

Purpose

To establish a procedure and ensure the rights of patients, their representatives (if any) and their caregivers and/or families to file a report of a grievance or complaint and to make recommendations for resolutions of conflicts without fear of retaliation, coercion, discrimination, reprisal, or unreasonable interruption of care.

Policy

- I. The Hospice will investigate complaints made by a patient, the patient's representative (if any), and the patient's caregivers and family, including, but not limited to the following topics:
 - A. Treatment or care that is (or fails to be) furnished, is furnished inconsistently, or is furnished inappropriately;
 - B. Mistreatment, neglect, or verbal, mental, sexual, and physical abuse, including injuries of unknown source, and/or misappropriation of patient property by anyone furnishing services on behalf of the Hospice;
 - C. Lack of respect for the patient's property and/or person by anyone furnishing services on behalf of the Hospice;
 - D. Discrimination;
 - E. A healthcare provider, of the patient may also file a complaint regarding the treatment or care that is being provided.
- II. A patient or their representative may file a report of a grievance or complaint regarding discrimination with the Office of Civil Rights within 180 days of when the patient knew of the situation.
- III. The Hospice will not hamper, compel, discriminate, treat differently, or retaliate against a patient or family for exercising the patient's rights.

Procedure

- I. The grievance procedure is in compliance with Title VI of the Civil Rights Act of 1964, section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, section 1557 of the Affordable Care Act and other pertinent requirements of the Office for Civil Rights of HHS.
- I. The Hospice will provide the patient and the patient's legal representative (if any), the following information at the time of admission during the initial assessment visit in advance of furnishing care:
 - A. Notice of the patient's rights and responsibilities, including the right to make complaints to the Hospice regarding treatment or care that is (or fails to be) furnished, and the lack of respect for the property and/or person by anyone who is furnishing services on behalf of the Hospice and

- the right to be free from any discrimination or reprisal for exercising his or her rights or for voicing grievances to the Hospice or an outside entity.
- B. Contact information for the Hospice Administrator, including the Administrator's name, business address, and business phone number in order to receive complaints.
 - C. Information regarding the state toll free hospice telephone hot line, its contact information, its hours of operation, and that its purpose is to receive complaints or questions about local Agencies.
- II. The Hospice will inform the patient, their representative (if any) and/or caregiver, in writing, at the time of the initial assessment to notify the Administrator or designee at the Hospice regarding any conflicts, grievances or complaints and the time frames for initiation and resolution.
 - III. When the Hospice is ACHC accredited, the patient and/or family may contact ACHC regarding a complaint. The toll-free number is: 1-855-937-2242.
 - IV. The Hospice will immediately investigate all alleged violations involving anyone furnishing services on behalf of the Hospice.
 - V. The appropriate Hospice manager will be informed of the complaint.
 - A. If the grievance is due to perceived discrimination, the Civil Rights Coordinator will be informed, as well.
 - B. The Hospice will take action to prevent further potential violations, including retaliation, while the complaint is being investigated.
 - C. Documentation will include, but not be limited to, the name and address of the person filing the complaint, the nature of the complaint, and the remedy/relief the person is seeking.
 - VI. The Hospice will complete the investigation and documentation of the resolution per state guidelines upon receipt of the complaint.
 - A. If the grievance is due to perceived discrimination, the Civil Rights Coordinator will maintain a copy of the written documentation.
 - VII. The Hospice will involve the patient, caregiver, representative and/or the patient's healthcare provider as appropriate to reach a resolution.
 - VIII. The Hospice's Civil Rights Coordinator will make appropriate arrangements to ensure that disabled persons are provided other accommodations if needed to participate in the grievance process.
 - A. Such arrangements may include, but are not limited to, providing interpreters for the deaf and/or limited English proficient patients, providing taped cassettes of material for the blind, or assuring a barrier-free location for the proceedings.

Resolution of Patient Conflicts, Grievances or Complaints

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- IX. The Hospice will consider all patient, patient representative (if any), caregiver or healthcare provider's recommendations to reach a resolution.
- A. If the grievance is due to perceived discrimination, the Civil Rights Coordinator will participate in reaching a resolution.
- X. The Hospice will contact the State Hospice Hotline, and/or the Office of Civil Rights as appropriate.
- XI. All actions taken and follow-up performed will be documented on a complaint form, as well as reported to the management staff and if the grievance was about perceived discrimination, the Civil Rights Coordinator.
- A. If the grievance was about perceived discrimination, the person filing it may appeal the decision in writing to the Administrator.
 - B. The Administrator will issue a written decision in response to the appeal no later than 30 days after its filing.
- XII. The availability and use of this grievance procedure does not prevent a person from filing a complaint of discrimination on the basis of disability by:
- A. Calling toll-free: 1-800-368-1019 (TDD users may call 1-800-537-7697);
 - B. Writing to:

Centralized Case Management Operations
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F HHH Bldg.
Washington, D.C. 20201; or
 - C. Through the OCR Complaint Portal at: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>
- XIII. If the complaint is in regards to the quality of services not meeting professionally recognized standards of health care, the patient has the right to report to the BFCC-QIO in their region.
- A. The patient may find more information for the organization that services his/her area at either:
 - 1. <https://www.keproqio.com>;
 - 2. or <https://livantaqio.com>; and
 - 3. By calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

- B. Advocacy inquiries may also be emailed to beneficiary.complaints@hcqis.org.

ARCTURUS HEALTHCARE LLC - 1003242892