GREATER COLUMBIA BEHAVIORAL HEALTH, LLC. BH-ASO

Information Systems

Document Type: ¹	x Policy & Procedure _	_ Process Guideline	Adopted: Last Reviewed:	1/1/2019 6/3/2024
	Plan	System Description	Retired:	
Revisions: 2/28/2020, 12/13/2021, 3/3/2022, 6/3/2024				
Document Scope: (app	olies to Policy & Procedure only)			
The requirements herein apply only to the GCBH BH-ASO Central Office and its functions.				
\underline{X} The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers ² .				
providers must h	s herein apply both to GCBH BH-A ave internal documents outlining the elate to actions for which network p	eir processes for implemer		

PURPOSE: To clarify responsibility for Information Systems (IS) within Greater Columbia Behavioral Health (GCBH BH-ASO).

DEFINITIONS

I. None.

POLICY

- A. The Provider Network and the GCBH BH-ASO Regional Office are each responsible for the functionality of the information system at their location. This includes hardware and software support, maintenance, network security, and replacement. This policy addresses:
 - a. Data to be reported.
 - b. Efforts to ensure the confidentiality of all sensitive and protected information.
 - c. Support for efficiency of IS purchases and sharing of technical expertise.
 - d. Flexibility to meet various needs.
 - e. Identification and/or clarification of areas of IS responsibility.

PROCEDURE

- 1. GCBH BH-ASO Regional Office:
 - 1.1. Ensures timely submission of required data to the Washington State Health Care Authority (HCA), Managed Care Organizations (MCOs) and/or The Provider Network as appropriate.
 - Provides consultation and recommendations regarding required GCBH BH-ASO and HCA Data Dictionary elements, contractual and legal requirements.
 - 1.3. Develops mechanisms and procedures to improve the consistency, accuracy, and timeliness of data collected by GCBH BH-ASO.
 - 1.4. Develops and monitors QA/QI standards (i.e., software, security, etc.) for GCBH BH-ASO Information Systems.
 - 1.5. Is the central repository for GCBH BH-ASO data.

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- 1.6. Develops new systems that take advantage of technology to enhance the administrative functions of the GCBH BH-ASO Regional Office.
- 1.7. Responds to ad hoc requests for information from HCA, or MCOs.
- 1.8. Provides GCBH BH-ASO Regional Office staff with flexible reporting tools, both ad hoc and predesigned.
- 1.9. Provides the Provider Network with the ability to retrieve reports from the central repository regarding their provider's data.
- 1.10. Provides Provider management and their MIS staff with the ability to retrieve reports from the central repository on their own data for reconciliation or other purposes.
- 1.11. Ensures the confidentiality of all information in the central repository in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH).
- 1.12. Integrates inpatient and outpatient information streams.
- 1.13. Maintains the integrity of all data files by ensuring that data meets validation criteria as well as relational integrity criteria.
- 1.14. Explores how to most efficiently transmit data and reports over this wide geographic area for both the short and long term.
- 1.15. Develops and maintains the GCBH BH-ASO Internet Web Site.
- 1.16. Collects GCBH BH-ASO data and assures that records are unduplicated across all provider data streams.
- 1.17. Provides a means for authorized provider staff to verify and determine Medicaid eligibility for services to be quickly and accurately determined.
- 1.18. Integrates financial, service, demographic, and other data for analysis.
- 1.19. Prepares GCBH BH-ASO to meet anticipated future data needs.
- 1.20. Conducts or arranges bi-annual security review of the information systems within GCBH BH-ASO.
- 1.21. Develops management reports to be utilized by:
 - 1.21.1. GCBH BH-ASO Utilization Management Services (for tracking and monitoring of crises).
 - 1.21.2. GCBH BH-ASO Quality Management Oversight Committee (QMOC) in the synthesis and analysis of trends.
 - 1.21.3. GCBH BH-ASO Regional Office staff and the Provider Network in capacity management.
- 1.22. GCBH BH-ASO Regional Office IS staff assists in planning and conducting of Provider Contract review.
- 1.23. Conducts other IS duties as defined by the GCBH BH-ASO Executive Committee.

2. Provider Network

- 2.1. Provide technical training to provider staff regarding IS and required GCBH BH-ASO and HCA Data Dictionary elements.
- 2.2. Provide technical training for "standard" software.
- 2.3. Maintain awareness of GCBH BH-ASO MIS Committee activities.
- 2.4. Conduct local problem resolution.
- 2.5. Implement GCBH BH-ASO standards.
- 2.6. Provide local infrastructure enhancement.
- 2.7. Provide local system maintenance, support, and replacement including maintaining network security standards.
- 2.8. Maintain functionality of the information system at their location.
- 2.9. Ensure timely and accurate submission of required data to the GCBH BH-ASO Regional Office.
- 2.10. Develop new systems that apply technology to reduce costs, enhance the delivery of services, and integrate GCBH BH-ASO -wide information standards.
- 2.11. Operate information systems that gather and report data.
- 2.12. Maintain up-to-date demographic information, including but not limited to address and telephone number to ensure compliance with HCA survey requests.
- 2.13. Maintain data banks on all individuals served (active and inactive).
- 2.14. Collect and submit required client, staff, and encounter data per GCBH BH-ASO Contract.

MIS Committee:

- 3.1. Recommends refinement of IS standards.
- 3.2. Pursues efficiency of purchase and shared expertise.
- 3.3. Monitors IS quality assurance and quality improvement implementation.
- 3.4. Conducts other duties as assigned by the GCBH BH-ASO Executive Committee.

Current Minimum Technical Standards

- 4. Data Interchange Standards:
 - 4.1. Provider software is capable of extracting all required information as described in the GCBH BH-ASO Data Dictionary, BHDS Supplemental Data Guide and HCA Service Encounter Reporting Instructions.
 - 4.2. Provider software is able to format extracted information as described in the GCBH BH-ASO Data Dictionary, BHDS Supplemental Data Guide and HCA Service Encounter Reporting Instructions.
 - 4.3. Provider is able to encrypt and transmit data for processing by GCBH BH-ASO in formats as supported by GCBH BH-ASO.

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4.4. When purchasing new hardware/software, the entity is encouraged to purchase products that meet current industry standards and are compatible with products utilized within GCBH BH-ASO.

5. Security:

5.1. The GCBH BH-ASO Network and HIPAA Security Policies/Procedures contain the minimum requirements necessary for protecting the integrity and confidentiality of GCBH BH-ASO data and for protecting information technology resources.

Data Requirements:

6.1. GCBH BH-ASO Data Dictionary and BHDS Supplemental Data Guide contain the core data elements required by GCBH BH-ASO. Revisions are approved by the GCBH BH-ASO Executive Committee or as mandated by changes in the HCA data requirements.

7. Quality Assurance:

- 7.1. GCBH BH-ASO IS data integrity process identifies potential sources of error, which provides for timely correction.
- 8. Integration with GCBH BH-ASO QM Program: The GCBH BH-ASO Information System is a key component of the GCBH BH-ASO Quality Management infrastructure. IS data within data management reports, QRT reports, Ombuds reports, QMOC review and analysis, clinical review, and contract audits provides valuable information necessary for tracking of performance measures and making informed management decisions. Feedback is provided to management, QMOC, MIS Committee, Provider Network, and funding sources.
- 9. Community Integration/Cross System Relationships: Maintaining a minimum regional standard for IS functionality enables GCBH BH-ASO to share data electronically, where appropriate, in order to more effectively and efficiently serve GCBH BH-ASO individuals and to communicate efficiently with allied systems of care. Where possible and appropriate, there is coordination of service provision to reduce duplication of effort and facilitate the appropriate utilization of system-wide services.
- 10. Cost Analysis: The Provider Network is fiscally responsible for maintaining their own information systems, and funding is made available for this purpose. Regional Office roles and responsibilities are anticipated to be covered by the Regional Office budget.

Karen Richardson or Sind Saunders, Co-Directors

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Date