County of San Bernardino Department of Behavioral Health

Pre-State Chart Audit Responsibilities & Procedures Effective Date 2/1/07 **Approval Date** Allan Rawland, Director 2/1/07 Purpose The purpose of this document is to define clearly the responsibilities and procedures of the following parties when notification is received of an impending State audit: **Quality Management** . Research & Evaluation (R&E) Medical Records Required DBH Clinics Quality Quality Management will provide oversight and coordination, and ensure Management that charts are ready for the audit by completing the following steps: Responsibilities & Procedures Step Action Immediately notify R&E and Medical Records of the upcoming 1 audit. 2 Provide R&E and Medical Records with the list of charts sent by the State for review. 3 Send an email to all clinic supervisors, their Program Managers and Clerical Supervisors with the following information: Date of audit • Audit period • • The name of the Quality Management coordinator and/or their representative A list of charts to be reviewed The Pre-State Audit Review Tool

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The time frame/deadline of when the review tools are due

Review of all closed episodes housed in Medical Records

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Research &R&E will prepare the necessary reports for the audit by completing theEvaluationfollowing steps:Responsibilities& Procedures

Step	Action
1	Prepare a list of services provided to clients during the audit period
2	Prepare a list of clients served at multiple sites
3	Post these lists to a secure server
4	Notify Quality Management and all required DBH Clinics of how to access the secured server.

Medical Records Responsibilities & Procedures

Medical Records will prepare closed chart information for all required DBH clinics and Quality Management. Once notification is given and the list of required charts are received from the State, Medical Records will complete the following steps:

Step	Action
1	Compile a list of closed episodes currently housed in Medical
	Records.
2	Notify all required clinics of the closed episode information

Required DBH Clinics Responsibilities & Procedures

In preparation for the Pre-State Chart Audit each DBH clinic will:

- Review all required charts using the provided audit tool
- Compare the client list provided by QM with the list of closed episodes in Medical Records
- Report any discrepancies and missing charts immediately to the designated coordinator or his/her representative at QM
- Insure that all the completed audit tools and charts in their care are at the designated location by the required due date
- Insure that necessary chart document copies are made of clients with scheduled appointments, so as to enable services to continue without interruption

The following steps should be taken for the completion of the chart review:

Step	Action
1	Check the list of clients served at multiple sites, also posted by
	R&E on the secure server, to insure that each clinic is aware of all
	charts/episodes in their care. If a chart/episode is unable to be
	located, check the following until a resolution is made:
	SIMON
	Medical Records
	Designated coordinator or representative at QM

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	*If a chart is designated as closed but is not on the list provided by
	Medical Records, it is the clinic's responsibility to locate and review that chart/episode
2	Review all charts/episodes in their care (using the chart review
2	tool provided; i.e. the Pre State Audit Form, and the list of services
	provided to clients found on the secure server posted by R&E)
3	The State Pre-Audit Chart Review Audit Tool form serves as
5	the official document for any disallowances.
	Please note the following:
	 The audit tool is to be completed in its entirety; i.e. all the
	headings are completed (clinic name, etc.)
	 Each Standard should be checked "yes", "no" or "N/A" (with
	comments if needed)
	 If any disallowances are found, the Charge Data Audit
	Disallowed section is to be completed in full for each service
	disallowed (continued pages can be attached as needed) just
	as would be done on a CDI Correction form
	 Check one of the boxes "No Disallowances Found" or
	"Recommendation to Disallow"
	 Complete "Chart Reviewed by" and Disallowances Reviewed
	by" items
4	Make any legitimate corrections, such as:
	 File notes that were completed and signed but were not
	previously filed
	Missing staff signatures
	If a legitimate correction is made, do not disallow
5	Individually band each chart with its corresponding review tool
6	Sort charts in alphabetical order
7	Create a binder to contain:
	 Staff signature sheet(s) (in alphabetical order)
	 Copies of licenses, waivers and registrations (in alphabetical
	order)
8	Make copies of all CDIs for all claims and services provided during
	the review period and arrange copied CDIs in alphabetical order
	by clients name
9	Deliver (by due date given) the following items to the Medical
	Records Division at BHRC.
	Alphabetically sorted, banded charts with their corresponding
	review tools
	Binder containing staff signatures and copies of
	licenses/waivers/registrations
	Copies of CDIs (in alphabetical order)