



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

IN REPLY REFER TO

BUMEDINST 7000.9A

BUMED-M843

27 May 2014

BUMED INSTRUCTION 7000.9A

From: Chief, Bureau of Medicine and Surgery

Subj: NAVY MEDICINE DATA QUALITY MANAGEMENT CONTROL PROGRAM

Ref: (a) DoD Instruction 6040.40 of 26 Nov 2002
(b) DoD Directive 6040.41 of 13 Apr 2004
(c) DoD Instruction 6040.42 of 10 Jun 2004

Encl: (1) Acronyms

1. Purpose. This instruction implements policy and procedure as prescribed in reference (a) and establishes the Navy Medicine Data Quality Management Control Program (DQMCP) at all levels responsible for managing, reporting, and monitoring clinical, financial, and labor data to include all Navy Medicine (NAVMED) echelon 3 commands. References (b) and (c) provide Department of Defense (DoD) policy pertaining to the Data Quality Management Control (DQMC) Review List. Enclosure (1) includes a list of acronyms used in this instruction.

2. Cancellation. BUMEDINST 7000.9.

3. Scope. This instruction applies to the Bureau of Medicine and Surgery (BUMED) and applicable subordinate commands.

4. Policy. BUMED shall ensure workload, labor, and financial data are reported in a timely, accurate, and complete manner. The DQMCP will meet the requirements prescribed in reference (a) and support mission requirements and strategic goals. BUMED Headquarters, NAVMED West, NAVMED East, and each medical treatment facility (MTF) shall establish and operate a DQMCP and provide the internal management structure necessary to improve and sustain data accuracy, completeness, and timeliness. This initiative is critical for standardizing information to support data-driven decision making throughout the enterprise. To ensure reported information is shared and to avoid duplicate reporting procedures and requirements, each echelon command level shall establish a Data Quality Assurance Team (DQAT). In addition to establishing a DQAT at the MTF level program development, organizational alignment, and system updates warrant the need to ensure all communities within the enterprise are aware of the DQMCP goals and reporting requirements. To ensure that appropriate and effective command and control measures are maintained, Data Quality (DQ) Managers at all levels will be organizationally aligned under Resource Management/Comptroller (BUMED-M8).

5. Responsibilities. The roles and responsibilities of the BUMED, NAVMED regions, and the MTFs under their cognizance are outlined below.

a. BUMED shall:

(1) Establish overall policy and reporting procedures, as prescribed in reference (a), in a manner that mitigates fraud, waste, and abuse in support of NAVMED's strategic plan and performance goals.

(2) Monitor compliance with this instruction and supplements as needed.

(3) Publish annual policies and procedures, including updates to enclosures (1) and (2) of reference (a) as appropriate.

(4) Appoint a BUMED DQ Program Manager in writing.

(5) Establish a BUMED DQAT. BUMED will appoint members who are subject matter experts/program managers that provide input into the DQMC Review Checklist. At a minimum, membership will consist of staff members responsible for the following programs; Medical Expense and Performance Reporting System, Uniform Business Office (UBO), Information Management/Information Technology, Chief Medical Information Officer, Patient Administration, Managed Care/Access to Care; Healthcare Information Management (HIM), Medical Record Administration, Total Force Management, Business Planning, and Internal Control.

(6) Establish and maintain a Navy Medicine DQMC Training Program.

b. NAVMED East and West shall:

(1) Comply with this instruction.

(2) Publish supplemental guidance as required to ensure compliance and goals are met.

(3) Monitor subordinate commands to ensure compliance.

(4) Advise BUMED if there are constraints that prevent activities from complying with published guidance and target goals.

(5) Appoint a Regional DQ Manager in writing.

(6) Establish a Regional DQAT. Membership will consist of subject matter experts/program managers with the same minimum requirements found in 5a(5).

c. MTFs shall:

(1) Comply with this instruction.

(2) Appoint an MTF DQ Manager in writing.

(3) Establish a DQAT. Membership will consist of subject matter experts/program managers with the same minimum requirements found in 5a(5) and personnel that support input into the DQMC review checklist. Recommended personnel include, but are not limited to, staff members responsible for: labor reporting, systems administrators for all systems monitored in the DQMC review list, manpower assignments, business planning, utilization management/managed care, professional affairs (credentials), the Armed Forces Health Longitudinal Technology Application provider champion, DQ Executive Steering Committee representative, and clinic medical administration officer(s).

(4) Implement processes and procedures to meet DQMCP target goals and advise the respective NAVMED Regional DQ Manager when an issue compromising DQ requirements cannot be resolved at the local level.

6. Functional Roles and Responsibilities. The DQ Manager is responsible for the implementation and oversight of the DQMCP within their organization. The BUMED standard organization does not accommodate a DQ Department. The DQ Manager is the chairperson of the DQAT and at a minimum, ensures the DQAT has the appropriate membership, schedules and convenes meetings, meets DQ reporting requirements, and ensures the DQAT members understand and comply with annual DQMCP Guidance. The DQ Manager provides briefs to senior leadership on the status of the command DQMCP and issues affecting strategic goals and performance metrics. The DQ Manager maintains historical records of minutes, reports, briefings, and other pertinent data for a period of 5 years, per reference (a).

a. The BUMED DQ Manager

(1) Serves as the Program Manager for Navy Medicine's DQMCP. Represents NAVMED at the Military Healthcare System (MHS) DQMC Working Group and complies with Service DQ Manager requirements located in reference (a).

(2) Provides the NAVMED Annual DQMCP Reporting Policy and Procedures, which establishes deadlines and reporting requirements, training program, and standard methods to facilitate an enterprise wide data analysis.

(3) Ensures program status and updates are reported to BUMED Directorates, MHS DQMC Working Group, BUMED DQAT, NAVMED East, NAVMED West, and MTFs.

(4) Chairs BUMED DQAT and ensures meetings are scheduled as needed and no less than quarterly. Validates BUMED DQAT membership rosters to ensure alignment with the NAVMED strategic plan and performance goals.

(5) Provides program updates for inclusion and/or updating of all formal courses including, but not limited to, the Patient Administration Officer Course, Clinic Manager Course, and the Financial and Materiel Management Training Course.

b. The BUMED DQMC Training Manager

(1) Establishes and maintains the DQMC Training Program to include standard operating procedures for all items on the DQMC Review List.

(2) Establishes and maintains up-to-date DQ manuals that illustrate process and system utilization in support of DQMC goals.

(3) Ensures training initiatives are current with the fiscal year (FY) reporting requirements.

c. The NAVMED East and West DQ Manager

(1) Reviews and validates MTF Commander's Monthly DQ Statement against MHS Mart (M2) BUMED DQ Central Validation reports.

(2) Provides a quarterly NAVMED Region DQ Summary Report. The NAVMED Region DQ Summary report will identify best practices and/or Regional actions taken to facilitate corrective actions with MTFs who have not achieved the DQMC goals.

(3) Manages the Regional DQMC Program per the NAVMED Region Command strategic plan.

d. The MTF DQ Manager

(1) Provides the Commander's Monthly DQ Statement submission to the NAVMED Region DQ Manager per the annual BUMED DQMCP guidance.

(2) Tracks systems status daily to assess cause and effect for non-compliant metrics.

(3) Ensures MTF policies and procedures support synchronized systems to avoid data variations in central repositories.

(4) Reconciles local data with Central Validation reports located in the M2 BUMED DQ folder. Initiates root cause analysis and facilitates corrective actions necessary to address non-compliant metrics. Reports status of corrective actions and MHS trouble tickets on the Commander's Monthly DQ Statement for all non-compliant metrics.

e. DQ Assurance Teams. DQATs provide the subject matter expertise necessary to monitor and report the management control categories provided in the DQMC Review List and Commander's Monthly DQ Statement.

(1) BUMED and NAVMED Region DQATs meet as needed but at least quarterly. DQAT Members shall:

(a) Annually review and recommend changes to the DQ Management Control Review List and Commander's Monthly DQ Statement. Establish additional standards and/or metrics based upon strategic goals and performance targets (e.g., increase the minimum medical record sampling requirement, adding NAVMED metrics such as Readiness Metrics implemented in FY 11 and enhancing the DD Form 2569 Collection metrics).

(b) Review DQ reports and data trends to determine corrective actions and/or best practices to publicize to their respective communities (e.g., executing table updates which impact coding completion/coding accuracy metrics and initiatives such as deploying assist teams, software, and centralized contracting).

(c) Report changes in programs, new initiatives, progress on system change requests, systems deployments, and tools that impact NAVMED's DQMCP (e.g., annual medical code table updates).

(2) The MTF DQAT members shall complete the assigned portion of the DQMC Review List monthly; each member will be responsible for ensuring the completion of the appropriate sections of the DQ Review List related to their subject matter expertise. The MTF DQAT will meet monthly to review the findings and compile the Commander's Monthly DQ Statement per NAVMED's annual DQMC guidance.

7. Reporting Requirements. DQMCP documents must be handled per requirements for financial records. Internal Review offices and external oversight organizations, such as the DoD Inspector General or Government Accountability Office, may use these documents as part of their audit activities.

a. DQMC Review List. The DQMC Review List is structured based on five management control points; organizational factors; data input; data output; security and system design; development, operations and education/training. The DQMC Review List is the backbone of the DQMCP and must be completed monthly by subject matter experts responsible for the specific questions at each MTF. Commands are highly encouraged to maintain both hard and soft copy documents as data call support to higher headquarters may be required periodically.

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b. Commander's Monthly DQ Statement. Specific information from the DQMC Review List must be reported via the Commander's Monthly DQ Statement. For any DQ issue related to systems operation that cannot be resolved at the local level, the issue must be noted in the comment section with the related trouble ticket. MTF DQ Managers submit their signed statements to their respective Regional DQ Manager who in turn must provide validated statements to BUMED by the deadline established in the BUMED annual DQMC guidance letter.

c. Quarterly NAVMED Region DQ Summary Report. This report provides a summary of issues, concerns, and best practices within the region based on the MTF Commander's Monthly DQ Statements. NAVMED Region DQAT members shall provide comments in the report that are specific to their subject matter expertise (e.g., areas on coding accuracy shall be addressed by the NAVMED Region HIM staff and areas of DD Form 2569 collection shall be addressed by the NAVMED Region UBO Manager). The NAVMED Region DQ Summary Report shall be submitted to the BUMED DQ Manager by the prescribed deadline published in the annual fiscal year DQMCP Guidance with copies to the respective Regional Board of Directors.

d. Service Report to Defense Health Agency (DHA). The BUMED DQ Manager will review, analyze, and validate the Regional DQ Summary Report and submit the BUMED DQ Report to the DHA Management Control Program Office per reference (a).

8. Records. Records created as a result of this instruction, regardless of media and format, shall be managed per SECNAV M-5210.1 of January 2012.

9. Reports. The reports required in paragraphs 4, 6(a)1(c), 6(a)1(e), 6(a)3(a), 6(a)3(b), 6(a)4(a), 6(a)4(d), 6(a)4(e), and 7 are exempt from reports control per SECNAV M-5314.1 of December 2005, part IV, paragraphs 7k and 7p.



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ACRONYMS

BUMED	Bureau of Medicine and Surgery
DHA	Defense Health Agency
DoD	Department of Defense
DQ	Data Quality
DQAT	Data Quality Assurance Team
DQMC	Data Quality Management Control
DQMCP	Data Quality Management Control Program
FY	Fiscal Year
HIM	Health Information Management
M2	Military Health System Mart
MHS	Military Health System
MTF	Medical Treatment Facility
NAVMED	Navy Medicine
UBO	Uniform Business Office