



## 2.0 Quality Assurance

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## 2.1 Quality Assurance Program

HearPO's Quality Assurance (QA) program objectively and systematically monitors and evaluates the quality and appropriateness of care and service to members. Opportunities for improvement are pursued through continuous review, analysis, and assessment.

### Performance Measurements

Our QA program uses quality indicators that are objective, measurable and based on current knowledge and clinical experience in order to monitor and evaluate important aspects of patient care and service. Specifically, fitting verification, patient satisfaction survey, peer review and site inspection data are utilized to measure and assure the quality of service and care. This data is collected on an ongoing basis, then aggregated and analyzed for patterns and trends. Among other applications, the resulting analyses are used to help identify and respond to the learning needs of HearPO providers.

### Quality Assurance Committee (QAC)

The Quality Assurance Committee (QAC) is the governing body of HearPO's QA Program. The QAC includes, but is not limited to, the Director of Professional Relations, the Director of Quality and Information Systems, and a representative panel of participating providers. The Director of Quality and Information Systems serves as the chair for the QAC, and appoints all other positions on the QAC.

#### Quality Assurance Committee Responsibilities:

The primary responsibility of the QAC is to monitor the quality of HearPO's services and providers. Specifically, the QAC is responsible for the following:

- The development and maintenance of the QA Program.
- The documentation of all activities, findings, recommendations and actions regarding the QA program.
- Providing feedback to the providers regarding QA standards.
- Determining appropriate remedial action(s).
- Integrating QA standards into all HearPO functions, such as provider credentialing, provider agreements, utilization management, member grievances, data reporting and member satisfaction activities.
- Reporting an annual evaluation of the QA program to HearPO management.

## 2.1 Quality Assurance Program, continued

### **Quality Assurance Committee Meeting:**

The QAC meets a minimum of two (2) times per year to review QA activities. To control costs, these meetings are held via conference call or over the Internet. Attendance at these meetings is mandatory in order to remain an active QAC member.

### **Peer Review Committee (PRC)**

The Peer Review Committee (PRC) serves as the interface between the patient or provider and the QAC, to whom it reports. The PRC also assigns and oversees regional provider committees that assist with site inspections and audits. The PRC includes one or more HearPO associates, including specifically, the Director of Professional Relations.

### **Peer Review Committee Responsibilities:**

The PRC's primary responsibilities include patient and provider complaint resolution, program assessment, provider practice audits and utilization monitoring. Specifically, the PRC is responsible for the following:

- Reviewing patient and provider complaints, member surveys, feedback, utilization data and provider compliance with HearPO QA standards.
- Auditing provider practices, if necessary, or assigning a regional provider committee to perform these audits.
- Reporting all audit findings directly to the QAC.
- Enforcing and monitoring all remedial action(s), as determined by the QAC, and outlined in the QA Program.
- Preparing an annual report to the QAC indicating actions completed, demonstrated improvements in quality, areas of deficiency, recommendations for corrective action and an evaluation of the overall effectiveness of the QA program.

## 2.1 Quality Assurance Program, continued

### **Provider Complaint Resolution:**

All written or verbal provider complaints are forwarded to the PRC along with the provider's utilization history. To access the Provider Grievance Form, *please see Section 5.0*. The PRC will review the complaint with the provider and if warranted, implement a corrective action plan that will include the following steps:

- Identifying the root cause of the complaint.
- Determining immediate action to resolve the complaint.
- Identifying corrective action to prevent repeat occurrences.
- Evaluating the effectiveness of the corrective action taken.

The PRC will review the corrective action plan with the provider and monitor it until closure. The PRC will report all results to the QAC.

### **Patient Complaint Resolution:**

All written or verbal patient complaints are forwarded to the PRC along with the provider's utilization history. To access the Patient Grievance Form, *please see section 5.0*. If the PRC determines that the nature of the complaint does not warrant an audit of the provider in question, they may still require that provider to implement a corrective action plan. The corrective action plan will include all of the following steps:

- Identifying the root cause of the complaint.
- Determining immediate action to resolve the complaint.
- Identifying corrective action to prevent repeat occurrences.
- Evaluating the effectiveness of the corrective action taken.

The PRC will review the corrective action plan to determine if it is acceptable and will monitor it until closure. If necessary, the PRC may audit the provider and site prior to verifying closure. The PRC will report all results to the QAC.

## 2.1 Quality Assurance Program, continued

### **Provider Practice Audit Procedures:**

A provider and/or practice site is audited when the PRC learns of potentially inappropriate services or guideline violations from that provider. The PRC notifies the provider of the audit and the nature of the complaint; however, specifics of the complaint are not discussed prior to the audit. The provider's presence is required for the duration of the audit, which can range from one (1) to three (3) hours, depending upon the nature of the complaint and the depth of the audit findings. Audit guidelines are as follows:

1. A HearPO administrator provides the PRC, or its designated auditor representative with a list of all HearPO customers who have received services from the provider.
2. The provider is asked to provide the PRC auditor with all HearPO customer charts.
3. The PRC auditor pulls the complainant's chart, and five (5) additional HearPO customer charts at random from the provider's files.
4. HearPO member charts are reviewed for the following contents:
  - case history
  - complete audiologic test results
  - purchase agreement
  - medical clearance or waiver
  - fitting verification
  - satisfaction surveys
  - prior authorization documents
5. HearPO member charts are reviewed to ensure that pre-fitting, fitting and post-fitting services provided to HearPO members meet or exceed HearPO standards.
6. Equipment and calibration records are reviewed to insure that the American National Standards Institute (ANSI) standards are met.
7. Provider credentials are reviewed for accuracy and completeness.
8. The provider and provider's staff are interviewed and allowed to defend their position in response to the complaint.

Following the audit, a complete report is presented to the QAC for review. If the QAC deems that the complaint is not substantiated, no remedial action is taken, and a complete report is sent to both the provider and complainant by the PRC. If the QAC deems that the complaint is substantiated, the appropriate remedial action is determined and both the provider and complainant are informed of the action(s) by the PRC.



## **2.1 Quality Assurance Program, continued**

### **Appeal Process:**

A complainant or provider can challenge a determination in the form of a written appeal. The QAC will review the appeal and the corrective action and/or audit findings, and if necessary, request further information from the PRC to aid in making its final decision. If still not satisfied with this final determination, the complainant or provider has sixty (60) days to issue a written request for a hearing. The hearing is conducted by HearPO administration, including the QAC, the complainant, the provider and legal representation, if necessary.



## 2.2 Quality Assurance Integration

It is the responsibility of the Quality Assurance Committee (QAC) to integrate quality assurance standards into all HearPO functions, such as provider credentialing, provider agreements, the development of provider panels, utilization management, member grievances, data reporting and member satisfaction activities.

### Accountability

Annually, HearPO executive management reviews the continuity and effectiveness of the Quality Assurance program including the Peer Review Committee (PRC) and the Quality Assurance Committee (QAC), and adapts it in accordance with the findings of its review.

### Provider Agreements

Written agreements are executed between HearPO and the provider who agrees to provide hearing healthcare services and products to HearPO customers. The agreement includes a provision requiring the provider to maintain medical records as well as make these records available to HearPO during an audit or site inspection, if deemed necessary. Provider agreements will be amended as necessary to comply with Federal and State laws and regulations. To access the HearPO Provider Agreement, *please see Section 5.0.*

### Cultural Sensitivity

HearPO providers shall not discriminate in the access to, treatment of, or quality of service rendered to customers on the basis of age, sex, ethnicity, religion, sexual orientation, health status or disability (mental or physical), national origin, ancestry, marital status, payment source, or the fact that they are members. The provider credentialing process allows for additional cultural sensitivity requirements, if necessary, to ensure that providers are competent in languages spoken by HearPO customers.

### Patient Satisfaction

HearPO surveys all patients fit with hearing aids approximately 90 day's following the fitting in order to determine their satisfaction with HearPO, the provider, quality of care, and the hearing aids dispensed. The survey outcomes are aggregated and reported semi-annually to the PRC and QAC and upon request to the contract organization. To access the Patient Satisfaction Survey, *please see section 5.0.*

## 2.2 Quality Assurance Integration, continued

### Complaint Resolution

HearPO makes every effort to resolve any complaints or problems as swiftly as possible. Upon receipt of a patient or provider complaint, the complainant is contacted to discuss the complaint and the procedures that will be followed in resolving the complaint. If the complaint is from a patient, they are immediately given the option of receiving care from another HearPO provider. HearPO maintains a record of each complaint for a minimum of 5 years.

### Information Systems Adequacy

HearPO maintains a computerized record-keeping system that tracks pertinent information relating to the hearing healthcare of its customers. The system was developed on an industry standard platform and is secure, scalable and data-portable. All data is backed-up on a nightly basis and can be made readily available to appropriate individuals.

The information system is able to track individual patient-care data relating to the provider, customer, diagnosis, procedure, date and location of service. Also, the system has the capability to aggregate data in order to identify utilization patterns. Claims and encounter information are stored for a minimum of five years.

### Confidentiality

HearPO insures that the confidentiality of patient information and records is protected. HearPO's confidentiality policy is as follows:

- Authorization for release of information must be given in writing by a patient prior to *any* release.
- Records are open for review only by authorized HearPO committee members.
- With patient's permission, the records can be released for scientific research purposes, but such information cannot disclose the patient's identity in any manner.
- Patients can approve or refuse the release of identifiable personal information by HearPO except when such release is required by law.
- HearPO insures that any information obtained during the provider credentialing process shall be kept confidential, except when such release is required by law.

## 2.3 Remedial Action

### Grounds for Remedial Action

Remedial action may be taken for any of the following violations:

- Failure to follow HIPPA guidelines.
- Contacting a contracted payer directly without written permission from HearPO.
- Allowing a HearPO patient to be seen by a non-HearPO provider.
- Failure to follow HearPO advertising guidelines.
- Failure to maintain license or certification, through failure to renew, suspension or revocation.
- Failure to maintain professional liability insurance.
- Failure to earn required continuing education units.
- Failure to provide required services.
- Failure to provide services or products at contracted rates.
- Breach of confidentiality, including disclosure of patient information without written authorization.
- Physical or verbal abuse to a patient.
- Violation of equipment requirements, including failure to meet American National Standards Institute (ANSI) standards.
- Failure to comply with all aspects of the HearPO hearing aid fitting protocol.
- Failure to comply with HearPO guidelines.
- Failure to cooperate with a HearPO investigation, non-response to inquiries, refusal of a site inspection or audit, failure to disclose information during a site inspection or audit.
- Falsifying records.
- Refusal to comply with recommended remedial action.
- Violation of provider agreement.
- Felony conviction.
- Violation of state or federal statute or administrative rule.
- Misrepresentation or fraud.
- False, fraudulent or misleading advertisement.
- Unethical or unprofessional conduct.
- Failure to adequately provide supervision of a trainee.
- Incompetence.
- Failure to complete a purchase agreement.
- Failure to notify of current address where the provider engages in the practice of fitting and dispensing hearing aids, or changes of address within ten (10) days of change.

## 2.3 Remedial Action, continued

- Misrepresentation of scientific or technical knowledge, including the use of words that connote education or experience beyond the provider's expertise.
- Theft.
- Practicing with trainee license without supervision.
- Current misuse of alcohol, controlled substances or illegal drugs.
- Failure to properly administer and document hearing and hearing aid tests as required.
- Engaging in unfair or deceptive practices.
- Failure to obtain a medical clearance or waiver prior to the fitting and selling of a hearing aid(s).
- Failure to keep required records.
- Violation of purchase decision rights.
- Unprofessional conduct, incompetence, negligence or malpractice resulting in injury to the patient.
- Failure to refer for medical treatment.
- Failure to have a purchase agreement and the HearPO Prior Authorization Form signed by the purchaser.

### Forms of Remedial Action

The Quality Assurance Committee (QAC) determines all remedial action. Examples of recommended remedial action follow:

- **Written Warning** – Provider is informed in writing of violation and given thirty (30) days to correct.
- **Probation** – Provider received a second written warning (for a different violation) or the severity of a violation warrants probation. The provider is placed on one (1) year probation, during which time any further violations result in immediate termination.
- **Termination** – Provider repeated a violation, failed to comply with a written warning, violated probation or the severity of a violation warrants termination.

### Effectiveness Assessment

The PRC monitors, evaluates and enforces all remedial actions to insure that the appropriate steps are being taken to correct the violation, and reports such information back to the QAC. The PRC also prepares an annual report to the QAC indicating actions completed, demonstrated improvements in quality, areas of deficiency, recommendations for corrective action and an evaluation of the overall effectiveness of the Quality Assurance program.