QIO - HCBS Critical Incident Report

Purpose:

To ensure that critical incident reports (CIR) are completed for all emergency room visits that fall into the required categories identified in Iowa Administrative Code.

Identification of Roles:

HCBS operations manager - receives the emergency room (ER) claims report from Data Warehouse, supports incident and complaint specialist, reports on ER claims data in QIO quarterly quality report.

HCBS incident and complaint specialist - pulls claims and IMPA data to identify missing CIR, follows up with each members' case manager requesting a CIR be submitted.

Path of Business Procedure:

Step 1: Data Warehouse submits the previous months' ER claims on a monthly basis.

Step 2: HCBS operations manager or designee pulls the claims which have a diagnosis meeting the Office of Inspector General (OIG) identified claim categories

Step 3: HCBS operations manager or designee compares the list of qualifying diagnosis ER claims with submitted CIRs for the specific members, the spreadsheet is then submitted to the HCBS incident and complaint specialist.

Step 4: HCBS incident and complaint specialist reviews the ER claims to ensure that the CIR report submitted applies to the ER claim date of service (DOS).

    a. If the ER claim has a corresponding CIR, no further action is taken.

    b. For ER claims that do not have a CIR, the HCBS incident and complaint specialist will email the members case manager and notify them that a CIR needs to be completed for the ER claim DOS.

Step 5: HCBS incident and complaint specialist will monitor IoWANs and IMPA for the submission of the CIR reports; follow up will be made with the case manager until a CIR is submitted for the ER DOS.

Step 6: If a member is enrolled with an MCO, HCBS incident and complaint specialist will provide the coordinating MCO a list of members who require a CIR and the MCO will complete a follow-up to obtain a CIR.

RFP References:

1.3.1.4. D.