcome of the investigation, a letter will be e-mailed or mailed informing the complainant if the findings were supported, not supported,

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or unable to be determined and notifying them of their right to appeal to the SFBHN CEO. Refer to QI Policy on Appeals.

7. Documentation of the complaint, resolution, and appeal, if applicable, will be kept on file for seven (7) years.

4.0 QUALITY ASSURANCE PROCESS

CQI staff maintains a log of all complaints received, including follow-up action taken and resolution. The log is converted into a quarterly and yearly report that is used for analyzing and tracking types of complaints and trends among subsets of providers and individual providers for the purpose of targeting areas of continued need for improvement.

5.0 REPORTING TO THE BOARD

On a quarterly basis, all complaints are reported directly to the SFBHN Board of Directors by the SFBHN VP of CQI, or their designee.

6.0 REVISION HISTORY

Date	Revision #	Description of Change
05/17/17		Initial creation.

7.0 INQUIRIES

Direct inquiries about this policy to:

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