Document Type:[1] _X_ Policy & Procedure ___ Process Guideline ___ Plan ___ System Description

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Document Scope: (applies to Policy & Procedure only)

_ The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.

X The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers[2].

– The requirements herein apply to both GCBH BH-ASO and its network providers[2]. Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.

PURPOSE: To define processes for reporting critical incidents, addressing negative events involving recipients of behavioral health services, and for responding to media contacts regarding coverage of such incidents or other events relating to the delivery of Greater Columbia BH-ASO funded behavioral health services.

DEFINITIONS

I. Critical Incident: An event involving an Individual or Provider with impact to health and safety. In keeping with HCA contract, Critical Incidents are further categorized and defined below.

II. Category One Critical Incidents, or Individual Incidents:

II.1. An occurrence pertaining to an Individual receiving GCBH BH-ASO funded services, and occurred within a contracted behavioral health facility (inpatient psychiatric, behavioral health agencies), FQHC, or by independent behavioral health provider and that are associated with:

II.1.1. Neglect, or sexual/financial exploitation perpetrated by staff.

II.1.2. Physical or sexual assault perpetrated by another client.

II.1.3. Death.

II.2. An occurrence committed by an Individual receiving GCBH BH-ASO funded services, with a behavioral health diagnosis, or history of behavioral health treatment within the previous 365 days. Acts allegedly committed, to include:

II.2.1. Homicide or attempted homicide.

II.2.2. Arson.

II.2.3. Assault or action resulting in serious bodily harm which has the potential to cause prolonged disability or death.

II.2.4. Kidnapping.

II.2.5. Sexual assault.

II.3. Unauthorized leave from a behavioral health facility during involuntary detention, when funded by the GCBH BH-ASO.

[1]See definitions of document types in AD100, "Development, Approval & Review of Formal GCBH BH-ASO Documents"
[2]Network Provider" – An organization with which GCBH BH-ASO is contracted for the provision of direct services.

II.4. Any event involving an Individual that has attracted, or is likely to attract media coverage, when funded by the GCBH BH-ASO.

III. Category Two Critical Incidents, or Population-Based Events:

III.1. Suicide and attempted suicide.

III.2. Poisoning or overdoses, unintentional or intention unknown.

POLICY

A. The Greater Columbia Behavioral Health Administrative Services Organization (Greater Columbia BH-ASO) shall establish a Critical Incident Management System consistent with all applicable laws and shall include policies and procedures for identification of incidents, reporting protocols and oversight responsibilities.

B. Greater Columbia BH-ASO shall designate a Critical Incident Manager responsible for administering the Incident Management System and ensuring compliance with the requirements of this policy.

C. Greater Columbia BH-ASO utilizes its Critical Incident Management System as a core component of its Quality Improvement Program to monitor member safety, identify trends, implement corrective actions, and ensure compliance with Quality Improvement and Utilization Management standards.

D. The Greater Columbia BH-ASO will increase intervention for contracted providers when incident behavior escalates in severity or frequency and shall communicate with the appropriate Managed Care Organization (MCO) when the Greater Columbia BH-ASO becomes aware of an incident for a Medicaid Enrollee within 24 hours.

E. Greater Columbia BH-ASO and its Network Providers interact regarding incidents to assure that the Washington State Healthcare Authority (HCA) is informed of them in a timely manner, as defined below. Greater Columbia BH-ASO is responsive to requests from HCA for additional information regarding efforts to prevent or lessen the possibility of future or similar incidents.

    a. Greater Columbia BH-ASO staff, subcontractors, Federally Qualified Health Centers (FQHC), and independent behavioral health providers (Reporters) are to report Critical Incidents involving Individuals receiving GCBH BH-ASO funded service via the attached ASO Critical Incident Form.

F. The Greater Columbia BH-ASO Clinical Director serves as the Critical Incident Manager and is responsible for administering the Critical Incident Management System and ensuring compliance with the requirements of the contract with the Health Care Authority (HCA).

G. In addition to all incidents described above, Greater Columbia BH-ASO and its Network Providers utilize professional judgment and may report incidents that fall outside the scope listed above.

H. At all times, Greater Columbia BH-ASO and its Network Providers each have an individual designee to oversee all activity associated with reviewing and reporting incidents. Network Providers are responsible for ensuring that critical incidents are adequately reviewed, documented, and reported to Greater Columbia BH-ASO to allow compliance within the timeframes identified below.

I. At all times, Greater Columbia BH-ASO and its Network Providers each have an individual designated to interact with the media regarding coverage of incidents and/or other events likely to influence public perceptions regarding the delivery of behavioral health care. This person is responsible for determining the nature and amount of information provided to the media, and for ensuring the confidentiality of all proprietary and protected information.

J. Greater Columbia BH-ASO shall communicate with the appropriate MCO when it becomes aware of an incident for a Medicaid Enrollee. Upon request, Greater Columbia BH-ASO will collaborate with the appropriate MCO in reference to such an incident.

   a. Network Providers are to comply with MCO related directives for directly reporting Critical Incidents as they apply to Medicaid enrollees.

PROCEDURE

1. Reporting Critical Incidents

   1.1. Greater Columbia BH-ASO shall submit Critical Incident reports for non-Medicaid Individuals according to category:

      1.1.1. Category One Critical Incidents, or Individual Incidents, will be reported via the HCA Incident Reporting System https://fortress.wa.gov/hca/ics/ within one (1) business day of Greater Columbia BH-ASO becoming aware of the incident.

         1.1.1.1. If the system is unavailable, reports should be made to HCABHASO@hca.wa.gov.

         1.1.1.2. HCA may ask for additional information as required for further research and reporting. Greater Columbia BH-ASO will provide information within three (3) business days of HCA's request.

      1.1.2. Category Two Critical Incidents, or Population-Based Events, will be tracked and reported to HCA semi-annually as described below.

   1.2. Greater Columbia BH-ASO will submit a semi-annual report of all critical incidents for Individuals receiving BH-ASO funded services during the previous six (6) months.

      1.2.1. The report must include an analysis of the following incidents:

         1.2.1.1. Incidents reported through the HCA Incident Reporting System.

         1.2.1.2. Incidents posing a credible threat to an Individual's safety.

         1.2.1.3. Suicide and attempted suicide

         1.2.1.4. Poisoning or overdoses, unintentional or intention unknown.

      1.2.2. The following must be addressed in the analysis:

         1.2.2.1. How the incident reporting program has been structured and operationalized.

         1.2.2.2. The number and types of critical incidents and comparisons over time.

1.2.2.3. Trends found in the population (i.e. regional differences, demographic groups, vulnerable populations, or others as defined by Greater Columbia BH-ASO).

1.2.2.4. Actions taken by Greater Columbia BH-ASO to reduce incidents based on the analysis, and other actions taken and why.

1.2.2.5. Greater Columbia BH-ASO's evaluation of how effective their critical incident reporting program has been over the reporting period and changes that will be made, as needed.

1.2.3. The report will be submitted no later than the last business day of January and July for the prior six (6) month period. The January report shall reflect incidents that occurred July through December and the July report shall reflect incidents that occurred January through June.

1.2.4. Greater Columbia shall also include a data file of all Critical Incidents from which the analysis is made using a template provided by HCA.

1.3. Reporting this information to HCA does not discharge Greater Columbia BH-ASO from completing mandatory reporting requirements, such as notifying the DOH, law enforcement, Residential Care Services, and other protective services.

2. Media Incidents

2.1. Media-related incidents should be reported to HCA as soon as possible, not to exceed one (1) business day.

2.2. Greater Columbia BH-ASO will provide the link of the source of the media to HCA, as available.

2.3. In accordance with the HIPAA Breach Notification Rule as outlined in 45 CFR 164.400, and as described in Greater Columbia BH-ASO's policy PS629, HIPAA breaches affecting 500 or more Individuals must be reported to prominent media outlets serving the Greater Columbia service area without unreasonable delay, and in no case later than 60 calendar days after the discovery of the breach. The notice must be provided in the form of a press release.

3. Managed Care Organization Notification

3.1. Upon learning that either a category one or two critical incident involving a Medicaid enrollee has occurred, Greater Columbia BH-ASO's critical incident manager will notify the Individual's assigned MCO of the incident within 24 hours.

4. Oversight and Monitoring

4.1. Critical incident data and trend analyses are incorporated into the Greater Columbia BH-ASO Quality Management Program. Findings, trends, and recommended improvement actions are reviewed by the appropriate Quality Improvement Committee(s), including the Internal Quality Management Oversight Committee (IQMOC), and reported to executive leadership or other governing body as appropriate.

4.2. When incident analysis identifies systemic issues, service delivery concerns, or trends indicating increased risk to individuals, the Greater Columbia BH-ASO may

implement corrective actions, quality improvement initiatives, provider education, or system-level interventions to reduce the likelihood of recurrence.

4.3. Critical incident reports, analyses, and associated documentation are maintained in accordance with Greater Columbia BH-ASO record retention policies and are available for quality monitoring, regulatory review, and accreditation purposes. Critical incident information integrity, data accuracy and reporting integrity aligns with Greater Columbia BH-ASO Policy CL356 Utilization Management Information Integrity, Corrective Action and Escalation standards to ensure data validation, audit process and error corrections.

APPROVAL

Karen Richardson or Sindi Saunders, Co-Directors — Date: 4/21/2026