

## **POLICY: 1.020 INCIDENT AND REPORTING**

CMA's must have policies and procedures in place for (1) informing HH patients of their right to file complaints and incidents *and* (2) managing all complaints and incidents that involve a HH patient, whether the complaint/incident was made by or against the patient, or the CMA personnel or other person involved in the patient's care. Overall management of complaints and incidents includes having requirements for the reporting and tracking of complaints and incidents, as well as the documentation of investigative procedures and resolutions, including corresponding timeframes.

### **PROCEDURES:**

#### **Patient notification of the Right to File a Complaint, Incident and/or Request a State Hearing**

1. During Outreach and Engagement, eligible HH patients receive a Letter of Introduction that includes contact information for NYPHH, the CMA, and a Medicaid Help Line if they have any concerns during this process.
2. At the time of enrollment, annually, and as otherwise necessary, all patients must receive a copy of the Member Rights and Responsibilities document by the CMA, which the patient must sign, and the CMA scan and upload into the member's e-record on ACD.
3. In the Member Rights and Responsibilities document, the CMA must clearly inform the patient of his or her right to file a complaint, incident, and/or request a State fair hearing (as per CFR § 438.100, § 438.10 and 42 CFR §§ 438.400 - 438.424 for Managed Care members, Title 18 of the New York Codes, Rules and Regulations (NYCRR), Sub Part 358 for fee-for-service members, and Sub Part 360-10.8 for Managed Care Enrollees, and other applicable State law and regulations), in a reading level easily understood by the patient.
4. This document must also clearly explain how the patient can file a complaint, incident, and/or request a State fair hearing and include all appropriate contacts (e.g., the CMA, NYP HH, NYSDOH) and that the CMA and/or lead HH can provide patients assistance and support to file the complaint, incident, and/or fair hearing (e.g., hearing and vision assistance, language interpretation, written/verbal notification, etc.).

#### **Management of Complaints and Incidents**

NYPHH and the CMA are expected to manage complaints and incidents as outlined by the NYSDOH. NYSDOH distinguishes complaints and incidents each with their own set of procedures as outlined below.

##### **Complaints**

Complaints are concerns made verbally or in writing by the patient or patient's designee that relate to the patient's dissatisfaction with any HH services that are being provided. The CMA handles all Complaints for resolution. Complaints do not require psychiatric treatment and are typically resolved with reassurance and support and do not affect the health and welfare of the HH member directly (e.g., do not result in physical or psychological harm). Examples of Complaints might include, but are not limited to:

- Patient's dissatisfaction with HH services;
  - CM did not coordinate the care plan to the patient's satisfaction;
  - Patient arrives late to an appointment because the CM did not set up needed transportation;
  - Patient informs CM of a long wait time in doctor's office;
  - CM failed to return multiple phone calls made by patient; and
  - CMA did not respond to a patient's request to change CMs.
1. Investigations of any verbal or written complaint made by the patient to a CMA staff member is initiated by the CMA *within 48 hours* and completed *within the month* of receiving the complaint.
    - 1.1 Work with the patient as needed to help resolve the complaint.
    - 1.2 Advocate for the patient as needed to help resolve the complaint.
    - 1.3 Document all details of the investigation in the Care Plan Activity Note on ACD (see Documentation section for a comprehensive list of details to be tracked).
  2. If the complaint is not resolved according to the patient's satisfaction after multiple attempts on behalf of the CMA, the CMA will upgrade the complaint to an Incident and notify NYPHH.
    - 2.1 The CMA will document their efforts to inform NYPHH of the incident and the outcomes of this notification on the Care Plan Activity Note on ACD.
    - 2.2 Incidents will be managed in accordance to the procedures outlined under incidents.
  3. CMAs should independently monitor Complaints for trends to prevent reoccurrence.

### **Incidents**

Incidents are any urgent issue, event or action, either perceived or an actual threat, which could potentially affect the patient's health and welfare negatively, whether it is an action taken by or against the patient, or by another individual(s). The patient may experience or subject another person to a level of physical and/or psychological harm, sustain or cause of injury resulting in medical intervention and treatment, pose serious physical injury or life threatening harm, or require emergency life-saving procedures. Incidents must be reported directly to NYPHH by the CMA and may be considered a crime under NYS or Federal Law. NYPHH and the CMA must work together to resolve the incident. NYPHH is ultimately responsible for assessing network providers, identifying trends and taking corrective actions related incidents. Examples of reportable Incidents include, but are not limited to:

- Abuse (Physical, Psychological, Sexual, Neglect, Financial, etc.) or Domestic Violence;
- Suicide attempt;
- Death;
- Crime Level 1;
- Missing Person;
- Violation of Protected Health Information (PHI);
- Other

(Definitions of incidents may be found in following link:

[https://www.health.ny.gov/health\\_care/medicaid/program/medicaid\\_health\\_homes/docs/reportable\\_incidents.pdf](https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/docs/reportable_incidents.pdf))

Any incident requiring the involvement of Adult Protective Services (APS), Child Protective Services (CPS), legal aid or law enforcement should be reported *immediately* upon learning of the incident to the appropriate agency by the CMA.

1. Upon report or discovery of an incident, CMA will complete and submit Health Home Incident Reporting Form to NYPHH *within 24 hours* of learning of the incident. (For copy of Health Home Incident Reporting Form, please see *Appendix O*)
2. The CMA will also document the incident and actions taken on the Care Plan Activity Note on ACD.
3. Once NYPHH receives report from CMA, NYPHH will complete and submit 24 Hour Report to NYSDOH *within 24 hours* of receipt.
4. After reviewing the Incident report form, NYPHH and the CMA will discuss the nature of the incident and appropriate corrective action plan to ensure patient safety and well-being.
5. NYPHH will complete and submit the *5 day report* to NYSDOH, which will include the guidance/directive provided to CMA, any updates, preliminary findings and supporting documents as needed.
4. The CMA must implement agreed corrective plan and keep NYPHH informed of their progress throughout the investigation.
5. The CMA will document all actions taken to address patient incident and all services provided to the patient on the Care Plan Activity Note on ACD.
6. NYPHH will complete a *Final Report within 30 days* of incident, documenting all aspects of the investigation, including assurance that the member has care management support and coordination in place to address the circumstances of the adverse event.
7. The CMA and NYPHH will each track reported incidents to monitor for trends and prevent reoccurrence.

#### **Incidents Occurring at Collaborating Facilities and Agencies other than CMAs**

1. Investigations of incidents by HHs and CMAs are required when an incident involving a HH occurs in a licensed agency or facility, or involves the actions of a licensed agency or facility, or of an individual in its employ.
  - a. The HH and CMA should have policies to document when this occurs, and assist and support the member as necessary.
  - b. The State has established the New York Justice Center (NYJC) to serve as a central reporting point for allegations of fraud and abuse against persons with special needs by entities licensed by OMH, OASAS, State Education Department (SED), and Office for People with Developmental Disabilities (OPWDD). HHs and CMAs may report any such allegations to the NYJC as required and maintain documentation of the report. Information on reporting to the NYJC can be found at:  
<http://www.justicecenter.ny.gov/incident-reporting/report-abuse>.
2. While it is the responsibility of the licensed agency or facility where the incident occurred to investigate and report the incident per its established protocols, HHs are required to work collaboratively with State agencies such as NYSDOH, OMH, OASAS, AI, MCO, and with managed care plans (MCP) any time during the investigation to avoid duplicating efforts.
  - a. HHs must comply with requests from these agencies to provide documentation including but not limited to case records of the HH member.

❖ **Outreach and Engagement**

1. If a complaint or incident involving a potential HH patient is made during the Outreach and Engagement phase, the CMA and/or HH must make a determination regarding the nature of the allegation and to what extent it needs to be investigated. At a minimum, it should be assessed whether the action or inactivity of NYPHH or the CMA may have led to the complaint or incident.
  - b. An example of circumstances that would warrant an investigation: CMA does not successfully make contact with an assigned potential HH patient for 2 months and attempts to reach the patient were not progressive, and during that time, the patient has an experience that may have been preventable through a more timely engagement with HH services.

**Documentation**

1. All reports of Complaints and Incidents should be maintained separately from the member's case record and documented in the Care Plan Activity Note on ACD.
2. Health Home Incident Report Form must be completed and provided to the NYPHH via email and scanned/uploaded to ACD.

# APPENDIX O. Copy of Incident Form

|                          |                      |
|--------------------------|----------------------|
| <b>For DOH Use Only:</b> |                      |
| Incident Number:         | <input type="text"/> |
| DOH Reviewer:            | <input type="text"/> |

## Health Home Incident Reporting Form

Please submit the completed information to [nyphealthhome@nyp.org](mailto:nyphealthhome@nyp.org).

### Health Home Information

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Health Home:

Care Management Agency:

Reporter Name:  Phone:

Email:  Date Reported:

### Member Information

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Member Name:  Member CIN:

Member Enroll Date:  Member DOB:

Pertinent Diagnoses:

Date of Last Contact Prior to Incident:

Description of Last Contact:

Member's Current Location:

### Incident Information

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Incident Type:

Date and Time of Occurrence:

Date and Time of Discovery:

Incident Description:

Media Coverage?  Yes  No If yes, indicate source:

Immediate action taken to protect (reports investigative protection agencies), support or link member to services based on the current system: