



January 27, 2022

Web Announcement 2694

Attention Provider Type 63 (Residential Treatment Center):

Reminder Regarding Residential Treatment Center (RTC)/Psychiatric Residential Treatment Facility (PRTF) Critical Incident/Serious Occurrence Reporting Requirements

Reminder to [Web Announcement 2457](#): Consistent with Code of Federal Regulations (CFR) 42 CFR 483.374(b) and (c) and the Division of Health Care Financing and Policy Medicaid (DHCFP) Services Manual Chapter 400, Section 403.8B(2), the following critical events/serious occurrences reporting requirements are the responsibility of the Residential Treatment Center (RTC)/Psychiatric Residential Treatment Facility (PRTF) provider.

Facilities must report each serious occurrence to both the State Medicaid agency and, unless prohibited by State law, the State-designated Protection and Advocacy system — for Nevada facilities this is the Nevada Disability Advocacy and Law Center (NDALC). In addition, reports must be made to the Nevada State Bureau of Health Care Quality and Compliance (BHCQC) for in-state providers. If the facility is out-of-state, reports must be made to their own licensing entity or appropriate departments.

Serious occurrences that must be reported include, but are not limited to, a resident's death, a serious injury to a resident, and a resident's suicide attempt. Other information to be included, though not limited to this, are assaults, police or sheriff's investigations, and physical, sexual or emotional abuse allegations.

Serious injury, as defined in 42 CFR 483.352, means any significant impairment of the physical condition of the resident as determined by qualified medical personnel. This includes, but is not limited to, burns, lacerations, bone fractures, substantial hematoma, and injuries to internal organs, whether self-inflicted or inflicted by someone else.

- **Facility staff** must report any serious occurrence involving a resident to both the State Medicaid agency and the State-designated Protection and Advocacy system by no later than close of business the next business day after a serious occurrence.
 - The report must include the name of the resident involved in the serious occurrence, a description of the occurrence, and the name, street address, and telephone number of the facility.
 - In the case of a minor, the facility must notify the resident's parent(s) or legal guardian(s) as soon as possible, and in no case later than 24 hours after the serious occurrence.
 - Facility staff must document in the resident's record that the serious occurrence was reported to both the State Medicaid agency and the State-designated Protection and Advocacy system, including the name of the person to whom the incident was reported. A copy of the report must be maintained in the resident's record, as well as in the incident and accident report logs kept by the facility.
- **Reporting of deaths.** In addition to the reporting requirements listed above, facilities must report the death of any resident to the Centers for Medicare & Medicaid Services (CMS) regional office.
 - *Facility staff* must report the death of any resident to the CMS regional office by no later than close of business the next business day after the resident's death.
 - *Facility staff* must document in the resident's record that the death was reported to the CMS regional office.

Notifications should be made to DHCFP/Medicaid via secure email to BehavioralHealth@dhcp.nv.gov and to the NDALC via secure email to reports@ndalc.org, and should be done using form NMO-3430A, filled out as much as possible. The link for

this form along with instructions for how to use this form can be found via the Nevada Medicaid website under [Provider Forms](#).

- Direct link for instructions for how to use form NMO-3430A can be found here: https://www.medicaid.nv.gov/Downloads/provider/NMO-3430A_Instructions.pdf
- Direct link to form NMO-3430A: <https://www.medicaid.nv.gov/Downloads/provider/NMO-3430A.pdf>

Providers will report the following information and indicate if notifications were made to the entities listed below:

- Date of Incident
- Recipient's Name
- Recipient's Nevada Medicaid Number (11-digit ID number)
- Facility Behavioral Health Supervisor
- Notification to Parent/Guardian
- Notification to the State-designated Protection and Advocacy system (NDALC for in-state providers)
- Notification to the licensing entity or other appropriate department (BHCQC for in-state providers)
- Notification to CMS (if warranted)
- Notification to Accrediting Body (if warranted)
- Notification to the Division of Child and Family Services or appropriate Case Manager
- Notification to Law Enforcement

Notification to QIO-like vendor/Nevada Medicaid regarding critical incidents/serious occurrences is to be done utilizing the Initial and/or Concurrent Prior Authorization [forms](#) in the section labeled critical incidents. Each incident that occurred should be dated and described with detailed information including any injuries and/or medical intervention that was required as a result of the incident.

For more information regarding policy requirements or for any questions, please send an email to the DHCFP Behavioral Health unit at BehavioralHealth@dhcfp.nv.gov