MACSIS Reports

Where to find them and how to use them…..

Where do I find these reports?

- These reports can be accessed either by going to the main MACSIS web page (http://www.mh.state.oh.us/ois/macsis/macsis.index.html) and then clicking on Reports, or by going directly to the Reports Index (http://www.mh.state.oh.us/ois/macsis/mac.rpts.index.html)

What reports are on the Reports page?

- MACSIS Reports List
  - Listing of all paper and electronic reports that are created for boards and providers.
  - This is a spreadsheet that contains:
    - Report/File name or description
    - Report Naming convention
    - Created By
    - Distributed
    - Frequency
    - Purpose
    - Board Action

What reports are on the Reports page?

- Weekly Claims File Submissions by Board
  - There are four separate reports: Current Week, Previous 1, Previous 2 and Previous 3.
  - This report can be used by boards to reconcile the files and claim lines they submitted to the State against what was received and processed by the State.
    - Boards can verify what files were submitted, what files were accepted, how many claims were in the original file versus how many of the original claims actually made it into Diamond.

What reports are on the Reports page?

- Weekly Claims File Submissions by Board (cont'd)
  - This report contains the following information:
    - Report Header contains the report name, the processing dates and the board name and number.
    - Provider Name
    - Provider # (UPI number)
    - File Problem – will contain "ACCEPTED" if the file is okay or will list the problem if the file was bad.
    - File Name – Name of the file submitted
    - Process Date – Date the file was run through the "overnight" process.
    - # Claims Submitted in File
    - # Claims in Diamond with this File Name – number of claims accepted into Diamond for that board with that file name.

Note: Detailed documentation for these reports is posted on the Reports web page.

What reports are on the Reports page?

Claim Files Submitted to Diamond by Board by Provider by File
Process Dates between March 6, 2005 - March 12, 2005
As of Extract Dated March 12, 2005

BOARD=Defiance (20B)

Provider Name	Provider #	File Problem	File Name	Process Date	# Claims Submitted in File	# Claims In Diamond With This File Name
FIRST CALL-HENR	10148	PAT LOOPS: 2	A0101483.06305	03/12/2005	.	.
FIVE CO-FULTON	07111	ACCEPTED	A0071111.06305	03/12/2005	113	.
		ACCEPTED	A0071112.06305	03/12/2005	70	.
FIVE COUNTY	01140	ACCEPTED	A0011401.06305	03/12/2005	430	.
		ACCEPTED	A0011402.06305	03/12/2005	463	.
		ACCEPTED	A0011403.06305	03/12/2005	12	.
MAUMEE VALLEY	01138	ACCEPTED	A0011381.06205	03/12/2005	1,071	.
		ACCEPTED	A0011381.06305	03/12/2005	1	.
		ACCEPTED	A0011382.06205	03/12/2005	237	.
NEW HOME	10146	ACCEPTED	A0101461.06305	03/12/2005	1,238	.

What reports are on the Reports page?

- Weekly Claims File Submissions by Provider
  - There are four separate reports: Current Week, Previous 1, Previous 2 and Previous 3.
  - This report can be used by providers to reconcile the files and claim lines they submitted to the board against what was received and processed by the State.
    - Providers can verify what files were submitted and to which board, what files were accepted, how many claims were in the original file versus how many of the original claims actually made it into Diamond.

What reports are on the Reports page?

- Weekly Claims File Submissions by Provider (cont'd)
  - This report contains the following information:
    - Report header contains the report name and the processing dates.
    - Provider Name
    - Provider # (UPI)
    - Board Name (board or consortium name)
    - Board # (board or consortium number)
    - File Problem – will contain "ACCEPTED" if the file is okay or will list the problem if the file was bad.
    - File Name – Name of the file submitted
    - Process Date – Date the file was run through the "overnight" process.
    - # Claims Submitted in File
    - # Claims in Diamond with this File Name – number of claims accepted into Diamond for that board with that file name

Note: Detailed documentation for these reports is posted on the Reports web page.

What reports are on the Reports page?

Claim Files Submitted to Diamond by Provider by Board by File
Process Dates between March 6, 2005 - March 12, 2005
As of Extract Dated March 12, 2005

Provider Name	Provider #	Board Name	Board #	File Problem	File Name	Process Date	# Claims Submitted in File	# Claims In Diamond With This File Name
				ACCEPTED	A0031531.06705	03/09/2005	101	101
				ACCEPTED	A0031531.06805	03/10/2005	20	.
				ACCEPTED	A0031531.06905	03/10/2005	26	.
BUTL BH SERV	07026	Butler	09B	ACCEPTED	A0070261.06305	03/08/2005	358	357
				ACCEPTED	A0070261.07005	03/12/2005	284	.
BUTLER CO TASC	08426	Butler	09B	ACCEPTED	A0084261.06605	03/08/2005	250	250
				ACCEPTED	A0084261.07005	03/12/2005	1	.
				ACCEPTED	A0084262.06605	03/08/2005	12	12
CAMBRIDGE CNSLG	10685	Muskingum	60B	ACCEPTED	A0106851.06705	03/09/2005	83	83
CATH CHAR-ASHL	10077	Ashland	03B	ACCEPTED	A0100771.07005	03/12/2005	2	.
				ACCEPTED	A0100772.07005	03/12/2005	32	.
				ACCEPTED	A0100773.07005	03/12/2005	11	.
				ACCEPTED	A0100774.07005	03/12/2005	10	.
				NOT AUTH PROVID INCL	A0100775.07005	03/12/2005	.	.
				NOT AUTH PROVID INCL	A0100776.07005	03/12/2005	.	.
				NOT AUTH PROVID INCL	A0100777.07005	03/12/2005	.	.
				NOT AUTH PROVID INCL	A0100778.07005	03/12/2005	.	.
				NOT AUTH PROVID INCL	A0100779.07005	03/12/2005	.	.
CATH CHAR-MEDIN	10063	Medina	52B	ACCEPTED	A0100631.06705	03/09/2005	40	40
CATH CHAR-STATE	07099	Cuyahoga MH	18M	ACCEPTED	A0070991.06105	03/09/2005	45	45
				ACCEPTED	A0070991.06205	03/09/2005	1	1
				ACCEPTED	A0070991.06305	03/09/2005	60	60
				ACCEPTED	A0070992.06105	03/09/2005	13	13

Note: Some files with a missing value for Claims in Diamond are due to timing of processing files and the claims processing date for Boards.

What reports are on the Reports page?

- Claims Remittance Tracking Reports by Provider
  - This report displays the number of claims and associated dollar amounts that have been reported on either a paper and/or electronic remittance advice.
    - This report contains claims that have a PROC STAT of “P” and “F”.
  - This report can be used by providers to identify which boards “owe” them a remittance advice for a specific date range.
  - Reports are updated the first Tuesday of the month.

What reports are on the Reports page?

- Claims Remittance Tracking Reports by Provider (cont'd)
  - There are two ways to find the report for a particular provider:
    - Search by provider name – ***Provider List Sorted by Name***
    - Search by UPI (provider number) – ***Provider List Sorted by MACSIS UPI***
    - Both searches produce the exact same reports, just different ways to locate the provider information you are looking for.

What reports are on the Reports page?

- Claims Remittance Tracking Reports by Provider (cont'd)
  - The information is reported by fiscal year and by funding stream (Medicaid and Non-Medicaid).
  - The report includes the following information under each funding stream:
    - The board (company code)
    - APDATE – date the claim processed through APUPD
    - Claims – number of claim lines remitted by the board on the designated AP date
    - Remit Amt. – summary of the net amount remitted for those claims included on the report

Note: Detailed documentation for these reports is posted on the Reports web page.

What reports are on the Reports page?

Access to Remittance Tracking Reports: Provider UPI Order

UPI	PROVIDER NAME	MONTH 1	MONTH 2	MONTH 3
413	CUYAHOGA COUNTY COMMUNITY MENTAL HEALTH BOARD	DEC.2004	JAN.2005	FEB.2005
978	CASA ALMA CASA MARIA	DEC.2004	JAN.2005	FEB.2005
989	ADDICTION PROGRAM OF MAHONING COUNTY	DEC.2004	JAN.2005	FEB.2005
1007	SAINT RITAS MEDICAL CENTER ADDICTION SERVICES	DEC.2004	JAN.2005	FEB.2005
1010	ASHLAND COUNTY COUNCIL ON ALCOHOLISM AND DRUG ABUSE	DEC.2004	JAN.2005	FEB.2005
1017	LAKE AREA RECOVERY CENTER	DEC.2004	JAN.2005	FEB.2005
1018	TRI COUNTY MENTAL HEALTH AND COUNSELING SERVICES INC	DEC.2004	JAN.2005	FEB.2005
1029	COMMUNITY COUNSELING AND CRISIS CENTER	DEC.2004	JAN.2005	FEB.2005
1032	ALCOHOL AND CHEMICAL ABUSE COUNCIL OF BUTLER COUNTY OHIO	DEC.2004	JAN.2005	FEB.2005
1036	URBAN MINORITY ALCOHOLISM AND DRUG ABUSE OUTREACH PROGRAM	DEC.2004	JAN.2005	FEB.2005
1039	MCKINLEY HALL	DEC.2004	JAN.2005	FEB.2005
1043	BLACK URBAN MINORITY ALCOHOL DRUG ABUSE OUTREACH PROGRAM	DEC.2004	JAN.2005	FEB.2005
1048	MENTAL HEALTH AND RECOVERY CENTER OF CLINTON COUNTY	DEC.2004	JAN.2005	FEB.2005
1051	COLUMBIANA COUNTY MENTAL HEALTH CENTER	DEC.2004	JAN.2005	FEB.2005
1052	FAMILY RECOVERY CENTER	DEC.2004	JAN.2005	FEB.2005
1055	COSHOCTON BEHAVIORAL HEALTH CHOICES	DEC.2004	JAN.2005	FEB.2005

What reports are on the Reports page?

This Remittance Report Tracking Report Pertains to CENTRAL COMMUNITY HEALTH BOARD (10127)

Notes:
(1) This Report Produced on 07MAR05 From a Master File Created 05MAR05
(2) MACSIS APUPD/Posts Between 01DEC04 and 31DEC04 are included here.

		Fiscal Year							
		2004				2005			
		Funding Stream				Funding Stream			
		Medicaid		Non-Medicaid		Medicaid		Non-Medicaid	
Board	APDATE	Claims	Remit Amt.	Claims	Remit Amt.	Claims	Remit Amt.	Claims	Remit Amt.
HAMIM	2004-12-06	.	.	.	.	834	$61,733.86	1,333	$41,984.82
	2004-12-13	.	.	.	.	589	$46,020.52	435	$29,354.32
	2004-12-20	5	$379.05	5	$-379.05	808	$60,990.10	501	$32,784.19
	2004-12-27	.	.	.	.	451	$28,507.87	294	$16,606.17
HAMIM		*5*	*$379.05*	*5*	*$-379.05*	*2,682*	*$197,252.35*	*2,563*	*$120,729.50*
G.TOT		*5*	*$379.05*	*5*	*$-379.05*	*2,682*	*$197,252.35*	*2,563*	*$120,729.50*

What reports are on the Reports page?

- APUPD Report
  - These reports are broken down into Current Week and Previous Week.
  - The report is created from Diamond and contains claims that have completed the APUPD (accounts payable update) process
  - These claims have not yet gone through CKPRT (check print) and CKPST (check post).
  - All claims on this report have a PROC stat of “F”.

What reports are on the Reports page?

- APUPD (cont'd)
  - The information on these reports are summarized by company and gives the "thru date", the number of claims and the dollar amount of the claims.
  - The claims on the current report will be on next week's remittance reports (RA, ERA, 835), while the claims reflected on the previous week report will be on this week's remittance reports.
  - This report can be used to give the boards an approximate dollar amount as to what is owed to providers once they show up on remittance reports.

What reports are on the Reports page?

APUPD			
March 14, 2005			
COMPANY	Run Thru Date	HIPAA Claims	HIPAA Dollars
ALLEB	2/25/05	1,147	$67,387.58
ASHLB	3/4/05	33	$2,447.93
ASHTB	3/4/05	1,361	$95,787.38
ATHEB	3/4/05	3,321	$254,675.69
BELMB	2/25/05	255	$6,665.99
BROWB	2/25/05	857	$47,497.67
BUTLB	3/4/05	2,890	$205,845.01
CHAMB	2/25/05	9	$4,816.90
CLARB	3/4/05	4,198	$248,459.96
CLERB	3/4/05	2,403	$198,279.61
COLUB	3/4/05	2,161	$136,205.59
CUYAA	2/25/05	6,424	$240,767.84
CUYAM	3/4/05	26,934	$2,120,975.71
DADAS	3/11/05	590	$48,488.79
DEFIB	3/4/05	2,232	$125,989.18
DELAB	2/25/05	2,497	$187,529.49
ERIEB	2/25/05	2,942	$89,527.33
FAIRB	2/25/05	968	$76,494.48
FRAN	3/4/05	16,883	$934,130.44
GALLB	2/25/05	2,569	$192,973.71
GEAUB	2/25/05	1,764	$139,965.29
HAMIA	3/4/05	6,400	$412,878.89

What reports are on the Reports page?

- Check Post Report
  - This report provides the information on claims that have completed the Check Post process which changes the PROC stat from an “F” to a “P” and is broken down by provider.
  - There are four separate reports: Current Week, Previous 1, Previous 2 and Previous 3.
  - Boards can use this report as an estimate of what they will owe each provider.
  - Providers can use this report as an estimate of what is owed them from the various boards.

What reports are on the Reports page?

JCKPST10.PGM MHHIPAA DIAMOND SYSTEM Page 1
Run on 03/14/05 @ 6:22 PM Post Check Run
Audit Log

Bank Code	Check #	Check Date	Vendor #	Vendor Name	Addr	Amount	Void
ALLEB	153	03/14/2005	10178	OH YOUTH ADVOCA	0	402.94	
ALLEB	402	03/14/2005	11004	ASTOP INC	0	2104.36	
ALLEB	455	03/14/2005	11172	SHELBY CNTY CNS	0	340.36	
ALLEB	531	03/14/2005	1290	CENTURY HEALTH	0	499.72	
ALLEB	537	03/14/2005	1345	LUTHERAN SS	0	55263.69	
ALLEB	568	03/14/2005	1381	COUNSEL-MARI	0	213.02	
ALLEB	579	03/14/2005	1387	GATEWAY OUTRECH	0	1141.02	
ALLEB	675	03/14/2005	3126	HARBOR	0	78.96	
ALLEB	766	03/14/2005	6370	FAMILY RESOURCE	0	3551.82	
ALLEB	827	03/14/2005	7073	FOUNDATIONS B H	0	3791.69	

ALLEB	total check(s) amount:					67387.58	
ASHLB	306	03/14/2005	10440	FAMILY LIFE	0	819.96	
ASHLB	388	03/14/2005	10982	FORUM HEALTH	0	63.26	
ASHLB	405	03/14/2005	11022	HOMES FOR KIDS	0	111.36	
ASHLB	472	03/14/2005	11232	CNTR BH HEALTH	0	379.10	
ASHLB	642	03/14/2005	2526	BOYS VILLAGE	0	559.27	
ASHLB	755	03/14/2005	4158	THE CENTER-RICH	0	514.98	

ASHLB	total check(s) amount:					2447.93	

What reports are on the Reports page?

- Claims Status Reports by Provider
  - This report displays the number of claims and associated dollar amounts owed to a provider for claims received into MACSIS (either electronically or manually) for a calendar month.
  - This report is a “snapshot” of the claims in Diamond as of the run date of the report.
  - This report displays claims regardless of their current “payment” status.
  - Reports are updated the first Tuesday of the month.

What reports are on the Reports page?

- Claims Status Reports by Provider (cont'd)
  - There are two ways to find the report for a particular provider:
    - Search by provider name – ***Provider List Sorted by Name***
    - Search by UPI (provider number) – ***Provider List Sorted by MACSIS UPI***
    - Both searches produce the exact same reports, just different ways to locate the provider information you are looking for.

What reports are on the Reports page?

- Claims Status Reports by Provider (cont'd)
  - This report can be used by a provider to ascertain the current status of claims received by MACSIS.
  - The report includes the following information:
    - The board (company code)
    - Batch number claim was included on
    - CS (claim status) – "P"=payable, "D"=denied and "A"=adjustment
    - PS (processing status) – "P"=paid, "F"=finalized and "H"=held

What reports are on the Reports page?

- Claims Status Reports by Provider (cont'd)
  - Claims – number of claim lines
  - Quantity – number of units billed
  - Billed Amount – total billed amount for the claim lines reported
  - Allowed Amount – total allowed amount for the claim lines reported
  - Co-Pay Amount – total co-pay amount for the claim lines reported
  - Withhold Amount – total withhold amount for the claim lines reported
  - Net Amount – total net amount for the claim lines reported

Note: Detailed documentation for these reports is posted on the Reports web page.

What reports are on the Reports page?

Access to Claim Status Reports: Provider UPI Order

UPI	PROVIDER NAME	MONTH 1	MONTH 2	MONTH 3
413	CUYAHOGA COUNTY COMMUNITY MENTAL HEALTH BOARD	DEC.2004	JAN.2005	FEB.2005
978	CASA ALMA CASA MARIA	DEC.2004	JAN.2005	FEB.2005
989	ADDICTION PROGRAM OF MAHONING COUNTY	DEC.2004	JAN.2005	FEB.2005
1007	SAINT RITAS MEDICAL CENTER ADDICTION SERVICES	DEC.2004	JAN.2005	FEB.2005
1010	ASHLAND COUNTY COUNCIL ON ALCOHOLISM AND DRUG ABUSE	DEC.2004	JAN.2005	FEB.2005
1017	LAKE AREA RECOVERY CENTER	DEC.2004	JAN.2005	FEB.2005
1018	TRI COUNTY MENTAL HEALTH AND COUNSELING SERVICES INC	DEC.2004	JAN.2005	FEB.2005
1029	COMMUNITY COUNSELING AND CRISIS CENTER	DEC.2004	JAN.2005	FEB.2005
1032	ALCOHOL AND CHEMICAL ABUSE COUNCIL OF BUTLER COUNTY OHIO	DEC.2004	JAN.2005	FEB.2005
1036	URBAN MINORITY ALCOHOLISM AND DRUG ABUSE OUTREACH PROGRAM	DEC.2004	JAN.2005	FEB.2005
1039	MCKINLEY HALL	DEC.2004	JAN.2005	FEB.2005
1043	BLACK URBAN MINORITY ALCOHOL DRUG ABUSE OUTREACH PROGRAM	DEC.2004	JAN.2005	FEB.2005
1048	MENTAL HEALTH AND RECOVERY CENTER OF CLINTON COUNTY	DEC.2004	JAN.2005	FEB.2005
1051	COLUMBIANA COUNTY MENTAL HEALTH CENTER	DEC.2004	JAN.2005	FEB.2005
1052	FAMILY RECOVERY CENTER	DEC.2004	JAN.2005	FEB.2005
1055	COSHOCTON BEHAVIORAL HEALTH CHOICES	DEC.2004	JAN.2005	FEB.2005

What reports are on the Reports page?

This Report Pertains to MOUNDBUILDERS GUIDANCE CENTER (10182)

Notes:
(1) Reporting for Claims Received from 01FEB05 thru 28FEB05
(2) This Report Produced on 07MAR05 From Extract Created 05MAR05

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
ATHEB	A83B05032	A	U	2	-8.0	$-170.64	$-162.48	$0.00	$0.00	$0.00	$-162.48
		P	P	2	8.0	$170.64	$162.48	$0.00	$0.00	$0.00	$162.48
	A83B05047	D	P	2	4.5	$181.40	$175.94	.	$0.00	$0.00	$0.00
	A83B05053	P	H	1	4.0	$80.20	$77.48	$0.00	$0.00	$0.00	$77.48
			U	1	0.5	$101.20	$98.46	$0.00	$0.00	$0.00	$98.46
ATHEB				*8*	*9.0*	*$362.80*	*$351.88*	*$0.00*	*$0.00*	*$0.00*	*$175.94*
CUYAM	A83B05039	P	P	2	8.0	$160.40	$154.96	$0.00	$0.00	$0.00	$154.96
	A83B05047	P	P	2	4.5	$181.40	$175.94	$0.00	$0.00	$0.00	$175.94
	A83B05053	P	U	2	8.0	$160.40	$154.96	$0.00	$0.00	$0.00	$154.96
CUYAM				*6*	*20.5*	*$502.20*	*$485.86*	*$0.00*	*$0.00*	*$0.00*	*$485.86*
DELAB	A83B05047	P	U	1	0.3	$60.72	$59.07	$0.00	$0.00	$0.00	$59.07
	A83B05053	P	U	1	4.0	$80.20	$77.48	$0.00	$0.00	$0.00	$77.48
DELAB				*2*	*4.3*	*$140.92*	*$136.55*	*$0.00*	*$0.00*	*$0.00*	*$136.55*
FAIRB	A83B05032	P	P	1	4.0	$80.20	$77.48	$0.00	$0.00	$0.00	$77.48
	A83B05039	P	P	2	4.5	$181.40	$175.94	$0.00	$0.00	$0.00	$175.94

What reports are on the Reports page?

- Claims Billing Report
  - All totals on this report are year-to-date and the information reported is for fiscal year 2004 and 2005 Medicaid and non-Medicaid finalized claims.
  - There are two versions of this report and the information is the same on each, except the way the information is summarized:
    - Finalized claims by Company (Board) & UPI (Provider)
    - Finalized claims by UPI (Provider) & Company (Board)

What reports are on the Reports page?

- Claims Billing Report (cont'd)
  - The information contained on the reports shows the number of finalized Medicaid and Non-Medicaid claims, as well as the net dollar amount of the claims for the current week and what those totals were four weeks prior and are broken out by fiscal year.
  - Unlike the APUPD and Check Post reports, this report is created outside of Diamond and contains both "P" (paid) and "F" (finalized) claims.

What reports are on the Reports page?

- Claims Billing Report (cont'd)
  - Boards can use this report to see how much money they have (should have) paid to a particular provider.
  - Providers can use the report to see how much money they have (should have) been paid by a particular board.
  - By subtracting the "4 weeks prior" totals from the "current" totals boards and providers can tell how many claim lines and the net dollar amount of those claim lines were finalized for the four week period.

What reports are on the Reports page?

Program: billprgByUPIcomp.sas

MACSIS - CLAIMS BILLING PROGRESS REPORT
CURRENT AND 4 WEEKS PRIOR
FOR FINALIZED CLAIMS BY UPID AND COMPANY

Run Date: March 14, 2005
Page: 1

				SFY05				SFY04			
			Claims Entered	Medicaid		Non-Medicaid		Medicaid		Non-Medicaid	
UPID	Provider	Company	Thru Date	Claims	Net Amount	Claims	Net Amount	Claims	Net Amount	Claims	Net Amount
****	********	*******	*********	******	**********	******	**********	******	**********	******	**********
00413	CUYA CTY MH	CUYAM	Mar 12,2005	1,468	$2,330,910.00	7	$0.00	3,040	$4,860,468.00	5	$0.00
			Feb 12,2005	1,465	$2,335,716.00	7	$0.00	3,040	$4,860,468.00	5	$0.00
00413	Totals		Mar 12,2005	1,468	$2,330,910.00	7	$0.00	3,040	$4,860,468.00	5	$0.00
			Feb 12,2005	1,465	$2,335,716.00	7	$0.00	3,040	$4,860,468.00	5	$0.00
00978	CASA ALMA	CUYAA	Mar 12,2005	810	$67,496.63	3,999	$190,465.24	923	$68,721.46	7,183	$293,432.75
			Feb 12,2005	712	$60,233.65	3,250	$172,277.38	923	$68,721.46	7,183	$293,432.75
00978	CASA ALMA	FRAN	Mar 12,2005	36	$4,049.47	38	$0.00	0	$0.00	1	$0.00
			Feb 12,2005	36	$4,049.47	38	$0.00	0	$0.00	1	$0.00
00978	CASA ALMA	LAKEB	Mar 12,2005	22	$1,884.68	47	$0.00	0	$0.00	0	$0.00
			Feb 12,2005	22	$1,884.68	47	$0.00	0	$0.00	0	$0.00
00978	CASA ALMA	LORAA	Mar 12,2005	0	$0.00	53	$0.00	50	$4,491.22	81	$0.00
			Feb 12,2005	0	$0.00	53	$0.00	50	$4,491.22	81	$0.00
00978	CASA ALMA	STARA	Mar 12,2005	0	$0.00	0	$0.00	0	$0.00	20	$531.38
			Feb 12,2005	0	$0.00	0	$0.00	0	$0.00	20	$531.38
00978	CASA ALMA	SUMMB	Mar 12,2005	0	$0.00	0	$0.00	0	$0.00	150	$0.00
			Feb 12,2005	0	$0.00	0	$0.00	0	$0.00	150	$0.00
00978	CASA ALMA	TRUMB	Mar 12,2005	0	$0.00	0	$0.00	0	$0.00	11	$0.00
			Feb 12,2005	0	$0.00	0	$0.00	0	$0.00	11	$0.00
00978	Totals		Mar 12,2005	868	$73,430.78	4,137	$190,465.24	973	$73,212.68	7,446	$293,964.13
			Feb 12,2005	770	$66,167.80	3,388	$172,277.38	973	$73,212.68	7,446	$293,964.13
00989	ADDICT PRG M	ASHTB	Mar 12,2005	55	$2,072.57	74	$0.00	1	$22.26	67	$0.00
			Feb 12,2005	54	$1,928.21	74	$0.00	1	$22.26	67	$0.00
00989	ADDICT PRG M	ATHEB	Mar 12,2005	36	$1,368.22	85	$0.00	0	$0.00	0	$0.00
			Feb 12,2005	36	$1,368.22	54	$0.00	0	$0.00	0	$0.00
00989	ADDICT PRG M	COLUB	Mar 12,2005	1	$144.36	182	$0.00	76	$2,530.75	102	$310.98
			Feb 12,2005	1	$144.36	162	$0.00	76	$2,530.75	102	$310.98

Summary

- All the reports covered are created by either ODMH or ODADAS.
- Some of the reports are created directly from Diamond while others are created from extracts with specific selection criteria.
- The intention of these reports are to provide the boards and providers with information regarding claims that have been submitted to MACSIS.
  - The information on these reports reflect the claim details (claims status, processing status, etc.) at the time the report was created.
  - Not all reports are generated using the same method or criteria.
- Some boards generate additional reports for their providers. Questions about board generated reports should be directed to the board.