



IOWA MEDICAL SOCIETY

*Ensuring quality education for Iowa physicians*

## Procedure for Handling Complaints/Inquiries Regarding Accredited Providers

The following is a guide for handling complaints/inquiries received by the IMS which suggest that an accredited provider may not be in compliance with ACCME® Essential Areas and Elements and/or IMS accreditation policies with regard to one or more of its activities.

- I. To receive formal consideration, all complaints must be submitted in writing and signed.

The statute of limitation of the length of time during which an IMS provider must be accountable for any complaints/inquiries received by the IMS is 12 months from the date of the activity, or in the case of a series, 12 months from the date of the activity which is in question. The length of time for a provider to be accountable for an Enduring Material will be one year past the third year of current review.

- II. The co-chairs of the IMS Committee on CME Accreditation will review the complaint/inquiry to determine whether it relates to the manner in which the provider complies with ACCME® Essential Areas and Elements, and/or IMS accreditation policies.
  - A. The confidentiality of the complaint/inquiry party shall be protected.
  - B. If the complaint/inquiry is not judged to be related to compliance with ACCME® Essential Areas and Elements, and/or IMS accreditation policies, the person initiating the complaint will be notified in writing by one of the Committee co-chairs.
  - C. If the complaint inquiry is judged to be related to compliance with ACCME® Essential Areas and Elements, and/or IMS accreditation policies, one of the committee co-chairs will notify the person initiating the complaint of the planned course of action.
- III. If the complaint/inquiry is judged to be related to compliance with ACCME® Essential Areas and Elements, and/or IMS accreditation policies, the IMS staff will send a Letter of Inquiry to the provider via certified mail describing the nature of the complaint/inquiry. The Letter of Inquiry will request a response in which the provider can offer its interpretation of how it complies with ACCME® Essential Areas and Elements, and/or IMS accreditation policies. The provider's response must be received by the IMS within 60 days after the provider receives the Letter of Inquiry. The provider's response must be accompanied, where possible, by supporting documentation.
  - A. If a provider fails to respond to a request for information, the IMS Committee on CME Accreditation may require an immediate full or focused on-site survey and/or change the provider's accreditation status to probation.
  - B. Upon receipt of the provider's response, the committee co-chairs shall determine whether additional information is necessary and may request such information from the provider. When the committee co-chairs determine that the information submitted is adequate, one of two courses of action may be taken:

1. The inquiry will be processed by IMS staff if, in the opinion of the staff, it is of a clear and uncomplicated nature. IMS staff will refer to a list generated by the IMS Committee on CME Accreditation that identifies issues that tend to be clear and uncomplicated. IMS staff will review the materials and make a recommendation for action. The recommendation will be placed on a consent agenda to be presented to the IMS Committee on CME Accreditation for ratification.
  2. The inquiry will be sent to two members of the IMS Committee on CME Accreditation if it is not a clear and uncomplicated issue. Those members will review the materials and communicate one single recommendation in writing to the IMS staff. The recommendation will be placed on the agenda to be presented to the IMS Committee on CME Accreditation for discussion.
    - a. If the two reviewers do not agree on a recommendation, a conference will be held among the reviewers and the Chair of the IMS Committee on CME Accreditation. If consensus is achieved, the recommendation will be presented to the full committee for discussion. If no consensus can be achieved, IMS staff will provide a summary report to the full committee for this discussion.
    - b. The members of the review team, the Chair of the IMS Committee on CME Accreditation, or the full committee may request additional materials from the provider if they determine that the materials they have are insufficient to allow them to render a recommendation.
  3. The provider and the party that submitted the complaint will be notified of the inquiry outcome.
- IV. The reviewers will make their recommendation to the IMS Committee on CME Accreditation based on their review. The committee will make the final determination. The following are the possible determinations:
- A. Notice of Compliance
    1. From the documentation submitted, the IMS Committee on CME Accreditation has determined that the provider appears to be in compliance with the ACCME® Essential Areas and Elements, and/or IMS accreditation policies regarding the issues presented.
    2. The information will be filed and the Letter of Inquiry and decision letter to the provider will not be included at the next review.
  - B. Notice of Non-Compliance
    1. From the documentation submitted, the IMS Committee on CME Accreditation has determined that the provider is not in compliance with the ACCME® Essential Areas and Elements, and/or IMS accreditation policies regarding the issues presented.
    2. Areas of non-compliance will be enumerated in the decision letter to the provider which, along with the Letter of Inquiry and the provider's response, will be placed in the provider's file and will be made available to the survey team at the next review.
    3. The provider will be asked to provide documentation of corrective action to the IMS staff within 60 days of receipt of the Notice of Non-

- Compliance, and will be notified that failure to correct the deficiencies may result in an immediate resurvey which may affect the provider's accreditation status.
- a. IMS staff will review the notice of corrective action for adequacy and will summarize and present the notices to the IMS Committee on CME Accreditation. If the response is adequate, it will be kept in the provider file to be included in the next review. If the response is inadequate, the IMS Committee on CME Accreditation may request additional information or may request an immediate resurvey and/or change in accreditation status to probation.
  - b. If a provider fails to respond to a request for a notice of corrective action, the IMS Committee on CME Accreditation may request an immediate on-site survey and/or change in accreditation status to probation.
4. In addition, the provider may be required to submit a Monitoring Report at a time determined by the IMS Committee on CME Accreditation, and will be notified that failure to respond or to correct the deficiencies may result in an immediate resurvey which may affect the provider's accreditation status.
- a. The committee co-chairs will review the provider's Monitoring Report and determine its adequacy.
    - 1) If the report is adequate, the committee co-chairs will recommend its acceptance. The recommendation will be presented to the IMS Committee on CME Accreditation for discussion and concurrence. The report will be kept in the provider file to be included in the next review.
    - 2) If the report is inadequate, the IMS Committee on CME Accreditation may request an immediate resurvey and/or change in accreditation status to probation.
  - b. If a provider fails to respond to a request for a Monitoring Report, the IMS Committee on CME Accreditation may request an immediate on-site survey and/or change in accreditation status to probation.
5. Notice of any action taken by the committee will be communicated in writing to the provider and the party that submitted the complaint.
- V. The IMS Committee on CME Accreditation may request at any time to review notices of corrective action (See paragraph IV, B, 3) and Monitoring Reports from providers in addition to reports from staff.
- VI. The IMS Committee on CME Accreditation will intervene by affecting the accreditation status of a provider only when it identifies practices and conditions that indicate that a provider is not in compliance with ACCME® Essential Areas and Elements, and/or IMS accreditation policies.

Records of the IMS Committee on CME Accreditation's actions will be maintained until the provider's next accreditation application has been acted on by the committee.

Complaints/inquiries that are of a clear and uncomplicated nature and that may be processed by IMS staff:

- A. Absence of the appropriate Accreditation Statement.
- B. Incorrect or incomplete Accreditation Statement.
- C. Lack of objectives, target audience, needs, etc., in an Enduring Material (SEM 8).
- D. Proof of disclosure to CME activity participants.