California Code Of Regulations
    |->
Title 22@ Social Security
    |->
Division 7@ Health Planning and Facility Construction
    |->
Chapter 10@ Health Facility Data
    |->
Article 8@ Patient Data Reporting Requirements
    |->
Section 97246@ Data Transmittal Requirements

CA

97246 Data Transmittal Requirements

(a)

Data shall be submitted using the Department's online submission system to file or submit each report. The following information must be included: the facility name, the unique identification number specified in Section 97210, the beginning and ending dates of the report period, the number of records in the report and the following statement of certification: I certify under penalty of perjury that I am an official of this facility and am duly authorized to submit these data; and that, to the extent of my knowledge and information, the accompanying records are true and correct, and that the applicable definitions of the data elements as set forth in Article 8 (Patient Data Reporting Requirements) of Chapter 10 (Health Facility Data) of Division 7 of Title 22 of the California Code of Regulations, have been followed by this facility.

(b)

Reporting facilities with an approved exemption to submit records using a method other than the Department's online submission system must submit the following information: facility name, the unique identification number specified in Section 97210, the data type of the report, the report period of the records submitted, the number of records in the report, the medium of accompanying records, the certification language as provided in (a) above, with a signature of the authorized representative of the facility and contact information. The information shall

accompany the report.

(c)

A facility's administrator may designate User   Account Administrators. For each User Account Administrator there must be a signed   facility User Account Administrator Agreement form (HCAI-OIS-773 Rev. August 2023),   hereby incorporated by reference, submitted to the Department.

(d)

Forms may be obtained from the Department of   Health Care Access and Information web site at www.hcai.ca.gov or by contacting the   Department's Patient Data Program at (916) 326-3935.