

Provider Bulletin

Molina Healthcare of Virginia, Inc.

January 13, 2025

Key Requirements for Submitting Critical Incident Reports

What is a Critical Incident?

Any actual or alleged event or situation impacting the physical, psychological, or emotional health, safety, or well-being of the member.

Categories of Critical Incidents:

1. **Quality of Care (QOC):** Incidents that have or could adversely affect the health or welfare of a member due to a provider's conduct while providing medical services.
 - a. Including but not limited to standard of care deviations, medication discrepancy, neglect
2. **Sentinel Events:** Patient safety events involving death, serious physical or psychological injury, or the risk thereof not primarily related to the natural course of the illness.
 - b. Including but not limited to Injury leading to permanent or severe temporary harm.
3. **Other Critical Incidents:** Situations that pose a significant risk to the physical, mental health, safety, or well-being of a member.
 - c. Including but not limited to missing person, theft, exploitation

Reportable Critical Incidents:

1. Abuse
2. Attempted Suicide
3. Deviation from standards of care
4. Exploitation, financial or otherwise
5. Medical Error
6. Medication discrepancy
7. Missing person
8. Neglect
9. Sentinel Death
10. Serious Injury
 - a. Falls requiring medical attention
11. Theft
12. Other

Form Completion:

- **New fields to complete:** Under Member Information, there are two new categories:
 - Identified Case Management Level at the time of the Incident
 - Member Service at the time of the Incident
- **Field Clarification:**
 - **Occurrence of Incident:** Time the incident occurred.
 - **Discovery of Incident:** Date and time the reporter discovered the incident.
 - **Report of Incident:** Date and time the incident was reported to the CI Team.

Critical Incident Reporting Timeline:

Must be reported **within 24 hours** of discovery. Verbally submitted reports must submit a follow-up written report **within forty-eight (48) hours**.

Please send completed forms and incident reports to:

- **E-mail:** MCCVA-CI@MolinaHealthcare.com
- **Fax:** 833-908-4414

Important Links:

- [DMAS Provider Bulletins](#)
- [Molina Bulletins, Announcements & Provider Newsletter](#)
- [Critical Incident \(CI\) form](#)

Thank you for your attention to this important matter and for your ongoing commitment to providing high-quality healthcare services to our members.