County of Los Angeles

OLIVE VIEW-UCLA MEDICAL CENTER HEALTH INFORMATION MANAGEMENT SERVICES POLICY & PROCEDURE

NUMBER: 2040 VERSION: 2

SUBJECT/TITLE: HIMS - OSHPD ERRORS AND CORRECTIONS

POLICY: Pursuant to Subdivision (g) of section 128735, California Health and Safety Code, hospitals are required to report data elements for each inpatient discharged from the hospital. The Patient Discharge Data Section (PDDS) of Office of Statewide Health Planning and Development (OSHPD) is responsible for collecting data on all inpatients discharged from all licensed hospitals in California, correcting errors it finds in the data, and making the data available to the public through standard publications and electronic data files.

PURPOSE:

DEPARTMENTS: HEALTH INFORMATION MANAGEMENT SERVICES

DEFINITIONS:

PROCEDURE: A. REPORTING REQUIREMENTS

- 1. Inpatient Discharge Data will be filed with the Office of Statewide Health Planning and Development. Semiannually for Inpatient data and quarterly for Emergency Room and Ambulatory Surgery data, or at an interval specified by OSHPD.
- 2. Designated Health Information Management Coordinator will be responsible for sending the file via the internet to OSHPD.
- 3. Pursuant of subsection (a) of section 128700, California Health and Safety Code, a civil penalty of one hundred dollars (\$100) a day for each day the filing of the discharge is delayed will be assessed. For purpose of initial submission of data or for correction of data, a hospital may request an extension of the reporting due date. A maximum of 14 extension days per reporting period may be granted.
 - a.If it becomes apparent that we cannot meet the submission deadline, the designated Health Information Management Coordinator will request an extension via

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OSHPD website.

B. REQUIRED REPORTING DATA ELEMENTS

The discharge data set includes, but not limited to, the following data elements:

- Patient's type of care
- Hospital Identification Number
- Date of Birth
- Sex
- Race/Ethnicity
- Zip Code
- Admission Date/Service Date
- Source of Admission/Site (Inpatient only)
- Source of Admission/Licensure of site (Inpatient only)
- Source of Admission/Route of Admission (Inpatient only)
- Type of Admission (Inpatient only)
- Discharge Date (Inpatient only)
- Principle Diagnosis
- Principle Diagnosis and whether the condition was Present on Admission (Inpatient only)
- Other Diagnosis
- Other Diagnosis and whether the Condition was Present on Admission (Inpatient only)
- Principle Procedure Code
- Other Procedure Date
- External cause of morbidity
- Other E-Codes
- Patient's Social Security Number
- Disposition of Patient
- Total Charges
- Abstract Record Number
- Do Not Resuscitate (DNR) Order (Inpatient only)
- Expected Source of Payment/Payer Category
- Expected Source of Payment/Type of Coverage
- Expected Source of Payment/Plan Code Number
- Principle Language Spoken

C. TYPES OF OSHPD ERRORS

- 1. The individual Facility Edit Detail Report is available on the OSHPD website.
- 2. The designated Health Information Management Coordinator will sort errors and distribute to Medical Records Coding Supervisor,

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Finance Department and Patient Accounts for appropriate corrections.

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Examples of errors:

- Invalid Diagnosis Code
- Invalid Procedure Code
- Missing E-Code(s) (place of occurrence and/or how it happened).
- Missing Social Security Number and/or invalid SS#
- Missing Hospital Charges
- Questionable DRG's
- Invalid level of care
- Questionable date of birth
- Missing Sex
- Questionable Payment Source
- Questionable Re-Admissions
- Invalid and/or missing zip codes
- Invalid principle language spoken
- 3. The Designated Health Information Management Coordinator or staff, will refer to the edit OSHPD description handbook for the edit flag description definitions and make all corrections in the Medical Records Abstracting Application of the Hospitals Information System.

D. RETURN REPORTS/CORRECTIONS

The designated Health Information Management Coordinator will be responsible for sending the corrected file via the internet.

The Hospital data is submitted as "test" until all errors are corrected as the data is approved for formal submission.

E. OSHPD UPDATES

The designated Health Information Management Coordinator will coordinate updates to the Electronic Health Record dictionaries with the Information Systems Analyst responsible for Finance and Patient Accounts.

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MIRCAL will email the approval of data submission letter to the designated Health Information Management Coordinator. The letter is filed in the Health Information Management Administrative Office.

References:	
Approved by: Tillie Acosta (Medical Records Director I)	Date: 05/08/2019
Review Date: 12/01/2010, 05/08/2019	Revision Date:
Next Review Date: 05/08/2022	
Distribution: Health Information Management	
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