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Network Service Provider (NSP) Data Validation

Policy
It is the policy of Central Florida Behavioral Health Network, Inc. (CFBHN) to validate service and performance measure data submitted by Network Service Providers (NSPs.)

Purpose
The purpose of this policy to establish guidelines regarding the data validation procedure.

Procedure
I. Service Data Validation
   A. Service data validation is conducted by the Continuous Quality Improvement (CQI) department during its annual and/or follow-up monitoring of NSPs.

   B. To prepare for the monitoring, the CQI Specialist assigned as the lead pulls a summary of data from the Carisk system. The selected sample represents the time period selected for review.
      1. From this data pool, the staff member selects a targeted number of services to review for validation.
      2. The targeted number represents a statistically-significant sample of the data collected during the period of review.

   C. During the monitoring, and in accordance with established procedures, the CQI Specialist reviews the record of the individual served to validate that all required elements of the service documentation are present as required by 65E-14.021.
      1. When a service cannot be validated, the CQI Specialist documents the missing data on the monitoring tool, and alerts the NSP to discrepancies.
      2. A Corrective Action Plan is requested of NSPs when less than 98% of the total number of services billed can be validated to be accurate.
      3. Corrective Action Plan compliance is assessed through monitoring follow-up conducted by the CQI Specialist. The plan must be reviewed for compliance within 90 days of its completion.
      4. Whether or not they result in a Corrective Action, the NSP is responsible for correcting all data errors identified during the monitoring process.

   D. All monitoring reports, including service validation results, are posted to CFBHN SharePoint sites for Department of Children and Families (DCF), NSP and CFBHN staff review and reference.

II. Performance Measure Validation
   A. Performance measurement data validation is required by the master contract for those programs identified in Exhibit E, E-6, Table 6:
      1. Prevention and Prevention Partnership Grants (PPG)
      2. Central Receiving Systems (CRS)
      3. Community Action Treatment (CAT) Teams and CAT-Tiers 2 and 3
      4. Florida Assertive Community Treatment (FACT) Teams and FACT-Tier 2
      5. Family Intensive Treatment (FIT) Teams and FIT-Tier 2
      6. Linking, Advocating, Treating, Transitioning, Empowering and Recovery Support (LATTERS) program

   B. Performance measurement data validation is conducted by CFBHN Program Managers during an annual review of each NSP contracted to provide a specific service.

Network Service Provider (NSP) Data Validation (continued)

1. Program Managers coordinate directly with each NSP to schedule the date of the data
   validation review and explain the data validation method to be utilized.
   a. Reviews may be scheduled at any time during the period of October 1 – May 31 of the
      CFBHN fiscal year.
   b. Prior to scheduling the data validation review, it is the responsibility of the Program
      Manager to ensure that an adequate sample of data is available.
   c. The review may be conducted on-site, at the NSP's location, as a desk review, or virtually,
      via a secure video-conferencing platform.

2. Program Managers are required to document the results of each NSP's performance
   measurement data validation process.
   a. Documentation must include:
      1) The name of the NSP;
      2) The date(s) of the review;
      3) A summary of the method utilized to validate the performance measurement data,
         including data sampling;
      4) The performance measurements reviewed;
      5) Results of the review;
      6) The status of requirements established by the program's related Guidance Document;
      7) If necessary, additional steps or follow-up required; and
      8) The name and title of the Program Manager that conducted the review.

   b. Performance measurement data validation results must be documented within 30 days of
      the NSP's review date.
      1) Program Managers are required to provide the NSP with a written copy of their results.
      2) The Program Manager will coordinate with the NSP if:
         a) Additional sampling, follow-up or review is necessary.
         b) Results require the submission a formal Corrective Action Plan that will outline
            the steps taken to address the identified issue(s).

   c. On or before June 30th of each fiscal year, documentation of the annual performance
      measurement data validation process conducted with each NSP must be completed.
      1) Documentation must be uploaded into the SharePoint site designated by the VP of
         NDCS
      2) This documentation serves to verify CFBHN's compliance with performance
         measurement data validation requirements established in the contract.

   d. As necessary, results of additional sampling, follow-up, review, or Corrective Action must
      also be documented by the Program Manager, shared with each NSP, and maintained in
      SharePoint.

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