

June 14, 2011

**CLOSEOUT OF VETERANS HEALTH ADMINISTRATION
CORPORATE PATIENT DATA FILES INCLUDING QUARTERLY INPATIENT
CENSUS**

1. PURPOSE: This Veterans Health Administration (VHA) Directive defines the closeout dates for all monthly and end of fiscal year updates, including census, for VHA corporate patient data files and provides policy and procedures for the quarterly census of inpatients.

2. BACKGROUND

a. Monthly closeout is a necessary requirement to ensure that data is available in a timely manner for corporate reporting needs.

b. Effective February 1, 2011, workload closeout for all monthly updates to VHA corporate patient data files must be accepted by the Austin Information Technology Center (AITC) no later than 7 days from the date of the Patient Treatment File (PTF) discharge and the Inpatient or Outpatient Care Encounter. *NOTE: Example of date calculation: Discharge date: 1/31/11 PTF closed, transmitted and accepted: 2/7/11. Date of discharge to date of PTF transmission equals 7 days.*

c. Data that is not transmitted and accepted at the AITC by the 7th day after the event may not be included in VHA statistical calculations and reporting. For the end-of-fiscal-year workload closeout for PTF discharges and Inpatient or Outpatient Patient Care Encounters, data must be transmitted and accepted by 6:00 pm Central Time on October 7. The only exceptions are PTF discharges from Contract or Community Nursing Home and non-Department of Veterans Affairs (VA) Purchased Care patient files. Due to the delay in the submission of some non-VA claims, non-VA PTFs may be completed, transmitted, and accepted in AITC for inclusion in the Patient Treatment Master File for up to 7 years from the discharge date, but it needs to be completed as required if the necessary information is available. *NOTE: The 14-day VHA Work Measurement (VWM) also known as Automated Management Information System (AMIS) closeout requirement remains unchanged.*

d. Quarterly census data is required to provide timely and accurate medical and administrative information on all VHA medical facility inpatients (includes hospital, Community Living Center (CLC), and domiciliary) and Non-VA Purchased Care (including Contract or Community Nursing Home (CNH)).

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e. Until VHA has the capacity to transmit inpatient daily admission data (including diagnostic information) to the AITC for inclusion in the PTF Master File, census continues to be required. Closeout data for Inpatient census files must be transmitted and accepted by 6:00 p.m., Central Daylight Time, on the 7th calendar day of each quarter (January 7, April 7, July 7, and October 7).

f. Corporate patient data is used for the Veterans Equitable Resource Allocation (VERA) system, health care planning and statistical purposes, resource allocation, performance monitoring and for VA's Secretary's annual report to Congress.

g. The data impacted by this closeout requirement includes:

(1) All inpatient treatment data contained in the Veterans Health Information Systems and Technology Architecture (VistA) PTF (Regular PTF, Non-VA PTF, and Census).

(2) Inpatient and Outpatient Patient Care Encounters (PCE) or visits. **NOTE:** For additional information and resources on the VERA system access the Allocation Resource Center (ARC) Web site at <http://vaww.arc.med.va.gov/>. This is an internal VA Web site and cannot be viewed by the public.

3. POLICY: It is VHA policy that VHA's corporate data files, which include data on all patients who were treated at VHA facilities or had treatment paid for by VHA, are received by AITC in time to meet monthly and yearly PTF, Census and Inpatient and Outpatient workload closeout.

4. ACTION: The facility Director, or designee, is responsible for ensuring:

a. Workload Closeout is completed in an accurate and timely manner.

(1) AITC must receive all updates to VHA corporate patient data files by 6 p.m., Central Daylight Time, no later than 7 days after the date of the PCE or the PTF discharge. The fiscal year closeout is set for the 7th day of the month following the end of the fiscal year (October 7).

(2) Error corrections must be re-transmitted by the closeout deadline for inclusion in the National Patient Care Database (NPCD), the PTF Master File, and the Census Master File. Corrections to the PTF Master File can be made for up to 2 previous fiscal years; however, these corrections are not used in the year-end report to Congress, calculation of VERA, or the performance measures. Error correction cycles need to be taken into consideration in order to meet the closeout dates. **NOTE:** Data transmitted for the first time on October 7th will not allow the necessary time for any error correction to be processed for inclusion in the annual closeout file.

b. Census processing is as follows:

(1) The quarterly inpatient census is performed for all bed occupants, including patients in Contract or CNH beds at VHA expense on December 31, March 31, June 30, and September 30

at 11:59 p.m. Census files must be closed out at 6:00 p.m., Central Daylight Time on January 7, April 7, July 7, and October 7. The Chief, Health Information Management (HIM), or other appropriate official(s), serve(s) as the facility Census Coordinator and has administrative responsibility for ensuring the timely completion of the quarterly census. *NOTE: Patients in non-VA hospital beds not paid for by VHA and patients in state homes at VA expense are excluded from the quarterly census.*

(2) Census information is reported and transmitted to the AITC using the Census Menu in Version 5.3 of the Patient Information Management System (PIMS) in the Admission, Discharge, and Transfer (ADT) module of VistA.

(3) The following actions must be taken at each medical facility to ensure accurate census reporting:

(a) Patients to be completed for census can be found by using the Census Status Report [DGPT CENSUS STATUS REPORT] and the Fee Basis Census Status Report [DGPT FEE BASIS CENSUS STAT RPT] menu options located in the PTF menu.

(b) VA Form 10-7976D, Medical Staff Worksheet, when used, is completed by a provider or member of the coding staff.

(c) Census data is entered into the PTF record in VistA using the "Load/Edit PTF Data" option, a census menu option, or by using the encoder interface option.

(d) All PTF screens for each census patient must be completed, as applicable, with the most current diagnosis(es) confirmed and any procedure(s) completed before or by the time the quarterly census is conducted.

(e) The PTF record is "closed for census" using the PTF 701 screen of the "Load/Edit PTF Data" option from the PTF menu or via the encoder interface. Upon successful closing, the required data for the census is selected from the PTF record and the census record is created.

(f) The census record must be released for transmission to the AITC using either the PTF 701 screen of the "Load/Edit PTF Data" option or the "Release Closed Census Records" option.

(g) Census data must be transmitted to the AITC using the "Transmit Census Records" option. *NOTE: If there is a census record and PTF record for the same patient episode of care, there must be a one calendar day delay between the transmission and acceptance of the census record prior to the PTF record being transmitted.*

(h) Census data must be transmitted on or after January 1, April 1, July 1, and October 1, annually. Census records indicating error corrections must be corrected, closed, released, transmitted and accepted in time for receipt by AITC before 6:00 p.m. Central Standard Time on January 7, April 7, July 7, and October 7, annually.

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(i) PTF records of census patients discharged on or after January 1, April 1, July 1, and October 1, must be closed, released, transmitted and accepted to the AITC when they are completed.

c. Inpatient PTF and census data are validated. This is necessary to ensure that census and PTF data have transmitted and been accepted by the AITC. The Edit Analysis Lists (EALs), PTF 419 and Census 250 reports are important tools that assist with the validation process. EALs are received at the medical facility by Mailman in response to PTF or census transmissions that have data errors. Records identified by AITC as having a data error must be corrected and retransmitted as soon as possible after receipt. The PTF 419 and Census 250 Reports are available through Roger's Software Development's (RSD) (see Attachment A). These reports must be reviewed in their entirety and validated several days prior to closeout to allow time for error correction, re-transmission, and acceptance by AITC.

d. Encounter data is validated. This is necessary to ensure that all encounters (both inpatient and outpatient) are closed, transmitted and accepted by the AITC. The Incomplete Encounter Error Report (IEMM), Encounter Action Required Report (EARR), Computer Generated Appointment Type Listing, and Outpatient Encounter Workload Statistics (OEWS) Reports are some of the options, that must be used for identifying errors and verification of successful transmission of data.

5. REFERENCES

a. VHA Handbook 1907.04.

b. VHA Handbook 1907.03.

6. FOLLOW-UP RESPONSIBILITY: The Director, Health Information Management is responsible for the content of this Directive. Questions may be addressed to (217) 586-6082.

7. RESCESSIONS: VHA Directive 2007-030, dated September 27, 2007 is rescinded. This VHA Directive expires June 30, 2016.

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ATTACHMENT A

ROGER'S SOFTWARE DEVELOPMENT (RSD) REPORTS

1. To request access to RSD reports at the Austin Information Technology Center (AITC) , VA9957 ACRS Time Sharing Request Form needs to be completed at <http://vaww.va.gov/vaforms/va/pdf/VA9957.pdf> . *NOTE: This is an internal Web site and cannot be viewed by the public.*
2. To access RSD reports, click on Expand All and scroll down to Patient Treatment File (PTF) Reports. The link provides a detailed listing of PTF reports, their frequency, and how to request access to view/review these reports on line. It also provides detailed instructions for downloading reports for validation.
3. Two very important workload validation reports are: the Edit Analysis Lists (EALs) and the 419 Report.
 - a. EALs are received at the medical facility using MailMan in response to PTF or census transmissions that have data errors. Records identified by AITC as having a data error must be corrected and retransmitted as soon as possible after receipt.
 - b. The PTF 419 and Census 250 Reports are available online through RSD. The 419 Report must be validated prior to the monthly closeout at a minimum. Some sites validate this report weekly.
4. Verifying that the records were transmitted by generating VistA reports does not guarantee that they were accepted at the AITC for processing and workload credit. It is essential that you also verify the Austin data for confirmation of acceptance.
5. These Reports can be found at: <http://vaww.va.gov/NDS/PatientTreatmentFile.asp>.
NOTE: This is an internal Web site and cannot be viewed by the public.