

CareMessage Robocall Mitigation Program Description & Plan

Overview of CareMessage

CareMessage is a patient engagement platform. We offer SMS text messaging and voice communication services to healthcare organizations, primarily Federally Qualified Health Centers, Free Clinics, and Tribal Health Organization. We work primarily in healthcare or with 501c3 non-profit organizations. Our customers use CareMessage for things like appointment reminders, preventive care screenings, and health coaching.

The CareMessage product is a web-based application that provides both a user interface and an API that allows staff at our customer organizations to schedule outbound communication to people they deem to be patients based on the phone number a patient provided to them either in-person or via a phone call. We consider the phone number the clinic is provided by a patient to be a consumer's phone number which becomes associated with a patient in the clinic or organization's CareMessage account.

As customers of CareMessage schedule outbound messages to patients, where the message to be delivered is considered to be a voice message, the CareMessage application will use either Twilio or Bandwidth as our Gateway provider. Thus, CareMessage considers itself to be a Voice Service Provider aiming to meet the various requirements of 47 CFR § 64.6305.

Robocall Mitigation Plan

“Know-your-upstream provider” procedures and customer identity verification

CareMessage signs a legal contract with every entity we consider to be a customer, and a signature is required from both CareMessage staff and the customer's signature authority. Verification of their identity occurs before their CareMessage account is ever created and ahead of them being allowed to begin any outbound messaging.

- **Customer identity verification** - At the time of signing and before a CareMessage account is set up for messaging, we verify the legal status of the business entity. To do so, we request the EIN (Employer Identification Number), Legal Name, website, and a point of contact for the entity. This allows us to make sure we are working with a business entity located in the United States who intends to use our services to deliver information to patients (healthcare covered entities as defined by HIPAA) or community members (non-profits as defined by the 501c3 status).
- **Non-profits** - If an organization is a 501c3 (non-profit) organization we review the IRS 990 filings.
- **Approved use cases** - Outlined in our contract is an expectation that the organization will only use our services for use cases specifically tied to improving the healthcare access of low-income populations.
- **Prior Express Consent** - All of our customers operate as healthcare organizations or 501c3's, where we assume the prior express consent exemptions apply when a patient provides their phone number to their organization for the purposes of receiving communication about their services.

Robocall Placement Software

The primary mode of communication between our customers and their patients is SMS, which accounts for about 90% of messaging. However, voice messaging occurs usually when the only mode of communication available for a patient is a landline OR when a customer deems there is a patient preference for a message to be delivered via voice instead of SMS.

- **Text-to-Speech software** - Our voice system operates using a text-to-speech software which takes the body of the message and reads it out for a consumer when they pick up the phone. The language the message is delivered in depends on the recipient's preferred language on file.
- **Voicemail recognition** - In the event that voice message delivery to a consumer is attempted, but the consumer does not pick up the phone, our system can sometimes detect an answering machine. In this scenario, the same text-to-speech content is delivered.
- **Welcome Message** - When a patient is first added to the a customer's CareMessage account, we send an introductory message as an extra layer beyond the assumption of prior express consent.
 - **Requirements of the Welcome Message:** In the introductory message we require inclusion of the Organization name, the intent for messaging, an option to opt-out, and an alternate option for the patient to get in touch with the organization.
 - **Opt-out options:** When a consumer receives the call they are given the option to opt-out by pressing a key.
- **Appointment Reminders** - Shortly after a Welcome Message, one of the most common use cases in the type of message a consumer would receive is an appointment reminder, where the patient receives a series of messages reminding them of an upcoming appointment as well as allowing them to confirm or decline their appointment or opt-out. Usually a consumer gets this type of message via voice if the clinic only has a landline or has decided that all reminders go out via voice.
 - **Call back process for voice messages** - For appointment reminders, a consumer can call back and hear the same messages we were attempting to deliver. Our voicemail recognition logic would kick in to leave a different version of the message.
 - **Opt-out option** - When a consumer receives the call or when they call back, they are given the option to opt-out by pressing a key.
- **Group Outreach** - In addition to appointment reminders, from time to time our customers will create group campaigns to deliver information to patients. These can vary from public health notices like reminders of populations that are recommended to get cancer screenings to the delivery of resources like letting patients know of a free food pantry.
 - **Call back process for voice messages** - A consumer can call back and hear the same messages we were attempting to deliver
 - **Opt-out options** - When a consumer receives the call or when they call back, they are given the option to opt-out by pressing a key.
- **Global opt-out handling and blocklisting** - When we receive a request from any consumer to opt-out, the request applies to any patient profile which shares that number through a process we call blocklisting. This immediately blocks any outbound communication to that consumer's phone number and applies to both SMS (text) and voice messages.
- **Global opt-in** - A consumer would only receive further communication if they opt back in by texting the word "START".

Traceback Processes

- **Storing of all voice logs, including to/from phone numbers** - Given the origin of our voice messages is limited to text-to-speech, we retain all logs of the body of a message used when generating a voice call. These logs also include the to/from phone numbers and date and time stamps.
 - **Internal logs on the originating customer** - In addition to the call logs, all these are associated with a single customer's account, allowing us to traceback which account it came from. These logs are accessible to our internal staff and have been previously used in audits.
 - **Ability to shut off "Messaging Services" effective immediately** - If a customer is found to be in violation of our messaging policies, our administrative account has the ability to immediately shut off all messaging services.
 - **Audit reviews and submissions via compliance@caremessage.org** - Our organization has a mailing list dedicated to receiving and reviewing complaints. Once a complaint is received, we follow all requests from the entity who has submitted the request and comply with any information we are asked to disclose.
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