



SALISH BHO

MANAGEMENT INFORMATION SERVICES POLICIES AND PROCEDURES

Policy Name: MANAGEMENT ATTESTATION OF ACCURACY OF DATA

Policy Number: 4.05

Reference: State Contract, 42 CFR 438

Effective Date: 8/2004

Revision Date(s): 07/2016; 3/2018

Reviewed Date: 12/2014; 7/2016; 06/2017; 03/2018

Approved by: Salish Executive Board

CROSS REFERENCES

- Policy: Corrective Action Plan

PURPOSE

To ensure that required data submitted to the State is complete and accurate.

DEFINITIONS

Management Certification: Federal regulations require that utilization data be certified by management prior to submission to the Department.

PROCEDURE

1. The Salish Behavioral Health (SBHO) Administrator certifies the accuracy of all data submitted to the State and ProviderOne.
2. Data is certified via email at the time of batch transmission and with a signed hard copy mailed to the State at the end of the month.
 - These processes provide SBHO Administration staff with the ability to ensure accuracy of data prior to submission to the State.

3. Only authorized values in client records as specified in the SBHO Data Dictionary are accepted into the database.
4. Clients identified as BHO clients are not allowed to be sent to DBHR until all required elements are completed.
5. Prior to any service/encounter information generation, all SBHO providers review and correct data. Providers are aware of the service encounter submission timelines.
 - SBHO IS Manager emails certification data to encounterdata@hca.wa.gov per the Encounter Reporting Guide. A month-end certification form is signed by the SBHO Administrator and mailed to ATTN: BHO Oversight Unit, PO BOX 45330, Olympia, WA 98504-5330.

MONITORING

This policy is a mandate by contract and statute.

1. This policy will be monitored through use of SBHO:
 - Annual Data Encounter Integrity reviews. These reviews ensure that encounter data submitted to the SBHO is documented in the clinical file and appropriate codes are used.
 - SBHO IS Attestation document transmitted via email, daily- with a monthly letter signed.
2. If a provider performs below expected standards a Corrective Action Plan will be required for SBHO approval. Reference SBHO Corrective Action Plan Policy