

Arizona Department of Health Services Office for Children with Special Health Care Needs Children's Rehabilitative Services Administration	<b>Effective Date: 03/02/2009</b> <b>Last Review Effective Date:</b> <b>02/11/2009</b>
<b>SUBJECT: Quality Management</b>	<b>SECTION: QM 1.6</b>

**SUBTITLE: Data Validation**

**POLICY:**

The Children's Rehabilitative Services Administration (CRSA) will ensure that ancillary information and data received from the Children's Rehabilitative Services (CRS) Contractor is accurate, timely, and complete by reviewing and evaluating the reported data for accuracy, completeness, logic, and consistency.

**DEFINITIONS:**

**Ancillary Data:**

Supplemental data used for program oversight other than encounter and eligibility files. (For example, the New Member Enrollment files). See the Office of Program Support, CRS Operations and Procedures Manual located at [http://www.azdhs.gov/phs/ocshcn/crs/crs\\_az.htm](http://www.azdhs.gov/phs/ocshcn/crs/crs_az.htm) for data validation procedures related to encounter and eligibility files.

**Error Rate:**

The number of errors divided by the number of values reported.

**Logic Check:**

A review of the data to look for logical inconsistencies. (For example, an enrolling visit that occurs before the member was born)

**Provider**

A CRS subcontractor who provides CRS covered services to a member.

**Provider Profiling:**

Information aggregated to the provider level.

**Range Check:**

A review of the data to look for values that are out of range. (For example, an out of range value for a field that is defined as "Yes" or "No" would be any value other than "Yes" or "No.")

**Contractor:**

An entity contracted with CRSA under a capitation arrangement to provide CRS covered services directly or through subcontractors to CRS members.

**STANDARD:**

CRSA will ensure that the CRS Contractor has written policies and procedures to ensure the following: (See Arizona Health Care Cost Containment System (AHCCCS) Medical Policy Manual Section 910-8):

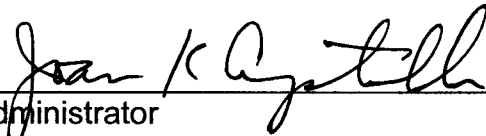
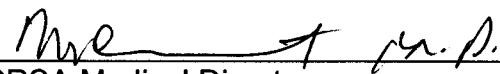
- a) Information/data received from providers is accurate, timely, and complete.
- b) Reported data is reviewed for accuracy, completeness, logic, and consistency, and the review and evaluation processes used are clearly documented.
- c) All member and provider information is kept confidential if protected by Federal and State law, regulations, or policies.
- d) The CRS Contractor's staff and providers are kept informed of at least the following:
  - i) Quality Management/Performance Improvement (QM/PI) requirements, activities, updates, or revisions.
  - ii) Study and PIP results.
  - iii) Performance measures.
  - iv) Profiling results.

**PROCEDURES:**

- 1) CRSA will conduct monthly validity checks on ancillary data submitted by the CRS Contractor. The validity checks include the following:
  - a) Performing checks for missing data.
  - b) Performing logic and range checks.
  - c) Verifying correct data formats in fields (For example, text in text fields or correct date formats in date fields).
  - d) Performing checks for duplicate observations.
  - e) Reviewing changes from the previous to current submission.
- 2) CRSA will allow an error rate of up to 5% for ancillary data submissions.
- 3) If the error rate is above the standard set by CRSA, the CRS Contractor is required to resubmit corrected data.
  - a) Resubmission timeframe is within five (5) business day.
  - b) Data resubmissions must be sent to the CRSA Division of Compliance.
- 4) CRSA will review error reports in the CRSA QM Committee meetings on a quarterly basis.
- 5) If deemed necessary, corrective action plans (CAP) may be requested of the CRS Contractor during the CRSA QM Committee meetings. If the CRS Contractor's CAP requirements do not show progress toward compliance within

the timeline of the CRSA approved CAP, a notice to cure or sanction may be issued in accordance with the Arizona Department of Health Services' contract the CRS Contractor.

- 6) CRSA Annual Administrative Review:
  - a) CRSA will evaluate the number of data resubmissions during the Annual Administrative Review.
  - b) CRSA will conduct data validation via medical record samples at least once a year.
  - c) CRSA will review the CRS Contractor's data policies and procedures.

Approved:	Date:
 CRSA Administrator	<u>3/5/09</u>
 CRSA Medical Director	<u>3/4/09</u>