

**MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**Behavioral and Physical Health and Aging Services Administration**

**CRITICAL INCIDENT, EVENT NOTIFICATION, AND SUBSTANCE USE DISORDER  
(SUD) SENTINEL EVENT REPORTING REQUIREMENTS**

**CRITICAL INCIDENT REPORTING**

The Prepaid Inpatient Health Plan (PIHP) will report the following events in the Customer Relationship Management (CRM) system, within **60 days (except for Suicide)** after the end of the month in which the event occurred for individuals actively receiving services with individual level data on consumer ID, event date, and event type:

**Suicide** for any individual actively receiving services at the time of death, and any individual who has received emergency services within **30 days** prior to death. Once it has been determined whether a death was suicide, the suicide must be reported within **30 days** after the end of the month in which the death was determined. If **90 calendar days** have elapsed without a determination of cause of death, the PIHP must submit a “best judgment” determination of whether the death was a suicide. In this event, the timeframe described above shall be followed, with the submission due within **30 days** after the end of the month in which this “best judgment” determination occurred.

**Non-suicide death** for individuals who were actively receiving services and were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution or were receiving community living supports, supports coordination/targeted case management, ACT, Home-based, Wraparound, Habilitation Supports Waiver, SED Waiver, Children’s Waiver services or 1915 iSPA services. The death must be reported within **60 days** after the end of the month in which the death occurred. If reporting is delayed because the PIHP is determining whether the death was due to suicide the submission is due within **30 days** after the end of the month in which the “best judgment” determination occurred.

**Emergency Medical treatment due to Injury or Medication Error** for people who at the time of the event were actively receiving services and were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or were receiving either Habilitation Supports Waiver services, SED Waiver services, Children’s Waiver services or 1915 iSPA services. The PIHP must report incidents resulting in emergency medical treatment due to injury or medication error within **60 days** after the end of the month in which the emergency medical treatment began. This includes specifying whether the injury was due to a fall or a result of physical management.

**Hospitalization due to Injury or Medication Error** for individuals who were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or in a Child-Caring institution or receiving Habilitation Supports Waiver services, SED Waiver services, Children's Waiver services, or 1915 iSPA services. The PIHP must report incidents resulting in hospitalization due to injury or medication error within **60 days** after the end of the month in which the hospitalization began. This includes specifying whether the injury was due to a fall or a result of physical management.

**Arrest of Consumer** for individuals who were living in a Specialized Residential facility (per Administrative Rule R330.1801-09) or receiving Habilitation Supports Waiver services, SED Waiver services, or Children's Waiver services. The PIHP must report an arrest of consumer within **60 days** after the end of the month.

**Remediations are required for critical incidents that are not reported in a timely manner, for emergency medical treatment and hospitalizations due to medication errors, falls, are a result of physical management or requested by MDDHS upon review of the critical incident. Remediations are due within 30 days of the reported date to CRM, or the date requested by MDHHS.**

## EVENT NOTIFICATION

The PIHP shall immediately notify the MDHHS through the CRM system of the following events:

1. Any death that occurs because of suspected staff member action or inaction or any death that is the subject of a recipient rights, licensing, or police investigation. This report shall be reported within **48 hours** of either the death, the PIHPs receipt of notification of the death, or the PIHPs receipt of notification that a recipient rights, licensing, and/or police investigation has commenced to the CRM system and include the following information:
  - a. Name of beneficiary
  - b. Beneficiary Medicaid ID number
  - c. Consumer ID (CONID) if there is no beneficiary ID number.
  - d. Date, time, and place of death (if a licensed foster care facility, include the license number.)
  - e. Preliminary cause of death
  - f. Contact person's name and email address.
2. Relocation of a consumer's placement due to licensing suspension or revocation. Must be reported within five (5) business days.
3. An occurrence that requires the relocation of any PIHP or provider panel service site, governance, or administrative operation for more than **24 hours**. Must be reported within five (5) business days.

4. The conviction of a PIHP or provider panel staff members for any offense related to the performance of their job duties or responsibilities which results in exclusion from participation in federal reimbursement. Must be reported within five (5) business days.
5. Any changes to the composition of the provider network organizations that negatively affect access to care. The PIHPs shall have procedures to address changes in its network that negatively affect access to care. Changes in provider network composition that the MDHHS determines to negatively affect recipient access to covered services may be grounds for sanctions. Must be reported within seven (7) days.
6. Critical incidents which may be newsworthy or represent a community crisis must be reported to MDHHS immediately.

## SUD SENTINEL EVENT REPORTING REQUIREMENTS

The Michigan Department of Health and Human Services (MDHHS) requires Grantees to report, review, investigate, and act upon sentinel events for persons living in 24-hour specialized residential substance use disorder treatment settings.

### DEFINITIONS FOR SUD SENTINEL EVENT REPORTING:

- Incident is any of the following, which should be reviewed to determine whether it meets the criteria for sentinel event as described below.
  - Death of a recipient
  - Serious illness requiring admission to a hospital.
  - Alleged cause of abuse or neglect
  - Accident resulting in injury to recipient requiring emergency room visit or hospital admission
  - Arrest and/or conviction
  - Serious challenging behaviors
  - Medication error
  
- A sentinel event is a Patient Safety Event that reaches a patient and results in any of the following:
  - Death
  - Permanent harm
  - Severe temporary harm and intervention required to sustain life

An event can also be considered sentinel event even if the outcome was not death, permanent harm, severe temporary harm and intervention required to sustain life.

- Death: that which is not by natural cause or does not occur as a natural outcome to a chronic condition (e.g. terminal illness) or old age.
  
- Accidents resulting in injuries that result in death or loss of limb or function, and which required visits to emergency rooms, medi-centers and urgent care clinics/centers and/or admissions to hospital should be included in the reporting. In many communities where hospitals do not exist, medi-centers and urgent care clinics/centers are used in place of hospital emergency rooms.
  
- Physical illness resulting in admission to a hospital does not include planned surgeries, whether inpatient or outpatient. It also does not include admissions directly related to the natural course of the person's chronic illness, or underlying condition. For example, hospitalization of an individual who has a known terminal illness in order to treat the conditions associated with the terminal illness is not a sentinel event.

- Serious Challenging Behaviors are those not already addressed in a treatment plan and include significant (in excess of \$100.00) property damage, attempts at self-inflicted harm or harm to others, or unauthorized leaves of absence that result in death or loss of limb or function to the individual or risk thereof. All unauthorized leaves from residential treatment are not sentinel events in every instance)
- Serious physical harm is defined by the State of Michigan Administrative Code for Health and Human Services (330.7001 Rights of Recipients) as "physical damage suffered by a recipient that a physician or registered nurse determines caused or could have caused the death of a recipient, caused the impairment of his or her bodily functions, or caused the permanent disfigurement of a recipient."
- Medication Errors mean a) wrong medication; b) wrong dosage; c) double dosage; or d) missed dosage which resulted in death or loss of limb or function or the risk thereof. It does not include instances in which consumers have refused medication.

#### APPLICATION:

All incidents should be reviewed to determine if the incidents meet the criteria and definitions above for sentinel events and if they are related to practice of care. The outcome of this review is a classification of incidents as either a) sentinel events, or b) non-sentinel events. Events determined to be sentinel events require notification to MDHHS within **24 hours** by email to [mdhhs-bhdda-contracts-mgmt@michigan.gov](mailto:mdhhs-bhdda-contracts-mgmt@michigan.gov). Further reporting occurs within the MiCAL CRM.

An "appropriate response" to a SUD sentinel event includes all the following (The Joint Commission January 2024):

- A formalized team response that stabilizes the individual served, discloses the event to the individual served and family, and provides support for the family as well as staff involved in the event.
- Notification of organization leadership
- Immediate investigation
- Completion of a comprehensive systematic analysis for identifying the causal and contributory factors
- Strong corrective actions derived from the identified causal and contributing factors that eliminate or control system hazards or vulnerabilities and result in sustainable improvement over time
- Timeline for implementation of corrective actions
- Systemic improvement with measurable outcomes

Please reference the job aids found in the CRM system for reporting instructions on Critical Incident Reporting, Immediately Reportable Events, and SUD Sentinel Events.