OSHPD — Office of Statewide Health Planning and Development

MIRCal — Medical Information Reporting for California

Quick Notes

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Access to Safe, Quality Healthcare Environments that Meet California's Dynamic and Diverse Needs

IP Inpatient Discharges   **ED** Emergency Department   **AS** Ambulatory Surgery

Where Did My Records Go?

In Quick Notes issue #44 published last year, we focused on the importance of correcting invalid procedures and procedure dates in order to prevent the procedure from being dropped from the record. In this edition, we will explore errors that result in the deletion of the entire record from your final published data set.

The following errors will result in record deletion: blank or invalid admission date, admission date that is after the discharge date, or admission date that is not reasonable (e.g. greater than 20 years before discharge date). During data standardization, records with admission date errors are removed from the facility's data set. (Data standardization is the process by which remaining errors are eliminated from the data set to prepare it for use.)

In 2015, 104 records were dropped from the patient discharge data file. This occurred due to simple date errors left on the final MIRCal data submission (applicable edit flags noted in parentheses):

- Blank admission date (S001): n=76
- Invalid admission date (S002): n=6
- Admission date is after discharge date (S009): n=19
- Admission date is not a reasonable date (S073): n=3

Please take a moment during each MIRCal data submission and review the date-related flags on your MIRCal *Standard Edit Detail* report. Upon your request, your assigned MIRCal analyst can run a special listing of these errors to facilitate corrections. The elimination of these errors may save your organization time in the end because the dropped records will cause discrepancies between the data you submit to MIRCal and the outcome reports you receive from OSHPD. If facilities correct these errors early in the MIRCal submission process, it may prevent data inconsistencies that would require facility time and resources to investigate.

All of your facility's records are important and valued by researchers and data users. The records deleted in 2015 had admission date errors that could have easily been corrected. It is important to take the necessary steps to ensure your data are reported in a way to preserve data integrity. Refer to Section 97248 of the MIRCal Regulations for a description of Error Tolerance Levels and default values.

Transmittal Errors

When looking at the results of your data submission, do you navigate to MIRCal's Main Error Summary first? Or do you click the Error Reports link, bypassing the valuable information on the Main Error Summary page?

When someone says, "I can't see my error reports," usually their data file has failed MIRCal's transmittal edit program, which is the initial validation check. OSHPD always recommends that you look at your Main Error Summary first. If your data file fails either the Transmittal Validation or the Licensing Check, the file will be rejected and will not be processed through the remaining MIRCal edit programs. In these instances, there will not be any error reports generated.

The Main Error Summary provides a detailed description of the transmittal failure. If more than one edit failed, then multiple descriptions are present. Please reference the Troubleshooting Guide for Transmittal Errors for assistance in identifying the cause of your particular error message and correcting your file. This document can also be found on the Manuals and Guides page.

Submission of New Inpatient Data Element Changes Begins in July

The eight inpatient data element changes previously discussed in Quick Notes issues 41, 42, 44, and 45 took effect with discharges occurring on or after January 1, 2017. Facilities will submit reports in accordance with the new requirements beginning July 2017.

These changes can be viewed in the Inpatient Data Reporting Manual and in Recently Approved Regulations. Quick Notes #45 also gives a comparative summary of the changes.

Please contact your assigned MIRCal analyst if you have any questions.

Designate the Correct Contact As Administrator

OSHPD would like to remind facilities that when a facility administrator is designated in MIRCal, the representative must be *the person in charge of the day-to-day operation of the facility*.* This would typically be the Chief Executive Officer (CEO) or equivalent.

During times when an interim administrator must be designated, it is acceptable to add the person as the administrator during the interim period. However, the contact information should be updated once a permanent administrator has been established to ensure all critical emails and letters are being sent to the correct person.

Facilities must notify OSHPD's Patient Data Section within 30 days after the occurrence of any change in administrator at the facility.* The facility's MIRCal User Account Administrator (UAA) is responsible for maintaining the contact information updates in MIRCal.

* Title 22, Division 7, Chapter 10, Article 1, Section 97007 (d)

Survey Thank You

OSHPD appreciates the efforts of those who collaborated and completed last November's survey. Responses were received on behalf of 205 facilities who weighed in on possible data element changes for the future. Your participation has helped us plan our next steps as we continue to strive forward with our mandate of making data reporting requirements consistent with national standards.

We look forward to hearing from you again in our next Proposed Regulation Public Comment Period later this year.

Thank you for taking part in the discussion.