



PROTOCOL FOR RESOLVING COMPLAINTS FROM MEDICARE BENEFICIARIES

The patient has the right to freely voice grievances and recommend changes in care or services without fear of reprisal or unreasonable interruption of services. Service, equipment, and billing complaints will be communicated to the Director of Customer Services or Pharmacy Manager. These complaints will be documented on the Medicare Beneficiary Complaint Summary Log, and completed forms will include the patient's name, address, telephone number, health insurance claim number, and a summary of actions taken to resolve the complaint.

All complaints will be handled in a professional manner. All logged complaints will be investigated, acted upon, and responded to in writing or telephone by the manager/representative within a reasonable amount of time after the receipt of the complaint. If there is no satisfactory resolution of the complaint the next level of management will be notified progressively and up to the president or owner of the company.

The patient will be informed of this complaint protocol at the time of set-up of service.

If you have any unresolved issues, you may file a complaint with our AuBurn Corporate Office or our Accrediting Organization.

AuBurn Corporate @ 1-785-448-3600

The Compliance Team @ 1-888-291-5353