



Tips For Addressing Hotline Vendor Issues

Richard P. Kusserow | August 2024

Most healthcare entities engage a vendor to handle confidential reporting of compliance issues. This is really the only rational way to have an effective hotline program; however, [hotline](#) vendors often are the subject of complaints related to the quality of service they provide. The following experts offer the benefit of their experience relating to this issue area.

Steve Forman, CPA, is a nationally recognized compliance consultant who served as the Compliance Officer for one of the largest hospital systems in the country. He dealt with many vendor issues over the years, including receiving a hotline report intended for another organization. His concern was that if he was receiving someone else's reports, others may have been receiving the reports for his hospital system. When this occurred, he ran into a bureaucratic struggle to get through to someone who could properly address the issue. His advice is to contract only with a vendor that can provide personalized service, preferably with an account manager with whom all issues can be discussed and resolved.

Al Bassett, JD, is a nationally recognized compliance expert with over 30 years' experience. He suggests choosing a vendor who understands problems and issues related to the health care sector. In the past, he has had to deal with reports of poor quality that made it clear that the individual who took the hotline call did not understand the significance of the issues being raised or how to properly debrief the caller to obtain all the necessary information. The results were "half-baked" reports from anonymous sources that did not have adequate details to permit a proper investigation.

Lisa Shuman, MPA, is highly experienced as a compliance officer, HIPAA expert, and consultant. She has encountered several instances of insecure report delivery. One vendor, with whom she had experience, provided call reports via email and/or fax. Both these avenues have weak security; the wrong person can pick up or see a fax, or information can go astray in an organization email system. This can be a serious issue when reports include the identity of "whistleblowers" and other employees, patient PHI, or proprietary and sensitive organization information. She recommends using only vendors that deliver web-based reports through secure means and avoiding any vendors that provide reports via fax or email.



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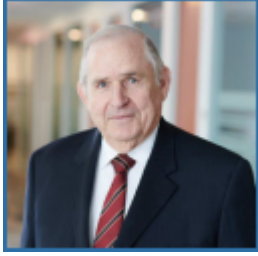
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Tom Herrmann, JD, has decades of compliance experience going back to his days in the Department of Health and Human Services Office of the Inspector General. He cautions against using a “call center” vendor. Call centers primarily handle outbound calls for clients to solicit business or to alert them of customers calling after normal work hours. Many such services believe that adding a hotline service helps cover the costs of operations. For the hotline customers, it is a very bad deal. Hotline callers are competing with individuals complaining about flooding in their basements or needing to speak with their doctors. The staff is trained to take the caller’s name and phone number, then call the client to report the call. Staff for such services are generally clerical and cannot be expected to know how to debrief a hotline caller in detail. Tom’s advice is to never contract with a call center for hotline services.

Jillian Concepcion, MPA, is a highly experienced health care compliance consultant who has found that smaller organizations that don’t receive a lot of calls frequently need personalized assistance when one is received. Unfortunately, most vendors focus attention on larger clients who pay more for their service and give little attention to smaller clients. She advises smaller organizations to use a vendor that has expertise in the health care sector and is willing to give them the attention and support they need.

Laurel Eakes, a hotline expert and compliance professional, notes that many Compliance Officers with whom she speaks become dissatisfied with their hotline vendor because of high cost, poor service, and contract “lock-ins.” Many vendors charge by the number and length of calls, which makes it difficult to budget for the service. Some vendors maintain their client by locking them in for a specific term, which is usually a year with automatic contract renewal, unless the organization followed a process in a narrow time frame and couldn’t get locked in. She offers the following advice: (a) know the cost with a “fixed rate” contract; (b) only subscribe to a service that provides clients with good service and permits cancellation at any time without cause; (c) if under contract with a vendor, determine how and under what circumstances it can be terminated; and (d) if contracts are locked in for a period of time, ask to be relieved of that stipulation.

Interested in learning more about hotlines? Contact Shelby Cole at scole@complianceresource.



About the Author

Richard P. Kusserow established Strategic Management Services, LLC, after retiring from being the DHHS Inspector General, and has assisted over 2,000 health care organizations and entities in developing, implementing and assessing compliance programs.