



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

INFORMATIONAL LETTER NO. 850

November 1, 2009

TO: Iowa Medicaid Home and Community Based Service and Habilitation Providers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise

SUBJECT: Second Incident Reporting Notice for Habilitation and HCBS Waiver Providers

EFFECTIVE: **November 1, 2009**

This is the second notice from Iowa Medicaid to Iowa Medicaid Home and Community Based Service and Habilitation Providers regarding the new Critical Incident Reporting requirements that will become effective **November 1, 2009.**

POLICY

The new provider incident reporting standards found in the Iowa Administrative Code 441 Chapter 77 impacts providers who have personal contact with Medicaid members under the home-and-community-based habilitation services, ill and handicapped waiver, elderly waiver, AIDS/HIV waiver, intellectual disability (formally mental retardation) waiver, brain injury waiver, physical disability waiver, and children's mental health waiver. The Centers for Medicare and Medicaid Services (CMS) has approved amendments to Iowa's waivers that require a process for incident reporting.

The incident reporting standards apply only to providers who have personal contact with members. A listing of those services can also be found in **the Iowa Administrative Code 441 Chapter 77**. The standards define "major" and "minor" incidents, prescribe the content of the incident report form, and set procedures for reporting of major and minor incidents.

Providers must keep records of all minor incidents, but does not have to report minor incidents to the IME. When a minor incident occurs or a staff member becomes aware of a minor incident, the staff member involved shall submit the completed incident report to the staff member's supervisor within 72 hours of the incident.

DEFINITION OF A MAJOR INCIDENT

Major incident means an occurrence involving a member during a services provision that results in a physical injury to or by the member that requires a physician treatment or admission to a hospital. These may include the following events:

1. *Incident resulting in the death of any person,*
2. *Requires emergency mental health treatment for the member,*
3. *Requires the intervention of law enforcement,*
4. *Requires a report of child abuse pursuant to Iowa Code,*
5. *Requires a report of dependent adult abuse pursuant to Iowa Code,*
6. *Constitute a prescription medication error or a pattern of medication errors that lead to any outcomes stated above.*
7. *Involves a member's location being unknown by provider staff who are assigned protective oversight.*

REPORTING

When a major incident or a staff member becomes aware of a major incident the staff member involved will notify the staff member's supervisor, the member's case manager, and the member's legal guardian by the end of the next calendar day after the incident. The staff may accomplish this by direct data entry into the Iowa Medicaid Provider Access System, or by faxing or mailing the **Critical Incident Report Form 470-4698** to:

Iowa Medicaid Critical Incident Report

Provider Correspondence

P.O. Box 36450

Des Moines, Iowa 50315

FAX #: 515-725-1360

Submission of the initial report will generate a workflow in the Individualized Services Information System (ISIS) for follow-up by the case manager. When complete information about the incident is not available at the time of the initial report, the provider must submit follow-up reports until the case manager is satisfied with the incident resolution and follow-up. The provider shall track incident data and analyze trends to assess the health and safety of members served and determines if changes need to be made to for service implementation or if staff training is needed to reduced the number of incidents.

TRAINING AND ACCESS TO THE IOWA MEDICAID PROVIDER ACCESS PORTAL

Online Electronic Access Tools and Resources:

Please sign up for this solution as it will also allow the providers to view ISIS authorization files for members. This is a feature that many providers have asked for previously. In addition, you will be able to file incident reports much faster as most of the member's information will auto populate when you put in the member's State Medicaid ID number.

Sign up today so that your organization will be ready by **November 1, 2009** should you encounter any technical difficulties. Some provider organizations are already putting these new requirements into their quality plan. In addition, providers should be familiarizing themselves with the terminology, and definition of what constitute a major incident.

1. PORTAL to the Iowa Medicaid Provider Access: Critical Incident Report
<https://secureapp.dhs.state.ia.us/imp/>
2. Critical Incident Report Web Tool User Instructions
<http://www.ime.state.ia.us/docs/IMPACIncidentReportWebToolUserGuide.pdf>

Paper Process Tools and Resources:

Providers can access paper forms and instructions on the Provider Service's website if they cannot register for Online Electronic access.

1. Critical Incident Report form 470-4698 (Rev 9/09)
<http://www.ime.state.ia.us/docs/CriticalIncidentReportform470-4698.pdf>
2. Critical Incident Report 470-4698 Form Instructions and Definitions
<http://www.ime.state.ia.us/docs/CriticalIncidentReportUserGuide08282009.pdf>

Should providers have any questions about the new requirements please contact the IME Provider Services at
(800) 338-7909 or (515) 725-1004, or via email at imeproviderservices@dhs.state.ia.us