Mike DeWine, *Governor*
Lori Criss, *Director, OhioMHAS*

OBHIS Overview

Ohio Department of Mental Health & Addiction Services

June 2022

OBHIS Department Staff

- **Laura Potts, MA**
- **Beth E. Gersper, PhD**
- **Luke Werhan, MPA**

To contact us, please email:

OBHISadmin@mha.ohio.gov

What is OBHIS?

An application that …

- Collects Admission and Discharge data on clients receiving publicly-funded BH treatment (MH/SUD/Dual)

- Collects sociodemographic, clinical, and outcome measures (including the National Outcome Measures-NOMs)

- Required by SAMHSA for their Treatment Episode Data Set (TEDS)

- Replaces and expands the Ohio Behavioral Health (OHBH) – OHBH was designed to collect only SUD data, this system collects both SUD and MH data

Current Status

Went live on October 1, 2020

Data for about 167,500 unique clients are in OBHIS

Who Reports?

Providers certified or licensed by OhioMHAS to provide behavioral health services are required under ORC 5119.61 and OAC 5122-28-04 to report information in OBHIS.

… The department shall collect information about services delivered and persons served as required for reporting and evaluation relating to state and federal funds expended for such purposes.

**There is no current incentive(s) offered except that it is a requirement

Why haven't I heard of this before?

This is mandatory reporting, so we have made the following efforts to get all licensed and certified providers on board.

- Outreach through the OHBH/OBHIS Listserv
- OhioMHAS NewsNow newsletter
- Presentations to stakeholder groups (e.g., the Women's Network, UMADAOPs)
- Ongoing Technical Assistance
- OBHIS "Office Hours"

If you have not received any of our information, please send your name and email to:
OBHISadmin@mha.ohio.gov

How does this work?

- OBHIS application is housed in the iPortal, just like LACTS and other applications.

- Individuals must create an OH|ID and then request access to the OBHIS application

- Each Board/Provider organization has a 'provider administrator' that manages the users who can access their data

- Client records may be manually entered directly into the application <u>or</u> batch uploaded using an Excel file or XML

**training and TA offered and encouraged along the way

Registration and Use of the OBHIS System

- OH|ID One-time registration for the portal

- Approval for the OBHIS application

- Manual entry and/or Batch uploading of client information for admission, MH annual updates and discharges.

- Reports for quality management
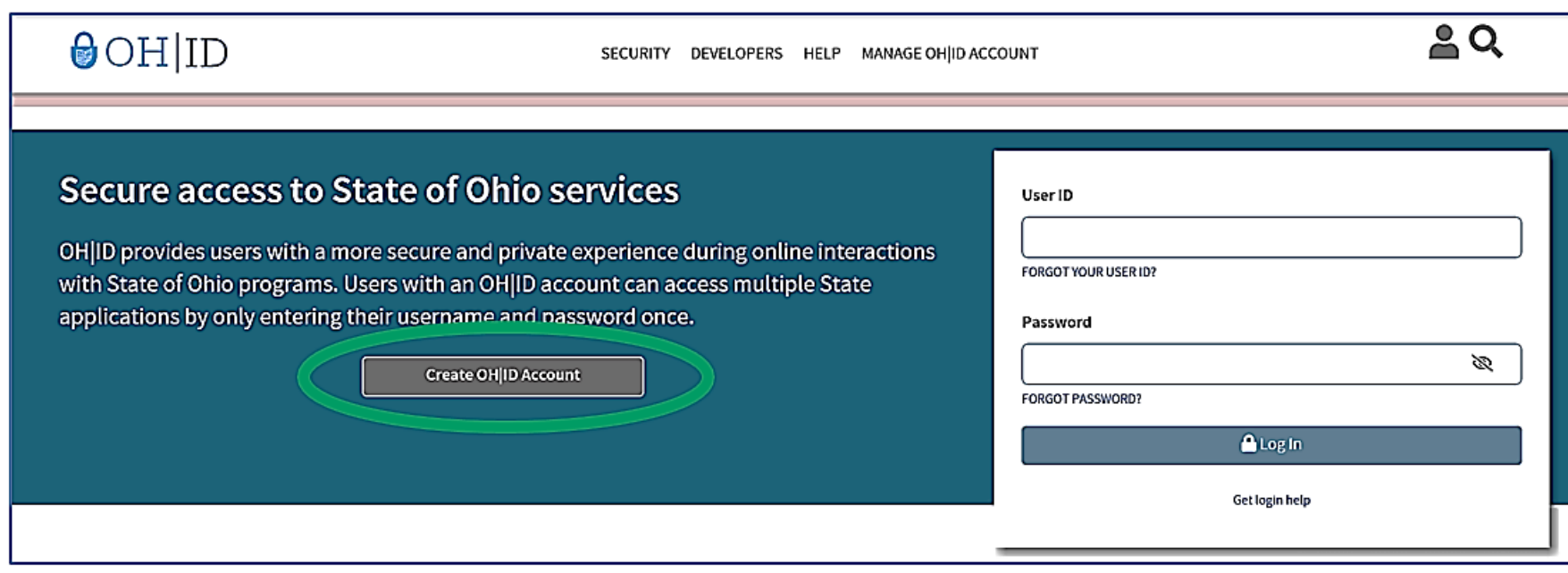
**training and TA offered and encouraged along the way

Today:

How do I create my OH|ID account?

1. Create and OH|ID account
2. Log into iPortal and request access to OBHIS

Link to OH|ID registration: https://ohid.ohio.gov/wps/portal/gov/ohid/

Who is your OBHIS Provider Administrator?

Provider administrators are responsible for the following:

- Authorizing and maintaining staff access to the system (adding staff when they are hired and removing staff if they leave the organization)
- Assisting with initial questions when staff create an account and use it for the first time
- Provider Setup
- Running performance reports

Every Provider/ Board needs a Provider Administrator

- The current OHBH Portal Administrator is NOT automatically the OBHIS Provider Administrator – you must register as such

NOTE: you will NOT be able to access OBHIS Production site until the application goes live (October 1, 2020). You will only see "coming soon."

OBHIS Dashboard Page

NOTE: *There is a 'test' site and a 'production' site – if you need access to the 'test' site, please email us: OBHISadmin@mha.ohio.gov*

Reports

There is an OBHIS report function. Both Providers and Boards can access some reports. There are 4 types:

- Client Status Reports

- Outcomes and Performance Reports

- Record Management Reports

- System Management Reports

**Only Boards who have been set up in an Organization's Provider Setup have access to Client summary reports

Client Status Reports

- Primary Drug of Choice Summary Report

- Employment Status Summary Report (NOM)

- Employment Status at Admission Summary Report with income Source Filter

- Living Arrangement Status Summary Report (NOM)

- School Enrollment Status Summary Report (NOM)

- Social Support Meeting Attendance Summary Report (NOM)

- Care Setting Summary Report

- Tobacco Use Summary Report

- Primary Source of Income/Support at Admission Summary Report

Outcomes and Performance Reports

- Employment Change over Time report
- Living Arrangement Change over Time report
- School Enrollment Change over Time report
- Meeting Attendance Change over Time report
- Tobacco Products Change over Time report
- Abstinence Outcomes at Discharge report
- Criminal Justice/ Arrest Change over Time report
- Disposition at Discharge Report

Record Management Reports

- Matched claims with admissions **summary** report
- Missing admissions **detail** report
- Missing discharges **summary** report
- Missing discharges **detail** report
- Unvalidated client ID's **summary** report
- Unvalidated client ID's **detail** report
- Clients' records **summary** report
- Client's records **detail** report
- Pending administrative discharges **detail** report
- Pending annual updates **detail** report
- Outstanding annual updates **summary** report
- Outstanding annual updates **detail** report
- Data entry statistics report

System Management Reports

- Most Current Admission by Date Report

- User Roles and Access Report

- Board Provider Access Report

Communication

Optimal communication, training and needed technical assistance are created using the following tools:

- Dedicated website: https://mha.ohio.gov/Health-Professionals/Behavioral-Health-Data-Reporting/OBHIS

- OBHIS application notifications (at the top of the dashboard)

- Dedicated OBHIS administration email: OBHISadmin@mha.ohio.gov

- NewsNow

- OBHIS list serv

- Frequently Asked Questions document (online)

OBHIS Website: https://mha.ohio.gov/research-and-data/obhis/welcome

Office Hours Schedule 2022

- **_Monthly, 75-minute sessions_**
- **_Morning_**
  - _~~Thursday, 1/20 from 10-11:15 AM~~_
  - _~~Thursday, 3/17 from 10-11:15 AM~~_
  - _~~Thursday, 5/19 from 10-11:15 AM~~_
  - **_Thursday, 7/21 from 10-11:15 AM_**
  - **_Thursday, 9/15 from 10-11:15 AM_**
  - **_Thursday, 11/17 from 10-11:15 AM_**
- **_Afternoon_**
  - _~~Thursday, 2/17 from 1-2:15 PM~~_
  - _~~Thursday, 4/21 from 1-2:15 PM~~_
  - **_Thursday, 6/16 from 1-2:15 PM_**
  - **_Thursday, 8/18 from 1-2:15 PM_**
  - **_Thursday, 10/20 from 1-2:15 PM_**
  - **_Thursday, 12/15 from 1-2:15 PM_**

# OBHIS DATA MART, DATA VALIDATION, AND SUBMISSION PROCESS

Jon R Garey, MSCIS

Director of Information Technology

Overview: Capture Data from EMR and Forms into a Data Mart

- Most information is gathered from patient profile, diagnosis record, insurance, and service records in the Credible EMR

- Some information is captured in service enrollment and intake documents

- NOMS/OBHIS data captured at Intake, Annual Treatment Plan Update, Discharge

- Built logic in data mart review to identify previously existing records, ensure all required data elements were filled (default values) as per OBHIS requirements.

- Data mart is updated daily from information extracted from EMR.

- Roll-Out over first 12 months was based on the month of the most recent intake (October, November . . .) in any year.

- Process to identify and track individuals discharged from services who had a previously submitted OBHIS record.

High Level Overview of OBHIS Data Flow
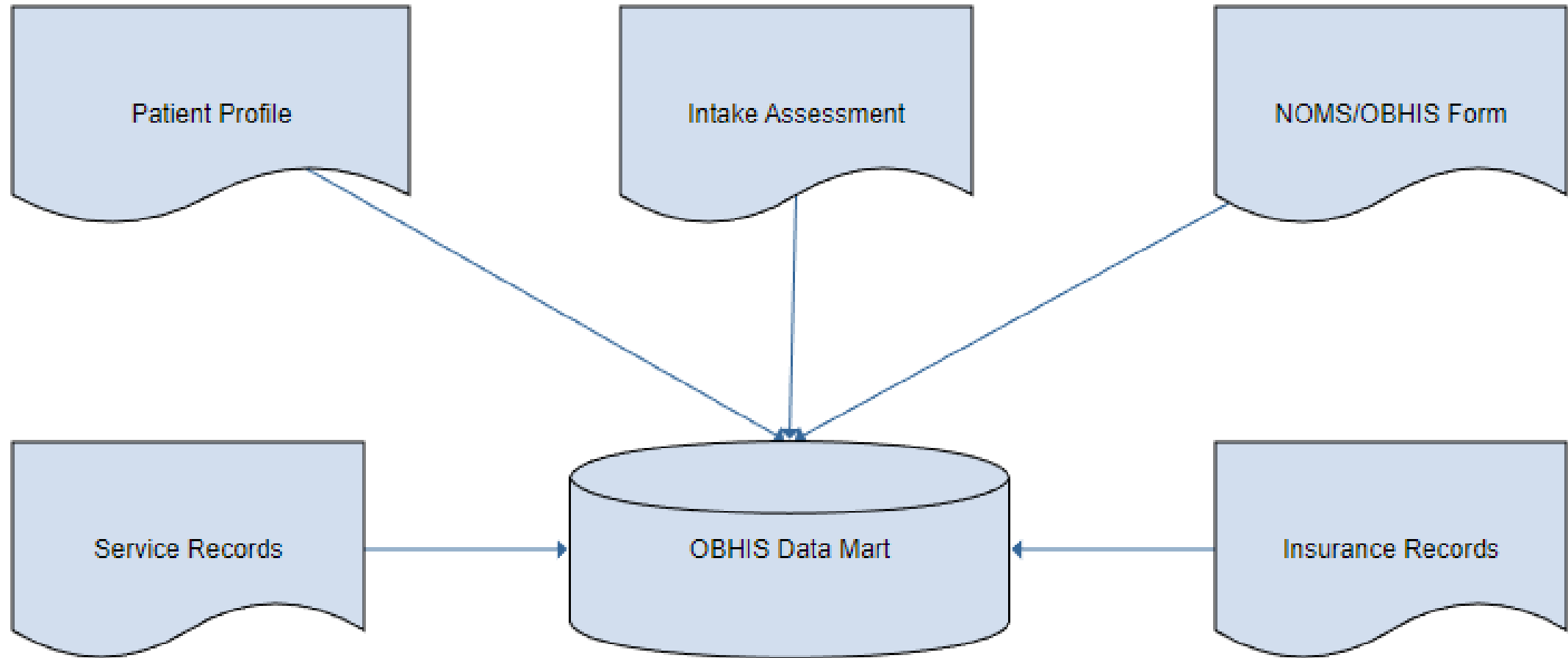
Data Collection – EMR Forms

STABILITY IN HOUSING

10. In the past 30 days how many . . .

a. nights have you been homeless?

b. nights have you spent in a hospital for mental health care?

c. nights have you spent in a facility for detox/inpatient or residential substance abuse treatment?

d. nights have you spent in correctional facility including jail, or prison?

Total Number of Nights

e. times have you gone to an emergency room for a psychiatric or emotional problem?

11. In the past 30 days, where have you been living most of the time?* ------

12. How many children under the age of 18 live in the household?*

13. In the past 30 days, how many times have you been arrested?*

EDUCATION AND EMPLOYMENT

14. Are you currently enrolled in school or a job training program?* ------

14a: Education Type (K-12 Education Program)* ------

15. What is the highest level of education you have finished, whether or not you received a degree?* ------

16. Are you currently employed? * ------

PREGNANCY AND CHILDBIRTH (FEMALES ONLY)

17. Number of children you have given live birth to in the last 5 years (Do not include stillborn births).

18. Total number of live and still births.

19. Are you currently pregnant?
- ◯ No
- ◯ Yes

Data Collection – EMR Forms

Special Population

☑ **Select All Special Population Categories That Apply To The Client (Check to Show Categories)***

- ☐ **SMD/SED:** The client has a long-standing, persistent disability due to a psychiatric condition. The client has a history of multiple psychiatric hospitalizations and/or placements, as well as substantial engagement with community mental health providers.

- ☐ **Alcohol/Other Drug Use** Can be used to indicate a substance abusing/mentally ill (SAMI) client if admission record is for mental health client.

- ☐ **Forensic/Legal Status:** Client is involved in the criminal or juvenile justice system and is also served or eligible to be served by the mental health system. Forensic clients can be adults or youth with mental illness who get arrested, detained, or diverted. They can also be individuals in the hospital or on conditional release who have a forensic legal status or people coming out of person/jail who have serious mental illness.

- ☐ **Sexual Offender:** Client is a registered offender and/or someone with a history of referral and treatment for sexual aggression.

- ☐ **Suicidal:** Includes clients with a history of multiple episodes of suicidality or low lethality suicidal behavior. Also refers to history of intentional self-injury, such as cutting.

- ☐ **Military Family/Dependent:** Client is the child, spouse or other dependent of active or inactive soldier. Military includes National Guard, Army, Navy, Marines, and Coast Guard

- ☐ **In Custody of Childrens Services:** Client is a dependent child in state custody at time of record creation

- ☐ **Language Barriers/English as a Second Language** Client cannot communicate in English or is not a native English speaker

- ☐ **Deaf or Hearing Impaired** Client has partial or full hearing impairment

- ☐ **Developmental Disability:** Can be used to indicate client has a DD diagnosis without entering a specific Axis II diagnosis.

- ☐ **Physically Disabled:** Client has a physical disability involving motor skills or ambulation.

- ☐ **Blind or Visually Impaired:** Client has partial or full sight impairment.

- ☐ **Speech Impaired:** Client has a partial or full speech impairment.

- ☐ **HIV/AIDS:** Client is positive for HIV/AIDS.

- ☐ **Hepatitis C:** Client is positive for Hepatitis C virus.

- ☐ **Traumatic Brain Injury:** Client has a partial or permanent disability resulting from a brain injury

- ☐ **Physical Abuse Victim :** Client has a history of physical abuse, restraint, threat of physical harm or other inappropriate physical contact.

Data Management - EMR

Description
00 - OBHIS Data Submission (New Episode)
01 - New Assessment (Intake)
02 - Update Assessment (Annual)
03 - Discharge Assessment
90 - Retrospective Hold
91 - Health Center Only Patient
92 - Excluded/No Service
93 - Needs Data Authorization

⊟ Other information			
Prior Mental Health HX:	NO	**At Risk:**	NO
Shelter Plus Care Grp		**OBHIS Data Permission:**	YES
OBHIS Submit Type:	00 - OBHIS Data Submission (New Episode)	**OBHIS Submit Date:**	10/31/2020
OBHIS Referral Source	Employer/EAP	**OBHIS Educ Enrollment:**	03 - College
OBHIS Veteran Status:	NO	**OBHIS Education Type:**	00 - Not Currently Enrolled as Student
OBHIS Education Level:	15 - 2Yr. College/Associate Degree	**OBHIS Employment Status:**	01 - Part Time Employed
OBHIS Discharge Reason:		**OBHIS Arrests Last 30:**	4
OBHIS Children Under 18:	4	**OBHIS Childbirth Last 5:**	5
OBHIS Childbirth Total:	6	**OBHIS Currently Pregnant:**	YES
OBHIS Pregnancy Stage:	02 - Second Trimester (13-27 weeks/3-6 months)	**PlaceHolder**	

Record Selection Criteria

All persons who have been identified as having a Medicaid or ADM Board payer who are in an 'Active' or 'Referral' status and have had a billable service in the last 12 months or who are 'Closed' and have had a service in the last 18 months.

Monthly Selection Criteria

New Admissions – Individuals with intakes in the current review month
Update Records – Individuals with previously submitted admission records
Discharge Records – Individuals with previously submitted admission or update records who are now closed.
Review of previous records where a financial verification was completed.

Rollout (New Admission Records):

First 12 Months – Individuals who met the selection criteria whose most recent intake date was in the selected calendar month. October, November, December . . . .

Beginning October 2021 – Individuals with a new admission during the month or in previous months if data submission permissions was obtained.

Annual (Update Records):

Individuals who remain in 'Active' status who have a previously submitted OBHIS Admission record. Records are generated from data stored in the data mart.

Discharge Records:

Individuals who have been closed for a period of 4 months (120 days). CSS policy is to re-open individuals without a new intake if they have been closed for less than 90 days.

Additional selection criteria:

A previous OBHIS record was sent.

Data mart logic – associate episode beginning date with Discharge record.

Exclusions:

Persons assigned to Health Center (Primary Care) Services only.

Persons who have not signed a financial verification form (permission to submit data to OBHIS)

Upload Process (Monthly):

Extract each record set into the OBHIS Excel worksheet

Upload to OBHIS site – seeing about a 2% rejection rate for submitted records. Working through these to identify issues causing the rejections.

Data Mart – Staging Table

DataPermission	SubmitType	LastSubmitDate	AgencyStatus	AgencyTeam	CaseManager	IDType	IdentifierValue	FirstName	LastName	DateOfBirth	Gender	Race	Ethnicity	AdmissionAction	AdmissionType	DateOfFirstContact	AdmissionDate	MaritalState
1	NA	2021-08-12	Active	NE		SSN					Male	White	Not of Hispanic Origin	Add	MH	2020-07-01	2020-07-01	Married (Living Together as Marr
1	UD	2022-05-24	Active	RES 13		SSN					Male	White	Unknown	Add	MH	2018-04-24	2018-04-24	Unknown
1	NO	1900-01-01	Active	SE		SSN					Female	White	Not of Hispanic Origin	Add	MH	2013-09-08	2013-09-08	Divorced
1	NA	2021-06-14	Active	NW		SSN					Male	Black/African-American	Not of Hispanic Origin	Add	MH	2007-05-31	2007-05-31	Unknown
1	NO	1900-01-01	Active	NE		SSN					Female	White	Not of Hispanic Origin	Add	MH	2008-08-29	2008-08-29	Married (Living Together as Marr
1	NA	2021-08-12	Active	SE		SSN					Female	White	Not of Hispanic Origin	Add	MH	2020-07-10	2020-07-10	Single (Never Married)
1	NA	2021-07-27	Active	SE		SSN					Male	Black/African-American	Not of Hispanic Origin	Add	MH	2021-06-03	2021-06-03	Single (Never Married)
1	NA	2022-04-11	Active	SE		SSN					Male	White	Not of Hispanic Origin	Add	MH	2022-03-11	2022-03-11	Single (Never Married)
1	DC	2022-01-15	Closed	MED 01		SSN					Male	White	Not of Hispanic Origin	Add	MH	2021-09-09	2021-09-09	Single (Never Married)
1	NA	2021-06-14	Active	SW		SSN					Male	White	Not of Hispanic Origin	Add	MH	2017-05-17	2017-05-17	Unknown
1	UD	2022-01-15	Active	PCT 01		SSN					Male	White	Not of Hispanic Origin	Add	MH	2020-12-17	2020-12-17	Separated
0	DA	1900-01-01	Closed	LIT 01		SSN					Male	Black/African-American	Not of Hispanic Origin	Add	MH	2021-07-12	2021-07-12	Single (Never Married)
1	UD	2021-11-29	Active	SE		SSN					Female	Black/African-American	Not of Hispanic Origin	Add	MH	2018-10-08	2018-10-08	Single (Never Married)
0	DA	1900-01-01	Closed	LIT 02		SSN					Male	Unknown	Unknown	Add	MH	2021-06-09	2021-06-09	Married (Living Together as Marr
0	DA	1900-01-01	Referral	LIT 01		SSN					Male	White	Not of Hispanic Origin	Add	MH	2022-04-19	2022-04-19	Divorced
1	UD	2022-05-24	Active	NW		SSN					Male	White	Not of Hispanic Origin	Add	MH	1999-04-21	1999-04-21	Single (Never Married)
1	UD	2022-01-15	Active	ITT 01		SSN					Female	White	Not of Hispanic Origin	Add	MH	2020-12-14	2020-12-14	Divorced
1	UD	2021-11-29	Active	SW		SSN					Female	White	Not of Hispanic Origin	Add	MH	2005-10-21	2005-10-21	Single (Never Married)
1	NA	2021-10-27	Active	NW		SSN					Female	Black/African-American	Not of Hispanic Origin	Add	MH	2010-09-09	2010-09-09	Unknown
0	DA	1900-01-01	Closed	LIT 02		SSN					Male	White	Unknown	Add	MH	2021-09-18	2021-09-18	Unknown
1	NA	2021-10-27	Active	MED 01		SSN					Female	Black/African-American	Not of Hispanic Origin	Add	MH	2000-09-07	2000-09-07	Single (Never Married)
1	NA	2021-06-14	Active	NW		SSN					Male	Black/African-American	Unknown	Add	MH	2021-05-28	2021-05-28	Married (Living Together as Marr
0	ER	1900-01-01	Active	MED 01		SSN					Female	White	Not of Hispanic Origin	Add	MH	2022-05-20	2022-05-20	Married (Living Together as Marr
1	DC	2022-01-15	Closed	SE		SSN					Male	White	Not of Hispanic Origin	Add	MH	2021-09-10	2021-09-10	Single (Never Married)
1	NA	2021-11-29	Active	NW		SSN					Male	Black/African-American	Not of Hispanic Origin	Add	MH	2021-10-25	2021-10-25	Single (Never Married)
1	NA	2021-08-12	Active	NW		SSN					Female	Black/African-American	Unknown	Add	MH	2012-07-24	2012-07-24	Single (Never Married)

Data Mart – Submission Table

Data Mart – Submission Table

Meeting Notes

- Attendance: 53

- Shared Links:

  - OBHIS Email: OBHISadmin@mha.ohio.gov

  - OBHIS Website: https://mha.ohio.gov/research-and-data/obhis/obhis

  - Office Hour Presentations: https://mha.ohio.gov/research-and-data/obhis/resources/faqs

- Chat/Discussion:

1. **When you (Jon Garey) find an error in your submission, do you correct it in your data mart? – what's the process –**
   - It really depends on what's causing the error – if the error is in the data that we are storing, we would update the EMR where we store the data. Sometimes there's a problem with our own logic in the spreadsheet, so we correct it, and resubmit that record. Then we fix the error to make it so that error doesn't happen again.

2. **You (Jon Garey) started submitting data in October 2021. You included that month's data and the previous October?**
   - We started submitting data in November 2020, so it would be new admissions October 2020 and any active admissions from previously. Our active caseload at any point in time is about 4000 people. So we were dealing with anywhere from 300-400 records per month. We were not storing original referral source. We had to identify those and some other values, so that our initial record set of data would be good – now the time I spend doing data validation is only with current records.

3. **We found one of the biggest issues related to clients that were from years ago – how do you (Jon Garey) deal with those clients?**
   - We used about a year-long process to analyze the data we were not collecting, so we could fill in those fields by having the clinicians complete a form when they did updates with the clients. Streamlined things as much as possible – we did data collection 3 months prior to submissions.

Meeting Notes (cont.)

1. **We have been trying to go to patients and ask them to the 'best of your recollection, can you recall…' to fill in the missing fields, but it sounds like you (Jon Garey) were getting the information from today, not in the past..**
   - Yes. It would have been an impossible task otherwise.
   - OBHIS admin: We prefer you get the best data you can get – if getting that data is current data, then that's a good start. We are being pragmatic about this.
2. **So, we (as a provider) will need to make some decisions about things like that and document it**
   - OBHIS admin: Yes. That is reasonable and fine
3. **There is no guidance on these types of decisions – are you (OBHIS admins) open to putting out a statement on the site for feedback like that?**
   - Yes, in our trainings we encourage providers to begin where they are and sort of 'grandfather' clients into the system as they come in for treatment, yearly updates, and transfers. Do not add an admission only to discharge a client that was previously not in the system
4. **We have a single response for some of the fields that OBHIS splits out, such as race – how do you (Jon and OBHIS admins) all deal with those?**
   - We analyzed the requirements, and we also looked at the other reports we submit and tried to align all of them together – it took a year to do data cleanup
   - OBHIS admins: you can decide as a provider entity as to how you would like to represent your clients and document it.
5. **Is everything coming from your EHR?**
   - Yes, everything from the EMR (credible)
6. **Do you (Jon Garey) ever correct information of a client in the OBHIS application itself?**
   - I think we try not to do that – we are always trying to figure out why there was a rejection to fix it from happening to another record
7. **Were you (Jon Garey) able to test your data before going live?**
   - Yes, we spent several months in the test environment

http://mha.ohio.gov/

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