

A photograph of a man with grey hair and glasses, wearing a light blue shirt and yellow shorts, standing on the deck of a white sailboat. He is reaching up to adjust a rope on the mast. The sun is low on the horizon, creating a warm, golden glow over the water and the boat. The background shows a calm sea and distant hills under a clear sky.

Community Plan of Louisiana

Provider Adverse Incident Training



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Community Plan

Adverse Incident - General Information

An adverse incident is any concurrent, urgent quality of care issue that can reasonably be expected to cause harm or affect the member.

Adverse incidents are reported via fax, using the approved adverse incident reporting form (last slide). All Managed Care Organizations accept the same adverse incident form.

All adverse incidents are reviewed with a multi-disciplinary team to determine any outstanding questions or next steps.

Qualified events are forwarded to the state in the required monthly Adverse Incident report (see next page for list of qualified incidents).

Accurate and timely (within 1 business day) reporting is essential to ensuring ongoing member safety.

Adverse Incident

- Policy applies to UnitedHealthcare Community Plan (UHCCP) of Louisiana membership.
- Policy purpose: outline process for managing member occurrences identified as Adverse Incidents (AIs). All incidents in-scope for this policy are hereafter referred to as Adverse Incidents or AIs.
- Adverse Incidents include, but are not limited to, concurrent urgent quality of care issues that can reasonably be expected to cause harm or affect member safety.

Review of Adverse Incident reports is intended to accomplish the following goals:

- Ensure adverse incidents are appropriately reported, reviewed and monitored as part of an overall patient safety program
- Identify applicable facility, practitioner and/or service provider performance improvement areas
- Improve overall quality of care provided to UHCCP members
- Reduce probability of future adverse incidents

Adverse Incident – Definitions (Behavioral Health only)

The following categories are required to be reported from Behavioral Health providers via the adverse incident form:

Death, regardless of location

Abuse

Abuse of a child includes endangering the physical, mental or emotional health and safety of the child, exploitation/overwork of a child by any person, inadequate supervision resulting in infliction of physical or mental injury by the child or any person, the involvement of a child in any sexual act and the coercion of a child into having an abortion.

Abuse of an adult includes physical contact that resulted in injury or pain and emotional abuse

Neglect

Failure of a caregiver to supply a child with adequate food, clothing, shelter or treatment, as a result of which the child's physical or emotional safety is threatened or impaired. Includes prenatal drug exposure.

Exploitation

Misuse of someone's money, services or guardianship

Extortion

Acquisition of property/items from a person by physical force or abuse of an official authority

Adverse Incident – Additional Requirements



Incidents that include illegal acts, such as abuse, must be reported to the appropriate investigative agency (i.e., Child Protective Services, Adult Protection, Health Standards) within 24 hours of knowledge.



If the incident involves a minor, the parent/guardian of the member must be notified, and this must be documented on the Adverse Incident Reporting form.



The provider must take immediate steps to ensure the member is protected from further harm.

Adverse Incident – Detection and Reporting

- Although providers are encouraged to report their own adverse incidents, members, authorized representatives and caregivers are also encouraged to call and report these incidents through Member Services.
- Adverse incidents can also be formally investigated if there are concerns about quality of care or member safety.
- Failure to report adverse incidents and appropriately address safety concerns could result in a corrective action plan for the provider.

The Adverse Incident form and instructions are located at:

ldh.la.gov/index.cfm/page/2454

Adverse Incident – Form (1 of 2)

Healthy Louisiana
Adverse Incident Reporting Form

The provider **must** fax this form or any form with the necessary information to the appropriate health plan of the member addressed below **within 1 business day** of discovery of the incident.

ABH: 860-262-9174 ACLA: 844-341-7641 Healthy Blue: 855-859-5044 LHCC: 866-704-3063 UHC: 877-554-3362

Member Name:	Diagnosis:
Member Number:	Provider Level of care:
Member Date of Birth:	Incident Location:
Legal Status:	Date and Time of Incident:
Date Form Completed:	Date Incident Discovered:

Select any of the following categories that were involved.

Abuse	Exploitation
Neglect	Death
Extortion	

Description of Event: (including specifics on incident, using as many pages as necessary, numbering, dating, and signing each)

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Adverse Incident Form

Adverse Incident – Form (2 of 2)

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

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Select the appropriate boxes that apply.

☐	Parent/Guardian notified	☐	Date/Person notified:
☐	Law enforcement/Protective services notified (if applicable)	☐	If yes, agency and contact information:
☐	Member seen by psychiatrist, physician or nurse after incident	☐	If yes, treatment:

Signature: _____

Print Name: _____

Phone number: _____

Email Address: _____

Provider Name: _____

Date: _____

Version: October 16, 2018



Adverse Incident
Form

Questions

THANK YOU

Contact Information:

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