



# Service Corrections, Replacements and Deletions Policy

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DocuSigned by:  
*Dr. Georgina Yoshioka*  
7DF8077EFA674B2  
Georgina Yoshioka, DSW, MBA, LCSW, Director

**Policy** It is the policy of the Department of Behavioral Health (DBH) that DBH and its contracted providers shall ensure the clinic/program’s electronic health records (EHR) are accurate and free from error. DBH and contract provider staff will be responsible for identifying erroneous service entries in their respective electronic health records and processing or requesting all service deletions and/or corrections promptly.

**Purpose** To provide DBH staff instruction on the requirements and process for completing service corrections within myAvatar. Accurate entry of service codes based on type of service provided is the basis for billing, tracking, claiming, and paying for reimbursable service provisions.

**Definition(s)**

**Charge Data Correction Invoice (CDCI):** Form used by DBH to capture and communicate service information related to claimed services that require corrections.

**DBH Corrections Team:** Individuals from DBH clinics/programs who are the Subject Matter Experts in making corrections to DBH electronic clinical and service documentation.

**Electronic Health Record (EHR):** An electronic version of a client’s medical history maintained over time and includes all of the key clinical data relevant to that person’s care including demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports. The system used by DBH is myAvatar, contracted agencies have their own electronic health record systems.

**End Users:** DBH staff and contract provider staff that utilize an electronic health record within their own respective agency.

**Guarantor:** General term for medical insurance of clients.

**Replacement Services:** When an incorrect service has claimed and a replacement service with accurate information is created to replace the original claimed service.

**Service:** The provision of treatment, procedures, medication, examination, diagnostic test, assessment, or counseling performed by DBH and contract provider staff.

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## Definition(s), Continued

### Service Status:

- **OPEN Status:** Service status that allows service corrections to be made by DBH end users and super users.
- **UNBILL Status:** Service status that flags the charges as ready to bill and does not allow service corrections to be made.
  - A service in UNBILL status not claimed to prior guarantor can be reverted to OPEN status to perform corrections.
  - A service in UNBILL status that has been claimed to prior guarantor (with or without payments) cannot be reverted to OPEN status until the Business Office performs actions to address the claim(s) to the prior guarantor(s).
- **CLAIMED Status:** Service status where a service has already been billed. A service in this status can only be corrected using service edits when the correction is related to a modifier. Other services in this status do not allow service edits and cannot be reverted to OPEN status.
  - **CLAIMED** service has received a response if it shows transactions in the Client Ledger. Transactions show Posting Codes that mean a payment, transfers and/or adjustments.
  - **CLAIMED** service has not received a response from the State when it only shows a Claim Number and a Date Billed in the Client Ledger.

**Super User:** Super Users provide DBH EHR support to end users in their department/clinic/program. Super Users answer questions, provide expertise, help onboard staff, resolve help desk tickets/assist with corrections, test functionality and provide feedback to DBH Information Technology (IT).

## Background

DBH client's medical records are stored electronically via the electronic health record, myAvatar. In order to ensure client's medical records are accurate and free from error, DBH Revenue Cycle will process all service data corrections, replacements, deletions, and processing of Charge Data Correction Invoices (CDCIs) in myAvatar. DBH staff will be responsible to report service corrections as explained in the Service Deletions and Corrections Procedure (CLK0708-1)

## Related Policy or Procedure

### DBH Standard Practice Manual and Departmental Forms:

- Clinic Responsibility for Processing Client Registration, PFI, CDI (CLK0703)
- Charge Data Invoice (CDI) Process Procedure (CLK0704)
- Correction of Overlapping Service (CLK0707)
- Service Deletions and Corrections Procedure (CLK0708-1)
- Charge Data Correction Invoice Form (CLP010)