APPROVAL CRITERIA AND ERROR TOLERANCE LEVEL

NOTE: **The regulations are identified by bold and italics.**

The section number located at the top right corner of the first page of each regulation refers to the California Code of Regulations, Title 22, Division 7, Chapter 10, Article 8.

APPROVAL CRITERIA   **Section 97247**

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

(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 facility's anticipated trends and comparisons, the reporting facility may submit to the Department, in writing, a detailed explanation of why the data are correct as reported. The Department 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.

(b)   The Department 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 HCAI report submission system failure.

DISCUSSION

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

- Data did not pass the License edit program; Type of Care or Services shown on license has not been reported.

- Data did not pass Transmittal edit program; refer to the Trouble Shooting Guide for Transmittal Errors on the HCAI web site for information.

- The percentage of errors within the data is not below the established Error Tolerance Level (**ETL**).

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.

ERROR TOLERANCE LEVEL   **Section 97248**

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

DISCUSSION

Records that are in error but are below the 2% ETL will be accepted and the defaults in *(b)* will apply. Therefore, it is best practice to consider a goal of correction to zero errors. Choosing to leave flagged data uncorrected impacts the dataset. The defaults apply during the Data Warehouse standardization process.

(b) For discharges occurring on and after January 1, 2015: For hospital discharge abstract data reports that do not exceed the Error Tolerance Level specified in Subsection (a) of this Section, defaults will be as shown in Table 1.

Table 1: Hospital Discharge Abstract Data Record Defaults

Invalid Data Element	*Default*
Admission date	*Delete record*
All other data elements	*Blank or zero*

DISCUSSION

Critical Data Element: If the reported admission date is blank or invalid (such as February 31) and is not corrected by the hospital after it is identified by HCAI as an error, the entire discharge data record will be deleted.

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

(c) **Not Applicable to Inpatient.**
(d) **Not Applicable to Inpatient.**