

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES

# GUIDANCE DOCUMENT

“This guidance document is advisory in nature but is binding on an agency until amended by such agency. A guidance document does not include internal procedural documents that only affect the internal operations of the agency and does not impose additional requirements or penalties on regulated parties or include confidential information or rules and regulations made in accordance with the Nebraska Administrative Procedure Act. If you believe that this guidance document imposes additional requirements or penalties on regulated parties, you may request a review of the document.”

Pursuant to  
Neb. Rev. Stat. § 84-901.03

**NEBRASKA**

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DEPT. OF HEALTH AND HUMAN SERVICES

# Reporting Guidelines for COVID-19 Emergency

Instructions approved by the  
Division of Developmental Disabilities

Updated May 2020



# Nebraska DHHS-DD Incident Reporting Instructions

The guidelines in this publication are supplemental to the primary GER guidelines in [Incident Reporting: Completing General Event Reports \(GERs\) in Therap](#). During the COVID-19 public health emergency, reporting of incidents should continue as normal, and all requirements outlined in both guides must be followed.

This publication also contains requirements to report any testing results of a participant with COVID-19.

This publication contains additional guidance for reporting incidents/events specific to the COVID-19 public health emergency.

Requirements in this publication apply to *both* agency and independent providers.

## Reporting Timelines

All reporting timelines in the primary GER guide have not changed and must be followed.

However, this publication contains requirements for additional incident reporting specific to events related to COVID-19, and some of these events may have already occurred as of the publication of this guide. A GER should be submitted for all COVID-19-related events occurring prior to the publication of this guide within seven calendar days of the effective date of this guide.

- The *Event Date* in the *Basic Information* section of the GER is the date the event occurred.
- The *Report Date* in the *Basic Information* section of the GER is the date the GER is being submitted. This date must be within seven calendar days of the *Discovered Date/Time*.
- The *Discovered Date/Time* in the *Event Information* section of the GER is the date and time providers were notified by email of the publication of this supplemental guide.

When a provider has already submitted a GER reporting an incident related to COVID-19 prior to the publication of this guide, the previous GER should be modified to conform to the instruction in this guide, when possible, or deleted and resubmitted following these guidelines.

# COVID-19-Related Events and Reporting Requirements

Incident Type and Description	How to Document in Therap
<p><b>COVID-19</b></p> <p>For <i>each</i> GER submitted related to a reportable incident related to COVID-19, an additional event <i>must</i> be added to the GER to note the event is related to COVID-19. This includes all the incident types listed in this guide on pages 3 and 4.</p>	<p><b>Basic Information</b>  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Communicable Disease  <i>Event Subtype:</i> COVID-19  <i>Summary:</i> This incident is related to the COVID-19 outbreak.</p>
<p><b>Displacement from Usual Services Site/Alternative Provision of Services</b></p> <p>A GER should be completed in this category for all alternative provision of services when services are not provided in the typical manner due to the COVID-19 emergency, as allowed in the Medicaid HCBS DD Waivers Appendix K. This includes, but is not limited to:</p> <ul style="list-style-type: none"> <li>• Provision of day services in a residential setting</li> <li>• Provision of residential services in a setting which is not the participant’s primary residence</li> <li>• Provision of services in excess of any cap usually placed on the service</li> </ul> <p>The GER should be completed when the alternative provision of services <i>begins</i>, but does not need to be completed daily. A new GER is needed when the alternative provision of services changes from what has previously been reported in a GER.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> MEDIUM  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Displacement due to Emergency/Natural Disaster</p> <p><b>NOTE: Do not report this type of incident in a HIGH notification GER.</b> Alternative provision of service does <b>not</b> meet the definition of a reportable incident as specified in the Medicaid HCBS DD waivers. Completing a HIGH notification GER requires completion of an investigation to meet regulatory requirements and is not necessary for these events.</p>
<p><b>Quarantine Due to Suspected Exposure to COVID-19</b></p> <p>A GER should be completed in this category for any participant who is specifically under quarantine (self-quarantine or quarantine directed by a public health entity) due to potential exposure to COVID-19 based on Centers for Disease Prevention and Control or NE DHHS Division of Public Health guidance.</p> <p>This also includes any participant who is in quarantine/remaining at home due to experiencing possible symptoms of COVID-19, such as sore throat, cough, or fever, but for whom the severity of symptoms and circumstances do not indicate medical attention/screening is needed.</p> <p>This does <i>not</i> include participants practicing social distancing as a preventative measure due to high risk of serious illness when exposed to COVID-19.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> MEDIUM  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Potential Incident/Near Miss</p> <p><b>NOTE: Do not report this type of incident in a HIGH notification GER.</b> Quarantine or isolation due to possible symptoms or exposure does <b>not</b> meet the definition of a reportable incident as specified in the Medicaid HCBS DD waivers. Completing a HIGH notification GER requires completion of an investigation to meet regulatory requirements and is not necessary for these events.</p>

Incident Type and Description	How to Document in Therap
<p><b>Serious Illness</b></p> <p>Acute, episodic illness (not chronic illness) which requires treatment from a physician or similar medical professional (e.g. physician's assistant, APRN).</p> <p>A GER must be submitted in this category when medical attention from a physician is sought for possible COVID-19 infection, regardless of whether COVID-19 is subsequently diagnosed.</p> <p>This category also includes situations in which a participant is screened by a medical professional by phone due to possible COVID-19 infection, seen at a drive-thru screening site, or other circumstances where he/she is not directly assessed/treated by a physician but symptoms exist of appropriate type and severity to seek out some type of assessment for COVID-19.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> HIGH  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Serious Illness</p>
<p><b>Use of an Emergency Room or Urgent Care Facility for Treatment</b></p> <p>Any unplanned use of a hospital emergency room or urgent care facility for treatment. This includes situations in which a participant's condition is so severe he/she cannot wait for an appointment to be seen by his/her primary physician.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> HIGH  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Hospital  <i>Event Subtype:</i> ER without Admission</p>
<p><b>Hospitalization of a Participant</b></p> <p>Any <i>admission</i> to a hospital for evaluation, monitoring, or treatment.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> HIGH  <i>Event Type:</i> Other</p> <p><b>Event Information</b>  <i>Event Type:</i> Hospital  <i>Event Subtype:</i> Admission</p>
<p><b>Death of a Participant</b></p> <p>Any death of a participant.</p>	<p><b>Basic Information</b>  <i>Notification Level:</i> HIGH  <i>Event Type:</i> Death</p> <p><b>Event Information</b>  <i>Cause of Death:</i> Other – COVID-19 (will have to type in COVID-19 after selecting <i>Other</i>)</p>

## General GER Guidelines

- Because the *Displacement due to Emergency/Natural Disaster* and *Potential Incident/Near Miss* are being used for MEDIUM notification GERs to document alternative service provision and quarantine related to the COVID-19 emergency, providers **must not** use these event types and MEDIUM notification level to document other types of non-reportable incidents during the time this supplemental guidance is in effect, in order to facilitate accurate data collection for use by providers and DHHS-DD in assessing the ongoing impact of this public health emergency on participants.
  - These event types can be used for other types of non-reportable incidents when the provider wishes, but LOW notification level must be used.
- When a GER has been submitted for one of the events described above and the participant's circumstances change, a new GER must be completed. For example:
  - A participant is notified he/she has potentially been exposed to COVID-19 at his/her place of employment, so he/she is remaining at home under self-quarantine for 14 days as recommended by the CDC. On day 5 of quarantine, the participant begins exhibiting possible symptoms of COVID-19, and is seen at a drive-thru testing site, where he/she is subsequently diagnosed with COVID-19.
    - A GER with MEDIUM notification level and event types *Potential Incident/Near Miss* and *Communicable Illness>COVID-19* would be completed when the participant started self-quarantine after possible exposure.
    - A second GER with HIGH notification level and event types *Serious Illness* and *Communicable Illness>COVID-19* would be completed at the time the participant is tested and subsequently diagnosed with COVID-19. (only one GER is needed for testing and diagnosis)
  - A participant has a diagnosis of COVID-19, but his/her symptoms are minor in nature, and in consultation with the participant's physician at the time of diagnosis, the treatment plan is for the participant to remain at home and treat with over-the-counter medication. Three days later, the participant's symptoms begin to worsen and he/she begins to experience shortness of breath. The participant is taken to the ER. Upon assessment in the ER, the participant is admitted to the hospital for treatment.
    - A GER with HIGH notification level and event types *Serious Illness* and *Communicable Illness>COVID-19* would be completed at the time of the screening and diagnosis of COVID-19.
    - A second GER with HIGH notification level and event types *Hospital>ER without Admission*, *Hospital>Admission*, and *Communicable Illness>COVID-19* would be completed at the time the participant is taken to the ER and admitted to the hospital. This GER will have three events in it, one for the ER visit, one for the hospital admission, and one because the incidents in the GER are related to COVID-19.
- For COVID-19-related events that impact multiple participants, such as closure of a day site and provision of day services in residential settings, a GER is needed for **each** participant impacted or having alternative provision of services under Appendix K.

# Reporting COVID-19 Testing Results

*Added May 2020*

Documentation, in addition to the GER, is needed to more accurately track participants who have been tested for COVID-19 and quickly access the number of positive cases across the state. When a participant is tested for COVID-19, the results must be documented as a diagnosis on his/her *Individual Data Form (IDF)* in Therap. **This is required regardless of whether the test was positive or negative for COVID-19.**

## Who is responsible for adding the diagnosis to the IDF?

- When a provider (agency or independent) is responsible for a participant's medical care, that provider is responsible for adding the diagnosis to the IDF.
- When a participant is responsible for his/her own medical care or a family member/guardian is responsible, the participant's Service Coordinator is responsible for adding the diagnosis to the IDF.
  - This includes situations in which a provider is typically responsible for the participant's medical care, but the participant has discontinued his/her services with the provider temporarily due to the pandemic.
  - If a provider learns from a participant or his/her family or guardian that the participant has been tested, this information must be communicated to the participant's SC so the SC can complete the needed documentation.

## I added the required information to the IDF. Do I still need to complete a GER?

- When the participant has symptoms of an illness which merit assessment from a physician to be tested for COVID-19, a high GER must be completed following the instructions in this guide. This is reportable under the category of acute, episodic illness requiring treatment from a physician.
- When the participant is not ill and does not have symptoms or any other COVID-19-related event outlined in the [incident reporting section](#) of this publication, this is not a reportable incident. A GER is not required. A participant may be tested as a precaution, due to exposure, or for another reason. This is only recorded on the IDF.

## I work with participants who were tested before the publication of this guidance. Do I need to update their IDFs with their test?

- Yes. All participants tested up to this point must have their IDFs updated. Participants tested for COVID-19 prior to the publication of this guide should have their IDF updated within seven calendar days of the publication of the guide.

## How do I add the COVID-19 test results information to the IDF?

- The COVID-19 test results will be listed as a diagnosis on the IDF. The instructions in the next section of this publication will guide you through adding this information to the IDF.

## Do I need to remove the diagnosis once the participant has recovered?

- The diagnosis will not be removed from the IDF, but will be updated to reflect that the diagnosis is resolved. Instructions for updating the IDF when the diagnosis has resolved are also in the next section of this publication.

# Adding and Updating the IDF Diagnosis

Added May 2020

A Therap user must have *Individual Data Edit* privileges assigned to their Therap Super Role to make these changes.

## Adding a Diagnosis to the IDF

1. Open the participant's *Individual Data Form*. For help searching for a participant's IDF, visit [https://help.therapservices.net/app/answers/detail/a\\_id/358](https://help.therapservices.net/app/answers/detail/a_id/358).
2. In the *Medical Information* section, click *Edit Diagnoses List*.

The screenshot shows the 'Medical Information' section of a form. It includes sections for 'Emergency Orders', 'Adaptive Equipment', 'Blood Type', and 'Primary Care Physician'. The 'Active Diagnoses' section contains a table with the following data:

Diagnosis Coding Type	Diagnosis Code	Description	DSM-5	Billable	Diagnosis Date	Diagnosed By
ICD-10	U07.1 - COVID-19, virus identified		No	Yes	05/05/2020	

Below the table, it states 'Primary Diagnosis: No Primary Diagnosis Exists for this Individual' with a red-bordered button labeled 'Edit Diagnoses List'. Other sections include 'Developmental Disability', 'Intellectual Disability', and 'Other Medical Information'.

3. At the bottom right of *Diagnosis List*, click *Create New*.

The screenshot shows the 'Primary Diagnosis' section with the text 'No Primary Diagnosis Exists for this Individual'. Below this is a 'Deleted Diagnoses' section. At the bottom, there are 'Cancel' and 'Back' buttons on the left, and a red-bordered 'Create New' button on the right.

4. In the *Diagnosis Code* field, keep the default selection of *ICD-10* and type "COVID" into the *Lookup Diagnosis Code* text section. Two options will display: *U07.1 – COVID-19, virus identified* and *U07.2 – COVID-19, virus not identified*.
  - When the COVID-19 test is positive, select the "virus identified" code.
  - When the COVID-19 test is negative, select the "virus not identified" code.

In the *Diagnosis Date* field, enter the date listed on COVID-19 test results (or date reported that the results were received).

The screenshot shows the 'Diagnosis Code' field with a dropdown menu set to 'ICD-10' and a search box containing 'COVID'. A dropdown list shows two options: 'U07.1 - COVID-19, virus identified (Billable)' and 'U07.2 - COVID-19, virus not identified (Billable)'. Below this is a 'Diagnosis Date' field with a date input box showing 'MM/DD/YYYY' and a calendar icon. A note at the bottom indicates 'About 3000 characters left'.

1. Click **Save** in the bottom right of the screen.
2. A message will be displayed indicating the diagnosis was successfully saved.

## Resolving a Diagnosis on the IDF

1. Follow steps #1 and #2 for [Adding a Diagnosis to the IDF](#).
2. Click on the diagnosis to be updated as resolved.

**Primary Diagnosis**

No Primary Diagnosis Exists for this Individual

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**Active Diagnoses**

Filter 15 Records

Diagnosis Coding Type	Diagnosis Code	Description	DSM-5	Billable	Diagnosis Date	Diagnosed By	Entered By	Last Updated By	Time Zone
ICD-10	U07.1 - COVID-19, virus identified		No	Yes	03/19/2020		MILLER, MICAH / Data Management and Operational Reporting Administrator		US/Central

Showing 1 to 1 of 1 entries

3. Click the checkbox for *Resolved* and enter the date the diagnosis is resolved in the *Resolved Date* field. The date the diagnosis is resolved may be the date at which retesting for COVID-19 is negative or, if no additional testing is done, when the participant's symptoms have resolved.

**Resolved**

**Resolve Date**

**Resolved By**

Cancel Back
Delete **Save**

4. Click **Save** in the bottom right of the screen.
5. A message will be displayed indicating the diagnosis was successfully updated.

Once resolved, a diagnosis will be displayed in the *Resolved Diagnosis* section of the *Diagnosis List*. Only active diagnoses will display in the *Active Diagnosis* section.