

GAPP

SENTINEL EVENT SUBMISSION

1 DESCRIPTION

Georgia Pediatric Program (GAPP) Providers may submit sentinel events involving GAPP members via the *Georgia Web Portal/Provider Workspace*. Providers may also edit existing events that they entered. The following rules apply to entering and editing sentinel events:

- Only providers with a GAPP category of service have access to sentinel event functionality on the *Provider Workspace*.
- Each sentinel event is associated with a specific member that the provider must specify by entering a Member Medicaid ID.
- The specified member must be currently identified as a GAPP member in the PA system.
- Providers **may view all sentinel events** associated with the specified GAPP member.
- Providers can **ONLY edit events that they entered**.
- Providers cannot delete events.

2 WEB SUBMISSION INSTRUCTIONS

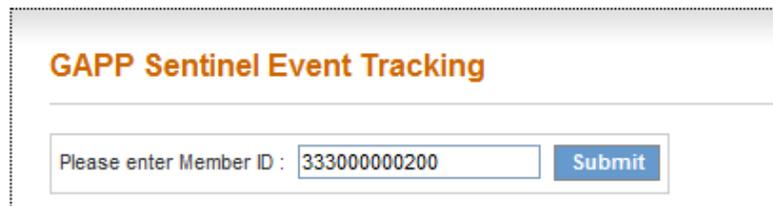
Add a New Sentinel Event

1. Log into the *Georgia Web Portal*.
2. On the *Secure Home* page, click the **Prior Authorization** tab, and then **Provider Workspace**.
3. On the workspace, under **Enter and Edit Authorization Requests**, click the link: **View, Add or Edit GAPP Sentinel Events**.

Provider WorkspaceLast 10 Requests : - Denied **Enter and Edit Authorization Requests**[Enter a New Authorization Request](#) - Use this link to enter a new prior authorization request. [More...](#)[Search, Edit or Attach Documentation to Requests](#) - Use this link to search, edit or attach documentation to authorization requests. [More...](#)[Member Medicaid ID Updates](#) - Use this link to Search, Edit, and modifying Member Medicaid IDs for SwingBed or Katie Beckett requests.[View, Add or Edit GAPP Sentinel Events](#) - Use this link to view, add and edit GAPP Sentinel Events.

Figure 1

4. On the next page, enter the Member Medicaid ID for the GAPP member associated with the event.



GAPP Sentinel Event Tracking

Please enter Member ID :

Figure 2

5. Click **Submit**.
6. The Member Medicaid ID is validated by the system to determine if the member is identified as a GAPP participant in the PA system. If the validation fails (member is not a GAPP participant), a message will display with an alert to check the Medicaid ID. If the Medicaid ID is checked and is determined to be a valid member ID for a member in GAPP, notify GMCF staff via *Contact Us* and let them know that the sentinel event could not be entered.
7. If the Member Medicaid ID passes validation (member is a GAPP participant), then the *GAPP Sentinel Event Tracking* page (entry page) opens.
8. The following information is prepopulated on the tracking/entry page:
 - Member information
 - Provider ID and Provider name
 - Sentinel Event Report Date –defaults to the current date.

9. Fill out the sentinel event form. The **following information is required in order to submit the event** so be sure that this information is available when entering the event:

- **Sentinel Event Date** – The date on which the event actually occurred.
- **Sentinel Event Type** – The type of sentinel event. Select one or more checkboxes. If a main event category is checked, such as *Inappropriate Behavior, Injury or Abuse/Neglect*, a sub-category must also be selected, as shown in the figure below. If ‘Other Event Type’ is selected, provide a description of the ‘other’ event in the text box provided.

Sentinel Event Type

Inappropriate behavior

Member eloped Self-injurious behavior Verbal altercation with caregiver/other

Physical altercation with caregiver/other Illegal/inappropriate substance use Inappropriate sexual behavior

Injury

Resulting in ER visit Not resulting in ER visit

Abuse/Neglect/Exploitation

Self-neglect By another person

Major Medical Change Medication Error Sexual Harassment

Substandard Living Conditions Unmet Needs Failed Emergency Back-Up Plan for Care

Death Hospitalization Other Event Type

Other Event Type description :

If other selected, describe here

Figure 3

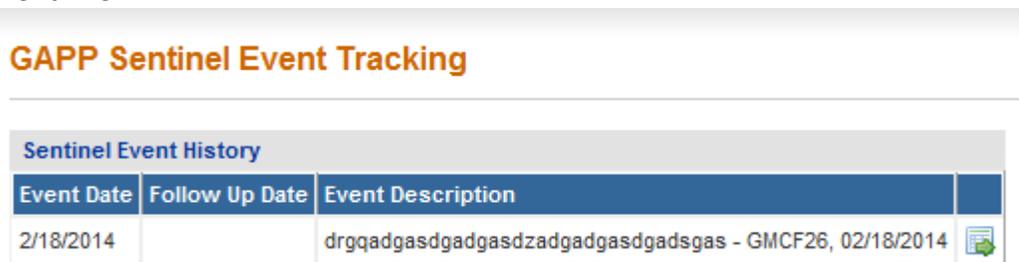
- **Sentinel Event Description** – A description of the event. Enter in the textbox provided.
- **Persons Involved in the Incident** – The person or persons involved in the event. Select one or more checkboxes. If ‘Other’ selected, describe in the textbox provided.

10. In addition to the required information, enter additional event information, if available. Whenever 'Other' is checked on the form, remember to describe in the text box provided.
11. Click **Submit** to save the sentinel event.
12. Once submitted, the event information is saved to a **History** table, and may be edited later.
13. **To add another sentinel event for the same member**, click **Add New Sentinel Event** at the bottom of the page.
14. **To add an event for a different member**, click **Return to the Provider Workspace**.

Edit an Existing Sentinel Event

When an event is first entered, the event follow-up information, resolution information or other information may not be available. In order to complete the sentinel event, return to the event and edit the event. **Do not enter a new event.**

1. On the workspace, under **Enter and Edit Authorization Requests**, click the link: **View, Add or Edit GAPP Sentinel Events**.
2. On the next page, enter the Medicaid ID for the GAPP member associated with the event to be edited. Click **Submit**.
3. The event page opens and, at the top, the member's existing events display in a **History** table.
4. Select the event to be edited and then click the  **Edit** symbol at the end of the event line.



GAPP Sentinel Event Tracking

Sentinel Event History			
Event Date	Follow Up Date	Event Description	
2/18/2014		drgqadgasdgdgasdzadgdgasdgdgasg - GMCF26, 02/18/2014	

Figure 4

5. The sentinel event opens in an editable format, and may be added to or modified.
6. After editing, click **Submit**. The event will be re-saved to the **History** table.