PSYCKES-Medicaid

Utilization Reports User's Guide



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Utilization Reports

Overview

Utilization Reports support provider Value Based Payment (VBP) and Behavioral Health Care Collaborative (BHCC) data needs by enabling users to understand their Medicaid Behavioral Health population who have had services with them and other providers in the past year.

Utilization Report Tabs

Medicaid Managed Care Plan and Product Line

• The Medicaid Managed Care Plan and Product Line tab allows any provider to view the Managed Care plans and product lines that their clients are enrolled in to help inform which plans and product lines to focus on.

Provider Network

 The Provider Network tab focuses on which other providers your agency shares clients with and for what service types. For example, this report informs where the clients served by your mental health clinic go for other services like Substance Use Disorder (SUD) services, medical ERs, or outpatient medical services. This information can help your agency decide which other providers to partner with.

Service Settings and Volume

• The Service Settings and Volume tab allows any provider to view the number of encounters per year, by service type for your agency, at other providers, and in total, that are generated by an individual client.

Report 1: Medicaid Managed Care Plan & Product Line

The Medicaid Managed Care Plan & Product Line report includes a list of all the plans that your agency's clients are currently enrolled in (Figure 1). The report provides a summary of all unique clients from the past year that are in any Medicaid Managed Care Plan (A), Medicaid Fee For Service (B) and an All Client Total (A + B), updated on a weekly basis.

				Registral +	Usa	ge Reports	Ť	Utilization Reports		
		МА	IN STREET	CLINIC					TA PDF	Excel
PROVIDER: MAIN STREET CLINIC	/								Filters	Reset
Medicaid Managed Care Plan and Product Line Provider Network Service Settings and Volume										
The distribution of Medicaid Managed Care Plans and Product Lines for MAIN STREET CLINIC current Medicaid clients.										
Name	♦ Total Clients ♦	Mainstream	HARP	HIV SNP≑	LTC FIDA	LTC MAP	LTC PACE	LTC Partial Cap	Medi Advan	caid tage
Affinity Health Plan	199	109	90							
Amerigroup New York	222	114	106					2		
Amida Care	67			67						
CDPHP	17	8	9							
Excellus BlueCross BlueShield	4	3	1							
Fidelis Care New York	978	508	468					1		1
HIP (EmblemHealth)	119	57	62							
HealthNow New York Inc.	1	۱								
Healthfirst PHSP, Inc.	868	371	497							
MVP	434	214	1 220							
MetroPlus Health Plan	514	173	315	25				1		
UnitedHealthcare Community Plan	306	163	143							
VNSNY Choice Select Health	21			19				2		
WellCare of New York	122	122	2							
Medicaid Managed Care Plan Total (A)	3,872	1,843	1,911	111				6		1
Medicaid Fee For Service* (B)	1,247									
Medicaid All Client Total (A + B)	5,119	1,843	1,911	111				6		1
Current Clients are defined as individuals who r The Managed Care Plan and Product Line were * Medicaid Fee for service count includes any clie	eceived a Medicaid refreshed as of the nt who lost their Me	billed service fr 01/21/2020. edicaid coverag	om MAIN STREET	CLINIC in the pa	st year 12/0	01/2018 - 12/	01/2019. Fir	st Previous 1	Next	ast

Figure 1. Utilization Reports: Medicaid Managed Care Plan & Product Line - Summary

Providers can also view which Managed Care Plans they have the most clients with to inform engagement and outreach (Figure 2).

My QI Report -	Statewide Reports	Recipient Sea	rch Pro	vider Search	Registrar -	Usa	ge Reports	-	Utilization Reports		
			МА	IN STREET	CLINIC					DF	IN Excel
PROVIDER: MAIN STRE	ET CLINIC	-								Filters R	eset
Medicaid Managed	I Care Plan and Product L	ine Provide	r Network	Service Setting	gs and Volume	dicaid cli	ante				
The distribution of h	Name \Rightarrow	Total Clients	Mainstream #	HARP	HIV SNP			LTC	LTC Partial Cap 🔶	Medica	aid ge
Affinity Health Plan		199	109	90							9-
Amerigroup New York		222	114	106				_	2		
Amida Care		67			67						
CDPHP		17	8	9							
Excellus BlueCross Blue	Shield	4	3	1							
Fidelis Care New York		978	508	468					1		1
HIP (EmblemHealth)		119	57	62							
HealthNow New York In	c.	1	1								
Healthfirst PHSP, Inc.		868	2 371	497							
MVP		434	214	220							
MetroPlus Health Plan		514	3 173	315	25				1		
UnitedHealthcare Comr	nunity Plan	306	163	143							
VNSNY Choice Select H	lealth	21			19				2		
WellCare of New York		122	122								
Medicaid Managed Care	e Plan Total (A)	3,872	1,843	1,911	111				6		1
Medicaid Fee For Service	ce* (B)	1,247									
Medicaid All Client Tota	I (A + B)	5,119	1,843	1,911	111				6		1

Figure 2. Utilization Reports: Medicaid Managed Care Plan & Product Line – Total Clients

Report 2: Provider Network

The Provider Network Report displays a list of all providers that have also served your agency's current clients and the total number of those clients (Figure 3). The first column in this report called "Provider Name" lists the providers who have served your agency's current clients in the report time period. The remaining columns are labeled with a specific service setting. The numbers in the table represent the number of clients who received a service from that specific service setting in a given column, from that specific provider agency in a given row. The following section describes the service setting column headers in this report.

Services

The column headers represent the following types of services billed:

• Inpatient Services

- IP-Medical: Inpatient Medical
- IP-SUD: Inpatient Substance Use Disorder (SUD)
- IP-MH: Inpatient Mental Health

• Emergency Room or CPEP Use

- o ER/CPEP with a primary Medical Diagnosis
- ER/CPEP with a primary Mental Health Diagnosis
- ER/CPEP with a primary Substance Use Diagnosis

• Outpatient Services

- OP-Medical: Outpatient Medical
- OP-SUD: Outpatient SUD
- OP-MH: Outpatient Mental Health
- OP-DD: Outpatient Developmental Disability (DD)

• Health Home, Residential/Living, Pharmacy, Other Services

- These columns represent any Health Home, Care Management, Residential, or Pharmacy related service.
- The "Other Services" column includes any services not captured by the available service type columns, such as Transportation, Medical Equipment or Lab services.

My QI Report	- Sta	atewide Rej	ports	Recipi	ent Search	Provid	er Search	Registra	ar -	Usage F	Reports +	Utili	ization Reports	s My	CHOIS
						MAIN	STREE		с						DF Excel
PROVIDER: MAIN STREET CLINIC												Reset			
Medicaid Managed Care Plan and Product Line Provider Network Service Settings and Volume															
The distribution of	f agencies Total	providing	services	to MAIN	STREET CLI	NIC current	Medicaid cli	ients. OP	OP-	OP-	0P-	Health	Residential/	Phorm A	Other 🛦
Trovider Name	Clients	Medical	SUD	MH	Medical	MH	SUD	Medical	SUD	MH	DD	Home	Living	T Herri	Services
Unduplicated Count of Clients	<u>76,980</u>	<u>10,367</u>	<u>2,190</u>	<u>1,667</u>	<u>31,708</u>	<u>3,445</u>	1,511	<u>59,144</u>	<u>5,445</u>	<u>12,439</u>	<u>3,317</u>	<u>13,131</u>	<u>13,798</u>	<u>63,327</u>	<u>69,096</u>
A C M MEDICAL LABORATORY INC	<u>33,516</u>														<u>33,516</u>
UNIV OF ROCH MED CTR/ STRONG MEMORIAL HOSPITAL	<u>29,668</u>	<u>2,332</u>	<u>136</u>	<u>421</u>	<u>7,704</u>	<u>2,031</u>	568	<u>16,937</u>	<u>184</u>	<u>2,253</u>		<u>397</u>	<u>77</u>	<u>4,545</u>	<u>15,756</u>
WALGREEN EASTERN CO INC	<u>22,661</u>												<u>46</u>	<u>22,553</u>	<u>288</u>
*MEDS 00S PHYSICIAN & OTHE	<u>19,275</u>	<u>635</u>	<u>15</u>	<u>21</u>	<u>2,283</u>	<u>28</u>	11	<u>9,226</u>					<u>3,172</u>		<u>9,418</u>
THE UNITY HOSPITAL OF ROCHESTER	<u>19,197</u>	<u>1,584</u>	<u>623</u>	<u>234</u>	<u>6,410</u>	<u>191</u>	265	<u>9,842</u>	<u>2,045</u>	<u>3,130</u>		<u>352</u>	<u>138</u>	4	<u>7,238</u>
NATIONAL AMB & OXY SVC INC	<u>10,691</u>														<u>10,691</u>
HIGHLAND HOSPITAL OF ROCHESTER	<u>9,749</u>	<u>1,031</u>	<u>43</u>	<u>23</u>	<u>3,201</u>	<u>122</u>	109	<u>5,381</u>					<u>37</u>	<u>791</u>	<u>4,412</u>
EMERGENCY ASSOCIATES	<u>8,968</u>	<u>15</u>	2		<u>8,611</u>	<u>446</u>	500	4							<u>384</u>
RAD OF UNIV OF ROCHESTER	<u>8,689</u>	<u>136</u>			<u>116</u>		1	<u>182</u>							<u>8,661</u>
ELIAV ELI	<u>8,124</u>														<u>8,124</u>
ANTHONY L. JORDAN HEALTH CENTER	<u>7,931</u>	<u>12</u>			<u>892</u>	9	1	<u>7,611</u>		<u>151</u>		<u>93</u>			<u>3,499</u>

Figure 3. Utilization Reports: Provider Network – Column Headers

Report 3: Service Settings and Volume

The Service Settings and Volume Report displays the volume and type of Medicaid services provided by your agency and any agency to the clients you serve. The report displays the number of total unduplicated clients that have had a particular type of service in the past year and the total number of claims/encounters by those clients for that service (Figure 4).

My QI Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Reports +	Utilization Rep	orts MyCHOIS					
			MAIN STRE	ET CLINIC			DF Exce					
PROVIDER: MAIN STREE	T CLINIC			/			Filters Reset					
Medicaid Managed Care Plan and Product Line Provider Network Service Settings and Volume Volume and type of Medicaid services provided by any agency to MAIN STREET CLINIC current Medicaid clients.												
	MAIN STR	LEET CLINIC		Any Other Provider		To	otal					
Service Settings/Type	Clients with services 崇	Claims/Encounters by these clients	Clients with services 🖨	Claims/Encounters b	y these clients 🛛 🔶	Unduplicated Clients $_{\clubsuit}$ with services	Claims/Encounters by these clients					
Unduplicated Count of Clients	<u>50,508</u>	2,034,256	<u>61,894</u>		20,680,363	<u>62,531</u>	22,561,700					
ACT - MH Specialty	<u>52</u>	1,324	277		9,019	<u>328</u>	10,343					
CDT - MH Specialty			<u>55</u>		9,873	<u>55</u>	9,873					
Child Care - MH - Residential Treatment Facility			4		540	4	540					
Child Foster Care			<u>144</u>		14,877	<u>144</u>	14,877					
Child Waiver Services - OMH			<u>18</u>		1,426	<u>18</u>	1,426					
Clinic - MH Specialty	<u>2,688</u>	82,031	<u>10,494</u>		396,614	<u>12,716</u>	478,165					
Clinic - Medical	<u>29,029</u>	501,551	<u>37,089</u>		1,141,550	<u>48,403</u>	1,617,952					
Clinic - SUD	<u>5,375</u>	883,142	<u>5,139</u>		655,447	<u>9,378</u>	1,537,113					
Clinic - Unspecified	<u>8,093</u>	127,590	<u>8,686</u>		116,921	<u>13,826</u>	240,580					
Community Residence - MH Specialty			<u>236</u>		7,027	<u>236</u>	7,027					
Day Treatment - MH Specialty			<u>24</u>		4,185	<u>24</u>	4,185					
Dental	<u>19</u>	132	<u>22,688</u>		178,647	<u>22,699</u>	178,757					
ER - ALL	<u>17,565</u>	152,101	22,008		270,772	<u>32,155</u>	404,217					
ER - MH	<u>1,573</u>	13,621	<u>4,549</u>		54,936	<u>5,154</u>	64,529					
ER - Medical	<u>16,200</u>	124,857	<u>35,494</u>		428,795	<u>37,060</u>	498,733					
ER - SUD	<u>1,058</u>	14,277	<u>4.170</u>		86,234	<u>4,260</u>	95,736					

Figure 4. Utilization Reports: Service Settings and Volume – Column Headers

Sort Report by Column Headers

All columns are defaulted to sort by the providers that have seen the largest number of your clients. Each column can be sorted by number by selecting the desired column header. For example, if you are interested in sorting the report by providers who served the greatest number of your shared clients in the Outpatient – Medical service setting, click the "OP – Medical" header (Figure 5).

My QI Report	- Sta	itewide Rej	oorts	Recip	ient Search	Provid	ler Search	Registr	ar -	Usage	Reports -	Uti	ization Report	5		
						MAIN	STREE		•						DF Exce] ;el
PROVIDER: MAIN STREET CLINIC												Filters	Reset			
Medicaid Managed Care Plan and Product Line Provider Network Service Settings and Volume Click on headers to sort report by highest frequency of selected service																
The distribution of agencies providing services to MAIN STREET CLINIC current Medicaid clients.																
Provider Name 🌲	Total Clients	IP- Medical	IP- SUD	IP- MH	ER/CPEP Medical	ER/CPEP MH	ER/CPEP SUD	OP- Medical	OP- SUD	OP- MH	OP- DD [⊕]	Health Home	Residential/ Living	Pharm	Other Services	r s
Unduplicated Count of Clients	<u>4,865</u>	<u>1,486</u>	<u>2,165</u>	<u>939</u>	<u>3,363</u>	<u>1,212</u>	1,755	<u>3,890</u>	<u>2,578</u>	<u>1,530</u>	<u>6</u>	<u>1,829</u>	<u>1,193</u>	<u>4,239</u>	<u>4,6</u> 2	<u>20</u>
*MEDS OOS PHYSICIAN & OTHE	<u>1,719</u>	221	<u>95</u>	<u>39</u>	<u>509</u>	<u>56</u>	91	<u>703</u>					<u>140</u>		75	52
MONTEFIORE MEDICAL CENTER	<u>670</u>	<u>133</u>	<u>54</u>	<u>38</u>	<u>279</u>	<u>60</u>	94	<u>413</u>	<u>94</u>	<u>59</u>		<u>132</u>	<u>89</u>	<u>22</u>	33	<u>38</u>
HUDSON RIVER HEALTHCARE, INC.	<u>595</u>	1			<u>23</u>	<u>6</u>		<u>360</u>	<u>24</u>	<u>70</u>		<u>262</u>	<u>154</u>		1	55
PROJECT SAMARITAN HLTH SVCS I	<u>319</u>							<u>305</u>		<u>86</u>					21	<u>24</u>
CORNERSTONE FAMILY HEALTHCARE	<u>204</u>	3			<u>50</u>	5	4	<u>179</u>	<u>104</u>	<u>26</u>		2			ŝ	<u>83</u>
THE NEW YORK AND PRESBYTERIAN HOSPITAL	<u>495</u>	<u>70</u>	<u>43</u>	<u>68</u>	<u>260</u>	<u>121</u>	110	<u>138</u>	2	<u>10</u>		<u>19</u>	9		5	<u>52</u>
THE INSTITUTE FOR FAMILY HEALTH	<u>185</u>	<u>5</u>	2					<u>137</u>		<u>61</u>		<u>33</u>	11		5	<u>83</u>
NYU LANGONE HOSPITALS	<u>323</u>	<u>28</u>	<u>20</u>	<u>16</u>	<u>149</u>	<u>32</u>	87	<u>136</u>		<u>10</u>		<u>5</u>		<u>13</u>	5	<u>52</u>
MT KISCO MEDICAL GROUP PC	<u>152</u>	<u>18</u>	2		2			<u>136</u>					1		1	<u>57</u>
BRONXCARE HEALTH SYSTEM	<u>391</u>	<u>67</u>	<u>124</u>	<u>29</u>	224	<u>99</u>	125	<u>128</u>	<u>29</u>	<u>10</u>		<u>5</u>	2	1	4	<u>50</u>

Figure 5. Utilization Reports: Provider Network – Sort Report

Drill Down

Selecting a number within the report grid allows the user to identify the clients who match that criteria (Figure 6). Additionally, the user can drill into a client's clinical summary, depending upon their level of access.

My QI Report -	Statewide Reports Rec	ipient Search Prov	vider Search F	legistrar 🗧 Usage Repo	orts - Utilization Re	eports					
< Service Setting and Volur	ne	M	AIN STREET CL 3611 Recipients Found			🔀 📓 PDF Excel					
MANAGED CARE PLAN : ALL MANAGED CARE PRODUCT LINE : ALL POPULATION TYPE : ALL PROGRAM TYPE : ALL											
[Any Provider] S AND Service Settings	s: Clinic - N Total Cli	/H Specialty ents									
Name	🔶 Medicaid ID	Date Of Birth	Gender 🔶	QualityFlags	+ ManagedCarePlan	♦ PHIAccess ♦					
UabWRVJB REFOTba	Vq2sN9UvNrU	NCyrLpEvOTI	TQ LQ M92	2+ ER-BH, 2+ ER-MH, BH QAF - DOH, HARP No Assessment for HCBS, HARP No Health Home, No DM Screen - AP	R	Quality Flag					
VEzSUaVT SbVBT6	Wb6oMpaoNr	N8yoNCynOTUq	TQ LQ N9U			No Access					
TUNNSUnMQUu TUbDSEFF	TA WaQtOD6mNa	Y MTIIN8ynOT6o	TQ LQ Mp2			No Access					
QUnNTqvURQ SqnFSUvFU6	o VEYuOTQqNrE	M8yoMSyoMDAn	TQ LQ MT6	2+ ER-BH, 2+ ER-MH, POP High User	Fidelis Care New York	Quality Flag					

Figure 6. Utilization Reports: Recipients - No data with special protection

Please note, when selecting a number in the Utilization Reports for a product line or service type that has special protections (i.e., HIV SNP or a substance use service), viewing client names in the drill-down will have special protections. In this scenario, the client-level report will provide three counts (Figure 7):

- a) total number of clients who match the criteria
- b) number of people included in the report (names listed in report)
- c) number of people excluded from the report because consent is required

My QI	Report -	Statewide Reports	Recipient Search	Provider Search	Registrar -	Usage Report	s - Utilization	n Reports		
< Service S	etting and Volum	ne		MAIN STREET 4380 Recipients	CLINIC				1 PDF	IN Excel
MANAG	ED CARE PLAN : A	LL MANAGED CARE PROD	UCT LINE : ALL POPULATIO	ON TYPE : ALL PROGRA	M TYPE : ALL					
AND	[Any Provider] Se Service Settings	ervice Settings: Cli	nic - SUD tal Clients							
300 Recipients included in search results (Note: This search includes data with special protection; i.e. HIV, Substance use or Family Planning) 4080 Recipients excluded from search results (consent required)										
Name		Medicaid ID	Date Of Birth 🔶	Gender \Rightarrow	QualityFlags	A V	ManagedCarePlan	∳ F	HIAccess	÷
RrJFRUvF S	SqVOQVJE	VrAmODEpOU2	N8yoMoynOT2n	TQ LQ ND6	HARP No Assessmen HARP No Health Hom	t for HCBS, Ar	nida Care	All Data -	Consent	^
UEVOTabO SqbNQaVS	RrRPT6 TFa RQ	UaMuMTYvMqi	NoyuLpEvN9I	R6 LQ NT2	HARP No Assessmen	t for HCBS Fi	delis Care New York	All Data -	Consent	
QbbOVUq C	VJWRVNURVI	Vb2rNTMrMEY	MTEIM9UIMTasNQ	TQ LQ NTQ	2+ Inpt-BH, HARP No Assessment for HCBS	н	ealthfirst PHSP, Inc.	All Data -	Consent	

Figure 7. Utilization Reports: Recipients – Data with special protection included

Filtering Reports

Utilization Reports can be filtered in the following ways to provide additional specificity (Figure 8).

• Managed Care Plan

 The Managed Care Plan filter allows you to select a specific plan that will filter all reports for that chosen plan's current members (updated weekly) (i.e., Emblem, MetroPlus)

• Managed Care Product Line

 The Managed Care Product Line filter allows you to filter all reports for specific product lines (i.e., HARP, Mainstream)

• Population Type

 The Population Type filter allows you to select Dual Medicaid + Medicare, Medicaid Fee For Service, or No Duals (excludes Medicare)

• Program Type

 The Program Type filter allows you to view the Utilization Reports from the viewpoint of clients served by a specific program type/service setting at your agency

OF RTUNITY.	Office of Mental Health	Utilization Reports Client Filters	Settings +
- 1100	Statewide Reports	Provider MAIN STREET CLINIC Managed Care Plan ALL Managed Care Product Line ALL Population Type ALL Concentry Cancel	- Utilization Reports
		Submit Cancel	

Figure 8. Utilization Reports: Filtering Reports

Downloading Utilization Reports

Utilization Reports can be exported as a PDF or Excel. The corresponding export icons appear at the top right corner of the Utilization Reports. When selecting the export icons, a window will appear allowing users to select a specific type of report or to select all (Figure 9).

My QI Report -	Statewide Reports	Recipient Search	Provider Search		Usage Reports +	Utilization Repo	orts
			MAIN STREET	CLINIC			PDF Excel
PROVIDER: MAIN STRE			+				Filters Reset
Medicaid Manageo	d Care Plan a	rt		K Export			
The distribution of I	Sections Medicaid Mai		Select All	Sections		Select All	
	Name Medic Provid	aid Managed Care Plan ar ler Network	nd Product Line	Medicaid M Provider Ne	Nanaged Care Plan and Pro etwork	oduct Line 🔶 a	p Medicaid Advantage
Affinity Health Plan	Servic	e Settings and Volume		Service Set	ttings and Volume		
Amerigroup New York			· · · · · · · · · ·				2
Amida Care		* Use ctrl key to select/un:	select multiple items.	* Us	se ctri key to select/unselect	multiple items.	
CDPHP			Export Cancel			Export Cancel	
Excellus BlueCross Blue	eShield		Export Cancer			cancer	
Fidelis Care New York		978	508 468				1 1

Figure 9. Utilization Reports: Export Options

Report Time Periods

Detailed information about the report time periods are available at the bottom of each report in the Utilization Reports. These report dates are updated monthly.

Report 1: Medicaid Managed Care Plan and Product Line

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET CLINIC in the past year 12/01/2018 - 12/01/2019.

-- The Managed Care Plan and Product Line were refreshed as of the 02/03/2020.

* Medicaid Fee for service count includes any client who lost their Medicaid coverage during the report time period.

Figure 10. Report 1 – Time Period Footer

Report 2: Provider Network

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET CLINIC in the past year 12/01/2018 - 12/01/2019.

-- Clients included in this report also received a Medicaid billable service from a different provider during the time period (06/01/2018 - 06/01/2019). This timeframe was used to provide agencies with an estimate of a full year of utilization, allowing a 6 months data lag for claims/encounters to be submitted to DOH.

-- Abbreviations: IP = Inpatient; SUD = Substance Use Disorder; MH = Mental Health; ER = Emergency Room; OP = Outpatient; DD = Developmental Disability; Pharm = Pharmacy(Medications only); -- *MEDS OOS : refers to services where the provider name was not specified or was out of state.

Figure 11. Report 2 – Time Period Footer

Report 3: Service Settings and Volume

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET CLINIC in the past year 12/01/2018 - 12/01/2019.

-- Clients included in this report received Medicaid billable service from MAIN STREET CLINIC the past year and received a Medicaid billable service from either MAIN STREET CLINIC or any other provider during the time period (06/01/2018 - 06/01/2019). This timeframe was used to provide agencies with an estimate of a full year of utilization, allowing a 6 months data lag for claims/encounters to be submitted to DOH.

-- ABBREVIATIONS: SUD = SUBSTANCE USE DISORDER; MH = MENTAL HEALTH; ER = EMERGENCY ROOM; DD = DEVELOPMENTAL DISABILITY; OPWDD = OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITY.

-- *MEDS OOS : refers to services where the provider name was not specified or was out of state.

Figure 12. Report 3 – Time Period Footer