



Complaint Writing Guidelines

IPRO must receive all complaints in writing. Once we receive your written complaint, we may need to call you for clarification or verification of some information. By following these guidelines, you should be able to provide us with enough information to get us started with the review.

1. **IPRO will always need to know:**

- Beneficiary (patient) Name
- Medicare Number
- Name of person making complaint
- Relationship to beneficiary (patient)
- Address of person making complaint
- Phone Number of person making complaint

2. **The body of the letter**

Group your letter by episode(s) of care. An episode would be a doctor's office visit, a hospital stay, a clinic visit etc. For each episode of care include the following:

- Name of provider (for example, hospital, doctor, clinic, etc.)
- Address
- Phone Number
- Where the care took place (for example, emergency room, outpatient surgery)
- Date(s) the care was provided
- Summary of the specific concerns with the care that was provided

3. **Sign and date your letter and mail to:**

IPRO
Central Review Department
1979 Marcus Ave. 1st Fl
Lake Success, NY 11042

A few things to keep in mind:

- IPRO must conduct its review based on documentation in the medical record. This resource often does not contain a record of conversations or telephone calls
- When we receive your complaint, you will receive an acknowledgement letter from us. At this time, permission will be requested from you to refer any concerns that are outside of IPRO's review authority to the appropriate agency.
- If you have further questions or require assistance, please call us at 1-800-331-7767 and ask for Elizabeth Hall at ext 394.