

## FACILITATED RESOLUTION FACT SHEET FOR HEALTHCARE PROVIDERS

### ***Defining Facilitated Resolution***

“Facilitated Resolution” is a form of conflict resolution in which the beneficiary communicates his or her concerns and interests to a physician or provider *through a facilitator* who speaks with each party in separate telephone conversations. (Medical record review and mediation are two other ways to resolve complaints.)

### ***Introduction of Facilitated Resolution to Medicare***

Based on favorable results from a pilot study, the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services, decided to introduce Facilitated Resolution to the Medicare program nationwide in September 2006. Complaints that do not exhibit significant clinical quality of care concerns will be considered for Facilitated Resolution.

### ***Advantages of Facilitated Resolution***

Facilitated Resolution may help reduce the risk of malpractice claims. Mediation gives you and your patient the opportunity to discuss what happened and why. Both physicians and patients who participated in Facilitated Resolution in the pilot reported satisfaction with the process and outcome as well as achieving a sense of closure. Participation will not cost you anything other than time.

### ***Logistics***

Facilitated Resolution is conducted by a third party “facilitator” who speaks *separately, on the telephone*, with both you and the beneficiary or the beneficiary’s representative. After hearing the concerns and what might have prevented the beneficiary from filing the complaint, you will develop, with the assistance of the facilitator, a resolution to the concerns. The process is confidential; no other records are kept, and what you say in the response cannot be used against either party in any future proceeding.

### ***Getting to the Heart of the Matter***

Approximately 80 percent of the Medicare beneficiary complaints are related to misunderstandings, lack of communication, or the patient’s perception of treatment. These types of cases have the potential of escalating into a malpractice suit. Many times, simply knowing that you are interested in his/her point of view assuages a complainant’s concerns. Spending time now, listening and responding to the issues, may reduce the amount of time, frustration, and money spent on other more costly avenues of complaint.

### ***Understanding the Role of the Facilitator***

The facilitator talks to the beneficiary to find out what occurred or the perceptions of what occurred, and asks what might have been done at the time to prevent the complaint. The facilitator calls you to describe the beneficiary’s concerns and what he/she has said might have prevented the complaint. The mediator does not give advice or make any decisions about the outcome.

### ***Possible Outcome***

You consider, as appropriate, what might be done in the future to prevent a similar situation from happening to someone else. The result of the review of the beneficiary’s issues may be a written resolution, or *Quality Initiative Agreement*, in which brief statements are made about what can be done in the future to prevent similar occurrences. It is sent to the QIO and briefly summarized in a letter to the beneficiary.

### ***Empowering Yourself and Other Health Care Providers***

Facilitated Resolution provides an opportunity for communication, albeit indirect, between you and your patients. By participating in this program, you demonstrate your commitment to your patients and continue fostering their trust and respect. Resolution of the complaint resides with you and the patient rather than a third party.



Kansas Foundation for Medical Care, Inc. / 2749 SW Wanamaker Drive / Topeka, Kansas 66614  
Telephone: 785-273-2552 • Fax: 785-273-0237 • Website: [www.kfmc.org](http://www.kfmc.org)