COGNOS 11

Instructions for Case Management Agencies

August 2020



What you will learn...

- What is COGNOS and how is it used
- How to access COGNOS and view reports
- Contacts for troubleshooting





What is COGNOS?

- IBM Cognos Business intelligence is a web based reporting and analytic tool. It is used to perform data aggregation and create user friendly detailed reports.
- How is it used by Case Management Agencies?
 - > These reports will allow the Case Management Agencies to run agency specific enrollment and utilization reports.





Access to COGNOS

• To access COGNOS:

https://coc11e-at.truvenhealth.com

- One user profile is granted per agency
- To get/modify access to COGNOS, contact Tammie Taylor at <u>Tammie.Taylor@state.co.us</u>





Login Screen

Sign In

Welcome

Welcome to CO BIDM Cog	nos External
Please provide your accour	t information to access the application.
Username	D98xxxx
Password	••••••
Select how to authenticate	Reset)
I have an l	RSA token
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	Enter RSA PIN only (No Token Code).
Token	Code 123456
	Enter the current value of the RSA Token Code.
◯ Send me a	passcode



• Enter your login information

2nd Login Screen

IBM Cognos Analytics



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Password

Sign in

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Please type your credentials for authentication.



• COGNOS 11 requires a 2nd level authentication.

Enter your login information again.



COLORADO Department of Health Care Policy & Financing

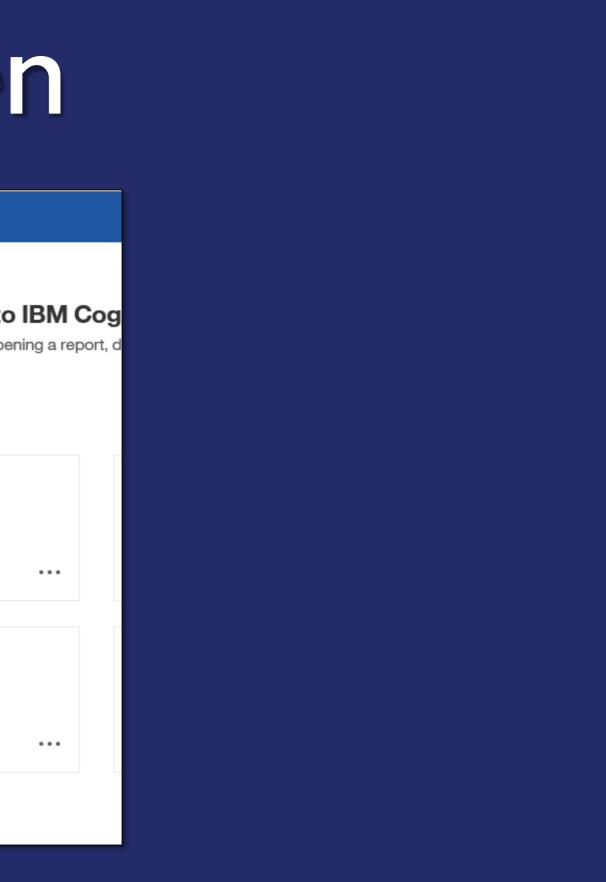


Home Screen

 Select Home to access a variety of recently produced reports

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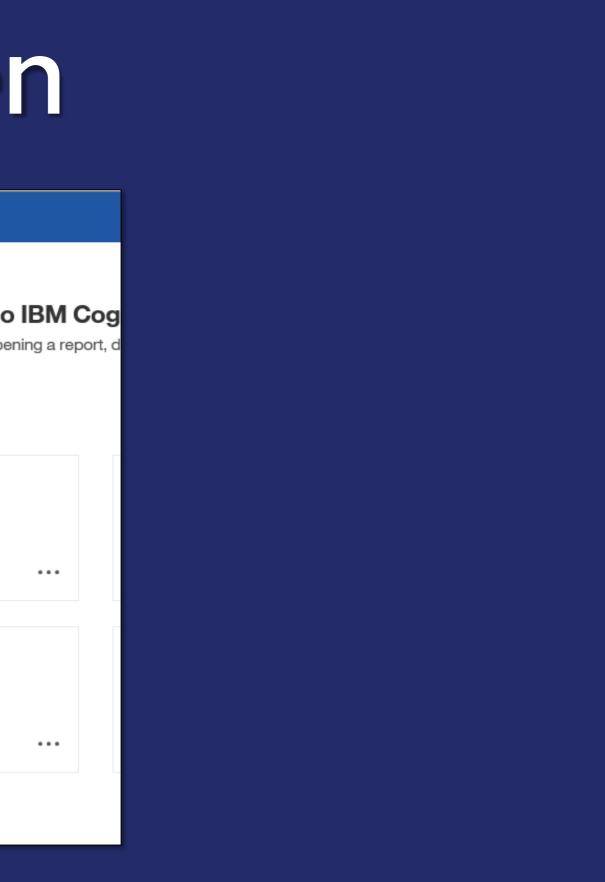


Home Screen

Select Team Content to access CMA Reports

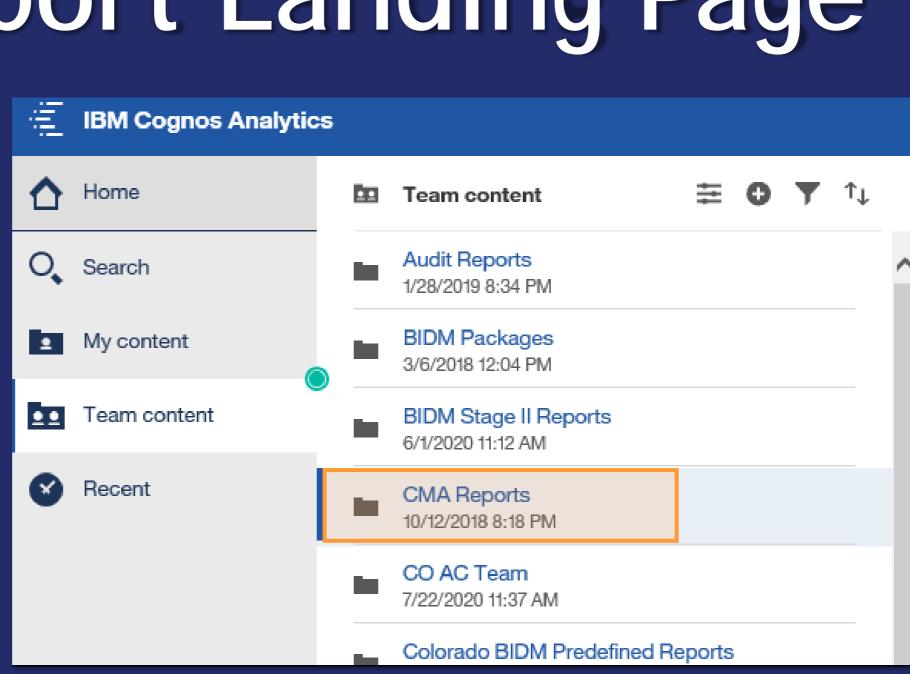
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Report Landing Page

• Select CMA Reports





Report Landing Page

• Select CMA Predefined Reports to access claims, enrollment & utilization information

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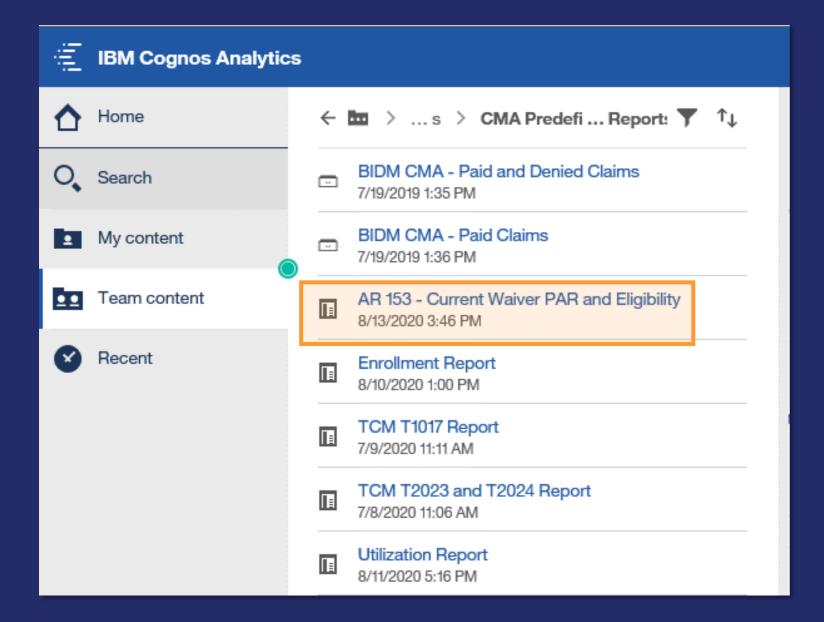
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CMA Predefined Reports

• Within CMA Predefined Reports select the appropriate report to access claims, enrollment & utilization information

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Search	BIDM CMA - Paid and Denied Claims 7/19/2019 1:35 PM
My content	BIDM CMA - Paid Claims 7/19/2019 1:36 PM
Team content	AR 153 - Current Waiver PAR and Eligibility 8/13/2020 3:46 PM
Recent	Enrollment Report 8/10/2020 1:00 PM
	TCM T1017 Report 7/9/2020 11:11 AM
	TCM T2023 and T2024 Report 7/8/2020 11:06 AM
	Utilization Report 8/11/2020 5:16 PM
	Utilization Report by Client 6/3/2020 11:34 AM
	Utilization Report by Client and Provider 1/16/2020 9:08 AM
	Utilization Report by Provider 7/28/2020 4:19 PM





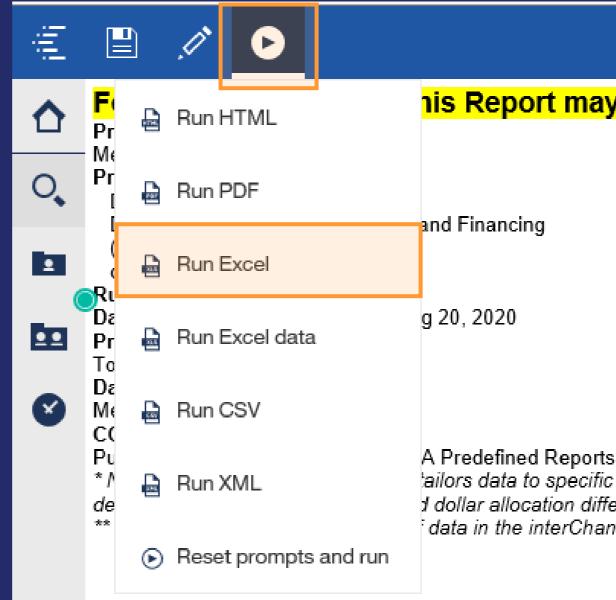
Note: if your numbers are off, verify in the Bridge the client has your agency listed on their profile



 Select AR 153 - Current Waiver PAR and Eligibility from the CMA Reports screen

• This report assists in determining the number of Members you have on the day you run this report with an active PAR who is Medicaid financially eligible.

- To export the report in your preferred format, select the play button at the top
- It will open in a new window. From here, you may select to have it run in the background and emailed to you/others





his Report may contain PHI.

ailors data to specific internal and external customer needs that are not met J dollar allocation differences between MMIS and CORE. data in the interChange. The Department and vendors are currently working

A	В	С	D	E	F	G	Н
Medicaid ID	First Name	Last Name	Prior Authorization Process Type Description	Prior Authorization Number	Min Approved Prior Authorization Start Date	Max Approved Prior Authorization End Date	Prior Authorization Status Description
2000000	Myrle	Aaron	EBD Elderly, Blind, Disabled	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Bianca	Abbott	DD Developmental Disabilities	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
X00000X	Taylor	Abel	DD Developmental Disabilities	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
X00000X	Teisha	Abell	SLS Supported Living Services	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
X00000X	Lindsey	Abernathy	EBD Elderly, Blind, Disabled	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Geraldine	Abney	DD Developmental Disabilities	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Pamala	Abraham	CHCBS Childrens Home Care Base	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Renetta	Abrams	CHCBS Childrens Home Care Base	619x0000000	09/01/2019	08/31/2020	APPROVED
X00000X	lola	Abreu	EBD Elderly, Blind, Disabled	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
X00000X	Mose	Acevedo	EBD Elderly, Blind, Disabled	619xxxxxxxx	10/01/2019	09/30/2020	APPROVED
2000000	Kylie	Acker	CMHS Community Mental Health S	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Brendan	Ackerman	CES Childrens Extensive Suppor	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Leonarda	Acosta	SLS Supported Living Services	619x0000000	09/01/2019	08/31/2020	APPROVED
X00000X	Latrisha	Acuna	DD Developmental Disabilities	619x0000000	09/01/2019	08/31/2020	APPROVED
X00000X	Marisa	Adair	EBD Elderly, Blind, Disabled	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Patsy	Adam	DD Developmental Disabilities	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Audry	Adame	DD Developmental Disabilities	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Melany	Adams	EBD Elderly, Blind, Disabled	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Tyrone	Adamson	CES Childrens Extensive Suppor	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
XXXXXXXX	Kenia	Adcock	DD Developmental Disabilities	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Inez	Addison	SLS Supported Living Services	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
2000000	Kiersten	Adkins	DD Developmental Disabilities	619x0000000	09/01/2019	08/31/2020	APPROVED
2000000	Nakesha	Adler	EBD Elderly, Blind, Disabled	619xxxxxxxx	09/01/2019	08/31/2020	APPROVED
XXXXXXXX	Theda	Agee	HCBS - SCI Spinal Cord Injury	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
XXXXXXXX	Tayna	Agnew	EBD Elderly, Blind, Disabled	619xxxxxxx	09/01/2019	08/31/2020	APPROVED
XXXXXXXX	Sherril	Aguiar	EBD Elderly, Blind, Disabled	619xxxxxxx	10/01/2019	09/30/2020	APPROVED
2000000	Derek	GOHSLER	CHCBS Childrens Home Care Base	619xxxxxxx	09/01/2019	08/31/2020	APPROVED

The PAR_2 tab on the Current Waiver PAR and Eligibility report will tell you each of your client's approved prior authorization numbers, start and end dates and which waiver they are on for the specific day that your run this report



A	В	C C	D	E	F	G
Medicaid ID	First Name	Last Name	Benefit Plan Code	Benefit Plan Description	Benefit Plan Eligibility Effective Date	Benefit Plan Eligibility End Date
XXXXXXXXX	Ingrid	Arnold	CMHS	HCBS Community Mental Health Supports Waiver	02/01/2017	12/31/2299
XXXXXXXXX	Kareem	Arredondo	EBD	HCBS Elderly, Blind, & Disabled Waiver	01/01/2014	12/31/2299
XXXXXXXXX	Catharine	Arreola	DD	HCBS Developmental Disabilities Waiver	05/17/2019	12/31/2299
XXXXXXXXX	Hana	Arriaga	CMHS	HCBS Community Mental Health Supports Waiver	05/20/2019	12/31/2299
XXXXXXXXX	Melanie	Arrington	DD	HCBS Developmental Disabilities Waiver	04/01/2015	12/31/2299
XXXXXXXXX	Alona	Arroyo	EBD	HCBS Elderly, Blind, & Disabled Waiver	12/01/2016	12/31/2299
XXXXXXXXX	Deneen	Arsenault	EBD	HCBS Elderly, Blind, & Disabled Waiver	12/01/2016	12/31/2299
XXXXXXXXX	Gertude	Arteaga	CES	HCBS Children's Extensive Support Waiver	08/09/2019	12/31/2299
XXXXXXXXX	Maryetta	Arthur	EBD	HCBS Elderly, Blind, & Disabled Waiver	05/01/2016	12/31/2299
XXXXXXXXX	Lavada	Artis	DD	HCBS Developmental Disabilities Waiver	12/26/2019	12/31/2299
XXXXXXXXX	Eldora	Asbury	CHCBS	HCBS Children's Home and Community-Based Services	01/01/2014	12/31/2299
XXXXXXXXX	Treena	Ash	SLS	HCBS Supported Living Services Waiver	07/17/2014	12/31/2299
XXXXXXXXX	Joseph	Ashby	CHCBS	HCBS Children's Home and Community-Based Services	10/24/2015	12/31/2299
XXXXXXXXX	Dennis	Ashcraft	DD	HCBS Developmental Disabilities Waiver	01/01/2014	12/31/2299
XXXXXXXXX	Estelle	Ashe	EBD	HCBS Elderly, Blind, & Disabled Waiver	01/01/2016	12/31/2299
XXXXXXXXX	Kathyrn	Asher	CHCBS	HCBS Children's Home and Community-Based Services	12/01/2015	12/31/2299
XXXXXXXXX	Kathie	Ashford	EBD	HCBS Elderly, Blind, & Disabled Waiver	04/26/2019	12/31/2299
XXXXXXXXX	Deja	Ashley	EBD	HCBS Elderly, Blind, & Disabled Waiver	10/01/2016	12/31/2299
XXXXXXXXX	Etha	Ashmore	EBD	HCBS Elderly, Blind, & Disabled Waiver	06/01/2019	12/31/2299
XXXXXXXXX	Danika	Ashton	CMHS	HCBS Community Mental Health Supports Waiver	01/01/2014	12/31/2299
XXXXXXXXX	Venus	Ashworth	SLS	HCBS Supported Living Services Waiver	01/01/2014	12/31/2299
XXXXXXXX	Grover	Askew	CES	HCBS Children's Extensive Support Waiver	10/01/2016	12/31/2299
XXXXXXXX	Chrissy	Atchison	EBD	HCBS Elderly, Blind, & Disabled Waiver	04/23/2015	12/31/2299
XXXXXXXX	Aurea	Atherton	EBD	HCBS Elderly, Blind, & Disabled Waiver	01/09/2020	12/31/2299
XXXXXXXX	Elvera	Atkins	CES	HCBS Children's Extensive Support Waiver	01/01/2014	12/31/2299
XXXXXXXX	Wynell	Atkinson	SLS	HCBS Supported Living Services Waiver	03/02/2016	12/31/2299
XXXXXXXX	Brenton	Atwell	CES	HCBS Children's Extensive Support Waiver	08/12/2019	12/31/2299
XXXXXXXX	Fawn	Atwood	CHCBS	HCBS Children's Home and Community-Based Services	02/14/2017	12/31/2299
XXXXXXXXX	Grisel	August	EBD	HCBS Elderly, Blind, & Disabled Waiver	02/10/2017	12/31/2299
XXXXXXXX	Rhoda	Augustine	EBD	HCBS Elderly, Blind, & Disabled Waiver	01/01/2014	12/31/2299

The Eligibility_3 tab on the Current Waiver PAR and Eligibility report will tell you ightarroweach of your client's current benefit plan, start and end dates for the specific day that your run this report



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			TCM T2023 and T2024 Report 7/8/2020 11:06 AM		
		Π	Utilization Report 8/11/2020 5:16 PM		
			Utilization Report by Client 6/3/2020 11:34 AM		



• Select Enrollment Report from the CMA Reports screen

- Enter Enrollment Date Range
- Click Finish



Cancel

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Next >

Finish



Enrollment Report



- Enter Enrollment Date Range
- Click Finish



Cancel

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Next >

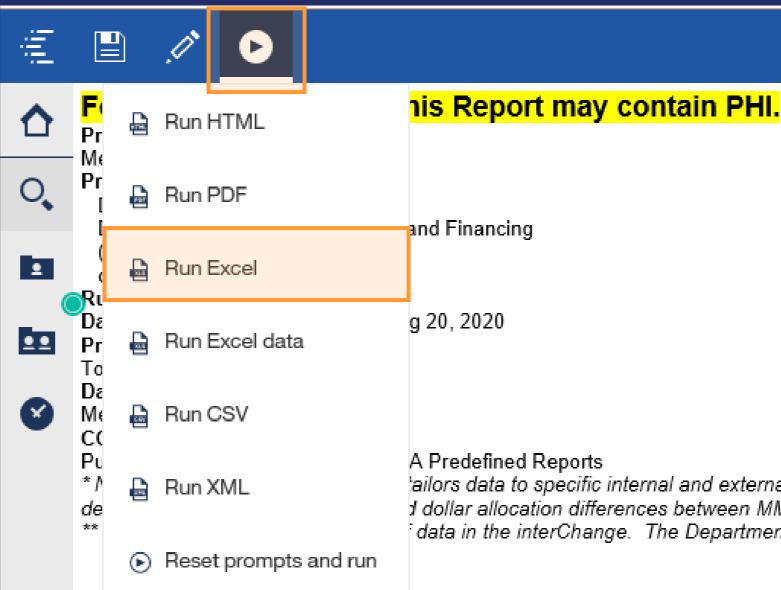
Finish



Enrollment Report



- To export the report in your preferred format, select the play button at the top
- It will open in a new window. From here, you may select to have it run in the background and emailed to you/others





ailors data to specific internal and external customer needs that are not met I dollar allocation differences between MMIS and CORE. data in the interChange. The Department and vendors are currently working

Enrollment Report - Summary Counts Tab

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A1	▪ : × ✓ ƒx Waiver		
	Α	В	C D
1	Waiver	Client Count by Waiver	
2	CMHS Community Mental Health S	40	
3	EBD Elderly, Blind, Disabled	132	
4	Overall - Total	172	
5			
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•	Documentation_1 Summary Counts_2 Clien	t Details_3 PA Status_4 PA Utilizatio	on_5 (+) : <

COLORADO Department of Health Policy & Financing • After the report runs, it will prompt you to save or open an Excel file

• The Summary Counts tab in the Enrollment Report shows the number of clients enrolled by waiver

Enrollment Report - Client Details Tab

A	В	C	D	Е	F	G	н	I	J	К	L	M
Medicaid ID	First Name	Last Name	Birth Date	Buy-In Aid	Waiver	Prior	Prior Authorization	Prior Authorization	Prior	Prior Authorization	Authorized	Utilized
				Code		Authorization	Start Date	End Date	Authorization	Status Description	Units	Units
						Number			Status Code			
XXXXXXX	Jack	O'Lantern	1/1/1066		CMHS Community Mental Health S	99999999999	01/01/2018	12/31/2018	A	APPROVED	1,688	,
XXXXXXX	Jack	O'Lantern	1/1/1066		CMHS Community Mental Health S	99999999999	01/01/2018	12/31/2018	A	APPROVED	428	8 8
XXXXXXX	Jack	O'Lantern	1/1/1066		CMHS Community Mental Health S	99999999999	01/01/2018	12/31/2018	A	APPROVED	3,768	8 10
XXXXXXX	Jack	O'Lantern	1/1/1066		CMHS Community Mental Health S	99999999999	01/01/2018	12/31/2018	A	APPROVED	428	186
XXXXXXX	Jack	O'Lantern	1/1/1066		CMHS Community Mental Health S	99999999999	01/01/2018	12/31/2018	A	APPROVED	428)
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	292	
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	832	. 79
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	22	1
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	921	526
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	12	8
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	1,884	604
XXXXXXX	Tooth	Fairy	09/18/1920		EBD Elderly, Blind, Disabled	99999999999	01/01/2018	12/31/2018	A	APPROVED	23	9

• The Client Details tab from the Enrollment Report contains client information and a high-level view of all PARs



Enrollment Report - PA Status Tab

A	В	С	D	E	F	G	Н
Medicaid ID	First Name	Last Name	Birth Date	Waiver	Prior Authorization	Prior Authorization	Prior Authorization
					Number	Status Code	Status Description
XXXXXXX	Jack	O'Lantern	1/1/1066	CMHS Community Mental Health S	9999999999	A	APPROVED
XXXXXXX	Jack	O'Lantern	1/1/1066	CMHS Community Mental Health S	9999999999	A	APPROVED
XXXXXXX	Jack	O'Lantern	1/1/1066	CMHS Community Mental Health S	9999999999	A	APPROVED
XXXXXXX	Jack	O'Lantern	1/1/1066	CMHS Community Mental Health S	9999999999	A	APPROVED
XXXXXXX	Jack	O'Lantern	1/1/1066	CMHS Community Mental Health S	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED
XXXXXXX	Tooth	Fairy	09/18/1920	EBD Elderly, Blind, Disabled	9999999999	A	APPROVED

• The PA Status tab contains high-level information about current PARs



Enrollment Report - PA Utilization Tab

A	В	С	D	E	F	G	н	I	J	К	L	м	N	0	Р	Q	R	S
Prior Authorization Number	Medicaid ID	Last Name	First Name	Waiver	Prior Authorization Start Date	Prior Authorization End Date	PA Service	Procedure Code	Procedure Modifier 1 Code	Procedure Modifier 2 Code	Procedure Modifier 3 Code	Procedure Modifier 4 Code	Prior Authorization Line Status Code	Prior Authorization Line Status Description	Line Prior Authorization Start Date	Line Prior Authorization End Date	Authorized Units	Utilized Units
999999999999	XXXXXXXXX	Jack	O'Lantern	CMHS Community Mental Health S		12/31/2018	Medication Reminder - Monitoring	S5185	UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	
999999999999	XXXXXXXXX	Jack		CMHS Community Mental Health S		12/31/2018	Personal Care	T1019	UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	1,664	
999999999999	XXXXXXXXX	Jack	O'Lantern	CMHS Community Mental Health S		12/31/2018	Personal Emergency Response	S5161	UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	
999999999999	XXXXXXXXX	Jack	O'Lantern	CMHS Community Mental Health S		12/31/2018	Homemaker	S5130	UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	416	4
999999999999	XXXXXXXXX	Jack		CMHS Community Mental Health S		12/31/2018	Personal Emergency Response		UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	4
99999999999	XXXXXXXXX	Tooth	-	CMHS Community Mental Health S		12/31/2018	Medication Reminder - Monitoring		UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	5
99999999999	XXXXXXXXX	Tooth	Fairy	CMHS Community Mental Health S		12/31/2018	Personal Care - Relative		UA	HR	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	3,744	
999999999999	XXXXXXXXX	Tooth	Fairy	CMHS Community Mental Health S		12/31/2018	Personal Emergency Response		UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	5
99999999999	XXXXXXXXXX	Tooth	Fairy	CMHS Community Mental Health S		12/31/2018	Homemaker	S5130	UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	416	176
999999999999	XXXXXXXX	Tooth	Fairy		01/01/2018	12/31/2018	Personal Emergency		UA	(BLANK)	(BLANK)	(BLANK)	A	APPROVED	01/01/2018	12/31/2018	12	10

The PA Utilization tab gives you detailed information on the PARs, including services, line dates and authorized and utilized units

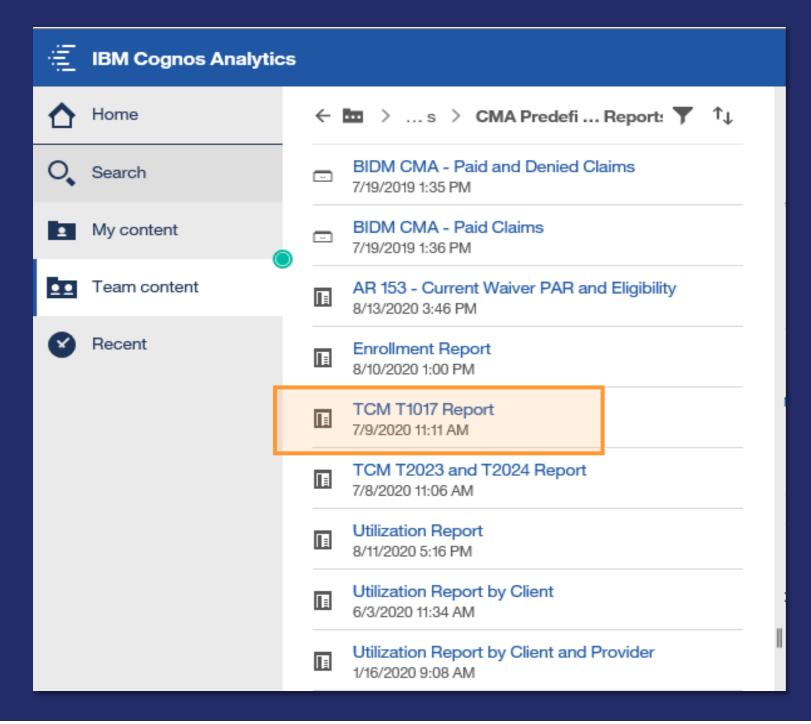


COLORADO

Policy & Financing

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T1017 Report



 Select TCM T1017 Report from the CMA Reports screen to run a report of paid TCM claims specific to clients in your CCB agency



T1017 Report

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- your CCB agency
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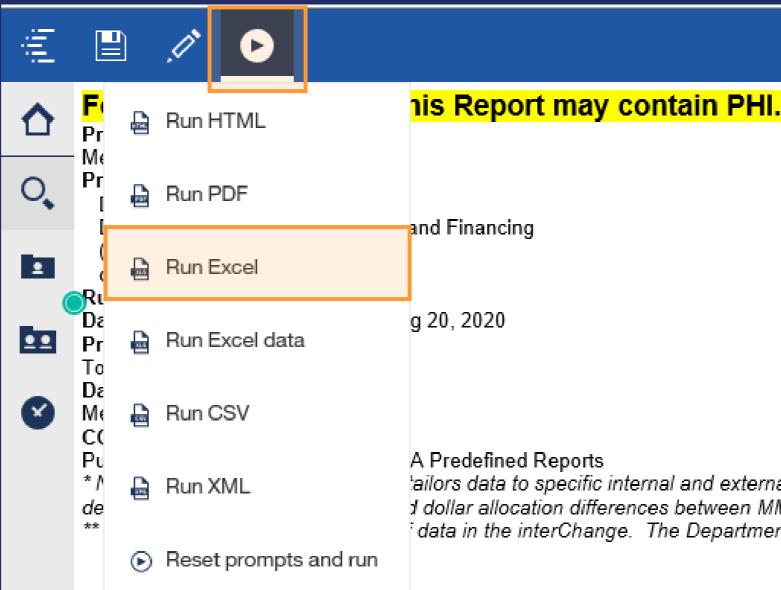
• Select TCM T1017 Report from the CMA Reports screen to run a report of paid TCM claims specific to clients in

• Input date range and click

• Note that TCM is limited to 240 units per fiscal year

T1017 Report

- To export the report in your preferred format, select the play button at the top
- It will open in a new window. From here, you may select to have it run in the background and emailed to you/others







ailors data to specific internal and external customer needs that are not met I dollar allocation differences between MMIS and CORE. data in the interChange. The Department and vendors are currently working

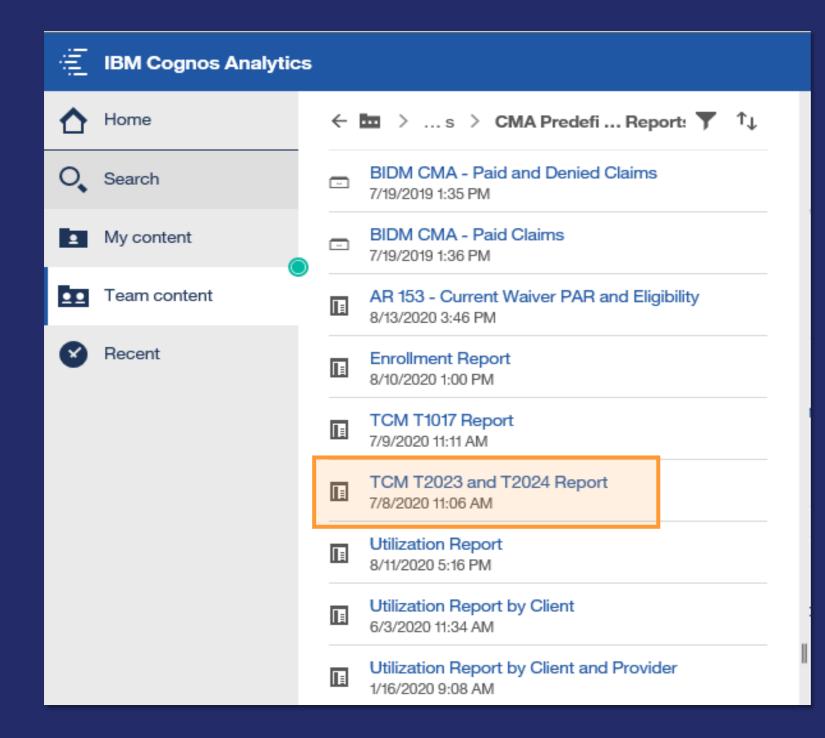
T1017 Report - TCM Utilization Tab

A	В	С	D	E	F
CMA Alternate Agency Identifier	Medicaid ID	Line First Service Date	Procedure Code	Paid Amount	Allowed Units Quantity
CMA15	XXXXXXXXX	07/01/2019	T1017	\$311.79	19
CMA15	XXXXXXXXX	08/01/2019	T1017	\$328.20	20
CMA42	XXXXXXXXX	07/01/2019	T1017	\$459.48	28
CMA42	XXXXXXXX	08/01/2019	T1017	\$328.20	20
CMA22	XXXXXXXX	07/21/2019	T1017	\$82.05	5
CMA22	XXXXXXXX	07/22/2019	T1017	\$16.41	1
CMA22	XXXXXXXX	07/21/2019	T1017	\$131.28	8
CMA18	XXXXXXXX	07/01/2019	T1017	\$262.56	16
CMA18	XXXXXXXX	08/01/2019	T1017	\$32.82	2
CMA46	XXXXXXXX	07/02/2019	T1017	\$65.64	4
CMA46	XXXXXXXX	07/03/2019	T1017	\$131.28	8
CMA46	XXXXXXXX	07/18/2019	T1017	\$82.05	5
CMA46	XXXXXXXX	08/08/2019	T1017	\$16.41	1
CMA15	XXXXXXXX	07/01/2019	T1017	\$164.10	10
CMA15	XXXXXXXX	08/01/2019	T1017	\$393.84	24
CMA42	XXXXXXXXX	07/01/2019	T1017	\$180.51	11
CMA42	XXXXXXXX	08/01/2019	T1017	\$377.43	23
CMA45	XXXXXXXXX	07/31/2019	T1017	\$520.00	32
CMA39	XXXXXXXXX	07/01/2019	T1017	\$246.15	15

The TCM Utilization tab on the T1017 Report contains client IDs, Dates of Service, Paid \$ Amount and # of Units Allowed. Your report should be specific to your agency and show only one CMA# in column A.



T2023 and T2024 Report



 Select TCM T2023 and T2024 **Report** from the CMA Reports screen to run a report of paid TCM claims specific to clients in your CCB agency



T2023 and T2024 Report

Choose Service Date Range:	
Choose Service Date Rande:	
Choose Service Date Range: * Jul 1, 2020 to * Aug 20, 2020	
Cancel < Back Next >	Finish

- in your CCB agency
- ightarrowFinish



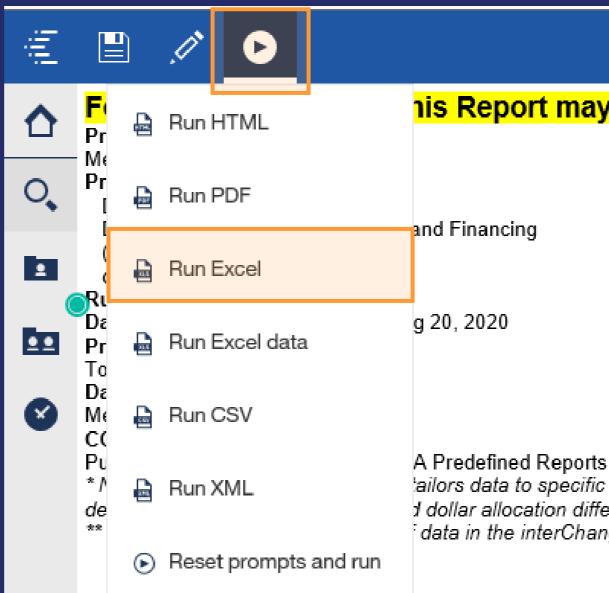
 Select TCM T2023 and T2024 **Report** from the CMA Reports screen to run a report of paid TCM claims specific to clients

Input date range and click

Note that TCM is limited to 240 units per fiscal year

T2023 and T2024 Report

- To export the report in your preferred format, select the play button at the top
- It will open in a new window. From here, you may select to have it run in the background and emailed to you/others





his Report may contain PHI.

ailors data to specific internal and external customer needs that are not met J dollar allocation differences between MMIS and CORE.

data in the interChange. The Department and vendors are currently working

T2023 and T2024 Report - TCM Utilization Tab

A	В	с	D	E	F	G
CMA Alternate Agency Identifier	Medicaid ID	Line First Service Date	Procedure Code	Service	Paid Amount	Allowed Units Quantity
CMA6	XXXXXXX	07/01/2020	T2023	HCBS TCM PMPM	\$138.29	1
CMA6	XXXXXXX	07/01/2020	T2023	HCBS TCM PMPM	\$138.29	1

• The TCM Utilization tab on the T2023 and T2024 Report contains client IDs, Dates of Service, Paid \$ Amount and # of Units Allowed. Your report should be specific to your agency and show only one CMA# in column A.

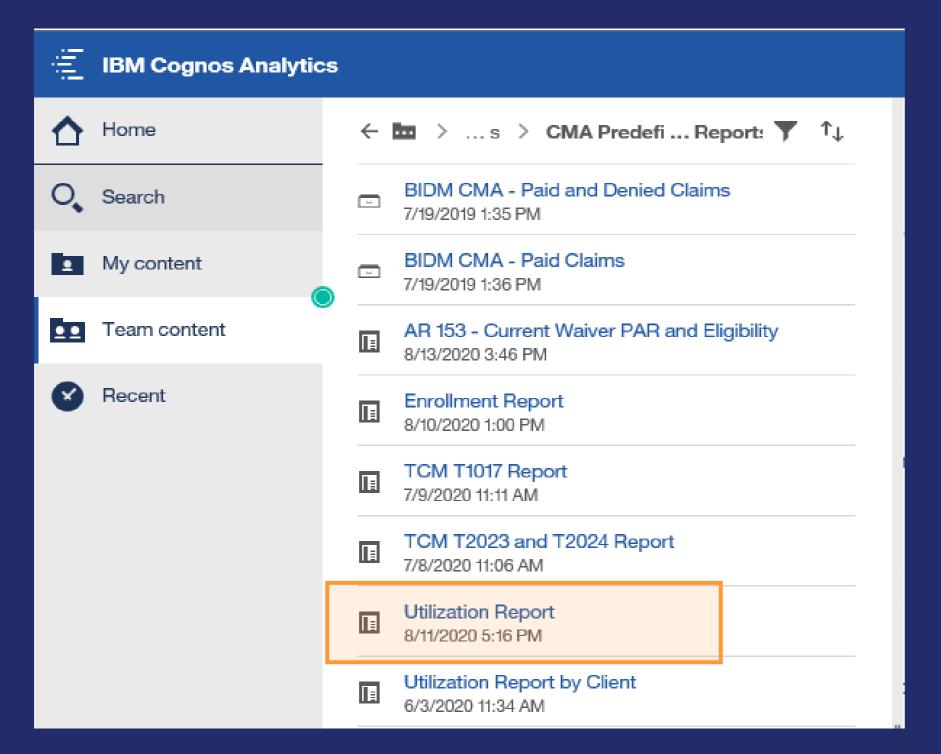


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Utilization Report







Select Utilization Report from the CMA Reports screen

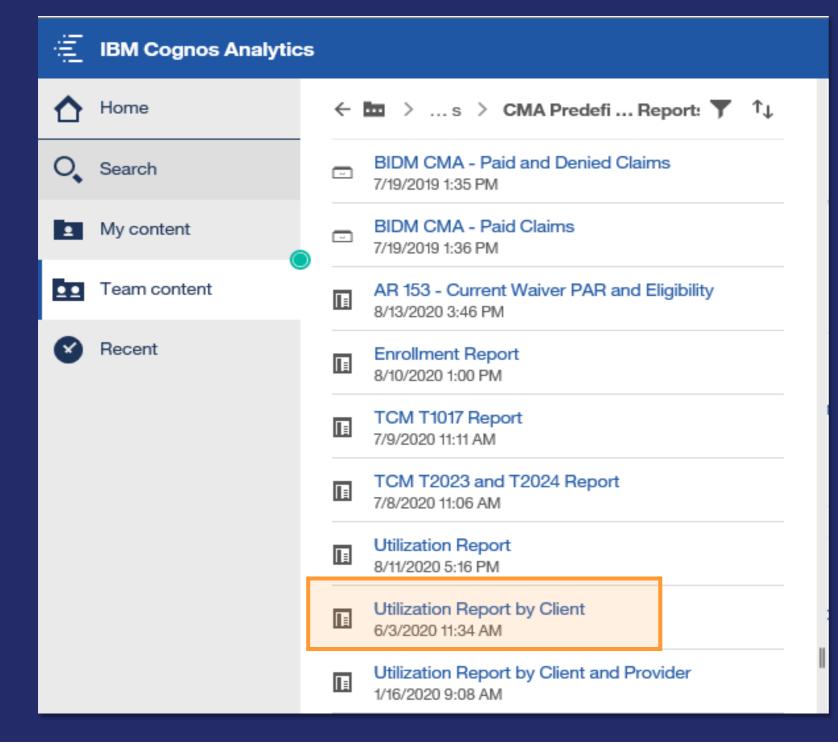
Utilization Report - PA Utilization Tab

Medicaid ID First Name Last Name Bith Date Name Bith Date Nam Bith Date Name Bith Date Name <th>n</th>	n
Image: Number Number Number Code Code Code Code Code Code Date Medicaid ID Location Quantity Quantity Code Code Code Description XXXXXXX Santa Claus 1/1/1492 CMHS 9999999999 S5130 HOMAKER UA (BLANK) (BLANK) 09/05/2017 09/13/2017 64020746 BENT 4 \$17.00 M Professional P PA XXXXXXXX Santa Claus 1/1/1492 CMHS 09/05/2017 09/13/2017 64020746 BENT 4 \$17.00 M Professional P PA VXXXXXXX Santa Claus 1/1/1492 CMHS 09/05/2017 09/13/2017 64020746 BENT 4 \$17.00 M Professional P PA VXXXXXXX Santa Lius 1/1/1492 CMHS SS130 HOMAKER UA BENK 64020746 BENT 4 \$17.00 M P P P VXXXXXXXXX VXXXXXXXX VXXXXXXXXX	n Code Descriptio n
Image: Normal State Image: Name Image: Na	n
XXXXXXXX Santa Claus 1/1/1492 CMHS 9999999999 S5130 HOMAKER UA (BLANK) (BLANK) (BLANK) 09/05/2017 09/13/2017 64020746 BENT 4 \$17.00 4 \$17.00 M Professional P PA	n Y P PAY 999999999999999
Communit SERVICE COUNTY Claims y Mental NOS PER PUBLIC Claims	1 P PAT 999999999999999999999999999999999
y Mental NOS PER PUBLIC	
XXXXXXX Santa Claus 1/1/1492 CMHS 9999999999 S5161 EMER UA (BLANK) (BLANK) 09/30/2017 09/30/2017 9000143297 CONNECT 1 \$52.00 1 \$52.00 M Professional P PA	Y P PAY 99999999999999
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y Mental SERV M LLC	
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y Mental SERV M LLC	
Health S PERMONTH	Y P PAY 99999999999999
Communit RSPNS SYS REPORT ON (BLANK) (F FAI 555555555555555555
y Mental SERV	
Health S PERMONTH	
XXXXXXX Santa Claus 1/1/1492 CMHS 999999999 S5161 EMER UA (BLANK) (BLANK) (BLANK) 01/01/2018 01/31/2018 9000143297 CONNECT 1 \$52.00 1 \$52.00 M Professional P PA	Y P PAY 99999999999999
Communit RSPNS SYS AMERICA.CO Claims	
y Mental SERV MLLC	
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XXXXXXXX Easter Bunny 7/4/1776 CMHS 9999999999 S5161 EMER UA (BLANK) (BLANK) (BLANK) 10/01/2017 10/18/2017 42404754 SUCCESS, 1 \$55.00 1 \$55.00 M Professional P PA	Y P PAY 99999999999999
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y Mental SERV Health S PERMONTH	
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Communit RSPNS SYS INC.	LVI 222222222222222222222222222222222222
y Mental SERV	
Health S PERMONTH	

 The PA Utilization tab on the Utilization Report contains all the same high-level PAR information and it also contains claim information as to which provider billed, the units/amounts billed and paid, and the ICN number



Utilization Report by Client



• Select Utilization Report by Client from the CMA Reports screen



Utilization Report by Client

- Enter Enrollment
 Date Range
- Enter Client's Medicaid
 ID number
 - Tip: Client Medicaid ID field is case sensitive always use capital letters
- Select Finish

Choose Enrollr	nent Dat	e Ran	ge:
* Dec 28, 2018	-	to	* Dec 28, 2018
Choose Client's	s Medica	id ID:	
* <u> </u>	_		

Cancel

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Utilization Report

Utilization Report by Client and Provider

IBM Cognos Analytics	5
A Home	← 🖿 〉 s 〉 CMA Predefi Report: 🍸 ↑↓
O Search	BIDM CMA - Paid and Denied Claims 7/19/2019 1:35 PM
My content	BIDM CMA - Paid Claims 7/19/2019 1:36 PM
•• Team content	AR 153 - Current Waiver PAR and Eligibility 8/13/2020 3:46 PM
Recent	Enrollment Report 8/10/2020 1:00 PM
	TCM T1017 Report 7/9/2020 11:11 AM
	TCM T2023 and T2024 Report 7/8/2020 11:06 AM
	Utilization Report 8/11/2020 5:16 PM
	Utilization Report by Client 6/3/2020 11:34 AM
	Utilization Report by Client and Provider 1/16/2020 9:08 AM
	Utilization Report by Provider 7/28/2020 4:19 PM



• Select Utilization Report by Client and Provider from the CMA Reports screen

• This report will provide the same information as the Utilization Report by Client, however, will allow you to limit it by specific client and specific provider

Utilization Report by Client and Provider

- Enter Enrollment
 Date Range
- Enter Client's Medicaid
 ID number
 - Tip: Client Medicaid ID field is case sensitive – always use capital letters
- Enter Billing Provider ID
- Select Finish

Choose Enrollment Date Range:						
* Dec 28, 2018	∎- to	* Dec 28, 2018	-			
Choose Client's	Medicaid ID:	,				
*						
Choose Billing I	Provider ID:					
*						

Cancel < Back Next > Finish



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Utilization Report

Utilization Report by Provider

jî li	IBM Cognos Analytics	5	
	Home	÷	🖿 > … s > CMA Predefi … Report: ▼ ↑↓
0	Search	-	BIDM CMA - Paid and Denied Claims 7/19/2019 1:35 PM
	My content		BIDM CMA - Paid Claims 7/19/2019 1:36 PM
Ē	Team content	Π	AR 153 - Current Waiver PAR and Eligibility 8/13/2020 3:46 PM
8	Recent		Enrollment Report 8/10/2020 1:00 PM
			TCM T1017 Report 7/9/2020 11:11 AM
			TCM T2023 and T2024 Report 7/8/2020 11:06 AM
			Utilization Report 8/11/2020 5:16 PM
			Utilization Report by Client 6/3/2020 11:34 AM
			Utilization Report by Client and Provider 1/16/2020 9:08 AM
			Utilization Report by Provider 7/28/2020 4:19 PM

- Select Utilization Report screen
- allow you to see all your by specific provider



by Provider from the CMA Reports

• This report will provide the same information as the Utilization Report by Client, however will applicable clients and will limit it

Utilization Report by Provider

Cancel

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Next >

Finish

- Enter Enrollment Date Range
- Enter Billing Provider ID ightarrow
- Select Finish
- This report will show all \bullet utilization for your clients

Choose Enrollment Date Ran	nge:				
* Dec 28, 2018 📰 - to	* Dec 28, 2018				
Choose Billing Provider ID:					
*					



Utilization Report



Troubleshooting

- For issues with access, error messages, or if you have difficulty with RSA ID, contact:
- <u>https://truvenhealth.com/support/portal</u>
 Or
- Email Prodsupp@us.ibm.com

➢ Be sure to include your D98 ID



ng if vou have

Helpful Information

- Tables update at various intervals and therefore information may not appear on reports
 - Claims updated weekly
 - Provider and PAR updated daily
 - Do NOT use Chrome! Use Internet Explorer
 - If you are missing clients or have additional clients on your lists, verify in the Bridge the agency listed





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Questions?

Contacts

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