

NORTHCARE NETWORK

POLICY TITLE: Analytic Quality Management

REVIEW/REVISED:

POLICY EFFECTIVE DATE: May 1, 2006

January 23, 2007

BOARD ADOPTED: May 3, 2006

BOARD ADOPTED REVISION:

PURPOSE

To assure accurate reporting within the NorthCare Network of CMHSP and PIHP data including 837 encounters and data warehouse content.

DEFINITION

Accurate reporting is the timely submission of complete, validated data as defined by DCH requirements. Validated data means that file content has been reviewed and confirmed to be accurate either manually or via automated routines. Because the data warehouse is currently, and will be increasingly, the source of regional reporting, this implies that provider systems will reconcile in detail to data warehouse content at the consumer and service level.

POLICY

Local written procedures will be in place at all points within network processes where data quality can be impacted, points as identified by regional quality teams. Procedures will be reviewed as part of the biannual NorthCare site reviews.

PROCEDURES

I. Billing

Each billing department will implement a detailed billing manual at both the functional and local system level to assure stable and long-term quality billing completion, a manual to include:

- A. Service code set up and maintenance
- B. Consumer set up and maintenance (aligned with Access department)
- C. Provider set up
- D. Insurance / eligibility set up and monitoring
- E. Service activity entry
- F. Billing execution
- G. 837 encounter management (see Procedure II)
- H. Monthly & yearly cycle tasks
- I. Diagnosis set up and verification
- J. Hab Waiver service management
- K. Organizational communication (e.g., changes to clinical training due to new or modified billing procedures)

II. 837 Encounters

Each department responsible for submitting encounters will implement detailed operational procedures for identified business processes to ensure the encounter files are of sound quality:

- A. Key data audits: consumer identifiers, diagnosis codes, procedure codes, service codes, fund sources
- B. 837 file creation
- C. 837 file submission to NorthCare and/or MDCH
- D. 837 file balancing to internal systems
- E. 837 file balancing to DCH service-level control totals
- F. 837 file reconciliation to data warehouse services
- G. 837 file reconciliation to MUNCR and Sub-Element reporting

III. Data Warehouse Environment

Each department responsible for submitting provider system file extract to the data warehouse team will implement detailed operational procedures for identified business processes to ensure the extract files are of sound quality:

- A. Complete QI reporting per DCH guidelines
- B. Complete service reporting as required by DCH MUNCR and Sub-Element reporting guidelines
- C. Complete Entry to Care reporting to meet DCH Performance Indicator requirements

REFERENCES

- NorthCare / CMHSP Delegation Agreement (Attachment A to the subcontract)
- Joint Operation Agreement for Data Warehouse between Copper Country CMH, Gogebic CMH, Hiawatha Behavioral Healthcare, Northpointe Behavioral Healthcare Systems and Pathways including Attachment A
- PIHP Data Certification – Annual Attestation
- PIHP/MDCH Contract: Section 6.5.1 as amended August 13, 2003