



DEPARTMENT OF THE ARMY  
HEADQUARTERS, U. S. ARMY MEDICAL COMMAND  
2050 WORTH ROAD, SUITE 10  
FORT SAM HOUSTON, TEXAS 78234-6010

REPLY TO  
ATTENTION OF

MCHS-IS

25 February 2002

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Minutes of the Medical Command Data Quality for AMEDD  
Success Team (DQFAST)

1. The DQFAST met in Room 107, Patient Administration Systems  
and Biostatistics Activity (PASBA) Conference Room,  
Building 126, at 0900 on 19 February 2002.

a. Members Present:

COL Halvorson, Team Leader, PASBA  
LTC Starcher, PASBA  
MAJ Wesloh, PASBA  
Ms. Mandell, PASBA  
Ms. Robinson, PASBA  
Mr. James, PASBA  
Mr. Padilla, RM  
Mr. Thompson, Internal Review

b. Members Absent:

COL Jones, ACofS (HP&S)  
LTC Dolter, Outcomes Management  
MAJ Burzynski, OTSG (IMD)  
MAJ Shahbaz, OTSG (Decision Support Cell)  
MAJ Griffith, RM  
MAJ Stewart, MEDCOM PAS  
Ms. Bacon, AMPO  
Ms. Leaders, TRICARE Operations Division  
Ms. Cyr, ACofS (PA&E)  
Ms. Enloe, PASBA  
ACofS Personnel Representative

c. Others Present:

MAJ Ruiz, representing COL Jones, ACofS (HP&S)  
Ms. Bowman, representing Ms. Leaders, TRICARE Operations

MCHS-IS

SUBJECT: Minutes of the Medical Command Data Quality for AMEDD  
Success Team (DQFAST)

Mr. Beckom, representing Ms. Bacon, AMPO  
LTC Patrin, MEDCOM Clinical Services  
Mr. Fannin, Internal Review  
Mr. Bacon, PASBA

2. Opening Remarks. A committee member mentioned the upcoming Association of the United States Army Medical Symposium and Exhibition on 6-10 May 2002. A portion of this conference will address data quality/reliability concerns.

3. Old/Ongoing Business.

a. Approval of Minutes. The January minutes were approved as written.

b. DQFAST Metrics (exceptions only). There were no exceptions to report.

c. Data Quality Management Control Program (DQMCP) Issues.

(1) DQMCP, New Issues. The chairperson related that The Surgeon General is putting more and more emphasis on data quality. The Regional Medical Command (RMC) data quality managers need to be present via video teleconferencing for the monthly DQMCP briefing to the Deputy Surgeon General.

(2) Coding Update.

(a) The PASBA coding consultant noted that the Army is going to prioritize the order in which Army hospitals receive training on coding. First priority will be given to the RMC's and the larger hospitals. The hospitals with large Primary Care Clinic populations will also be considered for first priority.

(b) When the Iowa Foundation conducts audits of the medical treatment facilities (MTFs), they will provide copies of their assessments to the MTF commanders and the service-level branch. The TRICARE Management Activity is funding the audits. The Iowa Foundation will be notified of which areas or topics do not need to be audited. This will preclude time spent auditing areas of concern that the Army is already aware of. Current

MCHS-IS

SUBJECT: Minutes of the Medical Command Data Quality for AMEDD Success Team (DQFAST)

funding does not permit the Iowa Foundation to conduct audits of all MTFs.

(c) By the middle of March, the contract with the 3M Corporation should be signed. Once the contract is signed, the 3M Corporation will provide two levels of training on coding. One will be for physicians and will concentrate on Evaluation and Management codes. The other will be for coders, which will address a broader range of coding. The Surgeon General has expressed great interest in this subject and will monitor the progress of training on coding at the MTFs.

(d) By the middle of March the Medical Health Services Utilization Report will be complete. The report will be posted on the PASBA website. **Decision: Copies will be provided to the MTF Utilization Managers. The MTF Data Quality Managers will be notified via electronic mail.**

(3) Medical Expense and Performance Reporting System (MEPRS) Expense Assignment System (EAS) IV Update.

(a) The first class this year on basic MEPRS was recently completed. Topics covered were the EAS IV and the Uniform Chart of Accounts Personnel Utilization Reporting System (UCAPERS). The next course is scheduled in late Spring of 2002.

(b) There has been a significant turnover within the MTF MEPRS offices. The grade of MTF MEPRS personnel along with the level and scope of work has hindered hiring efforts.

(c) Facilities continue to cleanup their 2001 data. Some sites appear to be experiencing more problems than others and are being closely monitored. Generally, the MTFs are expending a greater effort in meeting timelines for the submission of MEPRS data.

(d) The Army MEPRS Program Office (AMPO) representative related that they are reviewing a new software program called MEPRS Early Warning and Control System (MEWACS). This tool was developed in conjunction with the MEPRS Management Improvement Group. The MEWACS will proactively highlight potential MEPRS

MCHS-IS

SUBJECT: Minutes of the Medical Command Data Quality for AMEDD Success Team (DQFAST)

data anomalies on a timely and consistent manner. Once fully deployed, MEWACS will be refreshed with up to 24 fiscal months of MEPRS data from the EAS IV Repository on a monthly basis.

(e) There is an upcoming Resource Management Conference. A request has been made to have a session on data quality. The PASBA has not received any additional information on this request, but is more than willing to conduct a data quality session. The PASBA also offered to conduct a block of training on data quality at the basic and advanced MEPRS course.

(f) The MEPRS also has a windows based program on the clinician utilization and survey in UCAPERS, called UCAPERS Point and Click. This tool should make it a lot easier for clinicians and Advanced Primary Nurses to enter their time. The tool is currently being tested. The DQFAST Committee thought that having all class 1 and class 2 clinicians would be very beneficial. **Decision: The AMPO representative will take the committee's recommendation, to include all class 1 and class 2 clinicians on the UCAPERS Point and Click, back to their organization for consideration.**

d. DQMCP Trends. A new Combined Green-Amber-Red Report, [enclosure 1](#), has been developed. This new report combines the DQMCP Metric and Summary Report. This should make it easier to review MTF DQMCP results and track changes.

e. DQMCP Update. The DQMCP Group will meet on the 21st of this month. It will be mentioned again that facilities may have percentages that exceed 100 percent on questions 6a through 6d on the Commanders Data Quality Statement. **Decision: The DQMCP Group will be asked to reconsider how these facility results are evaluated.**

f. DQMCP Best Business Practices. There were several MTF Data Quality Managers that had good practices. The Data Quality Managers were asked to put their practices in writing and forward them to the committee for consideration. **Decision: This area will be addressed again at the next DQFAST meeting.**

g. Data Quality in the Balkans. There still appears to be some problems with country codes from the Balkans. **Decision: A**

MCHS-IS

SUBJECT: Minutes of the Medical Command Data Quality for AMEDD  
Success Team (DQFAST)

**representative from PASBA will contact Balkans personnel to resolve this issue.**

4. New Business.

a. The Internal Review representative from the Army Medical Command informed the committee that their office would begin conducting audits on data quality within the MTFs. The first two sites to be visited are Fort Campbell and Fort Benning.

b. Data Quality Training and Initiatives, enclosure 2. A new Data Quality Management Control Review List-Sources and Processes is being developed. This is in a workbook format and will become a guide to data quality. **Decision: The anticipated completion date will be the middle of March 2002.**

c. A Data Quality Workshop for the Army is in the planning stages. It is anticipated there will be two regional workshops for FY 02 and two regional workshops for FY 03. **Decision: Additional information will be relayed via MTF Data Quality Managers and PASBA website, once workshops are approved and finalized.**

5. Deferred Issue--None.

6. The meeting adjourned at 1020. The next meeting will be 19 March 2002 at 0900.

2 Encls  
as

JAMES A. HALVORSON  
COL, MS  
DQFAST Team Leader

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1-Each Committee Member