



Filing a Complaint Against a Health Care Entity

May 5, 2011

*The Division encourages complainants to try to resolve concerns **first** through the health care entity's grievance process because very often this is the quickest way to address the problem.*

For assisted living residences (ALRs) and nursing homes, complainants may also wish to contact the facility's Long Term Care ombudsman.

If concerns cannot be addressed satisfactorily through these more informal processes, the consumer can file a formal complaint with the Division.

What types of complaints does the Division investigate?

Complaints are investigated for all health care entities regulated by the Division regarding issues that fall under its jurisdiction. This includes the quality of care provided, patient/resident rights, as well as building and equipment safety. Although the Division can help you obtain an itemized bill from acute and primary health care entities -- namely birth centers, community clinics, convalescent centers, dialysis treatment clinics, hospitals, and hospital units -- it does not investigate complaints regarding incorrect billing.

Who can file a complaint?

Anyone with knowledge or concerns about a health care entity can file a complaint, including family members, concerned citizens and health care professionals.

How is a complaint filed?

Complaints can be filed by:

- phone
- e-mail
- fax
- mail



Phone in complaint as follows:

Health Care Entity Type	Phone Number	Toll Free (in state only)
Assisted living residences (ALRs)	303-692-2800 and ask for the "ALR surveyor on phone duty"	1-800-886-7689, ext 2800 and ask for the "ALR surveyor on phone duty"
Home care agencies (HCAs)	303-692-2910	1-800-842-8826
Hospitals	303-692-2827	1-800-886-7689, ext 2827
Nursing homes	303-692-2442	1-800-886-7689, ext 2442
All health care entities other than ALRs, HCAs, hospitals and nursing homes	303-692-2904	1-800-886-7689, ext 2904

Provide the following information when lodging a complaint:

- ☞ *who was involved*
- ☞ *what happened*
- ☞ *when it happened*
- ☞ *how it happened*
- ☞ *where it happened*

Complaints may be filed anonymously. Note that as a matter of general procedure, complaint investigators do not share the complainant's name with the health care entity unless otherwise instructed by the complainant. However, in some cases the health care entity may be able to figure out the complainant's identity because of the nature of the complaint itself.

When filing anonymously, be sure to provide sufficient information to enable the Division to effectively investigate the complaint, since we cannot contact you for further information.

✉ E-mail complaints to: hfdintake@cdphe.state.co.us.
In the “Subject:” section, enter: *[Relevant health care entity type]*
Complaint Intake.

☎ Fax complaints to: 303-753-6214.
In the “To:” section, enter: *[Relevant health care entity type]*
Complaint Intake.

✉ Mail complaints to:

CDPHE, HFEMSD-A2
Attention: *[Relevant health care entity type]* Complaint Intake
4300 Cherry Creek Drive South
Denver, CO 80246-1530

How does the Division investigate a complaint?

Complaints are reviewed and prioritized based on actual or potential patient/resident harm. Depending on the nature of the complaint, the investigation is conducted either on-site at the health care entity or off-site. Onsite investigations usually involve interviewing a sample of patient/residents, family members and staff and reviewing the health care entity’s records. Offsite investigations typically involve a review of the health care entity’s records and often includes interviews with staff.

How does the Division contact the complainant about the results of an investigation?

Unless the complaint was filed anonymously, the complaint investigator will notify the complainant by phone of the investigation outcome, and will write a summary of the investigation. The complainant will receive in writing a summary of the investigation results. These summaries are subsequently posted on the Division’s web site.

What happens to the health care entity after the investigation?

After conducting an investigation, the investigator may or may not be able to substantiate the complaint allegations based on the evidence gathered. (Please note that the inability to substantiate an allegation does not reflect whether or not the reported incident occurred; rather, it means that there was insufficient supporting evidence to verify its occurrence.) If the findings indicate that the health care entity is not in compliance with statute or regulations, the Division cites deficient practice and the health care entity must correct the violation.