First Steps	There were no comments on the final revision. This policy will be effective July 1, 2001  First Steps Disenrollment Procedures
Disenrollment Procedures	<ul> <li>The Division of Family Resources (Division) has established procedures relating to the disenrollment of providers from the First Steps early intervention program. Disenrollment of a provider will be considered if the Division has received a written complaint relating to the actions of a provider and a thorough investigation determines any of the following: <ul> <li>The provider is involved in a behavior that is determined to be harmful or dangerous to the child or family.</li> <li>The provider has repeatedly violated State or Federal regulation or the terms of their provider agreement.</li> <li>The provider fails to respond or cooperate with a complaint investigation or corrective action plan as required by the Division.</li> <li>The provider has inappropriate billing practices or has misused First Steps funds.</li> </ul> </li></ul>
Authority	Authority for the policy and the procedures regarding disenrollment is contained in the First Steps Payee Agreement, Section E, Number 3.
Definitions	Complaint: Complaint shall be defined as a written concern presented to the Division that outlines an allegation that an individual involved within the early intervention system is not in compliance with their Central Reimbursement Office (CRO) provider agreement including riders, State regulations or policy, and/or Federal regulations.  Parties to the complaint:  Complainant Person (s) who is the subject of the complaint and their supervisor.  Timelines: All investigations and a written report must be issued within
	60 calendar days of the receipt of the written complaint.
Complaint Investigation	<ul> <li>All written complaints submitted to the Division shall be reviewed on an individual basis. All investigations will be completed in adherence to the First Steps complaint procedures. Complaints that involve other state or federal agencies, including licensing boards will be forwarded to those agencies as appropriate for further investigation. Agencies may include:</li> <li>Licensing Boards or organizations and professional associations if the allegation involves inappropriate or questionable therapy practices,</li> <li>Third party funding sources, such as Medicaid, Children's Special Health Care Services, or Private Insurance Agencies if the allegation involves inappropriate billing practices or misuse of First Steps funds.</li> <li>Child Protective Services if the allegation involves the health and safety of a child</li> </ul>

a child.

County Prosecutors Office if the allegation involves inappropriate billing practices or misuse of First Steps funds or other violation of **State law**.

## Complaint Procedure

# Step 1: The Part C Coordinator and the Complaint Coordinator will review the complaint.

- Determination will be made outlining if the concern alleges violation in Federal Regulation, State Rule, or the Provider Agreement.
- The Complaint Coordinator will log in the complaint and establish an investigation file.
- If it is determined that the complaint involves a health and/or safety concern, the provider who is the subject of the complaint will be required to cease early intervention services immediately and throughout the time of the investigation. In these situations, the complaint investigation will be given priority.
- The complaint will be reviewed regarding the necessity to forward the concern to the applicable licensing agencies or agencies in which funding are utilized, for a parallel investigation.
- If it is determined that the complaint alleges misuse of funds, it is the purview of the Part C Coordinator and the Complaint Coordinator to withhold outstanding claims until the investigation is complete.

### **Step 2: Assignment of a Complaint investigator**

The Complaint Coordinator will assign a Complaint Investigator.
 The Investigator will be an employee or contractor of the Division who is knowledgeable in State and Federal regulations involving early intervention.

## Step 3: Investigation is conducted

- Investigation procedures will comply with the Division complaint guidelines including Federal regulations 34 CFR 303.
- Parties\* to the complaint will be notified in writing via certified mail with a return receipt requested, of the complaint and alleged violations.
- Complaint Investigator will contact persons involved in the complaint to discuss the concerns and alleged violation. Persons contacted will include the parties to the complaint and other individuals who may be able to provide additional information to the Investigator.
- Complaint Investigator will request written documentation and/or conduct a file review to determine the accuracy of the complaint.
- During the investigation, any additional violations in Federal Regulation, State Rule or the Provider Agreement that are discovered may be investigated.
- The Complaint Investigator will verbally review the complaint, investigation and findings with the parties to the complaint.
- Investigation summary and complaint findings will be distributed via certified mail with a return receipt requested to the parties of the complaint.

### **Step 4: Documentation procedures**

- Documentation of the complaint, investigation summary and findings will be filed within the Division's complaint file and the provider's file at the provider enrollment agency.
- Copies of the complaint and investigation summary and findings will be forwarded to the Division Director, Part C Coordinator,

Division's Legal Counsel, and the Complaint Coordinator.

- Copies of the complaint, investigation summary and findings may be forwarded to pertinent collaborative agencies.
- A de-identified copy of the complaint, investigation summary and findings, will be forwarded to the Local Planning and Coordinating Council for the area of the State that the investigation arose, the Governor's Interagency Coordinating Council, and kept on file with the Division.

## Results of Investigation

Once the investigation is complete and the complaint substantiated, the following will occur:

- The Complaint Coordinator, in collaboration with the Complaint Investigator and the Part C Coordinator, will develop the required corrective action plan. Corrective action plans will include:
  - the requirement that the provider identify action steps to eliminate the concerns in the future,
  - technical assistance requirements, and
  - timelines in which the provider must comply
  - terms and conditions of probation to last for a period of 30 – 60 days.
- Substantiated complaints will remain on file in the Division as well as in the personnel file at the Provider Enrollment Office.
- Depending on the severity of the complaint, the Division does hold the authority to disenroll the provider immediately following the investigation.
- If the substantiated complaint involves the misuse of First Steps funds or inappropriate billing practices, the Division shall request re-payment of funds or withhold future payments.

### **Probation**

## **During Probation:**

- If the provider allegedly repeats the concern in which they were found in violation in the original complaint, the Division will consider disenrollment of the provider from the First Steps system.
- If an additional complaint is received on a provider that is currently on probation, the Division will initiate a new investigation and may prohibit that provider from taking new referrals or providing First Steps services during the investigation.
- If the provider is found in violation of an additional complaint during the probationary period, the Division will consider disenrollment from the First Steps system.

## **Ending Probation:**

 Probation status will be removed once the Division reviews the concerns raised in the complaint and is assured that the corrective action has been implemented and that the issues identified in the complaint have not reoccurred. The Part C Director will document this in writing.

#### **Post Probation**

- If a complaint is filed against a provider with previous substantiated complaints, the complaint investigator will review previous complaints.
- If a provider is found in violation of multiple complaints during their enrollment as a First Steps provider, the Division may seek disenrollment of the provider.