

Managing Your Practice

Patient complaints: how to stop them before they start

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Studies show that people complain or sue doctors when they do not get a timely or credible explanation of unexpected complications, or answers to questions about their own or a relative's treatment. The leading reasons for patient complaints include: delayed receipt of test results; long waits for an appointment; being kept waiting too long to see the doctor; staff rudeness or a doctor's poor "bedside manner;" and billing errors. Anticipating problems and responding promptly to complaints can prevent an unhappy patient from hiring an attorney or threatening to sue.

How to avoid patient complaints

- Treat patients with respect. Protect their privacy and the confidentiality of their medical record. Answer the phone promptly and courteously. Give patients a time frame when the doctor can return their phone call.
- Communicate clearly; explain what you are doing and why. Educating patients about actions or treatment avoids misunderstanding.
- Avoid surprises. Tell new patients if you charge fees for missed or late appointments; interest on late payments; and if you are required

to collect insurance co-payments at the time of treatment. Explain other policies, such as limitations on refilling medications after office hours. State these policies in an attractive, inexpensive patient information brochure that is given to new patients and also displayed in the reception area.

- Don't delay in reporting test results. Patients often are anxiously awaiting results of significant tests, such as X-rays, mammography, Pap smears, PSAs, and biopsies. **Note:** only a physician should inform patients of significant or abnormal test results, and explain if follow-up is needed. The doctor can delegate to staff members responsibility for informing patients about normal test results. Some physicians educate patients by mailing a summary of test results on a pre-printed form that: (a) explains tests and results (e.g., *what do those cholesterol numbers mean?*); (b) advises about re-testing; (c) reminds about medication use; (d) includes care or dietary recommendations; (e) notes the next appointment date.
- If long waits in the reception room are common, re-evaluate scheduling policies. Apologizing for delays shows respect for patients' time.

- Don't criticize care by other health care professionals. Such criticism is a catalyst for malpractice suits.
- Treat patients the way you want doctors and their staff to treat you, your parents or your child.

When you can't please all the people all the time...

- Every medical office should have clear policies about responding to complaints.
- Staff should report significant complaints or litigation threats to the physician. Only doctors should discuss complaints about medical care.
- Get advice from MIEC's Claims Office before responding to significant complaints about medical care. In some instances, the Claims representative may obtain legal advice on your behalf, or retain legal counsel to assist. For **general** questions about responding to complaints, contact MIEC's Loss Prevention Department.
- Discuss complaints calmly and professionally. Don't allow the patient's anger to trigger your own. Be patient and considerate, but end the discussion if the patient becomes abusive.
- In complex situations, invite the patient or family members to an office conference, or ask for a letter that states their concerns. Get advice from an MIEC Claims representative on how to handle the discussion or complaint letter response. Listen to the complaints and ask what the patient thinks is an appropriate solution to the problem.
- Confidentiality laws prohibit discussing a patient's medical care with others (*including the patient's spouse or other relatives*) unless the patient consents. Ask patients on their first visit to list those people to whom your office may disclose confidential information.
- Establish a policy for reducing or waiving fees in response to a complaint. Waiving a fee may be seen as admitting liability. It may be prudent for the doctor to first discuss the reasons for a fee waiver with an MIEC Claims representative. Staff members should not adjust fees without physician approval. An accounts manager can handle questions about fees or billing policies and forms.

Reduce fee complaints by:

 - (1) introducing new patients to the accounts manager, who can explain billing policies, your obligation to collect insurance co-payments; and
 - (2) including this information in a patient information brochure. (*Sample patient information brochures are available from MIEC's Loss Prevention Department.*)
- Defense attorneys advise physicians to not admit liability or negligence when discussing a complaint. It is appropriate to express sympathy or apologize for the patient's concern, but not to accept blame for it. Bad outcomes or adverse incidents are not necessarily measures of the quality of care. Do not promise the patient or the patient's family compensation for an injury or adverse reaction to treatment or medication before consulting with an MIEC Claims representative. MIEC is not obligated to honor reimbursements negotiated without prior approval.
- Do not discuss complaints or respond to letters from patients' attorneys without advice from an MIEC Claims representative. Conversations and correspondence with patients' attorneys are not privileged. That is, anything you say or write can be used against you in litigation.
- Document all complaints and details of discussions with the complaining patient, even if the problem appears to have been resolved. The documentation establishes a date on which the patient was aware of an alleged injury that could later be a cause of action for a lawsuit. The statute of limitations for filing a malpractice suit begins to run either from the date of injury or the date of discovery. The date a patient first complains may determine the discovery date used in litigation.