



How to use the Provider Rate History Report

(Updated 06/09/2022)

The **Provider Rate History Report** allows Providers and CMEs to view rates for Service Prior Authorizations in a specified date range (to a maximum of one year). This report will only return results for services that use a fixed rate. Providers can use this report to make income projections based on the rate history for services they have provided.

Report data is updated with the most current rate information at 6:00AM each Sunday. This report can also be impacted by factors such as an individual's ONA Service Group, Bed Capacity, implementation of Add On, or System-Wide Rate Changes.

NOTE: With the implementation of the Compass Project, rates for certain services are no longer visible from the results list when searching in the **Find Service Prior Authorization** page. Users can still review the rate history table that appears on the **View Service Prior Authorization** page under the **Rates** section.

To run the Provider Rate History Report:

1. Log in to eXPRS.

Login	
Login Name:	userID
Password:	•••••
	Submit

2. From the left-hand, navigational menu, select **Reports** → **Provider Rate History.**

Client Provider Contracts	My Notifications
Prior Authorization	Filtered By Type All Notification Type
Plan Of Care Claims Liabilities	Fir
Reports	Client Enrollment
Financial Main tenar	e≯ Client Liability
	CPA Unclaimed Balance
	Outstanding Provider Liability
	Payment Detail
	Provider Payment Summary
	Provider Rate History
	PSW Weekly Hours Cap
	Remittance Advice
	Remittance Advice Monthly
	Suspended Claim

- 3. On the **Provider Rate History Report Criteria Page,** enter the criteria required to find the desired rates & select **Find**.
 - Date Range Start & Date Range End are required fields.
 - All search criteria options are defined in Appendix A.



- 4. Matching results will return in a list below the search fields. The results list is exportable by selecting an option at the far-right top of the results list.
 - The results list data columns are defined in Appendix B.

Results Screenshot Pt. 1

Client Prime	¢	Client Name		Contractor Name ≑	Rendering Provider	4	Provider ID \$	Service Location	4	Service Location ¢ ID	Rate Effective \$ Date	Rate End ≑ Date	Rate 韋	Maximum Authorized ≑ Amount
							477984			2440753	5/1/2022	4/30/2023	\$871.09	\$317,947.85
							477984			37227497	5/1/2022	8/31/2022	\$871.09	\$109,604.07
			1				477984			37227497	9/1/2022	9/30/2022	\$871.09	\$26,132.70

Results Screenshot Pt. 2

	Export options: 🕢 CSV 🗶 Excel 🔁 PDF 🔂 RTF								RTF			
Auth Id 🗘	Auth Effective \$ Date	Auth End ¢ Date	Service Element [‡]	Proc Code \$	Svc Modifier ¢ Cd	Status 💠	Authorized Units ‡	Unit Type 🗘	Frequency \$	Service Group ‡	Bed Capacity ≑	Add On \$
49230881	5/1/2022	4/30/2023	142	ORCGH	NA	Accepted	1.00	Days	Day	5	3	\$0.00
49394563	5/1/2022	9/30/2022	142	ORCGH	NA	Accepted	1.00	Days	Day	5	3	\$20.00
49394563	5/1/2022	9/30/2022	142	ORCGH	NA	Accepted	1.00	Days	Day	5	3	\$0.00

5. Each report entry row shows the rate's Effective Date and End date. In the example below, we see there is 1 Service Prior Authorization from 5/1/2022 to 1/31/2023, but there are three rows, each with the rates during that period.



- <u>Row #1</u>: Report entry row has a rate of \$871.09 from 5/1/2022 to 9/2/2022 for SPA ID #49394602
 - This means that during the period from 5/1/2022 to 9/2/2022, Service Delivered Billing Entries were paid at a rate of \$871.09 for this SPA.
- <u>Row #2</u>: Report entry row has a rate of \$800.00 From 9/3/2022 to 10/31/2022 for SPA ID #49394602

- This means that during the period from 9/3/2022 to 10/31/2022, Service Delivered Billing Entries were paid at a rate of \$800.00 for this SPA.
- <u>Row #3</u>: Report entry row has a rate of \$871.09 From 11/1/2022 to 01/31/2023 for SPA ID #49394602
 - This means that during the period from 11/1/2022 to 01/31/2023, Service Delivered Billing Entries were paid at a rate of \$871.09 for this SPA.

APPENDIX A: Provider Rate History Report Criteria

Provider Rate History Report Criteria

Report gives a snapshot of the rates and authorizations for services during a specified date range. This report is intended to give providers a tool to make income projections based on the rate history. Rates reflected in this report are not live, and can be impacted by factors including an individual's ONA and Service Group, system-wide rate changes, and changes in provider Bed Capacity.

Users can refine results to include SPA/Authorization information and/or factors that contribute to the final rate for service. NOTE: A rate history table also appears on the View Service Prior Authorization Page in the Rates section.

Note: If criteria entered results in more than 20,000 rows, data returned will be truncated. You may need to narrow your search criteria to return a smaller dataset.

* A	Rate Effective Date:				
* B	Rate End Date:				
С	SPA ID:				
Ds	Service Location/PSW SPD Provider ID:			品	
E	Rendering/Agency eXPRS Provider ID:			#	
F	Pay To Provider ID:	и).		品	
G	Client Prime:	8	8		
Η	Service Element:			~	
. 1	Procedure Code:				~
J	Svc Modifier Cd:			~	
K	DHS Contract Num:		剐		
L	Include Authorization Info? :	● Yes ○No			
M	Include Rate Factor Information?:	● Yes ○No			
N	Max Displayed:	25 🗸			
	Fin	d Reset			

- A. Rate Effective Date = The first date in the date range being searched for when a Rate was effective for a SPA
- **B.** Rate End Date = The last date in the date range being searched for when a Rate was effective for a SPA.
- **C. SPA ID =** The Service Prior Authorization ID Number. You may not know this number.
- D. Service Location/PSW SPD Provider ID = The PSW's assigned SPD Provider ID number (or the SPD provider ID number assigned to the Agency provider's service location record) that was used on the service authorization.
- E. Rendering/Agency eXPRS Provider ID = The eXPRS Provider ID number assigned to the Agency provider's primary or parent "pay to" record for the service authorized.
- F. Pay to Provider ID = The eXPRS Provider ID number assigned to the "pay to" provider record listed on the SPA for the service authorized
- **G. Client Prime** = The ODHS prime number assigned to a specific individual receiving services.

- H. Service Element = The service category (or benefit group) for the services authorized for the individual. You may select an option from the drop-down menu, if you wish. Some providers may only have one option in this menu.
- Procedure Code = The specific service procedure code assigned to a service authorized. You may select an option from the drop-down menu, if you wish.
- J. Svc Modifier Cd = The service modifier code that works with a procedure code from the previous drop-down. You may select an option from the drop-down menu, if you wish. You may have no options in this menu, depending on what you selected in the **Procedure Code** dropdown.
- K. DHS Contract Num = The biennial contract number for the Case Management Entity (CME) who authorized the POC services for the individual.
- L. Include Authorization Info? = Defaults to Yes, which returns all columns in the results list. Selecting No will remove the SPA ID, Auth ID, Auth Effective Date, Auth End Date, Status, Proc Code, Svc Modifier Code, Authorized Units, Unit Type and Frequency Columns from the results.
- M. Include Rate Factor Information? = Defaults to Yes. In the future, selecting No will remove the Service Group, Bed Capacity and Add On from the results list.
- N. Max Displayed = The number of SD billings you wish the page to show in the results list returned. The Default is 25, but you can select a different option from the dropdown menu, if you wish.

APPENDIX B: Provider Rate History Results Columns



- 1. Client Prime = The ODHS prime number assigned to a specific individual receiving services.
- 2. Client Name = The first and last name of the individual for whom the service was authorized and delivered.
- **3. Contractor Name** = The name of the Case Management Entity who has contracted with the provider for services to the client.
- 4. Rendering Provider = The name of the Agency provider or the PSW who delivered the service billed.
- 5. **Provider ID** = The eXPRS Provider ID of the rendering Provider who delivered the service billed.
- 6. Service Location = The name of the Agency provider's service location or the PSW who delivered the service billed.
- 7. Service Location ID = The eXPRS Provider ID associated with the rendering Provider's Service Location or the PSW who delivered the service billed.



- Rate Effective Date = The effective date of the rate associated with the row's Service Prior Authorization. This date may be different from the Authorization Effective Date
- 9. Rate End Date = The end date of the rate associated with the row's Service Prior Authorization. This date may be different from the Authorization End Date
- **10. Rate** = The rate being paid for services delivered associated with the Service Prior Authorization (during the Effective Date & End Date).
- 11. Maximum Authorized Amount = The maximum amount billable for services delivered associated with the Service Prior Authorization (during the Effective Date & End Date).

- 12. Auth ID = These columns represent the eXPRS assigned number for the Service Prior Authorization (SPA) that the rate applies to. The SPA ID is a hyperlink which opens up the SPA.
- **13.** Auth Effective Date = The effective date of the Service Prior Authorization
- **14.** Auth End Date = The end date of the Service Prior Authorization
- **15.** Service Element = The Service Element (benefit category) for the service authorized and billed.
- 16. Proc Code = The service Procedure Code for the service authorized and billed.
- **17.** Svc Modifier Code = The service Modifier Code, if any, for the service authorized and billed.



- **18. Status** = The status of the Service Prior Authorization
- **19.** Authorized Units = The total number of units (e.g., hours, days, miles) of the service that is authorized to be billed for the individual. The number in this column will vary, depending on the service unit type for the service billed.
- **20.** Unit Type = The type of unit being billed (e.g., hours, days, miles)
- 21. Frequency = The limit applying to the Authorized Units field, such as "Month" or "Week" (e.g., 20 hours per month, or 20 hours per week).
- **22.** Service Group = The Oregon Needs Assessment (ONA) Service Group that applies to the individual.
- 23. Bed Capacity = The Agency Provider's bed capacity associated with the Service Prior Authorization. Depending on the service, this number may be zero.
- 24. Add On = Any applicable Add On for the Service Prior Authorization, such as a rate increase, an hour increase, or a staffing ratio increase.