# Indiana Department of Health (IDOH) Consumer Services & Health Care Regulation Commission

# **Program Advisory Letter**

# Reporting a Reasonable Suspicion of a Crime Against a Resident of a Long-Term Care Facility

Program Advisory Letter Number: LTC-2011-01 Effective: August 31, 2011 Revised: November 22, 2019

Revised: June 1, 2022

Cancels: n/a Reviewed: n/a

#### **Summary of Program Advisory Letter:**

- The IDOH Program Advisory Letter is intended to assist Indiana health care facilities in implementation of Federal requirements for the reporting of a reasonable suspicion of a crime against a resident. The Program Advisory Letter is based on the IDOH's understanding of the Federal regulation and subject to change based on further Federal guidance or interpretation.
- The reporting of reasonable suspicion of crimes requirement applies to each covered individual not the facility. It is the responsibility of each covered individual to ensure their individual reporting responsibility is fulfilled.
- If the events that cause the reasonable suspicion of a crime against a resident result in serious bodily injury, the report must be made immediately after forming the suspicion but not later than two hours after forming the suspicion. Otherwise, the report must be made not later than 24 hours after forming the suspicion.
- For most facilities, there will be two local law enforcement entities with responsibilities for investigation of potential criminal activity the County Sheriff and local police agency (City Police Department or Town Marshal). An individual may therefore fulfill their reporting requirement by reporting to either of these local law enforcement entities. The IDOH encourages discussions between the facility and local law enforcement entities to determine a reporting process for that facility.

#### **Purpose**

The purpose of this program advisory letter is to inform health care facilities about the implementation of federal regulations requiring the reporting of reasonable suspicion of a crime in a long term care facility committed against a resident of a facility.

#### **Background Information**

Section 6703(b)(3) of the Patient Protection and Affordable Care Act, in part, amends Title XI of the Social Security Act by adding a Section 1150B. Section 6703(b)(3) is part of Subtitle H referred to as the *Elder Justice Act*. Section 1150B requires long-term care facilities that receive at least \$10,000 in Federal funds under the Act [referring to the Social Security Act] during the preceding year to annually notify each covered individual of their obligation to report to the State Survey Agency and at least one local law enforcement entity "any reasonable suspicion of a crime," as defined by local law, committed against an individual who is a resident of, or is receiving care from, the facility.

# **The Reporting Requirement and Process**

#### What Facilities are Included in the Reporting Requirement

Covered individuals must timely report any reasonable suspicion of a crime against a resident of, or who is receiving care from, a long-term care facility. The long-term care facilities included in this reporting requirement are:

- Nursing facilities (NFs)
- Skilled nursing facilities (SNFs)
- Hospices that provide services in long-term care facilities
- Intermediate Care Facilities for the Individuals with Intellectual Disabilities (ICF-IID former ICF/MR)

#### Who is Required to Report

The reporting of reasonable suspicion of crimes applies to each covered individual not the facility. A "covered individual" is defined at Section 1150B(a)(3) as each individual who is an owner, operator, employee, manager, agent, or contractor of such long term care facility.

#### Who is Required to Report

The reporting of a reasonable suspicion of a crime is an individual responsibility. Because the reporting is a responsibility of the individual, the Centers of Medicare & Medicaid Services (CMS) recommends that the "facility" (such as administrator, director of nursing, or corporate compliance) not submit a report on behalf of the covered individuals. Should the administrator

or other administrative staff have a reasonable suspicion of a crime, that individual is required to report on their own behalf.

#### Penalties for Failure to Report

Covered individuals are subject to civil money penalty and exclusion sanctions for failure to meet the reporting obligations of the statute. A covered individual who fails to report is subject to a civil money penalty of up to \$200.000 and may be excluded from participation in Federal health care program. If by failing to report the individual exacerbates the harm to the victim or results in harm to another individual, the allowed civil money penalty is increased to up to \$300,000.

## **Timing of Reports**

If the events that cause the reasonable suspicion result in serious bodily injury, the report must be made immediately after forming the suspicion but not later than two hours after forming the suspicion. If the events that cause the suspicion do not result in serious bodily injury, the individual shall report the suspicion not later than 24 hours after forming the suspicion.

Formation of a reasonable suspicion of a crime may occur at the time of the event or after the event giving rise to the reasonable suspicion. Covered individuals may form a reasonable suspicion of a crime at different times based on the same event. The formation of a reasonable suspicion is what triggers the reporting requirement.

Survey Agency Recommendations and Implementation:

a. Surveyors may review submitted reports to determine whether the report was submitted in a timely manner.

# Process for Reporting to the IDOH

There is a prescribed form for reporting a reasonable suspicion of a crime against a resident to the IDOH. The IDOH created a *Reasonable Suspicion of a Crime Against a Resident Form* to be used by covered individuals to report to the IDOH a reasonable suspicion of a crime against a resident or to report retaliation by a facility for reporting of a crime. The form is posted on the *Reporting a Reasonable Suspicion of a Crime Against a Resident* website at <a href="https://www.in.gov/health/files/Reporting">https://www.in.gov/health/files/Reporting a Crime Form - February 8 2013.doc</a>. This form is not to be used by consumers to file a complaint against a facility or by facilities to report a reportable incident.

The following are ways for covered individuals to report a reasonable suspicion of a crime to the IDOH:

1. Email the report to the IDOH: Email address for incident/crime reports to incidents@isdh.in.gov.

- 2. Fax the report to the IDOH: Fax number for incident/ crime reports to (317) 223-7494.
- 3. Call the IDOH [not the preferred reporting method]:
  - Complaint / Incident report line: (800) 246-8909 [available during state business hours]
    - When calling the complaint / incident report line, you will be transferred to an intake person in the complaint/ incident reporting program. If there is not an intake person available to take the call, the call will go to the report line secure voicemail.
  - Complaint / Incident report line secure voicemail: (317) 233-5359
    If the complaint / incident report line is busy, you may call the voicemail line and leave the report information.
- 4. During non-state business hours, you may call the after-hours number: (317) 233-8115.

# What information should be included in the report

Regardless of the method of reporting, the following information should be included if applicable and known by the individual when reporting a reportable incident or suspected crime against a resident. The *Reporting a Crime Against a Resident Form* may be used for this purpose.

- Covered individuals submitting the report
- Facility name
- Facility address
- Facility city, state, and zip code
- Person making the report and title
- Date and time of the incident
- Residents involved, room number, age and diagnosis
- Staff involved and title (professional license number or aide registry number)
- Brief description of incident
- Type of injury / injuries
- Immediate action taken
- Preventative measures taken

# Reporting to Local Law Enforcement Agency

Regulations require covered individuals to report a reasonable suspicion of crime directly to their law enforcement entity. The law specifically states "law enforcement entities for the political subdivision in which the facility is located" which suggests the local law enforcement entity. For most facilities, there will be two local law enforcement entities with responsibilities for investigation of potential criminal activity – the County Sheriff and local police agency (City Police Department or Town Marshall). An individual may therefore fulfill their reporting requirement by reporting to either of these local law enforcement entities.

The IDOH encourages discussions between the facility and local law enforcement entities to determine a reporting process for that facility. The two local law enforcement entities may wish to designate a single source for reporting and provide that contact information. Facilities should then provide that contact information to covered individuals.

The individual's responsibility is to report a reasonable suspicion of a crime to the local law enforcement entity. It is up to the local law enforcement agency to then determine an appropriate criminal investigation. The facility and individual should cooperate and assist with the local law enforcement entity in any investigation subsequent to the reporting of a reasonable suspicion of a crime.

The IDOH has provided information about the reporting requirements to the Indiana's Sheriffs' Association and the Indiana Association of Chiefs of Police. Those associations in turn provided the information to their members throughout the state so that they are aware of the reporting requirement and anticipate communication from local health care facilities about a reporting process.

The IDOH notes that there are other law enforcement entities with local jurisdiction to include the local prosecutor, Indiana State Police, and Indiana Office of Attorney General. The local prosecutor is generally not an entity with immediate response capability like local police or county sheriffs. The Indiana State Police and Indiana Office of Attorney General are generally considered to be state law enforcement entities and not located within the political subdivision of the location of the facility. The IDOH has provided information about the reporting requirement to the Indiana Office of Attorney General for coordination with state and local entities.

Survey Agency Recommendations and Implementation:

a. the IDOH recommends that facilities post information in a common area for covered individuals providing contact information for the local law enforcement agency and state survey agency. The IDOH has prepared a template of such a notice. The template can be found at https://www.in.gov/health/files/Notice\_under\_Affordable\_Care\_Act\_-August 31 2011.pdf

#### Multiple Reporting of Incidents

The law places the responsibility of reporting a reasonable suspicion of a crime against a resident on every covered individual. It is the responsibility of each covered individual to ensure their individual reporting responsibility is fulfilled. Even if an individual with a reasonable suspicion knows that a report of a suspected crime was submitted to the local law enforcement entity and state survey agency, the individual must either submit his or her own report or ensure that his or her report is accurately included as part of a multiple individual (joint) report.

While the covered individual maintains the ultimate responsibility for reporting, a single report may be submitted on behalf of multiple covered individuals. If an individual submits a report on

their own behalf and other individuals, the report should include the names of all individuals for whom the report is being submitted.

Survey Agency Recommendations and Implementation:

a. If the IDOH receives multiple reports on a single incident, the IDOH will process and investigate the allegation as a single complaint or incident.

#### Reporting of Retaliation by a Facility

The facility may not retaliate against an individual who lawfully reports a reasonable suspicion of a crime under Section 1150B. A long term care facility may not discharge, demote, suspend, threaten, harass, or deny a promotion or other employment-related benefit to an employee, or in any other manner discriminate against an employee in the terms and conditions of employment because of lawful acts done by the employee for making a report, causing a report to be made, or for taking steps in furtherance of making a report pursuant to the Act, or file a complaint or a report against a nurse or other employee with the appropriate state professional disciplinary agency because of lawful acts done by the nurse or employee for making a report, causing a report to be made, or for taking steps in furtherance of making a report pursuant to the Act.

To report retaliation by a facility against a covered individual for reporting a reasonable suspicion of a crime against a resident, the individual should report the incident to the IDOH using the same process as described above for the initial reporting of the suspicion of a crime.

Survey Agency Recommendations and Implementation:

a. The IDOH will investigate any allegation of retaliation through its survey process.

## **Long-Term Care Facility Responsibilities**

Long term care facilities must develop and implement written policies and procedures that:

- 1. Notify covered individuals annually of their report obligations;
- 2. Not retaliate against an employee who makes a report; and
- 3. Post conspicuous information about employee rights, including the right to file a complaint if a long term care facility retaliates against an employee who files a report.

The following in information and recommendations to long term care facilities concerning facility responsibilities:

1. **Determine Applicability:** Determine annually whether the facility received at least \$10,000 in Federal funds under the Act [referring to the Social Security Act] during the

preceding fiscal year. A facility that received at least \$10,000 must comply with provisions of the Act.

Survey Agency Recommendations and Implementation:

- a. Facilities potentially included within this regulation must have documentation showing that the facility annually determine the applicability of the Act to the facility.
- 2. **Notify Covered Individuals:** The facility must annually notify each covered individual of that individual's reporting obligation described in Section 1150(B). Survey Agency Recommendations and Implementation:
  - a. A facility covered by this regulation must annually notify each covered individual of that individual's reporting obligations. The IDOH expects that notice to be directed to each covered individual. A general notice posted in the facility does not meet the requirement. The facility shall maintain documentation of the notice to each covered individual.
  - b. While not required to be completed at one time, facilities will likely desire to provide notice to all covered individuals around the same time each year. Facility procedures should indicate a plan form providing notice to covered individuals. Surveyors may review facility policy and procedure for notice and review documentation for adherence to the policy.
  - c. As new covered individuals are added to the facility's staff, facilities are expected to provide individual notice within a reasonable period of time after the individual begins work at the facility. The IDOH expects the notice to occur as part of the orientation process and no later than the conclusion of orientation.
- 3. **Post Conspicuous Notice:** The facility must conspicuously post, in an appropriate location, a notice for employees specifying the employees' rights, including the right to file a complaint under this statute. The notice must include a statement that an employee may file a complaint with the IDOH against a long-term care facility that retaliates against an employee as well as include information with respect to the manner of filing such a complaint.

Survey Agency Recommendations and Implementation:

- a. State surveyors will ensure during a survey that an appropriate notice has been posted. The notice must be easily legible. Surveyors will review the notice to ensure that it includes a minimum the required information:
  - 1) Notice of requirement to report a reasonable suspicion of a crime in a long term care facility against a resident;
  - 2) Notice of who is required to report;
  - 3) Time requirements for reporting
  - 4) Employee's right to file a complaint under this reporting provision against a facility that retaliates against the employee for filing a complaint or report.
- b. The IDOH recommends that a facility post a notice with contact information as to where the report should be sent to include:

Indiana Department of Health
Applicable Local Law Entity or Entities

- c. The Notice must be provided in a "conspicuous" and "appropriate location".

  The IDOH expects the Notice to be located in an area or areas frequently utilized by employees and other required to report. Surveyors may review the location during a survey to ensure appropriate posting.
- 4. **Coordinate with Law Enforcement:** The facility must coordinate with the facility's State and local law enforcement entities to determine what actions are considered crimes in their political subdivision.

Survey Agency Recommendations and Implementation:

a. The facility must provide training to covered individuals as to what actions are considered crimes in their political subdivision. The facility must show documentation of efforts to coordinate the reporting with the local law enforcement entity or entities. The facility may want to consider inviting local law enforcement agencies to assist with the training of covered individuals. The facility may also want to coordinate with local law enforcement entity to establish a for and contact the training of covered individuals. The facility may also want to coordinate with local law enforcement entity to establish a form and contact information for reporting.

5. Review Adherence to Existing Centers for Medicare and Medicaid Services (CMS) and State Policies: The facility should review existing facility protocols and procedures to ensure adherence to existing CMS and State policies and procedures for reporting incidents and complaints. For example, nursing homes are already required to have policies and procedures in place to report abuse, neglect and misappropriation of resident property.

Survey Agency Recommendations and Implementation:

- a. Surveyors may review existing facility policies and procedures for adherence to CMS and State policies and procedures for reporting of incidents and complaints.
- 6. **Develop Policies and Procedures for Section 1150B:** The facility must develop and maintain policies that ensure compliance with Section 1150B, including the prohibition of retaliation against any employee who makes a report, causes a lawful report to be made, or takes steps in furtherance of making a lawful report pursuant to the requirement of the statute.

Survey Agency Recommendations and Implementation:

- a. Surveyors may review facility policies and procedures for policies and procedures that ensure compliance with Section 1150B. At the least, the IDOH would expect to see facility policies and procedures regarding:
  - i. A process for annually determining receipt of Federal funds in excess of \$10,000
  - ii. A process for providing annual notice to covered individuals
  - iii. Evidence of a plan for training covered individuals
  - iv. Steps that a covered individual must take to make a report to the IDOH and local law enforcement when the covered individual forms a reasonable suspicion of a crime (when to report, what to report, who to report to)
  - v. Steps taken to coordinate with local law enforcement regarding reporting and determination of crimes
  - vi. Information on where the posting of notice to employees regarding employee right to be free from retaliation for complying with the reporting requirement
  - vii. Prohibition of retaliation against an employee for making a report, causing a report to be made, or for taking steps in furtherance of making a report pursuant to the Act.
  - viii. Employment of an individual who has been determined to be excluded participation in the Federal health care program.

#### 7. Penalties Against a Facility for Non-compliance

Long-term care facilities are ineligible to receive Federal funds for any period that they employ an individual classified as an excluded individual under Sections 1150B(c)(10(B) or 1150B(c)(2)(B) of the Act.

Long-term care facilities are subject to civil money penalty and exclusion sanctions for retaliating against any employee who makes a lawful report, causes a lawful report to be made, or for taking steps in furtherance of making a lawful report pursuant to the statute.

#### **Effective Date and Implementation**

CMS issued its initial Survey & Certification Letter 11-30-NH on June 17, 2011, revised on August 12, 2011 and again on January 20, 2012 each letter had an immediate effective date. State survey agencies were to ensure that all appropriate staff members were fully informed within 30 days of the letter. The IDOH informed its surveyors and staff on the CMS letters and requirements.

#### **Additional Information**

The IDOH has created an updated *Reporting a Reasonable Suspicion of a Crime Against a Resident* website to reflect these changes and provide resources. The website is located at: <a href="https://www.in.gov/health/cshcr/health-care-facility-information-center/reporting-a-crime-against-a-resident-information-center/">https://www.in.gov/health/cshcr/health-care-facility-information-center/reporting-a-crime-against-a-resident-information-center/</a>.

Questions about this program advisory letter may be addressed to:

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