

CMS Net

Legacy Report Manual

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Management Report Menu

Management Reports Section

This function is used to generate standard reports in CMS Net. Users have the ability to generate reports by their security group, i.e. Regional office or County.

After logging into CMS Net, at the Primary Option prompt do the following:

| Step | Action |
|-------------|---|
| 1 | Type “ M ” for <i>Management Reports</i> . |
| 2 | Press <Enter>. |

Management Report Screen

After pressing <Enter>, the Management Report (CMSRM-10) Screen displays.

| | | |
|--|--------------------|--------------|
| CMS NET MANAGEMENT REPORT | CMSRM-10 | |
| ----- | | |
| (1) Select Report: | | |
| (2) Select County: | | |
| (3) Select Local Office: | | |
| (4) Select Regional Office: | | |
| ----- | | |
| (5) Report from | (6) Date: | (7) To Date: |
| (8) From 1st Auth Date: | (9) To Date: | |
| (10) Begin at Last Name: | (11) Through Name: | |
| (12) Patient's 21st Birthday On or Before: | | |
| (13) Select Report Format: | | |
| (14) DX ICD: | | |

Data Entry Fields

The following table identifies and defines the fields for data entry on the Management Report Screen, **CMSRM-10**.

Press the <Down Arrow> to move from field to field.

| Field # | Name | Description |
|---------|--------------------------------|--|
| 1 | Select Report | Required Select the type of report to generate from the pick-list. Values include: AP ACTIVE/PENDING LIST BC BASELINE COUNT CC CASE COUNT REPORT DP DETAIL PENDING CASE LIST FU FOLLOW UP REPORT HFP HEALTHY FAMILIES PLANS MCP MEDI-CAL MANAGED CARE PLANS MR MEDS RECONCILIATION MON MONTHLY CASELOAD COUNT PL PENDING LIST PR PRODUCTIVITY REPORT |
| 2 | Select County | Optional. Auto fill with your county based upon your user security. Regional Offices will either select a county, or leave blank. Note: The ability to print by local office will be included in the next update. |
| 3 | Local Office | Optional. Allows counties that have a local office the ability to print by specific area. |
| 4 | Select Regional Office | Optional. Auto fill with your regional office based upon your user security. |
| 5 | Report from | Display Only Field Designates which CMS Net file the data is retrieved from. |
| 6 | Date: | Required for (these reports) |
| 7 | To Date: | Required for (these reports) |
| 8 | From 1 st Auth Date | Required for (these reports) |

| | | |
|----|--|--|
| 9 | To Date | Required for (these reports) |
| 10 | Begin with Last Name | Optional. Enter the alpha character(s) where you would like to begin the report. Only selected reports allow searching by last name. |
| 11 | Through Name | Optional. Enter the alpha character(s) where you would like to end in the report. Note: If you are searching A-D, the results will not include D, only through C. |
| 12 | Patient's 21 st Birthday On or Before | Required for Age 21 report only |
| 13 | Select Report Format | Enter the alpha character(s), which you would like to begin the report. Pick list: Count List Both |
| 14 | DX ICD | Enter the alpha character(s), which you would like to begin the report. Pick List: Select a valid ICD-9 Diagnosis code(s). |

Management Reports

Active Pending List (AP) Description

This report includes data from a scheduled process within CMS Net runs in the early morning hours the first of each month to collect the data elements needed for to report for each case record with a registration status of active or pending. Users may request the reports throughout the month; however, *the data presented will be as it was collected on the first of the month.*

The Active Pending (AP) list shows :

- The total of Active, Transfer/Active, Pending and Reopen Pending cases as of first of each month. There is no option to select a date range for the AP report.
- The report includes the patient Name, CCS#, Date of Birth, Referral/Transfer Date, Registration Status Program Eligibility Begin Date, Program Eligibility End Date, Pending Eligibility Status, Client Eligibility Start Date and CCS Eligibility Status (Aid Code).

Please Note: If the Registration status is Active and the CCS Eligible Status (Aid Code) on the Client Eligibility Screen has not be established, the record is still counted as Active for this report.

| Step | Action |
|-------------|---|
| 1 | Enter AP at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Optional. Enter the alpha character(s), which you would like to begin the report. |
| 5 | Optional. Enter the alpha character(s) where you would like to end in the report. Note: If you are searching A-D, the results will not include D, only through C. |
| 6 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 7 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Active Pending List Layout

The following is an illustration of the AP report.

| ACTIVE/PENDING CASES AS OF 06/24/2002 | | | | |
|--|---------|------------|------------|---------|
| NAME | CCS # | DOB | REF/TRF DT | STATUS |
| ----- | | | | |
| CURRENT LEG COUNTY CODE: XXXXXXXXXXXXXXXXXXXX | | | | |
| TEST, KIDDO III | 3214569 | 05/23/1991 | 12/03/1991 | ACTIVE |
| Pgm Beg Dt: 05/23/1991 Pgm End Dt: 05/23/1992 Pend Elig: | | | | |
| Client Elig Start Dt: 05/23/1991 Aid Code: 9K-CCS | | | | |
| TEST, AGAIN | T126549 | 12/21/1993 | 02/02/1994 | PENDING |
| Pgm Beg Dt: 12/21/1993 Pgm End Dt: Pend Elig: MEDI-CAL PENDING | | | | |
| Client Elig Start Dt: Aid Code: | | | | |

Baseline Count (BC) Description

The data for the BC report is updated monthly, the last day of each month. It includes an unduplicated count of patient by each registration status. There is also a breakdown of: Medi-Cal vs. CCS patients

- Medi-Cal shall be equivalent to an entry in the Patients record on the Medi-Cal Coverage screen, Medi-Cal number field.
- CCS shall be equivalent to no entry in the Patients record on the Medi-Cal Coverage screen. This includes CCS only and Healthy Families cases.

| Step | Action |
|-------------|---|
| 1 | Enter BC at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Enter the start date that you would like to search for authorized requests. Press <Enter> |
| 5 | Enter the end date that you would like to search for authorized requests. Press <Enter> |
| 6 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 7 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Baseline Count Layout

The following is an illustration of the BC report.

| | | | | |
|--|---------|----------|------|--|
| CMS Net Monthly Baseline Report | | | | |
| Created 99/99/9999 @ 99:99:99XX | | | | |
| Reporting for County: XXXXXXXXXXXXXXXXXXXXXXXX | | | | |
| Reporting for Activity Date 99/99/9999 (last day of the month reporting) | | | | |
| Case Action: | Total | Medi-Cal | CCS | |
| Pending | 956 338 | 618 | | |
| Reopen/Pending | 89 60 | 29 | | |
| Active | 8226 | 7216 | 1010 | |
| Transfer/Active | 13 10 | 3 | | |
| Denied | 1672 | 880 | 792 | |
| Closed | 1598 | 1399 | 199 | |
| Not Open | 1236 | 503 | 733 | |

Case Count Report (CC) Description

This report provides a table of the records that match the selection criteria for the given action. The report tallies by action, Activated, Closed, Denied or Not Open, the number of records containing a Medi-Cal number in File 6, Patient, field 1004, Medi-Cal Number. If there is no entry in file 6, field 1004 for Medi-Cal Number, the record is counted as CCS. CCS and Medi-Cal counts should always add up to the entry in the total number of records column for that action. Lastly, the report counts the number of records where Language, file 6000, Registration, field 3.03 equals Spanish. Language and Medi-Cal Number counts are as of the *data on file as of the current moment*.

The report asks the user to specify a date range. The report is inclusive of the beginning and ending date specified for each action as further described below.

REF/TRANS: An entry is counted in this category if an entry in the Referral/Transfer date multiple is within the range specified and the legal county for the same entry is equal to the reporting county. Referral/Transfer is the multiple entry in file 6000, Registration, for field 8. Legal County is field .04 in the multiple, date is field .01.

ACTIVATED: An entry is counted in this category if file 6500, Client Eligibility, field .02, Start Date is within the reporting date range specified *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county.

DENIED: An entry is counted in this category if file 6500, Client Eligibility, field .031, Denied Date is within the reporting date range specified *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county.

CLOSED: An entry is counted in this category if file 6500, Client Eligibility, field .03, End Date is within the reporting date range specified *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county.

This report is not limited to *unduplicated patients*. If a patient was activated, denied, etc. more than once in the reporting period, each entry will be tallied.

| Step | Action |
|-------------|---|
| 1 | Enter CC at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Enter the start date that you would like to search for case activity. Press <Enter> |
| 4 | Enter the end date that you would like to search for case activity. Press <Enter> |
| 5 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 6 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Case Count Report Layout

The following is an illustration of the CC report.

| | | | | |
|--|-------|----------|-----|---------|
| CMS Net Case Count Report | | | | |
| Created 03/25/2002@9:33:20AM | | | | |
| Reporting for County: XXXXXXXXXXXXXXXXXXXX | | | | |
| Reporting from 1/1/2001 to 3/25/2002 | | | | |
| Case Action: | Total | Medi-Cal | CCS | Spanish |
| REF/TRANS | 8 | 3 | 5 | 0 |
| ACTIVATED | 0 | 0 | 0 | 0 |
| DENIED | 0 | 0 | 0 | 0 |
| CLOSED | 1 | 1 | 0 | 0 |

Detail Pending Case List (DP) Description

This report includes data from a scheduled process within CMS Net runs in the early morning hours the first of each month to collect the data elements needed for to report for each case record with a registration status of active or pending. Users may requests the reports throughout the month, however, *the data presented will be as it was collected on the first of the month.*

The Detail Pending Case List (DP) report lists :

- All records with a Registration Case Status of Pending or Reopen Pending as of first of each month. There is no option to select a date range for the AP report.
- The report includes the patient name, CCS #, Referral/Transfer Date, Referral/Transfer type, any letters generated for the patient including the date and correspondence type, application status, Medi-Cal status, the program begin date and end dates for the most recent program eligibility period, as well as the pending eligibility type

| Step | Action |
|-------------|---|
| 1 | Enter DP at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Optional. Enter the alpha character(s), which you would like to begin the report. |
| 5 | Optional. Enter the alpha character(s) where you would like to end in the report. Note: If you are searching A-D, the results will not include D, only through C. |
| 6 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 7 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Detail Pending Case List Layout

The following is an illustration of the DP report.

| XXXXXXXXXXXXXXXXXXXXX COUNTY DETAIL PENDING CASE LIST | | | |
|---|------------|-------------------|----------------|
| | | 08/29/2002@3:14PM | PAGE 1 |
| NAME | CCS# | R/T DT | REF/TRAN |
| LETTER | CORR DT | APP ST | M/C STAT |
| PGM BEG DT | PGM END DT | PEND ELIG | PEND ELIG TYPE |
| ----- | | | |
| WRONG, KID | 999999 | 06/06/2000 | REFERRAL |
| C-36A | 03/06/2001 | | 12345678901234 |
| C-36 | 06/06/2000 | 2ND LETTER | |
| WRONG, KID BROTHER | T99999 | 07/20/2000 | REFERRAL |
| C-36A | 03/08/2001 | | DENIED |
| C-36 | 07/21/2000 | 2ND LETTER | |

Follow Up Report (FU) Description

This report contains any outstanding follow up requests. Responding to a follow up request removes the follow up from this report.

| Step | Action |
|-------------|---|
| 1 | Enter DP at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 4 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Follow Up Report Layout

The following is an illustration of the Follow Up report.

| | | | |
|----------------------|--------------|----------------------------|---------|
| County: ALAMEDA | | REPORT OF FOLLOW UP STATUS | Page: 1 |
| Run Date: 11/28/2012 | | | |
| Dt Req. | Status | Req. Number | Case# |
| 05/15/2007 | RESPONDED TO | 0507-999999 | 9999999 |
| | | Test, Test | |
| | | Tester, Other | |

Healthy Families Plans (HFP) Description

The data for this report is for Targeted Low Income/Medi-Cal (formerly Healthy Families) and collected on the *first of each month*. A patient record is selected for the report if any of the Insurance Coverage entries in file 6, Patient, field 130, Other Coverage starts with the letters "HF", "HEALTHY FAM", "H.F." or "H/F". Case status is not considered for this report, all entries in your county will print.

| Step | Action |
|------|---|
| 1 | Enter HFP at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 5 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Healthy Families Plans Layout

The following is an illustration of the HFP report.

| CCS Tracking List for Healthy Families Program | | 11/19/2001 | Page: 1 |
|--|------------------|-----------------------------------|--------------------------------------|
| BLUE CROSS (EP0) HEALTHY FAMILIES | | | |
| Patient | Primary DX | Elig Status Elig Start Date | Reason Inelig/Clos Denied Date |
| DOB/CCS/CIN/SSN | | | Ref By Prim Care Provider |
| ----- | ----- | ----- | ----- |
| Reg Status | | | |
| ----- | | | ----- |
| WRONG, KID | 746.9 | | DR. JONES |
| 8/26/96 2520262 | CONGENITAL | | DR. SMITH |
| 99999999D9 | ANOMALY OF HEART | | |
| 123-45-6857 | | | |
| | | | ACTIVE |

Medi-Cal Managed Care Plans (MCP) Description

The data for this report is collected on the *first of each month* and placed in the ^NTMMCP global. A patient record is selected for the report if there are any entries in file 6, Patient, field 120, Managed Care. Case status is not considered for this report, all entries in your county will print.

Please Note: If the Registration status is Active and the CCS Eligible Status (Aid Code) on the Client Eligibility Screen has not be established, the record is still counted as Active for this report.

| Step | Action |
|------|---|
| 1 | Enter MCP the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 5 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Medi-Cal Managed Care Plans Layout

The following is an illustration of the MCP report.

| CCS Tracking List for Medi-Cal Managed Care Plans | | 11/19/2001 | Page: 1 |
|---|---------------|-------------|-------------|
| HEALTH NET | | | |
| ----- | | | |
| Patient | | Elig Status | Reason |
| DOB/CCS/CIN/SSN | Primary DX | Elig Start | Inelig/Clos |
| ----- | ----- | Date | Denied Date |
| | | | Ref By |
| | | | Prim Care |
| | | | Provider |
| | | | Reg Status |
| | | | ----- |
| WRONG, KIDDO TEST | 738.8 | | DR. JONES |
| 1/13/81 3291553 | MUSCULOSKEL | | DR. SMITH |
| 999999999C9 | ETAL DEFORM | | |
| 999-99-9999 | OF OTHER SPEC | | |
| | SITE | | |

MEDS Reconciliation (MR) Description

Report lists all cases updated by the MEDS RECON User ID during the MEDS Recon process that happens in the middle of each month. This report will be filtered by a selected date range (up to 90 days) Date range will be tied to the "Last-Update-Date" field. Include the following CMS Net fields, sorted by "Legal-County", "Last Name", then "First Name" in ascending order: "CCS#", "CIN", "Last Name", "First Name", "Middle Name", "Status", "Legal-County", and "Last-Update-Date".

| Step | Action |
|-------------|---|
| 1 | Enter MR at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Enter the start date that you would like to search. Press <Enter> |
| 4 | Enter the end date that you would like to search. Press <Enter> |
| 5 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 6 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

MEDS Reconciliation Layout

The following is an illustration of the MEDS Reconciliation report.

| MEDS RECONCILIATION REPORT | | Page: 1 | | |
|----------------------------|-----------|------------|-------------|--------|
| County: ALAMEDA | | | | |
| Run Date: 10/11/2012 | | | | |
| Case# | Last Name | First Name | Middle Name | Status |
| 9999999 | WRONG | CHILD | | ACTIVE |

Monthly Caseload Count (MON) Description

The report lists the active and pending Medi-Cal and Non Medi-Cal counts for a specific month. These counts are archived so users can access prior months.

The Non Medi-Cal counts contain both Targeted Low Income/Medi-Cal (formerly Healthy Families) and CCS-Only.

| Step | Action |
|------|--|
| 1 | Enter MON at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Select the fiscal year you would like to work in. Press <Enter> to use the current fiscal year, or type in a prior fiscal year |
| 4 | Select one of the following months: 1 07/01 - 07/31 2 08/01 - 08/31 3 09/01 - 09/30 4 10/01 - 10/31 5 11/01 - 11/30 6 12/01 - 12/31 7 01/01 - 01/31 8 02/01 - 02/28 9 03/01 - 03/31 10 04/01 - 04/30 11 05/01 - 05/31 12 06/01 - 06/30 |
| 5 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Monthly Caseload Count Layout

The following is an illustration of the Monthly Caseload Count report.

| CMS Net Monthly Caseload Count Report | | |
|--|----------|--------------|
| County: Alameda Fiscal Year: 12-13 Month: 10 | | |
| Printed on 11/28/2012@9:57:02AM | | |
| ACTIVE TOTAL | MEDI-CAL | NON MEDI-CAL |
| ----- | ----- | ----- |
| 5000 | 4000 | 1000 |
| | | |
| PENDING TOTAL | MEDI-CAL | NON MEDI-CAL |
| ----- | ----- | ----- |
| 200 | 100 | 100 |

Pending List (PL) Description

This report includes data from a scheduled process within CMS Net runs in the early morning hours the first of each month to collect the data elements needed for to report for each case record with a registration status of active or pending. Users may requests the reports throughout the month, however, *the data presented will be as it was collected on the first of the month.*

All cases with a Pending or Reopen Pending status, field .05, in file 6000, Registration on the first of the month are listed for the County or Regional Office selected. The report is in alphabetical order by name.

| Step | Action |
|------|---|
| 1 | Enter PL the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Optional. Enter the Local Office name if your county has Local Offices designated. Press <Enter>. |
| 4 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 5 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Pending List Layout

The following is an illustration of the PL report.

| XXXXXXXXXXXXXXXXXXXXXXXXX COUNTY PENDING LIST | | | | |
|---|--------|------------|--------------------------|----------------------|
| NAME | CCS# | DOB | 06/21/1999@3:50pm R/T | PAGE 1 PGM BEG DT |
| WRONG, KID TESTING | T47720 | 04/18/1992 | 02/10/1999 | 02/10/1999 |
| WRONG, KID AGAIN | T47777 | 04/24/1990 | 02/22/1999 | |
| WRONG, LITTLE KID | T47229 | 09/19/1995 | 02/16/1999 | 02/16/1999 |

Pending Report (PR) Description

This report provides a table of the records that match the selection criteria for the given case status. Of the total, the report tallies the number of records containing a Medi-Cal number in File 6, Patient, field 1004, Medi-Cal Number. If there is no entry in file 6, field 1004 for Medi-Cal Number, the record is counted as CCS. CCS and Medi-Cal counts should always add up to the entry in the total number of records column for that case status. Lastly, the report counts the number of records where Language, file 6000, Registration, field 3.03 equals Spanish. Language and Medi-Cal Number counts are as of the *data on file at the time the report is generated*.

The report asks the user to specify a date range. The report is inclusive of the beginning and ending date specified. Each category in the table is described below.

NEW REG/REF: An entry is counted in this category if at least one of the Referral/Transfer entries in field 8 (multiple) for file 6000, Registration, is equal to the reporting county *and* the Original Entry Date, file 6000, Registration, field, .09, is within the reporting date range specified. Legal County is field .04 in the multiple. This date is automatically captured by CMS Net as the current date when the patient registration is first filed and cannot be changed by the user.

ACTIVE: An entry is counted in this category if field .13, Open Date, in file 6500, Client Eligibility, is with the reporting date range *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county. The Open Date is automatically captured by CMS Net as the current date when an entry in Client Eligibility is first filed with an Active status and cannot be changed by the user. The legal county in file 6500, Client Eligibility, is automatically set equal to the current legal county in patient registration when the entry in Client eligibility is first filed. The county cannot be changed by the user but may be changed by the System Manager using the Correct Case Status screen.

DENIED: An entry is counted in this category if the Last Update Date of file 6500, Client Eligibility, field .99, is within the reporting period *and* the legal county, field .07 in file 6500, Client Eligibility is equal to the reporting county. The Last Update Date is automatically set by CMS Net when a screen is saved and cannot be changed by the user. Since Closed and Denied Client Eligibility entries are immediately considered "history" in CMS Net, it is highly likely that this date will remain the date the user first filed the Denied or Closed status. The legal county in file 6500, Client Eligibility, is automatically set equal to the current legal county in patient registration when the entry in Client eligibility is first filed. The county cannot be changed by the user but may be changed by the System Manager using the Correct Case Status screen.

CLOSED: An entry is counted in this category if the Last Update Date of file 6500, Client Eligibility, field .99, is within the reporting period *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county. The Last Update Date is automatically set by CMS Net whenever a screen is saved and cannot be changed by the user. Since Closed and Denied Client Eligibility entries are immediately considered "history" in CMS Net, it is highly likely that this date will remain the date the user first filed the Denied or Closed status. The legal county in file 6500, Client Eligibility, is automatically set equal to the current legal county in patient registration when the entry in Client eligibility is first filed. The county cannot be changed by the user but may be changed by the System Manager using the Correct Case Status screen.

.02, Start Date is within the reporting date range specified *and* the legal county, field .07 in file 6500, Client Eligibility, is equal to the reporting county.

| Step | Action |
|-------------|---|
| 1 | Enter PR at the Select Report field. Press <Enter>. |
| 2 | Enter the County or Regional office. Press <Enter>. |
| 3 | Enter the start date that you would like to search for case activity. Press <Enter> |

| | |
|---|---|
| 4 | Enter the end date that you would like to search for case activity. Press <Enter> |
| 5 | Press the Action Menu Key. Select Search from the Action menu. Press <Enter>. |
| 6 | At the Device prompt, type "SP" to print or <Enter> to display on the screen. |

Pending Report Layout

The following is an illustration of the PR report.

```

CMS Net Productivity Report
Created 03/25/2001@11:14AM

Reporting for County: XXXXXXXXXXXXXXXXXXXX

Reporting from Activity Date 01/01/2001 TO 03/25/2002

Case Action:      Total      Medi-Cal      CCS      Spanish
-----
NEW REG/REF      8          3          5          0
ACTIVATED        0          0          0          0
DENIED           0          0          0          0
CLOSED           0          0          0          0

```