Report Descriptions And Examples

REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**BASIC**
PRINTED REPORT TITLE:	Duplicate Claiml System Sets Grouped by Set Number
REPORT DESCRIPTION:	This report provides set-level information regarding all of the sets loaded in the Duplicate Claim System. The fields displayed on the report are: Institutional/Non-Institutional Indicator; Set Number; Status; Set Match Type; Multi-Contractor Set? (Y/N); Owner FI; Region; Initial Load Date; Current Load Date; Last Update Date; Adjustments? (Y/N); Total Amount Identified For Recoupment; Total Amount Actually Recouped; Total TED Adjustment Amount; and Set Level User Defined Code.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Set Level User Defined Codes.
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Set Number	=	All
Set User Codes	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All

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Page 1

DUPLICATE CLAIM SYSTEM SETS
GROUPED BY SET NUMBER

50 - Acme Claims Processing

Undetermined Region

INSTITUTIONAL

SET #	STAT	MATCH TYPE	MULTI FI?	OWNER FI	REGION	INITIAL LOAD DATE	CURRENT LOAD DATE	LAST UPDATE DATE	ADJ?	ID RECOUP	ACTUAL RECOUP	ADJUSTMENT AMOUNT	USER CODE
6	C	D	N	50	MDA90504C0050	09/24/1996	12/16/1996	12/31/1996	N	$0.00	$0.00	$0.00	
15	O	N	N	50	MDA90504C0050	09/24/1996	09/24/1996	10/01/1996	Y	$0.00	$0.00	$0.00	
22	V	D	N	50	MDA90504C0050	09/24/1996	09/24/1996	10/02/1996	Y	$1,000.00	$1,000.00	$1,115.44	
INSTITUTIONAL TOTAL											$1,000.00	$1,000.00	$1,115.44

NON-INSTITUTIONAL

SET #	STAT	MATCH TYPE	MULTI FI?	OWNER FI	REGION	INITIAL LOAD DATE	CURRENT LOAD DATE	LAST UPDATE DATE	ADJ?	ID RECOUP	ACTUAL RECOUP	ADJUSTMENT AMOUNT	USER CODE
121	O	E	N	50	MDA90504C00050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	
122	V	E	N	50	MDA90504C00050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	A4
123	O	E	N	50	MDA90504C00050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	
NON-INSTITUTIONAL TOTAL											$0.00	$0.00	$0.00
Undetermined Region TOTAL											$1,000.00	$1,000.00	$1,115.44
50 - Acme Claims Processing TOTAL											$1,000.00	$1,000.00	$1,115.44

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**BASIC BY USER CODE**
PRINTED REPORT TITLE:	Duplicate Claim System Sets Grouped by User Code
REPORT DESCRIPTION:	This report provides set-level information regarding all of the sets loaded in the Duplicate Claim System grouped by Set Level User Defined Codes. The fields displayed on the report are: Institutional/ Non-Institutional Indicator; Set Number; Status; Set Match Type; Multi-Contractor Set? (Y/N); Owner FI; Region; Initial Load Date; Current Load Date; Last Update Date; Adjustments? (Y/N); Total Amount Identified For Recoupment; Total Amount Actually Recouped; Total TED Adjustment Amount; and Set Level User Defined Code.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Set Level User Defined Codes.
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Set User Codes	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Set Number	=	All

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DUPLICATE CLAIM SYSTEM SETS GROUPED BY USER CODE

50 - Acme Claims Processing
Undetermined Region

A4 Test code a 4 am

NON-INSTITUTIONAL

SET #	STAT	MATCH TYPE	MULTI FI?	OWNER FI	REGION	INITIAL LOAD DATE	CURRENT LOAD DATE	LAST UPDATE DATE	ADJ?	ID RECOUP	ACTUAL RECOUP	ADJUSTMENT AMOUNT	USER CODE
122	V	E	N	50	MDA90504C0050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	A4
NON-INSTITUTIONAL Totals										**$0.00**	**$0.00**	**$0.00**	
A4 Test code a 4 am Totals										**$0.00**	**$0.00**	**$0.00**	

Blank User Code

INSTITUTIONAL

SET #	STAT	MATCH TYPE	MULTI FI?	OWNER FI	REGION	INITIAL LOAD DATE	CURRENT LOAD DATE	LAST UPDATE DATE	ADJ?	ID RECOUP	ACTUAL RECOUP	ADJUSTMENT AMOUNT	USER CODE
6	C	D	N	50	MDA90504C0050	09/24/1996	12/16/1996	12/31/1996	N	$0.00	$0.00	$0.00	
15	0	N	N	50	MDA90504C0050	09/24/1996	09/24/1996	10/01/1996	Y	$0.00	$0.00	$0.00	
22	V	D	N	50	MDA90504C0050	09/24/1996	09/24/1996	10/02/1996	Y	$1,000.00	$1,000.00	$1,115.44	
35	O	N	N	50	MDA90504C0050	09/24/1996	12/16/1996	12/16/1996	Y	$0.00	$0.00	$0.00	
36	O	D	N	50	MDA90504C0050	09/24/1996	12/16/1996	12/16/1996	Y	$0.00	$0.00	$0.00	
39	O	O	N	50	MDA90504C0050	09/24/1996	09/24/199	10/01/1996	Y	$0.00	$0.00	$0.00	
NON-INSTITUTIONAL Totals										**$1,000.00**	**$1,000.00**	**$1,115.44**	

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Status Code	=	All
Set User Codes	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Set Number	=	All

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DUPLICATE CLAIM SYSTEM SETS GROUPED BY USER CODE

50 - Acme Claims Processing
Undetermined Region

Blank User Code

NON-INSTITUTIONAL

SET #	STAT	MATCH TYPE	MULTI FI?	OWNER FI	REGION	INITIAL LOAD DATE	CURRENT LOAD DATE	LAST UPDATE DATE	ADJ?	ID RECOUP	ACTUAL RECOUP	ADJUSTMENT AMOUNT	USER CODE
121	O	E	N	50	MDA90504C0050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	
123	O	E	N	50	MDA90504C0050	09/24/1996	01/24/1997	01/24/1997	Y	$0.00	$0.00	$0.00	
144	O	N	N	50	MDA90504C0050	09/24/1996	09/24/1996	09/24/1996	N	$0.00	$0.00	$0.00	
184	O	N	N	50	MDA90504C0050	09/24/1996	09/24/1996	09/24/1996	N	$0.00	$0.00	$0.00	
185	O	N	N	50	MDA90504C0050	09/24/1996	09/24/1996	09/24/1996	N	$0.00	$0.00	$0.00	
226	O	C	N	50	MDA90504C0050	09/24/1996	09/24/1996	10/01/1996	Y	$0.00	$0.00	$0.00	
NON-INSTITUTIONAL Totals										**$0.00**	**$0.00**	**$0.00**	
Blank User Code Totals										**$1,000.00**	**$1,000.00**	**$1,115.44**	
Undetermined Region Totals										**$1,000.00**	**$1,000.00**	**$1,115.44**	
50 - Acme Claims Processing Totals										**$1,000.00**	**$1,000.00**	**$1,115.44**	

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**USER LOG REPORT**
PRINTED REPORT TITLE:	User Log Grouped By Set Number (Transaction History)
REPORT DESCRIPTION:	This report identifies the users who made changes to a set and the dates on which the changes occurred. The fields displayed on the report are: Set Number; Status; Owner FI; Region; Initial Load Date; Current Load Date; Transaction Date; User ID; Total Amount Identified For Recoupment; Total Amount Actually Recouped; and Total TED Adjustment Amount. The report will identify all of the sets meeting the criteria selected on the report parameter screen and list all of the changes made to those sets along with the associated User Ids. The system detects changes to: the status of a set; the Owner FI; the Region; and the three total dollar amount fields. Whenever a change to one or more of these fields occurs, a "log" record is created and will appear on this report along with the User ID associated with the change(s). The report will not show log entries generated as a result of: sets to which claims have been added during the monthly load process; or sets that have been archived out of the active database to history. Users may see entries with an "System" or "CLAIMADD" as the User ID. These two User IDs are used by the DCS for set management purposes. These User Ids may appear when the system makes a change to a set. The report groups the data by Set Number in ascending order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus User IDs.
REPORT NOTES:	The data used by this report format is set level data.

Status Code = All
Adjust Type = All
Owner Type = All
Claim Type = All
Match Type = All
Set Number = All
Owner FI = All
Owner Region = All
User ID = All

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USER LOG GROUPED BY SET NUMBER (TRANSACTION HISTORY)

Set Number	Stat	Owner FI	Region	Initial Load Date	Current Load Date	Transaction Date	User Id	Total Amount Ident Recoup	Total Amount Actual Recoup	Total Paid TED Adjustment
26809	C	##	AAAAAA	12/07/2004	12/07/2004	02/08/2005	jdoe	$65.38	$65.38	$0.00
26809	P	##	AAAAAA	12/07/2004	12/07/2004	02/08/2005	jdoe	$65.38	$65.38	$0.00
26809	O	##	AAAAAA	12/07/2004	12/07/2004	02/09/2005	jsmith	$0.00	$0.00	$0.00
26963	O	##	BBBBBB	02/07/2005	02/07/2005	02/08/2005	CLAIMADD	$0.00	$0.00	$0.00
26963	O	##	BBBBBB	02/07/2005	02/07/2005	02/17/2005	jdoe	$240.00	$0.00	$0.00
26963	O	###	AAAAAA	02/07/2005	02/07/2005	02/18/2005	SYSTEM	$240.00	$0.00	$0.00
32085	O	##	CCCCCC	02/07/2005	02/07/2005	02/08/2005	CLAIMADD	$0.00	$0.00	$0.00
32085	O	##	DDDDDD	02/07/2005	02/08/2005	02/08/2005	SYSTEM	$0.00	$0.00	$0.00
32085	O	##	AAAAAA	02/07/2005	02/18/2005	02/18/2005	SYSTEM	$0.00	$0.00	$0.00
32085	O	###	AAAAAA	02/07/2005	02/18/2005	04/01/2005	SYSTEM	$0.00	$0.00	$0.00
32981	O	##	CCCCCC	02/07/2005	02/07/2005	02/08/2005	CLAIMADD	$0.00	$0.00	$0.00
32981	O	##	CCCCCC	02/07/2005	02/07/2005	02/16/2005	jdoe	$36.85	$0.00	$0.00
32981	O	##	CCCCCC	02/07/2005	02/07/2005	02/17/2005	jdoe	$36.85	$15.00	$0.00
32981	O	##	CCCCCC	02/07/2005	02/07/2005	02/17/2005	jdoe	$36.85	$0.00	$0.00
32981	O	###	AAAAAA	02/07/2005	02/18/2005	02/18/2005	SYSTEM	$36.85	$0.00	$0.00
32981	p	###	AAAAAA	02/07/2005	02/18/2005	02/18/2005	jdoe	$36.85	$0.00	$0.00

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒EXPLANATION REPORT ⇒**NOTEPAD**
PRINTED REPORT TITLE:	Explanations Notepad
REPORT DESCRIPTION:	This report provides a listing of the notepad entries made on selected sets. The fields displayed on this report are: Set Number; Status; Match Type; Owner FI; Region; Initial Load Date; Current Load Date; and Notepad Entries.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
5 >= Set Number <	=	8

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EXPLANATIONS NOTEPAD

50 - Acme Claims Processing

Set Number	Status	Match Type	Initial Load Date	Current Load Date
6	C	D	09/24/1996	12/16/1996

Testing the Notepad

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒EXPLANATION REPORT ⇒**VALIDATE**
PRINTED REPORT TITLE:	Validate Status Explanations
REPORT DESCRIPTION:	This report provides a listing of the explanations entered when sets are resolved to a VALIDATE status. The Duplicate Claims System requires that an explanation be entered when a set is resolved to a VALIDATE status. One of the required Validate explanations describes why the amount actually recouped and the paid amount of the TED adjustments submitted do not equal the amount identified for recoupment. The other required Validate explanation describes why all of the identified line-items of a non-institutional actual duplicate claim have not been adjusted. The fields displayed on this report are: Set Number; Status; Match Type; Owner FI; Region; Initial Load Date; Current Load Date; and Validate Explanations.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All

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VALIDATE STATUS EXPLANATIONS

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒EXPLANATION REPORT ⇒**MODIFY**
PRINTED REPORT TITLE:	Modify FI Explanations
REPORT DESCRIPTION:	This report provides a listing of the explanations entered when the Owner FI is changed on multi-contractor sets. The Duplicate Claims System requires that an explanation be entered when ownership of a multi-contractor set is changed from one contractor to another. The explanation entered should indicate who changed set ownership, who the change was discussed with at the receiving contractor, the date the discussions and the change took place, and why ownership was changed. The fields displayed on the report are: Set Number; Status; Match Type; Owner FI; Region; Initial Load Date; Current Load Date; and the Modify FI Explanations.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Owner Type (Claim Set Status; Adjustments, Claim Type, Match Type, Date Type, Set Range, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Adjust Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All

Date: 4/28/05
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MODIFY FI EXPLANATIONS

50 - Acme Claims Processing

Undetermined

Set Number	Status	Match Type	Initial Load Date	Current Load Date
63	O	N	09/24/1996	12/16/1996
Transferred iaw telcon 6/5/97				
371	O	E	09/24/1996	12/16/1996
Jurisdictional error, transfer coordinated				
578	O	N	09/24/1996	01/28/1997
transfer coordinated 7/11/97				

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**REGION UNASSIGNED**
PRINTED REPORT TITLE:	Multi-Contractor Sets Region Missing
REPORT DESCRIPTION:	This report provides a listing of the multi-contractor sets in the Duplicate Claims System for which a region has not been assigned. All sets are assigned a region when they are loaded into the system and when mass changes occur. When ownership of a multi-contractor set is changed from one contractor to another, the receiving contractor must assign the applicable region to the set. If the receiving contractor does not assign a region, the set cannot be associated with a particular contract. This report will provide receiving contractors with a listing of the sets which have not had regions assigned. The fields displayed on the report are: Set Number; Status; Initial Load Date; Current Load Date; and Owner FI.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Owner Type and Set Range (Claim Set Status; Adjustments, Claim Type, Match Type, Date Type, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Status Code = All
Adjust Type = All
Claim Type = All
Match Type = All
Owner FI = All
Owner Region = All

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MULTI CONTRACTOR SETS
REGION MISSING

Set Number	Owner FI	Status	Initial Load Date	Current Load Date
21 - Grand Army Health Care				
33676	21	O	02/07/2005	03/25/2005
22 - Excel Health Care				
33290	22	O	02/07/2005	03/25/2005
33504	22	O	02/07/2005	03/25/2005
23 - Seven Health Care				
162	23	V	11/22/2004	11/22/2004

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**SET COUNTS BY REGION**
PRINTED REPORT TITLE:	Set Counts By Region
REPORT DESCRIPTION:	This report provides the numbers of sets of each match type by contract region. The report shows the number of sets of each match type, the percentage each match type represents of the total number of sets for the region, the number of sets for each match type which have associated adjustments, and the percentage of each match type which have been adjusted. This report will show the distribution of sets for a region across match types. It will also show the user how many sets in a given match type category have associated adjustments and the percentage of that match type category which have adjustments. This report can serve as a tool for contractors to help diagnose causes for duplicate payments and to help determine workload and needed resources.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Match Type and Set Range (Claim Set Status; Adjustments, Claim Type, Date Type, FI, Region) plus Set Level User Defined Codes.
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Adjust Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All

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SET COUNTS BY REGION

50 - Acme Claims Processing

Undetermined

Match Type	# of Sets	% of Total	# of Adjusted Sets	% Adjusted
CPT-4 Code	4	3.74%	4	100.00%
Date Overlap	23	21.50%	17	73.91%
Exact	35	32.71%	32	91.43%
Near	29	27.10%	19	65.52%
Other	16	14.95%	9	56.25%
Region Totals	**107**	**100.00%**	**81**	**75.70%**
FI Totals	**107**	**100.00%**	**81**	**75.70%**

55 - East West Claims

Area 55

Match Type	# of Sets	% of Total	# of Adjusted Sets	% Adjusted
Exact	1	100.00%	1	100.00%
Region Totals	**1**	**100.00%**	**1**	**100.00%**
FI Totals	**1**	**100.00%**	**1**	**100.00%**

73 - HAL Systems Inc

Area 73A

Match Type	# of Sets	% of Total	# of Adjusted Sets	% Adjusted
Date Overlap	1	100.00%	1	100.00%
Region Totals	**1**	**100.00%**	**1**	**100.00%**
FI Totals	**1**	**100.00%**	**1**	**100.00%**

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Status Code	=	All
Adjust Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All

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Page 2

SET COUNTS BY REGION

99 - Inactive Contractor

Inactive-Area 20

Match Type	# of Sets	% of Total	# of Adjusted Sets	% Adjusted
Near	1	100.00%	1	100.00%
Region Totals	**1**	**100.00%**	**1**	**100.00%**
FI Totals	**1**	**100.00%**	**1**	**100.00%**

Inactive -Area 30

Match Type	# of Sets	% of Total	# of Adjusted Sets	% Adjusted
Near	1	100.00%	1	100.00%
Region Totals	**1**	**100.00%**	**1**	**100.00%**
FI Totals	**1**	**100.00%**	**1**	**100.00%**
Grand Totals	**111**	**100.00%**	**84**	**75.68%**

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REPORT CATEGORY:	Set Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SET REPORTS ⇒**SET LEVEL USER CODES**
PRINTED REPORT TITLE:	Set Level User Defined Field Definitions
REPORT DESCRIPTION:	This report displays the Owner FI, the Set Level User Defined Codes, their definitions, and whether they are active or inactive.
REPORT PARAMETER OPTIONS:	Users may not customize this report.
REPORT NOTES:	The data used by this report format is set level data.

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SET LEVEL USER DEFINED FIELD DEFINITIONS

Owner FI	Contract #	Code	Description	Active ?
50	MDA90504C0050	A4	Test code a 4 am	Y
51	MDA90504C0051	A4	testing	Y
51	MDA90504C0051	1A	Testy - 1A	Y
51	MDA90504C0051	2B	TEST - 2B	Y
52	58	2L	Test 232	Y
52	93D0004	86	testing	N
52	MDA90504C0052	86	testing	Y
52	94D0004	44	testing	Y
52	88D0006	45	TEST	Y
52	89D0002	2A	TEST	Y
54	88D0004	2E	Test	Y
54	89D0004	55	tesyting	Y
55	MDA90504C0055	B3	Test Code B 31	Y
56	88D0004	56	testing	Y
56	93D0004	2C	TEST	Y
73	89D0002	2F	Tst	Y
73	89D0002	2G	TEST	Y

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**BASIC**
PRINTED REPORT TITLE:	Basic Duplicate Claim Report Institutional and Non-Institutional Claim and Line Item Level Data
REPORT DESCRIPTION:	This report lists all of the claims loaded in the system grouped by claim number. The report will show institutional and non-institutional claims. This report format will allow the user to select by Duplicate Flag values. The fields displayed on the report are: Owner FI; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Duplicate Flag Value; Reason Code; Processed-To-Completion Date; Responsible FI Number; Sponsor ID; Patient ID; Patient Name; Amount Billed; Amount Paid; Amount Identified For Recoupment; Amount Actually Recouped. For Non-Institutional claims, line item data will also be displayed. The line item fields displayed include: Line Item Number; Line Item Match Type; Procedure Code; Provider Tax ID; Provider Sub-ID; Place of Service; Type of Service; Care Begin Date; Care End Date; Line Item Amount Billed for the Procedure; and Amount Paid for the Procedure. The report identifies and prints all of the claims occurring in sets meeting the criteria selected on the report parameter screen.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator; Solicited Indicator; Exclude Base; PTC Date; Set Level User Defined Codes; Claim Level User Defined Codes; Responsible FI; Region; and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level and line item level data. If a non-institutional claim exists in more than one set, it will print for each set in which it exists. Each instance of these non-institutional claims existing in multiple sets will contain a different set number on the report.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Dupe Flag	=	All
Set Number	=	All
Set User Codes	=	All
Exclude Base Claims	=	No
Solicited	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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BASIC DUPLICATE CLAIM REPORT
INSTITUTIONAL AND NON-INSTITUTIONAL
CLAIM & LINE ITEM LEVEL DATA

50 - Acme Claims Processing

ICN	USR CD	S ?	SET#	DUP FLG	RSN CODE	PTC DATE	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER TAX ID	PROV SUB-ID	AMT BILLED	AMT GOVT PAID	AMT ID RECOUP	AMT ACTUAL RECOUP
19940462508505			251	N	BASE	3/10/1994	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,175.00	$933.37	$0.00	$0.00
Li#	M Type	CPT-4	Provider Tax ID		Prov Sub ID		POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4				
4	C	99221					21	I1	7/20/1992	7/20/1992	$150.00	$90.70				
19940462508505			252	N	BASE	3/10/1994	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,175.00	$933.37	$0.00	$0.00
Li#	M Type	CPT-4	Provider Tax ID		Prov Sub ID		POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4				
3	E	99232					21	I1	7/21/1992	7/24/1992	$450.00	$385.20				
19940462508505			253	N	BASE	3/10/1994	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,175.00	$933.37	$0.00	$0.00
Li#	M Type	CPT-4	Provider Tax ID		Prov Sub ID		POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4				
1	N	43235					21	I2	7/22/1992	7/22/1992	$575.00	$327.00				
19940462508505			254	N	BASE	3/10/1994	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,175.00	$933.37	$0.00	$0.00
Li#	M Type	CPT-4	Provider Tax ID		Prov Sub ID		POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4				
2	N	45378					21	I2	7/27/1992	7/27/1992	$1,000.00	$441.60				

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**BASIC BY SET**
PRINTED REPORT TITLE:	Basic Duplicate Claim Report By Set Institutional and Non-Institutional Claim and Line Item Level Data
REPORT DESCRIPTION:	This report lists all of the claims loaded in the system grouped by set number. The report will show institutional and non-institutional claims. This report format will allow the user to select by Duplicate Flag values. The fields displayed on the report are: Owner FI; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Duplicate Flag Value; Reason Code; Processed-To-Completion Date; Responsible FI Number; Sponsor ID; Patient ID; Patient Name; Amount Billed; Amount Paid; Amount Identified For Recoupment; Amount Actually Recouped. For Non-Institutional claims, line item data will also be displayed. The line item fields displayed include: Line Item Number; Line Item Match Type; Procedure Code; Provider Tax ID; Provider Sub-ID; Place of Service; Type of Service; Care Begin Date; Care End Date; Line Item Amount Billed for the Procedure; and Amount Paid for the Procedure. The report identifies and prints all of the claims occurring in sets meeting the criteria selected on the report parameter screen.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator; Solicited Indicator; Exclude Base; PTC Date; Set Level User Defined Codes; Claim Level User Defined Codes; Responsible FI; and Region.
REPORT NOTES:	The data used by this report format is claim level and line item level data. If a non-institutional claim exists in more than one set, it will print for each set in which it exists. Each instance of these non-institutional claims existing in multiple sets will contain a different set number on the report.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Dupe Flag	=	All
Set Number	=	All
Set User Codes	=	All
Exclude Base Claims	=	No
Solicited	=	All
Claim User Codes	=	All
Enroll Codes	=	All

Date: 4/29/05
Page 1

BASIC DUPLICATE CLAIM REPORT BY SET
INSTITUTIONAL AND NON-INSTITUTIONAL
CLAIM & LINE ITEM LEVEL DATA

50 - Acme Claims Processing

SET#	ICN	USR CD	S ?	DUP FLG	RSN CODE	PTC DATE	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER TAX ID	PROV SUB-ID	AMT BILLED	AMT GOVT PAID	AMT ID RECOUP	AMT ACTUAL RECOUP
79862	19962044104011			Y		8/14/1996	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$625.00	$69.28	$0.00	$0.00

Li#	M Type	CPT-4	Provider Tax ID	Prov Sub ID	POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4
1	O	42100			11	O2	6/19/1996	6/19/19996	$510.00	$81.28

SET#	ICN	USR CD	S ?	DUP FLG	RSN CODE	PTC DATE	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER TAX ID	PROV SUB-ID	AMT BILLED	AMT GOVT PAID	AMT ID RECOUP	AMT ACTUAL RECOUP
79862	19962494100571			N	N103	11/05/1996	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$625.00	$335.19	$0.00	$0.00

Li#	M Type	CPT-4	Provider Tax ID	Prov Sub ID	POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4
1	O	42100			11	O7	6/19/1996	6/19/19996	$300.00	$254.03
2	O	42100			11	O2	6/19/1996	6/19/19996	$210.00	$81.28

99 - Inactive Contractor

SET#	ICN	USR CD	S ?	DUP FLG	RSN CODE	PTC DATE	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER TAX ID	PROV SUB-ID	AMT BILLED	AMT GOVT PAID	AMT ID RECOUP	AMT ACTUAL RECOUP
22221	19951000627827			N	BASE	4/24/1995	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$1,860.00	$1,075.28	$0.00	$0.00

Li#	M Type	CPT-4	Provider Tax ID	Prov Sub ID	POS	TOS	Care Begin Date	Care End	Amt. Billed CPT-4	Govt PD Amt CPT-4
1	N	99214			11	O1	2/28/1995	2/28/1995	$70.00	$53.45
2	N	93000			11	O1	2/28/1995	2/28/1995	$75.00	$31.32
3	N	93307			11	O1	2/28/1995	2/28/1995	$400.00	$255.77

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**INSTITUTIONAL**
PRINTED REPORT TITLE:	Institutional Claims
REPORT DESCRIPTION:	This report lists institutional claims grouped by current set status. This report lists institutional claims within their respective sets. The fields displayed on the report are: Owner FI; Institutional Indicator; Status Code; Set Number; ICN; Claim Level User Defined Code; Solicited Indicator; Dupe Flag Indicator; Processed to Completion Date; Responsible FI Number; Sponsor ID; Patient ID; Patient Name; Date of Birth; Provider Nbr; Provider Sub-ID; Amount Billed; Amount Allowed; and Government Paid Amount. The report identifies and prints all of the sets meeting the criteria selected on the report parameter screen. The report groups the claims in ascending set number order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Type (Claim Set Status, Adjustments, Set Owner Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator; Solicited Indicator; Exclude Base; PTC Date; Care Dates; Set Level User Defined Codes; Claim Level User Defined Codes; Responsible FI; Region; and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level data. The billed and net Government paid amounts are claim level dollar amounts.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All

Date: 4/29/05
Page 1

INSTITUTIONAL CLAIMS

50 - Acme Claims Processing

INSTITUTIONAL

Status Code :C

SET #	ICN	USR CD	S ?	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
6	19942624830562			N	9/22/1994	50	999999999	9999999990	SMITH,LESLIE,X	11/16/1982	55555555	0000	$6,080.00	$1,739.29	$1,739.29
6	19942694832217				9/28/1994	50	999999999	9999999990	SMITH,LESLIE,X	11/16/1982	55555555	0000	$4,425.00	$1,304.46	$1,304.46
23747	19941170620950			N	6/30/1994	50	999999999	9999999990	SMITH,LESLIE,X	7/22/1980	55555555	0001	$19,236.00	$19,236.00	$18,458.00
23747	19942000640016				7/21/1994	99	999999999	9999999990	SMITH,LESLIE,X	7/22/1980	55555555	0001	$12,868.30	$8,148.00	$7,259.90
													$42,609.30		$28,761.65
									Status Totals					$30,427.75	

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Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All

Date: 4/29/05
Page 2

INSTITUTIONAL CLAIMS

50 - Acme Claims Processing

INSTITUTIONAL

Status Code :V

SET #	ICN	USR CD	S ?	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
15	19941882424012			N	7/15/1994	50	999999999	9999999990	SMITH,LESLIE,X	1/06/1932	55555555	0000	$8,353.93	$431.50	$431.50
15	19941882424013				7/25/1994	50	999999999	9999999990	SMITH,LESLIE,X	1/06/1932	55555555	0000	$7,000.00	$350.00	$350.00
22	19933335170207			Y	7/15/1994	50	999999999	9999999990	SMITH,LESLIE,X	5/31/1972	55555555	0000	$2,763.05	$1,115.44	$1,090.44
22	19942575143500			N	7/25/1994	50	999999999	9999999990	SMITH,LESLIE,X	5/31/1972	55555555	0000	$2,936.87	$1,115.44	$1,087.54
									Status Totals				$21,053.85	$3,012.38	$2,959.48
									Contractor Totals				$63,663.15	$33,440.13	$31,721.13

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Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All

Date: 4/29/05
Page 3

INSTITUTIONAL CLAIMS

73 - HAL Systems Inc

INSTITUTIONAL

Status Code :O

SET #	ICN	USR CD	S ?	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
3461	19940474270059			N	3/04/1994	73	999999999	9999999990	SMITH,LESLIE,X	2/04/1994	55555555	0000	$28,859.00	$28,859.00	$28,803.20
3461	19940474270059			N	3/04/1994	73	999999999	9999999990	SMITH,LESLIE,X	2/04/1994	55555555	0000	$28,859.00	$28,859.00	$28,803.20
3461	19940474270059			N	3/04/1994	73	999999999	9999999990	SMITH,LESLIE,X	2/04/1994	55555555	0000	$28,859.00	$28,859.00	$28,803.20
									Status Totals				$89,539.40	$53,450.92	$53,395.12
									Contractor Totals				$89,539.40	$53,450.92	$53,395.12
									Report Totals				$153,202.55	$86,891.05	$85,116.25

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒NON-INSTITUTIONAL ⇒**BY CLAIM**
PRINTED REPORT TITLE:	Non-Institutional Claims
REPORT DESCRIPTION:	This report lists non-institutional claims grouped by current set status. This report lists non- institutional claims within their respective sets. The fields displayed on the report are: Owner FI; Region; Set Status Code; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Dupe Flag Indicator; Processed to Completion Date; Responsible FI; Sponsor ID; Patient ID; Patient Name; Date of Birth; Amount Billed; Amount Allowed; and Government Paid Amount. The report identifies and prints all of the sets meeting the criteria selected on the report parameter screen. The report groups the claims in ascending set number order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Type (Claim Set Status, Adjustments, Set Owner Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, Processed To Completion date, Care dates, Set Level User Defined Codes, Claim Level User Defined Codes, Responsible FI, Region, and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level data. The billed, paid and net Government paid amounts are claim level not line-item level dollar amounts.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Solicited	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set User Codes	=	All
Claim User Codes	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All

Date: 4/29/05
Page 1

NON-INSTITUTIONAL CLAIMS

50 - Acme Claims Processing

Undetermined Region

Status Code: O

ICN	USR CD	S ?	SET #	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
19963123242029			76070		11/15/1996	50	999999999	9999999990	SMITH,LESLIE,X	11/01/1932	$2,700.00	$1,005.60	$754.20
19960814823188			76527	N	8/02/1996	50	999999999	9999999990	SMITH,LESLIE,X	9/23/1937	$681.00	$177.34	$165.34
19963024810904			76527		11/04/1996	50	999999999	9999999990	SMITH,LESLIE,X	9/23/1937	$681.00	$177.34	$165.34
Status Totals											$4,062.00	$1,360.28	$1, 084.88

Status Code: V

ICN	USR CD	S ?	SET #	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
19941925400374	B4		122	N	7/25/1994	50	999999999	9999999990	SMITH,LESLIE,X	9/28/1899	$455.00	$307.10	$230.32

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Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Solicited	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set User Codes	=	All
Claim User Codes	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All

Date: 4/29/05
Page 2

NON-INSTITUTIONAL CLAIMS

50 - Acme Claims Processing

Undetermined Region

Status Code: V

ICN	USR CD	S ?	SET #	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
19942065400200	B4		122		8/10/1994	50	999999999	9999999990	SMITH,LESLIE,X	9/28/1899	$455.00	$307.10	$230.32
										Status Totals	$910.00	$614.20	$460.64
										Region Totals	$4,972.00	$1,974.48	$1,545.52
										Contractor Totals	$4,972.00	$1,974.48	$1,545.52

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Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Solicited	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set User Codes	=	All
Claim User Codes	=	All
Exclude Base Claims	=	No
Enroll Codes	=	All

Date: 4/29/05
Page 3

NON-INSTITUTIONAL CLAIMS

99 - Inactive Contractor

Inactive-Area 20

Status Code: O

ICN	USR CD	S ?	SET #	DUP FLG	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	DOB	AMT BILLED	AMT ALLOWED	AMT GOVT PAID
19951000627827			22221	N	4/24/1995	99	999999999	9999999990	SMITH,LESLIE,X	9/20/1948	$1,860.00	$1,090.56	$1,075.56
19951240640035			22221		05/11/1995	99	999999999	9999999990	SMITH,LESLIE,X	9/20/1948	$400.00	$229.63	$229.63
19951240640036			22221		05/11/1995	99	999999999	9999999990	SMITH,LESLIE,X	9/20/1948	$1,245.00	$721.78	$721.78

Status Totals	$3,505.00	$2,041.97	$2,026.97
Region Totals	$3,505.00	$2,041.97	$2,026.97
Contractor Totals	$3,505.00	$2,041.97	$2,026.97
Grand Totals	$8,477.00	$4,016.45	$3,572.49

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒NON-INSTITUTIONAL ⇒**BY LINE ITEM**
PRINTED REPORT TITLE:	Non-Institutional Claims By Line Item
REPORT DESCRIPTION:	This report lists non-institutional claims grouped by current set status. This report displays line-item data. The fields displayed on the report are: Owner FI; Region; Set Status Code; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider Number; Provider Sub-ID; Line Item Number; CPT-4 Code; Care Begin Date; Care End Date; and Amount Paid CPT-4 Code. The report identifies and prints all of the sets meeting the criteria selected on the report parameter screen. The report groups the claims in ascending set number order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Type (Claim Set Status, Adjustments, Set Owner Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, PTC Date; Care Dates; Set Level User Defined Codes; Claim Level User Defined Codes; Responsible FI; Region; and Enrollment Codes.
REPORT NOTES:	The data used by this report format is line item level data. The paid amounts are line item level dollar amounts.

Status Code	=	All
Owner Type	=	All
Adjust Type	=	All
Match Type	=	All
Dupe Flag	=	All
Solicited	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Exclude Base Claims	=	No
Set User Codes	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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NON-INSTITUTIONAL CLAIMS BY LINE ITEM

50 - Acme Claims Processing

Undetermined Region

Status Code: O

ICN	USR CD	S?	SET #	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	LI	CPT-4 CODE	CARE BEGIN	CARE END	AMT GOVT PD CPT-4 CODE
19962044104011			79862	50	999999999	9999999990	SMITH,LESLIE,X			1	42100	06/19/1996	06/19/1996	$81.28
19962494100571			79862	50	999999999	9999999990	SMITH,LESLIE,X			1	42100	06/19/1996	06/19/1996	$254.03
19962494100571			79862	50	999999999	9999999990	SMITH,LESLIE,X			2	42100	06/19/1996	06/19/1996	$81.28
											Status Total			$416.59

Status Code: V

ICN	USR CD	S?	SET #	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	LI	CPT-4 CODE	CARE BEGIN	CARE END	AMT GOVT PD CPT-4 CODE
19941925400374	B4		122	50	999999999	9999999990	SMITH,LESLIE,X			2	99231	04/22/1994	04/22/1994	$125.08
19942065400200	B4		122	50	999999999	9999999990	SMITH,LESLIE,X			3	99231	04/22/1994	04/22/1994	$254.03
											Status Total			$250.16
											Region Total			$666.75
											Contractor Total			$666.75

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Status Code	=	All
Owner Type	=	All
Adjust Type	=	All
Match Type	=	All
Dupe Flag	=	All
Solicited	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Exclude Base Claims	=	No
Set User Codes	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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NON-INSTITUTIONAL CLAIMS BY LINE ITEM

99 - Inactive Contractor

Inactive-Area 20

Status Code: O

ICN	USR CD	S?	SET #	RESP FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	LI	CPT-4 CODE	CARE BEGIN	CARE END	AMT GOVT PD CPT-4 CODE
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			1	99214	02/28/1995	02/28/1995	$53.45
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			2	93000	02/28/1995	02/28/1995	$31.32
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			3	93307	02/28/1995	02/28/1995	$255.77
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			4	93320	02/28/1995	02/28/1995	$134.97

Status Total	$475.51
Region Total	$475.51
Contractor Total	$475.51
Grand Total	$1,142.26

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒RISK ⇒**RISK BASIC**
PRINTED REPORT TITLE:	Risk Report By ICN
REPORT DESCRIPTION:	This report provides a listing of claims based on the Risk Indicator values selected by the user. The Risk Indicator identifies the claim as either financially underwritten or non-financially underwritten. The claims are grouped by claim number. The report can show both institutional and non- institutional claims. The fields displayed on the report are: Owner FI; Region; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Duplicate Flag Value; Risk Indicator; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider Number; Provider Sub-ID; Amount Billed; Amount Paid; Government Paid Amount; Amount Identified For Recoupment; Amount Actually Recouped; Adjustment Amount.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, PTC Dates, Care Dates, Set Level User Defined Codes, Claim Level User Defined Codes, Responsible FI, Region, Risk Indicator, and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level data. For non-institutional claims, the billed, paid and net Government paid amounts are claim level not line-item level dollar amounts.

Status Code	=	All
Owner Type	=	All
Claim Type	=	All
Adjust Type	=	All
Match Type	=	All
Exclude Base Claims	=	No
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Enroll Codes	=	All
Set Number	=	All
Dupe Flag	=	All
Solicited	=	All
Claim User Codes	=	All
Set User Codes	=	All
Risk Ind	=	All

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RISK REPORT BY ICN

50 - Acme Claims Processing

Undetermined Region

ICN	USR CD	S ?	SET #	DUP FLG	RSK IND	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	GOV PAID	ID RECOUP	ACTUAL RECOUP	ADJ AMOUNT
19933335170207			22	Y	N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,763.05	$1,115.44	$1,090.44	$1,000.00	$1,000.00	$1,115.44
19963024810904			76527		A	50	999999999	9999999990	SMITH,LESLIE,X	555555555	A004	$681.00	$177.34	$165.34	$0.00	$0.00	$0.00
19963123242029			76070		N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	A001	$2,700.00	$1,005.60	$754.20	$0.00	$0.00	$0.00
19963240508876			77347		A	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$8,617.99	$3,478.39	$3,442.12	$0.00	$0.00	$0.00
									Region Totals				$5,776.77		$1,000.00		$1,115.44
												$14,762.04		$5,452.10		$1,000.00	
									Contractor Totals				$5,776.77		$1,000.00		$1,115.44
												$14,762.04		$5,452.10		$1,000.00	

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Status Code	=	All
Owner Type	=	All
Claim Type	=	All
Adjust Type	=	All
Match Type	=	All
Exclude Base Claims	=	No
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Enroll Codes	=	All
Set Number	=	All
Dupe Flag	=	All
Solicited	=	All
Claim User Codes	=	All
Set User Codes	=	All
Risk Ind	=	All

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RISK REPORT BY ICN

73 - HAL Systems Inc

Area 73A

ICN	USR CD	S ?	SET #	DUP FLG	RSK IND	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	GOV PAID	ID RECOUP	ACTUAL RECOUP	ADJ AMOUNT
19940474270059			3461	N	N	73	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$28,859.00	$28,859.00	$28,803.20	$0.00	$0.00	$0.00
19942844200023			3461		N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$30,340.20	$12,295.96	$12,295.96	$0.00	$0.00	$0.00
19950334208001			3461		N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$30,340.20	$12,295.96	$12,295.96	$0.00	$0.00	$0.00
									Region Totals				$53,450.92		$0.00		$0.00
												$89,539.40		$53,395.12		$0.00	
									Contractor Totals				$53,450.92		$0.00		$0.00
												$89,539.40		$53,395.12		$0.00	
									Report Totals				$59,227.69		$1,000.00		$1,115.44
												$104,301.44		$58,847.22		$1,000.00	

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒RISK ⇒**RISK BY SET**
PRINTED REPORT TITLE:	Risk Report By Set Number
REPORT DESCRIPTION:	This report provides a listing of claims based on the Risk Indicator values selected by the user. The Risk Indicator identifies the claim as either financially underwritten or non-financially underwritten. The claims are grouped by set number. The report can show both institutional and non-institutional claims. The fields displayed on the report are: Owner FI; Region; Set Number; ICN; Claim Level User Defined Code; Solicited Indicator; Duplicate Flag Value; Risk Indicator; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider Number; Provider Sub-ID; Amount Billed; Amount Allowed; Government Paid Amount; Amount Identified For Recoupment; Amount Actually Recouped; Adjustment Amount.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, PTC Dates, Care Dates, Set Level User Defined Codes, Claim Level User Defined Codes, Responsible FI, Region, Risk Indicator, and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level data. For non-institutional claims, the billed, paid and net Government paid amounts are claim level not line-item level dollar amounts.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Exclude Base Claims	=	No
Claim Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Resp Region	=	All
Owner Region	=	All
Resp FI	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Risk Ind	=	All
Enroll Codes	=	All

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RISK REPORT BY SET NUMBER

50 - Acme Claims Processing

Undetermined Region

SET #	ICN	USR CD	S ?	DUP FLG	RSK IND	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	GOV PAID	ID RECOUP	ACTUAL RECOUP	ADJ AMOUNT
22	19933335170207			Y	N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$2,763.05	$1,115.44	$1,090.44	$1,000.00	$1,000.00	$1,115.44
39	19942715160390				N	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0001	$825.86	$226.30	$226.30	$0.00	$0.00	$0.00
									Region Totals				$1,341.74		$1,000.00		$1,115.44
												$3,588.91		$1,316.74		$1,000.00	
									Contractor Totals				$1,341.74		$1,000.00		$1,115.44
												$3,588.91		$1,316.74		$1,000.00	

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Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Exclude Base Claims	=	No
Claim Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Resp Region	=	All
Owner Region	=	All
Resp FI	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Risk Ind	=	All
Enroll Codes	=	All

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RISK REPORT BY SET NUMBER

99 - Inactive Contractor

Inactive-Area 20

SET #	ICN	USR CD	S ?	DUP FLG	RSK IND	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	GOV PAID	ID RECOUP	ACTUAL RECOUP	ADJ AMOUNT
22221	19951000627827			N	A	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	$1,860.00	$1,090.56	$1,075.56	$0.00	$0.00	$0.00
									Region Totals				$1,090.56		$0.00		$0.00
												$1,860.00		$1,075.56		$0.00	

Inactive-Area 30

SET #	ICN	USR CD	S ?	DUP FLG	RSK IND	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	AMT BILLED	AMT ALLOWED	GOV PAID	ID RECOUP	ACTUAL RECOUP	ADJ AMOUNT
55	19932980656126			N	A	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0002	$95,435.32	$201,551.67	$226.30	$0.00	$0.00	$0.00
									Region Totals				$201,551.67		$0.00		$0.00
												$95,435.32		$226.30		$0.00	
									Contractor Totals				$202,642.22		$0.00		$0.00
												$97,295.32		$1,301.85		$0.00	
									Report Totals				$203,983.96		$1,000.00		$1,115.44
												$100,884.23		$2,618.59		$1,000.00	

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒RISK ⇒**RISK SUMMARY**
PRINTED REPORT TITLE:	Risk Summary Report
REPORT DESCRIPTION:	This report summarizes by Region the amounts billed, paid and Government paid amounts, as well as the amounts identified for recoupment, amounts actually recouped, and adjustment amounts. The fields displayed on the report are: Owner FI; Region; Amount Billed; Amount Allowed; Government Paid Amount; Amount Identified for Recoupment; Amount Actually Recouped; and Adjustment Amount.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, PTC Dates, Care Dates, Set Level User Defined Codes, Claim Level User Defined Codes, Responsible FI, Region, Risk Indicator, and Enrollment Code.
REPORT NOTES:	The data used by this report format is claim level data. For non-institutional claims, the billed, paid and net Government paid amounts are claim level not line-item level dollar amounts.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Exclude Base Claims	=	No
Claim Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Risk Ind	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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RISK SUMMARY REPORT

55 - East West Claims						
	Amt Billed	Amt Allowed	Govt Paid	ID Recoup	Actual Recoup	Adj Amt
Area 55	$12,120.92	$6,207.16	$6,157.16	$0.00	$0.00	$0.00
Contractor Totals	$12,120.92	$6,207.16	$6,157.16	$0.00	$0.00	$0.00

99 - Inactive Contractor						
	Amt Billed	Amt Allowed	Govt Paid	ID Recoup	Actual Recoup	Adj Amt
Inactive-Area 20	$3,505.00	$2,041.97	$2,026.97	$0.00	$0.00	$0.00
Inactive-Area 30	$721,760.08	$602,283.44	$602,283.44	$0.00	$0.00	$0.00
Contractor Totals	$725,265.08	$604,325.41	$604,310.41	$0.00	$0.00	$0.00
Grand Totals	$737,386.00	$610,532.57	$610,467.57	$0.00	$0.00	$0.00

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒PROVIDER ⇒**CLAIM COUNTS**
PRINTED REPORT TITLE:	Provider Claim Count Report Grouped By Provider Number and Sub-ID
REPORT DESCRIPTION:	This report provides a total count by Provider Tax ID and Provider Sub-ID of all claims associated with selected providers. The fields displayed are: Provider Tax ID; Provider Sub-ID; and Total Number of Claims.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Last (update) Date, Set Range (Claim Set Status; Adjustments, Set Owner Type; Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, PTC Dates, Responsible FI, Region, Provider Tax IDs, and Enrollment Code.
REPORT NOTES:	The data used by this report format is claim level data.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
SetNumFrame		
Dupe Flag	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Provider Tax Codes	=	All
Enroll Codes	=	All

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PROVIDER CLAIM COUNT REPORT
GROUPED BY PROVIDER NUMBER AND SUB ID

Tax ID : 555555555		**#Claims**
Sub ID: 0000		
	Sub Id Totals:	81
Sub ID: 0001		
	Sub Id Totals:	14
Sub ID: 0002		
	Sub Id Totals:	6
Sub ID: 0003		
	Sub Id Totals:	4
Sub ID: 0004		
	Sub Id Totals:	2
Sub ID: 0005		
	Sub Id Totals:	2
Sub ID: 0008		
	Sub Id Totals:	2
Sub ID:		
	Sub Id Totals:	7
	Tax Id Totals:	111

Tax ID :		**#Claims**
Sub ID:		
	Sub Id Totals:	107
	Tax Id Totals:	94

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒PROVIDER ⇒**CLAIM DETAIL**
PRINTED REPORT TITLE:	Provider Claim Detail Report Grouped By Provider Number And Sub ID
REPORT DESCRIPTION:	This report provides a listing of claims grouped by Provider Tax ID and Sub-ID, associated with selected providers. The fields displayed are: Provider Tax ID; Provider Sub-ID; ICN; Time Stamp; Claim Level User Defined Code; Solicited Indicator; Set #; Duplicate Flag Indicator; Sponsor ID; Patient ID; Patient Name; Amount Govt Paid; PTC Date; Responsible FI; Total Number of Claims and Total Paid Amounts by Provider Sub-ID; and Total number of Claims and Total Paid Amounts by Provider Tax ID.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Last (update) Dates (Owner Type, Claim Set Status; Adjustments, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, PTC Dates, Responsible FI, Region, Set Level User Defined Codes, Claim Level User Defined Codes, and Provider Tax IDs, and Enrollment Codes.
REPORT NOTES:	The data used by this report format is claim level data.

Status Code	=	All
Adjust Type	=	All
Claim Type	=	All
Owner Type	=	All
Match Type	=	All
Dupe Flag	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Provider Tax Codes	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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PROVIDER CLAIM DETAIL REPORT
GROUPED BY PROVIDER NUMBER AND SUB ID

Prov Tax ID 555555555

Sub ID 0008

ICN	TIME	USER CODE	S ?	SET#	DUP FLG	SPON ID	PATIENT ID	PATIENT NAME	AMT GOVT PAID	PTC DATE	RESP FI
19941300621078	000000			63		999999999	9999999990	SMITH,LESLIE,X	$21,915.94	6/30/1994	50
19941360665510	000000			63	N	999999999	9999999990	SMITH,LESLIE,X	$21,915.94	6/10/1994	99
								#CLAIMS	TOTAL AMT PAID		
						SUB ID TOTALS		2	$43,831.85		

Sub ID

19940424543435	999999			35		999999999	9999999990	SMITH,LESLIE,X	$42,877.69	10/14/1994	50
19940424543435	999999			15		999999999	9999999990	SMITH,LESLIE,X	$8,353.93	10/14/1994	50
19940424543435	999999			26697		999999999	9999999990	SMITH,LESLIE,X	$4,322.84	7/18/1995	50
19940424543435	999999			74334		999999999	9999999990	SMITH,LESLIE,X	$2,042.84	11/12/1996	50
19940424543435	999999			66804		999999999	9999999990	SMITH,LESLIE,X	$5,721.12	8/28/1996	50
19940424543435	999999			71410		999999999	9999999990	SMITH,LESLIE,X	$1,658.54	10/16/1996	50
19940424543435	999999			74409		999999999	9999999990	SMITH,LESLIE,X	$1,045.74	11/08/1996	50
								#CLAIMS	TOTAL AMT PAID		
						SUB ID TOTALS		7	$66,022.70		
						TAX ID TOTALS		9	$109,854.55		

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒PROVIDER ⇒**CPT-4**
PRINTED REPORT TITLE:	Provider CPT-4 Report Grouped By Provider Tax ID and Sub ID (CPT-4 Claim Level Match Types Only)
REPORT DESCRIPTION:	This report shows line items which appear on non-institutional **claims** which carry a CPT-4 match type ('C') at the claim level (see REPORT NOTES below). Due to the way the Duplicate Claims System assigns match types to claims and sets, this report must be used very carefully. Users have the option in this report of selecting actual duplicate claims only. The user may think that the report is showing only actual duplicate line items identified by the CPT-4 match type criteria. In fact, the report is showing the line-items of actual ('Y') non-institutional duplicate claims which have been assigned a match type of CPT-4 (see REPORT NOTES below). As a result, line items identified using the OTHER match type may appear on this report along with the line items identified under the CPT-4 criteria which caused the claim to be assigned the match type of CPT-4. This report will not show any line items identified under the EXACT or NEAR match criteria since line items identified using the EXACT and NEAR match would force the claim(s) to be assigned a higher level match type than CPT- 4. This report looks for only those actual duplicate non-institutional **claims** with a match type of CPT- 4 and then lists the line items on those claims. This report can be used by Program Integrity staff to obtain a listing of the claims carrying a match type of CPT-4 and their associated line items. Using the Provider Claim Count Report, users can identify the provider numbers associated with high volumes of non-institutional claims involving line items whose last two digits of the procedure code have been changed. Then using the Provider CPT-4 Report and entering those provider numbers identified, the user can generate a listing of the non- institutional claims with line item details associated with those provider numbers. The fields displayed on this report are: ICN; Time Stamp; Claim Level User Defined Code; Solicited Indicator; Set #; Duplicate Flag Indicator; Sponsor ID; Patient ID; Patient Name; Line Item Match Type; Line Item Number; CPT-4 Code; Amount Paid CPT-4; PTC Date; and Responsible FI. The report is grouped by Provider Number and Sub-ID and provides sub-totals for each provider Sub-ID and grand totals for each provider Tax-ID. The sub-totals and grand totals sum the number of line items and the total Paid dollars.

REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Match Type, Claim Type, Last Dates, Set Range (Set Owner Type, Claim Set Status, Adjustments, Date Type, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, PTC Dates, Responsible FI, Region, Set Level User Defined Codes, Claim Level User Defined Codes, and Provider Tax ID. Users may customize the report by selecting: All claims or actual duplicate claims only (to be counted as an actual duplicate claim, it must have a "Y" Duplicate Flag value and be in a PENDING, VALIDATE, or CLOSED set); status (All, Open, Pending, Closed, Validate); only sets that have adjustments associated with them; multi-FI sets, single FI sets, or both; **set** match type (All, Exact, Near, Date Overlap, CPT-4, Other); a single processed-to-completion date or a range of processed-to- completion dates; a single load date or a range of load dates; one or all FIs; one, several or all regions within selected FIs. Users may also select one, several or all Provider Tax ID numbers to be included in the report.
REPORT NOTES:	Match types are applied at the line-item, claim, and set levels based on a hierarchy. The most stringent match type applicable is assigned at each level. The hierarchy for institutional claims is as follows: Exact, Near, Date Overlap and Other. For non-institutional claims, the hierarchy is as follows: Exact, Near, CPT-4, and Other. For both claim types, Exact Match criteria is the most stringent with Near Match next. Other Match is the least stringent. When the Duplicate Claims System identifies non- institutional potential duplicates, it is doing so at a **line item** level. When a line item is identified as a potential duplicate, the system labels the **line item** with the Match Type used to identify it as a potential duplicate. If a non-institutional **claim** contains line items identified as potential duplicates using more than one match type criteria (one line item identified under Exact Match criteria and another line item under CPT-4 criteria), the system uses the match type hierarchy and labels the **claim** with the most stringent match type appearing on the line items. If the **set** contains **claims** labeled with different match types (one claim labeled 'Near' and another labeled 'CPT-4'), the system uses the match type hierarchy and labels the **set** with the most stringent match type appearing on the claims.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Dupe Flag	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Provider Tax Codes	=	All
Set User Codes	=	All
Solicited	=	All
Claim User Codes	=	All

Date: 4/29/05
Page 1

PROVIDER CPT-4 REPORT
GROUPED BY PROVIDER TAX ID AND SUB ID
(CPT-4 CLAIM LEVEL MATCH TYPES ONLY)

ICN	TIME	USER CODE	S ?	SET#	DUP FLG	PATIENT ID	PATIENT NAME	LI Match	LINE Item #	CPT-4 Code	AMT PAID CPT-4 CODE	PTC DATE	RESP FI
Tax ID:													
Sub ID:													
19941362501086	000000			226		9999999990	SMITH,LESLIE,X	C	1	90812	$90.00	10/13/1994	50
19942692501409	000000			226	N	9999999990	SMITH,LESLIE,X	C	1	90844	$80.11	10/09/1994	50
19941362501086	000000			227		9999999990	SMITH,LESLIE,X	C	2	90812	$90.00	10/13/1994	50
19942692501409	000000			227	N	9999999990	SMITH,LESLIE,X	C	2	90844	$80.11	10/09/1994	50
19940462508505	000000			251	N	9999999990	SMITH,LESLIE,X	C	4	99221	$90.70	3/10/1994	50
19942022508010	000000			251		9999999990	SMITH,LESLIE,X	C	4	99291	$150.00	8/04/1994	50
19941640617670	000000			4899	N	9999999990	SMITH,LESLIE,X	C	1	98330	$366.80	8/04/1994	50
19941640617670	000000			4899	N	9999999990	SMITH,LESLIE,X	C	2	98335	$133.00	8/04/1994	50
19942340621783	000000			4899		9999999990	SMITH,LESLIE,X	C	1	98310	$183.50	11/14/1994	99
19942340621783	000000			4899		9999999990	SMITH,LESLIE,X	C	2	98315	$133.00	11/14/1994	99

	#LINE ITEMS	TOTAL AMT PAID
SUB ID TOTALS	10	$1,397.22
TAX ID TOTALS	10	$1,397.22

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒REASON CODE EXPLANATION ⇒ **INDIVIDUAL CLAIMS**
PRINTED REPORT TITLE:	Reason Code Explanation Report Individual Claims
REPORT DESCRIPTION:	This report provides a listing of the explanations associated with reason codes on individual claims. The Duplicate Claims System requires that an explanation be entered when certain reason codes are used to describe why a claim is or is not a duplicate claim. This report prints the reason code explanation associated with a claim. Individual claim data is grouped within their respective sets. The fields displayed on this report are: Owner FI; Region; Set Number; Set Status; Current Load Date; ICN; Time Stamp; Responsible FI; PTC Date; Dupe Flag Indicator; Reason Code; and Reason Code Explanation.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Responsible FI, Region, Reason Codes, and Base Claims.
REPORT NOTES:	The data used by this report format is claim level data.

Status Code	=	All
Owner Type	=	All
Claim Type	=	All
Adjust Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Include Base?	=	N
Set Number	=	All
Reason Codes	=	All

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REASON CODE EXPLANATION REPORT
INDIVIDUAL CLAIMS

50 - Acme Claims Processing

Undetermined Region

SET #	STATUS	CURRENT LOAD DATE	ICN	TIME	S?	RESP FI	PTC DATE	DUP FLG	RSN CODE	REASON CODE EXPLANATION
35	O	12/16/1996	19940424543435	999999		50	10/14/1994	Y	D900	This is to test the Reason Code Explanation

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**REASON CODE EXPLANATION ⇒ENTIRE SET**
PRINTED REPORT TITLE:	Reason Code Explanation Report Entire Set
REPORT DESCRIPTION:	This report provides a listing of the explanations associated with reason codes by set number. The Duplicate Claims System requires that an explanation be entered when certain reason codes are used to describe why a claim is or is not a duplicate claim. This report prints the reason code explanations associated with the claims in a set. Individual claim data is grouped within their respective sets. The fields displayed on this report are: Owner FI; Region; Set Number; Set Status; Current Load Date; ICN; Time Stamp; Responsible FI; PTC Date; Dupe Flag Indicator; Reason Code; and Reason Code Explanation.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Responsible FI, Region, Reason Codes, and PTC Date.
REPORT NOTES:	The data used by this report format is claim level data.

Status Code	=	All
Owner Type	=	All
Claim Type	=	All
Adjust Type	=	All
Match Type	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Reason Codes	=	All
Set Number	=	All

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REASON CODE EXPLANATION REPORT
ENTIRE SET

50 - Acme Claims Processing

Undetermined Region

SET #	STATUS	CURRENT LOAD DATE
35	O	12/16/1996

ICN	TIME	S?	RESP FI	PTC DATE	DUPE FLAG	RSN CODE	REASON CODE
19940424543435	999999		50	10/14/1994	Y	D900	This is to test the Reason Code Explanation

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**ADJUSTMENTS**
PRINTED REPORT TITLE:	Claims With Associated Adjustments
REPORT DESCRIPTION:	This report provides a listing of claims, grouped in their respective sets, with any associated adjustment claims which have been submitted. Only sets which contain one or more claims that have associated adjustments will be listed. The fields displayed on the report are: Owner FI; Region; Set Number; ICN; Time Stamp; Dupe Flag Indicator; Reason Code; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider ID; Provider Sub-ID; Claim Level Paid; Line Item Number; Line Item Paid Amount; Adjustment Flag; Adjustment Line Item; and Adjustment Paid Amount.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Adjustments (Claim Set Status, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus PTC Dates, Responsible FI, Region, Claim Level User Defined Codes.
REPORT NOTES:	The data used by this report format is claim and line item level data.

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CLAIMS WITH ASSOCIATED ADJUSTMENTS

Status Code	=	All
SetAdjustFrame		
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Claim User Codes	=	All

50 - Acme Claims Processing

SET #	TED Icn	TED Time	DUP ?	RSN Code	Resp FI	Spon ID	Patient ID	Patient Name	Prov ID	Prov Sub Id	Government Paid Amt	Line Item	Govt PD Amt CPT4
15	19941882424012	000000	N	BASE	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	431.50	0	0.00
									Adjust Flag	Adjust Line Item		Adjust Govt Paid Amount	
									N	0		-431.50	
									N	0		328.17	
15	19941882424012	000000			50	999999999	9999999990	SMITH,LESLIE,X	555555555		8353.00	0	0.00
									Adjust Flag	Adjust Line Item		Adjust Govt Paid Amount	
										0		328.17	
15	19941882424013	000000			50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	350.00	0	0.00
22	19933335170207	000000	Y	D203	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	1090.44	0	0.00
									Adjust Flag	Adjust Line Item		Adjust Govt Paid Amount	
									Y	0		-1115.44	
22	19942575143500	000000	N	BASE	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	1087.54	0	0.00
									Adjust Flag	Adjust Line Item		Adjust Govt Paid Amount	
										0		0.00	
35	19940424543435	000000	N	BASE	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	8574.15	0	0.00
									Adjust Flag	Adjust Line Item		Adjust Govt Paid Amount	
										0		-49102.03	
										0		-1005.40	

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIMS ⇒WORK SHEETS ⇒**INSTITUTIONAL**
PRINTED REPORT TITLE:	Institutional Claims Worksheet
REPORT DESCRIPTION:	This report resembles the paper duplicate claims reports provided to contractors in the past. This report lists institutional claim sets in OPEN status and provides space for entering by hand: 1) a "Y" or an "N" to indicate if the claim has been determined to be a duplicate or not; 2) a reason code for why the claim is or is not a duplicate; and 3) a recoupment or refund amount. This report provides the contractor with the ability to distribute the claim sets requiring research and duplicate determinations among several personnel. Once completed, these reports can be returned to the system operator for data entry. This report is limited to only institutional claims. The fields displayed on the report are: Owner FI; Region; ICN; Set Level User Defined Code; Solicited Indicator; Set Number; PTC Date; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider Nbr; Provider Sub-ID; Diagnosis; DRG; Amount Billed; Amount Allowed; Government Paid Amount; Dupe Flag?; Reason Code; ID Recoupment Amount. The report identifies and prints all of the sets meeting the criteria selected on the report parameter screen. The report groups the claims in ascending set number order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status, Claims (Claim Set Status, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus PTC Dates; Adjustments; Care Dates; Solicited Flag; Responsible FI; and Region.
REPORT NOTES:	The data used by this report format is claim level data.

Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Solicited	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All

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INSTITUTIONAL CLAIMS WORKSHEET

50 - Acme Claims Processing

Undetermined Region

ICN	USR CD	S ?	SET #	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	DIAG	DRG	AMT BILLED	AMT ALLOWED	AMT GOVT PAID	DUPE? (Y/N)	RSN CD	RECOUP/ RFND AMT
19962924725072			77425	10/17/96	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	4240	104	$57,297.50	$24,076.93	$24,076.93	------	------	------
19962924725072			77425	11/26/96	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	4240	104	$60,264.50	$24,320.22	$24,184.42	------	------	------

55 - East West Claims

Area 55

ICN	USR CD	S ?	SET #	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	DIAG	DRG	AMT BILLED	AMT ALLOWED	AMT GOVT PAID	DUPE? (Y/N)	RSN CD	RECOUP/ RFND AMT
19943551605817			10697	1/26/95	55	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	8442	222	$6,060.46	$3,103.58	$3,078.58	------	------	------
19950241642021			10697	1/27/95	50	999999999	9999999990	SMITH,LESLIE,X	555555555	0000	8442	222	$6,060.46	$3,103.58	$3,078.58	------	------	------

99 - Inactive Contractor

Inactive-Area 30

ICN	USR CD	S ?	SET #	PTC DATE	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	DIAG	DRG	AMT BILLED	AMT ALLOWED	AMT GOVT PAID	DUPE? (Y/N)	RSN CD	RECOUP/ RFND AMT
19932980656126			55	1/11/94	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0002	7470	000	$95,435.32	$201,551.67	$201,551.67	------	------	------
19942280665422			55	9/7/94	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0002	7470	000	$313,162.38	$301,141.72	$301,141.72	------	------	------
19942490640195			55	9/12/94	99	999999999	9999999990	SMITH,LESLIE,X	555555555	0002	7470	000	$313,162.38	$99,590.05	$99,590.05	------	------	------

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIMS ⇒WORKSHEETS ⇒**NON-INSTITUTIONAL**
PRINTED REPORT TITLE:	Non-Institutional Claims Worksheet
REPORT DESCRIPTION:	This report resembles the paper duplicate claims reports provided to contractors in the past. This report lists the sets of non-institutional line items in OPEN status and provides space for entering by hand: 1) a "Y" or an "N" to indicate if the claim has been determined to be a duplicate or not; 2) a reason code for why the claim is or is not a duplicate; and 3) a recoupment or refund amount. This report provides the contractor with the ability to distribute the claim sets requiring research and duplicate determinations among several personnel. Once completed, these reports can be returned to the system operator for data entry. This report is limited to only non-institutional claims. The fields displayed on the report are: Owner FI; Region; ICN; Claim Level User Defined Code; Solicited Indicator; Set Number; Responsible FI; Sponsor ID; Patient ID; Patient Name; Provider Number; Provider Sub-ID; Diagnosis; Line Item Number; CPT-4 Code; Line Item Amount Billed; Line Item Paid Amount; "Dupe? (Y/N)"; Reason Code; and Identified Recoupment or Refund Amount. The report identifies and prints all of the sets meeting the criteria selected on the report parameter screen. The report groups the claims in ascending set number order.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Status, Claim Type (Adjustments, Set Owner Type, Match Type, Date Type, Set Range, FI, Region) plus PTC Dates, Care Dates, Responsible FI, and Region.
REPORT NOTES:	The data used by this report format is line item level data.

Adjust Type = All
Owner Type = All
Match Type = All
Solicited = All
Set Number = All
Owner FI = All
Owner Region = All
Resp FI = All
Resp Region = All

Date: 5/2/05
Page 1

NON-INSTITUTIONAL CLAIMS WORKSHEET

50 - Acme Claims Processing

Undetermined Region

ICN	USR CD	S ?	SET #	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	DIAG	LI	CPT-4 CODE	AMT BILLED CPT-4 CD	GOVT PD CPT-4 CD	DUPE? (Y/N)	RSN CD	RECOUP/ RFND AMT
19953624101154			79860	50	999999999	9999999990	SMITH,LESLIE,X			78906	1	99214	$78.60		------	------	------
19953624101154			79860	50	999999999	9999999990	SMITH,LESLIE,X			78906	2	74000	$14.20		------	------	------
19962044104011			79862	50	999999999	9999999990	SMITH,LESLIE,X			5269	1	42100	$510.00	$81.28	------	------	------
19962494100571			79862	50	999999999	9999999990	SMITH,LESLIE,X			5269	1	42100	$300.00	$254.03	------	------	------
19962494100571			79862	50	999999999	9999999990	SMITH,LESLIE,X			5269	2	42100	$210.00	$81.28	------	------	------

99 - Inactive Contractor

Inactive-Area 20

ICN	USR CD	S ?	SET #	RS FI	SPON ID	PATIENT ID	PATIENT NAME	PROVIDER NUMBER	PROV SUB-ID	DIAG	LI	CPT-4 CODE	AMT BILLED CPT-4 CD	GOVT PD CPT-4 CD	DUPE? (Y/N)	RSN CD	RECOUP/ RFND AMT
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			42490	1	99214	$70.00	$53.45	------	------	------
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			42490	2	93000	$75.00	$31.32	------	------	------
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			42490	3	93307	$400.00	$255.77	------	------	------
19951000627827			22221	99	999999999	9999999990	SMITH,LESLIE,X			42490	4	93320	$200.00	$134.97	------	------	------

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REPORT CATEGORY:	Claim Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒CLAIM REPORTS ⇒**CLAIM LEVEL USER CODES**
PRINTED REPORT TITLE:	Claim Level User Defined Field Definitions
REPORT DESCRIPTION:	This report displays the Owner FI; Contract Number; the Claim Level User Defined Codes; their definitions, and whether they are active or inactive.
REPORT PARAMETER OPTIONS:	Users may not customize this report.
REPORT NOTES:	The data used by this report format is claim level data.

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CLAIM LEVEL USER DEFINED FIELD DEFINITIONS

Owner FI	Contract #	Code	Description	Active ?
50	MDA90504C0050	B4	testing	Y
50	MDA90504C0050	B4	testing	Y

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REPORT CATEGORY:	Summary/Management
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**INST BY DUPLICATE TYPE**
PRINTED REPORT TITLE:	Institutional Summary Report Potentials/Actuals/Non-Duplicates By Contractor (grouped by Region)
REPORT DESCRIPTION:	This summary/management report shows the total number of institutional potential duplicates, actual duplicates, non-duplicates, and those not yet worked by the contractor for the initial or current load date selected or load date range specified by the user. The report lists the number of claims and the amount paid by match type. The report also shows the number of actual duplicates, non-duplicates, and potential duplicate claims as a percentage of the total number of potential duplicates loaded. For this report, potential duplicates are the universe of all non-base claims. Actual duplicates are those claims with a "Y" dupe flag in pending, validate or closed status. Non-duplicates are those non-base claims with an "N" dupe flag in pending, validate or closed status. Potential duplicates not worked are non-base claims in open status irrespective of any dupe flag value. The dollar totals on the report are for non- base claims only.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status; Claim Types; Match Types; Last Dates; Set Range (Adjustments, Set Owner Type, Date Type, FI, Region) plus Responsible FI, and Region, and Risk Indicator.
REPORT NOTES:	The data used by this report format is claim level data. It should be noted that the total number of claims and percentages shown on this report may differ from that shown on the "Actual vs. Potential" graph report. Any discrepancy will be due to the fact that this report will count a claim more than once if it appears in two or more sets owned by the same region but which have different match types. The graph, alternatively, will not count a claim more than once if it appears in two or more sets owned by the same region.

Adjust Type = All
Owner Type = All
Owner FI = All
Owner Region = All
Resp FI = All
Resp Region = All
Risk Ind = All

Date: 5/20/05
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INSTITUTIONAL SUMMARY REPORT
POTENTIALS/ACTUALS/NON-DUPLICATES BY FI/CONTRACTOR

Match Type	Number of Potential Dupes	Potential Dupes $	Number of Actual Dupes	Actual Dupes % of Potential	Actual Dupes Amount Paid Govt Contr	Number of Non-Dupe Claims	Non -Dupes % of Potential	Non Dupes Amount Paid Govt Contr	Number of Potential Not Worked Claims	Not Worked % of Potential	Potential Not Worked Amount Paid Govt Contr
50 - Acme Claims Processing											
Undetermined Region											
Date Overlap	27	$331,343.09	1	3.70%	$1,090.44	0	0.00%	$0.00	24	88.89%	$326,774.08
Exact	13	$78,437.14	0	0.00%	$0.00	0	0.00%	$0.00	13	100.00%	$78,437.14
Near	16	$130,078.81	0	0.00%	$0.00	0	0.00%	$0.00	14	87.50%	$121,374.88
Other	3	$9,895.12	0	0.00%	$0.00	0	0.00%	$0.00	2	66.67%	$2,635.22
Region Totals	59	$549,754.16	1		$1,090.44	0		$0.00	53		$529,221.32
Contractor Totals	59	$549,754.16	1		$1,090.44	0		$0.00	53		$529,221.32
55 - East West Claims											
Area 55											
Exact	1	$3,078.58	0	0.00%	$0.00	0	0.00%	$0.00	1	100.00%	$3,078.58
Region Totals	1	$3,078.58	0		$0.00	0		$0.00	1		$3,078.58
Contractor Totals	1	$3,078.58	0		$0.00	0		$0.00	1		$3,078.58
73 - HAL Systems Inc											
Area 73A											
Date Overlap	2	$24,591.92	0	0.00%	$0.00	0	0.00%	$0.00	2	100.00%	$24,591.92
Region Totals	2	$24,591.92	0		$0.00	0		$0.00	2		$24,591.92
Contractor Totals	2	$24,591.92	0		$0.00	0		$0.00	2		$24,591.92
Grand Totals	62	$24,591.92	1		$1,090.44	0		$0.00	56		$556,891.82

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REPORT CATEGORY:	Summary/Management
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**NONINST BY DUPLICATE TYPE**
PRINTED REPORT TITLE:	Non-Institutional Summary Report Potentials/Actuals/Non-Duplicate by FI/Contractor
REPORT DESCRIPTION:	This summary/management report shows the total number of non-institutional potential duplicates, actual duplicates, non-duplicates, and those not yet worked by the contractor for the initial or current load dates selected or load date range specified by the user. The report lists the number of claims and the allowed amounts paid by match type. The report also shows the number of actual duplicates, non-duplicates, and potential duplicate claims as a percentage of the total number of potential duplicates loaded. This report does not count unique claims but rather all non-base claims appearing in sets with a particular match type, i.e., the total number of non-base claims appearing in CPT-4, Exact, Near, and Other match type sets. Since a non-institutional **claim** may appear in more than one set, the counts of the **claims** appearing on this report may be inflated. The dollars shown on this report, however, will not be inflated since a line-item will never appear in more than one set. As a result, the dollars appearing on this report are the paid amounts for the line items appearing in the sets in which their host claim appears. While the host claim may be counted more than once, the dollar amounts associated with the line items will not be counted more than once. For this report, potential duplicates are the universe of all non-base claims. Actual duplicates are those claims with a "Y" dupe flag in pending, validate or closed status. Non-duplicates are those non-base claims with an "N" dupe flag in pending, validate or closed status. Potential duplicates not worked are non-base claims in open status irrespective of any dupe flag value. The dollar totals on the report are for non-base claims only.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status, Claim Types, Match Types, Last Dates, Set Range (Adjustments, Set Owner Type, Date Type, Region) plus Responsible FI, Region, and Risk Indicator.
REPORT NOTES:	The data used by this report format is claim level and line-item data. It should be noted that the total number of claims and percentages shown on this report may differ from that shown on the "Actual vs. Potential" graph report. Any discrepancy will be due to the fact that this report will count a claim more than once if it appears in two or more sets owned by the same region but which have different match types. The graph, alternatively, will not count a claim more than once if it appears in two or more sets owned by the same region.

Adjust Type = All
Owner Type = All
Owner FI = All
Owner Region = All
Resp FI = All
Resp Region = All
Risk Ind = All

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NON-INSTITUTIONAL SUMMARY REPORT
POTENTIALS/ACTUALS/NON-DUPLICATES BY FI/CONTRACTOR

Match Type	Number of Potential Dupes	Potential Dupes $	Number of Actual Dupes	Actual Dupes % of Potential	Actual Dupes Amount Paid Govt Contr	Number of Non-Dupe Claims	Non -Dupes % of Potential	Non Dupes Amount Paid Govt Contr	Number of Potential Not Worked Claims	Not Worked % of Potential	Potential Not Worked Amount Paid Govt Contr
50 - Acme Claims Processing											
Undetermined Region											
Date Overlap	3	$963.00	0	0.1200%	$0.00	0	0.00%	$0.00	3	100.00%	$963.00
Exact	21	$6,278.51	0	0.00%	$0.00	0	0.00%	$0.00	21	100.00%	$6,153.43
Near	23	$13,874.63	0	0.00%	$0.00	0	0.00%	$0.00	23	100.00%	$13,874.63
Other	15	$21,843.67	0	0.00%	$0.00	0	0.00%	$0.00	15	100.00%	$21,843.67
Region Totals	62	$42,959.81	0		$0.00	0		$0.00	62		$42,834.73
Contractor Totals	62	$42,959.81	0		$0.00	0		$0.00	62		$42,834.73
99 - Inactive Contractor											
Inactive-Area 20											
Near	2	$4,560.31	0	0.00%	$0.00	0	0.00%	$0.00	2	100.00%	$4,560.31
Region Totals	2	$4,560.31	0		$0.00	0		$0.00	2		$4,560.31
Contractor Totals	2	$4,560.31	0		$0.00	0		$0.00	2		$4,560.31
Grand Totals	64	$47,520.12	1		$1,090.44	0		$0.00	64		$47,395.04

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**SET AGING REPORT**
PRINTED REPORT TITLE:	Set Aging Report
REPORT DESCRIPTION:	This report provides the total number of sets in Open, Pending, Validate, and Closed Status grouped by region and either initial or current load date (depending on which is selected) as of the date the report is run. The report also shows the percentage each total represents of the total number of sets counted. The fields displayed on the report are: Owner FI; Region; Initial or Current Load Date; Number and Percentage of Open Sets; Number and Percentage of Pending Sets; Number and Percentage of Validate Sets; Number and Percentage of Closed Sets; and the Total Number of Sets. The report provides sub-totals for each contract region and grand totals for each contractor.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Status, Last Dates, Set Range (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Adjust Type = All
Owner Type = All
Claim Type = All
Match Type = All
Owner FI = All
Owner Region = All

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SET AGING REPORT

Contractor Name	Region	Current Load Dt	Open Sets	Open Sets%	Pending Sets	Pending Sets%	Validate Sets	Validate Sets%	Closed Sets	Closed Sets%	Total Sets
50 - Acme Claims Processing	Undetermined Region	09/1996	35	87.50	0	0.00	5	12.50	0	0.00	40
		10/1996	72	100.00	0	0.00	0	0.00	0	0.00	72
		11/1996	6	100.00	0	0.00	0	0.00	0	0.00	6
		12/1996	68	93.15	0	0.00	0	0.00	5	6.85	73
		01/1997	49	96.08	0	0.00	2	3.92	0	0.00	51
Region Total Sets			**230**		**0**		**7**		**5**		**242**
Region Avg %				**95.04**		**0.00**		**2.89**		**2.07**	
Contractor Total Sets			**230**		**0**		**7**		**5**		**242**
Contractor Avg %				**95.04**		**0.00**		**2.89**		**2.07**	
55 - East West Claims	Area 55	10/1996	2	100.00	0	0.00	0	0.00	0	0.00	2
Region Total Sets			**2**		**0**		**0**		**0**		**2**
Region Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
Contractor Total Sets			**2**		**0**		**0**		**0**		**2**
Contractor Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
73 - HAL Systems Inc	Area 73A	10/1996	3	100.00	0	0.00	0	0.00	0	0.00	3
Region Total Sets			**3**		**0**		**0**		**0**		**3**
Region Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
Contractor Total Sets			**3**		**0**		**0**		**0**		**3**
Contractor Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
99 - Inactive Contractor	Inactive-Area 20	12/1996	3	100.00	0	0.00	0	0.00	0	0.00	3
Region Total Sets			**3**		**0**		**0**		**0**		**3**
Region Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
99 - Inactive Contractor	Inactive-Area 30	12/1996	3	100.00	0	0.00	0	0.00	0	0.00	3
Region Total Sets			**3**		**0**		**0**		**0**		**3**
Region Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
Contractor Total Sets			**6**		**0**		**0**		**0**		**6**
Contractor Avg %				**100.00**		**0.00**		**0.00**		**0.00**	
Grand Total Sets			**241**		**0**		**7**		**5**		**253**
Grand Avg %				**95.26**		**0.00**		**2.77**		**1.98**	

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**CLAIM AGING REPORT**
PRINTED REPORT TITLE:	Claim Aging Report
REPORT DESCRIPTION:	This report provides the total number of non-base claims in Open Status (Not Worked), the total number of actual duplicate claims ('Y' Duplicate Flag Value in Pending, Validate and Closed status) and the total number of non-duplicate claims ('N' Duplicate Flag Value in Pending, Validate and Closed status) as of the date the report is run. The report also provides the total paid amounts of the non-base claims in Open Status (Not Worked), the total amounts identified for recoupment and actually recouped of the actual duplicate claims, and the total paid amounts of the non-duplicate claims. The report shows claim counts but for non-institutional claims the paid amount totals are the sum of the line-item paid amounts in the system. The report is grouped by Initial or Current Load Date (depending on which is selected) and region and provides sub-totals by region and grand totals by contractor.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Status; Last Dates; Set Range (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, FI, Region) plus Responsible FI and Region.
REPORT NOTES:	The data used by this report format is claim level data.

Adjust Type = All
Claim Type = All
Owner Type = All
Match Type = All
Owner FI = All
Owner Region = All
Resp FI = All
Resp Region = All

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CLAIM AGING REPORT

Load Date	Not Worked #Claims	Not Worked Allowed Amount	Actual Dupes #Claims	Actual Dupes ID Recoup	Actual Dupes Actual Recoup	Non-Dupes #Claims	Non Dupes Allowed Amount
50 - Acme Claims Processing							
<Unassigned Region>							
09/1996	0	$0.00	1	$1,000.00	$1,000.00	0	$0.00
12/1996	2	$99,997.86	0	0.00	$0.00	0	$0.00
01/1997	2	$335.31	0	0.00	$0.00	0	$0.00
Region Totals	4	$100,333.17	1	$1,000.00	$1,000.00	0	$0.00
Contractor Totals	4	$100,333.17	1	$1,000.00	$1,000.00	0	$0.00
Grand Totals	4	$100,333.17	1	$1,000.00	$1,000.00	0	$0.00

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**ARCHIVED SET REPORT**
PRINTED REPORT TITLE:	Archived Set Report
REPORT DESCRIPTION:	This report provides the total number of sets in the History Database in Validate and Closed Status grouped by region and Initial Load Date as of the date the report is run. While the report contains columns for Open status and Pending status, these will always be 0% since sets in Open and Pending status are never archived to the History Database. The report also shows the percentage each total represents of the total number of sets counted. The fields displayed on the report are: Owner FI; Region; Initial Load Date; Number and Percentage of Open Sets; Number and Percentage of Pending Sets; Number and Percentage of Validate Sets; Number and Percentage of Closed Sets; and the Total Number of Sets. The report provides sub-totals for each contract region and grand totals for each contractor.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Status, Last Dates, Current Load Dates, Set Range (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, FI, Region).
REPORT NOTES:	The data used by this report format is set level data.

Adjust Type = All
Owner Type = All
Claim Type = All
Match Type = All
Owner FI = All
Owner Region = All

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Page 1

SET AGING REPORT

Contractor Name	Region	Current Load Dt	Validate Sets	Validate Sets%	Closed Sets	Closed Sets%	Total Sets
22 - Excel Health Care	East Region	02/2005	0	0.00	1	100.00	1
Region Total			**0**	**0.00**	**1**	**100.00**	**1**
Contractor Total			**0**	**0.00**	**1**	**100.00**	**1**
23 - Seven Health Care	Undetermined Region	06/2004	0	0.00	1	100.00	1
		11/2004	0	0.00	2	100.00	2
		12/2004	0	0.00	1	100.00	1
Region Total			**0**	**0.00**	**4**	**100.00**	**4**
Contractor Total			**0**	**0.00**	**4**	**100.00**	**4**
Grand Total			**0**	**0.00**	**5**	**100.00**	**5**

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**REASON CODE REPORT**
PRINTED REPORT TITLE:	Reason Code Report
REPORT DESCRIPTION:	This report provides a list of actual duplicate and non-duplicate reason codes and the total number claims to which each code was assigned. The report counts actual duplicate claims ('Y' Duplicate Flag value) and non-duplicate claims ('N' Duplicate Flag value) in Pending, Validate and Closed sets.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Indicator, Solicited Indicator, Exclude Base, PTC Dates, Set Level User Defined Code, Claim Level User Defined Code, Responsible FI, Region, and Risk Indicator.
REPORT NOTES:	The data used by this report format is claim level data.

Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Dupe Flag	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set Number	=	All
Exclude Base Claims	=	No
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Risk Ind	=	All

Date: 5/3/05
Page 1

REASON CODE REPORT

Reason Code	Reason Code Description	Number of Claims
BASE	Initial submission	5
D203	Claims submitted by beneficiary and provider	1
	Total Claims	**6**

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**REASON CODE BY INIT LOAD DATE**
PRINTED REPORT TITLE:	Reason Code Report by Initial Load Date
REPORT DESCRIPTION:	This report provides a list of actual duplicate and non-duplicate reason codes and the total number claims to which each code was assigned. The report counts actual duplicate claims ('Y' Duplicate Flag value) and non-duplicate claims ('N' Duplicate Flag value) in Pending, Validate and Closed sets. The report is grouped by Initial Load Date.
REPORT PARAMETER OPTIONS:	This report provides a list of actual duplicate and non-duplicate reason codes and the total number claims to which each code was assigned. The report counts actual duplicate claims ('Y' Duplicate Flag value) and non-duplicate claims ('N' Duplicate Flag value) in Pending, Validate and Closed sets. The report is grouped by Initial Load Date.
REPORT NOTES:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Dupe Flag Indicator, Solicited Indicator, Exclude Base, PTC Dates, Set and Claim Level User Defined Codes, Responsible FI, Region, and Risk Indicator.

Adjust Type	=	All
Owner Type	=	All
Exclude Base Claims	=	No
Claim Type	=	All
Match Type	=	All
Dupe Flag	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set Number	=	All
Solicited	=	All
Set User Codes	=	All
Claim User Codes	=	All
Risk Ind	=	All

Date: 5/3/05
Page 1

REASON CODE REPORT
BY INITIAL LOAD DATE

Initial Load Date
09/1996

Reason Code		Number of Claims
BASE	Initial submission	5
D203	Claims submitted by beneficiary and provider	1
	Total	**6**
	Grand Total	**6**

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**MODIFY FI**
PRINTED REPORT TITLE:	Changed Owner FI Sets
REPORT DESCRIPTION:	This report identifies multi-contractor sets which have had their ownership changed through the use of the "Modify FI" function on the system menu bar. It does not show multi-contractor sets which have had their ownership changed by the mass change process. The fields displayed on the report are: Set Number; Contractor; Changed Date; and User. The report shows each instance ownership of a multi-contractor set was changed; the name of the new owner contractor, the date ownership was changed, and the application User ID of the user who made the change. The first record listed for each set on the report shows the User as 'INITLOAD.' This means that the set was initially loaded by the system.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Set Owner Type and Last Date (Claim Set Status Adjustments, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus PTC Dates.
REPORT NOTES:	The data used by this report format is set level data. Single-line entries with "INITLOAD" as the user may appear on this report. These single-line entries will appear for sets where a user has begun the process of changing (modifying) ownership of the multi-contractor set, enters the reason for making the change, presses the **UPDATE CHANGES** button, but decides to "rollback" the changes, i.e., does not complete changing the set's ownership. Such sets will be listed on this report as a single-line entry with "INITLOAD" as the user.

Status Code = All
Adjust Type = All
Claim Type = All
Match Type = All
Set Number = All
Owner FI = All
Owner Region = All

Date: 5/12/05
Page 1

CHANGED OWNER FI SETS

Set Number	FI/Contractor	Changed Date	User
33290		02/08/2005	INITLOAD
33290		02/08/2005	eidrhha
33290		02/09/2005	eidrhha
33290		03/21/2005	pprsqt01
33290		03/21/2005	pprsqt01
33290		03/24/2005	rajsinha
33290		03/24/2005	rajsinha
33290		03/24/2005	rajsinha
33290		03/24/2005	rajsinha
33290		03/24/2005	rajsinha
33290		03/24/2005	rajsinha
33290		03/24/2005	eidrhha
33290		03/25/2005	npinto
33504		02/08/2005	INITLOAD
33504		02/09/2005	eidrhha
33504		03/24/2005	rajsinha
33504		03/24/2005	rajsinha
33504		03/25/2005	npinto
33676		02/08/2005	INITLOAD
33676		03/22/2005	pprsqt01
33676		03/24/2005	rajsinha
33676		03/24/2005	rajsinha
33676		03/24/2005	rajsinha
33676		03/24/2005	rajsinha
33676		03/25/2005	npinto

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**SET STATUS COUNT HISTORY**
PRINTED REPORT TITLE:	Set Status Count History
REPORT DESCRIPTION:	This report provides a count and percentage of sets within each status as of a date or range of dates grouped by contract.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: Owner FI, Region, and As of Dates.
REPORT NOTES:	The data used by this report format is set level data.

Owner FI = 66

Owner Region = All

SET STATUS COUNT HISTORY

Date: 5/12/05
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AS OF DATE = ALL

East Region

East Region

ON	OPEN SETS	%	PENDING SETS	%	VALIDATE SETS	%	CLOSED SETS	%	TOTAL	%
02/03/2005	0	0.00%	2	100.00%	0	0.00%	0	0.00%	2	100.00%
02/04/2005	0	0.00%	2	100.00%	0	0.00%	0	0.00%	2	100.00%
02/11/2005	1	50.00%	1	50.00%	0	0.00%	0	0.00%	2	100.00%
02/12/2005	1	50.00%	1	50.00%	0	0.00%	0	0.00%	2	100.00%
02/16/2005	1	50.00%	1	50.00%	0	0.00%	0	0.00%	2	100.00%
02/17/2005	1	50.00%	1	50.00%	0	0.00%	0	0.00%	2	100.00%
02/17/2005	1	50.00%	1	50.00%	0	0.00%	0	0.00%	2	100.00%
02/18/2005	5	62.50%	3	37.50%	0	0.00%	0	0.00%	8	100.00%
02/18/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
02/18/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
02/19/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
03/24/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/01/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/04/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/05/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/07/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/15/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/18/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/18/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/19/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/20/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/24/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/25/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/26/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/27/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/28/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
04/29/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/01/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/02/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/03/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/04/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/05/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/06/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/07/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/09/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/10/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%
05/11/2005	6	60.00%	4	40.00%	0	0.00%	0	0.00%	10	100.00%

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**PERFORMANCE STANDARD**
PRINTED REPORT TITLE:	Performance Standard
REPORT DESCRIPTION:	This report will be used to measure contractor compliance with the performance standard. The performance standard requires that no more than 10% of the sets remaining in OPEN status at the end of a month shall have load dates over 30 days old. The report shows the Reporting Month; Beginning Inventory; Receipts; Monthly Inventory; the total number of sets "Moved" during the reporting month; the total number of sets Moved within 30 days of set load dates; Ending Inventory; the total number of sets in Ending Inventory Over 30 Days old; the Percent Moved Within 30 Days; and the Percent Remaining Over 30 Days. The data is grouped by contract.

FIELD DESCRIPTIONS

FIELD NAME	DEFINITION
Reporting Month:	The month and year for which the statistics are applicable.
Beginning Inventory:	The total number of sets in OPEN status at the beginning of the reporting month.
Receipts:	The total number of new sets loaded or the number of sets which changed to OPEN status during the reporting month.
Monthly Inventory:	The sum of the Beginning Inventory and Receipts.
Moved:	The total number of sets moved for OPEN status to PENDING, VALIDATE, or CLOSED status during the reporting month.
Moved Within 30 Days:	Of those sets moved during the reporting month, the number moved within 30 days of their load date.
Ending Inventory:	The Monthly Inventory minus the number Moved. The result is the total number of remaining sets in OPEN status.
Ending Inventory Over 30 Days:	The total number of claim sets remaining in OPEN status with load dates over 30 days old.
% Moved In 30 Days:	Of those sets moved, the percentage moved within 30 days of their load date.
% Remaining Over 30 Days:	The percentage of claim sets remaining in OPEN status with load dates over 30 days old.

REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: a single reporting month or a range of reporting months; one or all FIs; one, several or all regions within selected FIs.
REPORT NOTES:	The data used by this report format is set level data.

MonthRange = All
Owner FI = 66
Owner Region = All

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PERFORMANCE STANDARD

East Region

East Region

Reporting Month	Beginning Inventory	Receipts	Monthly Inventory	Moved	Moved Within 30 Days	Ending Inventory	Ending Inventory Over 30 Days	% Moved in 30 Days	% Remaining Over 30 Days
02/2005	0	0	0	0	0	6	1	0.00%	16.67%
03/2005	6	1	7	1	0	6	6	0.00%	100.00%
04/2005	6	0	6	0	0	6	6	0.00%	100.00%
05/2005	6	0	6	0	0	6	6	0.00%	100.00%

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**DOLLAR TOTALS**
PRINTED REPORT TITLE:	Dollar Totals
REPORT DESCRIPTION:	This report summarizes the total dollars identified for recoupment and actually recouped, as well as the total paid amount of the applicable adjustments by Regional contract. The report reflects the total dollars on the system at the time the report is run. The fields displayed on the report are: Owner FI; Region; Total Amount Identified For Recoupment; Total Amount Actually Recouped; and the Total Paid Amount of the Associated Adjustments. The totals reflect only those sets in Pending, Validate, or Closed status.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, Set Range, FI, Region) plus Set Range, Set and Claim Level User Defined Codes, Responsible FI, Region, and Enrollment Codes.
REPORT NOTES:	The data used by this report format is set level data.

Adjust Type	=	All
Owner Type	=	All
Claim Type	=	All
Match Type	=	All
Set Number	=	All
Owner FI	=	All
Owner Region	=	All
Resp FI	=	All
Resp Region	=	All
Set User Codes	=	All
Claim User Codes	=	All
Enroll Codes	=	All

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DOLLAR TOTALS

50 - Acme Claims Processing

	Total Amount Identified For Recoupment	Total Amount Actually Recouped	Total Amount Identified for Recoupment
Undetermined Region	$1,000.00	$1,000.00	$1,000.00
Totals	$1,000.00	$1,000.00	$1,000.00

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**LOAD DATE REPORT**
PRINTED REPORT TITLE:	Initial Load Date Report
REPORT DESCRIPTION:	This report provides a listing of set initial load dates grouped by contract.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Set Range (Claim Set Status, Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, FI, Region) plus Enrollment Codes.
REPORT NOTES:	The data used by this report format is set level data.

Status Code	=	All
Adjust Type	=	All
Owner Type	=	All
Match Type	=	All
Claim Type	=	All
Owner FI	=	All
Owner Region	=	All
Enroll Codes	=	All

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INITIAL LOAD DATE REPORT

50 - Acme Claims Processing

Undetermined Region	Initial Load Date	Number Of Sets
	9/24/96	107
Totals by Region		107
Totals By Contractor		107

55 - East West Claims

Area 55	Initial Load Date	Number Of Sets
	9/24/96	1
Totals by Region		1
Totals By Contractor		1

73 - HAL Systems Inc

Area 73A	Initial Load Date	Number Of Sets
	9/24/96	1
Totals by Region		1
Totals By Contractor		1

99 - Inactive Contractor

Inactive-Area 20	Initial Load Date	Number Of Sets
	9/24/96	1
Totals by Region		1
Inactive-Area 30	**Initial Load Date**	**Number Of Sets**
	9/24/96	1
Totals by Region		1
Totals By Contractor		2
Grand Totals		111

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**USER ACTIVITY DETAIL**
PRINTED REPORT TITLE:	User Activity Detail Report
REPORT DESCRIPTION:	This report provides a listing of transaction dates and times and associated User IDs grouped by set number. The report shows changes in Set Status; FI; User ID; Amount Identified For Recoupment; Amount Actually Recouped; and the Adjustment Amount.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: Set Range, Transaction Dates, and User IDs.
REPORT NOTES:	The data used by this report format is set level data.

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User ID = eidrhha
Set Number = All
Transact Date = All

USER ACTIVITY DETAIL REPORT

Set#	Stat	FI	Region	Init Load Date	Trans Date Time	User	ID'D Recoup Amt	Actual Recoup Amt	Adjusted Amount
3	O	65	MDA90603C0015	11/22/2004	11/22/04 11:00AM	CLAIMADD	$0.00	$0.00	$0.00
3	O	65	MDA90603C0015	11/22/2004	11/22/04 11:00AM	CLAIMADD	$0.00	$0.00	$0.00
3	C	65	MDA90603C0015	11/22/2004	1/25/05 11:45AM	eidrhha	$0.00	$0.00	$0.00
11166	O	65	MDA90603C0015	11/24/2004	1/12/05 12:02PM	eidrhha	$0.00	$0.00	($19.05)
11166	P	65	MDA90603C0015	11/24/2004	1/13/05 07:06AM	eidrhha	$19.05	$19.05	$11.05
11711	O	65	MDA90603C0015	11/24/2004	11/24/04 04:09PM	CLAIMADD	$0.00	$0.00	$0.00
11711	O	65	MDA90603C0015	11/24/2004	11/24/04 04:09PM	CLAIMADD	$0.00	$0.00	$0.00
11711	C	64	MDA90603C0011	11/24/2004	3/25/05 08:37AM	SYSTEM	$10.07	$10.07	$10.07
11711	O	64	MDA90603C0011	11/24/2004	3/25/05 08:39AM	SYSTEM	$0.00	$0.00	$0.00
11711	C	64	MDA90603C0011	11/24/2004	3/25/05 08:40AM	SYSTEM	$10.07	$10.07	$10.07
11711	V	64	MDA90603C0011	11/24/2004	3/25/05 08:44AM	SYSTEM	$10.07	$10.07	$10.07
11711	O	64	MDA90603C0011	11/24/2004	3/25/05 08:46AM	eidrhha	$0.00	$0.00	$0.00
11711	V	64	MDA90603C0011	11/24/2004	3/25/05 08:48AM	SYSTEM	$10.07	$10.07	$10.07
11711	V	64	MDA90603C0011	11/24/2004	3/25/05 08:49AM	eidrhha	$10.07	$10.07	$10.07
23741	C	64	MDA90603C0011	12/07/2004	2/3/05 08:31AM	jdoe	$45.56	$45.56	$45.56
23741	C	64	MDA90603C0011	12/07/2004	2/3/05 08:31AM	jdoe	$45.56	$45.56	$45.56
25471	V	65	MDA90603C0015	12/07/2004	3/22/05 07:22AM	eidrhha	$34.03	$8.00	($34.03)
25471	P	65	MDA90603C0015	12/07/2004	4/7/05 01:39PM	MARSHALL	$34.03	$8.00	$0.00
25668	O	65	MDA90603C0015	12/07/2004	12/7/04 010:27AM	CLAIMADD	$0.00	$0.00	$0.00
25668	O	65	MDA90603C0015	12/07/2004	12/7/04 10:27AM	CLAIMADD	$0.00	$0.00	$0.00
25668	p	65	MDA90603C0015	12/07/2004	12/28/04 10:44AM	eidrhha	$9.80	$5.00	$0.00
							$238.38	$181.52	$99.44

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REPORT CATEGORY:	Summary/Management Report
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒SUMMARY/MANAGEMENT REPORTS ⇒**USER ACTIVITY SUMMARY**
PRINTED REPORT TITLE:	User Activity Summary Report
REPORT DESCRIPTION:	This report provides a summary of the transactions performed by individual user ID. The report provides the total number of updates performed by a USER ID, the total number of sets updated by that USER ID, and the net change in status in the following categories: sets moved from OPEN to PENDING and PENDING to OPEN; OPEN to VALIDATE and VALIDATE to OPEN; OPEN to CLOSED and CLOSED to OPEN; PENDING to CLOSED and CLOSED to PENDING; PENDING to VALIDATE and VALIDATE to PENDING; and VALIDATE to CLOSED and CLOSED to VALIDATE. This report can provide management with a summary view of user activity by individual USER ID.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: Set Range, Transaction Dates, and User IDs.
REPORT NOTES:	The data used by this report format is set level data.

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User ID = All

Transact Date = All

10000 >= Set Number <= 20000

USER ACTIVITY SUMMARY REPORT

			Net Change In Status From					
USER	**Total Updates**	**Sets Updated**	**O-P**	**O-V**	**O-C**	**P-C**	**P-V**	**V-C**
tmazzull	5	5	3	0	2	0	0	0
pprsqt01	2	2	2	0	0	0	0	0
eidrhha	35	13	1	3	-2	-1	1	2
pprsqt04	6	2	0	0	2	0	0	0
rparker	11	3	3	0	0	0	1	0
MARSHALL	1	1	0	0	0	0	0	0
pprsqt02	4	2	0	0	2	1	0	-1
fsyed	1	1	1	0	0	0	0	0
npinto	1	1	0	0	0	0	0	0
Totals	**66**	**30**	**10**	**3**	**4**	**0**	**2**	**1**

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REPORT CATEGORY:	Graphs
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒GRAPHS ⇒**ACTUAL VS. POTENTIAL**
PRINTED REPORT TITLE:	Total Actual Duplicates as a Percentage of Total Potential Duplicates
REPORT DESCRIPTION:	This report provides the user with a graph which shows the total number of distinct actual duplicate claims ('Y' Duplicate Flag values in Pending, Validate, or Closed status) as a percentage of the total number of distinct potential duplicates in the system (all non-base claims). The data displayed is grouped by region.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: All "Standard" parameters minus Claim Set Status and Set Range (Adjustments, Set Owner Type, Claim Type, Match Type, Date Type, FI, Region).
REPORT NOTES:	The data used by this report format is set level data. If a claim appears in more than one set and the sets are owned by different regions, the claim will be counted once for each region.

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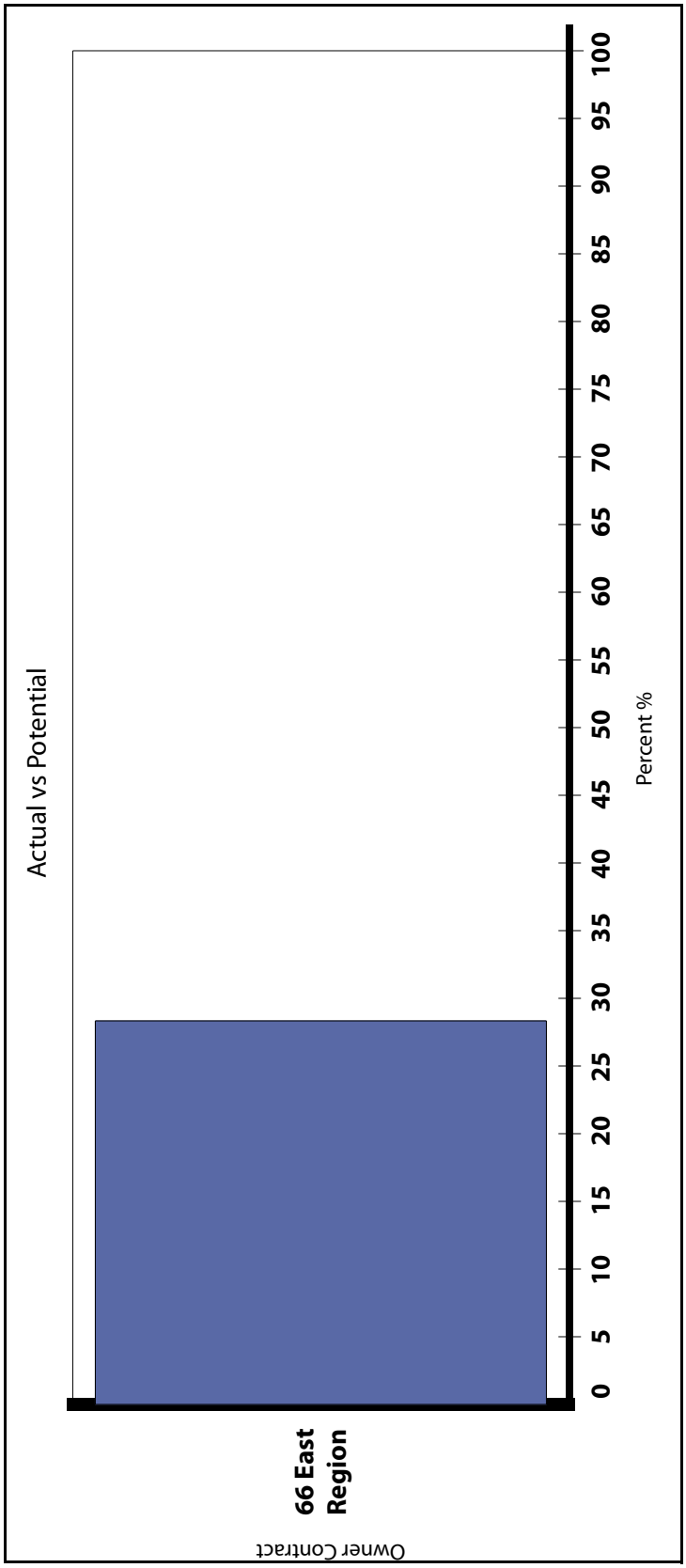
TOTAL ACTUAL DUPLICATES AS A PERCENTAGE OF TOTAL POTENTIAL DUPLICATES

Adjust Type	=	All
Match Type	=	All
Owner Type	=	All
Claim Type	=	All
Owner FI	=	All
Owner Region	=	All



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REPORT CATEGORY:	Graphs
REPORT MENU HIERARCHY AND FORMAT NAME:	REPORT ⇒GRAPHS ⇒**USER ACTIVITY SUMMARY**
PRINTED REPORT TITLE:	User Activity Summary Report
REPORT DESCRIPTION:	This report provides the user with a graphical representation of the data in the User Activity Detail Report. The graph provides a summary of the transactions performed by individual user ID. The report provides the total number of updates performed by a USER ID, the total number of sets updated by that USER ID, and the net change in status in the following categories: sets moved from OPEN to PENDING and PENDING to OPEN; OPEN to VALIDATE and VALIDATE to OPEN; OPEN to CLOSED and CLOSED to OPEN; PENDING to CLOSED and CLOSED to PENDING; PENDING to VALIDATE and VALIDATE to PENDING; and VALIDATE to CLOSED and CLOSED to VALIDATE. This report can provide management with a summary view of user activity by individual USER ID.
REPORT PARAMETER OPTIONS:	Users may customize the report by selecting: Set Range, Transaction Dates, and User IDs.
REPORT NOTES:	The data used by this report format is set level data. This report is best viewed on screen or printed to a color printer.

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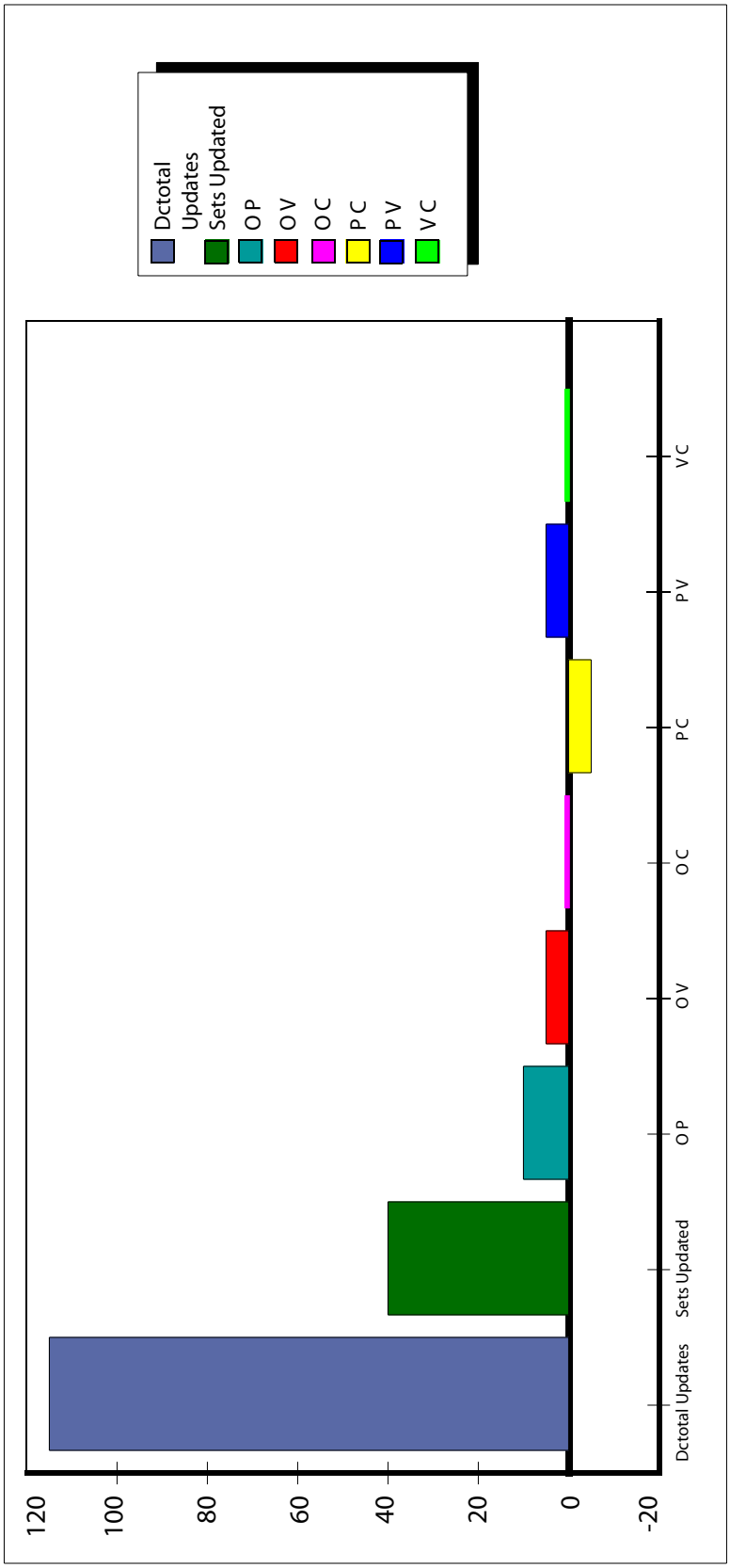
User ID = All
Set Number = All
Transact Date = All

USER ACTIVITY SUMMARY REPORT



USER ID : eidrhha

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- END -