

### List of Helpful QI Avatar Reports

<b>Avatar Form</b>	<b>Notes</b>
<i>Active Client Final Assessments</i>	<ul style="list-style-type: none"> <li>For the Program selected, returns all active clients and the dates of all finalized non psychiatric assessments in their episode. This report captures the entire clinical bundle. Includes HQ, MSE, Core, Plan, LOCUS, CODA, Vocational, ANSA, CANS</li> </ul>
<i>Active Client Plan and Core Status</i>	<ul style="list-style-type: none"> <li>For current open episodes at a program, shows the admit date, the start date, the current Core Assessment date, Core Assessment Status “Draft” or “Final”, the current Client Plan Entry, Client Plan End date and Client Plan Status “Draft” or “Final”.</li> <li>Indicates if the document may be in draft, overdue, etc.</li> </ul>
<i>Authorization Check Report</i>	<ul style="list-style-type: none"> <li>Report of all open clients by program, showing the status of their most recent authorization and last date of service.</li> <li>Helpful in identifying who may have expired authorization.</li> </ul>
<i>Clients Active in Multiple Programs (SAC)</i>	<ul style="list-style-type: none"> <li>Includes a list of clients linked to your program that have an overlapping admit elsewhere within a timeframe.</li> <li>You are able to see the name of the other program that has an open episode.</li> <li>Helps to track any overlapping services.</li> </ul>
<i>Client Data Sheet</i>	<ul style="list-style-type: none"> <li>Includes client demographics, client services information and diagnosis. Also includes the most recent MEDS file extract information if available, current Infoscriber medication and allergy information.</li> </ul>
<i>Client Demographics Report</i>	<ul style="list-style-type: none"> <li>Displays client demographic information by program for clients with an open episode between the date ranges entered by the user.</li> <li>Used to track potential “blank” demographic information.</li> </ul>
<i>Client Services Report (Single Client)</i>	<ul style="list-style-type: none"> <li>Snapshot of services provided for each client within a timeframe.</li> <li>Helpful to review services billed, gaps in services, patterns of types of services.</li> </ul>
<i>Client Services Report (Weekly Staff)</i>	<ul style="list-style-type: none"> <li>This is a week at a glance summary of the service durations for each practitioner in a given program with totals by client and day of service.</li> <li>This is duration based.</li> </ul>
<i>Diagnosis and Movement History</i>	<ul style="list-style-type: none"> <li>Displays diagnosis and episode history by client. Does not include any historical information on ADS episodes.</li> </ul>
<i>Discharge Detail by Program (SAC)</i>	<ul style="list-style-type: none"> <li>Provides detailed client information by program for the date range and program(s) selected by the user.</li> </ul>
<i>Expiring Authorizations</i>	<ul style="list-style-type: none"> <li>Identifies authorizations that will expire within the date range entered by the user.</li> </ul>
<i>Fiscal Year Summary</i>	<ul style="list-style-type: none"> <li>This helps track total number of clients on your census per month, admits, discharges, no shows/cancellations, etc.</li> </ul>

<i>ICD10 Diagnosis by Program</i>	<ul style="list-style-type: none"> <li>• Report of open clients and their ICD 10 (or lack thereof) diagnosis.</li> </ul>
<i>KTA Census</i>	<ul style="list-style-type: none"> <li>• Report by date range and special population category of clients in the user's system code. Special Populations include: KTA - Class Eligibility, KTA – Subclass Eligibility, Pending Open Case Decision and Referral Only.</li> </ul>
<i>Missing CSI By Program</i>	<ul style="list-style-type: none"> <li>• Shows all clients in a date range with missing CSI elements.</li> </ul>
<i>Non DHCS ICD-10 Diagnosis</i>	<ul style="list-style-type: none"> <li>• Report identifies clients who have an ICD10 Diagnosis that is not on the list of those approved by DHCS.</li> </ul>
<i>Practitioner Productivity by Program</i>	<ul style="list-style-type: none"> <li>• This report can be run by Program OR System Code.</li> <li>• The report identifies all services provided within a date range entered by the user.</li> <li>• The data is grouped by Practitioner and is duration based.</li> <li>• Tracks billable/non-billable minutes.</li> <li>• Also helpful for clinicians who are tracking their hours.</li> </ul>
<i>Progress Notes Remaining in Draft</i>	<ul style="list-style-type: none"> <li>• Reflects any note in draft within a timeframe.</li> </ul>
<i>Progress Note Staff Report</i>	<ul style="list-style-type: none"> <li>• Staff based version of the progress notes report, allows for reporting for one or more staff from your system code, flags notes missing co-signatures and in pending draft status.</li> <li>• Summarizes by practitioner total hours and counts of notes.</li> </ul>
<i>Progress Note Timeliness Report</i>	<ul style="list-style-type: none"> <li>• For a single program, for a selected date range, this reports all progress notes where the number of days between the service and the entry of the note exceed a user defined number.</li> <li>• Data exported (to Excel) from this report allows providers to see timeliness trends.</li> <li>• Report also shows notes which are in draft.</li> </ul>
<i>Progress Note To-Do Report</i>	<ul style="list-style-type: none"> <li>• User based, allows for viewing pending progress notes in detail in the same order they appear in the to-do screen.</li> <li>• Specifically pulls progress notes which are in draft or 'pending approval'.</li> <li>• Similar to the Progress Note Staff Report.</li> </ul>
<i>Progress Note User Daily Report</i>	<ul style="list-style-type: none"> <li>• Provides progress notes for a selected user for a specific date.</li> </ul>
<i>Provider Last Service Report</i>	<ul style="list-style-type: none"> <li>• Provides a list of currently open clients with their last date of service (and days since) where the services was not Unknown or a Phone service.</li> <li>• This helps us track any gaps of service.</li> </ul>
<i>Services by Classification</i>	<ul style="list-style-type: none"> <li>• Based on the system code of the logged in user, shows services provided in a selected date range based on a selected list of service codes and practitioner classifications.</li> <li>• Helpful in identifying billings that were claimed out of class.</li> </ul>

<i>Service Duration Outliers</i>	<ul style="list-style-type: none"> <li>• Reflects services between a timeframe by Program and you can indicate services with durations greater than an amount of minutes to flag in the report.</li> <li>• It is recommended to review these notes to ensure detail in the notes justify length of service because they can be denied.</li> </ul>
<i>SR 2.0 Dispositions by Program</i>	<ul style="list-style-type: none"> <li>• Service requests with a response disposition to the program selected during the date range.</li> <li>• Helps you track service requesting going in and out of the program. If you have questions about that status of your service request, there should be a hyperlink attached to the client that can give you more details instead of calling Access.</li> </ul>
<i>Summary of Services by Program</i>	<ul style="list-style-type: none"> <li>• Summary service report. Reports totals for services in a date range where the cost of service is greater than \$0.</li> <li>• Break down of units per service code (e.g. number of assessments, case management, etc.) and provides total number of units depending on the time frame you provide. It can also show how many services were out in the community, type of evidence based practices used, non-billable services (e.g., non-billables, no shows, cancellations, etc.).</li> <li>• Catches any codes that cannot be billed in a specific program.</li> <li>• Also used for general revenue tracking.</li> </ul>

For a complete list of Avatar Report Inventory, please reference the Avatar Support page on the Behavioral Health website: <http://www.dhhs.saccounty.net/BHS/Avatar/Pages/GI-Support.aspx>