

Incident Resolution Process

For Language Access Providers

January 2023

INTRODUCTION

Interpreter Services Program

The State of Washington Health Care Authority (HCA) established the Incident Resolution Process (IRP) in 2014 to ensure high quality interpreter services for Washington residents needing language access services when seeking services through Washington State agencies, and to assure effective management and stewardship of state and federal resources. HCA requires the HCA contracted coordinating entity(s) to manage feedback based on the quality assurance standards established in this IRP document. The IRP is administered by the coordinating entity contracted to all schedule HCA, DCYF, and DSHS jobs requiring interpreting services.

Consistent with the Collective Bargaining Agreement (CBA MOU-1)) between Washington Federation of State Employees (WFSE) for Language Access Providers (LAP) and the HCA; the HCA welcomes the Union's feedback *to improve the process of comments about services provided by language access providers. This input includes, but is not limited to, how LAPs and the Union are notified of feedback made to the coordinating entity(s) regarding services provided by LAPs.* The IRP is not subject to the CBA grievance process.

Feedback process for HCA's contracted Coordinating Entity(s)

HCA's contracted Coordinating Entity is Universal Language Service (UniversalLanguage). Complaints as well as compliments can be submitted via UniversalLanguage's scheduling platform, phone, fax, mail, email, or the HCA Universal website. All feedback will be handled by UniversalLanguage's WeCare Program, which is dedicated to soliciting and receiving feedback from authorized requesters and LAPs to improve the quality of HCA's Interpreter Services Program. LAPs will be notified immediately of any feedback that is received about them. Additionally, all feedback is tracked through UniversalLanguage's online platform and is accessible to each LAP and authorized requester.

Who can give feedback: LAPs and authorized requesters.

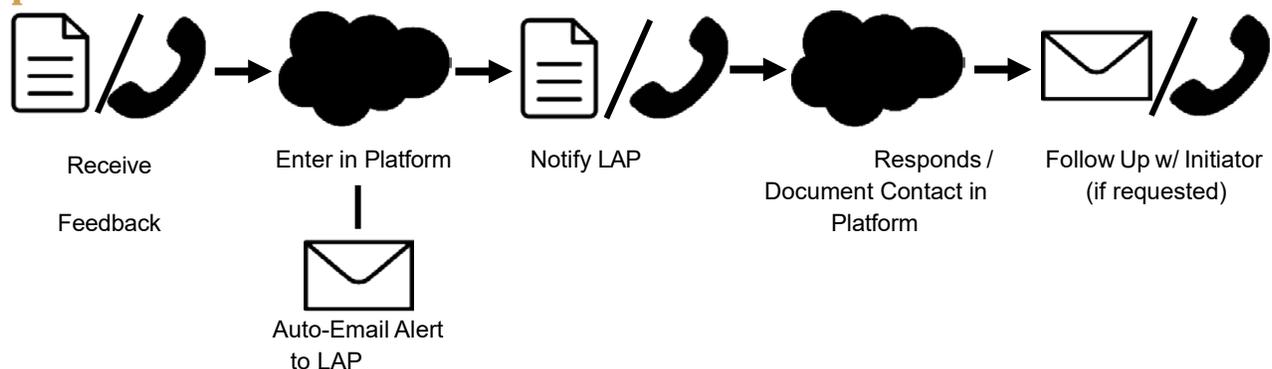
What can they give feedback on: Providers and LAPs services.

How can they submit feedback: * Phone, fax, mail, Email, HCA Universal Website, and scheduling platform.

What are some potential outcomes: Warnings on record, partial or full suspension, or termination.

*Not all methods of feedback submission are available to all users

Interpreter Feedback Process Flows



Methods for Submitting Feedback

Scheduling Platform: Authorized requesters may submit feedback via the scheduling platform (this is the preferred method for feedback relating to a specific job)

Website: Authorized requesters and LAPs may submit feedback via the [HCA Universal website](#)

Email: Authorized requesters and LAPs may submit feedback via email to WeCare@ulsonline.net

Fax: Authorized requesters and LAPs may submit feedback via fax at: (877) 516-4347 or (425) 454-3635

Mail: Authorized requesters and LAPs may submit feedback via mail at 929 108th Ave NE, Suite 710, Bellevue WA 98004.

Phone: Authorized requesters and LAPs may be transferred via phone to WeCare to provide feedback at (888) 462-0500 or call directly at (425) 691-5444

Incident Resolution

Definitions

Breach: Is generally an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of the protected health information of an individual. Use or disclosure of protected health information is presumed to be a breach unless the covered entity or business associate, as applicable, demonstrates that there is a low probability that the PHI has been compromised. HCA's privacy officer reviews every potential HIPAA or PHI violation to determine if a breach occurred.

Business Days: Monday through Friday, 8:00am to 5:00pm excluding Washington State recognized holidays. All days referenced in this document are to be construed as business days **unless otherwise noted**.

Extenuating Circumstances: Death in the family; serious illness of family or self; incapacitation of self; fire or other form of destruction to immediate household family of self; an unanticipated event or difficulty beyond the LAPs control, including reported inclement weather conditions restricting travel or causing a power outage at LAPs HIPAA compliant environment. LAPs that overuse the extenuating circumstances may be required to provide proof of situations.

Feedback Notification: LAP's will immediately receive a system-generated email of each incident (complaint or compliment) entered on their profile on the interpreter platform.

Formal Written Notice: LAP's who accumulate four (4) Low Severity Incidents or one (1) Medium Severity Incident will receive a Formal Written Notice via email in the form of an Incident Report outlining the details of each violation. This document will also be forwarded on to the HCA Interpreter Services Program Manager.

Full HCA Job Restriction: Action taken because of LAP's multiple violations or due to the severity of incident(s). LAPs platform will not show any HCA jobs, nor allow the LAP to accept any HCA jobs. In addition, all HCA jobs with dates of service during the restriction period will be removed from the LAP's schedule.

Health and Safety Violation: The violation of an individual's rights to a safe and healthy environment, and the potential security breach of PHI.

Health Insurance Portability and Accountability Act or HIPAA: An act to improve portability and continuity of health insurance coverage in the group and individual markets, to combat waste, fraud, and abuse in health insurance and health care delivery, to promote the use of medical savings accounts, to improve access to long term care services and coverage, to simplify the administration of health insurance, and for other purposes.



HIPAA compliant environment: Is a secure and quiet location where only the LAP can see or hear the Provider and Client. It must be free from disruption from other people, children, pets, noises, and not be in a public setting, such as but not limited to:

- Outside the home,
- While driving,
- At a playground, outdoor area, including any public areas; and
- At home while loud disruptions can be heard by the Client and Authorized Requester.

Incident: The resulted outcome, pending investigation, of each complaint received regarding a LAP's action that violates the WAC 388-03-050. Depending on the severity of the complaint, the LAP may receive a low, medium, or high incident.

Feedback: A compliment or a complaint reported by the provider.

Interpreter Incident Report: A report of the detailed incident or action that resulted in a violation of the code of conduct outline in WAC 388-03-050 or outlined in the LAPs Business Associate Agreement(s) (BAA).

Invalid Reason: Such as, but not limited to public road closure notices where two (2) or more days advance notice was given; forgotten appointment; cancelled the wrong appointment; overbooked schedule or combination of in-person and remote appointments; vacation; previous appointment ran long, home technology does not meet remote interpreting requirements.

Partial HCA Job Restriction: Action taken because of a LAP's multiple violations or due to severity of the incident(s). LAP's platform will not show any HCA jobs, nor allow the LAP to accept any new HCA jobs. HCA jobs that have already been accepted will remain on the LAP's schedule.

Personal Health Information or PHI: The HIPAA privacy rule provides federal protections for personal health information held by covered entities and gives patients an array of rights with respect to that information. At the same time, the privacy rule is balanced so that it permits the disclosure of personal health information needed for patient care and other important purposes.

Restriction Period: The period during which a LAP's access to HCA jobs is fully or partially limited in some capacity because of a corrective action. Restriction periods may range from 7 to 90 calendar days.

Severity Level: The level of an incident as outline in this IRP of code of conduct and ethical violations.

Suspensions: LAP's portal may be inactive to accept jobs during an investigation or during a temporary suspension due to an incident or reoccurring incidents.

Termination of Sub-Contract: An LAP may be terminated from servicing HCA/DSHS/DCYF jobs through an HCA contracted coordinating entity(s), following an investigation, and finding of an incident(s) at any severity level, HIPAA, or PHI violations. All terminations are reviewed and approved by HCA prior to the effective date. Once terminated, an LAP may not subcontract for any HCA contracted coordinating entity.

Valid Reason: Such as, but not limited to unexpected travel emergencies (i.e., short-notice road closures, traffic accidents, flat tires), illness or medical emergency of self or family; reports obstacles to practice per the WAC 388-03-50, inaccurate or incomplete information given by the requester; or other extenuating circumstances (see definition).



Incident Severity Levels

Low Severity: Classifies any violation against the WAC 388-03-50 that has minimal impact on the appointment, provider, and/or client.

Examples (including but not limited to):

- Provider reported a LAP's late arrival
- LAP gives back job less than 24 hours before the scheduled start time (without a valid reason)
- LAP left job earlier than the scheduled end time without provider approval
- LAP did not interpret accurately, expressing the source language message in a thorough and faithful manner
- Not available for the start time of an OPI or VRI scheduled job
- Provider reports a job could not be completed due to technical reasons, i.e., choppy audio or video on the LAP's end

Medium Severity: Classifies any violation against the WAC 388-03-50 that has a moderate impact on the appointment, provider, and/or LEP person.

Examples (including but not limited to):

- LAP is a no-show (without a valid reason)
- LAP solicits their services to the LEP person, their family members or provider
- LAP expresses personal opinions; offers unwanted conversation
- Services an acquaintance, family member, or friend without disclosing the potential conflict of interest
- LAP requests the provider to enter incorrect start and/or end times
- LAP engages in unsupervised discussions with the provider and/or LEP person
- LAP contacts the provider or the LEP person directly, outside the appointment
- Harassment or unprofessional behavior to State agency employees or employees of the coordinating entity
- During an interpretation session, LAP uses a mobile device for any reason unrelated to current services
- During a job, LAP accesses the portal to accept, reject, dispute, review jobs or conduct other activities.
- LAP is not located in a secure HIPAA compliant space during an OPI or VRI job.

High Severity: Classifies any violation against the WAC 388-03-50 that has a significant or critical impact on the appointment, provider, and/or LEP person; including those violations that put the health and safety of any of the parties involved at risk.

Examples (including but not limited to):

- Transporting a Medicaid LEP person to or from appointments
- LAP requests money or favors from the LEP person or provider
- LAP passes their appointments to other LAPs without coordinating entities knowledge and approval
- LAP falsifies a job invoice
- Behavior that displays discrimination or threatens another individual and violates the Civil Rights Act
- Harassment to provider, facility staff or the LEP person in a manner that creates a barrier to care and services
- Any violation to HIPAA, or to the health and safety of the LEP person, provider, or facility staff¹
- Violations of LAPs sending unsecure Medicaid client information via email will have a 10 day portal restriction, if two violations occur within 1 year, the LAP will have a 90-day full suspension and will be required to provide proof of completion of an approved HIPAA training (at their cost) to be reinstated with contractor. If an additional occurrence happens within the next calendar year, LAP may be subject to immediate termination.²

Tracking Incidents

Low incidents are tracked on a rolling 12-month time. This means that incidents are removed from the LAP's record once that incident is 366 days old. These incidents do not disappear, they stay in the coordinating entities system for tracking purposes. Incidents that have reached the 366-day mark will not be used to apply any actions listed in the following chart. However, they may be reviewed, and action may be taken in the event a pattern of unethical behavior, or some other concern is identified.

Medium incidents are tracked on a rolling 12-month period. This means that incidents are removed from the LAP's record once that incident is 366 days old. These incidents do not disappear, and they are maintained in the coordinating entities system.

¹ HIPAA and Health, Safety, and Ethics violations will have an immediate 10-day full HCA job restriction or longer, pending outcome of incident.

² A third HIPAA email violation will result in immediate termination.



Incidents that have reached the 366-day mark will not be used to apply any actions listed in the following chart. However, they may be reviewed, and action may be taken in the event a pattern of unethical behavior, or some other concern is identified.

High incidents are tracked for the lifetime of the LAP's sub-contract. There is no rolling timeⁱ, and high severity incidents never fall off the LAP's record. These incidents are subject to immediate action, up to and including termination of the LAP's contract. All terminations resulting from a high severity incident are reported to DSHS LTC per WAC 388-03-160. This report will include all information from the provider, coordinating entity(s), state agency and the interview with the LAP.

HIPAA and PHI incidents are tracked for the lifetime of the LAP's contract. There is no rolling timeⁱⁱ, and high severity incidents never fall off the LAP's record. These incidents are subject to immediate action, up to and including termination of the LAP's contract. The HCA will determine the outcome of each incident because of the severity level of the HIPAA and PHI. All terminations resulting from a high severity incident are reported to DSHS LTC per WAC 388-03-160. This report will include all information from the provider, coordinating entity(s), state agency and the interview with the LAP.

Termination of LAPs subcontract

Per the code of conduct LAPs are to be professional service sub-contractors for HCA, DSHS, and DCYF clients and authorized requesters. Per the incident resolution policy, if an LAP fails to meet the requirements and incurs multiple incidents, an LAP may have their subcontract terminated and will not be eligible to provide interpreter services to HCA, DSHS, or DCYF clients. Once terminated an LAP may not subcontract with any HCA contracted coordinating entity(s).

Prior to coordinating entity(s) termination of the LAPs subcontract, HCA will review all documentation from coordinating entity and the LAP to ensure that all processes were followed. Exceptions to this process are HIPAA and PHI related breach or violations. Termination for these violations will be determined based on the outcome of the HCA investigation.

Revocation Referral

When an LAP has violated any provisions of WAC 388.03.170 or has been terminated from the coordinating entities subcontract, HCA is required to provide all documentation to DSHS LTC for review. DSHS LTC will conduct a review of the circumstances and decide whether the LAP should be allowed to retain his or her credential(s), or whether the credential(s) should be revoked. DSHS LTC is the entity responsible for this decision per WAC 388.03.170. HCA and the coordinating entity does not make the determination of revocation.

Steps in the Resolution Process

1. Feedback is submitted to coordinating entity(s) by authorized requesters, LAPs, or via the call center staff.
2. Once recorded, either by email, portal, or phone call, LAPs are notified via email that they received feedback and details of the feedback are included in the notification.
3. LAPs have **ten (10) business days** to respond to coordinating entity in writing to dispute or explain the situation, except for HIPAA, PHI, or safety and health concerns where LAPs may be subject to immediate suspension pending the outcome of the investigation.
4. Once coordinating entity receives the LAP's response, any necessary follow up must be completed within **twenty (20) business days**. To verify the validity of the LAP's response, WeCare may need to reach out to the authorized requester or some other entity. LAPs must never contact the provider/facility staff or the LEP person regarding the incident.
5. Coordinating entity will notify the LAP of the investigation's outcome and take any corrective action if warranted and according to the incident scale table.
6. LAPs are notified three (3) business days prior to any portal restriction effective date. Exception is the High Incidents that warrant immediate suspension, and the LAP will be notified immediately.
7. Suspensions that result from potential client safety and health concerns, may be effective on the date of notification from provider, client or contractor and remain in effect during the investigation period.



8. If feedback takes more than **sixty (60) days** to resolve with the provider, the facility, or the incident is unable to be validated with the provider, the incident may be removed from the LAP's profile. ⁱⁱⁱ

Incident Scale Tables

Please note that ALL feedback reports from providers or other entities, regardless of severity, will result in a system-generated email notification immediately going to the LAP notifying them of the feedback. The sum of incidents from all HCA contracted coordinating entities is used to determine the number of incidents and corresponding action to be taken, as described in the tables below. Termination of contract will only happen with direct authorization of the HCA Interpreter Services Program Manager.

# OF INCIDENTS	ACTION TAKEN	DURATION
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LOW SEVERITY (Within a Rolling 365-Day Period)		
1 Low Severity Incident	Automatic Email Alert	N/A
4 Low Severity Incidents	Formal Written Notice	N/A
5 Low Severity Incidents	Partial HCA Job Restriction	10 days (min)
6 Low Severity Incidents	Partial HCA Job Restriction	20 days (min)
7 Low Severity Incidents	Full HCA Job Restriction	7 days
8 Low Severity Incidents	Full HCA Job Restriction	14 days (w/final warning)
9 Low Severity Incidents	Termination of Contract	N/A

MEDIUM SEVERITY (Within a Rolling 365-Day Period)		
1 Medium Severity Incident	Formal Written Notice	N/A
2 Medium Severity Incidents	Partial HCA Job Restriction	10 days (min)
3 Medium Severity Incidents	Partial HCA Job Restriction	20 days (min)
4 Medium Severity Incidents	Full HCA Job Restriction	7 days
5 Medium Severity Incidents	Full HCA Job Restriction	14 days (w/final warning)
6 Medium Severity Incidents	Termination of Contract	N/A

HIGH SEVERITY (Within the lifespan of the contract)		
1 High Severity Incident	Partial/Full HCA Job Restriction	10 days (min) (w/final warning)
2 PHI email incidents	Temporary Suspension	90 days ³
2 High Severity Incidents	Termination of Contract	N/A

HIPAA, Breach or Safety Concerns ^{iv}		
1 Incident	Partial/Full HCA Job Restriction	10 days (min) (w/final warning)
1 or 2 Incidents	Termination of Contract	N/A

³ LAP is required to take HIPAA training at their expense and reapply after 90 days.



Signature below indicates that LAP has read and fully understands the HCA Incident Resolution Process outlined in this document and agrees to abide by policies therein.

LAP Name (Print)

LAP ID #

LAP Signature

Date

ⁱ Sharing of PHI via unsecure email may be exempt from this process.

ⁱⁱ Sharing of PHI via unsecure email may be exempt from this process.

ⁱⁱⁱ This does not apply to Safety and Health violations as the investigation could take longer than 60 days to resolve.

^{iv} Severe HIPAA or PHI incidents may result in an undetermined suspension pending the outcome of the investigation and/or termination

