

APPROVAL CRITERIA AND ERROR TOLERANCE LEVEL

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
CALIFORNIA EMERGENCY DEPARTMENT AND
AMBULATORY SURGERY PATIENT DATA REPORTING MANUAL, FIFTH EDITION**

APPROVAL CRITERIA

Section 97247

(a) The following requirements must be met for a report to be approved by the Office:

(1) Complete transmittal information must be submitted with each report.

(2) The facility identification number stated in the transmittal information must be consistent with the facility identification number on each of the records in the report.

(3) The report period stated in the transmittal information must be consistent with all of the records in the report.

(4) The number of records stated in the transmittal information must be consistent with the number of records contained in the report.

(5) All records required to be reported pursuant to 97213(a), must be reported.

(6) The data must be reported in compliance with the format specifications in Section 97215.

(7) For report periods beginning on or after January 1, 2015, all records must contain a valid Principal Diagnosis.

(8) The data must be at, or below, the Error Tolerance Level specified in Section 97248.

(9) The data must be consistent with the reporting facility's anticipated trends and comparisons, except as in (A) below:

(A) If data are correctly reported and yet fail to meet approval criteria due to inconsistency with the reporting facility's anticipated trends and comparisons, the reporting facility may submit to the Office, in writing, a detailed explanation of why the data are correct as reported. The Office may determine, upon review of a written explanation, that it will approve a report.

(10) Each report must contain only one type of record as specified in Subsections (1), (2), and (3) of Subsection (a) of Section 97213.

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DISCUSSION

Only one type of record should be submitted in each report file. For example, if a hospital has both an Emergency Department and an ambulatory surgery department, they will submit two separate report files: a file with all ED records and a file with all AS records.

If a report for one type of record is accidentally submitted for another type of record, the data file needs to be resubmitted under the correct record type. Problems should be brought to the attention of your analyst.

(b) The Office shall approve or reject each report within 15 days of receiving it. The report shall be considered not filed as of the date that the facility is notified that the report is rejected. Notification of approval or rejection of any report submitted online shall not take more than 15 days unless there is a documented OSHPD report submission system failure.

DISCUSSION

A data report may not be approved due to any of the following circumstances:

- Data did not pass Transmittal edit program; refer to the Trouble Shooting Guide for Transmittal Errors on the OSHPD web site for information.
- The percentage of errors within the data is not within the Error Tolerance Level (ETL); refer to individual edit programs for explanation of edits.

If any of the above conditions are present, the data report may not be approved and the reporting facility may be notified that its data report is delinquent if it is past the due date. The facility will accrue \$100 per day in penalties until the conditions for approval are met or an extension request is received and/or granted.

For a detailed listing of the edits, view the individual edit programs within the “Error Reports” option located on the online submission system’s main menu. Review both the Summary and Detail reports of each program.

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ERROR TOLERANCE LEVEL

Section 97248

(a) The Error Tolerance Level (ETL) for data reported to the Office shall be no more than 2%. Errors as defined in Subsection (j) of Section 97212, must be corrected to the ETL.

DISCUSSION

If more than 2% of all records submitted for the reporting period have errors, the records must be corrected to below 2%.

Records that are in error but are below the 2% ETL will be accepted and the defaults in (c) and (d) will apply.

(b) Not Applicable to ED or AS.

(c) For encounters occurring on and after January 1, 2015: For emergency care data reports that do not exceed the Error Tolerance Level specified in Subsection (a) of this Section, defaults will be as shown in Table 2.

Table 2: Emergency Care Data Record Defaults	
Invalid Data Element	Default
Service date	delete record
All other data elements	blank or zero

DISCUSSION

If the Service Date is invalid as reported and left uncorrected, the entire emergency care data record will be deleted.

If any other data element is invalid as reported and left uncorrected, the data field will become blank or be zero-filled, whichever is applicable.

These defaults are applied after data approval during OSHPD's Data Warehouse standardization process.

(d) For encounters reported on and after January 1, 2015: For ambulatory surgery data reports that do not exceed the Error Tolerance Level specified in Subsection (a) of this Section, defaults will be as shown in Table 3.

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Table 3: Ambulatory Surgery Data Record Defaults	
Invalid Data Element	Default
Service date	delete record
All other data elements	blank or zero

DISCUSSION

If the Service Date is invalid as reported and left uncorrected, the entire ambulatory surgery data record will be deleted.

If any other data element is invalid as reported and left uncorrected, the data field will be defaulted to blank or the field will be zero-filled, whichever is applicable.

These defaults are applied after data approval during OSHPD's Data Warehouse standardization process.