Introduction

This document is intended to provide a mechanism that can assist agencies in reconciling Outcomes data that are sent by an agency to a board for transmission to ODMH with what is accepted in ODMH's production database. The need to do so comes from the frequent perception that the Missing Data Report is incorrectly reporting the agency's performance. This document is divided into two sections: 1) A brief description of the Outcomes data flow process, and 2) A description of the File Submission Tracking Form and a procedure to reconcile with the Missing Data Report.

Agencies are advised to track their Outcomes data file submissions and process critical errors to avoid the need to reconcile data with the Missing Data Reports later.

Part 1: Outcomes Data Flow Process

1. Agencies export files to the board or to a data collection hub

Outcomes records are exported by individual agencies to their contracting boards. Often agencies that contract with multiple boards send their Outcomes data to the one board that receives their MACSIS billing data. Each board has its own method for submitting data to the state. Many boards send the data directly to the state while other boards use a hub for their MACSIS Claims and Outcomes Data.

All files submitted by agencies must adhere to the file name protocol as delineated in the Data Flow Guide in Appendix G, available at http://www.mh.state.oh.us/oper/outcomes/data.flow/df.guide.appendices.pdf.

An example of this format for a hypothetical file from Every Mind's Friend, a Franklin County provider:
h1025123450718501.txt

- h identifies this as a production file and must always be lowercase. Test files are labeled with a lower case "t".
- 10 identifies the Outcomes survey, in this case this is a record containing data from Adult Consumer Forms, formerly known as the Adult A Form. Provider Form is 11, Ohio Scales Youth is 30, OS Parent is 31, and OS Worker is 32.
- 25 identifies the submission board, in this case Franklin County.
- 12345 is the five digit UPID for Every Mind's Friend. Agencies with a four digit UPID must insert the leading 0 to form a five digit identifier.
- 07 means the file was generated in 2007
- 185 is the day of the year the file was generated, in this case July 4th of 2007.
- 01 is the first file generated for this instrument on the date identified by the year and Julian date. Larger agencies often submit multiple files on the same day for the same instrument. This allows each file to be identified separately.
- .txt is the file extension which identifies this file as a text file and must also be lower case.

2. The board or data collection hub sends the files to ODMH

They place the export files on MHHUB utilizing a secure file transfer protocol (FTP) and notify Outcomes Support via e-mail that the files are ready for pick up. Each board only has access to their own secure folder.

3. ODMH collects and validates the files

The filenames are first examined to make sure they match the filename protocol. Common critical errors in filenames include:

1. The use of capital "T" or "H" in the first position; these should be lowercase "t" or "h" as the filenames are case sensitive.
2. Filename is not 21 characters long. Sometimes the character differentiating the Mental Health "M" boards from combined "B" boards are inserted behind the board number. Sometimes the Julian date contains an extra leading 0.

Files with improper filenames are rejected, and all of the records contained in the file must be resubmitted. A full listing of the filename critical errors is contained on page 103 of the Data Flow Guide.

If the filename is acceptable, the records themselves are examined for critical and information errors. This would include matching the UPIDs in the record to the UPID in the filename and checking that critical values are valid such as UCIs and DOBs, as well as the length and format of each record being correct. A full listing of the critical errors (errors that would cause a record to be rejected) is found on page 113 of the Data Flow Guide.

If enough records have critical errors, the entire file will be rejected. All records in a failed filed must be resubmitted.

4. ODMH places the Error Reports on the MHHUB

After validation of the files, Error Reports for all files received regardless of whether there are errors or not, would have been returned the sending board via the MHHUB, in this case the Franklin Board, for distribution to the agency. The names of the feedback files are almost the same as the file submitted except that the board number and a period come at the beginning, the date of processing is added to the end, and the extension is ".PDF" rather than ".txt". For the filename used above, the feedback report filename might be "25.h1025123450700101.05JAN2007.PDF".

At no point in this process are export files returned or sent to any board or data hub.

5. Acceptable records are placed in the Statewide Database

If a record did not contain any critical errors, and was not submitted in a file that was rejected, then the record is retained in the Outcomes productions database and used for:

1. Statewide Quarterly Reports
2. Outcomes Data Mart
3. Missing Data Reports
4. Supplying Boards with Outcomes data extracts
5. Other acceptable purposes including research and evaluation, policy planning, fulfilling data requests from Federal and other sources.

Rejected files and records with critical errors are not retained.

6. Evaluation of Statewide Data for the Missing Data Report (MDR)

OPER receives an extract from the MACSIS Claims database once a quarter. From this extract the expected numbers for the MDR are calculated based on the number of individuals who received one or more Outcomes-qualifying Mental Health services (see http://www.mh.state.oh.us/oper/outcomes/reports/rpt.missing.data.procedures.pdf for an explanation of about Outcomes-qualifying services) during the reporting period, which is a rolling one-year period that is lagged by three months from the report run data to allow time for the data to be submitted. For MDR #14 this one-year period was calendar year 2006 (1/01/2006-12/31/2006).

For adults and youth numerators are calculated by determining the number of individuals with at least one administration with at least one respondent-completed item which has an administration date in the report period. "Empty records," where blank records have only tracking sheet information entered, are not counted as received records for the MDR. The denominator is computed as the number of individuals with Outcomes-qualifying services in the report period. Unexpected Outcome records are received for individuals who were not identified by data from the MACSIS extract, and those numbers are added to an agency's expected and received numbers. See the Missing Data Report Procedures referenced above and the first two pages of the MDR for a complete explanation of the processes used in determining submission rates.

Keep in mind that the format of the MDR is changing, and the official version of the MDR will become the Instrument version as of MDR #17, for the year ending September 30, 2007. Information versions of that report are now produced simultaneously with the Classic version of the MDR. See the Missing Data Report Evolution document (http://www.mh.state.oh.us/oper/outcomes/reports/rpt.missing.data.evolution.pdf) for a full explanation of how and when the MDR will be revised.

Part 2: Data Flow Reconciliation

1. Reason for different perceptions of the Missing Data Report

The reason that this document has been created is to address the concerns of provider agencies who dispute the accuracy of the Missing Data Report (MDR). From our experience, the difference in perceptions of agencies of the numbers reported in the MDR come from the following sources:

1. **Misunderstandings how the MDR percentages are calculated.** There is no shortcut to understanding the calculation of the MDR submission rates. Like many good indicators, these numbers are complex in their calculation. Agency personnel who would understand the submission rates must familiarize themselves with the Missing Data Procedures and with the introduction of the MDR itself. Agencies are well-advised to also familiarize themselves with the Missing Data Report Evolution document to become acquainted with the planned changes to the Missing Data Reports.
2. **Agency is not correcting and resubmitting records that contain critical errors reported in the feedback reports.** Agencies must download and process feedback reports and resubmit records, as is explained in the Data Flow Guide. Further assistance on how to do this is available by contacting the Outcomes Support Team at outcome@mh.state.oh.us.
3. **Data are not submitted by the agency.** Agencies believe they have exported data, but have not. If in doubt about the submission status of records, resubmit the data to be sure.
4. **Data are not forwarded by the local board.** In some cases, boards fail to submit files to the state. If you have not received a feedback report on a file for more than three weeks, contact your board and ask if they have submitted the data, and where the feedback report is for the file.
5. **Data submission date is not accounted for in agency calculation of data.** The MDR is a point-in-time estimate of the submission rate for Outcomes based on a one-year time period, based on data that are accepted before the cut-off date for running the report. Data that an agency submits after that cut-off date could not be included in the Missing Data Report, but the agency may include these records in their accounting.
6. **Agencies do not subtract empty records from their count of Outcomes submitted.** Although included in 1 above, this misunderstanding is an important source of confusion. Empty records are common at the time of termination, and are an important way to shut off "tickler" reports, but records without any respondent-completed data are not included in the computing the numerator.
7. **Initial versions of the MDRs have errors.** In one case, an error of calculation was made in the computation that goes into the Missing Data Reports. However, this error was quickly identified and fixed. A new version of the MDR was issued, and a notice was sent the Outcomes e-mail list.
8. **Using local board data to assess missing data omits out-of-county data**. Boards receive extracts of Outcomes and claims data from ODMH that contain data for residents of that county; not all of the Outcomes data submitted to a local board will be sent back to the local board in the extract. This means that it may appear that data are present at a higher rate than is actually the case.

2. Using the File Submission Tracking Form

An Excel workbook has been created that allows agencies to record information concerning the Outcomes data files that have been submitted and corresponding information about the feedback files. If you do not use Excel, contact outcome@mh.state.oh.us to get these in a different format. The workbook contains 5 spreadsheets, one for each instrument (Adult Consumer, Adult Provider, Ohio Scales Worker, Ohio Scales Parent, and Ohio Scales Youth). Using these forms will allow agencies to determine which files have been sent, when, and when feedback files are received, how many new and duplicate records were accepted, how many records were rejected, and when critical errors were corrected.

At the time of export, the first three columns should be completed. These columns are *File Name*, *Number of Records in File* and the *Send Date*.

- The *Send Date* is the date that the file was actually submitted to the board, not the date of export from the database, though they may be the same date.
- The *Number of Records in File* can be verified by line 3 of the Feedback report.

Upon receipt of the feedback report (the feedback report is described on page 6&7 of the Data Flow Guide: http://www.mh.state.oh.us/oper/outcomes/data.flow/df.guide.appendices.pdf), the next three columns should be completed.

- The *Feedback Report Receipt Date* could be optional, and may contain the ODMH production date (which is in the first line of the document), the board posting date, or the date the agency downloaded the report.
- The *Number of New Records Accepted* is found on line 7 of the Feedback Report under the label: "Number of Non-Duplicate Key Values to History File."
- The *Number of Duplicate Records Accepted* is found on line 5 under the label: "Number of Key Value Duplicates Added To History File."

The field *Number of Records Rejected* is a field computed by subtracting the *Number of New Records Accepted* and *Number of Duplicate Records Accepted* from the *Number of Records in File* field. Most often, this number will match the

number reported on line 4 under the label: “Number of Critical Errors.” However, there may be more than one critical error in a record, so this number may not match.

Finally, the Critical Errors Fixed Date should be completed when the critical errors identified in the feedback report are corrected in the database AND marked for re-export.

Using this form proactively should assure that data sent to ODMH are accepted, and the data with critical errors are re-submitted.

3. Suggested Procedure for Reconciliation with Missing Data Report

The following steps are suggested when an agency believes there is an error in the Missing Data Report, but other methods could be attempted. This process is not simple, and could be time-consuming. This process is defined for the Classic MDR only. The steps to take for the Instrument version and other versions to come would differ substantially from this process.

1. Using the File Submission Tracking Form, record each file submitted and the information received from the critical errors. If files submitted do not have corresponding feedback reports and sufficient time has passed such that they are expected (more than 2 weeks), contact the board about the status of each file in question. If the board is non-responsive, contact the ODMH Area Director for assistance. If there is no evidence that all records with critical errors have been corrected (such as a log of changes, or a random review of the data shown in the critical error reports) and resubmitted, then process the critical errors and resubmit the data.

2. Using the agency database, compute the number of people (not administrations) who have administrations that fall into the reporting year of the MDR in question. Be sure to only count records that have been submitted to ODMH on or before the cut-off date for the MDR in question and have not been rejected, and that have at least one respondent-completed field. These respondent-completed fields are items 1-61 on the Adult Consumer Form, items 1-12i on the Adult Provider Form, items 1-20 on the Functioning Scale, items 1-20 on the Problem Severity Scale for the Parent, Youth and Worker Forms of the Ohio Scales, items 1-4 of the Satisfaction Scale from the Parent and Youth Forms of the Ohio Scales, items 1-4 of the Hopefulness Scale from the Parent and Youth Forms of the Ohio Scales, the five ‘marker’ fields and the ROLES Scale items from the Worker form. This list excludes the Tracking Sheet and Demographic fields. Be sure to count as present the fields that contain valid response values rather than values indicating missing data, such as “9”.

   This step is best undertaken by using a query. The query should group by the UCI, select records from the MDR date range, select records that have at least one respondent-completed item as defined above and select records that have been exported. Because of the variability of the file layouts and field definitions, this step may include multiple tables or a single table (the Template uses a single table to store all three instruments for adults and another table to store all three instruments for youth).

3. If the number derived in step 2 is higher than the number found in the MDR for the population in question (adult or youth), you may make arrangements to get extracts from ODMH of the Outcomes records in the ODMH production database. We will request that you prepare a file of UCIs, Administration Dates and UPID numbers for each instrument. The records that should be included are those with Administration Dates in the MDR period in question, that were accepted before the cut-off date, were accepted by ODMH, and were not empty. The Outcomes Support Team will describe these steps in more detail. We will prepare a file that contains the same information, and also contains a flag that indicates whether we received each record and a flag that indicates whether we determined whether the record was empty (no respondent-completed fields). Additionally, we will send information about records that you did not send in the list that we have that were used in the MDR. Agencies can then run this information against their own data to determine which records, if any, they believe ODMH did not include in the MDR but should have.

4. How to Avoid this Process

While real data flow issues do arise, the best way to avoid the need to take these steps is to do everything to collect and submit data from all consumers at all intervals, and then to work the critical error reports. Most of the provider agencies that are near 100% on the Missing Data Report use the data in treatment and in quality improvement. This data use stimulates the collection and submission of data.