BHH EDW Report Guide June 9, 2020

Finding BHH Reports

The two most useful BHH reports in the EDW are the BHH Missing Data EDW report and the BHH Clients Summery Report. Individuals may have different levels of permission and different access to folders, so don't be alarmed if you see different reports than other staff at your agency. To quickly find the BHH reports, use the search function on the EDW opening page. Type "BHH" in the search box and search. The two reports will appear. If the two reports do not appear, please contact the DMHAS helpdesk to gain access.

★ Favorites 🛛 Browse			[™] ew ∽ bhh	م
bhh		م		×
Search results for name and descr	iption including bhh .			
PAGINATED REPORTS (4)				
BHH Clients Summary	BHH Missing Data EDW	Medicaid BHH Discontinued Clients		

BHH Missing Data EDW

+ Envoritor

Purpose: Identify circumstances that prevented a service from being billed. Some of these are fixable errors. This report can be used to identify these specific fixable errors. Also, this report can identify the reason why a service did not get billed, but is not a fixable.

						<u> </u>
Home > Data Quality > BHH	Missing Data EDW					
Touch Start Date			Touch End Date			View Report
Service Start Date			Service End Date			
Facilities		~	Include Already Sent	t 🔿 True 🖲 False		
Errors		~	Programs			
Claim Item Status		~	Service Code			
Include Non-billable Programs	⊖ True False		Sort Order	Error Description, Rendering Staff, Serv	vice Date \checkmark	
Include No Medicaid Number Found	○ True False					

Step 1: Enter Touch Start and End Dates & Service Start and End Dates

Touch date allows the most current information to be displayed in the report. Touch dates are different from service start and end dates. Expanding the touch end date beyond the end service date will incorporate changes or modifications done to the service after the end service date. The service start and the touch start should be the same date.

Touch Start date is always the beginning of the period you are looking at. For example, if you were interested in looking at data for the month of March 2020, the touch start date would be 03/01/2020. Your touch end date will be the day you are running the report.

★ Favorites 🛛 Browse	- ·					
Home > Data Quality > BHH	Missing Data EDW					
Touch Start Date			Touch End Date			View Report
Service Start Date			Service End Date			
Facilities		~	Include Already Sent	🔿 True 🖲 False		
Errors		~	Programs		M	
Claim Item Status		~	Service Code			
Include Non-billable Programs	⊖ True False		Sort Order	Error Description, Rendering Staff, Ser	vice Date 🖂	
Include No Medicaid Number Found	d 🔿 True 🖲 False					

Step 2: Facility Facility will be limited to your own facility/agency.

★ Favorites 🛛 Browse					
Home > Data Quality > BHH I	Vissing Data EDW				
Touch Start Date			Touch End Date	m	View Report
Service Start Date			Serve End Date		
Facilities		N		🔿 True 🖲 False	
Errors	Capitol Region Mental Health Cer				
Claim Item Status	Connecticut Mental Health Cente	~	Service Code		
Include Non-billable Programs	Southeastern Mental Health Auth		Sort Order	Error Description, Rendering Staff, Service Date $\!$	
Include No Medicaid Number Found	Western Connecticut Mental Heal				
	< >				

Step 3: Limit Error Codes

In the Error dropdown menu, remove check mark selection for BHH insurance disenrolled before 10/1/2015, BHH insurance enrollment too short, and Service date not within BHH insurance effective dates.

Home > Data Quality > BHH I	Missing Data EDW				
Touch Start Date	5/25/2020	Touch End Date	5/29/2020		View Report
Service Start Date	5/25/2020	Service End Date	6/1/2020		
Facilities	×	Include Already Sen	t 🔿 True 🖲 False		
Errors	BHH insurance disenrolled before 10/1	Programs			
Claim Item Status	Gelect All)	ode			
Include Non-billable Programs	BHH insurance enrollment too short	38	ff, Sei	vice Date 🗸	
Include No Medicaid Number Found	Client under 21 at service date Duration less than 8 minutes Invalid Service Location				
	Non BHH Program				
	Service date not within BHH insurance effectiv	ve dates			
		1			

Step 4: Choose Program

🛨 Favorites 🛛 🗌 Browse

The report gives you the option of selecting only certain programs. In most situations, it is best to choose all programs, download the data and then complete any selections or filtering in Excel.

Touch Start Date	6/2/2020		Touch End Date	6/2/2020	m	View Report
Service Start Date	6/2/2020		Service End Date	6/2/2020		
Facilities		. ~	Include Already Sen	t 🔿 True 🖲 False		
Errors		~	Programs	ļ		
Claim Item Status		•	Service Code			
Include Non-billable Programs	🔿 True 🖲 False		Sort Order	<select a="" value=""></select>	~	

Step 5: Claim Item Status

The choices will be different for Private Non-Profit agencies and State Operated Facilities. Private Non-Profit agencies will have only one choice – DDaP. State Facilities will be able to limit report results to certain categories. As with other options, it is best to choose all and filter or select in Excel once the data is downloaded.

Step 6: Service Code

The report gives you the option of selecting only certain services codes. In most situations, it is best to choose all codes, download the data and then complete any selections or filtering in Excel.

★ Favorites 🛛 🗌 Browse					
Home > Data Quality > BHH	Missing Data EDW				
Touch Start Date	5/25/2020	Touch End Date	5/29/2020		View Report
Service Start Date	5/25/2020	Service End Date	6/1/2020		
Facilities	<u> </u>	Include Already Ser	nt 🔿 True 🖲 False		
Errors	Client under 21 at service date,Duration	Programs		<u> </u>	
Claim Item Status	×	Service Code			
Include Non-billable Programs	⊖ True	Sort Order	Celect All)	Cice D	
Include No Medicaid Number Found	True 🖲 False		G8431 G8510		
			П н2027		
			H2027B		
			Пт1016	~	

Step 7: Include Non-Billable Programs and No Medicaid Number Found For these two questions, you should select true.

Home > Data Quality > BHH	Missing Data EDW					
Touch Start Date	5/25/2020	Ē	Touch End Date	5/29/2020		View Report
Service Start Date	5/25/2020		Service End Date	6/1/2020		
Facilities		~	Include Already Sen	t 🔿 True 🖲 False		
Errors	BHH insurance disenrolled before 10/1	M	Programs			
Claim Item Status		M	Service Code			
Include Non-billable Programs	True ○ False		Sort Order	Error Description, Rendering Staff, Serv	vice Date 🗸	
Include No Medicaid Number Found	True ○ False					

Step 8: Sort Order

Choose the order that works best. In most cases, it is best to leave this on the default value and complete any sorting in Excel once the data are downloaded.

Home > Data Quality > BHH	Missing Data EDW				
Touch Start Date	5/25/2020	Touch End Date	5/29/2020		View Report
Service Start Date	5/25/2020	Service End Date	6/1/2020		
Facilities	· · ·	Include Already Ser	it 🔿 True 🖲 False		
Errors	BHH insurance disenrolled before 10/1	Programs			
Claim Item Status	×	Service Code			
Include Non-billable Programs	● True ○ False	Sort Order	Error Description, Rendering Staff, Servie	ce Date	
Include No Medicaid Number Found	● True ○ False		Client Name, Encounter ID Program Name, Rendering Staff, Service Rendering Staff, Error Code, Service Dat	e Date	

Step 9: Run and Download Report Results

Select the disk icon to see download options. Select CSV format as it provides a clean version of the data. Open and save the file in an Excel format.



Step 10: Remove Unnecessary Error Codes

In order to create a list of all service where a client was served but not billed, error codes that are no longer used or needed must be filtered out. In the Error_Codes column, select filter and filter out the unneeded error codes. The intent is to limit the list to combinations of certain error codes.

	Y	/1	\bullet (*) f_x	Error_Codes						
1	S	Т		U		V	W	X		Z
1	Servi	Service 🔻	Service_Location	_Description	*	Program_Cod 🔻	Program_Description	-	Error_Codes	-
2		11	Office			L98000	Program435		5320, 5330,	
3		53	Community Men	tal Health Center		L98789	Program342		5030, 5160, 5250, 5005	6
4		99	Other Communit	y Location		L99578	Program249		5030, 5160, 5250, 5005	i,
5		12	Home			L99578	Program249		5030, 5160, 5250, 5005	
6		99	Other Communit	y Location		L98789	Program342		5030, 5160, 5250, 5005	,
7		99	Other Communit	y Location		L98789	Program342		5030, 5160, 5250, 5005	

A S	TU	V	W			Y		Z	AA	AB	AC	AD	AE	4 🔺
1 Serv - S	Service Service_Location_Description	Program_Cod *	Program_Descri	iptior	n 💌 S 👻 Error_C	odes	-							
2	11 Office	L98000	Program435	A.	Sort A to		_							
3	53 Community Mental Health Center	L98789	Program342	Z.	Sort Z to A									
4	99 Other Community Location	L99578	Program249		Sort by Color					162				
5	12 Home	L99578	Program249		Joig by Color									
6	99 Other Community Location	L98789	Program342	5	<u>Clear Filter From "</u>	Error_Codes"								
7	99 Other Community Location	L98789	Program342		Filter by Color					100				
8	99 Other Community Location	L99578	Program249		Text Filters					•				
9	99 Other Community Location	L99578	Program249		Carrie					0				
10	99 Other Community Location	L99578	Program249		Search					2				
11	99 Other Community Location	L100367	Program156		(Select All)					^				
12	12 Home	L99578	m249		₹ 5020, 5030,	5005								
13	99 Other Community Location				✓ 5020, 5030,	5350,								
14	99 Other Community Location				✓ 5020, 5030,	5420,								
15	99 Other Community Location				5020, 5030,	5420, 5005,								
16	99 Other Community Location				S020, 5030,	5420, 5350, 5005								
17	99 Other Community Location	L99578	um249		✓ 5020, 5250,									
18	53 Community Mental Health Center	L98789	rogram342		- 🗹 5020, 5250,	5350,								
10	E2 Community Montal Health Contor	1101045	Drogram 20		5020, 5250,	5810,								

Filter for combinations of yellow highlighted codes only, if there is a code that is highlighted in yellow along with a code that is not highlighted in yellow, you do not want to select that row.

5005Multiple Services in a month5020No Medicaid Insurance5030No BHH Medicaid Insurance5130Missing ICD-10 Diagnosis5160Client under 21 at service date5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5020No Medicaid Insurance5030No BHH Medicaid Insurance5130Missing ICD-10 Diagnosis5160Client under 21 at service date5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5030No BHH Medicaid Insurance5130Missing ICD-10 Diagnosis5160Client under 21 at service date5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5130Missing ICD-10 Diagnosis5160Client under 21 at service date5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5160Client under 21 at service date5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5210Missing Medicaid #5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5225Service Date more than 365 days old5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5230Invalid Medicaid #5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5240Invalid Medicaid #5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5250Unmatched BHH Medicaid and Medicaid insurance record5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5260Invalid BHH Medicaid #5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5270Invalid BHH Medicaid #5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5310Future Service Date5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5320Service date not within BHH insurance effective dates5330BHH insurance enrollment too short5340BHH insurance disenrolled before 10/1/20155350Duration less than 8 minutes
5330 BHH insurance enrollment too short 5340 BHH insurance disenrolled before 10/1/2015 5350 Duration less than 8 minutes
5340 BHH insurance disenrolled before 10/1/2015 5350 Duration less than 8 minutes
5350 Duration less than 8 minutes
5360 Both BHH and BHH Waiver Insurance
5410 Missing or invalid BHH provider code
5420 Non BHH Program
5810 Invalid waiver service code or location
5820 Invalid Service Location
5950 Batch Already Sent
5960 TCM Already Sent

Once the list is filtered, you will have each actual service that was not billed.

Tip: copy the filtered data to a new tab in case the filter is removed, otherwise the data that was just unselected will reappear.

Step 11: Identify Fixable Errors

The errors highlighted below are fixable. If a service has an error that includes only one or a combination of the highlighted errors, that particular error can be fixed and the service resubmitted. If there is a combination of fixable and not fixable errors, the particular service cannot be corrected. However, the fixable portion should be investigated and fixed to prevent future errors that occur independently.

Error_Number	Description
5005	Multiple Services in a month
<mark>5020</mark>	No Medicaid Insurance
5030	No BHH Medicaid Insurance
<mark>5130</mark>	Missing ICD-10 Diagnosis
5160	Client under 21 at service date
<mark>5210</mark>	Missing Medicaid #
5225	Service Date more than 365 days old
<mark>5230</mark>	Invalid Medicaid #

Error_Number	Description
<mark>5240</mark>	Invalid Medicaid #
<mark>5250</mark>	Unmatched BHH Medicaid and Medicaid insurance record
<mark>5260</mark>	Invalid BHH Medicaid #
<mark>5270</mark>	Invalid BHH Medicaid #
5310	Future Service Date
5320	Service date not within BHH insurance effective dates
5330	BHH insurance enrollment too short
5340	BHH insurance disenrolled before 10/1/2015
5350	Duration less than 8 minutes
<mark>5360</mark>	Both BHH and BHH Waiver Insurance
5410	Missing or invalid BHH provider code
5420	Non BHH Program
5810	Invalid waiver service code or location
5820	Invalid Service Location
5950	Batch Already Sent
5960	TCM Already Sent

BHH Clients Summary

Purpose: To examine roster and look at services provided to BHH enrolled clients over a given time period.

★ Favorites	L' Browse		
Home > Out	come Measures > BHH Clients Summar	,	
Start Date		End Date	View Report
Provider	×	Insurance Type	
Collapse Groups	● True ○ False		

Step 1: Choose a Start Date and End Date

★ Favorites	Browse		
Home > Out	tcome Measures > BHH Clients Summary		
Start Date	5/1/2020	End Date 5/31/2020	View Report
Provider	~	Insurance Type	
Collapse Group	s True False 		

Step 2: Provider

Provider will default to agency.

* Favorites	L' Browse		
Home > O	utcome Measures > BHH Clients Summ	ry	
Start Date	5/1/2020	hd Date 5/31/2020 📾	ew Report
Provider	×	Туре	
Collapse Grou	ps 💿 True 🔿 False		

Step 3: Select Insurance Type

The report can be run for BHH and BHH Waiver clients separately or together. It is best to run for all and sort/filter in Excel after report download.

★ Favorites	Browse					
Home > Out	come Measures > BHH Clients Sur	nmary				
Start Date	5/1/2020		End Date	5/31/2020		View Report
Provider		~	Insurance Type		M	
Collapse Groups	● True ○ False			(Select All) Medicaid BHH		
				Medicaid BHH - Waiver		

Step 4: Run report and save as CSV

Home > Out	come Measures > BHH Clients :	Summary									
Start Date	5/1/2020		End Date 5/	31/2020							View Report
Provider	BH Care	×	Insurance Type	edicaid BH	H,Medicaid	BHH - V	/aiver				
Collapse Groups	; True False										
⊲ < 1	of 1 > ⊳ Č	e	100% ~		ß		Find Next				
dmhas			Department o	f ^{Word}			tion Services				
	F	rom: 5/1/20)20	Excel			To: 5/31/202	20			
				Power	Point				Total Admits	Total Unduplicated Clients	
BH Care				PDF					689	374	
/Outcome Measures/B	HH Clients Summary CC#CC#3985			TIFF fil	le			Run Date: 6/2/2	0 14:11 PM	Page 1 of 1	
				MHTN	1L (web arc	hive)					
		CSV (comma delimited)									

Use tools in Excel to Manipulate Reports

The downloaded BHH Clients Summary report can be manipulated in Excel to answer questions and provide useful information.

Determining Roster

Step 1: In Excel, select all columns except for Client Last Name, Client First Name and MPI.

11	• : ×	$\sqrt{-f_X}$	BCS_Clie	ent_ID										
	А	В	С	D	E	F	G	н	L.	J	к	L	м	N
1	PROVIDER	TotalAdm	TotalUndu	Client_Last_Name	Client_First_Name	Date_of_Birth	Gender	MPI	BCS Client ID	ProgramName	ProgramCode	InsuranceType	Policy	Insuranc
2	Your Agency	1318	378	LastName1	A	10/1/1900	Female	00010001	43556443	Program0001	L0009	Medicaid BHH	98000023	2/29/
3	Your Agency	1318	378	LastName1	A	10/1/1900	Female	00010001	43556443	Program0002	L0010	Medicaid BHH	98000023	2/29/
4	Your Agency	1318	378	LastName2	В	10/1/1900	Female	00010002	43558443	Program0003	L0011	Medicaid BHH	98000024	2/29/
5	Your Agency	1318	378	LastName3	С	10/1/1900	Female	00010003	43560443	Program0004	L0012	Medicaid BHH	98000025	2/29/
6	Your Agency	1318	378	LastName3	С	10/1/1900	Female	00010003	43560443	Program0004	L0012	Medicaid BHH	98000025	2/29/
7	Your Agency	1318	378	LastName3	C	10/1/1900	Female	00010003	43560443	Program0004	L0012	Medicaid BHH	98000025	2/29/
8	Your Agency	1318	378	LastName3	с	10/1/1900	Female	00010003	43560443	Program0003	L0011	Medicaid BHH	98000025	2/29/
9	Your Agency	1318	378	LastName4	D	10/1/1900	Female	00010004	43562443	Program0001	L0009	Medicaid BHH	98000026	2/29/
10	Your Agency	1318	378	LastName5	E	10/1/1900	Female	00010005	43564443	Program0002	L0010	Medicaid BHH	98000027	2/29/
11	Your Agency	1318	378	LastName6	F	10/1/1900	Female	00010006	43566443	Program0001	L0009	Medicaid BHH	98000028	2/29/
12	Your Agency	1318	378	LastName7	G	10/1/1900	Female	00010007	43568443	Program0001	L0009	Medicaid BHH	98000029	2/29/
13	Your Agency	1318	378	LastName7	G	10/1/1900	Female	00010007	43568443	Program0005	L0013	Medicaid BHH	98000029	2/29/
14	Your Agency	1318	378	LastName7	G	10/1/1900	Female	00010007	43568443	Program0006	L0014	Medicaid BHH	98000029	2/29/
15	Your Agency	1318	378	LastName7	G	10/1/1900	Female	00010007	43568443	Program0003	L0011	Medicaid BHH	98000029	2/29/
16	Your Agency	1318	378	LastName8	н	10/1/1900	Female	00010008	43570443	Program0002	L0010	Medicaid BHH - V	Wa 98000030	2/29/
17	Your Agency	1318	378	LastName9	1	10/1/1900	Female	00010009	43572443	Program0004	L0012	Medicaid BHH	98000031	2/29/
18	Your Agency	1318	378	LastName9	1	10/1/1900	Female	00010009	43572443	Program0003	L0011	Medicaid BHH	98000031	2/29/
19	Your Agency	1318	378	LastName10	J	10/1/1900	Female	00010010	43574443	Program0001	L0009	Medicaid BHH	98000032	2/29/
20	Your Agency	1318	378	LastName10	J	10/1/1900	Female	00010010	43574443	Program0007	L0015	Medicaid BHH	98000032	2/29/
21	Your Agency	1318	378	LastName10	J	10/1/1900	Female	00010010	43574443	Program0008	L0016	Medicaid BHH	98000032	2/29/
22	Your Agency	1318	378	LastName10	J	10/1/1900	Female	00010010	43574443	Program0008	L0016	Medicaid BHH	98000032	2/29/
23	Your Agency	1318	378	LastName10	J	10/1/1900	Female	00010010	43574443	Program0008	L0016	Medicaid BHH	98000032	2/29/

Step 2: Delete highlighted columns.

3	a 5-∂-∓					Sample BHH	H Clients Summ	ary.xlsx - Ex	cel						Ē	-	٥	×
F	ile Home Inse	ert Page Layo	out Forn	nulas Data Re	wiew View Dev	eloper 🛛	Tell me what y	ou want to d	do							Sign in	P₄ Sh	iare
Pa	te of Cut Copy → te of Format Painter Clipboard ਯ	Calibri B I U + Fi	• 11 • 	A A = = = • A • = = = □	Wrap Te	ext & Center ≁ ⊓≊	General \$ - % * Number	* *00 .000 Fa	Conditional Forma Formatting + Table Styles	t as Cell * Styles*	nsert [Delete F	ormat ete Cells	AutoSum Fill + Clear +	* Zy Sort 8 Filter	Find & Select *		^
11	· · · · · · · · · · · · · · · · · · ·	< 🗸 f _x	BCS_Clie	ent_ID								× Del	ete Sheet <u>R</u> ov	W5				~
	А	В	с	D	E	F	G	н	1 1			Del	ete Sheet <u>C</u> ol	lumns		м	r	N A
1	PROVIDER	TotalAdm	TotalUnd	Client Last Name	Client First Name	Date of Bi	rth Gender	MPI	BCS Client ID	Progra vam	e	X Del	ete <u>S</u> heet		ype	Policy	Insura	nce
2	Your Agency	1318	378	LastName1	A	10/1/1	900 Female	0001000	1 43556443	Program0001	LC	0009	N	ledicaid I	внн	98000023	2/2	9/1
З	Your Agency	1318	378	LastName1	A	10/1/1	900 Female	0001000	1 43556443	Program0002	LO	0010	N	ledicaid I	внн	98000023	2/2	9/1
4	Your Agency	1318	378	LastName2	В	10/1/1	900 Female	0001000	2 43558443	Program0003	LC	0011	N	ledicaid I	внн	98000024	2/2	9/1
5	Your Agency	1318	378	LastName3	с	10/1/1	900 Female	0001000	3 43560443	Program0004	LC	0012	N	ledicaid I	внн	98000025	2/2	9/1
6	Your Agency	1318	378	LastName3	С	10/1/1	900 Female	0001000	3 43560443	Program0004	LC	0012	N	ledicaid I	внн	98000025	2/2	9/1
7	Your Agency	1318	378	LastName3	с	10/1/1	900 Female	0001000	3 43560443	Program0004	LC	0012	N	ledicaid I	внн	98000025	2/2	9/1
8	Your Agency	1318	378	LastName3	с	10/1/1	900 Female	0001000	3 43560443	Program0003	LC	0011	N	ledicaid I	внн	98000025	2/2	9/1
9	Your Agency	1318	378	LastName4	D	10/1/1	900 Female	0001000	4 43562443	Program0001	LC	0009	N	ledicaid I	внн	98000026	2/2	9/1
10	Your Agency	1318	378	LastName5	E	10/1/1	900 Female	0001000	5 43564443	Program0002	LC	0010	N	ledicaid I	внн	98000027	2/2	9/1
11	Your Agency	1318	378	LastName6	F	10/1/1	900 Female	0001000	6 43566443	Program0001	LO	0009	N	ledicaid I	внн	98000028	2/2	9/1

Step 3: Select remaining columns.

Pas	te Clipboard	Calibri - B I U - Font	11 ▼ A A ▼ 20 ▼ A	· = = · = = :	■ 🇞 ·	F Wra Me	ap Text rge & Center	Gene • \$ •	ral % * Number	▼ €.0 .00 Fo Fo	onditional ormatting *	Format as Table * Styles	Cell Styles *	nsert Delete	Format	∑ AutoSum ↓ Fill → Clear →<br Ec	Sort & F Filter * S	ind & elect *	
A1		× √ <i>f</i> _x C	lient_Last_Na	me															
	А	В	С	D	E	F	G	н	1.1	J	к	L	м	N	0	Р	Q	R	S
1	Client_Last_Name	Client_First_Name	MPI																
2	LastName1	A	00010001																
3	LastName1	A	00010001																
4	LastName2	В	00010002																
5	LastName3	С	00010003																
6	LastName3	С	00010003																
7	LastName3	С	00010003																
8	LastName3	С	00010003																
9	LastName4	D	00010004																
10	LastName5	E	00010005																
11	LastName6	F	00010006																
12	LastName7	G	00010007																

Step 4: Remove Duplicates

Select enitre list. In the data tab, select remove duplicates. Make sure "My data has headers" is checked. Choose OK.

Ĩ	File Home	Insert	Page Layou	ut Formulas	Data	Review	View	Develop	er Q 1	fell me what y	ou want to								Sign in	R s
	From Access From Web From Text Si Get Ext	om Other ources * ternal Data	Existing Connections	New Query + Co Rec Get & Trar	w Qu ent 1 asfo	Refresh All •	Connections	tions A ies Z ks	Sort	Filter	ear apply Ivanced	Text to Columns	Flash Fill Remove D	+ Duplicates lation • 6 Data Tools	© Conecculate	odel	What-If Fe Analysis * Foreca	orecast Sheet st	Group - GUngroup Subtotal Outline	* 1.1. 1.1.
A	2 👻	: ×	$\sqrt{-f_x}$	LastName1																
	A		В	С	D	E	F	G	н	1	J	K	L	м	N	0	Р	Q	R	1
1	Client_Last_Na	ame Clier	nt_First_Nam	ne MPI																
2	LastName1	A		00010001																
3	LastName1	A		00010001																
4	LastName2	В		00010002																
5	LastName3	С		00010003																
6	LastName3	С		00010003																
7	LastName3	С		00010003	(
8	LastName3	С		C Remove D	uplicates					? X										
9	LastName4	D		¢																
10	LastName5	E		c lo delete	duplicate va	lues, select	one or more	columns th	at contain o	duplicates.										
11	LastName6	F		C § Sel	ect All	Unselec	t All	$\mathbf{\nabla}$	My data h	as headers 🧹	-									
12	LastName7	G		c							3									
13	LastName7	G		Columns																
14	LastName7	G		Client	Last Name					- 1										
15	LastName7	G		C Client	First_Name															
16	LastName8	н		C 🖂 MPI																
17	LastName9	1		¢																
18	LastName9	I		c																
19	LastName10	J		c		_														
20	LastName10	J		C			4		ок	Cancel										
21	LastName10	J		¢			-													
22	LastName10	J		00010010																
23	LastName10	J		00010010																

Step 5: Complete unduplicated roster list.

F	ile Home	Insert	Page Layout	Formulas	Data	Review	View	Develope	⊮ ⊊	Tell me v	what you want	to do								Sign in	A Shar
	From Access From Web From Text Sc	m Other ources * C	Existing Connections	New Query + Co Rece	v Queries n Table nt Sources	Refresh All *	Connection Properties	is 2↓ Z↓	Z A A Z Sort	Filter	Clear	Text	to	ish Fill move Dupli ita Validatior	l+ cates 🕰	Consolidate	s a Model	What-If Analysis	Forecast Sheet	Group Group Ungroup	- 19 - 19
	Get Ext	ernal Data		Get & Tran	sform	Co	onnections			Sort & Fill	ter			Dat	a Tools			Fore	cast	Outline	F2
	•	: ×	√ fx	LastName1																	
4	A		В	C	D	E	F	G	н		I J	1	к	L	м	N	0	Р	Q	R	S
1	Client_Last_Na	me Client	_First_Name	MPI																	
2	LastName1	A		00010001																	
3	LastName2	в		00010002																	
4	LastName3	С		00010003																	
5	LastName4	D		00010004																	
6	LastName5	E		00010005			_														
7	LastName6	F		00010006			Microsoft I	xcel						×							
8	LastName7	G		00010007																	
9	LastName8	н		00010008				940 dupl	icate valu	les found	and removed:	78 uniqu	e values re	emain.							
10	LastName9	I		00010009																	
11	LastName10	J		00010010							OK										
12	LastName11	К		00010011			-			-											
13	LastName12	L		00010012																	

List of Clients with Services

Step 1: Remove Clients with no Services

Under the Home Tab, choose filter.

4	. 5.	¢.								Samp	le BHH (Clients Summaŋ		xcel							m			
	File	Home	Insert	Page L	ayout F	ormulas	Data	Review	View	v Developer	Q 1	Tell me what you	want to	o do								Sign in	R₄ s	hare
P	Clip	1	G E	alibri 3 I <u>U</u>	• 11 • ⊞ • , Font	- A - <u>A</u>	A* ≡ .* ≡	= = *	Alignmer	Wrap Text Merge & Cente t	G r + : 15	ieneral \$ - % + Number	▼ 00.00 00.00 15	Cond Forma	itional Form atting + Tab Styles	at as Ci le≁ Styl	ell Insert	t Delete Form	nat ∑ Auto ↓ Fill + ≪ Clear	Sum + S F Editi	Arrow Filter ▼ Arrow Arrow	Find & Select *		~
Т	1		×	√ fs	CPT													-		1	Z↓ Sg	ort Z to A	. [*
1	M		N	0	р		Q	R		S	1	U	1 1	v	W	x	Y	2		AB	U CI	ustom Son		
1	Policy	Insu	anceSta	Insurance	eE AdmitDa	ate Di	ischarge	TotalServi	OtherN	edicaidStatus	CPT	Descript	ic Start	Date	EndDate	Unit	Service	D Z		dion	T E	lter	1	
2	9800003	23 2/	29/1900		3/16	6/1900		10	Yes, Me	dicaid								A DESCRIPTION OF TAXABLE PARTY.			ix ⊆i	ear		
3	980000	23 2/	29/1900		3/17	7/1900		10	Yes, Me	dicaid	T116	B Case Ma	ni 1/22	/2020	1/22/2020		1	10 Minutes	(e		Re Re	apply		
4	9800002	24 2/	29/1900		3/18	3/1900			Yes, Me	dicaid													_	
5	980000	25 2/	29/1900		3/19	/1900		315	Yes, Me	dicaid	T101	6 Case Ma	n: 1/9	/2020	1/9/2020		1	90 Minutes	Other Com	munity L	ocatic	n		
6	980000	25 2/	29/1900		3/20	/1900		315	Yes, Me	dicaid	T101	6 Case Ma	n: 1/16	/2020	1/16/2020		1 1	50 Minutes	Other Com	munity L	ocatic	n		
7	980000	25 2/	29/1900		3/21	/1900		315	Yes, Me	dicaid	T101	6 Case Ma	n: 1/21	/2020	1/21/2020		1	60 Minutes	Other Com	munity L	ocatio	n		
8	980000	25 2/	29/1900		3/22	/1900		315	Yes. Me	dicaid	T116	C Case Ma	n. 1/2	/2020	1/2/2020		1	15 Minutes	Office					

Filter on CPT code. Uncheck all codes leaving only blanks.

4	File Home	Insert Page Lay	out Formulas	Data Re	eview View De	eveloper Q T	ell me what you								Sign ir	n 🤉 Sha	re
Pa	Cut Copy + Second Copy +	Calibri B I U -	- 11 - A A A		Image: Symplemetry of the symplem	Text Genter + \$	eneral	.0 .00 00 ⇒.0	Conditional For Formatting * T	rmat as Cell able + Styles	Insert I	Delete Format	∑ AutoS ↓ Fill + € Clear	um * AZY Sort & Filter	k Find &		
	Clipboard	rg.	Font G		Alignment	ra i	Number	F2	Styl	les		Cells		Editing			
T	1 * :	$\times \checkmark f_x$	CPT										1				
	L J	ĸ	L	м	N O	р	Q	F	2	s	т			w	х	Y	1
1	ProgramName -	ProgramCode 💌	InsuranceType 💌	Policy 🔻	Insurances 💌 Insura	n 💌 AdmitDate	e 🔻 Dischar 👻	Total	Se 🔻 OtherMed	dicaidStatus	CPT	1		EndDate 🔻	Unit 💌	Service 🔻	-
2	Program0001	L0009	Medicaid BHH	98000023	2/29/1900	3/16/1	.900	₽J	Sort A to Z				1				
3	Program0002	L0010	Medicaid BHH	98000023	2/29/1900	3/17/1	.900	Z.	Sort Z to A			Case	1/22/2020	1/22/2020	1	. 10	.0
4	Program0003	L0011	Medicaid BHH	98000024	2/29/1900	3/18/1	.900		- Sort by Color								
5	Program0004	L0012	Medicaid BHH	98000025	2/29/1900	3/19/1	.900		Sole by Color		1	Case Mana	1/9/2020	1/9/2020	1	. 9	00
6	Program0004	L0012	Medicaid BHH	98000025	2/29/1900	3/20/1	.900	×	Clear Filter From	"CPT"		Case Mana	1/16/2020	1/16/2020	1	. 15	0
7	Program0004	L0012	Medicaid BHH	98000025	2/29/1900	3/21/1	.900		Filter by Color			Case Mana	1/21/2020	1/21/2020	1	6	j0
8	Program0003	L0011	Medicaid BHH	98000025	2/29/1900	3/22/1	.900		Text <u>F</u> ilters			Case Mana	1/2/2020	1/2/2020	1	1	.5
9	Program0001	L0009	Medicaid BHH	98000026	2/29/1900	3/23/1	.900		C		0	Case Mana	1/30/2020	1/30/2020	1	. 10	.0
10	Program0002	L0010	Medicaid BHH	98000027	2/29/1900	3/24/1	.900		search		2	Case Man	1/16/2020	1/16/2020	1	. 1'	.5
11	Program0001	L0009	Medicaid BHH	98000028	2/29/1900	3/25/1	.900		(Select All	0		Case Mana	1/6/2020	1/6/2020	1	. 10	.0
12	Program0001	L0009	Medicaid BHH	98000029	2/29/1900	3/26/1	900										
13	Program0005	L0013	Medicaid BHH	98000029	2/29/1900	3/27/1	.900		- T1016								
14	Program0006	L0014	Medicaid BHH	98000029	2/29/1900	3/28/1	.900		T116B								
15	Program0003	L0011	Medicaid BHH	98000029	2/29/1900	3/29/			- T116C		\wedge	Case Mana	1/14/2020	1/14/2020	1	. 1	.5
16	Program0002	L0010	Medicaid BHH - Wa	98000030	2/29/1900	3/30/	2	-	(Blanks)			Case Man	1/30/2020	1/30/2020	1	. 20	20
17	Program0004	L0012	Medicaid BHH	98000031	2/29/1900	3/31/	2		(July (Diarika)								
18	Program0003	L0011	Medicaid BHH	98000031	2/29/1900	4/1/1	.900										
19	Program0001	L0009	Medicaid BHH	98000032	2/29/1900 6/17/1	1902 4/2/1	.900										
20	Program0007	L0015	Medicaid BHH	98000032	2/29/1900 6/17/1	1902 4/3/1	900			OK	Cancel	Case Man	1/28/2020	1/28/2020	1	3	0

After filtering, select all rows.

	File Home	Insert Page Lay	out Formulas	Data R	eview View	Developer	r ⊊Tellm	ne what you want to							Sign in	A Share
Pa	Cut Copy - Ste Clipboard	ter	- 11 - A A A ⊞ - 22 - A - Font □		i I I I I I I I I I I I I I I I I I I I	Wrap Text Merge & Cent	Genera ter - \$ -	al • % • 50 -00 Number 5	Cond	itional Format as Cel atting ▼ Table ▼ Style Styles	I Insert	Delete Format	∑ AutoSur ↓ Fill →	n • AZT Sort & Filter •	Find & Select +	
J2	2	$\times \checkmark f_x$	Program0001													
	J	K	L	М	N	0	Р	Q R		S	Т	U	V	W	х	Y
1	ProgramName 💌	ProgramCode	InsuranceType 💌	Policy 💌	Insurances 👻	Insuran 👻 A	dmitDate 💌	Dischar - Totals	ie 🔹 (OtherMedicaidStatus	▼ CPT	J Descrip 👻	StartDat 🔻 E	ndDate 👻 l	Jnit 💌	Service 👻
2	Program0001	L0009	Medicaid BHH	98000023	2/29/1900		3/16/1900		10 Y	es, Medicaid						
4	Program0003	L0011	Medicaid BHH	98000024	2/29/1900		3/18/1900		Y	res, Medicaid						
12	Program0001	L0009	Medicaid BHH	98000029	2/29/1900		3/26/1900		15 Y	res, Medicaid						
13	Program0005	L0013	Medicaid BHH	98000029	2/29/1900		3/27/1900		15 Y	es, Medicaid						
14	Program0006	L0014	Medicaid BHH	98000029	2/29/1900		3/28/1900		15 Y	res, Medicaid						
17	Program0004	L0012	Medicaid BHH	98000031	2/29/1900		3/31/1900		Y	res, Medicaid						
18	Program0003	L0011	Medicaid BHH	98000031	2/29/1900		4/1/1900		Y	es, Medicaid						
19	Program0001	L0009	Medicaid BHH	98000032	2/29/1900	6/17/1902	4/2/1900		426 Y	es, Medicaid proble	m					

Once selected, on Home tab choose delete, then delete sheet rows.

File Home	Insert Page Lay	out Formulas	Data Review	View Dev	veloper 🛛 🏹 T	ell me what you	want to do					Sign in	A Share
Paste	Calibri B I <u>U</u> +	• 11 • A A □ • 2 • ▲ •		• 🔮 Wrap Te	ext Gr & Center - \$	eneral • • % • *	→ Con Form	ditional Format as natting ∗ Table ∗ St	Insert	Delete Format	2 Sort Filte	& Find & r * Select *	
Clipt	G 1	Font r	al	Alignment	Far	Number	Fa	5		<u>■</u> elete Cells	Jiting		^
J2	$\times \checkmark f_x$	Program0001						3		Delete Sheet Rows			~
	к	L	м	N O	Р	Q	R		т	Delete Sheet Colu	mns W	X	Y A
1 ProgramName	• ProgramCode •	InsuranceType	Policy 🔻 Insur	ances Insuran	AdmitDate	Dischar 🔻	TotalSe 🔻	OtherMedicaidStat	- CPT	Delete Sheet	Date 🕶	Unit 💌	Service 👻
2 Program0001	L0009	Medicaid BHH	98000023 2/	29/1900	3/16/1	900	10	Yes, Medicaid					
4 Program0003	L0011	Medicaid BHH	98000024 2/	29/1900	3/18/1	900		Yes. Medicaid					

Step 2: Remove Filter to See Clients with Services

Once rows are deleted, return to the filter and select all codes. You now have a list of clients with services.

Past	e Sermat Painte	в <u>г</u> ц -	⊞ • <u>∆</u> • <u>∧</u> •		• •	Merge & Cer	iter -	\$ - %	• €.0	.00	Conditional Fo	rmat as Cell	^{Ir} 1	ete Format	V Fill *	Sort &	Find &		
*											Formatting * 1	lable * Styles *	_		Cicai	Filter *	Select *		
	Clipboard	G: P	ont G		Alignment		(Sr.)	NU	mper	19	Sty	les				Editing			^
J2	• 1	$\times \checkmark f_x$	Program0002																~
	J	K	L	М	N	0	Р		Q	R		S	Т	U	V	W	Х	Y	-
1	ProgramName *	ProgramCode 💌	InsuranceType 💌	Policy -	Insurance§ *	Insuran	AdmitD	ate 💌 D	ischar 👻	Totals	Se 👻 OtherMe	edicaidStatus	CPT	T Descrip *	StartDat *	EndDate *	Unit 💌	Service	× –
987										₽↓	Sort A to Z								
988										Z↓	Sort Z to A								
989											Sort by Color			>					
990											Charles Ethers For	- ICDTI		_					
991										**	<u>C</u> lear Filter Fro	in CP1							
992											Filter by Color			*					
993										~	Text <u>Filters</u>			F					
994											Search		\$						
995									2		Select 4	21D							
996									2		₩ H2027	(iii)		-					
997										- C	 H227A								
998											T1016								
999											T116C								
1000													~ /						
1001													3/						
1002																			
1003																			
1004										-		OK	Cancel						
1005												Un I	Curicer						

List of Waiver and Non-Waiver Clients

Step 1: In Excel, select all columns except for Client Last Name, Client First Name, MPI and Insurance

	ype.																		
	File Home	Insert	Page La	ayout Forr	nulas	Data	Review	View Devel	oper Q	7 Tell me what	you want to do							Sign in	P₄ Share
Pa	Ste Cut Copy + Ste Format F Clipboard	Painter E	alibri 8 I <u>U</u> -	• 11 •	A* A* • <u>A</u> •	= =		Wrap Text	Center र द्व	General \$ - % * Numbe	▼	onditional Format a rmatting + Table + Styles	s Cell Styles +	Insert Dele	ete Format	∑ AutoSu ↓ Fill *	Jm * A Z Sort Filte Editing	84 Find & er * Select *	
N	•	: ×	$\checkmark = f_x$	Policy															
	A	В	С	D			Е	F	G	н	1	J		К	L I		м	N	0
1	PROVIDER	TotalAdm	TotalUndu	Client_Last	Name	Client_F	irst_Name	Date_of_Birth	Gender	MPI	BCS_Client_I	D ProgramName	Progra	mCode	Insurance	Type	Policy	InsuranceSt	ai Insuranc
2	Your Agency	1318	378	LastName1		А		10/1/190	0 Female	00010001	435564	43 Program0001	L0009		Medicaid	BHH	98000023	2/29/190	0
3	Your Agency	1318	378	LastName1		Α		10/1/190	0 Female	00010001	435564	43 Program0002	L0010		Medicaid	BHH	98000023	2/29/190	0
4	Your Agency	1318	378	LastName2		В		10/1/190	0 Female	00010002	435584	43 Program0003	L0011		Medicaid	BHH	98000024	2/29/190	0
5	Your Agency	1318	378	LastName3		С		10/1/190	0 Female	00010003	435604	43 Program0004	L0012		Medicaid	BHH	98000025	2/29/190	0
6	Your Agency	1318	378	LastName3		С		10/1/190	0 Female	00010003	435604	43 Program0004	L0012		Medicaid	BHH	98000025	2/29/190	0
7	Your Agency	1318	378	LastName3		С		10/1/190	0 Female	00010003	435604	43 Program0004	L0012		Medicaid	BHH	98000025	2/29/190	0
8	Your Agency	1318	378	LastName3		с		10/1/190	0 Female	00010003	435604	43 Program0003	L0011		Medicaid	BHH	98000025	2/29/190	0
9	Your Agency	1318	378	LastName4		D		10/1/190	0 Female	00010004	435624	43 Program0001	L0009		Medicaid	BHH	98000026	2/29/190	0

Step 2: Delete highlighted columns.

- 1	File Hon	ne Insert	Page Li	ayout Formulas	Data Review	View Develo	per 🖗	Tell me what	you want to do.					Sign in	A Share
Pa	Cut		Calibri B I <u>U</u> ·	- 11 - A A	· = = = »·	Wrap Text	ienter +	General \$ ~ % *	*.0 00 Co	nditional Format as	Cell Insert De	elete Format	et et	* P & Find &	
	Спрво	1 🖻		Font	ra Ali	jnment	F 6	Numbe	r Fa	Styles	2	<u>D</u> elete Cells	liting		^
N	/11	×	√ f _×	Policy							Ð	Collete Sheet Rows			¥
		В	C	D	F	F	G	н	1	3		Delete Sheet <u>C</u> olumn	s M	N	0 1
1	PROVIDER	TotalAdm	TotalUnd	Client_Last_Name	Client_First_Name	Date_of_Birth	Gender	MPI	BCS_Client_I	D ProgramName	F ,ramCode	Delete Sheet	cy	InsuranceStar	Insuranc
2	Your Agenc	y 1318	378	LastName1	А	10/1/190	Female	00010001	4355644	3 Program0001	L 009	Medicaid BHH	98000023	2/29/1900	
3	Your Agenc	y 1318	378	LastName1	A	10/1/190	Female	00010001	4355644	13 Program0002	L0010	Medicaid BHH	98000023	2/29/1900	
4	Your Agenc	y 1318	378	LastName2	В	10/1/190	Female	00010002	4355844	13 Program0003	L0011	Medicaid BHH	98000024	2/29/1900	
5	Vour Agong	1210	270	LastNamo2	0	10/1/100	Eomalo	00010002	4256044	2 Program0004	10012	Modicaid RHH	99000025	2/20/1000	

Step 3: Select remaining columns.

F	file Home Ir	nsert Page Layout	Formulas Data	Review View	Developer 🤇	🖓 Tell me v	what you w	ant to							Sign in 💡
	Cut	Calibri • 1	1 • A A = =	<u></u>	p Text	General		*	≠			*	∑ AutoSum	· Žy 🏅	Q
Pa	ste 💉 Format Painter	B I <u>U</u> -	<u>◇</u> • <u>▲</u> • ≡ ≡	= 🖻 🖻 🗄 Mer	ge & Center ⇒	\$ - %	• €.0 .00	.00 •.0	Conditional Formatting *	Format as C Table + Sty	ell Inseri	Delete Forma	Clear 🕶	Sort & Fin Filter ∗ Sele	nd & ect ≠
	Clipboard	Fa Font	F _M	Alignment	Fai	Nu	mber	Fa		styles		Cells	E	diting	
A:	1 × E	× √ f _× Clie	ent_Last_Name												
1	A	В	C	D	E	F	G	н	- I	J	K	L	M N	0	Р
1	Client_Last_Name	Client_First_Name	MPI	InsuranceType	i i										
2	LastName1	A	00010001	Medicaid BHH											
3	LastName1	A	00010001	Medicaid BHH											
4	LastName2	В	00010002	Medicaid BHH											
5	LastName3	С	00010003	Medicaid BHH											
5	LastName3	С	00010003	Medicaid BHH											
7	LastName3	С	00010003	Medicaid BHH											

Step 4: Remove duplicates

Under the Data tab, choose remove duplicates. Make sure "My data has headers" is checked. Choose ok.

F	ile Home In	sert Page Layout	Formulas Data	Review View	Developer	¥ Tell r	ne what you v	ant to do								ign in 🗡	4 Share
	From Access From Web From Text Get External I	ner Existing Ne Connections Que	Bhow Queres From Wry + Co Res 1 Get & Transt	Refresh All + Connections	ons 2↓ 7	iort Filt	er Clear	ly Tex ced Colu	t to	ash Fill emove Dupli ata Validation Dat	cates n + 6 M	2		hat-If Forec lysis * She Forecast	ast et Ell Su	oup * ngroup * Jototal Dutline	and the second second
A2	1 * 1	× √ f _x Las	itName1														
	A	В	d and	D	E	F	G	н	I	J	ĸ	L	M	N	0	P	
1	Client_Last_Name	Client_First_Name	MPI	InsuranceType													
2	LastName1	A	0001000	1 Medicaid BHH													
3	LastName1	A	0001000	1 Medicaid BHH													
4	LastName2	В	0001000	2 Medicaid BHH													
5	LastName3	С	0001000	3 Medicaid BHH													
6	LastName3	с	0001000	3 Medicaid BHH													
7	LastName3	С	0001000	3 Medicaid BHH			-										
8	LastName3	С	Remove Duplicates			?	×	_									_
9	LastName4	D	To delete duplicate valu	ues select one or more c	olumns that c	ontain dunli	cates		-								
10	LastName5	E							,								
11	LastName6	F	Select All	Unselect All		y data has h	eaders)								
12	LastName7	G	-														
14	LastNamo7	G	Columns														
14	LastNamo7	G	Client_Last_Name		4		-										
16	LastName8	н	Client_First_Name														
17	LastName9	E.		4													
18	LastName9	ì	insurancerype														
19	LastName10	j.	-														
20	LastName10	1			-												
21	LastName10	J			OK	Ca	ancel										

Step 5: List of Clients with Waiver/Non-Waiver

F	File Home In	sert Page Layout	Formulas Data	Review View	Developer	♀ Tell me	e what you want	o do							Sign i	in 🔉 Shar
	From Access From Web From Text From Text	ner Existing Au * Connections Qui	Show Queries	Refresh All -	ions 21 Z 2 is Z Sort	Filter	Clear	Text t Colum	Flash Fi Remove ons S Data Va	Duplici	tes ¤∂Re • M	onsolidate elationships anage Data Model	What-If Analysis	Forecast • Sheet	Group Group Ungro	o - +∃ oup∃ tal
	Get External [Data	Get & Transform	Connections		Sort & F	Filter			Data	Tools		For	ecast	Outli	ine 🕠
	× :	× 🗸 🖍 La	stName1													
	A	В	С	D	E	F	G	н		j j	к	ι	и	N	0	p
1	Client_Last_Name	Client_First_Name	MPI	InsuranceType				10								
2	LastName1	A	00010001	Medicaid BHH												
3	LastName2	В	00010002	Medicaid BHH												
4	LastName3	с	00010003	Medicaid BHH												
5	LastName4	D	00010004	Medicaid BHH												
6	LastName5	E	00010005	Medicaid BHH						_						
7	LastName6	F	00010006	Medicaid Microsof	t Excel				>	<						
8	LastName7	G	00010007	Medicaid												
9	LastName8	Н	00010008	Medicaid 👔	927 duplicate v	alues foun	d and removed: 3	91 uniqu	e values remain							
10	LastName9	1	00010009	Medicaid												
11	LastName10	J	00010010	Medicaid			ОК									
12	LastName11	К	00010011	Medicaid BHH		_		12								
10	Lashblana at 0	1	00010012	Advantantial DUUL												