



Incident Reporting

TRAINING FOR ALL MAGELLAN PROVIDERS

LAST UPDATED: 3/2/2022



Magellan
HEALTHCARE®

Objectives:

- Learn where to access reporting requirements
- Orient providers to the electronic incident reporting process
- Develop understanding of the purpose of Incident Reporting
- Review occurrences that are considered reportable incidents for the HealthChoices program



Reporting Incidents to Magellan



Adverse Incidents: Provider's Responsibility



Identify the incident as categorized under a reportable incident



Submit an Incident Report to Magellan as soon as possible, **but not outside of 24 hours** from the date/time of incident occurrence.



If the incident is qualified as a **Sentinel Event** for a managed level of care, please indicate so on the Incident Report and **alert Care Management** of the occurrence (for managed levels of care).

Adverse Incidents: Where to Access Reporting



Instructions for Magellan of PA Online Incident Reporting:

- Go to the www.magellanofpa.com
- Go to the “Provider’s Page”
- Scroll down to “Provider Resources”
- Select “Forms” from the left-hand sidebar
- [Adverse Incident Report \(Online Submission\)](#) will be the first option
- Helpful tip: **Bookmark** the Adverse Incident Report page to your **favorites** for ease of access moving forward.

Adverse Incidents: Where to Access Report Online

COVID-19 For the most recent information available in Pennsylvania including vaccine details, go to the PA Department of Health

Magellan HEALTHCARE

Home Provider Search Members Page Providers Page About Us English

Providers Page

Provider access to resources and information

Go to Providers Page →



COVID-19 For the most recent information available in Pennsylvania including vaccine details, go to the PA Department of Health

Magellan HEALTHCARE

Home Provider Search Members Page Providers Page

Provider Resources

ATEC Outcome Measure

Claims/ Check Eligibility/ View Authorizations

Clinical Practice Guidelines

Forms

Fraud, Waste and Abuse/Compliance

Getting Paid

Intensive Behavioral Health Services (IBHS)

Medical Necessity Criteria

Ordering/Referring/Prescribing (ORP)

Outcome Assessment Tools

Provider Directories

Provider Website

Quality Improvement

County Information

Community

Services & Programs

ATEC Outcome Measure

The Autism Treatment Evaluation Checklist (ATEC) was developed to evaluate the effectiveness of various treatments for children with autism and to help parents determine if their children benefit from a specific treatment. The brief tool covers the four domains where children with autism typically have the most challenge: speech, sociability, sensory/cognitive awareness, and health/physical behavior. The ATEC can be used for a total score or sub-scores in each domain to correspond with clinical diagnoses of severe, moderate, and mild autism. Individual items can be tracked for treatment goal progress.

By signing in to the Magellan Provider Website with your secure username and password, you can access member eligibility and submit Autism Treatment Evaluation Checklists (ATECs) and treatment plans.

The Adobe Reader is required to view PDF files.



Provider Resources →

Quality Improvement →

County Information →

Essential Information to Complete Reporting

- **Program specific MIS number.**
 - Magellan recommends that the **MIS number be provided to all staff** that are reporting incidents.
 - If the correct MIS number is not entered into the report, there is risk that the incidents will be aligned to other programs at the provider organization, creating inaccuracies in the data.
- **Member Medical Assistance Recipient Identification Number**
 - The member's Medical Assistance Recipient ID number is a 10-digit number assigned by the State.



Completing the Report

The graphic to the right and on the next page demonstrate the information that will be required to complete the incident reporting process.



If you have questions about the incident reporting process, please call Magellan and request to speak to a Quality Specialist or email to Dawn Haurin at DMPrenoHaurin@magellanhealth.com.

First, indicate whether this is a sentinel event.

Is this a Sentinel event? Enter Yes or No. Refer to the attachment for definitions if needed.

Enter the name of your provider organization.

Facility/Provider Name:

The Bridge

Enter your provider MIS number.

Provider MIS: (9 characters, all numbers, e.g. 123456789)

123456789

Enter your provider address, along with your name and contact information.

Provider Address:

1 Surf Way

City:

Bristol

State:

PA

Zip:

18222

Reporter Name/Position:

Mark Rook

Reporter Phone Number:

215-999-999

Email address for report follow up:

Bridge1@|



Completing the Report (Continued)



Enter the member's MA ID number.

Medicaid Identification (MA ID - ten characters, all numbers, e.g. 9999999999):

9999999999

Enter the member's county.

County of Member Eligibility:

Bucks

Enter member's name:

Member Name:

John Doe

Enter Member's Date of Birth.

Member Date of Birth: MM/DD/YYYY

01/02/1972

Enter a date of birth in the format MM/DD/YYYY. If a date is entered that does not conform to that format, the system will keep taking you back to that field before your incident report can be submitted

Enter level of care being provided and location, using the drop-down choices.

Provider Level of Care/Service:

6--PSYCH OUTPATIENT

Location of Incident:

Member's home

Enter the date the incident occurred.

Date of Incident: MM/DD/YYYY

11/1/2020

Enter the date of incident in the format MM/DD/YYYY. If a date is entered that does not conform to that format, the system will keep taking you back to that field before your incident report can be submitted.

Enter Time of Incident.

Time of Incident:

6:00 p.m.

Enter Primary Incident Type, using the drop-down options.

Primary Incident Type:

Abuse/Childline Report

Enter in detail a description of the incident.

Description of Event (1000 character maximum):

During session, it was reported that drugs and alcohol being used in the home in front of children.

Enter in detail what action was taken to ensure safety.

Action taken to ensure safety of all involved: (including debriefing efforts and steps to avoid similar future events) (1000 character maximum)

Provider called Childline Hotline and Childline report was filed.

Indicate whether a parent or guardian was notified:

Parent/Guardian notified?

- ☐ Yes
☐ No
☒ N/A

Indicate whether the member was seen by a psychiatrist:

Member seen by psychiatrist after incident.

- ☐ Yes
☒ No
☐ N/A

Indicate whether the member was seen by a physician or nurse:

Member seen by physician/nurse after incident?

- ☐ Yes
☒ No
☐ N/A



Magellan
HEALTHCARE®

[Home](#) / [Providers Page](#) / [Provider Resources](#) / [Forms](#) /

Adverse Incident Reporting Form

Your form has been successfully submitted. #65



A **confirmation number** will be provided for the provider record.

Magellan
HEALTHCARE®

Purpose of Reporting



Purpose of Incident Reporting

- Where is Adverse Incident Reporting shared or reviewed?
 - As a network provider, the organization may receive an overview of incidents in Provider Profiling Reports
 - In the Magellan's Annual Program Evaluation
 - Routine sharing with primary contractors, no less frequent than monthly
 - As needed for credentialing activities or other quality improvement oversight monitoring



Categories of Reportable Incidents

Extracted from PA DHS Bulletin, OMHSAS-15-01



Categories of Reportable Incidents

Incident Types (as defined by PA DHS Bulletin, OMHSAS-15-01)

- Deaths (of any nature, i.e., medical, suicide, homicide, natural)
- Suicide attempt
- Significant medication error
- Need for emergency services (occurring while in care)
- Abuse/Childline report
- Neglect
- Injury/illness (occurring while in care) requiring treatment beyond first aid
- Missing person- includes elopement from 24-hour treatment setting where member leaves grounds and staff lose eyesight
- Restraint/seclusion
- Provider Preventable Conditions
- Other (provider discretion)



Reportable Incident Categories: Deaths & Suicide Attempts



Deaths - All member deaths are reportable incidents, regardless of cause. This includes

- Medical
- Suicide
- Homicide
- Accidental
- Natural Cause

Suicide Attempt – The intentional and voluntary attempt to take one's own life. A suicide attempt is limited to the following:

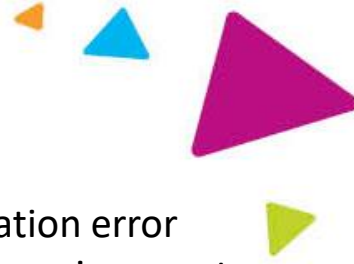
- Actual occurrence of an attempt that requires medical treatment, and/or where the member suffers or could have suffered significant injury or death.

Non-reportable events include:

- Threats of suicide that do not result in an actual attempt.
- Actions that may place the member at risk, but where the member is not attempting harm to himself/herself.



Reportable Incident Categories: Medication Error & Neglect



Significant Medication Error – A significant medication error includes a missed medication, incorrect medication or incorrect dosage, where a member suffers an adverse consequence that is either short- or long term in duration or receives treatment to offset the effects of the error.

Non-reportable events include:

- Refusal by the member to take prescribed medication.
- **Neglect** – Neglect is the failure to obtain or provide the needed services and supports defined as necessary or otherwise required by law, contract or regulation.
- This can include the failure to provide for needed care such as shelter, food, clothing, personal hygiene, medical care, and protection from health and safety hazards.

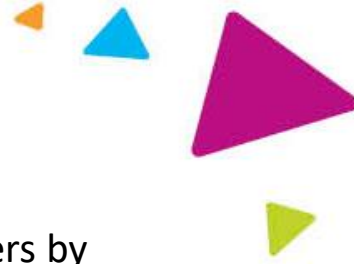
Reportable Incident Categories: Use of Emergency Services

Event Requiring Emergency Services (e.g., fire, police, any law enforcement agency or emergency management service)

- Reasons may include (but not be limited to):
 - Fires
 - An individual charged with a crime
 - An individual who is a victim of a crime
 - Acts of violence
 - Vandalism
 - Misappropriation of member property
- **Non-reportable** events include:
 - Non-emergency services of the fire department or law enforcement agency
 - Police presence related to commitment procedures or rescue squad activities
 - Testing of alarm systems/false alarms or 911 calls by members that are unrelated to criminal activity or emergencies
 - Presence of law enforcement personnel during any activity governed by the Mental Health Procedures Act.



Reportable Incident Categories: Abuse



Abuse – Allegations of abuse must be reported. Abuse is occurrence of the infliction of injury, unreasonable confinement, intimidation, punishment, mental anguish, or sexual abuse. Abuse includes abuse of members by staff or abuse of members by others. Depending on the nature of the abuse, it may also constitute a crime reportable to police.

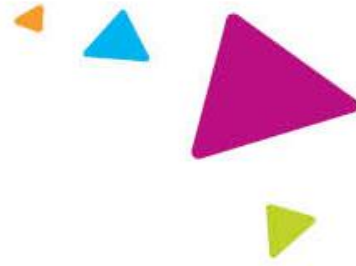
Abuse includes:

- **Physical Abuse** - An intentional physical act by staff or other person that causes or may cause physical injury to a member.
- **Psychological Abuse** - An act including verbalizations that may inflict emotional harm, invoke fear and/or humiliate, intimidate, degrade or demean a member.
- **Sexual Abuse** - An act or attempted act such as rape, sexual molestation, sexual harassment and inappropriate or unwanted touching of a sexual nature of a member by another person. Any sexual contact between a staff person and a member is abuse.
- **Exploitation** - The practice by a caregiver or other person of taking unfair advantage of a member, for the purpose of personal gain, including actions taken without the informed consent of the member, or with consent obtained through misrepresentation, coercion or threats of force. This could include inappropriate access to or use of a member's finances, property, and personal services.

Non-reportable events include:

- Discord, arguments or emotional distress resulting from normal activities and disagreements that can be found in typical congregate living situations.

Reportable Incident Categories: Injury/Illness



Injury includes those where the member requires medical treatment more intensive than first aid.

- First aid includes assessing a condition, cleaning a wound, applying topical medications, and applying simple bandages.

Illness includes any life-threatening illness, any involuntary emergency psychiatric admission that occurs as the result of a non-inpatient provider 302 petition, or any illness that appears on the Department of Health's (DOH) List of Reportable Diseases (pursuant to PA Code, Title 28, Chapter 27).

- This includes those appearing on the DOH list as the subject of voluntary reporting by the Centers for Disease Control (CDC). Reports are only needed when the disease is initially diagnosed. This list can be found at the following link:
<https://www.health.pa.gov/topics/Reporting-Registries/Pages/Reportable-Diseases.aspx>

Non-reportable events include:

- Scheduled treatment of medical conditions on an outpatient or inpatient basis.
- Any voluntary inpatient admission to a psychiatric facility, or service at a crisis facility or psychiatric department of acute care hospitals for the purpose of evaluation and/or treatment.
- Emergency room (ER) visits or inpatient admissions that result from a member's previously diagnosed chronic illness, where such episodes are part of the normal course of the illness.
- ER visits where the visit is necessitated because of the unavailability of the member's primary care physician.

Reportable Incident Categories: Missing Person

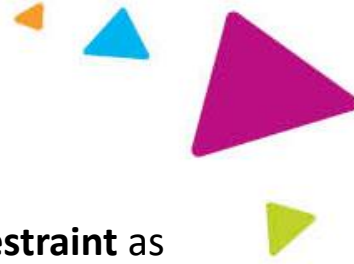


Missing Person – Providers are to report a member who is out of contact with staff, without prior arrangement for more than 24 hours.

- A person may be considered to be in “immediate jeopardy” based on his/her personal history and may be considered “missing” before 24 hours elapse.
 - Additionally, it is considered a reportable incident **whenever the police are contacted about a missing person**, or the police independently find and return the member, regardless of the amount of time he or she was missing.
 - **Any child who is off campus and out of staff eyesight for any length of time is considered in “immediate jeopardy”** and therefore meets criteria for an elopement.

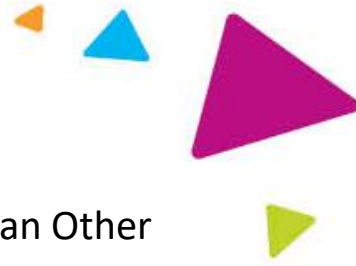


Reportable Incident Categories: Seclusion and Restraint



- Providers must report any use of **seclusion or restraint** as defined in Mental Health Bulletin, “[OMHSAS -02-01 The Use of Seclusion and Restraint in Mental Health Facilities and Programs](#),” published by the Commonwealth of Pennsylvania, Department of Public Welfare, Office of Mental Health and Substance Abuse Services.
- This includes all chemical, mechanical and manual restraints that may be used.
- Providers are encouraged to support quality improvement activities targeted to reduce the number of restraints that are used within their treatment practice(s).

Reportable Incident Categories: Provider Preventable Conditions



Provider-Preventable Conditions –a condition that meets the definition of a Health Care-Acquired Conditions (HCAC) or an Other Provider-Preventable Conditions.

Health Care Acquired Conditions (HCACs): A Hospital **Acquired Condition** (HAC) is a medical **condition** or complication that a patient develops during a hospital stay, which was not present at admission.

Other Provider-Preventable Conditions (OPPCs): ([42 CFR § 447.26\(b\)](#).) Means a condition occurring in any health care setting that meets the following criteria:

- Is identified in the State plan.
- Has been found by the State, based upon a review of medical literature by qualified professionals, to be reasonably preventable through the application of procedures supported by evidence-based guidelines
- Has a negative consequence for the beneficiary
- Is auditable
- Includes, at a minimum, wrong surgical or other invasive procedure performed on a patient; surgical or other invasive procedure performed on the wrong body part; surgical or other invasive procedure performed on the wrong patient.

Reportable Incident Categories: Sentinel Events



Sentinel Events include the following incident categories:

- Death
- Permanent harm sustained during treatment
- Severe temporary harm sustained during treatment
- Abduction
- Elopement from 24-hour treatment setting where member leaves grounds and staff lose eyesight for children; and adults on an involuntary commitment
- Sexual assault of member or staff at provider facility
- Flames or smoke exposure during treatment
- Any incident that involves contact with the media

Leading humanity to healthy, vibrant lives

MAKING A DIFFERENCE IN PEOPLE'S LIVES THROUGH:



Complex Population
Management



Person-Centered
Solutions



Boundary-Pushing
Innovations



Insightful
Employees



Confidentiality statement



By receipt of this presentation, each recipient agrees that the information contained herein will be kept confidential and that the information will not be photocopied, reproduced, or distributed to or disclosed to others at any time without the prior written consent of Magellan Health, Inc.

The information contained in this presentation is intended for educational purposes only and is not intended to define a standard of care or exclusive course of treatment, nor be a substitute for treatment.