BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY
POLICIES AND PROCEDURES MANUAL

Chapter: 2	Continuous Quality Improvement		
Section: 1	Data Integrity		
Topic: 4	Quality Improvement and Treatment Episode Data Set Reports		
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to send Quality Improvement (QI) and Behavioral Health Treatment Episode Data Set (BH-TEDS) reports to Mid-State Health Network (MSHN) for submission to the Michigan Department of Health and Human Services (MDHHS) in a timely manner as indicated in the Medicaid Managed Specialty Services and Supports Contract respectively.

Purpose

This policy and procedure is established to provide a clear and defined process for sending QI and/or BH-TEDS reports to the MSHN and for matching Residential Living Arrangements (RLA) in BH-TEDS records and the state of Michigan's Waiver Supports Application (WSA) profiles of consumers Living Arrangements.

The MDHHS QI and BH-TEDS reports specific consumer level demographic data elements (i.e.; disability designation, living arrangements, employment, education, health and other conditions for all population and proxy measures) required by MSHN in order to evaluate and assess the specific population groups being served by the public mental health and substance use disorder treatment system. The data is used to develop statewide aggregate data reports for the purposes of public accountability, contract management, and quality assurance.

BABHA is part of a Habilitation Supports Waiver (HSW) Residential Living Arrangement Validation Project in conjunction with MSHN and MDHHS. The RLA codes are part of the HSW capitation payment calculations and are required to be updated once per fiscal year.

Education Applies to:

☐ All BABHA Staff
☒ Selected BABHA Staff, as follows: <u>Management Staff, Quality Management Staff</u>
☐ All Contracted Providers: ☐ Policy Only ☐ Policy and Procedure
☒ Selected Contracted Providers, as follows:
  ☐ Policy Only ☒ Policy and Procedure
☐ Other:

Definitions

N/A

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Procedure

1. The MDHHS QI and BH-TEDS report is produced and submitted at least monthly. The submissions are due no later than the 17th of each month unless otherwise specified by MSHN. If the 17th falls on a weekend, it must be submitted prior to the 17th. The MDHHS QI/BH-TEDS file is created and downloaded from the electronic record. The QI/BH-TEDS file should be created from the same time period that the 837 files were generated for.

2. The MDHHS QI/BH-TEDS admission and discharge files are created and downloaded from the electronic record using the process outlined from the vendor. Refer to the attachments, BABH Reporting: Phoenix File Build, and Submission Documentation for specific steps on how to create and download the QI/BH-TEDS file to the MSHN portal.

3. For the validation of consumer Residential Living Arrangements in BH-TEDS and the WSA:

   a. BABHA receives an RLA code list annually from WSA data from MSHN as part of the Habilitation Supports Waiver Residential Living Arrangement Validation Project.

   b. BABHA staff will review the RLA code list and verify the address is correct and make corrections in the electronic medical record as necessary

   c. BABHA staff will send the RLA code list back to MSHN by the deadline identified with needed corrections noted.

4. Compliance with completion of BH-TEDS records is monitored through the following:

   a. Business rules/logic embedded in BABH's electronic health record block users from some BH-TEDS reporting errors and prompt the user to make certain corrections before completing a BH-TEDS record. Users are not allowed to sign the clinical documents in the electronic health record which trigger BH-TEDS records if certain fields are not completed or have illogical responses.

   b. BH-TEDS Error Response Files are generated from the PIHP Reporting menu in BABH's electronic health record each month. The response files are reviewed by the BABH Help Desk Analyst and if errors are present, those that can be resolved without case holder intervention are corrected. Errors requiring case holder intervention are sent to the case holder at BABH or one its contracted primary service providers as appropriate. Correction of errors is confirmed by generating another response file. The process is repeated until the file is satisfactory for reporting to the PIHP.

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   c. The PIHP provides feedback to BABH regarding consumers who have/no longer have encounters reported by BABH that do not have the expected BH-TEDS records. BABH makes the necessary corrections to BH-TEDS fields (either through a batch process if a system level error or through the case holder if consumer-specific) and re-submits files as necessary to the PIHP.

   d. BABH has designed and can generate custom reports as necessary to monitor for other error types as necessary, such as consumers with service histories but no BH-TEDS record.

Attachments
N/A

Related Forms
RLA-WSA Log

Related Materials
PCE Vendor Documentation
Mid-State Encounter Warehouse User Guide
MDHHS Managed Specialty Services and Supports Contract
Coding Instructions for Michigan Behavioral Treatment Episode Data Sheet (BH-TEDS)

References and/or Legal Authority
MDCH Managed Specialty Services and Supports Contract

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SUBMISSION FORM

AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
V. Rossman M. Wolber D. McAllister S. Adamczyk	J. Pinter	02/12/13	Revision	Added RCA TEDS Reports to P/P, member health conditions as part of QI reports, and updated to current practices (previously C09-S01-T04)
S. Gettel J. Richmond B. Kish	J. Pinter	04/23/17	Revision	Removed CareNet Language, added BH for Behavioral Health and updated language for Michigan Dept of Health and Human Services.
S. Gettel	J. Pinter	1/16/18	No changes	Triennial Review
S. Holsinger	J. Pinter	07/19/19	Revision	Addition of WSA and BH-TEDS RLA validation process