


<b>CHAPTER</b> Information Management	<b>CHAPTER</b> 07	<b>SECTION</b> 002	<b>SUBJECT</b> 10
<b>SECTION</b> Data Management		<b>DESCRIPTION</b> Integrity of Electronic Data: OASIS	
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**APPLICATION:**

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers			

**POLICY:**

Lapeer County Community Mental Health (LCCMH) data in Optimal Alliance Software Information System (OASIS) will be accurate, entered in a timely manner, and documented in compliance with regional, state and federal requirements. Best practice procedures will be employed to ensure the safety, integrity and quality of information in OASIS.

**STANDARDS:**

- A. All responses to the Freedom of Information ACT, HIPAA Privacy regulations, confidentiality and any other applicable policies and procedures apply to the data and files associated with OASIS.
- B. Users will follow standards and expectations for documentation in the electronic health record that supports accurate, complete, and timely data entry.
- C. The accuracy, comprehensiveness and timeliness of data in OASIS shall meet the requirements of the Michigan Department of Health and Human Services (MDHHS), External Quality Review (EQR), CARF and any other necessary regulatory or accrediting organizations.

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- D. LCCMH data staff, will monitor the accuracy, completeness and timeliness of the data in OASIS.
- E. All documentation will comply with the standards of administrative and clinical record keeping as specified in the Medicaid Provider Manual, MDHHS Administrative Rules, Michigan Mental Health Code and other policies and guidelines set forth by the Region 10 Prepaid Inpatient Health Plan (PIHP).
- F. Service Activity Logs (SALS) for direct operated programs will be signed in accordance with LCCMH clinical documentation requirements (LCCMH Form #339) and should be reviewed by supervisors for accuracy as needed and by billing personnel through auditing and error reports.
- G. Claims should be entered or imported as denoted by Lapeer CMH designated process and should pass through system edits as part of the claims processing cycle.
- H. All data entries are dated by month, day and year. Many entries in the individual chart contain the author's identification by name and credentials. The author identification may be handwritten signature (if document is scanned) or by a unique electronic identifier/signature. It is expected all documentation is signed by the author at time of completion.
- I. All data entries in OASIS, involving authorized services requiring specific times, will indicate actual beginning and ending times of the service provided. Exceptions may include per diem services or equipment, etc.
- J. Individual Plans of Service (IPOS) are not effective (valid) until the individual/guardian has provided a signature or in rare circumstances, the guardian has given verbal consent. Therefore, documentation must be completed prior to effective date.
- K. Delayed entries are acceptable within a reasonable time period after the service, for the purposes of clarification, error correction, the addition of information not initially available, on holidays or weekends, or if certain unusual circumstances prevented the generation of the document at the time of service.

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- L. All staff who create, handle, view or modify personal health information that is part of the clinical record have a responsibility to ensure the information is as accurate as possible and belongs in the record. Any staff suspecting a certain document or piece of information does not belong in the record should notify their supervisor. In addition, if documents or information appears to be missing, it is the responsibility of the primary case holder to attempt to obtain this information or provide documentation of its absence.

## **PROCEDURES:**

### **Staff/Supervisors**

- A. Enter Information and data into OASIS after interaction with the individual or non-face to face activity is completed. When efficient, data shall be entered directly rather than entered on paper forms and then transferred to the system.
- B. Will be allowed to perform the above tasks related to information in OASIS if they are users authorized to enter, alter or remove data who are trained in the appropriate standards and procedures.
- C. Will use OASIS as the primary means to access and retrieve information, and capture data. Clinical staff are assisted in proper documentation by the alerts and notices within OASIS, by free access to "how-to" documents in the help menu and by support of supervisory and data staff.

### **Data and Billing Staff**

- A. Maintains list of acceptable procedure codes and location codes for staff to utilize.
- B. Reviews data to ensure accuracy, completeness and timeliness.
- C. Follows up with staff as needed with data errors or questions.
- D. Submits encounter data to the PIHP.
- E. Submits Behavioral Health Treatment Episode Data Set (BH-TEDS) data to the PIHP

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## DEFINITIONS:

- A. Behavioral Health Treatment Episode Data Set (BH-TEDS): Data record collected per episode of care and reported to the Michigan Department of Health and Human Services on an on-going basis.
- B. Information System: The network of computers, hardware and software used to categorize, store, retrieve, copy, protect, analyze and manipulate data, including OASIS modules of clinical and administrative operations.
- C. Integrity of Data: A condition of OASIS and related data which is compiled, utilized and analyzed by the Information System that is believed to be accurate, valid and is a result of processes employed through the Data Management Department to protect the accuracy, security, comprehensiveness and standardization of the data and electronic information.
- D. OASIS: Optimal Alliance Software Information System – the certified electronic health record utilized by the LCCMH and contract providers.
- E. Protected Health Information (PHI): Individually identifiable health information (1)(i) transmitted by electronic media; (ii) maintained in any medium described in the definition of electronic media or (iii) transmitted or maintained in any other form or medium. (2) Excludes individually identifiable health information in (2)(i) Education records covered by the Family Educational Right and Privacy Act, as amended 20 U.S.C. 1232g; and (ii) records described at 20 U.S.C. 1232g(a)(4)(B)(iv).
- F. User: Individual having access to OASIS as staff, contractor, temporary employee, or other person given some level of access to OASIS information.

## REFERENCES:

- HIPAA Privacy Rule, 45 CFR Part 164 (164.501), Part 160 (160.130)
- Mental Health Code, Act 258 org 1974, 330.114 (section 141)
- LCCMH Form #339 Documentation Requirements

SK:mgr