

# **Employment and Community First CHOICES (ECF CHOICES)**

# Tier 2 reportable events

- ECF CHOICES providers are responsible for conducting investigations of Tier 2 reportable events and submitting an investigation report for each Tier 2 reportable event to the MCO(s) that serve the involved ECF CHOICES member(s).
- Tier 2 reportable events must be reported to the MCO and the Department of Intellectual and Developmental Disabilities (DIDD).

# Recap of Tier 2 events

- Allegations of provider personnel (i.e., employees, volunteers) engaging in disrespectful or inappropriate communication about a person (e.g., humiliation, harassment, threats of punishment or deprivation, intimidation, and demeaning or derogatory communication).
- Other similar acts that do not meet the definition of emotional or psychological abuse which are directed to or within eyesight or audible range of the person supported.

# Recap of Tier 2 events (cont.)

- Incidents of person(s) whose whereabouts are unknown and who are likely to place themselves and/or others in dangerous situations.
  - Reportable within 60 minutes of the absence being discovered if the absence is unusual or is a known risk as specified in their person-centered support plan (PCSP) or behavior support plan (BSP).
  - Note: This does not mean that the person(s) supported are restricted from coming and going without staff supervision except when such restrictions are necessary. This must be documented in the PCSP in accordance with the federal home- and community-based services (HCBS) rule.

# Recap of Tier 2 events (cont.)

- Minor vehicle accidents not resulting in injury that require face-to-face medical treatment by someone other than a lay person.
- Injuries caused by or involving fire.

# Recap of Tier 2 events (cont.)

- Medication variances resulting in the need for observation, which may include the need to seek practitioner care or advice, that do not require in-person medical assistance. This includes physician services, emergency assistance or transfer to an acute inpatient facility for stabilization.
- Medication variances involving medication omission.
- Medication variances involving wrong drug, dose, person, time, rate, preparation and/or route of administration.
- Unsafe environments (i.e., unclean or hazardous conditions).

# Recap of Tier 2 events (cont.)

- Incorrect usage of manual restraint, mechanical restraint or protective equipment that have been approved for use in the person's PCSP or BSP.
  - Incidents determined to be outside of an approved PCSP, or intentional violation of guidelines specified in the PCSP or BSP, will be referred to the DIDD for Tier 1 investigation.

# Recap of Tier 2 events (cont.)

- The MCO will review all Tier 2 reportable event forms for completeness and for ensuring the event has been appropriately reported as a Tier 2.
- The MCO will provide written notification to the provider confirming the Tier 2 status of the event.



# Timeline

Day 1

- Provider submits Tier 2 reportable event to MCO.
- MCO provides confirmation of the Tier 2 event.

Day 2-  
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- Provider conducts internal investigation.
- If at any point the Tier 2 is determined to be a Tier 1, the provider should report this to DIDD and the MCO immediately.

Day 14

- Provider submits the Tier 2 reportable event investigation to the MCO.
- In extenuating circumstances, the provider may request a seven-day extension.

# Timeline (cont.)

Day 14

- MCO confirms receipt of the report.
- If the report is not received, the MCO will reach out to the provider to obtain the report.

Day 15-  
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- MCO conducts review of the provider investigation.
- If at any point the Tier 2 is determined to be a Tier 1, the MCO will report to DIDD immediately.

Day 30

- MCO advises the provider if the investigation is accepted. If additional review is needed, the MCO will complete review no more than 14 days following the date of provider notification of additional review.

# Timeline (cont.)

- In extenuating circumstances, the MCO may request a seven-day extension.
- Without extensions, the process will be completed in 30 days.
- With extensions, the process may take up to 52 days.
- Proof of extenuating circumstances beyond a provider's control are required for an extension to be granted.
- Requests for extensions must be made to the MCO two business days before the report is due.

# Conducting the investigation

- Providers will conduct investigations for all Tier 2 reportable events involving their agency staff.
- For Tier 2 events, providers will determine at their discretion and in accordance with agency policy whether to remove an employee or volunteer from any or all direct support to TennCare CHOICES Long-Term Services & Supports (CHOICES) and ECF CHOICES members.

# Conducting the investigation (cont.)

- Explore details of the event:
  - Document what happened before, during and after the event.
  - Ensure you have all relevant details regarding the event before you determine your approach.
- Determine your strategy:
  - Is it evident that the event occurred as it was reported, or do you need more information?
  - Who will you interview first, second and third?
  - What information do you need to draw conclusions?

# Conducting the investigation (cont.)

- Conduct interviews and document information:
  - Member interviews
  - Natural supports or volunteer interviews
  - Direct support professional/worker interviews
  - Written statements from workers and witnesses
  - Copy of provider investigation report
  - Applicable policies and procedures
  - Drug screening results if applicable
  - Documentation of provider follow-up

# Interview techniques

- Pick a private location where the interviewee will feel comfortable.
- Remove distractions.
- Create a list of questions you want to ask prior to the interview.
- Begin with simple questions.
- Avoid asking yes/no questions.
- Do not ask leading questions such as, “Did you yell at Bob?”

# Interview techniques (cont.)

- Do not share information from other interviews.
- Ask who, what, where, when and why.
- At the end, confirm facts with yes/no questions.



# Collecting documentation

- Provide details of the event:
  - What happened before, during and after the event?
- Attach documentation:
  - Member interviews
  - Worker interviews
  - Written statements
  - Copy of provider investigation report
  - Applicable policies and procedures
  - Drug screening results if applicable
  - Documentation of provider follow-up

# Collecting documentation (cont.)

- Document the actions you have taken as a provider.
- If you filed a report with the police, acting police sergeant or child protective services, attach any documentation you may have. You do not need documentation but may indicate that you made the report using the drop-down boxes on the form.
- Avoid leaving blanks to eliminate confusion.

# Provider follow-up actions

- Providers should document all actions taken to address the event.
  - Counseling
  - Education
  - Disciplinary action
  - Drug screen
  - Termination

# Provider follow-up actions (cont.)

- Preventing future occurrences of events:
  - How is this follow-up action going to prevent further events?
  - How can the provider use this event as a learning opportunity for improving service delivery?
  - Was training a factor? What could be improved?
- Don't just check a box; make it count!
  - Meaningful follow-up actions will make big differences and cultivate trust.

# Requesting extensions

- If an extension is needed, it must be requested two days prior to the report due date by submitting the *Investigation* form with completed actions up to the point of the extension request.
  - Submit to Amerigroup Community Care via email at [ecf-ref@amerigroup.com](mailto:ecf-ref@amerigroup.com).
- You will need to provide a detailed explanation for your request.
- Your request will be approved or denied. Additional information may also be requested.

# Requesting extensions (cont.)

- Some examples of reasons for extensions include:
  - Crucial witnesses that must be interviewed are unavailable or uncooperative.
  - Receipt of information the provider is working to obtain (e.g., vehicle accident report, information from a physician or financial institution) is pending.

# MCO review of the investigation

- The MCO has 30 days from the date the Tier 2 event was reported to complete review of the investigation.
  - Note that when a provider requests an extension, it shortens MCO review time.
- The MCO may:
  - Accept the report.
  - Submit findings to the provider (sanctions or corrective actions).
  - Request additional information.

# Contact information

- Submit all Tier 2 provider investigations to [ecf-ref@amerigroup.com](mailto:ecf-ref@amerigroup.com).
- Fax: 1-844-759-5952
  - Please only use when email is not available.
- Contact: Hollie Campbell  
[hollie.campbell@amerigroup.com](mailto:hollie.campbell@amerigroup.com)  
615-882-8213