HIS/CSDW Report Descriptions

Report Number	Report Name	Description
AR404 (CSDW)	Period Income by Financial Class, Program, Service Site or by Provider	Report returns all payments made to client accounts. The detail section lists service code income by program. There are four summaries; by financial class, by program, by provider and by program within each service site. The date input parameter is date of receipt (not date of service)
BL110 (HIS)	Revenue by program/by payer	For date range specified details billed, received and adjusted amounts by program and payer. Includes summary by program and grand total summary
GC020P-T * (CSDW)	Patient Count by Program	Counts unduplicated patients and visits by program with grand total by county Clients divided into Medicaid and Non-Medicaid. Within each program, if a single service was billed to Medicaid, the patient is counted as a Medicaid client. Clients and visits are sorted by program (not RRG). Report breaks by county for districts.
GC010F-T * (CSDW)	Service Count by Practitioner	Counts each service (by procedure code) provided by practitioner & practitioner/ program summary
GCO2OP-E * (CSDW)		Management summary counts unduplicated patients seen and duplicated patient visits grouped by individual programs.

*Data comes from "encounters" entered into HIS. Encounter = one visit on one date for one client; Encounter = services both billed and reported. Note: encounter can contain services in more than one program so total agency visit counts are NOT the sum of individual program visit totals

HIS & CSDW Report Definitions

Financial Class	Grouping of similar guarantors
RSC – Root System Code	county or district number (101 – 199 and 200 – 221)
Revenue Reporting Group (RRG)	Groupings of similar programs, e.g. CH-Child Health (CH, HC, BC), MH- Maternal Health (MH, BM)
Programs	Program codes are created at State level (e.g. CH, HC, IM, FP, MH, ST, DM)
Unduplicated Totals - Patient Counts	Counted once no matter how many visits. At program level can be counted only once per program.
Duplicated Totals Visits - Encounters	A single date of service by a single client. Can be counted multiple times if multiple encounters. At program level, if single encounter spread over more than one program, is counted in each program. Usually, total visits will be duplicated at program level, but will be unduplicated at county level (across all programs)
Service vs. Unit	Service- only 1 provided; Unit – time based (15 min = 1 unit)
Date of service vs. Date of Receipt	Income reports use receipt date. Service & client count reports use date of service (DOS).
Billed vs. Reported	Billed = Fee charged & liability incurred. Reported = No fee charged & no liability incurred. Both are counted in service count reports