## North Sound BHO CIS Committee July 26, 2017 1:30 – 3:30

Chair: Minutes by:

Jennifer Whitson, North Sound BHO Rebecca Pate

Members Present:

Jessica Rentas, Unity Care NW; Erika Hanson, Compass; Bobbi Bellusci, Compass Health; Brett Parker, Phoenix Recovery; Becky Beardsley, Phoenix Recovery; Darren Martin, North Sound; Jana Jeffs, Catholic Community Services (CCS); Karryn Dean, Sunrise Services (SR); Jessica Kincaid, SR; Lesa Gilbert, CCS; Cassie Shove, Snohomish County ITA; Sandy Whitcutt, North Sound; Dennis Regan North Sound; Seong Ja Garza, Sea Mar; Benjamin Jedd, Center for Human Services (CHS); Meredith Guich, CHS; Lynn Dollmeyer, Bridgeways; Aidra Frazier, Bridgeways; Steve Lyons, North Sound BHO; Eddie Wai, North Sound BHO; Michael McAuley, North Sound; and Lisa Grosso, North Sound

## Via Go to Meeting

Andrew Kreis, Pioneer Human Services (PHS); Ann Marie, Center for Human Services (CHS); Diana Briggs, PHS; Eric Sieverling, PHS; Joy Collins, PHS; Kelly Willis, PHS; Martyna Madej, Volunteers of America (VOA); and Kathy Kain, Evergreen Recovery Center

Agenda Item	Discussion	Action
1. Call for Additional	Jennifer convened the meeting at 1:30 and introductions were made.	
Agenda Items		
	Jennifer asked for any additional agenda items and nothing was mentioned.	
2. Secure File Transfer	Dennis stated he experimented with including the Structured Query	
Protocol (SFTP)	Language (SQL) code though was hesitant to do so since the Behavioral	
(Reminder) – file pickup	Health Organization (BHO) naming conventions are so vastly different.	
9:30 a.m.	He said the best results work when he includes the SQL in the	
a. Week end	computation he sends out to the providers. Bobbi stated when	
Processing	management says an issue is with Crisis or Triage, they are not specific and	
	this results in confusion, as she does not know exactly what data elements	
	are in the calculation in order to review, compare and make corrections so	
	data is captured properly. Dennis mentioned Triage information is difficult	
	to provide data reports for because each facility puts the information in	
	differently due to the elements they have at their facility. He added this is	
	being remedied via contract so information can be properly captured – by	
	county, age, beds, etc. The information will be added to the Data	
	Dictionary. He said North Sound has a great database tool developed by	
	Steve and he is going to do his best to incorporate his data into this	
	database. Bobbi said if they could see the query, they can make sense of it	
	and work with that to ensure the data is captured accurately. Bobbi said	
	she realizes the Triages' are different (providing different services and	
	differently). It was mentioned language use needs to be consistent.	
	Dennis said if anyone has suggestions on what language to use for the data	
	element names to make improvements across the system he is open to that	
	information. Bobbi said they need to narrow it down to data elements	
	used.	

Jennifer acknowledged file pickup cutoff is 9:30 a.m. for North Sound to have ready. She requested providers not request the status until after 9:30. a.m. She stated if you do not have your report by 9:30, you can call or email (cis@northsoundbho.org) to inquire about when they might be ready. In regards to the new SFTP server, Steve said if providers can get together and come up with common name structure to use that would help. He asked providers to get the information to him and he can make it work. Lisa spoke about the emails that have been sent out regarding the transition to an Interim Secure File Transfer Protocol (SFTP) server. She will be sending another email update out on 9/27 to the same Behavioral Health Agency (BHA) distribution groups to provide the "go-live" date and instructions, including the new Internet Protocol (IP) address. Go live for the interim SFTP server is Saturday, 8/5. Between 7/27 and 8/3, BHAs are asked to test the system and report any issues to IT\_Support@northsoundbho.org. A copy of the email was available as a handout to attendees. Lisa shared a long-term solution for the interim SFTP server has been researched and several solutions are being tested. She stated the reason for the interim SFTP server was the current SFTP server was failing and North Sound wanted to have the time to dully vet a long-term solution. Darren was asked about the file naming structure in the interim SFTP server and stated it is the same as in the current server. Jennifer asked what was the cutoff time for providers submissions. Eddie stated providers need to submit their data no later than 10:30 p.m. for it to be incorporated in North Sound's report the next day by 9:30 a.m. Lisa mentioned North Sound is working hard to ensure protection of Protected Health Information (PHI), one of the reasons for researching a long-term solution for the secure server. Lisa mentioned the many advantages the long-term solution will provide is, including being able to transfer other files, including Steve's reports and administrative files, using the long-term solution. This will provide better protection for the privacy and security of e-PHI. 3. Data Correction Jennifer said her main job is to get data to the State. She said the State Timelines – LisaG pointed out some holes in the date, which resulted in discussion occurring a. Need to get internally at North Sound. Lisa said data error reports will begin being sent Periodics & Other out and the BHO will begin to look at the trends or correction of the data Records Per errors by the BHA. She added following a 60-day implementation period, Contracts the BHO will review trends and those BHAs making progress in error b. State Required correction may continue to do so and those that remain the same or RSUBU possibly increase will result in remedial action. Lisa stated her intent is to have a send episode type system with sustainable and accurate data and a good working relationship or RLGUID in in partnership with our providers. Lisa asked all to please communicate transaction with North Sound if they encounter issues. She acknowledged North Sound has requirements to meet from the State and those must be passed down to BHA providers. 4. ProviderOne (P1) Jennifer stated PIC is a required Field in the 837p transaction and the Data Dictionary will be updated to reflect N/A as an action allowed and will Demographic Error work with the few providers that have submitted a few services with a missing PIC to get those updated. She stated the standing rule is "if there is no P1 ID use PN".

	Jennifer said the Data Dictionary is vague about some issues. She	
	acknowledged those issues discovered that are fixable are being corrected	
	in the Data Dictionary. Jennifer said she wants providers to let her know if	
	they disagree with any information she sends them so they can be	
	discussed and fixed. She mentioned she needs to work with the state to	
	see which P1 ID number should be used when an individual is in the P1	
	system twice with two different numbers. Steve mentioned Eddie has	
	developed a new 837p guide that provides information that lends to	
	resolving some of these issues. Lisa asked a DRAFT copy of this guide	
	information to be sent out to the BHA CIS provider distribution list so	
	they could ensure their data is done correctly and provide feedback to	
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5 Cl 11 0 E 11 7E	improve the document and process.	
5. Child & Family Teams	There have been ongoing questions around what "present" means in the	
(CFT) Meetings	context of a CFT meeting. Present, in this case, means in-person or on the	
	phone. Jennifer said if all individuals involved in an episode/treatment of	
	an individual are communicating equally at the same time it is considered	
	"present", whether by phone, or in-person, or a combination thereof.	
6. RSTGD	Jennifer stated providers need to Add Discharge_Date and	
	Discharge_Time so information appears within the timeframe researched	
	by North Sound. She said this will be added to the Data Dictionary.	
7. RDMHP Transaction	Sandy mentioned the State changed some things in 2013/14 requiring	
and Integrated Crisis	hearing outcomes shown on the contact sheet. Things have been	
Response System (ICRS)	inconsistent due to some providers having court liaisons and others not.	
Contact Sheet Change	There is no field for Cause ID on the contact sheet and this will be added	
	to the form so this requirement can be captured. Jennifer said the Cause	
	ID will also be added to the transaction piece so it will be able to be	
	reported. Sandy stated she will work with providers that have court	
	liaisons to develop a way to obtain this information. Currently, North	
	Sound is out of compliance, almost all BHOs across the State. Sandy said	
	she wanted to present this update at this meeting so BHA IS/IT people	
	were aware of this addition of a data element coming about. Once a way is	
	developed to capture this information, providers will have 90 days to	
	implement on their end. Discussion followed.	
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	Jennifer asked if there would be any other changes to the form. Sandy	
	stated she will be meeting with Rebecca and let the BHO IS/IT know and	
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	thought there was one (1) small change that we not related to data	
	captured.	
8. Service Encounter	Steve said within a date range the State has changed reporting to include	
Reporting Instructions	substance use disorder (SUD) data. This requires a data entry for "ROEI"	
(SERI) Changes	information, as well as, current information. Steve said the State has a 90-	
	day architecture but he does not believe they realize this will not work long	
	range. Bobbi clarified when a BHA provider sends in a transaction that	
	Steve wants the provider to include what type of episode the transaction is	
	attached. Jennifer said North Sound's intent is to ensure what is being sent	
	is what the provider intended to send. Steve stated the State has changed	
	SUD and the easiest action to take would be to link the State table with the	
	BHO provider table. He mentioned currently the reporting is very messy.	
	Jennifer asked if providers were having the same issue with American	
	Society of Addiction Medicine (ASAM) assessment and if so, would it be	
	easier to add the same element to ASAM that is reported? Jennifer said the	
	State said they are going to focus on SUD and they expect information to	
	be present from the beginning of the SUD episode. Bobbi stated if an	
	official requirement came from the BHO it would be easier for her to	
	ensure the change is made by their software vendor because of it being a	
	requirement. Jennifer stated, with Lisa's help, this will be provided.	

9. Open Discussion	It was asked if the Data Dictionary could include a summary of changes done in the SERI for ease of providers knowing exactly what changes have been done and when.	
	Jennifer stated she sends any changes to the distribution list and she has been doing her best to update the Consumer Information System (CIS) distribution list prior to this meeting.	
	Bobbi said if a "summary of changes" could be sent out that would be very beneficial. Jennifer asked if she sent out the older version with the new version would that be helpful and the providers stated that would be good if labeled accordingly. Bobbi said receipt of a summary of changes would be beneficial as well. Jennifer asked Tom to input a column on the document so she could note changes and the date when they occurred so providers could readily see when changes were done. Jennifer said she just discovered a section for notes on the website that already exists and she will start using that and dating when the changes occur instead of creating something new.	
	It was asked now that ICD-10 is being used does North Sound know when annual updates/changes will occur in the SERI? Jennifer said it did not come up in the July meeting with the State and the August meeting has been canceled. Jennifer asked Karryn Dean to send her the information desired and she will research it.	
	Lisa mentioned North Sound might have delays in incorporating changes sometimes because of seeking clarification from the state and the delay in responses from the state. Jennifer said it appears changes are being done to make things more of a unique key versus using information such as the start date of an episode to create a unique ID for a transaction.	
10. Next Meeting	The meeting adjourned at 2:45 p.m.  The next meeting will be <b>October 25, 2017</b> , from 1:30 – 3:30 p.m.	